



2011 ANNUAL REPORT

Western Virginia Emergency Medical Services Council, Inc.
Near Southwest Preparedness Alliance

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2011: A fall day on the Blue Ridge Parkway

Staff Directory

- **Executive Director** *Robert H. Logan, Ph.D.* logan@vaems.org
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- **Field Coordinator** *Charles W. Berger, NREMT-P* cberger@vaems.org
- **Field Coordinator** *William E. Dalton, NREMT-P* gdalton@vaems.org
- **NSPA Executive Director** *Morris D. Reece, MHA* mreece@vaems.org
- **NSPA RHCC Coordinator** *Jeffrey M. Echternach* jmechternach@carilionclinic.org
- **NSPA Mobile RHCC Coordinator** *Phillip Belcher* pbelcher@vaems.org
- **Medical Reserve Corps Coordinator** *Tanya Ferraro* tferraro@vaems.org
- **Regional Medical Director** *Charles J. Lane, MD, FACEP*..... clane@vaems.org

Office Information

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Toll-Free (all offices) +1 800 972.4367

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2. New River Valley Office 6580 Valley Center Drive, Radford VA 24141

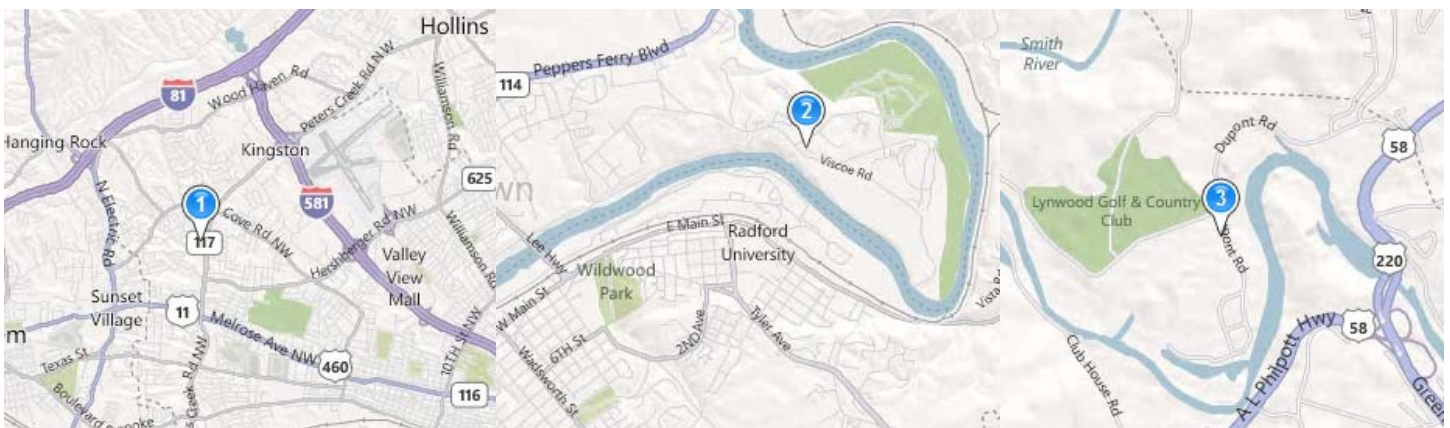
(located in the New River Competitiveness Center)

Facsimile +1 206 202.1190

3. Piedmont Office 1024 DuPont Road, Martinsville VA 24115

(located in the Henry County Public Safety Training Center)

Facsimile +1 206 984.3120



Mission

The mission of the Western Virginia EMS Council is to facilitate regional cooperation, planning and implementation of an integrated emergency medical services delivery system.

Regional EMS Councils in the Code of Virginia (§32.1-111.11)

Regional emergency medical services councils

The Board [of Health] shall designate regional emergency medical services councils which shall be authorized to receive and disburse public funds. Each council shall be charged with the development and implementation of an efficient and effective regional emergency medical services delivery system.

