



**Paramedic Licensure & Military Spouse/Domestic
Partner License Provisions Rule Advisory Committee
June 6, 2023
9:00 a.m. – 12:00 p.m.**

RAC MEMBER ATTENDEES	
Alicia Bond – via Zoom	State EMS Committee Member, Medical Director for EMS agencies in Jackson County and Rogue Comm. College
Bruce Cheeseman – via Zoom	Paramedic-La Grande Oregon
Dan Brattain – In person	CAL-ORE Life Flight; OSAA President
Darrek Mullins – via Zoom	Lane Community College Clinical Coordinator; Captain, Firefighter, Critical Care Paramedic Western Lane Fire & EMS Authority
Derek Clevenger – via Zoom	Retired US Army Master Sergeant; PALS ACLS Instructor for Cascade Training Centers; former Mayor of Aumsville
Drew Norris – In person	Bend Fire and Rescue
Eric Swanson – In person	State EMS Committee; Adventist Health Tillamook President
Frank Ehrmantraut – via Zoom	Polk County Fire District EMS Chief
Jeff Mathia – via Zoom	Pacific West Ambulance General Manager and Paramedic
Gregg Lander – In person	Chemeketa Community College Program Director, Paramedic
Heather Land – In person	Treasure Valley Paramedics
Jason Jantzi – via Zoom	Special Districts Association of Oregon; Risk Management Consultant for public safety entities
Jeffrey Dana – In person	Paramedic, RN-Retired from Gresham Fire; Currently working at Cascade Locks
Jerry Cole – via Zoom	Columbia River Fire & Rescue EMS Chief; Columbia County Transporting Agency
Jody Caprino	Paramedic; Teamsters Local 223
Marcus Allen – via Zoom	Mercy Flights Growth Innovations Manager
Michelle Claussen – via Zoom	State EMS Committee; Mt. Hood Community College EMS Program Manager; Paramedic
Rob McDonald – In person	American Medical Response (AMR) Operations Manager
Ron Morgan – In person	Oregon State Fire Fighters Council (OSFFC) District VP; Paramedic Tualatin Valley Fire & Rescue
Rusty Riis – via Zoom	Rogue Community College Chair and Clinical Coordinator for Jackson and Josephine Counties
Sabrina Ballew – via Zoom	Mobile Integrated Health (MIH) Coalition Chair; Paramedic; Community Paramedic; MIH Manager Mercy Flights
Sabrina Riggs – In person	Oregon State Ambulance Association (OSAA)
Scott Spaulding – via Zoom	Confederated Tribes of Warm Springs Fire Chief
Tiffany Peterson – via Zoom	State EMS Committee; Wy'East Fire District; EMT-Intermediate
Tom Strecker – In person	Medix Ambulance General Manager; Paramedic

Other Interested Parties	
Austin DePaulo – In person	Public
Dick Whipple – via Zoom	Public
Karl Koenig – via Zoom	Public
Matt Black – via Zoom	Public
Max Randall – In person	Public
Sydney Fitzgibbons – via Zoom	Public
Oregon Health Authority Staff	
Amani Atallah	Public Health Division, EMS Program
Dana Selover	Public Health Division, Health Care Regulation & Quality Improvement
David Lehrfeld	Public Health Division, EMS Program
Justin Hardwick	Public Health Division, EMS Program
Leslie Huntington	Public Health Division, EMS Program
Mellony Bernal	Public Health Division, Health Care Regulation & Quality Improvement
Rebecca Long	Public Health Division, EMS Program

Welcome, Housekeeping and Agenda Review
<p>Mellony Bernal introduced self and welcomed attendees to the Rule Advisory Committee the purpose of which is to review rules relating to paramedic licensure & licensing provisions for a military spouse or domestic partner.</p> <p>Instructions for RAC members participation in the meeting were reviewed as well as information for public attendees.</p> <ul style="list-style-type: none"> • It was noted that the RAC meeting will be recorded and all correspondence in the Chat is subject to disclosure and may be released in a public records request. • RAC members participating by Zoom were instructed to type the word "Comment" in the Chat to indicate they want to speak to a particular issue or ask questions. These persons will be called upon by staff. RAC members not wanting to speak but wishing to share information for consideration were asked to type into the Chat "For Your Information" or "For the Record" and type the information they wanted to share for consideration. • Members of the public were reminded that the RAC is not a public meeting and therefore not subject to the public meeting's law. Members of the public may attend but may not participate or offer public comment. It was noted that the public may provide comments or information to mellony.c.bernal@oha.oregon.gov at the conclusion of the meeting who will share with staff. • It was further noted that after the RAC process has concluded, there will be an opportunity to provide oral public comments at a public hearing or to send written public comments during the public comment period. Information about the notice of proposed rulemaking and public hearing will be shared by email. All EMS providers, licensed ambulance service agencies, registered non-transport agencies, community colleges, persons that participate on EMS related committees <p>M. Bernal conducted roll call of RAC members and RAC members introduced themselves as well as OHA staff.</p> <p>M. Bernal reviewed agenda and noted that recent federal legislation relating to military spouses was passed. Due to the federal legislation, the Department of Justice (DOJ) is reviewing current Oregon laws to determine what impact the federal legislation will have on Oregon laws as well</p>

