



Michael Kaduce

Position Sought: Secretary

Candidate Q&A

1. How would you describe your leadership style, and how has it influenced your work in EMS?

I would describe my leadership style as collaborative, transparent, and focused on developing the people around me. I believe good leaders create an environment where people are comfortable bringing forward ideas, questioning existing practices, and even disagreeing with the person leading the room. Some of the best decisions I have made in EMS began with someone being willing to tell me there was a better way.

Collaboration, however, does not mean avoiding difficult decisions or waiting for unanimous agreement. My responsibility as a leader is to listen, seek out different perspectives, examine the available evidence, make a decision, and then be accountable for the outcome. I have always tried to create teams where people understand not only what we are doing, but why we are doing it.

That approach has strongly influenced my work in EMS education and leadership. EMS has a long history of doing things because “that’s how we’ve always done it.” I believe leaders have an obligation to respectfully challenge that thinking. Throughout my career, I have worked to replace tradition with evidence when the evidence points us in a better direction, whether that involves educational practices, clinical care, workforce development, or organizational policy.

I have been fortunate to have had great mentors throughout my career, and their guidance has shaped how I approach leadership. They showed me the importance of investing in people, creating opportunities for growth, and helping others develop their own voice and confidence. Because of their influence, developing other leaders is equally important to me. Leadership should not be measured solely by what happens while you are in the room. It should be visible in what people are able and willing to accomplish when you are not. I have been fortunate to mentor educators, clinicians, researchers, and emerging EMS leaders, and watching them develop their own voices and ideas has been one of the most rewarding parts of my career.

Finally, I try not to lose sight of why any of this matters. Policies, strategic plans, educational programs, and board decisions eventually reach an EMT or paramedic taking care of someone on what may be the worst day of that person’s life. Keeping that connection in mind has helped me remain practical in my leadership and focused on outcomes rather than process for the sake of process.

My goal as a leader is not to have all the answers. It is to bring good people together, ask better questions, create an environment where ideas can be challenged, and then move the team toward meaningful action.

2. In what ways do you advocate for EMS? What strategies would you recommend for NAEMT to strengthen its advocacy efforts and gain recognition for EMS as an essential service?

I advocate for EMS by trying to ensure that the experiences of the clinicians doing this work are represented wherever decisions about our profession are being made. That has taken me from classrooms and conference stages to research meetings, organizational boardrooms, and Capitol Hill.

Through NAEMT, I have participated in EMS On The Hill Day and met directly with members of Congress and congressional staff to advocate for legislation and policies affecting EMS. Those conversations have reinforced for me that one of our greatest challenges is helping policymakers understand what modern EMS actually is. We are no longer simply a transportation system that responds to emergencies. EMS is a healthcare profession and an essential component of healthcare, public health, emergency preparedness, and the safety net of virtually every community in America.

We also need to be unapologetic about EMS being a profession that can and should provide a lifelong career. EMTs and paramedics are healthcare professionals who make complex clinical decisions, care for vulnerable patients, respond during disasters, and increasingly provide care beyond the traditional emergency response model. We should be building systems that allow talented people to enter EMS, develop professionally, support their families, advance throughout their careers, and ultimately retire from this profession if they choose.

Recognition as an essential service is important, but without modern, sustainable funding and reimbursement structures, those declarations risk becoming little more than words on paper. Reimbursement affects nearly every major challenge facing EMS, including compensation, recruitment and retention, education, equipment, clinical innovation, and an agency's ability to meet the needs of its community. If we expect EMS to evolve, the way we fund EMS must evolve with it.

NAEMT is uniquely positioned to lead this conversation because our advocacy begins with EMS professionals themselves. We should continue strengthening our grassroots advocacy network and give members practical ways to engage elected officials at the local, state, and federal levels. EMS On The Hill Day is powerful, but advocacy cannot occur only once a year. Our members should return home equipped with the data, talking points, relationships, and tools necessary to continue those conversations.

We also need to tell our story more effectively. Research and data can demonstrate our value, while the experiences of our patients and EMS professionals make those numbers meaningful. NAEMT should continue building coalitions with other EMS organizations, healthcare organizations, patient advocates, and community partners so that policymakers hear a strong and increasingly unified message.

