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STAFF **DIRECTORY**

(as of 11-01-2021)

WVEMS

Executive Director

Stephen G. Simon, MS, EFO, NRP (ssimon@vaems.org)

Compliance Officer

Mary H. Christian (mchristian@vaems.org)

Field Coordinator

William E. (Gene) Dalton, NRP (gdalton@vaems.org)

Education Program Director

Cathy Cockrell, MHS, CCEMT-P, NRP (ccockrell@vaems.org)

Field Coordinator

Chris Christensen, NRP (cchristensen@vaems.org)

Director of Information Technology for Regional Councils (RCTS)

Jim Huffman (jhuffman@vaems.org)

Business Manager

Sandra McGrath (smcgrath@vaems.org)

Field Coordinator

Michael Garnett, NRP (mgarnett@vaems.org)

WVEMS Regional Medical Director

Charles Lane, MD, FACEP (clane@vaems.org)

NSPA

NSPA Executive Director

Robert Hawkins (rhawkins@vaems.org)

NSPA Medically Vulnerable Populations Coordinator

Mary Kathryn Alley (mkalley@vaems.org)

NSPA RHCC Manager

Mark Cromer, Ph. D. (mcromer@vaems.org)

NSPA Training and Exercise Coordinator

Monica McCullough (mmccullough@vaems.org)

NSPA RHCC Duty Officers

Ashley Briggs Adam LaChappelle Jeff McKinney Richard Christ

NSPA Material Managers

Phillip Belcher Lucian Belcher



NEW EXECUTIVE LEADERSHIP

After twenty-five years of dedicated service, long-time Executive Director, Rob Logan retired, in the spring of 2021. Rob continued working in the role of a consultant to assist the Council in matters relating to the transition of the new Executive Director. Rob has been instrumental in the success of the Council, helping the Council and Board of Directors change with the times to remain a go to partner for our EMS agencies in the Western Region. Kevin Dillard, who is the current Chairman of the EMS Governor's EMS Advisory Board has worked with Rob for many years and commented "Rob has been an advocate for the statewide EMS system, helping to ensure that the citizens and visitors of Virginia have the best EMS system in the nation. His passion and dedication to the regional and statewide EMS systems has been extraordinary and appreciated over the years." Moving forward the Council chose a past Board member and former President of the Council when they selected Stephen Simon for the position. Steve has over 35 years in the Fire-EMS field, having recently retired from Roanoke County after a 26 year career with the last six years as the Chief of Fire and Rescue.

A MESSAGE FROM GARY BROWN

DIRECTOR OF VIRGINIA DEPARTMENT OF HEALTH, OFFICE OF EMS

I consider Rob Logan as a pioneer, mover and shaker who helped develop and shape the emergency medical services system in Virginia that all citizens and visitors to the state benefit from today. For well over 40 years in EMS, and as Executive Director of the Western Virginia EMS Council, Rob's leadership has been a constant source of encouragement and guidance that assured the EMS system would advance and thrive. I want to thank Rob for being a spirited professional, a leader whose actions strongly influenced the course of EMS in the Commonwealth and a great friend.

All My Best

Director, Virginia Office of Emergency Medical Services



MISSION

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

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

Regional emergency medical services councils

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

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 Pulaski County Innovation Center)

> Piedmont Office 1024 DuPont Road Martinsville VA 24112 (located in the Henry County Public Safety Training Center)

Virginia's EMS Councils



WVEMS is one of 11 regional EMS councils in Virginia. It serves the fourth, fifth and twelfth planning districts of Virginia, encompassing the following localities:

Alleghany County **Botetourt County Craig County** Floyd County **Giles County** Franklin County **Henry County Montgomery County Patrick County** Pittsylvania County Pulaski County Roanoke County City of Covington City of Danville City of Martinsville City of Radford City of Roanoke City of Salem

LEADERSHIP AND OVERSIGHT

BOARD OF DIRECTORS

(As of 4-1-2021)

Joe Trigg, President*

Mike Jefferson, Vice President*
Marlon (Matt) Rickman, Secretary*

Valarie Tweedie, Treasurer*

Steve Allen

James L. Cady, Jr.