as proposed rules. The rule specific to military spouse and domestic partner license provisions will be postponed until the Oregon Health Authority (OHA) receives guidance from the DOJ.

- **Follow-up** - Section 19 of the Veterans Auto and Education Improvement Act ([H.R. 7939](#)) is referred to as the Military Spouse Residency Relief Act. [ORS 670.400](#) and [ORS 676.308](#) are the two Oregon laws that impact professional and occupational licensing. [SB 183 \(2023\)](#) is a bill that is being heard by the Oregon legislature which will further amend ORS 670.400.

Rulemaking Process & RAC Scope

Dana Selover thanked RAC members for their participation. She reiterated that the military spouse rule is on pause while the OHA seeks guidance from DOJ. It was noted that in response to HB 2993 from the 2021 legislative session, RAC members were identified to represent certain interests, communities, and backgrounds. As such, the number of RAC members is large and quite diverse.

- D. Selover reviewed the rulemaking process and noted that every agency does it differently.
- The RAC is advisory only and the purpose of the RAC is to obtain feedback on the proposed rules drafted by the EMS program. Agreement on the rules is not necessary. The goal for OHA is to obtain information from the community and affected persons and entities and any evidence or basis from which members are providing input.
 - The RAC process varies in length. This is the first of two meetings scheduled for this RAC. The second meeting is scheduled for June 21.
 - The EMS program is working towards an operative date of October 1, 2023.
 - The time from submitting documents to the Public Health Division's Rule's Coordinator to permanent adoption through filing with Secretary of State is approximately three months.
 - The EMS program will be working with this RAC on obtaining feedback on the fiscal and economic impact, impact on small businesses, as well as the impact on equity in Oregon.
 - A public hearing will be scheduled and notices to interested parties will be sent to gather input either from persons attending the public hearing or through the written public comment period.
 - The EMS program will review and consider all public testimony and written comments received to determine whether additional changes to the rule are necessary based on those comments. The program will provide a response to the testimony and comments received through the Hearing's Officer report.
 - The EMS program will finalize rule text and determine effective date and file permanent rulemaking notice with the Secretary of State's office.
 - Fact sheets will be generated after the final adoption of the rule.

RAC member asked whether it's anticipated that the military spouse rule will also be filed and operative in October? D. Selover responded that it is the program's intent to have the rule filed. Depending on timing of DOJ guidance, the program may need to convene a quick follow-up meeting.

D. Selover reminded public that should they wish to share any information at the conclusion of the RAC, information should be sent to Mellony via email at mellony.c.bernal@oha.oregon.gov.

EMS Associate Degree Requirement – History and Purpose

D. Selover reviewed the history of the associate degree requirement. The impetus for this specific rulemaking was based on conversations over the summer and the fact that this rule is reviewed every three to four years to consider what alternative pathways could be made available to out-of-state licensees that want to move to or work in Oregon. The agency was not able to get a RAC convened due to pandemic, crisis standards of care, and other imperative rules. SB 60 (2023) provided more conversation and significant testimony considered.

