

WVEMS BOARD OF DIRECTORS
Thursday, December 8, 2016
Salem Civic Center
Parlor C

1001 Roanoke Boulevard
Salem VA 24153

Executive Committee - 1:30 PM
Full Board - 2:00 PM

1. Call to Order
2. Introduction of Guests
3. Secretary's Report
 - a. Minutes - September 08, 2016 meeting *pdf* **Sept 8, 2016 Minutes**
4. Treasurer's Report
 - i. FY 2017 Year-to-Date Financial Report - Unaudited *pdf* **TREASURER'S REPORT November 2016**
 - ii. FY 2016 Financial Reports and Audit (John Hash, Partner, Brown Edwards CPAs) *pdf* **2016 Financial Report WVEMS Final**
5. Reports and Action Items
 - . Executive Committee
 - i. Annual Report *pdf* **2016 Annual Report**
 - ii. Continuity of Operations Plan (COOP)
 - a. Medical Direction
 - i. Protocol Revisions - Progress Report (Charles Lane, MD/Cathy Cockrell)
 - ii. Education Workgroup - JCHS & NRV EMT-I Progress Report (Steve Simon/Staff)
 - b. Performance Improvement Workgroups (Meets same day as Board) (Cathy Cockrell)
 - i. Schedule and Topics for 2017 PI Projects - General and Trauma
 - c. Near Southwest Preparedness Alliance (NSPA) - (David Linkous)
6. State EMS Advisory Board Report (Jason Ferguson) *pdf* **AB Report (August 2016)**

7. EMS Financial Assistance - Current Cycle Report (Rob Logan) *pdf* **RSAF Board Report
12 2016**
8. New Business
 - i. Election of Officers *pdf* **REPORT OF THE NOMINATING COMMITTEE
Dec 2016**
 - ii. Special Presentation
9. President's Report
10. Staff Reports
11. Public comments
12. Adjourn

**WESTERN VIRGINIA EMERGENCY MEDICAL SERVICES COUNCIL
BOARD OF DIRECTORS**

DRAFT MEETING MINUTES

DATE: December 8, 2016

LOCATION: Salem Civic Center, Parlor C

Directors Present

Jim Cady, Sr.
Joe Coyle
Steve Davis
Steve Eanes
Jason Ferguson
Mike Jefferson
David Linkous
Rob Logan
Ryan Muterspaugh
Matt Rickman
Kris Shrader
Steve Simon
Eric Stanley, DO
Joe Trigg
Valerie Tweedie
Dale Wagoner
Ford Wirt

Staff Present

Cathy Cockrell
Gene Dalton
Mike Garnett
Chris Christensen
Sandi Short

Guests Present

None

TO ORDER

President Ford Wirt called this regular meeting of the Board of Directors to order at 2:00 PM.

SECRETARY'S REPORT

President Wirt presented minutes of the last meeting as distributed. He called for any corrections or additions.

Motion was made and seconded to approve. **Motion CARRIED.**

TREASURER'S REPORT

The Executive Director, in the absence of the Treasurer, presented the FY 2017 year-to-date treasurer's report. He noted that all was in order. He called the board's attention to the fact that the salary account appears somewhat high, but the number reported includes the portion for which NSPA reimburses the Council, which is reflected as "NSPA offset revenue" in the revenue section of the report.

Motion was made and seconded to receive the report year-end report. **Motion CARRIED.**

The executive director presented the FY2016 annual financial reports. He noted that the audit did not identify any deficiencies and that there were no adverse findings.

Motion was made and seconded to accept and adopt the FY 2016 financial reports. **Motion CARRIED.**

EXECUTIVE COMMITTEE

The executive committee met prior to the regular meeting.

The 2016 Annual Report was presented and copies were distributed. Motion was made and seconded to approve the annual report as distributed. **Motion CARRIED.**

The Continuity of Operations Plan was presented for affirmation. It was purposely not listed on the Board's public page. It is unchanged since last year.

Motion was made and seconded to reaffirm the Continuity of Operations Plan. **Motion CARRIED.**

The executive director asked for permission to apply for a USDA rural development matching grant to replace part of the WVEMS fleet.

It was moved and seconded to authorize staff to apply for one or more USDA matching grants to replace WVEMS staff vehicles. The motion was seconded and **CARRIED.**

MEDICAL DIRECTION COMMITTEE

Protocol Updates

Cathy Cockrell reported on the status of protocol updates. She advised that a major workgroup meeting was planned for soon after the holidays, and that a draft would be available soon thereafter for further review.

Education Workgroup

Steve Simon and Cathy Cockrell reported that the cooperative WVEMS/JCHS EMT-Intermediate program is continuing successfully.

Mike Garnett reported that the EMT-I program in the New River Valley is underway and is running according to schedule.

PERFORMANCE IMPROVEMENT COMMITTEE

Trauma and General Performance Improvement Subcommittees

Cathy Cockrell reported for the General and Trauma Performance Improvement Committees. Both met today.

The PI Committees have developed a schedule of topics for research projects for 2017. A list was distributed.

NSPA

David Linkous, board member representing the Near Southwest Preparedness Alliance, reported for NSPA. A recent CHEC course was provided in the Eastern region. This was a success. An annual board meeting and exercise is planned for June 20. He reported on several other activities planned for NSPA.

EMS Advisory Board

Jason Ferguson provided a written report which was distributed, and is attached to and made a part of these minutes. He reported on several matters discussed at the November Advisory Board meeting held in Norfolk, including a report from Mike Berg on the current status of FBI processing of fingerprint checks, a planned series of town hall meetings, and the current status of revisions to the EMS rules and regulations.

EMS Financial Assistance

A report on the current cycle FARC recommendations was provided on the Board web page, and is attached to and made a part of these minutes. Extensive discussion was held concerning the current makeup and operation of FARC, the state committee that makes final recommendations to the Health Commissioner for RSAF funding.

The Roanoke Women's Foundation grant for 12-lead transmission was not funded, so there was no WVEMS request for additional funding for this project.

NEW BUSINESS

The executive director reported for Carey Harvey on behalf of the nominating committee. All officers are elected for two-year terms. The slate of officers nominated was included with the posted documents on the board's web page. Nominations from the committee are:

OFFICE	NOMINEE	PLANNING DISTRICT
President	Steve Simon	5th
Vice President	Dale Wagoner	12th
Secretary	Joe Trigg	4th
Treasurer	Joe Coyle	4th
Exec. Comm. at-large 4th	Steve Davis	4th
Exec. Comm. at-large 5th	Jason Ferguson	5th
Exec. Comm. at-large 12th	Mike Jefferson	12th

The floor was opened for additional nominations.

President Wirt called three times for additional nominations. Being none, a motion was made and seconded to close nominations. Motion **CARRIED**.

A motion was made and seconded to elect the slate of nominees and presented by the nominating committee. Motion **CARRIED** and the officers listed above were elected for calendar 2017 and 2018.

SPECIAL PRESENTATION

Vice President Steve Eanes took the floor and presented a chronology of some of the highlights of WVEMS' history since its founding in 1975. He then presented outgoing president Wirt with a gift, an engraved watch, and offered thanks for his many years of service as president. Ford has served as Chairman or President since May, 1987. Ford made remarks and thanked the board for making WVEMS a success.

A similar gift will be presented to Carey Harvey cutter for his service as Treasurer since 2000.

PRESIDENT'S REPORT

The President reported 61 percent of directors in attendance.

STAFF REPORTS

Rob Logan reported on a new safe harbor published in the Federal Register that codifies a municipal EMS system's right, under certain circumstances, to waive co-pays or to discount charges to its citizens in a portion of tax revenue supports the EMS system. He referred the board to the Page Wolfberg & Wirth website for a complete explanation.

<https://www.pvwemslaw.com/>

Cathy Cockrell - None

Chris Christensen – None

Mike Garnett – None

Gene Dalton - None

Sandi Short – None

HEARING OF THE PUBLIC

None

Being no further business, the meeting was adjourned at 2:55 PM.

