



Working Together to Build the EMS Community



National Registry of
Emergency Medical Technicians
2009 Annual Report



National Registry of
Emergency Medical Technicians®
THE NATIONS EMS CERTIFICATION™

2009 Focus: Working with the EMS Community to Meet Education Agenda Recommendations

Implementation of the *EMS Education Agenda for the Future: A Systems Approach* presented the National Registry of EMTs with many challenges in 2009. The consensus document, created under the leadership of important EMS community groups, has been discussed over the past ten years in EMS. Implementation at the national, state and local levels has proven to be complicated. None-the-less, efforts are ongoing, debates are taking place, progress is being made and results of these efforts are being seen. Stakeholders are gaining a better



understanding of the Education Agenda, and realistic implementation of its goals is being realized. The National Registry of EMTs has been listening to stakeholders, preparing for implementation and adjusting its processes to better serve licensing bodies and the public to assure competency of EMS providers. Many highlights of 2009 are centered around working with the national partners in EMS to implement the EMS Education Agenda.

In 2009 the NREMT hosted eight item writing meetings focused on developing draft items covering the new National EMS Education Standards. Committees met and developed new psychomotor (practical) examinations at the EMR, EMT and Advanced-EMT levels. A Psychomotor Competency Package was drafted that includes skill lab instruments, scenario lab instruments, clinical evaluation and field internship evaluation instruments. Pilot tests of the Psychomotor Package are occurring in eight Paramedic programs that are

utilizing these instruments in the classroom. The NREMT conducted its fourth Practice Analysis in 2009 and the Board approved a revised test plan at all levels commencing on September 1, 2010. Finally, key NREMT staff members assisted the State EMS Officials with a project reflecting a gap analysis comparing the current levels of EMS providers to the new levels outlined in the *National EMS Scope of Practice* model.

In 2009 the NREMT also completed a major enhancement to its website and added the capability to recertify online. Eight EMS systems participated in a pilot project and provided valuable input to computer programmers who developed and enhanced the online system based on their input. The Community Relations Department spread the word about the system and online recertification was launched in September of 2009. This new system has already received many enhancements and suggestions are being considered to further improve the system. It is expected that

online recertification enhancements will be a continuous process. Training officers and medical directors are enrolling themselves and their EMS agencies, and NREMT staff is helping to accomplish this goal. In addition, Community Relations added a great deal of useful content to the website.

The NREMT Research program continued to be productive in 2009. EMS Fellows completed academic requirements toward their PhDs. A full-time Research Director was hired and the NREMT Board's Research Committee established research priorities. A "ten year" summary report was submitted for publication covering data received in the Longitudinal EMT Attribute and Demographic Study (LEADS). The report will be provided to the EMS community in 2010. Associate Director Gregg Margolis,

PhD, was awarded and accepted the prestigious Robert Wood Johnson Health Care Policy Fellowship in Washington, DC. The NREMT Research program teamed up with the National Association of State EMS Officials (NASEMSO) and the Committee on Accreditation of the EMS Professions (CoAEMSP) on a comprehensive study of Paramedic Education Program Directors attitudes, knowledge and barriers regarding implementation of National Paramedic Education Program Accreditation in 2013.

A contract extension was negotiated with Pearson VUE and a Memorandum of Understanding was signed that will keep the NREMT fees the same through 2016. There will be some added charges to candidates who schedule their test via telephone rather than via the internet, and there will be an

added fee for cancellation of scheduled appointments which will take effect in 2012. The NREMT, states and registrants continue to experience high levels of satisfaction with computer based testing.

The NREMT accomplished many tasks in 2009. Over 132,000 EMS providers were tested; approximately 69,000 were recertified; and more than 599,000 callers were assisted. The NREMT remains committed to its part in implementation of the *EMS Education Agenda for the Future*, which includes presentation of legally defensible and psychometrically sound examinations, providing excellent customer service, and helping states and organizations make EMS a better place to work and provide care to our patients.

"The NREMT remains committed to its part in implementation of the *EMS Education Agenda for the Future*..."





Senior Leadership

Left to right: William E. Brown Jr., MS, RN, NREMT-P, Executive Director; Gregg S. Margolis, PhD, NREMT-P, Associate Director; Sherry A. Mason, Director of Information Systems; Robert L. Wagoner, BS, NREMT-P, Associate Director; Terry Markwood, MS Ed, NREMT-B, Certification Coordinator

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NREMT Executive Director Bill Brown Receives Lifetime Achievement Award

NREMT Executive Director Bill Brown, Jr. was awarded the 2009 Rocco V. Morando Lifetime Achievement Award at the EMS Expo in Atlanta, October 27, 2009.

