

BLUE SKIES FACULTY FOLIO

INSPIRED





World View

Dedicated work to improve the quality prehospital medicine through education and training

A couple of decades ago, a teenage girl in Niwot, Colorado, prepared to join her high school cross-country team. Her father pulled her aside for an unusual pep talk.

“You know, Angie,” he said, “you will always finish the race, but you may never finish it first.” Her father then added words that echo to the present day.

“You are going to work really hard, and you are going to do wonderful things, but you don’t have to be the first person across the finish line,” he said.

“That was one of the most formative moments of my upbringing,” Angela Wright says today. “It set up a tone of knowing that it was more important to know how I did with relationship to myself than it was how I did in relationship to all those around me.”

Wright has indeed been successful running her own races. She trained

in emergency medical services and as an emergency medicine physician and is now associate professor in the Department of Emergency Medicine at the University of Colorado School of Medicine.

Since arriving at CU, Wright has also been a powerful advocate for the workers who deliver lifesaving care to patients in the field. She is medical director of Emergency Medical Services (EMS) at UCHealth University of Colorado Hospital and has spearheaded education programs open to EMS providers around the state – a key to building a resilient workforce committed to a challenging profession in communities large and small.

LEADING THE WAY

The task for her EMS program, Wright said, is straightforward but not simple. “How can we provide support as a healthcare institution



and a hospital and as a group of experts to deliver high-quality and consistent [EMS] care to our communities?”

Her work has not gone unnoticed. This spring, Wright was selected as EMS medical director for the state of Colorado. In one respect, her father’s wise words missed the mark. Wright is the first woman ever to hold the position.

The achievement reflects the challenging path she chose to pursue in healthcare.

“I knew, having started my career in EMS, that this was a traditionally male-dominated field,” Wright said. She recalled that when she attended her first national conference in 2017, only 6% of EMS Medical Directors in the nation’s 10 largest cities were women.

Wright, spurred by the example of “incredible women in medicine,” has helped to bring more women into the EMS workforce and leadership. She joined the National Association of EMS Physicians several years ago and now serves as chair of its Women in EMS Committee.

“IT HAS BEEN A REAL HONOR TO SERVE THIS GROUP OF INCREDIBLE EMS PHYSICIAN AND NON-PHYSICIAN MEMBERS, LOOKING TO CHANGE THE FACE OF PREHOSPITAL MEDICINE,” WRIGHT SAID.

INTERNATIONAL INFLUENCE

This trailblazer, however, was not immediately drawn to healthcare. After receiving a Boettcher Scholarship, Wright attended the University of Denver (DU), where she majored in International Studies. A few stints studying abroad opened her eyes to the richness of the wide world.

“I fell in love with traveling and cultures and became really interested in non-governmental organizations and all the hard work they do,” Wright said. During a stay in Costa Rica, she learned about that country’s political structure and how it supported the healthcare system.

The experience also made Wright look at her country in a new way. She noticed homeless

encampments and keenly felt the need to help if someone in her family fell ill. She saw that people in the United States were vulnerable to many of the same health challenges that she saw abroad.

“I started to realize through traveling that there were so many people in our own backyard that also needed help,” Wright said. “Global impact is important, but I thought that maybe I needed to make a local impact. That human touch was something I craved for purpose.”

By her own admission, she flailed for a time. She thought about working on public policy and interned for a couple of local politicians, but didn’t get the sense of fulfillment she sought.

“I wanted to save the world and work for non-governmental organizations and travel all over,” Wright said. Instead, she cast about for a direction in her life. “I started to feel a little lost.”

In her third year at DU, Wright made a rapid and ultimately decisive pivot. She decided to get her emergency medical technician certificate at Red Rocks Community College. The clinical training portion, which included transporting patients between nursing homes, opened her new possibilities.

“The one-on-one time and that human experience with the patients changed my whole trajectory,” Wright said. “I loved patient care. I loved feeling like I could help.”

DEDICATED PATH

Now convinced that her future was in healthcare, Wright scrambled to complete her International Studies degree and the prerequisites she needed for medical school. She also worked on an ambulance and as an

EMT at Children's Hospital Colorado before getting accepted for medical school at Loyola University in Chicago.

With only the "bare prerequisites" for med school, Wright spent an intense first year hitting the books while rotating through different hospitals. She saw a lot of trauma and observed wide disparities in access to quality care. In one hospital, most patients were insured and resources were plentiful. In another, she had to push her own patients to a CT scanner. Orders for tests could be turned down because of cost.

