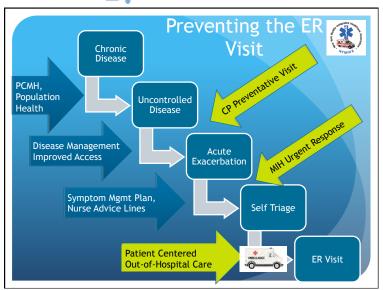


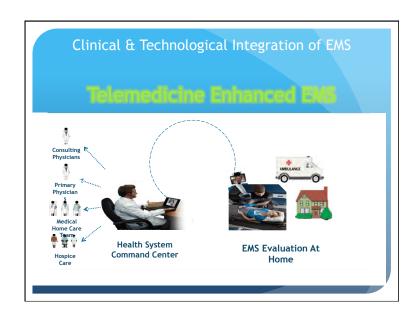


# Consider this...

Will the traditional role & education of medical directors be adequate to lead modern EMS systems as providers engage more in public health, community health and non-acute care?









### Medical Direction 3.0

- To assure the success of an evolving EMS Program, an engaged and accessible Medical Director should:
  - Be an ambassador for the EMS program and liaise with other community health stakeholders.
  - Have an interest / background in Primary Care, Community Health or Public Health

PIE Recommendation: ABEM should include exposure to and training in population health and non-emergent patient care initiatives in the core content and fellowship experience for EMS physicians.



#### Medical Direction 3.0

- To assure the success of an evolving EMS Program, an engaged and accessible Medical Director should:
  - Assist in new program development & implementation
  - PIE Recommendation: Design policies and procedures to involve other specialists into both direct and indirect oversight of EMS (especially CP/MIH programs)
  - Set entry criteria and appropriate curriculum for providers participating in innovative models of care.
  - Collect data / Perform CQI / Provide CME

#### The Medical Director of Tomorrow

- Will need to be more involved in operations and system design
- Be an effective collaborator with a greater variety of healthcare stakeholders
- A passionate driver of quality improvement.

## The Medical Director of Tomorrow

 Will need to be appropriately educated, better resourced, and adequately compensated.

