Two major EMS organizations, the National Association of EMS Physicians and the National Association of State EMS Directors, have joined forces to establish a new not-for-profit organization called Advocates for EMS.

According to the organization’s press release, Advocates for EMS was founded to promote emergency medical services; to educate elected and appointed public officials and the public on issues of importance to EMS; to monitor and influence EMS legislation and regulatory activity; and to raise awareness among decision makers on issues of importance to EMS.

A priority for the organization is to determine the role and function of EMS in the Department of Homeland Security and to secure dedicated funding for the EMS infrastructure. Another current legislative priority is to ensure that EMS has a fair chance at the state level to receive a share of terrorism preparedness and response funding.

In the aftermath of the terrorist attacks of 2001, Advocates for EMS has already identified a number of areas to focus on in the areas of terrorism and catastrophe preparedness. The organization has estimated a total of nearly $462 million will be needed to address EMS needs in a number of areas.

The first of these needs falls under the heading of planning, coordination, infrastructure and mutual aid to ensure an adequate level of preparedness at local, state and national levels. Advocates for EMS estimates a total of $58 million will be needed to accomplish this, with $500,000 to be allocated to each state and U.S. territory.

Because EMS personnel shortfalls are a chronic problem throughout the country, workforce development is another area of need identified by Advocates for EMS. This would involve a national effort to promote EMS as a career, and to address the issues of recruitment and retention. A total of $52.4 million would be needed, including provision of $5,000 scholarships for 10,000 qualified individuals enrolling in EMS training; $25,000 for each state and territory to implement statewide recruitment and retention programs; and $1 million to the National Highway Traffic Safety Administration to coordinate and distribute materials for a national EMS recruitment and retention program.

Following the terrorist attacks of 2001, it became clear that most EMTs have little or no formal training to respond to such acts. As a result, Advocates for EMS has included terrorism preparedness training as an area of focus, with the development and implementation of standardized training.

If you are interested, send a cover letter expressing your interest and a resume/vitae to:
Board Nominations, National Registry of EMTs, P.O. Box 29233, Columbus, OH, 43229. Letters must be submitted by April 15, 2003.
Since 1999 the NREMT has been compiling a data bank of information on EMTs at all levels through the longitudinal EMT attributes demographics study (LEADS) project. Now this data is being made available for other legitimate researchers studying EMS-related issues.

“We have posted our data use policy on the NREMT web site, detailing how requests can be made for the data,” Phil Dickison, NREMT associate director, said. “The information would be useful to researchers in the field of EMS, healthcare management, public health, or related disciplines interested in current EMS practice and the future of EMS. Each request will be evaluated on a case-by-case basis.”

Each year the LEADS core questions are administered to a random sample of EMTs drawn from the NREMT’s data bank. Once selected for the project, the same respondents receive the questionnaire each year throughout their careers, or until they opt not to participate. Each year a sample of first-time registrants is drawn. In this way, the survey is able to track participants throughout their careers, while continuing to obtain information on newly registered EMTs.

In addition to a core group of 44 questions that are administered each year, there are also 18 questions on a specific issue. This “snap shot” topic varies from year to year and is based on input from the EMS community.

“Anyone interested in participating in the development of a snap shot survey can contact the NREMT, or visit our web site at www.nremt.org and select the link to LEADS,” Dickison added.
NREMT

Board continues to work toward meeting strategic initiatives

The NREMT Board of Directors has been working on a long-range strategic plan since the fall of 2000. Understanding the NREMT’s current mission, values, customers, products and services, assets and barriers enabled the board to identify strategic directions to be addressed over a five-year period. Following is a summary of the priority strategic directions for 2003.

The highest priority of the NREMT continues to be the goal of becoming the national EMT certification agency. For 2003, a set of recommendations will be made to the NREMT Executive Committee and, ultimately, to the Board of Directors based on the outcome of a survey of state EMS directors.

Another priority for 2003 is the continued enhancement and use of computer technology for testing and accessing data. Working toward this end, the NREMT expects to complete all phases of the Registry’s web site development in 2003 and disseminate information about these improvements to NREMT customers (see related article on the improvements in the NREMT web site).