- Education RAC members to asked think about what alternative pathways mean to them and how can they assist with changes to help in the future, and for employers, what can they do help employees be successful based on the alternative pathway. It was noted that the last time the rule was changed was due to no-one using the alternate pathway. Many providers would start but never finish. The administrative burden for the state was substantial.
- D. Selover noted that the EMS Agenda for the Future looked at changes in EMS over a span of time which looks quite different today given the changes in services provided and the complexity of revised standards. In general, and nationally, the recommendation was to look at requiring a degree. Oregon was at the forefront and the degree requirement was established in 1999. Persons who were licensed at the time the requirement went into effect did not need to obtain the degree. Over the years, services provided by Paramedics has changed including hospital at home, mobile integrated healthcare, and behavioral health support all of which support a solid foundation of education.
- SB 60 sponsored in the 2023 legislative session received a lot of feedback and testimony. The EMS Program wants to be responsive to the changes in the workforce, system pressures, and utilization of the provisional pathway. When utilized, the system needs to ensure that persons are as successful, and this includes support from education systems and employers.
- D. Selover summarized that the provisional pathway is someone coming from out-of-state who needs to bridge the gap between the minimum requirements such as National Registry and the degree. The role of the state including quarterly check-ins, reports, documentation requirements, oversight and employer responsibilities were noted and have changed over time. Loopholes that allowed people to go around the system have also been addressed over time.
- Nationally and internationally, there is professionalization in EMS care.

David Lehrfeld shared his perspective as an EMS physician.

- Shared history of obtaining EMT education and becoming Paramedic through US Army. After leaving Army went to school to become trauma physician. Education was critical for success including interactions with non-military. Experiences, friendships and knowledge changed perspective and served him well going into medical school.
- Education is invaluable as medicine gets more complex (cardiac rhythms to 12-leads to STEMI's; stroke scales; entidal CO₂; point of care ultrasound; point of care lactaids). Paramedics don't just perform tests but determine what those tests mean and the context to the entire medical system. Initial triage and assessment drive the entire system of care and is complex – trauma hospital and activation, significant monetary resources, life or death, permanent disability.
- EMS care is moving into other areas including hospital post discharge follow-up to prevent readmission, in-home wound care, working in hospitals as technicians, pandemic response

to nursing homes for testing and community wide vaccinations, the new 9-8-8 system and mobile crisis teams.

- The broad education required allows persons to interact with multiple persons from different communities in education institutions.
- Oregon is unique and needs to be given the broad scope of practice and new technologies.

D. Selover commented that the EMS program sees and hears the work force issues which is not just Oregon but nationwide. It is not just EMS providers but nurses and other medical professionals. The program is trying to balance these issues and make some things easier and still maintain an education standard. It is also trying to ensure that by trying to fix one thing, another doesn't become broken. Care needs to be taken to ensure that there is limited disruption to other educational systems, employers hiring and recruiting, apprenticeships, etc. and that there are no unintended consequences.

Associate Degree Requirement in Educational Institutions

D. Selover noted that a representative from the Higher Education Coordination Commission was invited but unable to attend. She asked educational institution members to share what the impacts have been for the provisional alternate pathway and Leslie Huntington noted it would be helpful to hear about some of the things that the educational institutions have been working on that may assist with the rule.

- RAC member shared that they recognize there is a hiring crisis in the US and Oregon is not exempt. Rogue Community College is taking an innovative stance on the approach to Paramedic education in Oregon.
 - The degree requirement is valued along with the communications, human relations and impacts to underserved communities.
 - Students who have obtained prior education that may not be specific to a Paramedic degree are of value.
 - In 2022, Rogue Community College created an alternate pathway to allow students who have prior education or prior degrees to enter the paramedic program by taking a condensed anatomy and physiology (A&P) course during one term versus the traditional three which had kept many students out of the Paramedicine program. Currently, an additional 16 students are applying to the fall Paramedic program compared to the traditional degree seeking path.
 - Students who have an associate or higher degree, can take a single term of anatomy/physiology and pathophysiology and then can enter the Paramedic program. Students have done well but challenges have been identified without the advanced anatomy/physiology and the college is working through that to maintain the quality of that pathway.
 - There is one local apprenticeship program, that while fire-based, students have been given two pathways (fire or paramedicine). Individualized sections are being created and contracting training with agencies to meet need. The college is working with other local industry partners on other pathways for potential apprenticeship programs.
 - The college is also working with other workforce agencies to help it become more affordable to serve the underserved communities. There is a lot of science that shows that underserved communities that have collegial level education are healthier.

