

Southwest Virginia EMS Council



2011 Annual Report

July 1, 2010—June 30, 2011

(Approved March 15, 2012)

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Organizational Mission and Purpose:

SCOPE OF REPORT

This annual report provides operational and financial information concerning the Southwest Virginia Emergency Medical Services Council, Inc., for the time period July 1, 2010 through June 30, 2011. Information regarding staffing, committee, and Board membership is provided based on current membership on June 30, 2011. Board appointments are typically made in January of the fiscal year. Financial data is taken from the annual audit conducted by Keen & Proffitt Company, P.C.

ORGANIZATIONAL MISSION

In FY2011, the Council Board of Directors revised and adopted a new mission statement to more accurately describe the goals and philosophies of the organization. The mission of the Southwest Virginia Emergency Medical Services Council, Inc., is:

“To evaluate the needs of the EMS community and to provide the services necessary to reduce morbidity and mortality in southwest Virginia arising from emergent illness or traumatic injury through facilitation, coordination, and planning of a comprehensive EMS system.”

ORGANIZATIONAL VISION

The vision of the Southwest Virginia Emergency Medical Services Council is:

“To constantly elevate the quality of prehospital care and EMS response throughout southwest Virginia.”

ORGANIZATIONAL PURPOSE

The primary purpose of this organization is to form a mechanism to bring together the providers of emergency medical services, the public agencies involved with health and safety, and community leaders and citizens to plan and to implement a comprehensive emergency medical services system in our service area. A secondary purpose is to insure the availability of training and resources to insure that users of the regional emergency medical services system receive the best possible prehospital patient care during emergent situations.

The major objectives of this organization shall be, but shall not be limited to, the following:

- 1) To plan for and to implement a system that provides for the arrangement and organization of personnel, facilities, and equipment for the effective and coordinated delivery of health care services in the area to be served under emergency conditions.

- 2) To coordinate and improve the delivery of emergency medical services in the region and thereby have the highest possible quality of emergency medical services.
- 3) To provide assistance in coordinating the Emergency Medical Services system with other public services, institutions, and agencies in the area of service.
- 4) To develop goals and to facilitate region-wide comprehensive emergency medical services plans and priorities to stimulate action, coordinate and otherwise ensure maximum use of existing and future emergency medical facilities, services, and manpower compatible with health delivery systems within the area served.
- 5) To serve as an advisory board to governments and non-governmental agencies within the area served on matters concerning emergency medical services.
- 6) To conduct and stimulate programs of education and training designed to upgrade the knowledge and skills of all health manpower involved in emergency medical services.

CODE OF VIRGINIA AND ORGANIZATIONAL BACKGROUND:

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.

ORGANIZATIONAL BACKGROUND

The Southwest Virginia EMS Council, Inc., is a 501 (c) 3 organization established in 1979 serving the counties of Bland, Buchanan, Carroll, Dickenson, Grayson, Lee, Russell, Scott, Smyth, Tazewell, Washington, Wise and Wythe and the cities of Bristol, Galax, and Norton. The Council is a leading provider of Advanced Life Support continuing education programs and coordinates all of the region’s emergency medical services test sites. The Council provides an EMS lending library for EMS agencies, instructors, and hospitals free of charge to promote continual professional development of EMS and other healthcare providers. The Council coordinates the regional Critical Incident Stress Management Team to insure 24/7 assistance during traumatic events and coordinates the development of regional prehospital patient care protocols, disaster and patient transfer plans, and a regional performance improvement program.

Organizational Officers:

- Lonny Gay President
- J.C. Bolling Vice-President
- Maxie Skeen Secretary
- Delilah Long Treasurer
- Roger Burke Member
- Steve Wallace Member
- Doug Testerman Member
- Norman Rexrode SWVAEMS Council Regional OMD
- Paul Phillips SWVAEMS Council Regional OMD
- Gregory Woods SWVAEMS Council Executive Director

Council Staff:

- Gregory Woods Executive Director
- Bryan Kimberlin Field Coordinator
- Gary Whiteaker Field Coordinator
- Sara Harrington Field Coordinator
- LeAnn Atwell Administrative Assistant
- Maggie Long Program Support Specialist

Board of Directors:

Bland County	Lonny Gay
Buchanan County.....	Junior Keene
Carroll County	Joe Roma
City of Bristol	J.C. Bolling
City Of Galax.....	Ron Passmore
City of Norton.....	Todd Lagow
Council Executive Director.....	Gregory Woods
Cumberland Plateau Planning District Commission.....	Steve Wallace
Dickenson County.....	Ron Kendrick
Governor’s EMS Advisory Board	L.V. Pokey Harris
Grayson County	Robby Wingate
Lee County.....	Freda Ayers
Lenowisco Planning District Commission.....	Delilah Long
Mount Rogers Planning District Commission	Dr. French Moore, Jr.
PD-1 At Large.....	Jerry Bledsoe
PD-2 At Large.....	Vacant
PD-3 At Large.....	Bryan Saunders
Regional Hospital Administrator	Anne Fleming
Regional Hospital Adminsitrator	David Brash
Regional OMD.....	Dr. Norman Rexrode
Regional OMD.....	Dr. Paul Phillips
Russell County	Maxie Skeen
Scott County	Roger Burke
Smyth County	Doug Testerman
Southwest VA CISM Team	Charlie Smith
Tazewell County	Rudy Keith
VAVRS District 7.....	Dreama Chandler
VAVRS District 9.....	Earl Carter
Virginia Emergency Nurses Association	James "Rusty" Osborne
Washington County	Carol Barr
Wise County	Dr. Gary Williams
Wythe County	William “Dub” Ford

Summary of Accomplishments:

Regional Infrastructure

- Maintained designation as a regional emergency medical services council serving the cities of Bristol, Galax and Norton and the counties of Bland, Buchanan, Carroll, Dickenson, Grayson, Lee, Russell, Scott, Smyth, Tazewell, Washington, Wise, and Wythe.
- Established a regional EMS training center in Bristol, Virginia , through relocation of the Council office.
- Maintained one office in Bristol, Virginia, that was staffed from 9:00a.m.-5:00p.m. Monday through Friday (excluding holidays).
- Provided a consistent point of contact for EMS providers, agencies, hospitals, physicians, and local governments.
- Maintained a full-time staff of 5 employees (including three full-time field coordinators) and a pool of independent training and testing contractors.

- Provided representation on a number of local, regional, and statewide committees and boards including:
 - Virginia EMS Advisory Board
 - Representative Pokey Harris served as Vice-Chair of that group
 - Regulation and Policy Committee
 - Executive Director Greg Woods serves as rural EMS representative
 - Regional EMS Directors Group
 - Executive Director Greg Woods served as vice-chairman of that group
 - Far Southwest Preparedness Alliance
 - Staff Member Gary Whiteaker attends and participates in regional meetings of that group
- Maintained an interactive website to promote EMS news and events, training opportunities, job announcements, plan and protocol revisions, and related EMS links.
- Established Facebook page to increase social presence.
- Made organizational documents, policies, and reports available for download on the Council website.
- Established numerous listservs to facilitate communications with various stakeholder groups.

Regional Medical Direction

- Maintained a regional King Airway project that involved placing King Airways on all transport vehicles operated by volunteer and governmental EMS agencies.
- Maintained contracts with Dr. Norman Rexrode and Dr. Paul A. Phillips to serve as the regional operational medical director.
- Completed regional prehospital patient care protocol revision.
- The Medical Direction Committee continued to work on a standard supplies and medications list and protocol revisions.
- Held quarterly meeting of regional medical directors.
- Maintained a regional CLIA waiver to exempt regional EMS agencies from individual laboratory registration for testing of blood with portable glucometry equipment as required by federal regulation.

Regional Planning

- Reviewed and revised regional Strategic EMS Plan. A SWOT analysis was conducted by the Executive Committee of the Board of Directors as part of the revision process. Revised Mission Statement and Vision Statement to better reflect organizational goals and philosophy.
- Revised the Trauma Triage Plan through the participation of an ad-hoc committee. The Weapons of Mass Destruction/Mass Casualty Incident Plan was reviewed and revised by the regional Emergency Planning and Preparedness Committee consisting of representatives from the Department of Health, VDEM, American Red Cross, Medical Reserve Corp, and other agencies.
- Council staff participated in mock disaster events held throughout the region on request as evaluators and moulage technicians.
- The Hospital Diversion Plan was distributed to EMS agencies and hospitals for review and input.
- Staff members participated in surge capacity planning meetings.

Regional Coordination

- Revised the regional EMS Performance Improvement plan and established quarterly indicators for regional performance improvement projects. A schedule of quarterly topics was distributed to all regional EMS agencies for participation in the regional PI program.