One other priority is the continued function and planned enhancements to the NREMT administration and operations. Specifically for 2003, the Registry plans to add items to the EMT-Paramedic item bank.

Also for 2003, the NREMT plans to develop a research program to evaluate the validity of the NREMT registration and re-registration process, and to contribute to the EMS community.

The NREMT also plans to develop procedures for the use of its resources to foster other EMS research.

The NREMT plans to develop and implement a community relations program by the end of the year. Following an EMT customer needs and perceptions survey and considering community relations options and appropriateness for the NREMT. The Community Relations Committee will meet at least three times during the year and present a summary report to the NREMT Board of Directors in November.

A final strategic direction for 2003 is to explore the feasibility and appropriateness of alternative modalities for administering NREMT examinations, including computer adaptive testing. The Standards and Examination Committee will present a summary report to the Board of Directors in November.

course content. In addition, follow-up exercises would also be required to allow personnel to practice their skills, to test preparedness, and to identify areas of improvement. The estimated budget is $85 million.

A formal three-to-four-hour course on medical response to terrorism, developed by the NAEMSP and others, is currently available for download at the NAEMSP web site at www.naemsp.org. Designed to provide EMIs with the basic information necessary to respond to terrorism, the course covers hazard surveillance and detection and incident response and management.

Personal protective equipment needed for terrorist response is often different from the standard equipment for fire fighting or hazardous materials response. Advocates for EMS has identified the need for funding for relevant personal protection equipment needed for terrorism response. A budget of $28 million has been proposed for this purpose.

With the growing threat of biological or chemical attack, antidotes and appropriate medications must be readily available for EMS providers at the time of the initial response. A total of $14 million is needed to stock ambulances and emergency vehicles.

The EMS data available at the regional and state level is incomplete in more than 90 percent of the states. Data is a vital component of a coordinated EMS response and surveillance system. Because of this need, a budget of $84 million has been identified to ensure all states have a complete database.

Integration of trauma systems and EMS is a critical link to a systematic approach to domestic terrorism preparedness. Recognizing this fact, Advocates for EMS has identified the need for funding to create the necessary infrastructure for coordination, data collection and implementation of a trauma care system within the states, and on an interstate level as necessary. This would require $112 million.

Communication is essential to coordination of EMS response. Standard telephone, cellular telephone and other routine communications systems can be overwhelmed following a disaster or terrorist attack. In addition, the general communications infrastructure for EMS and public safety is aging. To complete a state-by-state assessment and purchase mobile command suites would require a budget of $40.5 million.

One other area of focus is medical direction, recognizing that emergency medical directors are an essential component of EMS systems. Because most states currently have little or no funding for a state EMS medical director, Advocates for EMS estimates a total of $17.9 million will be needed to accomplish this, with $250,000 for each state and territory to support a state EMS medical director, and $150,000 for 25 states to support regional medical direction activities.

These areas of concern represent issues that were identified largely as a result of the EMS experience following the terrorist attacks of 2001. Obviously, there would be many future needs to be addressed that have yet to be identified. Identifying these needs and raising awareness and funding will be the ongoing mission of Advocates for EMS.

“We will invite other national organizations to join, and we will work together to promote the interests of EMS,” Dr. Robert Bass, Maryland State EMS director, NAEMSP president and treasurer of Advocates for EMS, said. “This is not the first time a national coalition for EMS has been established. It is, however, the first time The NAEMSP and NASEMSD have joined together to provide the leadership for such an initiative.”

Contributions can be made to Advocates for EMS by sending a check to: Advocates for EMS, P.O. Box 15945-281, Lenexa, KS 66285-5945. Advocates for EMS has a special member rate for EMTs of $20.00 and other individual member rate of $50. Corporate and not-for-profit membership levels are also available. To find out more about membership and the initiatives of Advocates for EMS, go to the NAEMSP web site at www.naemsp.org or call 913/492-5858.
Development of a more interactive and user-friendly National Registry web site is moving ahead. As of January, seven of the nine phases of the project, referred to as WebEMT, were completed, with the two remaining enhancements to be finished by early spring.