- College is working closely with local workforce agencies to help fund students that were not able to receive funding or did not know about resources.
- It's about innovation and finding new ways to meet the need without changing the educational requirement.
- RAC member representing Lane Community College noted via Chat agreement with the comments above.
- RAC member agreed with information shared above about A&P being a big setback for students coming in. The three-term course was not only time consuming but at the end there was a question about what was gained when it was not directed towards medicine. Obtaining access into the course is another issue.
 - Chemeketa Community College has also developed a shorter, one term, A&P course, geared specifically to EMS. The college has noted a lot of interest.
 - The college is also working with the fire program on the dual degree (fire and paramedicine), streamlining it, and making it more accessible.
- RAC member indicated via Chat acknowledgment of the importance of a degree but is concerned that Oregon may fall behind in hiring due to the current national shortage. It was further stated that the priority should be to fill crucial positions and save lives, and one way to incentivize individuals to pursue a degree is by following the example set by law enforcement agencies. RAC member further stated in the Chat that it is important to note that simply having a degree does not guarantee success or superior performance and the focus must be on expanding the field without compromising the ability to address the ongoing crisis. RAC member stated in the Chat uncertainty about the number of states that have a degree requirement.
- RAC member stated via Chat that Oregon is one of two states that requires an associate degree for paramedic licensing; Kansas is the other.
- Leslie Huntington noted that there are some nationwide changes to the approach for workforce needs including the need to recognize experience as part of a person's educational pathway. The HECC and other national initiatives are working on recognizing how experience can be captured for someone pursuing a degree. Other initiatives include competency-based education, credit for prior learning, and condensing courses by recognizing other aspects of experience. If colleges adopt an innovative approach, other opportunities can be explored in meeting the degree requirement.
- RAC member noted that in most of Oregon institutions, up to 20% of a college level degree can be awarded by credit for prior learning or experiential learning. Rogue Community College has added 23 additional courses to help meet the need and recognize that students do come from current providers or with experience.

Proposed Administrative Rules Review

- D. Selover summarized the proposed changes to the rules:
- Removed provisional license created in 2017 and replaced with transitional license;
 - Changed the timeline to obtain an associate degree to 24 months;
 - Removed requirement to have a license in another state;
 - Removed quarterly reporting requirement and agency sponsorship requirement;
 - Requires simple attestation to commit to obtaining an associate degree or higher;
 - Allows the individual who is unable to obtain degree to revert to lower classification;
 - One time only license which cannot be extended or renewed; and

- Fee is reduced.

The goal is to make this as simple as possible and the program will be looking to the employers and educational institutions to help with the glidepath and to ensure that they are aware of who has a transitional license will need to play a role in ensuring success.

The EMS Program has been working with rural agencies and making sure they are connected with educational organizations so they can identify existing pathways. The program will also be working with educational institutions to make sure they are creating glidepaths.

OAR 333-265-0000

Definitions

Adds definition for transitional paramedic.

OAR 333-265-0025

Application Process to Obtain an EMS Provider License

Application for Paramedic license was added as a new section, separated from other license types and reference added to new rule OAR 333-265-0027 for a transitional license for persons who do not meet degree requirement.

Staff noted that the attestation language will be added to the application.

OAR 333-265-0027

Transitional Paramedic License

- 1) Outlines requirements including completion of application and relevant requirements under 0025(2), be nationally certified as a Paramedic by the NREMT, and commitment to obtaining the associate degree.
- 2) The Authority will review the application under 333-265-0040.
- 3) The license is one time only, valid for no more than two years, the license holder must apply for a regular Paramedic license prior to expiration, and there are no renewals or extensions of the transitional license.
- 4) The transitional license is subject to suspension.
- 5) A transition license holder who does not obtain degree may revert to lower license classification if they are certified at the license level being sought.

OAR 333-265-0028

Application for Licensure by Military Spouse or Domestic Partner

Discussion delayed until further information received by Department of Justice based on new federal law.

OAR 333-265-0030

Fees for Licensure Renewal of an EMS Provider

Provisional license fee was removed, and transitional license added under Paramedic license fee.

OAR 333-265-0050

License by Reciprocity

Updated to include reference to transitional license for persons who did not meet degree requirement.

OAR 333-265-0060

Paramedic Provisional License

Repealed.

OAR 333-265-0085

Investigations

Modified to include reference to investigating a person who is not actively pursuing a degree who holds a transitional Paramedic license.

OAR 333-265-0090

Revert to a Lower Level of EMT Licensure

Adds language for a transitional Paramedic license holder to be able to revert to lower license classification.

OAR 333-265-0110

Continuing Education Requirements for License Renewal

Clarifies that a transitional Paramedic license holder is also subject to continuing education requirements.