Bill was completely surprised when he came to the stage during the awards ceremony, thinking he was presenting the award to someone else, and instead, received the award himself. The Lifetime Achievement Award in EMS is presented by the National Association of Emergency Medical Technicians (NAEMT) and sponsored by the National Registry of Emergency Medical Technicians (NREMT).

“Lifetime Achievement in EMS’ is a title that is truly appropriate to attach to the name of Bill Brown,” commented Immediate Past Chairman of the NREMT Board Jimm Murray. “He has spent a professional career in the service of EMS and patients, first in direct medical care and then in devising systems of training and testing that aid the public. This is a most fitting match of a title and a person.”

NAEMT President Patrick Moore told the audience at the awards ceremony that “Bill Brown is truly a visionary,” pointing out his heroic efforts as a Paramedic (PJ) in Viet Nam, assisting refugees from Hurricane Katrina, and shaping the NREMT.

NAEMT recognizes excellence in various areas of prehospital medical care with the presentation of individual and

organizational achievement awards on an annual basis. The awards honor America’s EMS practitioners and organizations that demonstrate exceptional leadership within the profession and outstanding commitment to prehospital medical care. The Rocco V. Morando Lifetime Achievement Award is named after Rocco V. Morando, a pioneer in EMS and the first recipient of the Lifetime Achievement Award. The award is considered the NAEMT’s most prestigious award.

“A long time ago in Viet Nam, I recognized my mission would be to continue the Paramedic mission—‘That Others May Live,’” Bill commented as he accepted the award. He said his purpose with the NREMT is about EMS provider competency and safety of the public, with a side goal of making EMS better.

In comments Bill later wrote in a forum to his staff, he said in part, “Perhaps I will never be able to say enough ‘thanks’ to so many people who have made my life so meaningful... The NREMT is what it is today because of the teamwork we accomplish with our stakeholders, Board Members and staff. We will all only be able to pass through life one time. For those of us who have chosen the mission to help others, both directly and indirectly, life has the flavor others will never know. It is not a ‘one-man’ mission, it is a team...”

Goal of Public Board Member is to Think Like The Consumer

An Interview with NREMT Board Member Renee Barrett, PhD

The NREMT Board of Directors has a seat reserved for a public member, sometimes called a lay or community representative. All certifying organizations accredited by the National Commission for Certifying Agencies (NCCA) require a public member be appointed to serve on a Board of Directors. This requirement is in response to public concerns that boards composed entirely of members of the profession are more attuned to the interests of their licensees than to those of the public. That is not to say that board members are not mindful of the public; rather the presence of a public member has been added because board members approach the board's business from different starting points.

My starting point as the public board member is to think like the consumer would and to ask the questions he or she would ask. I am tasked with always injecting a consumer point of view into the conversation of governance.

Because a public board member is not a member of EMS, the public can have greater confidence that board deliberations and decisions will reflect the interests of the entire public, not exclusively the interests of the profession. Public trust is fragile. Attention must be given to promptly addressing concerns less that trust is eroded.

A Harris Interactive Study (2004) looking at public attitudes, awareness, and knowledge found 66% of the American public were confident of receiving the best medical care in the event of a serious injury. As a public member, I ask why not 100%? Surely the EMS profession would like for the public to have total confidence they would receive the best care in the event of a medical emergency. This is a goal worthy of pursuing.

In 2006, the Institute of Medicine (IoM) Committee on the Future of Emergency Care in the United States took this goal to a whole new level by identifying systemic challenges that needed to be overcome, and proposed that the solution lies in creating a national network of regionalized, coordinated and accountable systems. Likewise, the National Scope of Practice (SOP) proposed a model of how EMS could accomplish a more coordinated national system. While the



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issues of fragmentation and lack of uniformity that have been raised in the IoM study and SOP are not necessarily apparent to the public, there is an expectation that in dialing 9-1-1, life-saving emergency care is minutes away. Therein lies the public's trust in EMS; it is founded on faith and confidence in the professionals who will save and protect them from further harm. Adoption of the National Scope of Practice by the larger EMS community will do much to address the gaps and raise the quality of EMS service.

The NREMT is responding to the IoM recommendations to provide greater uniformity to the certification of EMS providers and accreditation by integrating the new SOP levels (EMR, EMT, Advanced EMT and Paramedic) and setting January 1, 2013 as the date to implement National EMS Education Accreditation at the Paramedic level. Final details about Paramedic program accreditation should be announced by late 2010.

Ultimately, the public will be the beneficiary of these efforts underway. For a coordinated national EMS system is in the best interests of the public with respect to improving access, quality of care, and delivery of services.

