

City of Frankfort

FIRE & EMERGENCY
MEDICAL SERVICES

DISASTER & EMERGENCY
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July 17, 2019

Interim Joint Committee on Local Government
702 Capital Ave.
Frankfort, KY 40601

Dear Members,

There are many challenges I face as a Fire Chief charged with managing a fire-based Emergency Medical Service (EMS) organization. While many, there remains one significant challenge that is currently affecting nearly every community in our Commonwealth – the shortage of paramedics. Paramedicine remains a vital component in today's integrated healthcare system and a level of service that every citizen has grown to expect. Our department fears if conditions do not change, the city, nor Kentucky, will be able to offer these services due to a lack of needed paramedic educational infrastructures. This lack of required paramedicine educational infrastructures is creating extreme challenges in municipal organization's ability to maintain adequate staffing levels.

Currently, the state of Kentucky has eight fully accredited programs and five programs operating under a letter of review. Of these programs, nine are within a college, three within local governments, and one is private. As an operator of one of these local government programs, our program has grave concern for Kentucky's ability to maintain these programs in the future; especially with the emerging trends and other regulatory discussions currently being held. Of most significant interest from these emerging trends and other regulatory talks is the potential of regulations requiring a degree to graduate from a paramedic program by 2025. The Kentucky Board of EMS (KBEMS) tabled a motion that would have mandated an amendment to 202 KAR 7:601 mandating an Associate Degree as a Pre-Requisite for Paramedic Certification at its September 20, 2018 meeting. However, there remains significant concern this will occur as a result of potential changes at NREMT - the sole certifying exam site for Kentucky. Implemented at any level, this change, aimed at placing upward pressure on wages, will result in the closure of several paramedic programs and fewer paramedics. The National Association of State EMS Officials is noted in a draft position paper to support these assumptions. "From an economic standpoint, it is almost certain that degree requirements will restrict the supply of available paramedics to some extent." And "increased labor costs will likely drive the need for more revenue from third-party payers or local governments." These alone will result in increased

financial burdens to already struggling municipalities across the Commonwealth. By no means is secondary education being discouraged. Instead, our department suggests it be on the back end once the ability to function as an advanced practitioner has been granted.

Furthermore, as an authorized Paramedic Education Institute, we have invested significant funding into receiving authorization to conduct our paramedic program. This authorization has led our ability to train internal and regional working EMS professionals efficiently, cost-effectively, and on schedules that meet the needs of the organizations of which they work. We must remember, paramedic students continue to be unique learners that require non-traditional learning domains. Without our paramedic program, our department, along with our regional partners, would become so dependent on college academic calendars that participation would be extremely challenging and a prohibiting factor. This scheduling, coupled with soaring cost, will result in an assessment of sustainability and a potential decision to reduce service.

While pre-degree testing requirements pose a significant concern, there are other considerations which create barriers for EMS personnel seeking paramedic education. In a KBEMS survey, 1,970 current EMT-Basic and EMT-Advanced providers were asked what their barriers were when considering seeking paramedic education. Of eight potential answers, the top three factors were scheduling conflicts, time commitment/length of service, and lack of financial aid availability; respectively. These were of no surprise as our regional partners had all identified similar concerns during the development and design of our program here at Frankfort Fire and EMS. Despite calls for change, there remains a high demand for paramedic programs to be conducive to non-traditional working EMS professionals and for programs that do not utilize the typical college academic calendars. We further need programs that are cost-efficient to students or municipalities.

With the barriers identified, what can KBEMS or Legislators do to assist local governments? First, amend Administrative Regulations to ease regulations on educator requirements. This change will allow Training and Education Institutes (TEI) more accessible paths for qualified personnel to become instructors. Due to the limited number of educational institutes and difficulties required in obtaining instructor credentials; qualified instructors are not readily available in some areas of the state. Primarily, the restriction that a paramedic instructor must be monitored by a Program Coordinator that has served three Programs. This is nearly impossible to meet due to the turnover of Program Directors and the length of the program. We recently turned down two requesting candidates as we already are monitoring three.

Second, identify how workforce development funds can be secured and used for the paramedic profession, to include use at any authorized training institute licensed under the KBEMS. These funds could be used to assist municipalities in sending more students to paramedic programs. And, by opening to locations other than secondary education/vocational schools students could enroll at programs offered by local governments.

Third, conduct thorough research into Kentucky's specific problems with paramedicine. Data must include the effects of degree mandates on staffing and budgets, the number of active paramedic students enrolled in programs, future demands, annual growth of newly licensed paramedics, etc. We lack accurate, quantifiable data of how paramedic accreditation and other pending requirements have impacted or will impact our Commonwealth.

Fourth, provide funding, through KBEMS, to a non-profit organization that operates regional asset paramedic programs. In the event workforce development funds cannot be secured; additional funding from KBEMS would help off-set cost incurred by local governments. As a local government agency that embarked on paramedic education out of necessity to maintain local and surrounding community's paramedic levels, this requires significant funding beyond normal operations. Providing funding to assist local governments could increase government programs to aid in the efficient, cost-effective, and timely paramedic programs.

Lastly, KBEMS must consider a dual certificate model of licensing advanced level practitioners. This dual licensing model must be implemented until there is a sufficient educational infrastructure in place to meet current and future paramedic demands. Kentucky has already fallen behind in producing needed practitioners and will continue to see numbers dwindle as most educational institutes are struggling to enroll and retain students. KBEMS must research to see if NREMT remains the best option for the communities in Kentucky.

In closing, there is no single cure that will change our current situation. However, we can no longer sit idly by as though local municipalities are not struggling. We cannot wait or expect others to fix shortcomings with little to no validated, Kentucky specific data to drive robust discussions. We must unite as stewards of our communities to have difficult talks on our current struggles and identify alternative solutions that work for Kentucky; including those which may be unpopular.

Regards,

A handwritten signature in cursive script, appearing to read "Wayne Briscoe".

Wayne Briscoe
Fire Chief