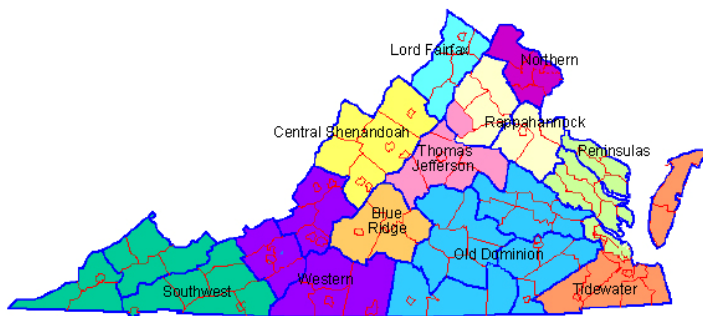
The Board shall review those agencies that were the designated regional emergency medical services councils. The Board shall, in accordance with the standards established in its regulations, review and may renew or deny applications for such designations every three years. In its discretion, the Board may establish conditions for renewal of such designations or may solicit applications for designation as a regional emergency medical services council.

Each council shall include, if available, representatives of the participating local governments, fire protection agencies, law-enforcement agencies, emergency medical services agencies, hospitals, licensed practicing physicians, emergency care nurses, mental health professionals, emergency medical technicians and other appropriate allied health professionals.

Each council shall adopt and revise as necessary a regional emergency medical services plan in cooperation with the Board.

The designated councils shall be required to match state funds with local funds obtained from private or public sources in the proportion specified in the regulations of the Board. Moneys received directly or indirectly from the Commonwealth shall not be used as matching funds. A local governing body may choose to appropriate funds for the purpose of providing matching grant funds for any council. However, this section shall not be construed to place any obligation on any local governing body to appropriate funds to any council.

The Board shall promulgate, in cooperation with the State Emergency Medical Services Advisory Board, regulations to implement this section, which shall include, but not be limited to, requirements to ensure accountability for public funds, criteria for matching funds, and performance standards.



Left: WVEMS is one of 11 regional EMS councils in Virginia. It serves the fourth, fifth and twelfth planning districts of Virginia, encompassing the following localities: Alleghany County, Botetourt County, Craig County, Floyd County, Giles County, Franklin County, Henry County, Montgomery County, Patrick County, Pittsylvania County, Pulaski County, Roanoke County, City of Covington, City of Danville, City of Martinsville, City of Radford, City of Roanoke, City of Salem

Leadership and Oversight

Board of Directors

Representing

Ford S. Wirt, President*	Floyd County
Steven D. Eanes, Vice President*	Henry County
Stephen G. Simon, Secretary*	Roanoke County
R. Carey Harveycutter, Treasurer*	5th Planning District At-Large
Steve Allen	Patrick County
William O. Altman	City of Roanoke
Steven Ausband, MD	Virginia ACEP
John E. Beach	City of Salem
James L. Cady, Sr.*	Craig County
Tim Duffer	Pittsylvania County
Andrew A. Galvin, N.P.	Emergency Nurses Association
W. Steven Davis	Giles County
Timothy Dick	City of Covington
Colt Hagmaier	Botetourt County
Kevin Hamm	Montgomery County
Daryl Hatcher	Franklin County
Rickey Hodge	Va. Assoc. of Vol. Rescue Squads
Michael Jefferson	City of Danville
Charles J. Lane, M.D., FACEP	Regional Medical Director
Robert H. Logan, Ph.D.* (non-voting)	Executive Director
Ryan Muterspaugh	Alleghany County
Morris D. Reece	Hospital System Representative
Kristopher Shrader	City of Martinsville
Lee Simpkins	City of Radford
L. Joseph Trigg*	Pulaski County
J. Dale Wagoner*	12th Planning District At-Large
(currently vacant)	4th Planning District At-Large

*Executive committee

Committee & Program Leaders

Executive Committee	Ford Wirt, Chair
Medical Direction Committee	Charles Lane, M.D., Regional Medical Director/Chair
General Performance Improvement Committee	Charles Lane, M.D., Chair
Trauma Performance Improvement Committee	Charles Lane, M.D., Chair
Personnel and Training Committee	Steve Simon, Chair
Near Southwest Preparedness Alliance (NSPA)	Carol M. Gilbert, M.D., Chair
Critical Incident Stress Management Team (CISM)	Mary Jones, Team Administrator
Allied Resources Committee	Morris Reece, Chair
Communications Committee	Jim Cady, Sr., Chair
Pharmacy Committee	Joe Ciezkowski, R.Ph., Chair

