

Regional Council Quarterly Reporting

As based on the Scope of Services contract between each Regional EMS Council in the Commonwealth of Virginia, and the Virginia Department of Health, Office of Emergency Medical Services, each Regional EMS Council is required to submit a Program Report, reflecting progress on the annual work plan.

For the remaining quarterly reports for the 2011 Contract Year, the following format will be followed, regardless of the method of reporting (Lotus Notes, e-mail, hard copy):

The following items will be reported upon, in the following order:

A. Regional Infrastructure

1. Regional EMS Council Office Hours

Office hours at the Roanoke (main) office are 8:30 AM, Monday-Friday.

The Radford and Martinsville field offices are staffed by field coordinators, and are generally open during the week. However actual office hours vary due to varying assignments and hours worked in the evenings, on weekends, etc.

WVEMS observes all state and federal holidays.

2. Continuity Of Operations Plan (COOP)

FY 2010 plan in effect. FY 2011 review underway.

FY 2011 plan adopted at December 9 BOD meeting as revised. Has been posted to LN.

3rd Q No change

4th Q no change

3. Employee Qualifications and Performance

- a. Position Title
- b. Responsibilities/Duties
- c. Number of hours per week worked
- d. Percentage of work time allocated to contractual duties
- e. Line of Supervision
- f. Education/Training Requirements
- g. Work Experience/Qualifications

All WVEMS position descriptions stating the above information have been posted to Lotus Notes.

The FY 2011 Classification Plan and payscale has been posted to Lotus Notes.

A roster of employees has been posted to LN

3rd Q No change

4th Q no change except MRC Coordinator was hired. No OEMS contract funds involved. This is funded through a separate contract with VDH.

4. Notification of position vacancy.

There were no vacant positions during the first quarter of FY 11.

There were no vacant positions during the second quarter of FY 11.

3rd Q No vacancies

4th Q No vacancies

5. Organizational Information

- a. Agency wide organizational chart, including all employees/staff.

An organizational chart has been posted to Lotus Notes.

b. Names of all the members of the Board of Directors

A roster of board members has been posted to Lotus Notes.

c. List of Board Members paid through contract funds.

Only the Executive Director (a non-voting member of the BOD) is compensated with contract funds.

d. Disclosure of board members, employees and/or staff relationships with service or entity regulated by OEMS

The roster posted on LN discloses any agency affiliations on the second address line.

3rd Q No change

4th Q no change except new director from Botetourt County (Colt Hagmeier) is affiliated with Blue Ridge VRS.

6. Documentation and Reporting

a. Inclusion of appropriate parties in mailings

All appropriate parties are included in WVEMS mailings. Most communication with agencies and providers is done electronically. Key OEMS staff members are included on electronic distribution lists.

b. Annual financial report by 12/31

The FY 2010 annual audit is underway and will be completed prior to the December 2010 BOD meeting. All field work was completed by the auditors in mid-October.

Annual financial report presented to BOD and approved on December 9. Presentation by Kathryn Overacker from Goodman & Co., auditors, noted no deficiencies and no management letter. Copies distributed to localities as requested, posted on WVEMS website, and to LN.

Engagement letters for FY 12 audits for WVEMS and AEMER have been signed and returned to auditing firm.

4th Q no change

c. Program reports

The BOD is provided with reports on various projects at each quarterly board meeting. Key OEMS staff members are included in board notices.

d. Final annual report

Annual Report for FY 2010 presented to BOD and approved on December 9. Distributed to all localities, posted on WVEMS website, and to LN.

e. Meeting minutes

Board and committee meeting minutes have been posted on Lotus Notes, and, as appropriate, on the WVEMS website.

f. Roster of all subcommittee members

Posted to Lotus Notes

g. Regional policies, bylaws, procedures and protocols

Current bylaws have been posted to Lotus Notes. Other policy and procedure documents were provided in the designation process. The WVEMS employee handbook is available on-line at www/wvems.org/pp2006. Protocols are available on the WVEMS website and by request at any WVEMS office.

WVEMS has contracted with SESCO Management, a management consulting firm, to review all of its

Additional copies of bylaws and policies posted to LN.

3rd Q No change

4th Q no change

h. Three copies of educational materials purchased with state funds

None in 3rd Q

None in 4th Q

i. Financial statements of revenue and expenditures

Provided to board at each regular meeting and posted to LN and WVEMS website as part of agenda packet.