/s Robert Logan, Executive Director

WESTERN VA EMS COUNCIL
UNAUDITED TREASURER'S REPORT
AS OF NOVEMBER 30, 2016

REVENUES	BUDGET	TOTAL	% YTD
STATE GOVERNMENT (OEMS CONTRACT)	440,000	103,863	23.61%
LOCAL GOVERNMENT	133,000	6,556	4.93%
UNITED WAYS	3,000	708	23.61%
CONTRIBUTIONS	1,000		0.00%
NSPA/VHHA PROGRAM REVENUE	534,000	215,371	40.33%
DIRECT PROGRAM INCOME (Tuitions, grants, VDH/OEMS)	215,000	79,901	37.16%
VA EMS SYMPOSIUM		7,500	
NSPA OFFSET REVENUE (Contract for services)	12,000	22,609	188.41%
RENT INCOME (NSPA)	18,000	7,500	41.67%
OTHER INCOME - SALE OF ASSET	0		0.00%
CREDIT CARD HOSTING FEE		331	
ROLLOVER FROM FY13 SURPLUS (BOARD APPROVED)	0		0.00%
INVESTMENT / GAINS/LOSSES	14,000	(1,967)	-14.05%
TOTAL REVENUES	1,370,000	442,372	32.29%
EXPENDITURES	BUDGET	TOTAL	% YTD
SALARIES / WAGES (WVEMS)	430,000	199,489	46.39%
PAYROLL TAXES (FICA)	32,895	15,484	47.07%
VEC	1,200	56	4.63%
403(b) / RETIREMENT	21,500	8,051	37.45%
HOSPITAL / MEDICAL INSURANCE	54,000	19,734	36.54%
LIFE INSURANCE/DISABILITY	10,000	4,714	47.14%
DENTAL INSURANCE	4,000	1,153	28.82%
PROFESSIONAL SERVICES/FEES	8,500	8,774	103.23%
MEDICAL DIRECTION ASSISTANCE	1,000		0.00%
MAINTENANCE / REPAIRS / SERVICE CONTRACTS	2,000	1,513	75.63%
OCCUPANCY (Utilities, repairs, NRV rent etc.)	22,000	8,550	38.87%
POSTAL / SHIPPING	2,000	1,023	51.15%
TELECOMMUNICATIONS	14,000	4,924	35.17%
SUPPLIES (ADMIN)	9,705	2,761	28.45%
EQUIPMENT	9,000	1,666	18.51%
INSURANCE	8,000	10,494	131.18%
DIRECT PROGRAM EXPENSES	162,000	46,864	28.93%
NSPA/VHHA/MRC PROGRAM EXPENSES	509,000	215,371	42.31%
PRINTING / PUBLICATIONS	3,500	996	28.45%
TRAVEL / LODGING	6,000	1,202	20.04%
FUEL/VEHICLE MAINTENANCE	15,000	5,060	33.73%
MEETING SUPPORT	1,200	256	21.35%
DUES / MEMBERSHIP FEES	1,600	1,034	64.63%
STAFF DEVELOPMENT	12,500	2,358	18.86%
CISM PROGRAM COSTS	2,000	90	4.48%
COMMUNICATION SITE RENTAL	8,100	3,375	41.67%
COMMUNICATIONS WIRELINES	7,500	3,887	51.83%
COMMUNICATIONS MAINTENANCE	4,000	1,200	30.00%
COMMUNICATIONS UTILITIES	800	174	21.75%
COMMUNICATIONS INSURANCE	3,000	1,250	41.67%
COMMUNICATIONS EQUIPMENT	4,000		0.00%
TOTAL EXPENDITURES	1,370,000	571,502	41.72%

PROGRAM

REVENUE (PROGRAM ACCOUNTS)	TOTAL
OEMS FUNDS - INTERMEDIATE	6,398
OEMS FUNDS - ENHANCED	
OEMS FUNDS - ADJUNCT	
OEMS FUNDS - CARDIAC	
OEMS FUNDS - CT TRANSITION	
OEMS FUNDS - SHOCK TRANSITION	
OEMS FUNDS - ALS CE	
OEMS FUNDS - BLS	
OEMS FUNDS - EMT	
PROGRAM SERVICE FEES	120
PROTOCOL, ETC. SALES	
TEXTBOOK SALES	7,304
CONSOLIDATED TESTING	12,245
DRUG BOX ENTRANCE FEES	4,275
GRANTS & SPECIAL PROJECTS	
SALES - CONSUMER GOODS	
WEB DATABASE	
PROCESSING FEES	
PROGRAM FEES - MONROE HEALTH CENTER	
PROGRAM TUITION - INTERMEDIATE	49,500
PROGRAM TUITION - ENHANCED	
PROGRAM TUITION - ADJUNCT	
PROGRAM TUITION - CARDIC	
PROGRAM TUITION - OTHER	
PROGRAM TUITION -	
PROGRAM TUITION - NRVTC	
ID CARD SALES	60
COMMUNITY COLLEGE COURSE REVENUE	
TOTAL REVENUES	79,901

EXPENSES (PROGRAM ACCOUNTS)	TOTAL
CONTRACTS FOR SERVICES (INTERMEDIATE)	20,920
CONTRACTS FOR SERVICES (ENHANCED)	
CONTRACTS FOR SERVICES (ADJUNCT)	
CONTRACTS FOR SERVICES (CARDIAC)	
CONTRACTS FOR SERVICES (SPEC. PROJ.)	
CONTRACTS FOR SERVICES (ALS TEST)	125
CONTRACTS FOR SERVICES (CTS)	8,652
CONTRACTS FOR SERVICES (CE WEEKENDS)	
CONTRACTS FOR SERVICES (DRUG TESTING)	3,889
CONTRACTS FOR SERVICES (EMT)	
CONTRACT FOR SERVICES (MONROE HEALTH CENTER)	
PAYROLL TAXES (FICA)	
VEC	
RENT - NRV TRAINING CENTER	685
POSTAGE (NRVTC)	
SUPPLIES (Programs)	5,304
SUPPLIES (CTS)	1,264
SUPPLIES (ALS TESTING)	
SUPPLIES (EDUCATION)	693
INSURANCE	550
TRAVEL (MONROE HEALTH CENTER)	
PRINTING / PUBLICATIONS (EDUCATION)	
PRINTING / PUBLICATIONS (NRVTC)	
AMLS CERTIFICATES AND CARDS	
GRANTS & SPECIAL PROJECTS	
DRUG BOX EXCHANGE	3,810
CREDIT CARD DISCOUNT	972
MERCHANDISE FOR RESALE	
ID CARD PROGRAM	
COMMUNITY COLLEGE FEES	

WESTERN VIRGINIA EMS COUNCIL, INC.

Balance Sheet
November 30, 2016

ASSETS

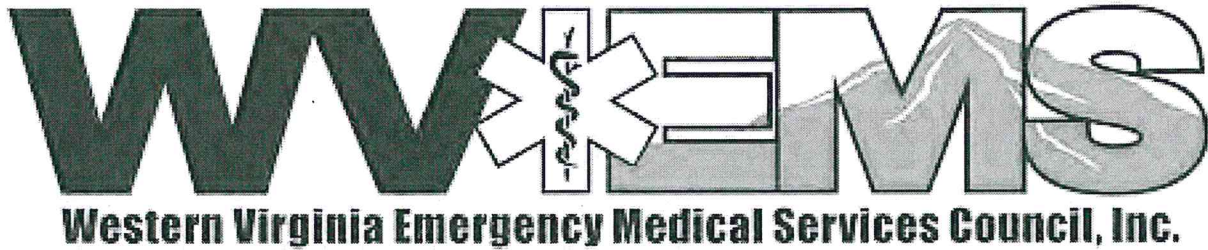
Current Assets		
FSA CASH	\$	1,584.85
SUNTRUST CHECKING		147,237.63
SUNTRUST PAYROLL		39,103.85
BNC MONEY MARKET		65,806.49
ACCOUNTS RECEIVABLE		14,466.16
TUITION RECEIVABLE		2,000.00
		<hr/>
Total Current Assets		270,198.98
Property and Equipment		
		<hr/>
Total Property and Equipment		0.00
Other Assets		
FRANKLIN TEMPLETON-AMERIPRISE		131,346.63
COMMUNICATIONS EQUIPMENT		147,760.59
MISCELLANEOUS EQUIPMENT		321,713.64
OFFICE EQUIPMENT		34,391.84
BUILDING		175,223.00
LAND		201,600.00
BLDG. IMPROVEMENTS		74,792.94
GENERATOR BUILDING & EQUIPMENT		16,672.25
ACCUMULATED DEPRECIATION		(370,729.89)
		<hr/>
Total Other Assets		732,771.00
		<hr/>
Total Assets	\$	<u>1,002,969.98</u>

LIABILITIES AND CAPITAL

Current Liabilities		
ACCOUNTS PAYABLE	\$	(1,450.50)
ACCRUED SALARIES		36,701.68
FLEX SPENDING ACCOUNT-MEDICAL		3,202.81
AFLAC		60.34
DEFERRED REVENUE		16,210.60
		<hr/>
Total Current Liabilities		54,724.93
Long-Term Liabilities		
		<hr/>
Total Long-Term Liabilities		0.00
		<hr/>
Total Liabilities		54,724.93
Capital		
FUND BAL. UNRESTRICTED		707,162.00
FUND BAL. UNRESTRICTED DES.		55,036.00
RETAINED EARNINGS		351,097.24
FUND BALANCE TEMP. RESTR.		20,374.00
Net Income		(185,424.19)
		<hr/>
Total Capital		948,245.05
		<hr/>
Total Liabilities & Capital	\$	<u>1,002,969.98</u>

Unaudited - For Management Purposes Only

www.wvems.org



FINANCIAL REPORT

(In Accordance with the Requirements of Uniform Guidance)

JUNE 30, 2016



**WESTERN VIRGINIA EMERGENCY MEDICAL
SERVICES COUNCIL, INC.**

**FINANCIAL REPORT
(In Accordance with the Requirements of Uniform Guidance)**

June 30, 2016

EIN#: 54-1010118

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INDEPENDENT AUDITOR'S REPORT

To the Board of Directors
Western Virginia Emergency Medical Services Council, Inc.
Roanoke, Virginia

We have audited the accompanying financial statements of Western Virginia Emergency Medical Services Council, Inc. (the "Council") which comprise the statements of financial position as of June 30, 2016 and 2015, and the related statements of activities and cash flows for the years then ended and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibilities

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatements.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers the internal control relevant to the Council's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not the purpose of expressing an opinion on the effectiveness of the Council's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Western Virginia Emergency Medical Services Council, Inc. as of June 30, 2016 and 2015, and its changes in net assets and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Other Matters

Other Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying schedule of expenditures of federal awards, as required by Title 2 U.S. *Code of Federal Regulations (CFR) Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*, is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated, in all material respects, in relation to the financial statements as a whole.