All leadership positions current as of 12/01/2011

Significant Accomplishments

Provider Services & Recognitions

- Provided volunteer and career referrals and training course information in response to daily telephone and electronic inquiries.
- Conducted an annual EMS awards program at the Salem Civic Center. Recognized providers and agencies in ten categories of regional EMS awards. Submitted regional award recipients as statewide EMS award nominees. Last year, three regional winners went on to win Governor's awards.
- Coordinated and provided a point of contact for a regional critical incident stress management (CISM) Team consisting of some 50 volunteer mental health and peer public safety debriefers. Quarterly team meetings were conducted, along with several special events including a certification CISM training program.
- Maintained Critical Incident Stress Management (CISM) Team accreditation through the Virginia Office of EMS.
- Responded to nine requests for CISM team interventions, and provided numerous educational sessions.
- Maintained statewide "Virginia EMS Jobs" web database for the Virginia Office of EMS.
- Managed multi-regional Consolidated Test Site registration system. (WVEMS staff coordinated development of this system.)
- Served as EMS infrastructure point of contact for all EMS agencies, providers, hospitals, and local governments in the region and beyond.

EMS Education & Advocacy

- Provided standardized testing of enhanced and intermediate students exiting from initial certification courses.
- Coordinated 29 OEMS consolidated test sites throughout the region, registering 806 students for testing.
- Conducted five Regional EMS Instructor Network meetings, including ALS coordinators, emergency operations instructors and EMT instructors.
- Provided a loaner library of EMS educational videos and training equipment.
- Participated in program planning for the annual statewide EMS symposium held November 2011 in Norfolk attended by some 1500 EMS providers, nurses and physicians.
- Offered four EMT-Enhanced courses, enrolling 37 students.
- Offered one EMT-Intermediate course enrolling 29 students.
- Partnered agency in accredited EMT-Intermediate programs at the Roanoke Valley Regional Fire-EMS Training Center, New River Valley Training Center, and the Franklin County Department of Public Safety.
- Partnered with community colleges across the region to offer college credits for EMS educational programs at no additional cost to students.
- Offered 380 hours of ALS and BLS continuing education, including the following:
 - 342 hours through certification programs; 24 hours BLS category 1 CE; four AMLS courses, two PEPP courses
 - Offered four International Trauma Life Support (ITLS) courses.
- Actively participated in numerous State-level committees and work groups.
- Served on advisory boards for local college and university programs.
- Participated in pre-hospital care committees for hospitals in the region.
- Conducted six peer review committee meetings

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EMS Education & Advocacy—continued

- Participated in disaster exercises in six localities, including multi-jurisdictional drills.
- Promoted and co-sponsored numerous educational events across the region.
- Served as site evaluator for other planned EMT-Intermediate programs.
- Participated in statewide committee reviewing BLS testing procedures and scenarios & charged with writing guidelines for VA EMS providers.
- Staff members attended national EMS conferences.
- Maintained professional liability insurance on all students enrolled in council-sponsored ALS training programs, saving students some \$15,000.
- Field training staff maintained certification as instructors in PEPP, AMLS and ITLS.
- Maintained regional web-based training calendar.
- Staff served as state affiliate faculty for ITLS.
- Membership on advisory boards pursuing accreditation for Intermediate education in Botetourt and Alleghany.
- Active participation in regional Heart Alert committees.
- Assumed staff responsibility of BLS test site coordination to ensure uniformity and provide better customer service at BLS test sites.

Medical Direction and Performance Improvement

- Updated the regional ambulance diversion policy.
- Maintained a regional ambulance supply exchange and drug restocking policy.
- Continued projects for regional EMS performance improvement.
- Planned for and developed new Regional Operational Guidelines, set for implementation in March, 2012.
- Provided suggested guidelines for quality improvement programs in agencies.
- Endorsed 12 ALS Coordinators for recertification. according to regional guidelines.
- Reestablished and established new clinical education agreements at 13 hospitals in the region.
- Expanded clinical education to other healthcare entities beyond hospitals.
- Endorsed 8 new Operational Medical Directors and/or Physician Course Directors for the WVEMS region.
- Worked with two Operational Medical Directors in obtaining re-endorsement of their OMD status.
- Continued and expanded the role of regional Performance Improvement Committees.
- Developed and adopted a Regional Stroke Triage Plan.

