January 7<sup>th</sup>, 2025

Senate Workforce Development Committee 600 East Boulevard Avenue Bismarck, ND 58505

RE: Support for SB 2100

Chairman Wobbema & Committee Members,

My name is Corey Johnson, and I am a licensed EMS Instructor Coordinator by the Department of Health and Human Services' EMS Unit. I also serve as the Assistant Fire Chief for the City of Williston Fire Department. I submit this letter in support of SB 2100 as my personal testimony and as a supplement to my organization's submission.

In April of 2024, new administrative rules were enacted for the HHS Department that eliminated the ability of licensed EMS instructor coordinators to conduct initial entry certification courses independently. The rule change requires that licensed training institutes manage all initial entry certification courses. This rule change has ultimately resulted in regionalizing training programs throughout the state. Although this can have many benefits associated with it, there has been no implementation plan to see it through effectively. The primary reason provided by HHS for this significant change was to add a layer of oversight to initial entry programs and to increase the quality of education being provided that their department was unable to perform. The North Dakota EMS Association also identified this problem in their strategic plan entitled "Vision 2025."

"EMS Vision 2025 - Goal 3: By 2025, EMS Stakeholders will improve the quality of EMS education and maximize available education opportunities."

"Objective 1: Support standardization and increased quality of education."

"Strategy 1: Develop a training affiliation model for EMS instructors."

As a result, the EMS Unit implemented a rule requiring EMS Instructor Coordinators to affiliate with EMS Training Institutes. The portion not addressed is the "affiliation model." Implementing this rule without a comprehensive plan results in fewer certification pathways, particularly in our rural communities. Year after year, our rural EMS services continue to suffer. The two primary issues that continue to be challenging are staffing and money. Without this legislation, the implemented administrative rule will undoubtedly negatively impact both. Rural services have lost their ability to recruit and train locally. Their only option is to seek out regionalized training opportunities that come with a substantial financial impact. The current EMS training grant administered by HHS covers the registration cost of some programs but not the added expenses. For example, since implementing this rule, a small rural department in Williams County has been sending their prospective recruits to programs in Jamestown. This requires students to travel across the entire

state multiple times to complete skills and clinical training requirements. For primarily volunteer agencies, this impacts their work and family life. It also adds to the cost by now requiring fuel, lodging, and meal expenses. These logistical and financial challenges greatly limit the amount of people services can afford to send to training. Services that could hold local classes of 6 or more recruits and now faced with picking one or two candidates.

Regionalized training and certifications are standard in other states but are implemented differently. Several states administer similar programs through regional EMS councils that are provided funding to implement these programs through their designated territories. Another model is capitalizing on existing community college and university systems to deliver outreach education programs focused on public safety.

It is also important to understand that SB 2100 only relates to Emergency Medical Responder [EMR] and Emergency Medical Technician [EMT] training for Basic Life Support [BLS] providers. These two training programs are the beginning of EMS training. Providers going on to more advanced certifications, such as Paramedics, must conduct their training through a nationally accredited agency and are not impacted by this. All of our rural services have been impacted by training institute requirements. Most cities in North Dakota operate at the Advanced Life Support [ALS] level with Paramedics.

By passing this legislation, the EMS Unit will have the opportunity to develop a comprehensive plan to address the issue of supporting standardization and increasing the quality of EMS education. I ask for your support in recommending SB 2100 as a "do pass" recommendation to the Senate floor.

Thank you for considering this matter.

Sincerely,

Corey A. Johnson, B.S.