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated October 6, 2016, on our consideration of the Council's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering Council's internal control over financial reporting and compliance.

Brown, Edwards & Company, L.L.P.

CERTIFIED PUBLIC ACCOUNTANTS

Roanoke, Virginia
October 6, 2016

WESTERN VIRGINIA EMERGENCY MEDICAL SERVICES COUNCIL, INC.

STATEMENTS OF FINANCIAL POSITION

June 30, 2016 and June 30, 2015

	2016	2015
ASSETS		
Cash and cash equivalents	\$ 276,898	\$ 163,945
Restricted cash	40,140	10,951
Accounts receivable	261,779	295,172
Prepaid expenses	9,923	10,784
Investments (Note 2)	475,951	133,306
Custodial funds	21,234	21,786
Total current assets	1,085,925	635,944
Land, buildings, and equipment, net (Note 3)	582,094	580,804
Total assets	\$ 1,668,019	\$ 1,216,748
LIABILITIES AND NET ASSETS		
Accounts payable	\$ 30,737	\$ 31,292
Accrued expenses (Note 9)	36,702	30,747
Deferred revenue	104,431	4,589
Custodial funds liability	21,234	21,786
Total liabilities	193,104	88,414
NET ASSETS		
Unrestricted (Note 4)	1,336,888	1,052,411
Temporarily restricted (Note 5)	138,027	75,923
Total net assets	1,474,915	1,128,334
Total liabilities and net assets	\$ 1,668,019	\$ 1,216,748

WESTERN VIRGINIA EMERGENCY MEDICAL SERVICES COUNCIL, INC.

STATEMENTS OF ACTIVITIES

Year Ended June 30, 2016

	2016		
	Unrestricted	Temporarily Restricted	Total
Revenues, gains, and other support:			
State government	\$ 480,150	\$ -	\$ 480,150
Federal grant revenue	-	819,016	819,016
Local government (Note 6)	137,560	-	137,560
Symposium revenue (Note 10)	350,270	-	350,270
Other support and income	235,887	-	235,887
United Way organizations	1,994	-	1,994
Unrealized and realized gains	14,296	-	14,296
Investment income	5,891	-	5,891
Contributions (Note 10)	412,453	-	412,453
Net assets released from restrictions and reclassifications	756,912	(756,912)	-
Total revenues	2,395,413	62,104	2,457,517
Expenses (Note 7)			
Program services	1,804,920	-	1,804,920
Management and general	306,016	-	306,016
Total expenses	2,110,936	-	2,110,936
Change in net assets	284,477	62,104	346,581
NET ASSETS			
Beginning	1,052,411	75,923	1,128,334
Ending	\$ 1,336,888	\$ 138,027	\$ 1,474,915

WESTERN VIRGINIA EMERGENCY MEDICAL SERVICES COUNCIL, INC.

STATEMENTS OF ACTIVITIES

Year Ended June 30, 2015

	2015		
	Unrestricted	Temporarily Restricted	Total
Revenues, gains, and other support:			
State government	\$ 500,650	\$ -	\$ 500,650
Federal grant revenue	-	746,686	746,686
Local government (Note 6)	132,525	-	132,525
Symposium revenue (Note 10)	-	-	-
Other support and income	208,580	-	208,580
United Way organizations	2,103	-	2,103
Unrealized and realized losses	(9,169)	-	(9,169)
Investment income	9,688	-	9,688
Contributions	-	-	-
Net assets released from restrictions and reclassifications	670,763	(670,763)	-
Total revenues	1,515,140	75,923	1,591,063
Expenses (Note 7)			
Program services	1,253,379	-	1,253,379
Management and general	287,196	-	287,196
Total expenses	1,540,575	-	1,540,575
Change in net assets	(25,435)	75,923	50,488
NET ASSETS			
Beginning	1,077,846	-	1,077,846
Ending	\$ 1,052,411	\$ 75,923	\$ 1,128,334

The Notes to Financial Statements are an integral part of these statements.

WESTERN VIRGINIA EMERGENCY MEDICAL SERVICES COUNCIL, INC.

STATEMENTS OF CASH FLOWS
For the Years Ended June 30, 2016 and 2015

	2016	2015
CASH FLOWS FROM OPERATING ACTIVITIES		
Change in net assets	\$ 346,581	\$ 50,488
Adjustments to reconcile the change in net assets to net cash provided by operating activities:		
Depreciation expense	25,110	29,026
Unrealized and realized (gains) losses on investments	(14,296)	9,169
Change in certain operating assets and liabilities:		
(Increase) decrease in:		
Accounts receivable	33,393	(53,967)
Prepaid expense	861	(2,959)
Increase (decrease) in:		
Accounts payable	(555)	7,142
Accrued expenses	5,955	(3,914)
Deferred revenue	99,842	(2,663)
	496,891	32,322
CASH FLOWS FROM INVESTING ACTIVITIES		
Purchase of property and equipment	(26,400)	(53,132)
Change in investments, net of proceeds from sales	(328,349)	(9,176)
	(354,749)	(62,308)
Increase (decrease) in cash and cash equivalents and restricted cash	142,142	(29,986)
TOTAL CASH AND CASH EQUIVALENTS AND RESTRICTED CASH		
Beginning	174,896	204,882
Ending	\$ 317,038	\$ 174,896

WESTERN VIRGINIA EMERGENCY MEDICAL SERVICES COUNCIL, INC.

NOTES TO FINANCIAL STATEMENTS
June 30, 2016

Note 1. Nature of Operations and Significant Accounting Policies

Nature of operations:

Western Virginia Emergency Medical Services Council, Inc. (the "Council") was organized in September 1975 as a not-for-profit, non-stock corporation under the applicable laws of the Commonwealth of Virginia. The purpose of the Council is to plan and implement a system for the arrangement of personnel, facilities, equipment, and supplies for the provision and delivery of health care services under emergency conditions. The Council serves the counties of Alleghany, Botetourt, Craig, Floyd, Franklin, Giles, Henry, Montgomery, Patrick, Pittsylvania, Pulaski, and Roanoke and the cities of Covington, Danville, Martinsville, Radford, Roanoke, and Salem.

Basis of financial statement presentation and accounting:

The financial statements of the Council have been prepared in accordance with accounting principles generally accepted in the United States of America. The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities, the disclosure of contingent assets and liabilities at the date of the financial statements, and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

The accompanying financial statements present information regarding the Council's financial position and activities according to three classes of net assets: unrestricted, temporarily restricted, and permanently restricted. The three classes are differentiated based on the existence or absence of donor-imposed restrictions, as described below:

Unrestricted net assets are free of donor-imposed restrictions. Unrestricted net assets may be designated for specific purposes by action of the Board of Directors or may otherwise be limited by contractual agreements with outside parties. Revenues that are not temporarily or permanently restricted by donors are included in this classification. Expenses are reported as decreases in this classification.

Temporarily restricted net assets are limited in use by donor-imposed stipulations that expire either by the passage of time or that can be fulfilled by action of the Council pursuant to those stipulations.

Permanently restricted net assets are amounts required by donors to be held in perpetuity; however, generally, the income on these assets is available to meet various restricted and other operating needs. There are currently no permanently restricted net assets.

WESTERN VIRGINIA EMERGENCY MEDICAL SERVICES COUNCIL, INC.

NOTES TO FINANCIAL STATEMENTS

June 30, 2016

Note 1. Nature of Operations and Significant Accounting Policies (Continued)

Cash and cash equivalents:

The Council considers cash, money market accounts, and highly liquid investments with a maturity of three months or less when purchased to be cash and cash equivalents. Cash equivalents are stated at cost, which approximates fair value. Cash held for long-term investment is classified as investments.

Restricted cash:

Restricted cash includes funds received by the Near Southwest Preparedness Alliance for the Bioterrorism Hospital Preparedness Program and not yet expended at year-end. This grant is further described in Note 5.

Accounts receivable:

Accounts receivable are stated at the amount management expects to collect from balances outstanding at year-end. Based on management's assessment of the credit history with customers and agencies having outstanding balances and current relationships with them, it has concluded that realization losses on balances outstanding at year-end will be immaterial.

Investments:

Investments in marketable securities with readily determinable fair values and all investments in debt securities are reported at their fair values, as determined by quoted market prices, in the statements of financial position. Net unrealized and realized gains or losses are reflected in the statements of activities. The carrying value of the Organizations investments will fluctuate with the financial markets. As a result, the value of such investments as of the date of this report may be materially different than year-end values.

Custodial funds:

Custodial funds consist of funds and equipment held in a custodial capacity on behalf of a state task force.

Property and equipment:

Property and equipment is stated at cost or, if donated, at fair market value at the date of donation, less accumulated depreciation. Depreciation is recorded using the straight-line method over estimated useful lives of the assets.

Equipment is removed from the records and any gain or loss is recognized at the time of disposal. Expenditures for acquisition, renewals, and replacements exceeding \$5,000 are capitalized. Maintenance and repair costs are charged to expense as incurred.

Deferred revenue:

Deferred revenue principally represents grant proceeds received but not yet expended.

WESTERN VIRGINIA EMERGENCY MEDICAL SERVICES COUNCIL, INC.