Eric K. Stanley, D.O.

James L. Cady, Sr. Christopher Slemp

Gary Meadows, MHA, BS, RN

Larry Lafon

Matthew Tatum

Dwaine Paxton

Jason Ferguson

Joe Coyle

Kris Schrader

Don Altice

William Ferguson

Carey Harveycutter*

Marcus Stone

Charles J. Lane, MD, FACEP

Stephen G. Simon* (non-voting)

Ryan Muterspaugh

Robert Hawkins

Kristopher Shrader*

Rodney Haywood

Valerie Tweedie*

Philip Belcher

Richard Flora

*Executive committee

Representing

Pulaski County

City of Danville

City of Salem

Montgomery County

Patrick County

City of Roanoke

Emergency Physician At-large

Craig County

Pittsylvania County

Emergency Nurses Association

Giles County

Henry County

City of Covington

Botetourt County

Montgomery County

City of Martinsville

Roanoke County

Franklin County

Va. Assoc. of Vol. Rescue Squads

12th Planning District At-large

Regional Medical Director

Executive Director

Alleghany County

NSPA/Hospital System Representative

City of Martinsville

City of Radford

4th Planning District At-Large

Floyd County

5th Planning District At-Large

COMMITTEE, SUBCOMMITTEE AND PROGRAM LEADERS

Executive Committee – Joe Trigg, Chair

Medical Direction - Charles J. Lane, MD, Regional Medical Director/Chair

Pharmacy Workgroup - Larry Mullins, R.Ph., MBA, Co-Chair & Julie Flint R.Ph., Co-Chair

Allied Resources Workgroup - Darrell VanNess, MSN, Chair

Education Subcommittee – Marlon (Matt) Rickman, Chair

Performance Improvement/Trauma Triage Committee - Charles Lane, MD, Chair

Stroke Triage Workgroup - Charles Lane, MD, Chair

Regional Critical Incident Stress Management Team (CISM) - Dwayne Cromer, Team Administrator

Communications Workgroup - Jim Cady, Sr., Chair

SIGNIFICANT **ACCOMPLISHMENTS**

PROVIDER SERVICES AND RECOGNITION

Responded to COVID-19 by providing testing solutions for EMS agencies through all three offices.

Coordinated PPE supplies distribution from Virginia Department of Health to EMS Agencies.

Developed protocols to assist EMS agencies in responding to COVID-19 emergencies to include specialized medical protocols for call screening and patient treatment.

Continued with training programs to assist EMS Providers in obtaining needed CE hours.

Provided volunteer and career referrals and training course information in response to daily telephone and electronic inquiries.

WVEMS Staff participated in vaccination clinics and coordination with all three Health Districts in our Region.

Recognized providers and agencies in ten categories of Regional EMS awards, plus a scholarship to an outstanding EMS provider who was a high school senior. Submitted regional award recipients as statewide Governor's EMS award nominees. Presented the Benny Summerlin Award for Service to Local Government. 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 37 volunteer mental health and peer public safety debriefers. Quarterly virtual team meetings conducted

Maintained and updated statewide "Virginia EMS Jobs" (www.vaemsjobs.com) on-line database for the Virginia Office of EMS.

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



EMS EDUCATION AND ADVOCACY

Paramedic Program – Roanoke 2020 Completed

Paramedic Program – Roanoke 2021 On Going

Advanced EMT Program – New River Valley 2020 Completed

Regional Awards Program

Stop the Bleed Programs

TECC – Tactical Emergency Casualty Care

AMLS - Advanced Medical Life Support

TCCC – Tactical Combat Life Support

BLS – Basic Life Support (CPR)

AHDR – All Hazards Disaster Response

Roanoke-Blacksburg Regional Airport Full-Scale Exercise in conjunction with the Airport Commission and NSPA. Participate in planning and execution of exercise.

WVEMS maintains an accredited AEMT Training Center at our New River Valley location. Awarded accreditation renewal in 2017.