The four years at Loyola also confirmed a change in her outlook on the world. Wright had started her undergraduate studies with a global perspective and a desire to address the broad problems of society. As a physician, her concerns narrowed.

"I had ended up in a place that was very much about the person in front of me. I learned through my training in Chicago that we can make a huge difference by just impacting one person, in one moment," she said.

Initially, emergency medicine didn't strike Wright as the ideal field to make that impact. She was initially pulled toward OB/Gyn.

"But then I noticed that there was a lot of opportunity in the emergency room to have an impact on women's health," she said.

Wright returned with her husband to Denver to begin her emergency medicine residency at Denver Health, a safety-net hospital committed to serving every patient that comes through its doors.

"Denver Health's model is, you're going to get your experience



through patient care," Wright said. "So it was an incredible amount of shifts, rotations and patient interactions."

BUILDING PREHOSPITAL PROGRAMS

After residency, Wright completed a one-year fellowship at Denver Health, focusing on how to provide the medical direction and build the infrastructure for a 911 service. She used those skills as the foundation to create the EMS program at University of Colorado Hospital.

That program starts and ends with education for paramedics and EMTs, Wright said. Building coursework that can engage them

and enrich their knowledge is a way of honoring the people who helped her.

"I was fortunate to have incredible educational opportunities," Wright said. "For any sort of meaningful change, you have to start with education and training."

Years after her father's advice about races, Wright has also learned that one does not run races alone.

"I think one of the biggest themes through my training has been that you are nothing without a team," she said. "Finding the teammates and collaborators through these projects is the only way to be successful." ■



BLUE SKIES FACULTY FOLIO

IMPACT

Prehospital Care Focus

Advocating for Emergency Medical Services workers through teamwork and leadership

In her third year of International Studies at the University of Denver (DU), Angela (Angie) Wright had traveled many miles and soaked up many new experiences, both at home and abroad. She'd roamed northern Spain, learned about the healthcare system in Costa Rica, and worked with local politicians on policy issues after she returned to Colorado.

She enjoyed it all, but her youthful desire to “save the world” – her reason for getting into International Studies in the first place – was unfulfilled.

“I felt that the human touch was something that I craved for purpose,” she said, but she floundered in searching for the work that would satisfy her.

That summer, Wright abruptly decided to focus her lofty career considerations on something much more basic. She headed off to Red Rocks Community College

in Lakewood to earn her EMT (emergency medical technician) certification.

Wright saw the work as a low-risk but meaningful way to decide if she wanted to get into healthcare. “I thought, that’s a great way to spend the summer,” she recalls with a laugh.

CALL A MEDIC

Turns out, getting that EMT certificate launched her career, which has made a major mark on emergency medicine and emergency medical services (EMS). Wright is now associate professor in the Department of Emergency Medicine at the University of Colorado School of Medicine, medical director of EMS at UCHealth University of Colorado Hospital (UCH), and the recently named EMS medical director for the state of Colorado – the first woman to hold that post.





Wright and her team at CU are tireless advocates for innovations that support education and services for EMS workers and agencies around the state. For example, the MEDIC (Medical Education on the Delivery of Innovative Care) Program, which launched in 2023, offers training and certification on the Anschutz Medical Campus for paramedics, EMTs and emergency responders from around the state. The program graduated its first class in May 2024, and began its second in late June.

THE MEDIC PROGRAM AIMS TO PROVIDE THE MOST ADVANCED EDUCATION POSSIBLE FOR EMS WORKERS “IN FRONTIER, RURAL, AND FRONT RANGE COMMUNITIES” IN COLORADO, WRIGHT SAID.

“When you call 911 on the eastern Plains, it’s very different from when you call 911 from Sixth and Bannock [in Denver],” she said. “So how can we provide support as a healthcare institution and hospital to help EMS systems deliver consistent and high-quality care?”

The MEDIC program also addresses the crucial need to build and retain Colorado’s EMS workforce, Wright said.

“We have a sustainability problem in healthcare, and EMS is no exception to that,” she noted, adding that the average career in prehospital care is only about five years. Building a strong and accessible education foundation is a key to changing that, but Wright doesn’t downplay the challenges of doing so.