NOTES TO FINANCIAL STATEMENTS

June 30, 2016

Note 1. Nature of Operations and Significant Accounting Policies (Continued)

Functional allocation of expenses:

The costs of providing the various programs and other activities have been summarized on a functional basis in the statement of activities. Accordingly, certain costs, such as salaries, benefits, utilities, supplies, and other generic operating expenses, have been allocated among the programs and supporting services benefited.

Fair value measurements:

The Council carries investments at fair value. Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. In determining fair value, a market-based approach is used which establishes that fair value is based on the "highest and best use". The Council categorizes its financial instruments, based on the priority of the inputs to the valuation technique, into a three-level fair value hierarchy as reflected below. The fair value hierarchy gives the highest priority to unadjusted quoted prices in active markets (Level 1) and the lowest priority to unobservable inputs (Level 3).

Level 1 – Fair values are based on unadjusted quoted prices in active markets for identical assets or liabilities that management has the ability to access at the measurement date.

Level 2 – Fair values are based on inputs other than quoted prices in Level 1 that are either for similar assets or liabilities in active markets, quoted prices for identical or similar assets or liabilities in markets that are not active, inputs other than quoted prices that were observable for the asset or liability, or inputs that are derived principally from or corroborated by observable market data by correlation or other means.

Level 3 – Fair values are based on unobservable inputs for the asset or liability where there is little, if any, market activity for the asset or liability at the measurement date.

Income taxes:

The Council is classified as an exempt organization for federal income tax purposes under Section 501(c)(3) of the *Internal Revenue Code*.

Credit risk concentrations:

Financial instruments which potentially subject the Council to concentrations of credit risk consist principally of cash and cash equivalents, accounts receivable, and investments. The Council places its cash with high-credit, quality financial institutions. A portion of the Council's bank deposits are in excess of federally insured limits. Concentrations of credit risk with respect to accounts receivables occur due to the limited number of governmental and commercial accounts. Approximately 87% and 90% of accounts receivable at June 30, 2016 and 2015, respectively, were from the Council's two largest funding sources.

WESTERN VIRGINIA EMERGENCY MEDICAL SERVICES COUNCIL, INC.

NOTES TO FINANCIAL STATEMENTS

June 30, 2016

Note 2. Investments

The Council's investments are reported at fair value in the accompanying statement of financial position.

	Fair Value Measurements at Reporting Date Using:	
	Fair Value	Level 1
 <u>June 30, 2016</u>		
Equities	\$ 275,622	\$ 275,622
Fixed Income	200,329	200,329
Total	\$ 475,951	\$ 475,951
 <u>June 30, 2015</u>		
Mutual funds		
Balanced funds	\$ 43,118	\$ 43,118
Mid-cap growth funds	22,205	22,205
International funds	20,829	20,829
Income funds	47,154	47,154
Total	\$ 133,306	\$ 133,306

The investments are comprised of two general components as follows:

	2016	2015
Controlled by and allocated at the discretion of the WVEMS Board of Directors	\$ 129,781	\$ 133,306
Dedicated to the Virginia EMS Symposium subject to oversight by the Virginia Department of Health Office of EMS	346,170	-
	\$ 475,951	\$ 133,306

WESTERN VIRGINIA EMERGENCY MEDICAL SERVICES COUNCIL, INC.

NOTES TO FINANCIAL STATEMENTS

June 30, 2016

Note 3. Land, Buildings, and Equipment

Land, buildings, and equipment consist of the following as of December 31:

	Estimated Useful Life	2016	2015
Land		\$ 201,600	\$ 201,600
Building	39 years	175,223	175,223
Building improvements	39 years	74,793	74,793
Communications equipment	5-10 years	147,761	121,361
Office equipment	5-10 years	52,167	34,392
Software	3 years	38,759	-
Miscellaneous equipment	5-10 years	321,714	321,714
Generator building and equipment	15-20 years	16,672	16,672
		1,028,689	945,755
Less accumulated depreciation		(446,595)	(364,951)
		\$ 582,094	\$ 580,804

Note 4. Designated Net Assets

A designation of net assets is made to indicate plans for financial resource utilization in a future period. In accordance with policies established by resolution of the Board of Directors of the Council, a reserve fund was established to serve as a future source of operating funds and to support special projects. Transfers from an operating account to this reserve fund, as well as any expenditure from this fund require board action. Unrestricted net assets have been designated for future use in the amounts of \$77,167 for 2015. During 2016, the Board of Directors resolved to transfer all designated net assets to investments to be used as needed by the Council.

Note 5. Federal Grants

The Near Southwest Preparedness Alliance (NSPA) is a division within the Council. NSPA has received a grant passed through the Virginia Department of Health from the Department of Health and Human Services. This grant is a cooperative agreement entitled The Bioterrorism Hospital Preparedness Program. Under this grant, NSPA is to establish a regional emergency preparedness infrastructure for health care institutions in Southwest Virginia. They are also to purchase equipment and pharmaceuticals, which remain the property of the health care institutions, and to provide training on the proper use of this equipment. At June 30, 2016 and 2015, the amount due from the grantor was \$11,504 and \$47,535 representing 7% and 36% of accounts receivable at June 30, 2016 and 2015, respectively. Net assets temporarily restricted under the grant were \$138,027 and \$75,923 as of June 30, 2016 and 2015, respectively.

WESTERN VIRGINIA EMERGENCY MEDICAL SERVICES COUNCIL, INC.

NOTES TO FINANCIAL STATEMENTS
June 30, 2016

Note 6. Local Government Support

Local government support received by the Council is as follows:

	2016	2015
City of Roanoke	\$ 16,084	\$ 14,105
County of Roanoke	15,433	13,922
County of Montgomery	13,111	13,111
County of Pittsylvania	11,391	10,792
County of Franklin	10,362	10,362
City of Danville	9,055	8,528
County of Henry	7,518	7,518
County of Pulaski	7,352	7,352
County of Botetourt	7,141	6,722
City of Salem	5,972	5,972
County of Patrick	5,089	5,089
County of Giles	4,958	4,958
City of Radford	4,816	4,816
County of Alleghany	4,775	4,775
City of Martinsville	4,435	4,435
County of Floyd	3,506	3,506
City of Covington	3,335	3,335
County of Craig	3,227	3,227
	\$ 137,560	\$ 132,525

WESTERN VIRGINIA EMERGENCY MEDICAL SERVICES COUNCIL, INC.

NOTES TO FINANCIAL STATEMENTS
June 30, 2016

Note 7. Functional Allocation of Expenses

Expenses incurred were:

	2016		
	Program Services	Management and General	Total
Salaries	\$ 219,524	\$ 191,796	\$ 411,320
NSPA Expenses	489,690	-	489,690
VHHA Expenses	266,627	-	266,627
Contracts for services	115,935	-	115,935
Symposium (Note 10)	424,009	23,627	447,636
Payroll tax and employee benefits	78,092	33,636	111,728
Salaries – education and testing	37,971	-	37,971
CBA expenses	1,534	-	1,534
Special projects	15,312	-	15,312
Supplies and equipment	10,113	9,867	19,980
Depreciation	-	25,110	25,110
Utilities	21,260	-	21,260
Maintenance and repair	10,632	459	11,091
Travel, mileage, and lodging	6,350	1,309	7,659
Professional fees	11,430	-	11,430
Insurance	5,247	8,889	14,136
Telecommunications	7,395	5,919	13,314
Textbooks	63,300	-	63,300
Equipment rental	5,700	-	5,700
Staff development	13,410	857	14,267
Rent	6,492	-	6,492
Miscellaneous	10,847	-	10,847
Postage	285	1,419	1,705
Printing and publications	-	1,500	1,500
CISM conference and miscellaneous	1,585	-	1,585
Dues and membership	180	1,628	1,808
Inter-divisional rent	(18,000)	-	(18,000)
	<u>\$ 1,804,920</u>	<u>\$ 306,016</u>	<u>\$ 2,110,936</u>

WESTERN VIRGINIA EMERGENCY MEDICAL SERVICES COUNCIL, INC.

NOTES TO FINANCIAL STATEMENTS
June 30, 2016

Note 7. Functional Allocation of Expenses (Continued)

Expenses incurred were:

	2015		
	Program Services	Management and General	Total
Salaries	\$ 202,863	\$ 188,426	\$ 391,289
NSPA Expenses	439,655	-	439,655
VHHA Expenses	212,962	-	212,962
Contracts for services	129,592	-	129,592
Payroll tax and employee benefits	80,566	31,694	112,260
Salaries – education and testing	44,754	-	44,754
MRC expenses	16,294	-	16,294
BREMS – MRC support expenses	536	-	536
CBA expenses	676	-	676
Special projects	8,830	-	8,830
Supplies and equipment	10,142	17,377	27,519
Depreciation	-	29,026	29,026
Utilities	21,378	-	21,378
Maintenance and repairs	13,087	-	13,087
Travel, mileage, and lodging	7,421	153	7,574
Professional fees	11,080	-	11,080
Insurance	4,386	10,540	14,926
Telecommunications	7,513	4,688	12,201
Textbooks	25,435	-	25,435
Equipment rental	8,100	-	8,100
Staff development	5,798	807	6,605
Rent	6,047	-	6,047
Miscellaneous	11,715	-	11,715
Postage	665	1,133	1,798
Printing and publications	-	2,416	2,416
CISM conference and miscellaneous	1,484	-	1,484
Dues and membership	400	936	1,336
Inter-divisional rent	(18,000)	-	(18,000)
	\$ 1,253,379	\$ 287,196	\$ 1,540,575

WESTERN VIRGINIA EMERGENCY MEDICAL SERVICES COUNCIL, INC.