“Our web site is a valuable resource for registrants and anyone affiliated with the National Registry,” Bill Brown, NREMT executive director, said. “With the interactive enhancements, users can obtain a great deal of information and find the answers to most of the questions that would have required a phone call in the past.”

The web site represents the culmination of a comprehensive review of the NREMT’s information technology capabilities and the ongoing needs of registrants at all levels. It required a significant investment of time and finances, Brown added.

The enhancements to the NREMT web site were completed in a series of nine phases over 18 months, the first of which was to upgrade the visual design of the web site. Included in this phase was the addition of expanded content which was developed by the NREMT staff, in conjunction with public relations and marketing personnel.

The second phase of the project focused on the creation and deployment of the web authentication, profiling and personalization system, as required by the WebEMT customer service site.

In phase 3, the examination scheduling and management application was developed. This was one of the key enhancements, making it possible for enhanced customer service to be provided through the web site.

Additional services were made available in phase 4. At this stage a web storefront was created to enable the purchase of NREMT accessory products, including patches, pins, decals and sample tests, over the web. Previously, these items were only available by mail order.

Although not a part of the web site itself, phase 5 involved enhancements of the NREMT’s computer imaging system. This has made it possible to perform OCR/ICR scanning (data capture) of hardcopy National Registry applications and re-registration forms, turning them into digitally stored files.

Phase 6 involved the development of EMT data search, display and update capabilities. These capabilities provide current registration information on EMTs at the customer service portion of the web site.

In phase 7, a set of “intelligent” web site forms were created. These forms enable the collection and validation of EMT candidate applications or EMT re-registration information, and produce a printable file and electronic data to be submitted/transmitted to the NREMT.

Phases 8 and 9 will be completed by May. Phase 8 involves the creation of electronic direct-mail management services. This will make it possible for the NREMT to conduct e-mail campaigns to registered EMTs and to notify them of re-registration deadlines, milestones and activities.

In the ninth and final phase, web services to enable the secure publishing of EMT summary information will be developed. These services will be integrated with the NREMT STARS© (Scheduling, Testing And Registration System), a proprietary copyrighted custom NREMT database. These enhancements will make it possible for state EMS offices and educators to obtain information on their EMTs and candidates.

“We are very excited about the increased level of service we are now able to provide,” Brown added. “This interactive web site represents our commitment to continue to offer registrants the best and most efficient services possible.”
candidate’s examination and completed application, including fees and supporting documentation.

“While many factors can have a negative effect on turn-around time, including the choice of mail carrier, delays in submitting the examination materials, or failing to meet state licensing requirements,” Dickison added, “the single most common reason for delays in receiving examination results is incomplete or outdated information on applications.”

Ideally, when a First Responder or EMT-Basic examination is shipped to the NREMT, the application, fee and supporting documents are included with the shipment. If the application is incomplete, it is returned to the candidate for correction, and the examination is placed in a “hold” status until the corrected application is returned to the NREMT. This process can cause the candidate to wait several more days or weeks to receive examination results, depending on how quickly the corrected application is received by the NREMT.

Another situation that creates delays is the failure of the candidate to submit an application. Advanced level candidates are required to submit their applications a minimum of three weeks prior to the examination. Once the examination arrives at the NREMT, the applications are matched to the appropriate answer sheets and processed. If the candidate has not previously submitted an application, his/her examination is placed in a “hold” status until a completed and acceptable application arrives at the NREMT. As in the earlier example, this can add days or weeks to the turn-around time.

The failure of advanced level candidates to submit an acceptable application a minimum of three weeks prior to the examination is becoming an increasing concern to the NREMT, according to Dickison. It not only causes a substantial increase in the turn-around time to process examination results, it is a violation of the published policies and procedures of the NREMT.

“There is a common misconception that, once we receive a corrected application at the NREMT, it is moved to the top of the stack and processed the day it arrives in the office,” Dickison explained. “This does not happen, nor would it be fair. Applications are processed on a first-come, first-served basis, and it is important to remember we cannot even begin processing examination results until all materials are received.

