1. Continue to develop resources and guidelines for EMS medical directors addressing Mobile Integrated Healthcare (MIH) and Community Paramedicine (CP) programs and collaborate with NAEMSP and related stakeholders as needed.

2. Continue collaboration with stakeholders involved in changes to current controlled substances regulations (e.g., DEA regulations) and develop educational resources related to any new DEA regulations for EMS medical directors.

3. Develop resources for EMS medical directors, such as an information paper, articles for ACEP publications, or a toolkit, addressing the opioid crisis and alternative pain management options.

4. Continue to develop resources to promote and support the subspecialty of EMS medicine and the roles of the EMS medical director, such as EMS medical director reimbursement and the need for specific EMS training and experience. Collaborate with NAEMSP and related stakeholders as needed.

5. Collaborate with AAP, NAEMSP, ENA, the Pediatric Emergency Medicine Committee, and other stakeholders to develop resources for assessing pediatric readiness of EMS systems and pediatric medication dosing. (EMS is the lead committee.)

6. Collaborate with the Geriatric Emergency Medicine Section to develop resources for geriatric out-of-hospital care.

7. Collaborate with the Palliative Medicine Section to develop resources for EMS related to palliative/end-of-life care.

8. Collaborate with the Education Committee/EMS Education Subcommittee to explore the need for resources including educational offerings at Scientific Assembly for the EMS medical director on topics such as geriatric prehospital care, and palliative/end-of-life care. (EMS is the lead committee.)
Final Committee Objectives

9. Serve as a resource and provide input to the Education Committee to explore online and other EMS, disaster, and other related training for emergency physicians (Education is the lead committee.)

10. Coordinate with the EMS Section and the Air Medical Transport Section to submit a nomination for the 2019 ACEP Outstanding Contribution in EMS Award.

11. Continue to review current EMS-related policies and PREPs for possible consolidation.

12. Review the following policy per the Policy Sunset Review Process:
   - Transfer of Patient Care Between EMS Providers and Receiving Facilities

   *Determine by December 15 if the policies should be reaffirmed, revised, rescinded, or sunsetted. Submit any proposed revisions to the Board for approval by the end of the committee year.*

13. Provide input to the Coding & Nomenclature Advisory Committee to explore developing codes for alternative payment models, including community paramedicine and mobile integrated health care. (Coding & Nomenclature is the lead committee.)

14. Continue work started by the High Threat Casualty Care Task Force (HTCCTF) towards:
   - creation of a high-threat incident database, standardized data-gathering tool, and support the creation of data-gathering rapid response to enable rapid dissemination of lessons-learned
   - enhance the translation of military lessons learned, consistent with Mission Zero, throughout the emergency medicine community
   - develop a public relations information campaign centered on mitigation, preparedness, response to and recovery from high-threat incidents.
   Collaborate with the Disaster Preparedness & Response Committee, Federal Government Affairs Committee, and the Public Health & Injury Prevention Committee. (EMS the lead committee.)

15. Provide input to the Education Committee to explore online and other EMS, disaster, and other related training for emergency physicians. (Education is the lead committee.)