3rd Q No change

4th Q no change

7. Fees

All fees are clearly stated and in conjunction with state/contract guidelines where provided. Such fees are determined after careful evaluation of associated costs.

8. State Committee Responsibilities

a. Directors Committee

Attended by Executive Director

Meeting held on Oct. 27 in Appomattox attended by ED.

Meeting held on Feb 10 in Richmond attended by ED

Meeting held on May 12 in Richmond attended by ED

b. Advisory Board

Attended by Executive Director

Meeting held in conjunction with EMS Symposium attended by ED.

Meeting held on Feb 11 in Richmond attended by ED

Meeting held on May 13 in Richmond attended by ED

c. Assigned committees

Attended by assigned staff. The Executive Director sits on the Finance Legislation & Planning Committee, and currently serves as vice chair. Regional Education Coordinator attends Medical Direction and Professional Development regularly.

ED attended L&P Committee on Feb. 11

No assigned committees met in 4th Q (L&P cancelled due to lack of business)

B. Regional Medical Direction

1. Regional Medical Director

a. Scope of Services

Included in contract.

b. Signed contract

WVEMS RMD Contract is self-renewing. A copy has been posted to LN.

3rd Q No change

No change 4th Q.

2. Regional Medical Protocols

a. Revision of BLS and ALS medical protocols, post to website, proof of approval by Board.

Current Operational Guidelines (protocols) were re-affirmed for FY 11 by BOD at its regular meeting on June 10, 2010 and again on June 16, 2011.

b. Electronic copies of protocol revisions to OEMS

Posted to WVEMS website and available to anyone upon request.

c. Proof of notification of protocol posting to regional stakeholders

All stakeholders are reminded periodically via the WVEMS list-serv of information that is available on the website, including protocols. Hard copies are also available from the WVEMS on-line store, and are currently provided for cost of shipping only (since a revised version will soon be published.)

4th Q no change – New guidelines due for publication in fall 2011.

d. Proof of distribution of Protocols to stakeholders and OEMS

When the current protocol project is complete and published, a specific email blast will notify all stakeholders of availability, and hard copies will be provided at no cost for all agencies and vehicles. Hard copies are also available from the WVEMS on-line store, and are currently provided for cost of shipping only (since a revised version will soon be published.) Current guidelines (handbook) were provided at no charge to every provider, agency, OMD, and hospital when published. Same with updates.

New guidelines have been finalized and are being formatted for publication. Hard copies will be printed for each agency, and electronic copies will be furnished to each provider and agency on CD. New guidelines due for publication in fall 2011.

No change 4th Q.

3. Regional Medication and EMS Supplies Restocking Program

- a. Update and revise medication and supplies restocking plan.

The current agreement is valid through 2011. During 2011 a revised agreement will be developed and signed by all agencies and hospitals.

- b. Provide OEMS with copy of plan, and supporting documentation of approval by Board.

Posted to LN.

Re-posted with 3rd Q report – Meetings with hospitals for renewal of this agreement will begin in 4th Q.

No change 4th Q.

4. Regional Medication Kit Exchange Program

- a. Review, revise and coordinate exchange program for hospitals and agencies.

The current agreement is valid through 2011. During 2011 a revised agreement will be developed and signed by all agencies and hospitals

- b. Provide OEMS with copy of plan, and supporting documentation of approval by Board

Posted to LN.

Re-posted with 3rd Q report – Meetings with hospitals for renewal of this agreement will begin in 4th Q.

No change 4th Q.

C. Regional Planning

1. Regional EMS Plan

- a. Review and revise the Regional Strategic EMS Plan.
 1. Review of council mandates (Code of Virginia)
 2. SWOT Analysis
 3. Planning Committee work to vision for region.
 4. Mission Statement
 5. Core strategies, with strategic initiatives
 6. If no changes, proof of review and approval of existing plan by Board.
- b. Provide OEMS with copy of plan
- c. Proof of notification of plan posting to web to regional stakeholders.
- d. Proof of distribution of plan to stakeholders and OEMS.

Plan was analyzed by staff and BOD. Public comment was invited. Plan was revised during first and second quarters of FY 2011. It was adopted at the BOD meeting on December 9. It has been posted to WVEMS website and LN.

No change 4th Q.

2. Stroke Triage Plan (STP)

- a. Creation of Stroke Triage Committee
 1. Quarterly submission of rosters, agendas and minutes of meetings
- b. Development of Regional Stroke Triage Plan
- c. Submission of STP to OEMS
- d. Proof of notification of plan posting to web to regional stakeholders, and copies to stakeholders as requested.