“The best advice I can give to a candidate to ensure a speedy turn-around time is to review carefully the checklist of required items printed on the reverse side of the National Registry application,” Dickison added. “If candidates would take care to adhere to these requirements, the number of rejected applications could be reduced by up to 90 percent.”

Training officers can also help with this quality assurance process by personally reviewing with each new applicant the entry requirements listed in NREMT brochures and on the NREMT web site. In addition, the training officer should use the application checklist to review each application for completeness and accuracy.

In an attempt to help with the application process, the NREMT will soon allow individuals to complete an application at our web site (see a related article on NREMT web site enhancements in this issue). While the application will still have to be printed out, signed by the applicant and mailed to the NREMT, Dickison added, we believe this will allow easy access to the applications and help reduce the number of applications that are submitted with missing information.

“I think we all share a common goal,” Dickison said. “We all want a quick turn-around of examination results so that competent emergency medical providers can deliver prompt care to the sick and injured in their communities. Candidates and their training officers can help by carefully reviewing the applications to ensure only completed applications are sent to the NREMT.”

One of the requirements for EMT-Paramedic re-registration is completion of an ACLS refresher, current as of the March 31 re-registration deadline. Although the refresher must meet the guidelines established by the American Heart Association, the requirement does not mandate that only one specific course be completed.

“In recent years several entities have developed and offered ACLS courses that meet the required AHA content and skills,” Rob Wagoner, NREMT associate director, explained. “It is not the intent of the NREMT to mandate one specific course through one specific provider. The only requirement is that the course meet the AHA guidelines for ACLS.”

In addition, these other proprietary courses would have to be recognized and approved by the candidate’s state EMS office or the Continuing Education Board for EMS (CECBEMS), he added.

Some departments offer their own in-house ACLS training. These programs are acceptable for NREMT registration as long as they are approved by the department medical director, meet the AHA guidelines for ACLS, and are recognized by the state EMS office, Wagoner said.

“In these cases, where no card or certificate is issued, an official letter from the person who conducted the course must be submitted, listing the names of those who have successfully demonstrated acceptable competence over the knowledge and skills of ACLS in accordance with AHA guidelines,” Wagoner added.
**Emblems**

**FR-96**
This emblem is available to Registered First Responders.

**N-90**
This emblem is issued to all Registered EMT-Basics.

**NS-94**
Scotchlite™ Reflective Emblem
This safety emblem is optionally available and will greatly enhance nighttime visibility of the NREMT.

**NI-81**
This emblem is issued to all Registrants in the EMT-Intermediate classification.

**MP-78**
This emblem is issued to all Registrants in the EMT-Paramedic classification.

**N-90-M**
This subdued emblem is issued to Registered EMT-Basics serving in the military.

**Lapel Pins**
with clutch back, enameled

**Decal**
3.5" diameter 2-way decal
Use on medical kits, hard hats, bumpers, or windshields.

**Tie Bar**
with clasp, gold plated

**Item** | **Qty** | **Cost (each)** | **Amount**
--- | --- | --- | ---
FR-96 | 1.50 | 1.50 | 1.50
N-90 | 2.00 | 2.00 | 2.00
NS-94 | 3.50 | 3.50 | 3.50
MP-78 | 3.00 | 3.00 | 3.00
NI-81 | 2.50 | 2.50 | 2.50
N-90-M | 2.50 | 2.50 | 2.50
Lapel Pin/EMT | | 2.50 | 2.50
Lapel Pin/Paramedic | | 4.00 | 4.00
Tie Bar | | 2.50 | 2.50
Decal/EMT | | 1.00 | 1.00
Decal/Paramedic | | 1.50 | 1.50

Only fully registered EMTs (not provisional) may order above items. Maximum of 15 items can be ordered by an individual EMT at a time.

Poster 2000 | 15.00 | 15.00
CD-ROM | 30.00 | 30.00

**TOTAL**

Send check or money order to:
NREMT, P.O. Box 29233, Columbus, Ohio 43229

Reg. No.
Name (last, first, m.i.)
Address
City State Zip

Please write your registry number on your check.