“It’s not fun for people to work and go to school at the same time. In

fact, it is extremely challenging,” she acknowledged. Recognizing that, Wright and her team worked to customize courses to meet the students’ scheduling needs, beginning with the first class of mostly firefighters from the Aurora Fire Department.

“One of the things we really wanted to focus on with MEDIC was meeting the students where they are and then bringing them into the workforce,” Wright said. “By doing that, we are hopefully showing them that it’s okay to stick around and maybe we can get them to stay a little longer [in the profession].”

TEAMWORK TO PROGRESS EMS

Wright has also forged partnerships with EMS agencies around the state through the Integrated Medical Direction (IMD) program. Thirteen agencies, most of them in rural and mountain communities, work to address important elements of an evolving EMS environment, including technology-assisted care, protocol review and revision, and training.

The IMD program is the product of many hours of preparation. Wright hit the road to explain the strategy, often with UCHHealth Senior Director for Prehospital Care Marc Scherschel. She met with county commissioners, city managers and EMS providers, listened to them and answered questions about their resource needs and challenges, such as barriers to providing quality care. The process could be bumpy.

For example, Wright said she heard community leaders protest that as an academian from an urban area, she didn’t understand their problems. She countered that she grew up in Niwot, a small town in

Boulder County. Scherschel is from Conifer. Her entire team has both extensive prehospital care training and experience in the field.

“One of the big challenges to overcome in the EMS field is to make sure you taken seriously when speaking with stakeholders, agency leaders, and professionals,” Wright said.

“I learned early on that the way to do this, to overcome the preset stereotypes that may exist, is to make sure I did all of my homework, knew the topic at hand inside and out, studied the nuances and details of the particular situation, and listened more than I spoke.”

SHE ALSO PUT HER EMPHASIS ON FINDING AREAS OF AGREEMENT AND IDEAS FOR SOLUTIONS TO COMMON PROBLEMS. “ONE OF THE BIGGEST THEMES OF MY TRAINING HAS BEEN YOU ARE NOTHING WITHOUT A TEAM,” WRIGHT SAID.

“Knowing how to get the right people with the right resources and with the same passion around the table is one of the biggest hurdles to program development. It’s all about people and relationship-building.”

SHINING A LIGHT MENTAL HEALTH

EMS community leaders also frequently expressed a need for mental health resources, which was no surprise to Wright. She noted that EMS workers face the same dangers of repeated exposure to trauma – including increased suicide risk – as do police and firefighters. Left unaddressed, both individuals and the profession will suffer.

“Part of our sustainability problem is that [EMS] is an incredibly stressful and traumatic job,” Wright said. “We are expecting our people to provide top-of-the-line care in terrible situations. We haven’t realized until recently that that takes a toll that is profound.”

To address the challenge, Wright joined forces with Emergency Medicine colleague Dr. Ian Stanley, who also serves as Psychological Health Lead for the CU Center for Combat Medicine and Battlefield (COMBAT) Research. Together with eight EMS providers representing diverse Colorado communities, Wright and Stanley created a community advisory board that crafted recommendations for addressing the mental health risks for first-line responders.

The collaboration leveraged Stanley’s training in clinical psychology – he’s previously studied the burden of trauma on firefighters and military members – with Wright’s EMS experience, relationships, and operational skills. They have a common goal: help the EMS workers who save so many lives squarely address their own risks and build resilience.

“We have to normalize the conversation [about mental health],” Wright said. “I think one of the biggest barriers is culture. [The job] doesn’t lend itself to being open to having that conversation.” Once again, Wright wants to confront the mental health challenges of EMS work with primary education.

“You start the conversation, and it’s uncomfortable, but by the time they are five years in and have experienced a lot of trauma, they are more comfortable seeking care,” Wright said.



The brief summer detour Angie Wright took to Red Rocks College a couple of decades ago was actually a fork in the road. She is a leading spokesperson and advocate for the prehospital community and is now working with Emergency Medicine Department colleagues Drs. Vik Bebarta and Adit Ginde (profiled in prior Blue Skies issue), to strengthen her program’s research infrastructure.

“Prehospital care has often been an understudied space,” Wright said. “A lot of the big themes – mental health, firearm storage and safety, and trauma best practices – start at the doors of the hospital. My area of expertise is all the stuff that leads up to that. I try to provide the context and the expertise for the prehospital aspect of the initiatives that are coming out of our campus.” ■