Stroke Triage Committee has been identified. Template plans have been gathered and are under review by Regional Medical Director. Facilities are being surveyed to determine stroke designation status and treatment capabilities.

A one-quarter extension was requested prior to the end of the quarter (First requested on Feb. 28, then with additional information on March 28.) A draft plan is in the hands of the Stroke Committee and the OMDs, and will be finalized by the Stroke Committee on April 12, and will be on the BOD agenda for adoption on June 16. Draft plan posted to LN. It will be distributed to agencies/providers/hospitals on CD along with new Guidelines (protocols), plans, etc. in summer of 2011.

4th Q - Stroke Committee met in formal meetings three times during the quarter (minutes posted on LN). Other communication was by email. Draft plan was posted on WVEMS website for public comment in May. Stroke Committee met after the public comment period to consider comments received. New draft was prepared and presented to BOD for adoption on June 16. BOD deferred to Executive Committee for further consideration. ED met on June 21 and recommended further revisions to the Stroke Committee. Chairman circulated latest draft to the Stroke Committee. Committee approved. Then two EC members requested two additional minor revisions that were in keeping with the intent of the Stroke Committee's final draft. These changes were incorporated and the EC approved the final draft and it was adopted on June 30.

3. Regional MCI Plan

- a. Option chosen by respective council.
 - a1. Primary – responsible for all aspects of plan – facilitates participation in review process among stakeholders.
 - a2. Secondary – Shared partnership with other entity
 - a3. Attendance – no responsibility – collects and shares information.

Approved by BOD as revised on December 9, 2010. Posted to LN.

Attended numerous LEPC and other related meetings. Participated in MCI drill at Radford Army Ammunitions Plant. AAR posted to LN.

No change in 4th Q.

- b. Copies of agendas, attendance records, minutes and other documentation as proof of participation and accomplishments.
- c. Provide OEMS with copy of plan, and supporting documentation of approval by Board.
- d. Proof of notification of plan posting to web to regional stakeholders.
- e. Proof of distribution of plan to stakeholders and OEMS.

Revised plan (guidance document) posted to WVEMS webiste.

4. Hospital Diversion Plan

- a. Review/revise hospital diversion plan
- b. Provide OEMS with copy of plan, and supporting documentation of approval by Board.
- c. Notification of plan posting to web to regional stakeholders by 6/1.
- d. Proof of notification of plan posting to web to regional stakeholders.
- e. Proof of distribution of plan to stakeholders and OEMS.

Due 4th Q – No changes anticipated.

4th Q - Adopted by BOD with minor revisions on June 16, 2011. Posted to LN.

C. Regional Planning (Cont.)

5. Medical Surge Capacity Plan (MSCP)

- a. Option chosen by respective council.
 - a1. Primary – responsible for all aspects of plan – facilitates participation in review process among stakeholders.
 - a2. Secondary – Shared partnership with other entity
 - a3. Attendance – no responsibility – collects and shares information.
- b. Copies of agendas, attendance records, minutes and other documentation as proof of participation and accomplishments.

- c. Provide OEMS with copy of plan, and supporting documentation of approval by Board.
- d. Proof of notification of plan posting to web to regional stakeholders.
- e. Proof of distribution of plan to stakeholders and OEMS.
- f. Evidence of development and execution of exercise of plan triennially.
- g. Provide OEMS with copy of plan, & documentation of participation in plan development, and an after action report in event of activation of MCI or Surge Plan.

Due 4th Q

Work underway including an agency survey to collect information for inclusion in the plan
 4th Q – Response Plan Annex to MCI Plan adopted by BOD on June 16, 2011. Posted on LN

6. Pandemic and Continuity of Operations Planning

- a. Evidence of assistance to EMS Agencies in developing plan of action for H1N1, reporting of unmet needs, planning activities, incidents and responses (if applicable). Evidence of assistance to EMS agencies in developing plan/procedure for continuation of operations in the event of reduction or cessation of activities by that EMS agency.

Offer of assistance and monitoring of pandemic events and preparations for such events is ongoing. WVEMS participates actively with the Near Southwest Preparedness Alliance, and encourages its inclusion of EMS in all hospital preparedness activities.

No change in 3rd Q.

No change in 4th Q

D. Regional Coordination

1. Regional Information and Referral

- a. Evidence of assistance regarding EMS issues to stakeholders.

