

POLICY STATEMENT

PHYSICIAN MEDICAL DIRECTION OF EMS EDUCATION PROGRAMS: POLICY RESOURCE AND EDUCATION PAPER

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INTRODUCTION

As in any field of endeavor, the education process is essential to the success of the provision of emergency medical services (EMS). Given that prehospital care is provided under the auspices and licenses of physicians, it is critical that physicians be actively involved in the education process for all levels of EMS providers.

Before the establishment of standard EMS curricula, most EMS education courses were conducted by pioneering EMS physicians seeking to extend themselves through their students. With the proliferation of education programs that followed development of national standard curricula, physician involvement diminished and has been essentially lost in some areas, particularly at the first-responder and EMT-Basic levels. This lack of physician involvement is being cor-

rected with revisions to the national standard curricula. Also, the need for medical direction in the development and implementation of education programs is being acknowledged.

The education of EMS personnel is accomplished by programs in many settings, both formal (colleges) and informal (squad level). In all settings, input from a physician should be sought to ensure the accuracy and validity of the medical content to be presented. It is important that the EMS agency medical director play a central role in EMS education. The agency medical director should be involved in the development of agency-based continuing education to ensure the accuracy and validity of the program's medical content.

ROLE OF THE EMS EDUCATION PROGRAM MEDICAL DIRECTOR

The physician medical director should have authority over the medical content related to patient care for all courses in the EMS education program. The physician medical director should have a specific job description dictated by local needs.

Qualifications

To optimize medical direction of EMS education programs, the

physician medical director should demonstrate the following:

Essential Qualifications:

1. License to practice medicine (MD or DO).
2. Familiarity with the design and operation of EMS systems, particularly the system or systems in which the student will be working.
3. Education or experience in out-of-hospital emergency care.
4. Education or experience in mass casualty or disaster medicine.
5. Education or experience in medical direction of EMS systems.
6. Active participation in the emergency management of acutely ill and injured patients.
7. Education or experience in EMS education and methodology.
8. Knowledge of EMS laws and regulations.
9. Knowledge of EMS dispatch and communications.

Desirable Qualifications:

1. Board certification in emergency medicine.
2. Fellowship training in EMS.

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3. Education or experience in EMS quality improvement.
4. Involvement with national emergency medicine or EMS organizations.

Responsibilities

To optimize physician medical direction of EMS education programs, physicians serving as medical directors should, at a minimum, do the following:

1. Serve as patient advocates by demanding the highest quality education for students.
2. Ensure the appropriateness of initial qualifications of applicants for positions in the EMS education programs.
3. Ensure the appropriateness and qualifications of faculty delivering medical instruction.
4. Review and approve all patient care practices being taught to students.
5. Review and attest to the quality of medical instruction, student evaluation methods, and supervision delivered by the faculty.
6. Promote EMS research by encouraging student and program participation.
7. Maintain liaisons with the medical community, especially with facilities and agencies providing clinical and field internship instruction for students.
8. Maintain communication with physician medical directors of EMS units who provide field internship instruction or hire graduates of the program.

9. Review student performance to ensure adequate progress toward clinical competency.
10. Attest that students have achieved the desired level of competency prior to graduation.
11. Interact with local, regional, and state EMS education authorities to ensure that standards, needs, and requirements are met.
12. Maintain clinical, administrative, and educational knowledge appropriate for an EMS education program physician medical director.
13. Routinely teach EMS students.
14. Routinely seek feedback from program graduates and their employers as part of the program's quality improvement program.

Authority

A written agreement or contract defining the job description and authority of the physician medical director should be established. Unless otherwise defined or limited by state or local requirements, the physician medical director for EMS education programs should have full authority over all clinical and patient care aspects of the program, including, but not limited to, the following:

1. Determine the appropriate medical care content of courses provided and ensure that the content meets or exceeds any national standard curricula.
2. Set or approve minimum education and ethical standards for potential students.

3. Ensure the competency of personnel who provide instruction in patient care.
4. Ensure the adequacy of cognitive knowledge evaluations.
5. Ensure the adequacy of clinical and field internship experiences and evaluations.
6. Have access to all relevant records necessary to evaluate student competency and fitness for patient care activities.
7. Maintain the authority to remove a student from a course for appropriate cause, related to adequate knowledge, clinical ability, or suitability, using an appropriate review and appeals mechanisms.
8. Recommend certification and recertification of students to the appropriate certifying agencies.

Program Obligations

The EMS education program has the obligation to provide the physician medical director with the resources and authority commensurate with the responsibilities outlined above, including the following:

1. Appropriate compensation for the time required.
2. Necessary material resources and personnel support.
3. Appropriate academic appointment, if applicable.
4. Liability insurance for duties or actions performed by the physician medical director.
5. Written agreement or contract delineating the medical director's authority and responsibilities to the program and the program's obligations to the physician medical director.