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Rural and Frontier Emergency Medical Services: Agenda for the Future. National Rural Health Association, 2004. Kansas City. McGinnis, Kevin K.

- An Australian Perspective by A/Prof. Peter O'Meara

The *Rural and Frontier Emergency Medical Services: Agenda for the Future* is a rural version of the National Highway Traffic Safety Administration's well-known EMS Agenda for the Future published in 1996. It uses the same 14 EMS attributes of the earlier document as a conceptual framework. While this approach is a useful tool, it also makes translation of the detail to settings outside the United States of America a little awkward at times. However, it remains a useful contribution to rural EMS throughout the world in spite of its lack of recognition or reference to EMS developments in countries other than the United States of America.

A major strength of the *Rural Agenda for the Future* is its recognition that EMS is an important component of the rural health system that needs to be better integrated into the overall health system. Its vision for the rural and frontier emergency medical system is excellent and could be readily transferred to Australia and other similar countries with minimal changes.

The Vision

The rural/frontier emergency medical service (EMS) system of the future will assure a rapid response with basic and advanced levels of care as appropriate to each emergency, and will serve as a formal community resource for prevention, evaluation, care, triage, referral and advice. Its foundation will be a dynamic mix of volunteer and paid professionals at all levels, for and determined by its community.

The discussion and debate about the potential to develop an expanded scope of practice for ambulance *Rural Agenda for the Future* is relevant and timely. Amongst the issues identified are the recruitment and retention of staff in low volume settings, the role of volunteers, the challenges of providing adequate clinical supervision, and the overall adequacy of resources such as communications. Particularly interesting are the sections on how EMS should and can weave itself into the fabric of the community itself.

An interesting literary device used in the *Rural Agenda for the Future* is the use of 'future' case studies focusing on each of the 14 EMS attributes. To non-American readers, some of these case studies manage to illustrate the existing strengths of rural ambulance services

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elsewhere where the EMS system is less fragmented and already closely integrated with the health system. However, there are a tremendous number of ideas that could be researched and considered for implementation in other contexts.

The *Rural Agenda for the Future* has an excellent collection of appendices that are valuable resources for ambulance service providers and researchers.

There is certainly an argument that, in Australian for example, ambulance services and the rural health movement should produce a similar blueprint for the future.