Communications & Facilities

- Coordinated a region-wide system of drug and IV box exchange, incident reporting and follow-up, and provision of inventory control.
- Maintained a regional waiver exempting EMS agencies from registration for testing of blood with portable glucometry equipment, saving EMS agencies some \$17,500 every two years.
- Maintained a regional Controlled Substances Registration Permit to allow EMS agencies to carry IV fluids and other controlled substances as “restock items” saving individual agencies some \$11,500 every year.
- Provided continuing liaison between EMS agencies, medical directors and emergency department nurse managers related to the exchange of supplies and equipment.
- Provided technical assistance and regional administration for VHASS and Web-EOC, web-based ambulance diversion and mass casualty incident management software.
- Supported statewide “WeatherSafe” program for sharing air medical turn-down information.
- Continued ownership and operation of various regional EMS communication systems.

Public Information and Referral

- Maintained an electronic mailing list with over 2,000 subscribers to provide frequent notices of training events and other timely EMS news.
- Served as a clearinghouse for regional and state EMS pamphlets, posters, displays and other public relation and recruitment materials.
- Regularly updated the council's Internet web site www.wvems.org with current EMS news and events, education, recruitment, CISM information, committee minutes and council reports, trauma triage information, mass casualty information, General Assembly information and relevant EMS links.
- Maintained and used large floor-standing display unit that is available for use throughout the region.
- Published various flyers, for courses, service offerings, etc. throughout the year.
- Conducted various surveys and published results.

Mass Casualty and NSPA

WVEMS partnered with the Near Southwest Preparedness Alliance (NSPA) to continue building regional medical surge capability through systematic planning, procurement of needed supplies and equipment, and training and exercise efforts. These activities were based on the regional Hazard Vulnerability Analysis, which ranked anticipated risks in the following order:

1. Evacuation (within hospitals, among hospitals, and into the region from other areas)
2. Weather-related events
3. Mass Casualty incidents (CBRNE, including Burn/ Trauma events)
4. Hospital resiliency
5. Pandemic influenza
6. Hazmat Incidents

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2011: HDR image of the Roanoke Valley

Mass Casualty and NSPA—continued

Specific Response & Preparedness Activities Included

- Enhanced morgue capacity at three regional hospitals.
- Purchased pediatric ventilator for Bedford Memorial.
- Purchased humidifiers and free-standing AC units for regional cache, stationed and maintained at Roanoke Memorial Hospital.
- Planned for at-risk populations in conjunction with regional partners annual NSPA Regional Collaborative Workshop.
- Established Alternate Care Center at Riner Fire Dept.
- Deployed regional STIP at Martinsville Raceway and Lynchburg Air Show.
- Began power resiliency projects for 4 regional hospitals and water resiliency projects for 10 regional hospitals
- Supported MRC and related projects in three health districts. The MRC Coordinator for the Roanoke-Alleghany and New River Valley Health Districts is housed within the WVEMS/NSPA offices in Roanoke. The Central Virginia Health District MRC Coordinator is based in the Blue Ridge EMS Council offices.
- Installed and utilized RIOS interoperable communications system.

Training & Educational Activities Included

- Basic Disaster Life Support; Communications (RIOS and BGAN) training; Hazmat training; Mobile medical asset (including STIP) training
- Disaster Medicine and Emergency Preparedness course for physicians
- VDH epidemiology conference
- Best practice visits to Moses Cone, INOVA Fairfax and Johns Hopkins hospitals; Regional Pediatric Champion Program
- NDMS integrated summit
- Regional Collaborative Workshop
- State Hospital Emergency Preparedness Forum
- High Impact/High Profile events training
- Annual VDEM conference
- VDH integrated summit
- Meta-Leadership summit

Other Planning and Coordinating Activities

- Published periodic financial reports, quarterly program reports, an annual report, frequent committee minutes and other training and event announcements.
- Provided a consistent point of contact for EMS providers, agencies and local governments.
- Provided representation on a number of local, regional and statewide committees and boards.
- Provided technical assistance to applicants for Virginia EMS Financial Assistance (RSAF) grants and provided standardized grading for all EMS grants submitted to OEMS from agencies within the WVEMS region.
- Gained approval for \$1,616,181 in RSAF grant awards to agencies within the region.
- Revised regional EMS strategic plan and other regional planning documents.