Advocacy is ultimately about turning the realities experienced by EMS professionals and their patients into policy. NAEMT should bring those voices together, support them with evidence, and ensure they are heard wherever decisions about the future of our profession are being made.

3. How can NAEMT better support and develop the EMS workforce, considering generational differences? How would you convey the value of membership to both current and prospective members?

Throughout each of my campaigns for the NAEMT Board, I have been asked some version of the same question: How do we attract younger EMS professionals to NAEMT? As one of the younger members of the Board, I believe it is time to move beyond simply asking the question and become more deliberate about measuring and responding to the answer.

NAEMT should routinely evaluate our membership demographics, engagement, retention, and reasons members join or leave. We should ask members what they value, what they are looking for from their professional association, and what would make them more likely to participate. More importantly, we need to use that information to shape the membership experience.

Generational labels alone do not adequately define what EMS professionals need from NAEMT. Career stage is often just as important as age. A new EMT beginning a career, a paramedic looking for leadership opportunities, an experienced educator, and a senior EMS executive each need something different from NAEMT. Our opportunity is to create value throughout that entire professional journey.

For newer EMS professionals, that may include mentorship, networking, education, leadership development, research opportunities, and meaningful ways to become involved without waiting years for an invitation. We should intentionally invite younger and newer members into committees, projects, advocacy efforts, education initiatives, and other leadership opportunities. People develop a connection to an organization when they are given an opportunity to contribute to it.

For established professionals, NAEMT should continue providing high-quality education, advocacy, professional development, leadership opportunities, and a national community where experience can be shared with the next generation. There is tremendous value in connecting those groups rather than treating them as separate audiences. Mentorship works in both directions, and our profession is stronger when experience and new perspectives have a place at the same table.

When discussing membership, I do not think our strongest message is a list of discounts or benefits. Those things have value, but they are not why someone builds a lasting relationship with a professional association. The greater value is belonging to a community that advocates for your profession, invests in your development, connects you with colleagues, creates opportunities to lead, and gives you a voice in the future of EMS.

We should be able to demonstrate that value rather than simply describe it.

4. What is a pressing issue currently facing EMS, and how could NAEMT help address it?

One of the most pressing issues facing EMS is whether our profession can evolve quickly enough to keep pace with the environment in which we are being asked to practice.

The role of EMS is changing rapidly. Our clinicians are increasingly expected to make more complex decisions, navigate alternative destinations and treatment pathways, participate in community-based care, use new diagnostic and clinical technologies, respond to evolving public health needs, and integrate tools such as artificial intelligence into their work. At the same time, the expectations of our workforce and the communities we serve are changing as well.

Many of the systems surrounding EMS, including education, regulation, reimbursement, and workforce development, were designed for a more traditional model of emergency response and transportation. We cannot prepare for the future simply by becoming more efficient at operating within structures designed for the past.

Education is paramount to navigating this transition. The debate about the future of EMS education often becomes focused on whether a particular degree should be required. I believe the more important question is whether our educational pathways are producing clinicians prepared for the responsibilities we expect them to assume. There are multiple pathways to that outcome, and we should remain focused on strong clinical preparation, critical thinking, and creating opportunities for continued professional development throughout an EMS career.

The challenge does not end when an EMT or paramedic earns a certification. Practicing clinicians need opportunities to continually develop as medicine, technology, and models of care evolve around them. We should make it easier for EMS professionals to understand emerging evidence, develop new clinical and leadership skills, participate in research, and prepare for roles that may not have existed

when they entered the profession. Lifelong learning should be viewed as part of being an EMS clinician, not simply as a requirement for recertification.

NAEMT can help lead this evolution. We can bring together clinicians, educators, researchers, medical directors, regulators, and industry partners to anticipate where EMS is going and translate those changes into practical resources for our members. NAEMT can help clinicians understand emerging technologies, including artificial intelligence, while advocating for thoughtful implementation that supports rather than replaces clinical judgment. We can also continue creating education and professional development opportunities that help clinicians grow throughout their careers.

Most importantly, NAEMT should be willing to look ahead. Our responsibility is not simply to prepare an EMS professional for the ambulance they will step into tomorrow. We should help prepare them for the profession they will practice in five, ten, and twenty years.

The future of EMS will not be defined by a single educational model, technology, or clinical innovation. It will be defined by how well we prepare our people to adapt to all of them.