RAC member noted that there is no equivalence between the workforce shortage and the degree requirement. The workforce shortage for paramedics is nationwide and across the country private agencies are having to resort to outlandish recruiting measures to bring Paramedics into the organization and in states that have no degree requirement. Additional feedback included:

- The degree requirement in Oregon and Kansas does not place any extra burden on the industry in those states to hire and recruit.
- Maintaining the degree requirement allows private agencies to go after federal and state funds to support students going through that process. Eliminating the degree requirement will put that funding and ability to recruit and educate new Paramedics, especially those from underrepresented communities at risk.
- The degree requirement sets up a Paramedic for future success beyond their career including pursuing a bachelor's or master's degree or PhD. It allows a pathway towards more professionalism and leadership opportunities within the industry.
- With respect to rules, the additional streamlining and better organization is helpful and clarifying. They will make it easier for organizations that have to manage and work with those licensed individuals as they navigate the process.

RAC member stated that there is no argument that more education is better. The RAC member disagreed with statement that the degree requirement is not an impediment for recruiting in Oregon. Additional remarks:

- 75% of Paramedic applicants received come from outside the state of Oregon and only about 50% of those meet requirements to transition into Oregon and as such is a huge barrier for their organization in Warrenton, OR.
- At least 15 applicants in the last year have been turned away because they could not get licensed in Oregon.
- In Oregon, transport agencies are simply stealing from each other as agencies will offer better incentives to work for them.
- RAC member acknowledged the experience pathway to obtain licensure if the person worked three of the last five years and questioned why is the degree better than experience? The degree is already being discounted by offering different paths and noted that it has to be specific to EMS and now can be anything.

- It was noted that the only way to increase staffing in the short term is to change the requirement and it was suggested that degree requirement be paused to allow agencies to build-up their staffing. It was acknowledged that this would not be a long-term solution and the degree requirement in the long-term is a good thing.
- Any paramedic is better than no paramedic on calls and in every system, there are long waits because there are no Paramedics.
- OHA is a roadblock and agencies need help to be able to provide the services needed. Obtaining a degree within two years while going to school full time and working full time is unrealistic.

RAC member shared information as it relates to persons leaving the military and going into the civilian workforce. Additional comments:

- The degree requirement limits the ability to draw from an existing workforce that wants to transition to the civilian EMS workforce.
- The degree requirement is an impediment to highly experienced medics leaving the military who have years of experience.
- The requirement increases the floor not the ceiling.
- Many of these individuals are operating at a much higher level than the civilian Paramedic.
- Someone with a degree does not make them perform tasks better but rather limits entry into Oregon.

RAC member concurred with statements shared regarding the barriers to recruitment and suggested a five year pause on the associate degree requirement.

RAC member shared that in Ontario, Oregon the associate degree has been a barrier to recruitment because Idaho does not have similar requirement. Further comments made:

- Fully dropping the degree requirement or pausing it would be supported.
- Organization is not asking that education required by schools to perform as a Paramedic be dropped. It should be promoted internally by business industry.
- Degrees should be encouraged that are relevant for purposes of leadership roles.
- There are candidates who worked as a Paramedic previously, and during the pandemic received the emergency provisional license but can no longer work now that the emergency has ended.
- It was noted that for the three of five years of experience, all relevant medical experience should be considered not just experience as a Paramedic.
- The time frame for 3 to 5 should also be reconsidered given that many persons worked as a Paramedic, left, and then came back during pandemic and as such may not meet the 3 of 5 but have the relevant experience.

RAC members via Chat stated the following:

- Educational institutions in Oregon, in accordance with the degree requirement, have historically done a very poor job capturing experience and education gained from military experience. Currently, the degree requirement creates a barrier to entry within paramedicine in Oregon, resulting in highly experienced military medics from all branches choosing to not pursue EMS in Oregon.
- Oregon should join the EMS Compact to get Oregon the help it needs. Oregon is in a crisis and needs to start planning for future. **Follow-up – In order for Oregon to join the EMS Compact the Oregon legislature must pass a law allowing it.** Oregon is one of two states that requires a degree and people are not coming into the field. Oregon is in crisis and people are needed. Require person to complete a drug calculation class and

charting class for new paramedics. A two-year degree in a random subject does not make better paramedics.

- What does the degree requirement do to enhance a person in the Oregon system if they are currently certified as a Paramedic by the National Registry? This should be discussed further.
- A five year pause on the degree requirement would be supported. Discussion needs to include how to increase the workforce.
- Question raised about whether a person working at the National Registry level for three out of five years are eligible for reciprocity in the state? Staff responded yes.