NOTES TO FINANCIAL STATEMENTS
June 30, 2016

Note 8. Retirement Plan

The Council has a Simplified Employee Pension Plan covering all salaried employees who are at least 21 years of age, have received at least \$300 in compensation during the current year, and have completed one year of employment. This one year of employment is defined as having any portion of the year prior to the January 1 enrollment date. The Council contributes a 5% match of the employees' eligible contributions. The Council contributed \$27,094 and \$29,647 to the plan in 2016 and 2015, respectively.

Note 9. Compensated Absences

Each employee earns paid time off (PTO) in accordance with the Council's policies. At the end of each fiscal year, balances of PTO up to 200 hours are carried forward. At June 30, 2016 and 2015, the accrual for compensated balances was \$36,702 and \$30,747, respectively, and is included in accrued expenses on the statement of financial position.

Note 10. Symposium

During the year ended June 30, 2016, WVEMS assumed all assets and liabilities of Alliance for Emergency Medical Education and Research (AEMER). WVEMS is now responsible for the primary purpose of AEMER, the sponsorship of an annual education symposium for emergency medical providers in Virginia and elsewhere, and in particular for Virginia statewide emergency medical services. Total revenues from the symposium for the year ended June 30, 2016 were \$350,270.

Expenses incurred were:

	2016		
	Program Services	Management and General	Total
Conference center	\$ 265,685	\$ -	\$ 265,685
Symposium event manager	26,546	-	26,546
Supplies	8,989	-	8,989
Discounts	10,160	-	10,160
Professional services	-	23,553	23,553
Printing and publications	9,082	-	9,082
Participant material	6,259	-	6,259
Contract labor	18,174	-	18,174
Symposium entertainment	8,598	-	8,598
Symposium scholarship	10,000	-	10,000
Planning	13,235	-	13,235
Miscellaneous	-	74	74
Travel	47,281	-	47,281
	\$ 424,009	\$ 23,627	\$ 447,636

WESTERN VIRGINIA EMERGENCY MEDICAL SERVICES COUNCIL, INC.

**SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Year Ended June 30, 2016**

Federal Grantor/Program Title	Federal CFDA/ Grant Number	Total Federal Financial Assistance
Pass Through from Virginia Department of Health		
National Bioterrorism Hospital Preparedness Program	93.889	\$ 756,912
Total Federal Awards		<u>\$ 756,912</u>

Note: This schedule of expenditures was prepared on the accrual basis of accounting.

INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH *GOVERNMENT AUDITING STANDARDS*

To the Board of Directors
Western Virginia Emergency Medical Services Council, Inc.
Roanoke, Virginia

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States, the financial statements of Western Virginia Emergency Medical Services Council, Inc. (the "Council"), which comprise the statement of financial position as of June 30, 2016, and the related statements of activities, and cash flows for the year then ended, and the related notes to the financial statements, and have issued our report thereon dated October 6, 2016.

Internal Control over Financial Reporting

In planning and performing our audit of the financial statements, we considered the Council's internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Council's internal control. Accordingly, we do not express an opinion on the effectiveness of the Council's internal control.

A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent or detect and correct misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented or detected and corrected on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over financial reporting was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be significant deficiencies or material weaknesses. **Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.**

Compliance and Other Matters

As part of obtaining reasonable assurance about whether the Council's financial statements are free of material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. **The results of our tests disclosed no instances of noncompliance that are required to be reported under *Government Auditing Standards*.**

Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Council's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Council's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Brown, Edwards & Company, L.L.P.

CERTIFIED PUBLIC ACCOUNTANTS

Roanoke, Virginia
October 6, 2016

INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE FOR EACH MAJOR PROGRAM AND ON INTERNAL CONTROL OVER COMPLIANCE REQUIRED BY THE UNIFORM GUIDANCE

To the Board of Directors
Western Virginia Emergency Medical Services Council, Inc.
Roanoke, Virginia

Report on Compliance for Each Major Federal Program

We have audited Western Virginia Emergency Medical Services Council, Inc.'s (the "Council") compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on each of the Council's major federal programs for the year ended June 30, 2016. The Council's major federal program is identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

Management's Responsibility

Management is responsible for compliance with federal statutes, regulations, and the terms and conditions of its federal awards applicable to its federal programs.

Auditor's Responsibility

Our responsibility is to express an opinion on compliance for each of the Council's major federal programs based on our audit of the types of compliance requirements referred to above. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and the audit requirements of Title 2 *U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Those standards and the Uniform Guidance require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about the Council's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our opinion on compliance for each major federal program. However, our audit does not provide a legal determination of the Council's compliance.

Opinion on Each Major Federal Program

In our opinion, the Council complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on its major federal program for the year ended June 30, 2016.

Report on Internal Control over Compliance

Management of the Council is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered the Council's internal control over compliance with the types of requirements that could have a direct and material effect on each major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major federal program and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of the Council's internal control over compliance.

A *deficiency in internal control over compliance* exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A *material weakness in internal control over compliance* is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. A *significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies. **We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.**

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

Brown, Edwards & Company, L.L.P.

CERTIFIED PUBLIC ACCOUNTANTS

Roanoke, Virginia
October 6, 2016

WESTERN VIRGINIA EMERGENCY MEDICAL SERVICES COUNCIL, INC.

**SCHEDULE OF FINDINGS AND QUESTIONED COSTS
Year Ended June 30, 2016**

A. SUMMARY OF AUDITOR'S RESULTS

1. The auditor's report expresses an **unmodified opinion** on the financial statements of Western Virginia Emergency Medical Services Council, Inc. (the "Council").
2. **No significant deficiencies** relating to the audit of the financial statements are reported in the Independent Auditor's Report on Internal Control over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance with *Government Auditing Standards*.
3. **No instances of noncompliance material** to the financial statements of the Council were disclosed during the audit.
4. **No significant deficiencies** relating to the audit of the major federal award program are reported in the Independent Auditor's Report on Compliance with Requirements for Each Major Program and on Internal Control over Compliance in Accordance with OMB Compliance Supplement.
5. The auditor's report on compliance for the major federal award program for the Council expresses an **unmodified opinion**.
6. The audit disclosed **no audit findings relating to the major program**
7. The following program was tested as a major program:

National Bioterrorism Hospital Preparedness Program	93.889
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8. The **threshold** for distinguishing Types A and B programs was **\$300,000**.
9. **The Council was determined not to be a low-risk auditee.**

B. FINDINGS – FINANCIAL STATEMENT AUDIT

None.

C. FINDINGS – MAJOR FEDERAL AWARD PROGRAM AUDIT

None.



Annual Report

July 1, 2015 - June 30, 2016

Facilitating regional cooperation, planning and the implementation of an integrated **Emergency Medical Services** system



www.wvems.org

Our Vision

- 1** Provide access for victims of injury and sudden illness via a **universally available enhanced 9-1-1** emergency telephone system.
- 2** Provide for **dispatcher-provided telephone assistance** (pre-arrival instructions) to callers with life-threatening emergencies.
- 3** 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.
- 4** 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.
- 5** Provide for **timely response** of first responders and transportation, personnel and vehicles through a system of predetermined minimum response intervals, monitoring and quality assurance-performance improvement.
- 6** Provide resources and capabilities in order to appropriately respond to and manage large disasters and **mass casualty** situations.
- 7** Provide **triage and transport**, and transfer if necessary, of patients to the most appropriate facility based on predetermined universally accepted transport guidelines and protocols.
- 8** Provide and support **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.
- 9** Ensure EMS system **viability and excellence** through the effective use of state, local and private funding.

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Executive Director	Education Program Director	Business Manager
Robert H. Logan, Ph.D. logan@vaems.org	Cathy Cockrell, CICP, CCEMT-P, NRP ccockrell@vaems.org	Sandra D. Short sshort@vaems.org
Compliance Officer	Administrative Assistant	Field Coordinator
Mary H. Christian mchristian@vaems.org	George Merix gmerix@vaems.org	Chris Christensen, NRP cchristensen@vaems.org
Field Coordinator	Field Coordinator	NSPA Executive Director
Michael L. Garnett, NRP mgarnett@vaems.org	William E. (Gene) Dalton, NRP gdalton@vaems.org	Craig Camidge ccamidge@vaems.org
NSPA RHCC Manager	NSPA RHCC On-call Staff	NSPA RHCC On-call Staff
John T. (JT) Clark jclark@vaems.org	Jeff Echternach jeff@vaems.org	Michael Nallen mnallen@vaems.org
NSPA Medically Vulnerable Populations Coordinator	NSPA Continuity Specialist	NSPA Materials Manager
Matthew Marry mmarry@vaems.org	Monica McCullough mmcullough@vaems.org	Tom Firebaugh tfirebaugh@vaems.org
NSPA Materials Manager	NSPA Medical Reserve Corps Coordinator	Regional Medical Director
Bryan Keith bkeith@vaems.org	Adam LaChappelle alachappelle@vaems.org	Charles J. Lane, MD, FACEP clane@vaems.org

OFFICE INFORMATION

Main office

1944 Peters Creek Road
Roanoke VA 24017

New River Valley office

6580 Valley Center Drive
Radford VA 24141

*Located in the New River
Development Corporation Business
Center*

Piedmont Office

1024 DuPont Road
Martinsville VA 24115

*Located in the Henry County Public
Safety Training Center*

Additional Contact information is found on the back cover page, and on our website: www.wvems.org

“

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

VIRGINIA'S EMS REGIONS

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

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.