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Other Planning and Coordinating Activities—continued

- Provided fiscal and administrative support for the Alliance for Emergency Medical Education and Research, co-sponsor of the Virginia EMS Symposium and other events.
- Provided fiscal and administrative support to the Near Southwest Preparedness Alliance (NSPA) to manage some \$1 million in federal hospital preparedness program (HPP) funds.
- Continued coordination of the Medical Reserve Corps (MRC) in two health districts within the region for the Virginia Department of Health (VDH).
- Led a project to revise and improve a statewide web-based hospital preparedness program (HPP) resource management and inventory tool.
- Provided logistical support and storage for numerous hospital preparedness assets, including a communications trailer, interoperable communications equipment, secondary RHCC, generators, and supplies.



2011: Carilion Life Guard 11 prepares for departure!

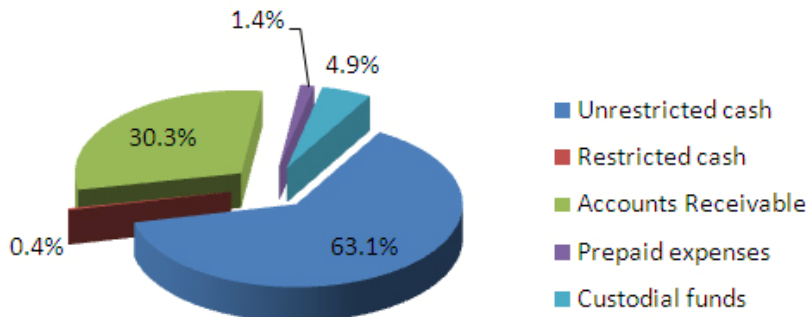
The Western Virginia EMS Council, Inc. was chartered in 1975 under the laws of the Commonwealth of Virginia. The council is a private, not-for-profit, tax exempt organization as described in section 501 (c)(3) of the Federal IRS Code. Donations to the council are tax deductible.

Federal Employer Identification Number (EIN): 54-1010118

DUNS Number: 011866139

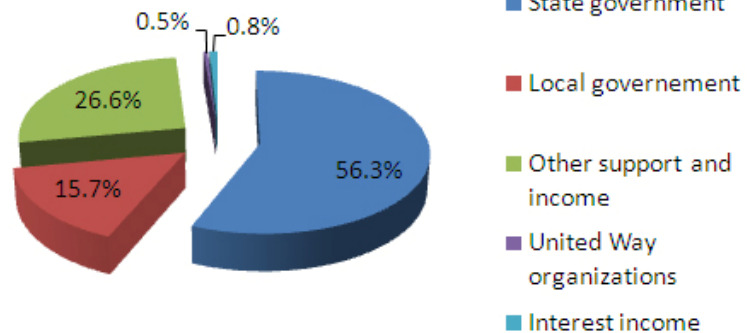
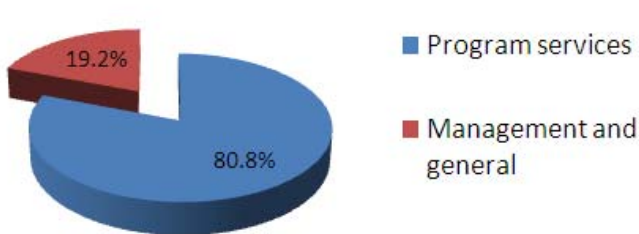
Balance Sheet

June 30...	2011	2010
Assets		
Current Assets		
Unrestricted cash and cash equivalents	358,256	423,453
Restricted cash	2,041	38,184
Accounts Receivable	171,940	75,276
Prepaid expenses	7,780	9,735
Custodial funds	27,775	29,978
Total current assets	567,792	576,626
Property and equipment - net	443,099	415,924
	1,010,891	992,550
Liabilities and Net Assets		
Current Liabilities		
Accounts Payable	36,083	34,924
Accrued salaries and wages	32,480	25,864
Custodial funds liability	27,775	29,978
Total liabilities	96,338	90,766
Net Assets		
Unrestricted	906,885	826,374
Unrestricted - designated	5,627	55,036
Total unrestricted	912,512	881,410
Temporarily restricted	2041	20374
Total net assets	914,553	901,784
	1,010,891	992,550