RAC member shared information based on the discussion around recruitment and employment:

- In 2020, the American Ambulance Association article indicated that attrition and retention is difficult everywhere and is not particular to Oregon.
- A huge reason why people leave the ambulance industry as a Paramedic relates to pay and benefits, as well as behavior that is not taught in a typical Paramedic course. Portions of a college degree include communications courses that involve interpersonal relations and other 'soft skills' (writing, math, etc.) Many entry level students that enter an EMT course are not able to do simple high school level math.
- A bar needs to be set for what entry level Paramedic education entails.
- In the US there are 628 Paramedic programs that are accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) in collaboration with the Committee on Accreditation for the EMS Professions (CoAEMSP). 390 of those programs offer an associate or bachelor level degree.
- There is science and data that indicate people with a college level degree are better communicators, are better in the workforce, and are more successful.
- Rogue Community College has a 96% first time pass rate for Paramedics in the last five years. Nationally, the pass rate is 71%. There is a clear differentiation between the number of Paramedics that Oregon can push out with the degree process.
- Encouraged RAC members to not just think about employability but look at how education can impact local communities in health care.
- In terms of the rules, retention of the degree requirement is supported. Concern was noted about the two-year provision. There will be a challenge with students that come in with a Paramedic degree and want to obtain a paramedicine degree. It will also open up a path where people will work 18 months to two years and then just leave the state which creates additional challenges. There are a lot of avenues for students who do come into the state with a National Registry to get a general studies degree, but they really are starting from scratch and don't have the 'soft skills' that industry partners are asking schools to teach (writing, communication, human relations, etc.).

RAC member shared that the proposed changes are not supported and shared the following:

- Concerns were noted about the working environment in private ambulance service agencies and low pay.
- The two-year requirement may create more 'churn' and will not solve recruitment and retention difficulties.
- Working as a Paramedic in the field is not desirable - call volume, challenges and barriers in the field including unregulated care homes abusing 9-1-1 system, urgent care clinics calling 9-1-1 because they can't move their own patients, adult foster care homes calling 9-1-1 to

have someone taken to hospital for catheter change. It's become a fail safe for issues that other entities cannot or will not address.

- The degree requirement is not the barrier. Job is not appealing given what other private industries may offer after the pandemic.
- Concern was noted about the lack of OHA oversight and check-ins with the transitional licensees and possible retention issues.

RAC members via Chat shared the following:

- Encourage managers that are asking for a pause in requirement to first provide shifts of regular length (8 hours) with meal and rest breaks and less employee attrition would be seen;
- Only 1.6% of colleges are offering BS level programs;
- Removing the accountability from the transitional license process opens the door to aggressive recruiting for out-of-state paramedics who will stay in the state for two years and then leave; need to be building our Oregon workforce for the future;
- Establishing an accountability mechanism to ensure a transitional Paramedic is making progress would be important;
- Transitional paramedics should be required to provide proof of 50% completion, or more, within one year of time they granted a transitional license. Rogue Community College would advocate keeping the current rule in place and work with colleges and employers to find new innovative ways to meet the requirement. Condensed A&P series, apprenticeship programs, etc. are all options to meet industry need and maintain a high standard. The EMS agenda for the future 2050 promotes a degree, 62 percent of paramedic training institutions offer one currently in the United States. Paramedic care has evolved from algorithms to care that is reflected on care encompassing a multitude of patients and environments. That type of knowledge necessitates a degree that includes writing, communication, human relations, and other attributes statistically proven to lead to success and less turnover.
- Concerned with the ability to be able to manage and mitigate the transitional rule as written and will be a nightmare for the administration. It will create a backdoor to the current requirements and negatively impact the profession that is just now being recognized. There are RN and MD shortages, and reducing their requirements is not being considered. Removing the degree is a step backwards.

RAC member stated opposition to the degree requirement unless it can be shown to enhance patient or workplace safety. Regulatory agencies should set the minimum standard and the rules should set the floor and not add enhancements unless supported by patient or workplace safety.

RAC member polled current Paramedic staff in Cascade Locks and asked opinion on proposed rule. All supported keeping the degree requirement. Further comments:

- There were a couple of Paramedics that were community college educators, but all agreed that the field should not go backwards.
- Two years is not long enough considering prerequisites and time to be accepted to program.
- Support education – but it's not the skills component rather learning the interpersonal skills when in the back of ambulance and better charting.
- Reconsider the three-of-five-year experience and change to two of five.
- Any changes should be considered on a trial basis such as two years and come back and look at it and evaluate whether the workforce was improved.