Maintains Clinical Agreements and Agency Field Training Agreements with a multitude of regional medical facilities and EMS Agencies to provide clinical and field training for our accredited programs.

Provided a loaner library of EMS educational videos, training equipment and books.

Completed one Advanced EMT program in the Roanoke area with a 92% pass rate.

Continued a cooperative EMS education program with Radford University Carilion.

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

Provided support to Roanoke Valley Regional Fire-EMS Training Center, WVEMS New River Valley Training Center, Central Shenandoah EMS Council, LewisGale Medical Center, and Carilion Clinic to offer and facilitate AMLS, PHTLS, TECC, GEMS, ACLS, PALS and BLS classes throughout the region.

Provided regional coordination for a "Stop the Bleed" campaign for civilians and EMS providers.

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.

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, ADLS, BDLS, TCCC, GEMS, ACLS-EP.

Staff served as regional faculty for The American Heart Association in BLS, ACLS and PALS.

Staff serves as state coordinator for all NAEMT programs in the Commonwealth

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

Staff appointed to Affiliate Faculty for TECC, AMLS, PHTLS

In conjunction with NSPA, offered ADLS and BDLS courses. Provided EMS Continuing Education credits for various NSPA-sponsored courses.





MEDICAL DIRECTION AND PERFORMANCE IMPROVEMENT

Specialized COVID-19 Medical Protocols developed for patient care and provider safety.

Medical Protocols Revised

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

Maintained a regional ambulance supply exchange and drug restocking policy with all hospitals and EMS agencies in the region participating.

Continued projects for regional EMS performance improvement.

Provided suggested guidelines for quality improvement programs in agencies.

Maintained clinical education agreements at all hospitals and other medical entities across the region.

Continued and expanded the role of regional Performance Improvement Committees.

Revised and maintained a Regional Stroke Triage Plan.

Revised and maintained a Regional Trauma Triage Plan.

Maintained Regional General and Trauma Performance Improvement Plans.

Maintained and published a regional Performance Improvement Plan.

COMMUNICATIONS, FACILITIES

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

Created COVID-19 testing sites at all three Council's Offices to provide Agencies another option for testing their staff.

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 communications system.

Continued ownership and operation of various regional EMS communication systems.

PUBLIC INFORMATION AND REFERRAL

Maintained an electronic newsletter with some 1,200 subscribers to provide frequent notices of training events and other timely EMS news.

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

Regularly updated the council's Internet web site www.wvems.org with current EMS news and events, education, recruitment, CISM information, committee minutes and council reports, trauma triage information, mass casualty information, General Assembly information and relevant EMS links.

Maintained WVEMS presence on various social media platforms

OTHER PLANNING AND COORDINATING ACTIVITIES

Provided fiscal and administrative support Statewide IT Data Project on the implementation of ESO reporting software.

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.

Revised regional EMS strategic plan and other regional planning documents.

Provided fiscal and administrative support to the Near Southwest Preparedness Alliance (NSPA) to manage some \$1 million in federal hospital preparedness program (HPP) funds.

Employed a State Hospital Coordinator contracted to the Virginia Department of Health.

Provided Information Technology Support for all 11 regional EMS councils by employing a Director of Information Technology and a Support Specialist, and contracting various other services.



ABOUT THE NEAR SOUTHWEST PREPAREDNESS ALLIANCE

The Near Southwest Preparedness Alliance is one of six healthcare coalitions in Virginia. It is supported by funds from the US Department of Health and Human Services, through the Assistant Secretary for Preparedness and Response. It was founded in 2002 as the Near Southwest Hospital Preparedness Task Force, and became the Near Southwest Preparedness Alliance in 2004



NSPA exists for one simple reason: to support the healthcare infrastructure of Southwestern Virginia with disaster preparedness, response, recovery and mitigation resources. We do this by:

- Providing comprehensive disaster resource management
- Delivering world-class training, education and exercises
- Supporting response through incident coordination
- Improving healthcare intelligence with real-time situational awareness before, during and after disaster

The Near Southwest Preparedness Alliance region encompasses the counties of Alleghany, Amherst, Appomattox, Bedford, Botetourt, Campbell, Craig, Floyd, Franklin, Giles, Henry, Montgomery, Patrick, Pittsylvania, Pulaski, Roanoke, and the cities of Covington, Danville, Lynchburg, Martinsville, Radford, Roanoke and Salem.

