NAEMT Comment to NREMT22-Resolution-13

NAEMT appreciates the opportunity to comment on NREMT22-Resolution-13.

One of our association’s core values is our belief that the EMS profession must be supported by education and certification systems that produce well-trained, resilient professionals qualified to provide the patient care demanded of their positions. We also believe that accreditation of the education programs that prepare EMS professionals can help assess the quality of institutions and their programs and services by measuring them against agreed-upon standards to ensure that they meet those standards. NAEMT supports accreditation of paramedic programs to verify that institutions are appropriately preparing competent, entry-level paramedics for employment in the EMS profession.

However, we have been disappointed with the outcomes to date of CAAHEP accreditation of paramedic education programs.

1. Since 2013, according to data published by NREMT, the first-time pass rate of candidates taking the NREMT paramedic certification exam has remained flat. This is particularly disappointing, since one of the key goals of accreditation is the improvement of the educational process to prepare students for the EMS profession. Unfortunately, CoAEMSP has not published any evidence of the impact of the CAAHEP accreditation on the quantity and quality of paramedics entering the workforce. Key metrics important to education institutions and employers should be identified and measured.

2. CAAHEP accreditation is very expensive. The expenses associated with accreditation, including all of the fees, as well as the cost of the staff needed to manage the accreditation process and maintain accreditation seem to have been passed on to students. The average cost to attend a paramedic program in the U.S. now ranges between $8,000 and $13,000, and can be as high as $15,000, making it economically out of reach for most EMTs. We believe that the dramatic increase in the cost of paramedic education has reduced the number of students enrolling in these programs, exacerbating the crisis-level paramedic shortage.

3. Not only is paramedic education expensive, in many areas it is not accessible. The required affiliation with schools of post-secondary education has changed the educational structure to a semester model that most working EMTs are unable to attend. They cannot get relief from duty to attend class because employers cannot backfill vacancies on ambulance crews.

4. The *EMS Education Agenda for the Future: A Systems Approach* called for “a single National EMS Education Program Accreditation agency.” We do not know the reason why the agenda called for the establishment of a single paramedic program accreditation, but this declaration led the way to NREMT requiring all paramedics who sit for its certification exam to have graduated from a paramedic program accredited by CAAHEP. In effect, this created a monopoly for CAAHEP. We believe that the effect of a single accrediting agency has not benefited the students, the educational institutions, or the EMS profession. Many other types of post-secondary healthcare education systems that lead to professional certifications recognize
multiple accrediting bodies, including nursing and emergency dispatch: Nursing School Accreditation || RegisteredNursing.org; https://www.apcointl.org/services/agency-training-program-certification/ https://www.emergencydispatch.org/what-we-do/accreditation

The current EMS workforce shortage in the United States has reached a critical juncture, and while employee retention and competition with other healthcare sectors are factors, we believe that the restriction of the National Registry Paramedic exam to only graduates of CAAHEP accredited programs has contributed to the workforce shortage.

NAEMT recognizes that there are costs associated with accreditation from any accrediting agency, but we believe that having more than one option for accreditation would create more competitive pricing opportunities for paramedic program accreditation. We also recognize that the current economic model for EMS makes it difficult for many EMS agencies to sufficiently compensate their workforce, diminishing the incentive to advance their training level. We believe that the current financial limitations of our nation’s EMS system must be taken into account when considering paramedic program accreditation.

Although NAEMT supports greater accreditation options for paramedic education programs, we do not support the option for states to approve these programs absent accreditation from a recognized accrediting agency. This solution seems extreme and contradicts the support for accreditation held by the majority of EMS stakeholders. We would suggest that state EMS offices be given the option of selecting the accreditation agency(s) they wish to use for accreditation of paramedic programs in their states, and that NREMT allow students who have graduated from a regionally or nationally accredited paramedic program (not just a CAAHEP accredited paramedic program) to sit for the paramedic exam.

Submitted by the NAEMT Board of Directors
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