- Revised the regional Trauma Performance Improvement plan and established quarterly indicators for regional performance improvement projects. A schedule of quarterly topics was distributed to all regional EMS agencies for participation in the regional TPI program.
- Maintained regional PI/TPI programs and coordinated regional committees to review received data and make recommendations to address deficiencies. Reports of PI/TPI findings are posted on the Council website. Participation in regional PI/TPI programs insures compliance with state regulations.
- Revised a Performance Improvement template that can be used by EMS agencies to establish performance improvement programs to comply with state regulations.
- Promoted the state EMS grant program and provided assistance to EMS agencies (upon request) in completing and submitting state Rescue Squad Assistance Fund (RSAF) grant applications.
- Conducted two regional RSAF application review meetings and assigned grades using a standardized grading system. Submitted regional grades, priority rankings, and comments to the Office of Emergency Medical Services in support of regional grant applications.
- Attended state meetings of the Financial Audit Review Committee to support regional RSAF grant nominations. More than \$ 688,316 in RSAF funding was received regionally.
- Coordinated a regional Critical Incident Stress Management Team and maintained team accreditation through the Virginia Office of Emergency Medical Services.
- Provided and promoted a 24/7 point of contact number for activation of the team in response to requests from public safety agencies. Responded to 7 requests for CISM team interventions throughout the region assisting 27 public safety providers.
- Coordinated a regional EMS Awards program. Recognized ten regional award winners and one regional scholarship award winner at an awards banquet held May.
- Nominated regional EMS awards winners for the consideration for the Governor's EMS Awards which were presented in November 2011.
- Conducted two regional instructor network meetings.

Regional EMS Testing

- The Council coordinated the testing of regional EMS providers for initial EMS certification at both the basic life support and advanced life support levels. The Council developed and distributed a yearly testing schedule, registered all test candidates, and coordinated all technical aspects of testing events including facility procurement, resource provision, and staffing.
- The BLS testing program involved 12 consolidated test sites that provided testing for approximately 406 EMT candidates.
- The ALS testing program involved 3 ALS test sites that provided testing for approximately 78 candidates and 1 National Registry test that provided testing for approximately 28 candidates.
- The Council conducted 1 EMT-Evaluator courses to support regional EMS testing efforts.
- Maintained adequate equipment and supplies required to administer and stock all regional tests.

Regional EMS Education

- Offered more than 400 hours of continuing education opportunities throughout the region including:
 - ___ Advanced Life Support Ancillary Courses:
 - ___ Trauma Courses (2 PHTLS, 1 ITLS, and 1 Pediatric BTLS), 4 Pediatric Courses (1 PALS, 1 PEARS, 2 Neonatal Resuscitation), 2 Advanced ALS Courses (1 ACLS and 1 Difficult Airway Course)
 - ___ Category-One Refresher Courses
 - ___ ALS refresher programs (48-hour)
 - ___ BLS refresher programs (24-hour)
 - ___ CTS Evaluator courses and 2 Instructor Network Meetings

- Administered funds for the Southwest Virginia Paramedic Program and assisted in management of a regional tuition assistance program.
- Processed CE credit for individuals completing auxiliary courses at other training sites.
- Promoted Cat-1 CE programs being held throughout the region via print and online media.

Other Activities

- Provided a point of contact for information and referral for EMS providers, agencies, local governments, and the general public on matters related to emergency medical services.
- Distributed informational documents (pamphlets, posters, etc.) from regional and state EMS offices and other stakeholder groups upon request.
- Maintained a lending library of EMS training equipment and videos available to EMS agencies, instructors, and providers, to facilitate high quality education and hands-on skills practice.
- Published and distributed quarterly activity and financial reports.
- Provided representation on various state committees including:
 - State EMS Advisory
 - Regional EMS Directors Group
 - Regulation and Policy Committee
- Worked with the Bristol Regional Medical Center Stroke Center to facilitate provision of EMS continuing education for attendance at their annual Stroke Symposium.
- Promoted Stroke Training events held throughout the region.
- Worked with committees and agencies interested in developing accredited EMT-Intermediate training sites.
- Made photo ID badges for agencies and individuals within the region upon request.
- Field Coordinator served as route coordinator for the National Memorial Bike Ride. He coordinated rest stops throughout the region and travelled to Roanoke to attend the National EMS Memorial Service.

Major Sources of Funding:

Alpha Natural Resources	Grayson County
Bland County Volunteer Rescue Squad	Lee County
Bland County	Russell County
Bristol Virginia Utility Board	Scott County
Buchanan County	Smyth County
Carroll County	Tazewell County
City of Bristol	Town of Abingdon, VA
City of Galax	Town of Marion, VA
City of Norton	United Way of Wythe County
Commonwealth of Virginia	Washington County
Dickenson County	Wythe County
Employee Community Action Council <i>(of the employees of General Dynamics Armament Systems)</i>	

Statement of Financial Position:

SOUTHWEST VIRGINIA EMERGENCY MEDICAL SERVICES COUNCIL, INC.
STATEMENT OF FINANCIAL POSITION
JUNE 30, 2011

ASSETS	Unrestricted	Temporarily Restricted	Totals
CURRENT ASSETS			
Cash and equivalents	\$ 33,842	\$ 23,926	\$ 57,768
Accounts receivable	225	-	225
Prepaid expenses	931	-	931
Total current assets	<u>34,998</u>	<u>23,926</u>	<u>58,924</u>
PROPERTY AND EQUIPMENT			
Office furniture and equipment	123,774	-	123,774
Training equipment	61,869	-	61,869
Vehicles	31,605	-	31,605
Communication equipment	260	-	260
Leasehold Improvements	7,452	-	7,452
	<u>224,960</u>	<u>-</u>	<u>224,960</u>
Less: accumulated depreciation	<u>(181,015)</u>	<u>-</u>	<u>(181,015)</u>
Total property & equipment, net	<u>43,945</u>	<u>-</u>	<u>43,945</u>
Total assets	<u>\$ 78,943</u>	<u>\$ 23,926</u>	<u>\$ 102,869</u>
LIABILITIES & NET ASSETS			
CURRENT LIABILITIES			
Accounts payable	\$ 1,544	\$ -	\$ 1,544
Accrued salaries and wages	10,791	-	10,791
Other current liabilities	3,272	-	3,272
Total current liabilities	<u>15,607</u>	<u>-</u>	<u>15,607</u>
NET ASSETS	<u>63,336</u>	<u>23,926</u>	<u>87,262</u>
Total liabilities and net assets	<u>\$ 78,943</u>	<u>\$ 23,926</u>	<u>\$ 102,869</u>

Statement of Activities:

SOUTHWEST VIRGINIA EMERGENCY MEDICAL SERVICES COUNCIL, INC.
STATEMENT OF ACTIVITIES
FOR THE YEAR ENDED JUNE 30, 2011

	<u>Unrestricted</u>	<u>Temporarily Restricted</u>	<u>Totals</u>
SUPPORT AND REVENUE			
State training income	\$ 283,940	\$ 107,270	\$ 391,210
Local governments	47,427	-	47,427
Other training income	3,722	-	3,722
Contributions	29,235	-	29,235
United Way	250	-	250
Interest	78	-	78
Other income	2,991	-	2,991
Net assets released from restrictions:			
Satisfaction of donor restrictions	88,212	(88,212)	-
Total support and revenue	<u>455,855</u>	<u>19,058</u>	<u>474,913</u>
EXPENSES			
Salaries and wages	219,535	-	219,535
Training programs expense	88,816	-	88,816
Rent	33,610	-	33,610
Payroll taxes	18,879	-	18,879
Depreciation	17,899	-	17,899
Telephone and utilities	13,744	-	13,744
Legal and accounting	13,379	-	13,379
Office	11,653	-	11,653
Repairs and maintenance	8,761	-	8,761
Travel and meetings	8,284	-	8,284
Textbook expense	3,747	-	3,747
Insurance	3,715	-	3,715
Miscellaneous	3,505	-	3,505
Taxes and licenses	1,653	-	1,653
Penalties	1,638	-	1,638
Employee tuition reimbursement	1,093	-	1,093
Postage	1,068	-	1,068
Dues and subscriptions	700	-	700
Contract labor	164	-	164
Interest	63	-	63
Total expenses	<u>451,906</u>	<u>-</u>	<u>451,906</u>
Theft loss	<u>-</u>	<u>-</u>	<u>-</u>
CHANGES IN NET ASSETS	3,949	19,058	23,007
NET ASSETS, BEGINNING OF YEAR	<u>59,387</u>	<u>4,868</u>	<u>64,255</u>
NET ASSETS, END OF YEAR	<u>\$ 63,336</u>	<u>\$ 23,926</u>	<u>\$ 87,262</u>

Statement of Cash Flows:

SOUTHWEST VIRGINIA EMERGENCY MEDICAL SERVICES COUNCIL, INC.
STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED JUNE 30, 2011

	<u>Unrestricted</u>	<u>Temporarily Restricted</u>	<u>Totals</u>
CASH FLOWS FROM OPERATING ACTIVITIES			
Change in net assets	\$ 3,949	\$ 19,058	\$ 23,007
Adjustments to reconcile changes in net assets to cash provided by operating activities:			
Depreciation	17,899	-	17,899
Accounts receivable	1,357	-	1,357
Prepaid expenses	(431)	-	(431)
Accounts payable	399	-	399
Other liabilities	(19,367)	-	(19,367)
	<u>3,806</u>	<u>19,058</u>	<u>22,864</u>
Net cash provided (used) by operating activities			
CASH FLOWS FROM INVESTING ACTIVITIES			
Purchase of property and equipment	<u>(15,303)</u>	<u>-</u>	<u>(15,303)</u>
NET INCREASE (DECREASE) IN CASH	(11,497)	19,058	7,561
CASH, BEGINNING OF PERIOD	<u>45,339</u>	<u>4,868</u>	<u>50,207</u>
CASH, END OF PERIOD	<u><u>33,842</u></u>	<u><u>23,926</u></u>	<u><u>57,768</u></u>