RAC member indicated support for five years to obtain the degree as many of these people will be working families and two years is not long enough to both work and go to school. Additional statements:

- It was noted that many people do have degrees and are choosing not to be employed in that field.
- It was noted that there are many good people that don't have degrees and to lose those potential people from out-of-state or military that have national registry is hurting Oregon.
- Previously 30 people might apply for one position and now lucky to get two people to apply.

RAC member echoed previous comments that the job is not desirable and has drastically changed over the years. Additional comments:

- The problem is not the job and there is not a huge influx of Paramedics trying to get into Oregon.
- Working conditions and wages play a large role in recruitment and retention.
- Paramedics are leaving and has drastically increased in the last few years.
- Lowering the education requirement is not the answer to any workforce shortage. People have worked hard to be recognized as professionals not just an ambulance driver.
- Oppose any change to the degree requirement and recommend that the state look at more innovative solutions.
- Trying to fix small issues is not going to address the need for a system wide overhaul including abuse of the 9-1-1 system and pressures on the workforce.
- Question was raised about how the state will 'train-up' Paramedics whose scopes in other states are on much lower level than that of Oregon.
 - Staff responded that it is up to local EMS Medical Directors and Operation Supervisors though orientation, monitoring and oversight to ensure that Paramedics can perform at the Oregon scope.
 - RAC member noted their involvement and experience with out-of-state contract medics and emphasized how they are not the same as Oregon.

RAC member shared that many of the same issues that they would have raised have been discussed and is opposed to the degree requirement and would support removing the degree requirement. Further points:

- Patient safety has not been addressed and OHA through its rules have indicated that a degree is not required to maintain patient safety by allowing loopholes such as the military spouse provision and the transitional provision.
- 48 other states successfully run paramedic programs that do not have a degree.
- There is no change in performance based on paramedics hired that have gone through the provisional license process.
- If looking to advance in the field, there is nothing preventing a person from getting a degree.
- The degree requirement is hindering the workforce.

RAC member stated they are a proponent of education but on the Southern Oregon coast there are very few applicants (1-2 per year) and it's a challenge to have persons come into the state that meet the requirement. Further comments:

- In Brookings, Oregon it is unlikely to get someone into a two-year course. There is a very small community college, but it would likely take three to four years to get an associate degree.
- In response to the rule, it was recommended a minimum of four years would be needed to obtain the degree.

- Prior experience should also be considered for the 3-of-5-year requirement and consider reducing to 2 years. Example shared of applicant who had five years of experience, left to work in different field and came back, and could not qualify.

RAC member stated the question should not be whether the degree requirement is hurting workforce recruitment rather is it helping. If the rule is not hurting but it's also not helping, why have it at all? Further comments shared:

- Studies mentioned relating to 'soft skills' are qualitative not quantitative – individuals self-identifying skills.
- 62% of programs "offer" a degree but it is not mandatory, the statistic would therefore favor not having a degree.
- Largest scope of practice with lowest training requirement is the U.S. Military. The comments related to scope do not argue in favor of an associate degree.
- Rules as proposed have a transitional program that is geared towards individuals who already have paramedic license but need to get a degree. What about an easier transition for individuals who already have a degree and may want to get into EMS? The lack of certificate level Paramedic programs in Oregon will require persons even with a graduate degree to get an associate degree and seems unnecessary given operating at a much higher level than most Paramedics.
- Oregon is failing at creating an environment that is welcoming and inclusive and encourages people to get into EMS, especially for those who do have experience and are transitioning out of another workforce.

RAC member stated that Oregon is not getting any better paramedics out of a two- or four-year degree versus a certificate program. Additional comments:

- Have read a lot of narratives from Paramedics with and without degrees; all of them can be good and all can be bad;
- Interpersonal communication is often learned best on the job;
- Feedback from local college is if the degree requirement were removed and changed to a certificate, the college would likely see more students than they see now;
- A lot of great applicants are lost to Vancouver, Washington;
- Protocols for Clark County, Washington are as aggressive and progressive as Oregon;
- Cardiac arrest outcomes are as good and at times better than Oregon with no degree requirement in Washington;
- If the intent is not to remove the degree requirement, then five years should be considered to obtain the degree.

RAC member shared that if the time is extended to obtain the degree, there must be some accountability and check-in process, even if it is not as rigorous as the existing rule.