Statement of Activities

June 30...	2011	2010
Unrestricted revenues and support		
State government	475,390	478,630
Local government	132,652	133,437
Other support and income	224,431	267,117
United Way organizations	4,041	4,587
Interest income	7,150	10,858
Net assets released from restrictions	362,547	424,035
	1,206,211	1,318,664
Expenses		
Program services	949,197	1,030,400
Management and general	225,912	251,947
	1,175,109	1,282,347
Change in unrestricted net assets	31,102	36,317
Temporarily restricted net assets		
Federal grant revenue	344,214	362,976
Net assets released from restrictions	(362,547)	(424,035)
Change in temporarily restricted net assets	(18,333)	(61,059)
Change in net assets	12,769	(24,742)
Net assets - beginning of year	901,784	926,526
Net assets - end of year	914,553	901,784



Major Sources of Support

In addition to revenue from tuitions, fees and payments for other services, financial and in-kind support is provided by:

Commonwealth of Virginia
 Alleghany County
 Botetourt County
 Craig County
 Floyd County
 Giles County
 Franklin County
 Henry County
 Montgomery County
 Patrick County
 Pittsylvania County
 Pulaski County
 Roanoke County
 City of Covington
 City of Danville
 City of Martinsville
 City of Radford
 City of Roanoke
 City of Salem
 VA Medical Center—Salem

Virginia Rescue Squad Assistance Fund
 US Office of the Assistant Secretary for Preparedness and Response (ASPR), DHHS
 Greater Alleghany United Fund (partner)
 United Fund of Giles County (partner)
 United Way of Roanoke Valley (eligible)
 United Way of Montgomery, Radford & Floyd (eligible)
 Carilion Clinic:
 Carilion Roanoke Memorial Hospital
 Carilion New River Valley Medical Center
 Carilion Giles Memorial Hospital
 Carilion Franklin Memorial Hospital
 Carilion Clinic Patient Transportation
 LewisGale Medical Center—Salem
 LewisGale Alleghany
 LewisGale Pulaski
 LewisGale Montgomery
 Danville Regional Medical Center
 Memorial Hospital of Martinsville and Henry County
 Pioneer Community Hospital

A number of other supporters provided discounts for goods and services, contributions and other in-kind donations. We truly thank all of our contributors, events sponsors and supporters!

Our Vision

The EMS system in the Western Virginia region will...

- provide access for victims for injury and sudden illness via a **universally available enhanced 9-1-1** emergency telephone system.
- provide for **dispatcher-provided telephone assistance** (pre-arrival instructions) to callers with life-threatening emergencies.
- provide for **timely response** of first responder and transportation, personnel and vehicles through a system of predetermined minimum response intervals, monitoring and quality assurance-performance improvement.
- provide for **high-quality, prehospital treatment** of patients as a result of standardized basic life support training programs, accredited advanced life support educational and mentoring programs, standardized testing programs, frequent and timely continuing education programs, and quality assurance-performance improvement programs.
- provide **triage and transport**, and transfer if necessary, of patients to the most appropriate facility based on predetermined universally accepted transport guidelines and protocols.
- provide **timely emergency department care** with emergency physicians, emergency nurses and other support personnel and **trauma care**, when necessary, with personnel and resources associated with a designated trauma center.
- provide **communications system** capabilities that enable EMS personnel to communicate with all other EMS personnel throughout the region, their dispatchers, all hospital emergency departments and other public safety personnel.
- provide resources and capabilities in order to appropriately respond to and manage large disasters and **mass casualty** situations.
- ensure EMS system **viability and excellence** through the effective use of state, local and private funding sources, research, medical direction and collaboration of all persons and agencies involved in the provision of emergency medical services.

\$4.25-for-Life Funding to Localities

In 2006, the full funding generated by the “\$4-for-Life” vehicle registration add-on was allocated in its entirety to EMS. For several years, a portion of this fund has been diverted to other areas, but beginning July 1, 2006, the full amount came back to EMS. Of this amount, 26% is returned directly to the localities. The allocation is based on DMV collections, determined by the number of eligible vehicles registered in each jurisdiction. In the 2009-2010 session, this program was increased to \$6.25, but the additional revenue does not go to benefit EMS at this time.