All staff members are instructed to respond to every inquiry within 24 hours. Calls, emails and other contacts are fielded by staff members every day. A lending library is maintained.

- b. Maintaining website, posting of documents as required in the contract.

Please see WVEMS website. Website is updated continually, and documents are posted as appropriate.

No change in 3rd Q.

No change in 4th Q

2. Regional PI Program

- a. Develop/Revise/Maintain Regional PI Plan (PIP).

PIP Includes:

1. PI Program outline development
2. Schedule and Topics
3. Method of reporting significant events, including action plan, and resolution plan.
4. PIP includes regional PI committee membership, objectives and rules of committee meetings.

FY 2011 PI Plan was adopted as revised by BOD at its June 2010 meeting.

PI projects are undertaken continually by the committee, and are reflected in minutes and board reports.

Projects underway. Listing of projects posted to WVEMS website and to LN. Plan to be included on CD to be published and distributed in summer of 2011.

No change in 4th Q

- b. Coordination of PI program

1. Development of regional PI template, including:
 - a. Schedule and Topics
 - b. Method of submitting quarterly PI project results to committee.
 - c. Method of reporting significant events to regional PI committee.

Template is available for download on WVEMS website. See minutes of PI committee for information on various projects. Many projects are on-going, and results are posted to the WVEMS website as deemed appropriate. All results are shared with OMDs and agency leaders as needed.

Projects underway. Listing of projects posted to WVEMS website and to LN.

- c. Evidence of provision of technical assistance to agencies to comply with State regs related to reporting. Encourage all agencies to submit data for regional PI initiatives, and to meet requirements.

WVEMS is unable to assist agencies with anything related to data collection and reporting, as we have not been given any training or allowed any access to the EPCR project. The PI plan addresses agency compliance with Data submission for regional PI projects, and it involves agency OMDs who have authority to compel Participation.

OMD meetings emphasized the need for agencies to participate in provision of data for PI projects.

No change in 4th Q

- d. Conduct quarterly regional PI specific meetings, as defined in regional PI plans.
 1. Committee should review findings of agency PI programs, and address significant events.
 2. Develop action plans to improve identified issues (e.g. training specific to issue).
 3. Develop a method of evaluating an action plan.
 4. Demonstrate resolution of identified issues.

Please see PI Committee meeting minutes.

Please see PI Committee 3rd Q meeting minutes.

PI Committee met on June 16. Minutes, etc. posted to LN.

- e. Submission of PI items for FY 07:

1. Agenda, rosters of attendees, and minutes for all quarterly PI meetings.
2. Copy of the PIP
3. Copy of the template PIP plan provided to EMS Agencies in the region.
4. Evidence of EMS Agency involvement in the PIP.
 - a. If agenda and minutes of meetings don't reflect ID of PI issues, then evidence of plans to correct the issues and resolution shall be submitted.

Please see PI Committee meeting minutes and supporting documents, and PI reports to BOD in board minutes.

All posted to LN.

Same in 3rd Q.

PI Committee met on June 16. Minutes, etc. posted to LN

3. Regional Trauma Program

- a. Creation of regional trauma committee

See Committee Membership List posted to LN. Regional TPI Committee serves as TT planning committee.

- b. Trauma Triage Plan (TTP)
 1. Triennial review of TTP
 2. Submission of TTP to OEMS

3. Proof of notification of plan posting to web to regional stakeholders.

FY 10 TT Plan APPROVED as submitted by state trauma oversight committee.

FY 11 TT plan was adopted by BOD at its December 9 meeting with minor revisions. Posted to WVEMS website and LN.

No change in 4th Q

Plan to be included on CD to be published and distributed in summer of 2011.

No change in 4th Q – CD publication to coincide with finalization of new EMS Guidelines. Will include Stroke Triage Plan.

c. Trauma Performance Improvement Program

1. Develop/revise/maintain region wide TPI Plan (TPIP) for trauma related responses.

Plan to include the following:

2. Outline of organized TPI program to examine triage and care of trauma patients, including:
 - a. Monitoring/assessing adherence to patient care protocols
 - b. Monitoring/assessing compliance with trauma triage plans.
 - b. Monitoring/assessing system issues
 - c. Identifying educational needs
 - d. Identifying methods of resolving issues
 - e. Report how identified issues were resolved or improved.

FY 11 TPI Plan adopted by BOD at its June 2010 meeting.

3. Schedule and topics for quarterly region wide PI project to be conducted by contractor and individual EMS agencies

Please see committee meeting minutes and supporting attachments for information on its ongoing projects.