BOARD OF DIRECTORS

(Calendar year 2016)

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 Michael Jefferson
 Charles J. Lane, MD, FACEP
 Robert H. Logan, Ph.D.* (non-voting)
 Ryan Muterspaugh
 David Linkous
 Kristopher Shrader
 Rodney Haywood
 L. Joseph Trigg*
 J. Dale Wagoner*
 Valerie Tweedie
 *Executive committee

REPRESENTING

Floyd County
 Henry County
 Roanoke County
 5th Planning District At-Large
 Patrick County
 City of Roanoke
 Emergency Physician At-large
 City of Salem
 Craig County
 Pittsylvania County
 Emergency Nurses Association
 Giles County
 City of Covington
 Botetourt County
 Montgomery County
 Franklin County
 Va. Assoc. of Vol. Rescue Squads
 City of Danville
 Regional Medical Director
 Executive Director
 Alleghany County
 NSPA/Hospital System Representative
 City of Martinsville
 City of Radford
 Pulaski County
 12th Planning District At-Large
 4th Planning District At-Large

COMMITTEES, WORKGROUPS AND PROGRAM LEADERS

Executive Committee

→ Ford Wirt, Chair

Medical Direction

→ Charles Lane, MD, Chair

Pharmacy Workgroup

→ Nadine Gilmore, R.Ph., Co-Chair,

→ Larry Mullins, R.Ph., MBA, Co-Chair

Allied Resources Workgroup

→ Darrell VanNess, MSN, Chair

Education Workgroup

→ Steve Simon, Chair

Performance Improvement

→ Charles Lane, MD, Chair

General/Medical Subcommittee

→ Charles Lane, MD, Chair

Trauma and Trauma Triage Subcommittee

→ Charles Lane, MD, Chair

Stroke and Stroke Triage Subcommittee

→ Charles Lane, MD, Chair

Near Southwest Preparedness Alliance Board of Directors:

→ Tammy Turpin, Chair

Near Southwest Preparedness Alliance Healthcare Coalition:

→ Zach Bradley, Chair

Critical Incident Stress Management Team (CISM)

→ Stacy Harris, Team Administrator

EMS Operations:

Communications Workgroup

→ Jim Cady, Sr., Chair

MCI Planning Workgroup

→ Joe Coyle, Chair

Provider Services and Recognition

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 Vinton War Memorial. Recognized providers and agencies in eleven categories of regional EMS awards. Submitted regional award recipients as statewide Governor's EMS award nominees. Also presented NSPA Healthcare Preparedness awards in four categories.

Coordinated and provided a point of contact for an accredited (VOEMS) regional Critical Incident Stress Management (CISM) Team consisting of 38 volunteer mental health and peer public safety debriefers. Quarterly team meetings were conducted, along with several special events including a certification CISM training program. Completed new CISM operating policy and procedure manual.

Served as EMS infrastructure point of contact for all EMS agencies, providers, hospitals, and local governments in the region and beyond.

Responded to 17 requests for CISM team interventions, and provided various educational sessions for CISM team members.

Managed multi-regional Consolidated Test Site (CTS) registration system. (WVEMS staff coordinated development of this system.)

Maintained statewide "Virginia EMS Jobs" on-line database for the Virginia Office of EMS.

www.vaemsjobs.com



Students learn IV techniques

EMS Education and Advocacy

Provided standardized testing of enhanced and intermediate students exiting from initial certification courses.

Scheduled and coordinated 18 OEMS consolidated test sites throughout the region, registering 456 students for testing.

Conducted three 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 (November 2016) in Norfolk attended by some 1500 EMS providers, nurses and physicians.

Planned and enrolled one EMT-Intermediate program in the New River Valley – 22 students.

Established a cooperative EMS education program with Jefferson College of Health Sciences.

Planned and enrolled one EMT-Intermediate program in Roanoke – 24 students, specifically designed for fire/EMS agencies in the Roanoke Valley.

Offered numerous ALS and BLS continuing education programs across the region.

Provided support to Roanoke Valley Regional Fire-EMS Training Center, New River Valley Training Center, and Carilion Clinic to offer and facilitate AMLS and PHTLS classes throughout the region.

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 and participated in numerous meetings related to training programs throughout the region.

Promoted and co-sponsored numerous educational events across the region.

Participated in disaster exercises in several localities, including multi-jurisdictional drills.

Participated in statewide committee charged with writing guidelines for VA EMS providers.

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 ACLS, AMLS, BLS, PALS, TECC, PHTLS, ITLS, ADLS, BDLS and TCCC.

Maintained regional web-based training calendar.

Staff served as state chair for The American Heart Association and AMLS.

Staff serves as Affiliate Faculty for BLS, ACLS and PALS.

Staff appointed to Affiliate Faculty for the launch of GEMS (Geriatric Emergencies, NAEMT).

Staff obtained instructor certifications in ACLS- EP (Experienced Provider).

Coordinated efforts with LewisGale Montgomery to plan and facilitate annual Trauma Conference.

Active participation in regional Heart Alert committees.

Maintained staff responsibility for BLS test site coordination to ensure uniformity and provide better customer service at BLS test sites.

Offered annual Operational Medical Director "Currents" educational workshop at the Greenfield Center in Botetourt County.

Conducted AMLS, BLS, ACLS, PALS, and ITLS courses throughout the region.

Offered ADLS and BDLS courses in conjunction with NSPA.



Advanced airway training

Medical Direction and Performance Improvement

Maintained a regional ambulance diversion policy in conjunction with the Near Southwest Preparedness Alliance.

Maintained a regional ambulance supply exchange and drug restocking policy.

Continued projects for regional EMS performance improvement.

Updated and published Regional Operational Guidelines (Protocols).

Provided suggested guidelines for quality improvement programs in agencies.

Reestablished and established new clinical education agreements at 9 hospitals and other medical entities across the region.

Endorsed 18 ALS Coordinators for recertification according to regional guidelines.

Continued and expanded the role of regional Performance Improvement Committees.

Maintained and published a Regional Stroke Triage Plan.

Maintained and published a Regional Trauma Triage Plan.

Maintained and published regional General and Trauma Performance Improvement Plans.

Offered continuing education workshop for Operational Medical Directors.

Communications, Facilities

Coordinated a region-wide system of drug and IV box exchange, incident reporting and follow-up, and provision of inventory control.

Supported statewide “WeatherSafe” program for sharing air medical turn-down information.

Continued ownership and operation of various regional EMS communication systems.

Obtained funding for, and installed new UHF medical radio repeaters in the Christiansburg area.

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, operational medical directors and emergency department nurse

managers related to the exchange of supplies and equipment.

Provided technical assistance and regional administration for VHASS, a web-based ambulance diversion and mass casualty incident management software.

Public Information and Referral

Maintained an electronic newsletter with some 2,000 subscribers to provide frequent notices of training events and other timely EMS news.

Participated in various workshops and public events throughout the year.

Served as a clearinghouse for regional and state EMS pamphlets, posters, displays and other public relations and recruitment materials.

Published various flyers for courses, service offerings, etc. throughout the year.

Regularly updated the council’s Internet web site 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. www.wvems.org

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 \$1,203,304 in RSAF grant awards to agencies within the region.

Revised regional EMS strategic plan and other regional planning documents.

Provided fiscal and administrative support for the Virginia EMS Symposium and other events.

Provided fiscal and administrative support to the Near Southwest Preparedness Alliance (NSPA) to manage some \$600,000 in federal hospital preparedness program (HPP) funds.

Continued coordination of the Regional NSPA Medical Reserve Corps (NSMRC) in five health districts for the Virginia Department of Health (VDH).

Employed a statewide HPP technical advisor through contract with the Virginia Hospital and Healthcare Association.

Provided Information Technology Support for all 11 regional EMS councils by employing an IT support specialist and contracting various other services.



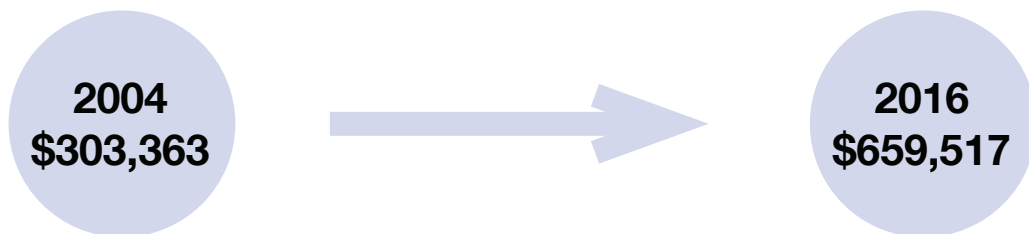
“EZ-IO” intraosseous infusion training

State Funding to Localities and Trauma Centers

\$4.25 FOR LIFE

In 2006, the full funding generated by the “\$4.25-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 funding stream was increased to \$6.25 per eligible vehicle registration, but the additional revenue does not go to benefit EMS at this time.

In the past 12 years, the total amount returned to localities in the WVEMS region has grown from \$303,363 in FY 2004 to \$659,517 in 2016.