Renee Barrett is Adjunct Professor, Child Development, at Palomar Community College, San Marcos, CA. Dr. Barrett is the Public Member of the NREMT Board of Directors. She was the Assistant Director of the EMSC National Resource Center and instrumental to developing the EMSC Partnership for Children-a successful collaboration of over 20 non-governmental organizations working to improve child health outcomes. She has also served as a consultant to U.S. Department of Health and Human Services, Bureau of Maternal Child Health, Emergency Medical Services for Children program conducting research on school health initiatives. Dr. Barrett also possesses broad knowledge and experience in public education having served as a school administrator, curriculum specialist and director of alternative programs.

NREMT Signs Memorandum of Understanding to Renew Contract with Pearson VUE, Computer Based Testing Provider

The NREMT negotiated to renew its contract with cognitive exam provider, Pearson VUE for an additional five years. The new contract will not take effect until 2012. Based on the Memorandum of Understanding (MoU), the NREMT currently projects no cost increase for CBT exams through 2016. The MoU calls for minimal costs on certain extraordinary services provided by Pearson VUE to the candidate, but these will not take effect until 2012 when the contract is renewed.

Pearson VUE was initially selected due to its ability to provide exam security, scheduling flexibility and test site locations. Pearson VUE delivers over 4 million high-stakes tests a year across the globe in the licensure, certification, academic admissions, regulatory, and government testing service markets. It possesses the world's leading test center network, with nearly 400 test centers for EMS in the United States. The NREMT is pleased to continue partnering with Pearson VUE in delivering exams that provide a fair and precise evaluation of a candidate's competency; rapid turnaround of test results; choices on when and where to take the exam; easy registration; and fortified exam security.

NREMT Associate Director Dr. Gregg Margolis is First EMS Professional to Participate in Robert Wood Johnson Health Policy Fellowship

In a historic year of discussion of the future of the United States health care system, the National Registry of EMTs had a unique opportunity to support EMS participation in the national health policy debate. NREMT Associate Director, Dr. Gregg Margolis, was the first EMS professional to be selected to participate in the prestigious Robert Wood Johnson Health Policy Fellowship. This one-year program is designed to provide mid-career health care professionals with an opportunity to gain first hand experience in the health policy and political process. The program includes an intense, three-month orientation in Washington DC, followed by a nine-month placement on Capitol Hill.

Dr. Margolis took a temporary leave of absence from his responsibilities at the NREMT to participate in the program, which began on September 1, 2009. "I am extremely grateful to the NREMT Board of Directors, Executive Director Bill Brown, and all of my colleagues at the NREMT who made it possible

for me to take advantage of this opportunity. EMS is profoundly affected by federal health policy, and we have been largely absent from the conversation. It is exciting to think that through the RWJF Health Policy Fellowship we may be more effective in participating in the process that shapes the future of our profession."

In January, Gregg began working in Senator John D. Rockefeller's (WV) office. Senator Rockefeller is the Chairman of the Health Subcommittee of the Senate Finance Committee as well as the Chairman of the Commerce, Science, and Transportation Committee. These roles, combined with his longstanding commitment to health care issues, provide an excellent opportunity for a broad health policy experience. "We are confident that Gregg's experience in Washington is going to have long term value for the entire EMS community," said Peter Glaeser, MD, Chairman of the NREMT Board of Directors.

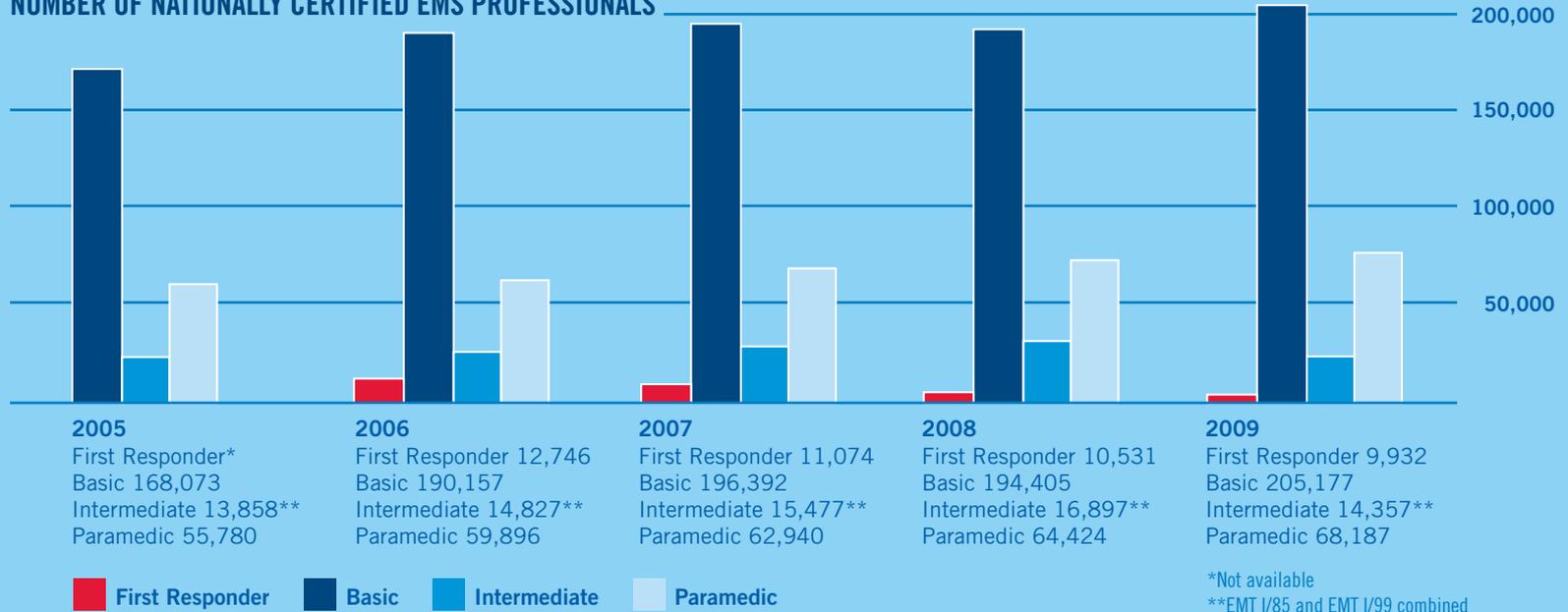
For more information go to <http://healthpolicyfellows.org>.