NSPA STAFFING AND LEADERSHIP

(As of 11-1-2019)

FULL TIME

Executive Director: Robert Hawkins **RHCC Manager:** Mark Cromer

Training and Exercise Coordinator: Monica McCullough

Medically Vulnerable Populations Coordinator: Mary Kathryn Alley

PHYSICIAN ADVISOR

Thomas Martin, MD

RHCC ON-CALL DUTY OFFICERS

Richard Christ Ashley Briggs Adam LaChappelle Jeffrey McKenny

INVENTORY SPECIALISTS

Phillip Belcher Lucian Belcher

BOARD OF DIRECTORS

Craig Bryant - Carilion Clinic

Kim Branscome - LewisGale Medical Center

Daryl Hatcher - SOVAH Martinsville

Nathan Campbell - Centra Health

Jason Deese - Virginia Department of Health

Chad Isabelle - Saber Healthcare Group

Jim Cady Jr. - City of Roanoke Fire and EMS

Jonathan Simmons - Virginia Department of Emergency Management

Thomas Martin MD - NSPA Physician Advisor

Steve Simon - NSPA Fiscal Advisor/ WVEMS Executive Director

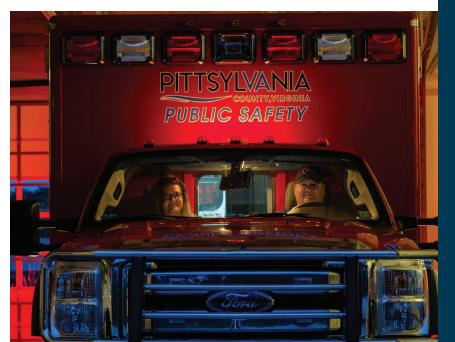
REGIONAL HEALTHCARE COORDINATION CENTER

The Near Southwest Preparedness Alliance provides the Regional Healthcare Coordination Center (RHCC), which is designed to coordinate a multi-agency response to a disaster focused on Emergency Support Function (ESF) 8 for Health and Medical related issues. It is 1 of 6 in the Commonwealth of Virginia. The RHCC should be activated when an agency has and event or emergency that stresses (or anticipates stressing) its capability limit and needs assistance from regional level health and/or medical support. The RHCC coordinates with Hospitals, Public Health, Emergency Medical Services (EMS), Long Term Care, Office of the Chief Medical Examiner, Mental/Behavioral Health, Medical Volunteers, Offices of Emergency Management, and other healthcare related agencies. The RHCC also assists with resource assistance and maintains relationships with vendors of critical medical supplies and facility equipment. The RHCC can be reached at 1-866-679-7422.

During Fiscal Year 2021 (FY21), the RHCC staff to include part-time duty officers and inventory specialists, continued to offer 24/7, 365 days a year, monitoring and assistance to our regional partners.

Our team of inventory specialists completed an ASPR required organizational inventory of all NSPA assigned assets and accomplished (even in the COVID environment) these inspections as described by the grant. The NSPA inventory specialists also assisted in moving our warehouse material from one warehouse to a new location at the LewisGale HealthTrust warehouse in Salem. This area is graciously donated by LGMC as part of their valuable investment in continued coalition operations. This integral part of our team documented 734 person-hours.

The RHCC duty officers are a vital part of our system as they monitor our RHCC Activation line and contact anyone that calls the activation line to assist if needed. The duty officers also activate to assist with critical responses supplementing NSPA full-time staff. During FY21 these team members logged 8206 person-hours.