STATE TRAUMA CENTER FUND

This funding comes from the reinstatement of driver’s licenses in Virginia. If a Virginia resident loses his or her driver’s license for any reason, he or she must pay a fee to reinstate it. Part of the money from this fee goes to support Virginia’s Trauma Centers to defray some of the cost of providing trauma care. These Trauma Centers must meet strict criteria for designation, which includes facility standards, on-site trauma physicians, and the ready availability of other medical specialists.

There are three designated Trauma Centers in the WVEMS region. Carilion Clinic’s Roanoke Memorial Hospital is designated as a Level I Trauma Center. There are two Level III Trauma Centers in the New River Valley (Carilion New River Valley Medical Center and LewisGale Hospital Montgomery). These three Trauma Centers have collectively received some \$13 million since the program began in 2006.

2016 Regional EMS Awards

Excellence in EMS

William D. Duff, Roanoke County Fire & Rescue

Outstanding Administrator

O. Wayne Guffey, Vinton First Aid Crew

Outstanding EMS Agency

Cave Spring First Aid & Rescue Squad

Outstanding EMS Physician

Carol Bernier, DO – Carilion Clinic and Active OMD

Outstanding Contribution to Emergency Preparedness

Near Southwest Preparedness Alliance

Outstanding EMS Educator

Grey Smith, Roanoke Valley Regional
Fire & EMS Training Center

Outstanding Contribution to EMS by a Nurse

Darrell VanNess, Carilion Clinic

Outstanding EMS Provider

Louisa S. Gay, Blacksburg Rescue Squad

Outstanding Contribution to EMS by a Telecommunication Officer

Karen Vaughn, Martinsville-Henry Co. 911

Scholarship for Outstanding Contribution to EMS by a High School Senior

Bradley Hancock, Ridgeway District Volunteer Rescue Squad

Summerlin Award for Public Service

James L. Cady, Sr., Craig County Emergency Services

NSPA Healthcare Emergency Management - Outstanding Individual

Tim LaFountain, Carilion Clinic

NSPA Healthcare Emergency Management - Outstanding Organization

Centra Health

NSPA Healthcare Emergency Management - Outstanding Partner

David Linkous, Virginia Department of Health

NSPA Healthcare Emergency Management - Legacy Award

Robert Logan, Western Virginia EMS Council

*WVEMS President Ford Wirt presents the 2016
Excellence in EMS award to Acting Deputy Chief Bill
Duff (left)*



Assets

	2016	2015
Cash and cash equivalents	\$ 276,898	\$ 163,945
Restricted cash	40,140	10,951
Accounts receivable	261,779	295,172
Prepaid expenses	9,923	10,784
Investments-WVEMS (Note 2)	129,781	133,306
Investments-Va EMS Symposium (Note 2)	346,170	n/a
Custodial funds	21,234	21,786
	<u>1,085,925</u>	<u>635,944</u>
Total current assets	1,085,925	635,944
Land, buildings, and equipment, net (Note 3)	582,094	580,804
	<u>582,094</u>	<u>580,804</u>
Total assets	<u>\$ 1,668,019</u>	<u>\$ 1,216,748</u>

Liabilities and Net Assets

	2016	2015
Accounts payable	\$ 30,737	\$ 31,292
Accrued expenses (Note 9)	36,702	30,747
Deferred revenue	104,431	4,589
Custodial funds liability	21,234	21,786
	<u>193,104</u>	<u>88,414</u>
Total liabilities	193,104	88,414
Net Assets		
Unrestricted (Note 4)	1,336,888	1,052,411
Temporarily restricted (Note 5)	138,027	75,923
	<u>1,474,915</u>	<u>1,128,334</u>
Total net assets	1,474,915	1,128,334
Total liabilities and net assets	<u>\$ 1,668,019</u>	<u>\$ 1,216,748</u>

The Notes to Financial Statements are an integral part of these statements.

Complete financial report available online at www.wvems.org

Statements of Activities

	Unrestricted	Temporarily Restricted	2016 Total
Revenues, gains, and other support:			
State government	\$ 480,150	\$ —	\$ 480,150
Federal grant revenue	—	819,016	819,016
Local government (Note 6)	137,560	—	137,560
Symposium revenue (Note 10)	350,270	—	350,270
Other support and income	235,887	—	235,887
United Way organizations	1,994	—	1,994
Unrealized and realized gains	14,296	—	14,296
Investment income	5,891	—	5,891
Contributions (Note 10)	412,453	—	412,453
Net assets released from restrictions and reclassifications	756,912	(756,912)	—
Total revenues	<u>2,395,413</u>	<u>62,104</u>	<u>2,457,517</u>
Expenses (Note 7)			
Program services	1,804,920	—	1,804,920
Management and general	306,016	—	306,016
Total expenses	<u>2,110,936</u>	<u>—</u>	<u>2,110,936</u>
Change in net assets	284,477	62,104	346,581
Net assets			
Beginning	<u>1,052,411</u>	<u>75,923</u>	<u>1,128,334</u>
Ending	<u>\$ 1,336,888</u>	<u>\$ 138,027</u>	<u>\$ 1,474,915</u>

The Notes to Financial Statements are an integral part of these statements.

Complete financial report available online at www.wvems.org

Our Supporters

These generous supporters and partners have contributed funds or in-kind services, or have allowed us to contract to provide services throughout the year.

Commonwealth of Virginia ● Virginia Hospital and Healthcare Association ● Virginia EMS Symposium ● Virginia Medical Reserve Corps ● Near Southwest Preparedness Alliance ● United Way Roanoke Valley ● Greater Alleghany United Fund ● Carilion Clinic ● LewisGale Medical Center ● LewisGale Hospital Alleghany ● LewisGale Hospital Montgomery ● LewisGale Hospital Pulaski ● Pioneer Community Hospital of Patrick ● Memorial Hospital of Martinsville and Henry County ● Danville Regional Hospital ● Veterans Affairs Medical Center – Salem ● Centra Health ● Alleghany County ● Botetourt County ● Craig County ● Floyd County ● Giles County ● Franklin County ● Henry County ● City of Salem ● 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

Contact Information

Main Office (WVEMS & NSPA)
1944 Peters Creek Road
Roanoke VA 24017

WVEMS New River Field Office
6580 Valley Center Drive
Radford VA 24141

Telephone (all offices) ● 540.562.3482
Toll-free (all offices) ● 800.972.4367
Facsimile (all offices) ● 540.562.3488
E-mail ● western@vaems.org
Website ● www.wvems.org

WVEMS Piedmont Field Office
1024 DuPont Road
Martinsville VA 24115

WVEMS PERFORMANCE IMPROVEMENT PROJECTS 2017

Trauma PI

1st Quarter

- Geriatric Falls in age 65 or greater and if backboard or spinal clearance used

2nd Quarter Projects

- EMS Ending GCS to Beginning Hospital GCS for Trauma and Gold alerts

3rd Quarter Projects

- IV Started on Scene vs. enroute to hospital and if available gauge size

4th Quarter Projects

- End-Tidal CO2 in trauma patient usage

General PI

1st Quarter

- One Certification Transport units in region vs state, rules of exemption and if any agencies have it

2nd Quarter Projects

- Patients with ROSC and what the initial rhythm is

3rd Quarter Projects

- CPAP for CHF/Pulmonary Edema patients
- NTG administration for CHF/Pulmonary Edema patients

4th Quarter Projects

- Stroke Assessments – Last known well time
- Stroke Assessment – What was Cincinnati Stroke Scale (Negative, Positive, or non-conclusive)
- Was a Field Stroke alert activated

EMS Advisory Board November 9th Meeting Report

President's Report- Virginia has been recognized by JEMS for the work being done to review and develop standards for ambulances. Mike Berg was recognized for his work on this.

Vice Chair- No Report

Dr. Melton- Not Present

OEMS Report- Director Brown welcomed everyone to the 37th Annual EMS Symposium. There we're over 1,700 registrants this year. Frank Cheatham reported on the Strategic Highway Safety Plan and spoke about TIMS training. If you are interested, see meeting schedule on OEMS website.

BOH- Mr. Edwards provided follow-up on Abortion regulatory process. He indicated that a portion of the process had not been handled correctly and therefore no action could be taken at the originally scheduled meeting however, the error was corrected and those regulations are now adopted. The next meeting of the BOH is scheduled for 12/1 and the Regional Council reauthorization will be on the agenda.

FirstNet Presentation- Brent Williams the Senior EMS Advisor for FirstNet provided an overview of what this initiative is and the progress occurring at the Federal level.

Terrorist Attacks Presentation- Chief McGee from Prince William County Fire & Rescue gave a comprehensive presentation on the Terrorist Attacks in Paris.

Executive Committee- Mr. Critzer reported that he was still working on reviewing BOH appointment candidates and encouraged anyone who was interested to submit a CV to him as soon as possible. He also reported on the status of concerns over the future of EMT-Intermediate. A consensus has been developed on next steps. A series of Town Hall meetings will be advertised for Spring 2017. Everyone is encouraged to attend to hear information on the topic and provide input. Dates and locations are TBD.

Nominating Committee- Slate of Officers was presented by committee. Committee's nominations were confirmed and the nominated slate was elected for 2017.

FARC- In process of meeting on Fall grants. Special initiative of EMSTF grant was discussed.

Rules & Regulations- Committee had work session in September. Action Item from committee to move forward with advertisement of regulatory process. Approved by unanimous vote.