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5 Year National Certification Trends

NUMBER OF NATIONALLY CERTIFIED EMS PROFESSIONALS



FIRST TIME PASS RATE

	2005	2006	2007	2008	2009
First Responder	71%	65%	78%	76%	75%
EMT Basic	65%	71%	70%	68%	66%
EMT-I 85	61%	65%	70%	71%	69%
EMT-I 99	63%	59%	71%	72%	72%
Paramedic	64%	62%	63%	68%	71%

EXAMS PER YEAR

	2005	2006	2007	2008	2009
First Responder	6,761	7,307	4,053	4,335	4,261
EMT Basic	92,090	94,616	83,709	91,323	103,447
EMT-I 85	5,231	5,518	5,341	5,523	5,826
EMT-I 99	1,869	1,704	1,537	1,623	1,382
Paramedic	15,815	17,380	17,001	18,424	18,080
Total	121,766	126,525	111,641	121,228	132,996

Research Department Notes

2009 was a significant year for the NREMT research department, marked by the hiring of Greg Gibson, PhD, as the NREMT's full-time research director, and the research department's march toward completion of the ten-year LEADS final report. Data were also collected for the Knowledge, Attitudes, and Barrier study (KAB) regarding national accreditation, and the NREMT Practice Analysis. A number of peer-reviewed research articles were published in 2009 that addressed issues important to the EMS professional workforce:

- Do EMS providers think they should participate in disease prevention? Almost 83% of surveyed EMS professionals think they should participate in disease prevention. One third reported providing disease prevention programs. Just over half of the respondents agreed that preventative services should be provided during an emergency call, but only 8% reported providing disease prevention during an emergency call.
- Assessing continued cognitive competency among rural EMS professionals. Participants from two rural and contiguous states were administered a validated general knowledge EMT exam. 71% from state A and 55% from state B passed the NREMT-Basic cognitive examination. Higher education level and volunteer status

were significantly associated with first attempt pass rates for the NREMT-Basic examination.

- How much contact do EMS professionals have with their medical directors? A majority of respondents report contact with their medical director in one (or more) of three specific situations: (1) continuing education (2) personally meeting to discuss an EMS issue (3) at the scene of an EMS call. Additionally, urban EMS professionals and Paramedics (versus Basics) report more medical director contact.
- Factors influencing first attempt pass rates for EMT-Paramedics. Both the EMT-B NREMT exam score and length of EMT-B certification were significantly associated with first attempt success on the NREMT-Paramedic certification exam. These are important findings



that Paramedic educators may want to consider in the determination of program admission standards and in determining allocation of program resources.

- Quantifying health conditions and health indicators among EMS professionals. After determining an average BMI, just over a quarter of respondents were found to be obese and almost 29% have normal body weight. 17% percent of respondents are smokers and just over three-quarters did not meet the Center for Disease Control and Prevention's recommendation for physical activity. Respondents categorized as obese were more likely to report existing medical conditions, while participants meeting the recommendations for physical activity were less likely to report existing medical conditions.



“The accomplishment of national accreditation for Paramedic education will be significant to the improvement of patient care and transportation in this country. Requiring graduation from nationally accredited institutions, coupled with national certification, propels the EMS profession to its rightful place as a true allied health care profession.”

D. Randy Kuykendall, MLS, NREMT-P
Chairman of the Board, CoAEMSP
Chief of Emergency Medical and Trauma Services
Colorado Department of Public Health and Environment

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