Jurisdiction	FY-04 Payment	FY 11 Payment	% Increase FY04 vs FY11
Alleghany County	8,080.50	17,524	116.9%
Botetourt County	15,843.50	36,851	132.6%
Covington	2,755.50	5,464	98.3%
Craig County	2,694.50	5,785	114.7%
Danville	17,991.00	34,816	93.5%
Floyd County	7,271.50	16,823	131.4%
Franklin County	25,055.50	57,215	128.4%
Giles County	7,836.63	16,923	115.9%
Henry County	26,352.00	54,334	106.2%
Martinsville	5,811.50	12,028	107.0%
Montgomery County	31,116.50	69,536	123.5%
Patrick County	9,333.50	19,847	112.6%
Pittsylvania County	29,777.00	65,057	118.5%
Pulaski County	15,495.00	32,967	112.8%
Radford	4,555.00	9,329	104.8%
Roanoke City	39,259.50	81,241	106.9%
Roanoke County	43,007.63	95,237	121.4%
Salem	11,127.50	23,201	108.5%
WVEMS Region	303,363.76	654,178	115.6%



From Page 14: Left: Debbie Akers (center) receives the 2011 Governor's Outstanding Educator award from Virginia Health Commissioner Dr. Karen Remley, Public Safety Secretary Marla Decker, OEMS Director Gary Brown, and Assistant Director Scott Winston. Above: Regional EMS award winners.

Regional EMS Awards

In June 2011, an awards ceremony was held at the Salem Civic Center. The 10 regional winners were nominated for state **Governor's EMS Awards**. (see photo on previous page, Page 13)

This year's capstone **Excellence in EMS** award went to Steve Simon of the Roanoke County Fire and Rescue Department. Steve's exemplary involvement in EMS spans more than 25 years, and includes service as a volunteer, career provider, officer, educator and leader. Steve gives his time and talents to WVEMS as he serves in many capacities, including his current role as secretary of its board of directors. His EMS career has included many contributions at the local, regional, statewide and national levels.



WVEMS president Ford Wirt presented the Outstanding EMS Provider award to Claude Cobler of



Bassett Rescue Squad. Claude has served as an active EMS provider and leader since 1966, and has taught EMT courses for over 35 years.



Dr. Jim Powers, Operational Medical Director for the Virginia Tech Rescue Squad, was named Outstanding EMS Physician. Dr. Powers works as an emergency physician in Blacksburg, and chairs the emergency medicine program at the Edward Via Virginia College of Osteopathic Medicine. He is a Virginia Tech alumnus, and a life member of VTRS. His agency benefits greatly from his hands-on approach to medical direction.

Three WVEMS regional award winners went on to receive Governor's Awards in November 2010.

Roanoke Fire-EMS Deputy Chief **Billy Altman** received the capstone "Excellence in EMS" for 2010.

2011 Regional EMS Award Winners:

Excellence in EMS—Steve Simon

Division Chief, Roanoke County Fire & Rescue

Outstanding Administrator—Bill Duff

Battalion Chief, Roanoke County Fire & Rescue

Outstanding EMS Agency Smith River Rescue Squad

Outstanding EMS Physician—Jim Powers, DO

OMD, Virginia Tech Rescue Squad

Outstanding EMS Educator—Paul "PJ" Fleenor

Program Representative, Virginia OEMS and EMT Instructor

Outstanding Contribution to EMS by a Nurse

Adam Berger, RN

LewisGale Hospital—Montgomery

Outstanding EMS Provider—Claude Cobler

Bassett Rescue Squad

Outstanding Contribution to EMS for Children Christiansburg Police Department

Community Outreach Programs for Children

Outstanding Contribution to EMS by a Telecommunication Officer—Terry Kelly

Pittsylvania County E-911

Scholarship for Outstanding Contribution to EMS by a High School Senior—Christopher Shelor

Long Shop-McCoy Rescue Squad

Chief Altman was recognized for his outstanding service as a volunteer and career EMS provider, educator, administrator and leader. **Debbie Akers**, Regional Education Coordinator for the Western Virginia EMS Council, received the Governor's award for Outstanding EMS Educator. Her work in EMS education began in 1976 when she served as a first aid instructor, and continues to present. The **Roanoke County Fire & Rescue Department** received the Governor's award for Outstanding EMS Agency. It was recognized for its many outreach programs and its record of outstanding service to the citizens of Roanoke County. (see photo on previous page, Page 13)



FY2011