RAC member stated it's important to remember that at one time there was a long wait to get into 'Paramedic school' and while waiting, people would take other classes to obtain the degree. Currently, there is an overall decline in persons wanting to be a Paramedic and agencies are starting to see that in recruitment. Further comments included:

- In Central Oregon, people are going through an accelerated program and more community colleges need to consider doing the same;
- Example of persons that obtain their EMT, go out-of-state to obtain their degree in a six-month accelerated program and return to Oregon to obtain Paramedic license was shared;

- Consider what border states are doing if the degree requirement is not paused or removed. Washington does not require a degree rather a certificate along with specified courses such as reading, writing, biology, etc.
- Pausing the requirement would bring more persons into the state.
- Agree that more education makes a better Paramedic
- Two years should be extended to four or five if requirement is kept.

RAC member stated that many good points have been made and acknowledged that the availability of Paramedics is a real issue, and the degree requirement is a barrier. But it is also one of the reasons why the workforce can operate with such autonomy and scope. Additionally shared:

- EMS is used as a catch-all by other health care entities and they too are understaffed and under resourced. It is a health care compaction issue.
- If Paramedics must be part of the solution, they need to be positioned as a provider and not as a service.
- It is unrealistic to expect 'our voice' or the solutions offered to carry the same weight in the health care system while simultaneously decreasing educational standards.
- If Paramedics want to be viewed as a provider and not a service, then some standard for licensure must be maintained that creates credibility and trust from others in health care.
- As changes to way that care is provided in the community, educational service is part of the foundation for successful implementation of alternative treatment models.
- Agree immediate need is workforce, but this is not unique to Oregon. The big picture is what does the EMS workforce look like in 5, 10, 20 years. What will be expected of Paramedics and how will they be prepared to meet those expectations.
- Rule change proposed is reasonable and fair, but the deadline should be extended to 48 months and have accountability measures put in place.

RAC member via Chat stated that they would recommend removing the degree requirement until such time it's a nationwide standard and further remarked that the requirement is just a means for colleges to get more money.

RAC member commented that recruitment in rural Oregon is very difficult.

- Out of 25 Adventist Health Hospitals (3 in Oregon), Tillamook has the most difficult time in recruitment in all hospitals. 116 days for RN and recruiting for Paramedic just as difficult.
- In terms of rules, 24 months is too short, and a moratorium should be considered so that rural Oregon can get fully staffed.

RAC member disagreed with earlier statement that a medic is the same despite where trained.

RAC member shared that Paramedics coming from OHSU's program are much smarter clinically than any other program they have worked with. Further comments shared:

- Question was raised about what happens when an agency has invested four years in a transitional Paramedic who does not obtain degree within four years. Discussion ensued:
 - It's part of an agency's responsibility to track credit requirements and ensure person is on track. It would also be noted as part of the employment conditions.
 - Employers have a duty as well as Medical Directors to ensure employees are meeting requirements.
 - Employers implementing performance measures will ensure Transitional Paramedic is on track to meet conditions of employment.
- Rules prevent incumbent employees who want to become Paramedics to do internship where employed.

- Clarification was provided – an internship can be conducted at place of employment as long as the intern is not a part of minimum staffing requirements (OAR 333-265-0016(5)).

RAC member noted that expanded apprenticeship programs, and federal and state funding resources are helpful to alleviate financial burden.

RAC member stated that based on site visits across the country, programs are not equivalent. It was further noted that agencies are not getting applicants. People are running away from, not to, emergency medicine.

- Chemeketa has created a satellite in Pendleton to teach students there and is in discussions with Treasure Valley.
- Students who are taught in a community tend to stay in that community.
- Agreed that two years is too tight and should be extended.

Staff shared statistics that show an increase in applications for Paramedic licensure as well as EMT and noted that working in Multnomah County as a Paramedic is rough and they chose to leave due to burnout and environment.

YEAR	PARAMEDIC	EMT
2019	3,936	4681
2021	4,586	6059

Question and commented posed via Chat:

- How many people per year request to transfer into the state as a paramedic and are not able to due to the degree requirement? Has the admin considered the workload to manage and maintain the transition group?
- It would be interesting to know how many of the licensees live outside of the state and are here providing or have provided travel paramedicine.

Next Steps

Next meeting is scheduled for June 21, 2023 at 9:00 a.m.
Meeting minutes will be drafted and distributed.

Meeting adjourned at 11:55 a.m.