4. PI based method of reporting trauma related significant events. Includes method of reporting to TPI committee, method of developing an action plan, and a method of resolving the event.

WVEMS provides a web-based Medical Incident Review referral form, and follow-up as shown in the Performance Improvement section of the WVEMS website. Plan explains the review process.

No change in 4th Q – The MIR process was utilized at least three times during the 4th Q.

5. TPIP to include the regional TPI committee membership, objectives of the committee and rules for participation in meetings. Committee composition should include representation from OMD's, designated trauma centers, non-designated hospitals and a diverse representation of EMS agencies in the region.

See plan. All of the above are addressed in the plan.

No change in 4th Q

6. Develop and distribute a TPI template for agencies to use to establish or maintain their own PI programs for trauma responses with OEMS approval for template. Template includes:

- a. Schedule and topic for TPI project each quarter
- b. Method to submit quarterly results to regional TPI committee
- c. Method of reporting significant events to TPI committee
- b. Provide technical assistance to agencies to comply with State regs related to QI reporting. Encourage all agencies to submit data for regional PI initiatives, and to meet requirements.
- c. Conduct quarterly TPI specific meetings, as defined in TPI

A template is available for download on the WVEMS website, however WVEMS has no authority to dictate or compel agency compliance.

No change in 4th Q

6. Regional TPI committee should review the findings of individual agency trauma related PI programs, as well as address any significant events that have occurred.

Regional TPI Plan outlines the method of referral. A “Medical Incident Review Form” is available on the Performance Improvement section of the WVEMS website. Use of this form is encouraged in all Peer Review Committee meetings and also in periodic List-Serv postings. Any reported incident that is escalated to the TPI Committee per the plan is discussed at the first available meeting.

8. Develop action plans to improve identified issues
9. Develop method of evaluating action plan
10. Demonstrate resolution of identified issues.

See TPI Plan for method of resolution of identified issues.

No change in 4th Q

d. Submission of TPI related items:

1. Agenda, rosters of attendees, and minutes for all quarterly TPI meetings.

Posted to LN.

3rd Q minutes/attendance posted to LN.

TPI Committee met on June 16, 2011. 4th Q minutes, etc. posted to LN.

2. Copy of the TPIP

Posted to LN and on the WVEMS Website after adoption by WVEMS Board at its June 2010 meeting.

3. Copy of the template TPIP plan provided to EMS Agencies in the region.

Periodic list-serv postings notify stakeholders of the availability of all plans, templates, and other resources.

4. Evidence of EMS Agency involvement in the TPIP.

- a. If agenda and minutes of meetings don't reflect ID of TPI issues, then evidence of plans to correct the issues and resolution shall be submitted.

Any issues put to the committee, if any, will be de-identified and referenced in the TPI committee minutes.

- d. Regional PI/TPI may be addressed by the separate or combined committees.

At present, two distinct committees operate in the WVEMS region.

No change in 4th Q

4. RSAF Program

- a. Promote grant writing and review assistance services to agencies one month prior to submission deadline with electronic/hard copy notifications. Assist agencies to review and write RSAF grant applications upon request, and request assistance from grants administrator when appropriate.

Assistance was provided to approximately two-thirds of the applicants for the current RSAF cycle.

- b. Promote services to assist agencies to submit grants electronically.

WVEMS actually submitted applications for three agencies, and provided assistance to others.

- c. Conduct regional reviews and grading of grants as per regulations and policies governing the RSAF program.

1. Conduct two review and grading sessions during the contract period, and submit grades

2. Notify submitting agencies of review meeting time and agenda

- a. Meeting is open to public

- b. Minutes recorded and kept on file for 5 years.

3. Ensure that each application is reviewed consistently by grant review committee and assigned grade, using OEMS criteria.

4. Rank no less than top 3 applications in order of priority for each regional council area, and submit by e-mail to grants administrator.

All of the above completed for 2nd Q as of Oct. 19, 2010.

Grades and comments submitted to OEMS. WVEMS staff attended FARC meetings on December 2 and 3 in Richmond.

Assisted 10+ agencies with applications for June 2011 cycle. Regional reviews to be held on April 14 at The Franklin Center.

Review meeting held on April 14 at The Franklin Center in Rocky Mount. All applicants met their appointments. Grades and comments were provided to OEMS. Top five priorities were determined and provided to OEMS. ED attended award meetings on June 2-3 in Richmond. Report was provided to BOD in the June 16 meeting agenda packet.