Legislative & Planning- State EMS plan, reviewed public comment and developed final draft. Action item from committee to approve to move forward to Board of Health for consideration. Approved by unanimous vote.

Transportation- Went over Federal change orders and discussed remounts at most recent meeting. No action items.

Communications- Have not yet met, no action.

Emergency Management- No report.

Medical Direction- Working with Trauma Taskforce. 1st ever Virginia chapter of EMS physicians meeting scheduled for 11/10.

Medevac- Reported on the #Lanethedrone campaign. Everyone signed larger campaign poster.

TSOM- Review of ACS recommendations and draft Trauma Plan continues being developed and will most likely be presented at the next Advisory Board meeting.

EMSC- National level changes are being made to maintaining EMSFC grants. Looking at prevention of medication errors. Looking to expand pediatrics education at Symposium next year.

Training & Certification- Action Item to approve program and updates to TPAM. Approved by unanimous vote.

Workforce Development- There has been more interest in Standards of Excellence program. EMS Officer I program is being presented for first time at Symposium.

Provider Health & Safety- No Report.

Regional EMS Councils- Awaiting update on EMSTF processes and awaiting BOH approval of contracts.

Public Comment- None.

Unfinished Business- None.

New Business- A concern was raised on fingerprint delays. Mr. Berg reported that they are handled by VSP if they are rejected sometimes the reason is unknown. There is no ability to fit it right now.

Meeting adjourned.

Respectfully Submitted,

Jason D. Ferguson

WVEMS Advisory Board Representative

January 1, 2017 RSAF Cycle FARC Recommendations

AGENCY	ITEM	WVEMS Grade	\$ Requested	Level Requested	FARC Grade	FARC Qty	FARC Level	FARC \$
Franklin County Sheriffs Office	9-1-1 Advisor Software	1	20,700.00	H	1.50	1	H	20,700.00
Roanoke County Fire & Rescue	ALS Training Equipment	1	12,941.50	R	1.83	1	R	12,941.50
Floyd County EMS INC	(2) LifePak 15 Cardiac Monitor	1	49,240.00	H	2.00	2	H	49,240.00
Franklin County Public Safety	(2) LifePak 15 Cardiac Monitor	2	33,983.66	R	2.00	2	R	32,709.00
Roanoke Emergency Medical Service	On Board Laptop Computer	2	1,831.50	R	2.00	1	R	1,831.50
Franklin County Public Safety	Lucas 2.2 Chest Compression System	2	6,964.40	R	2.17	1	R	6,964.40
JEB Stuart Rescue Squad	(10) Nexedge VHF Portable Radio	2	3,066.00	R	2.17	10	R	3,066.00
Roanoke County Fire & Rescue	Lucas 2.2 Chest Compression System	1	6,964.40	R	2.17	1	R	6,964.40
Danville Area Training Center	Training Equipment - Sound Tutor & Speaker Modules	2	1,019.25	R	2.33	1	R	1,019.25
Fieldale-Collinsville Rescue Squad	Patient Cot Retention System	1	12,485.00	R	2.33	1	R	11,759.00
Fieldale-Collinsville Rescue Squad	Pt Cot Conversion Kit-Styker	1	980.00	R	2.33	1	R	980.00
Read Mountin Fire/Rescue	Type 1 Ambulance	1	107,500.00	R	2.33	1	R	107,500.00
Danville Life Saving & First Aid Crew Inc	(7) Panasonic Toughbook	2	11,672.50	R	2.50	7	R	11,672.50
Salem Fire - EMS Department	Type 1 Ambulance	1	106,652.00	R	2.50	1	R	106,652.00
Mount Hermon Volunteer Fire Department	Stryker Power Load System	2	21,544.00	H	2.83			
JEB Stuart Rescue Squad	(10) Minitor 6 VHF 5 Channel Pagers	3	2,412.50	R	3.00			
Roanoke Emergency Medical Service	Type 1 Ambulance	1	94,854.00	R	3.00			
Henry County Department of Public Safety	Remount Type 1 Ambulance	1	72,076.00	R	3.50			
VTC Carilion Clinic EMS Fellowship	Quick Response Vehicle	1	97,460.94	H	3.67			
Franklin County Public Safety	Type 1 Ambulance	1	121,818.50	R	4.00			
Horsepasture Volunteer Rescue Squad	Type 1 Ambulance	5	216,000.00	F	4.83			

Total Requested in WVEMS Region: \$1,002,166

H-Hardship (80%) R-Regular (50%)

WVEMS will receive approx.. 11% of the total awarded statewide.

Total Anticipated Awards in WVEMS Region: \$374,000 (37%)

F-Full (100%) Total requests: Approx. \$10 million Total to award: Approx. 4.2 million

REPORT OF THE NOMINATING COMMITTEE

Presented to the Board of Directors, Western Virginia EMS Council, Inc.

December 8, 2016

The Nominating Committee hereby presents the following slate of officers for the Western Virginia EMS Council to serve for calendar years 2017 and 2018:

<u>OFFICE</u>	<u>NOMINEE</u>	<u>PLANNING DISTRICT</u>
President	Steve Simon	5 th
Vice President	Dale Wagoner	12 th
Secretary	Joe Trigg	4 th
Treasurer	Joe Coyle	4 th
Exec. Comm. at-large 4 th	Steve Davis	4 th
Exec. Comm. at-large 5 th	Jason Ferguson	5 th
Exec. Comm. at-large 12 th	Mike Jefferson	12 th

The following directors have been (or will be) appointed by their respective localities for three-year terms beginning January 1, 2017:

Botetourt County	Jason Ferguson* (pending Dec. 22 action by Botetourt County BOS)
City of Salem	Matt Rickman*
City of Covington	Greg Horton
Floyd County	Ford Wirt*
Pittsylvania County	Tim Duffer*
Pulaski County	Joe Trigg*
City of Radford	Rodney Haywood*

*Reappointment

Respectfully submitted:

Carey Harvey Cutter, Chair

DIRECTORS:	2015				2016				2017			
	MAR	JUN	SEP	DEC	MAR	JUN	SEP	DEC	MAR	JUN	SEP	DEC
Allen, Steve	X	X	O	X	X	X	O	O				
Altman, Billy	X	X	X	X	X	O	X	O				
Beach, John	O	X	O	O								
Broughman, J. B.					O	O	O	O				
Brown, Bill	O	O	O	O								
Cady Sr., Jim	X	X	X	X	O	X	X	X				
Coyle, Joe	X	O	O	X	X	X	X	X				
Davis, Steve	X	X	X	X	X	X	X	X				
Dick, Tim	O	O	O	O								
Duffer, Tim	X	O	O	X	X	O	X	O				
Eanes, Steven	X	O	O	X	O	O	X	X				
Ferguson, Jason	X	X	X	X	X	O	X	X				
Guests	2	6	1	3	2	1	0	O				
Harveycutter, Carey	X	X	X	O	X	X	X	O				
Hatcher, Daryl	X	O	X	O	X	O	O	O				
Haywood, Rodney			O	O	O	X	O	O				
Hodge, Rickey	O	O	X	O	O	O	O	O				
Jefferson, Mike	X	X	X	O	X	O	X	X				
Lane, Charles	O	O	X	X	O	O	X	O				
Linkous, David	O	O	X	O	X	O	X	X				
Logan, Robert	X	X	X	X	X	X	X	X				
Muterspaugh, Ryan	O	O	X	X	O	O	X	X				
Rickman, Matt					X	O	X	X				
Shrader, Kris	X	O	X	X	X	O	O	X				
Simon, Stephen	X	X	X	X	X	O	X	X				
Stanley D.O., Eric	X	O	X	X	X	X	X	X				
Taylor, Dallas	X	O	X	X	X	X	X	O				
Trigg, Joe	X	X	X	X	X	X	X	X				
Tweedie, Valerie					X	O	O	X				
Wagoner, J. Dale	X	O	X	X	X	O	X	X				
Wirt, Ford	X	X	X	X	O	X	O	X				
STAFF PRESENT:	2015				2016				2017			
	MAR	JUN	SEP	DEC	MAR	JUN	SEP	DEC	MAR	JUN	SEP	DEC
Berger, Charles	X	X	X	X	X							
Christian, Mary	O	O	O	X	O	O	O	O				
Cockrell, Cathy	X	X	X	X	X	X	X	X				
Dalton, Gene	X	X	O	X	X	X	X	X				
Garnett, Mike	X	X	X	X	X	X	X	X				
Short, Sandi	X	X	X	X	X	O	O	X				
Christensen, Chris	O	X	O	O	O	O	X	X				
Merix, George							X	O				

DID NOT ATTEND = O
NO LONGER INVOLVED

March 2015 Guests: Tim Perkins-OEMS, J.T. Clark-NSPA

June 2015 Guests: Michael Pruitt-NSPA, Jason Gifford, Dr. David Trump-VDH,

June 2015 Guests: Kevin Dillard(Lifecare), Althea McDaniel(Lifecare), Dan(Lifecare)

Sept 2015 Guests: Robert Decarolis

Dec 2015 Guests: Broughman(City of Covington), JT Clark (NSPA), John Hash(Brown Edwards)

March 2016 Guests: Tim Perkins (OEMS), John Dugan (AHA/VHAC)

June 2016 Guests: JC Cook (JCHS)

Sep 2016 Guest: None