5. CISM Program

- a. Maintain an OEMS accredited regional CISM team as per policy manual guidelines.

CISM Team was active throughout the quarter.

- b. Quarterly statistical report submission

Report submitted via email to Karen Owens and posted to LN.

Second quarter report submitted via email to Karen Owens and posted to LN.

Third quarter report submitted via email to Karen Owens and posted to LN.

4th quarter report submitted via email to Karen Owens and posted to LN.

- c. Updated CISM team operating policy to OEMS, using OEMS approved template.

CISM Policies are reviewed and updated annually by the CISM team. FY 2011 review underway.

Current policies posted to LN

- d. Semi-annual CISM report

- e. CISM Team Meeting minutes submitted to OEMS.

Posted to LN

3rd Q meeting minutes posted to LN. CISM group held two meetings during the 3rd Q and also offered ICISF training.

4th Q meeting minutes posted to LN.

6. Regional EMS Awards Program

- a. Conduct Regional EMS Awards Program

1. Title is (RC name) EMS Awards Program.

2. Regional Awards Program has same 11 categories and criteria as Governor's Awards, including scholarship.

3. Use of OEMS nomination form.

4. Schedule and publicize the awards program.

5. Award to each first place winner.

- b. Assure that regional nominations are judged and forward first place winners information to OEMS by 8/2.

1. Appoint a committee to select regional winners.

2. Provide information to Advisory Board Selection Committee.

3. Submit news release to local media and OEMS within one week of ceremony, using format provided by OEMS.

Publicity for FY11 awards program will begin in 2nd Q.

Publicity for FY11 awards program began in 2nd Q.

Awards banquet set for June 16.

In 4th Q, Awards Committee consisting of previous winners was empanelled. Winners were selected from among the nominations received. Awards were presented at the Awards Banquet held on June 16 at the Salem Civic Center. No press release format was provided by OEMS, so our usual format was used. Nominations to the Governor's Award Program will be submitted to OEMS by the imposed deadline.

7. Regional EMS Instructor Network

a. Conduct a minimum of two meetings to discuss educational performance improvement, issues surrounding educational aspect of training, instructor administrative requirements, and CTS concerns.

Four meetings conducted (see meeting agendas, attendance and notes posted on LN)

b. Notify all EMT instructors, ALS Coordinators, OEMS DED Staff, OEMS Program Reps, and Emergency Operations Instructors of the meetings. Meeting notice distribution 20 days prior with agenda.

All instructors, etc. notified via email and web calendar posting of all meetings.

c. Meeting should be set up for face to face networking, but shall be conducted in a format allowing for feedback.

All meetings included presentations and discussions.

d. Agenda, roster and minutes to OEMS

Posted on LN.

E. BLS-CTS Administration

1. Establish at least one OEMS approved CTS facility within its service delivery area.

2. CTS schedule for FY 11.

3. Publish CTS schedule on web.

4. Provide CTS schedule to EMT-Instructors.

5. Register testing candidates.

6. Ensure CTS Evaluator compliance with P&P Manual

7. Maintain list of current approved CTS Evaluators, and submit to OEMS

8. Fee for initial testing.

9. Fee for retest.

10. No fees for written examination

11. Adherence to guidelines of CTS P&P Manual

All of the above ongoing. Test sites are published on the statewide CTS registration system. Some 22 sites per year are conducted in the WVEMS region. See <https://testing.vaems.org> WVEMS manages the statewide CTS registration system.

All sites for the year have been posted. Registrations are taken continually on this web-based application.

All evaluators and coordinators are trained to comply with OEMS P&P Manual. Fees in accordance with OEMS guidelines.

A full roster of evaluators, patients, coordinators, and assistants has been posted to LN.

CTS system user group meeting planning is underway. To be held in NOVA in January.

CTS User Group meeting held at NVEMSC on January 24. Version Release 2 of the CTS registration program is in development. Registration fields to accommodate the VEMSES registrations for OEMS has been added to the site..

4th Q - No changes. Some updates to the Statewide CTS System were implemented.

F. Regional Category One CE Program

1. Promote ALS and BLS CE that satisfies Category 1 requirements in each planning district.

2. Submit the website address of the CE program schedule within region.

All CE posted to WVEMS web calendar, and promoted via list-serv and website. Also, various CE events are posted on the "Upcoming Education" section of the WVEMS website.

No change for 3rd Q.

No change for 4th Q.