MEMBERSHIP

HOSPITAL COALITION MEMBERS

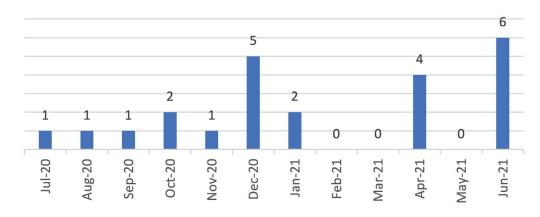
Carilion Franklin Memorial Hospital Carilion Giles Community Hospital Carilion New River Valley Medical Center **Carilion Medical Center** Catawba Hospital Centra Bedford Memorial Hospital Centra Virginia Baptist Hospital Centra Lynchburg General Hospital Centra Gretna Emergency Department LewisGale Medical Center LewisGale Pulaski Hospital LewisGale Alleghany Hospital LewisGale Montgomery Regional Hospital LewisGale Cave Spring Emergency Department SOVAH Health Martinsville SOVAH Health Danville Southern Virginia Mental Health Institute Salem Veterans Affairs Medical Center

LETTER OF SUPPORT MEMBERS

Vulnerable Populations - 75 Jurisdictional Emergency Managers - 16

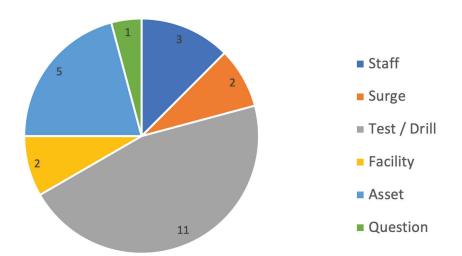
ACTIVATIONS/DEPLOYMENTS

Activations by Month FY21



Activations by Type FY21

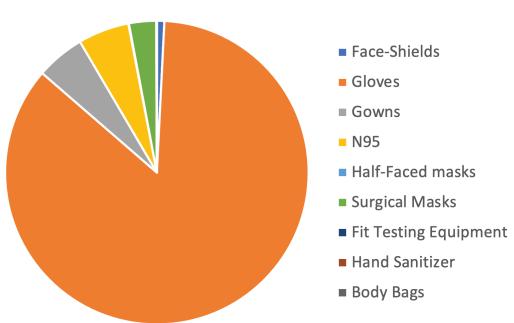
Note: Does not include current COVID Response





PPE GIVEN (INDIVIDUAL UNITS)





Actual PPE Given in FY21 (and average costs)

	TOTAL	\$274.358.86
Body Bags	27	\$963.33
Hand Sanitizer	12	\$1,174.32
Fit Testing Equipment	168	\$280.00
Surgical Masks	8,700	\$7,057.48
Half-Faced masks	175	\$4,687.08
N95	16,420	\$42,714.10
Gowns	15,616	\$146,754.55
Gloves	258,000	\$53,750.00
Face-Shields	2,400	\$16,978.00
	1	

*NSPA also purchased 5 Flight 60 ventilators and 2 Individual Patient Isolation (IsoPod) Systems for deployment for infectious disease transport or isolation. The deployment of NSPA owned ventilators and tent based assets provided additional financial benefits to it's members during the continued response to Covid-19/ SARS COV 2.



TRAINING AND EXERCISE JULY 1, 2020 THROUGH JUNE 30, 2021

The Near Southwest Preparedness Alliance (NSPA) is committed to delivering world-class disaster response training for healthcare professionals of all levels. To accomplish this mission, we have sought to partner with the most preeminent disaster training organizations in the country to bring the highest level of training to our members.

As an officially designated Comprehensive Regional Training Center under the National Disaster Life Support Foundation (NDLSF), we can provide Basic and Advanced Disaster Life Support and Basic and Advanced Certified Hospital Emergency Coordinator courses.

NSPA also provides and/or facilitates training from other recognized training providers to ensure healthcare professionals and emergency management personnel in our region have access to crucial emergency preparedness training at the highest level. In conjunction with providing training, NSPA also provides exercise support and/or facilitation. NSPA Staff often serves as Evaluators, Observers, and Players for regional exercise activities.

The on-going COVID-19 Pandemic has created some challenges and limitations for training center operations, however, NSPA has continued to find creative ways to provide our regional partners with appropriate and timely training opportunities, educational activities, and exercise participation for the fiscal year, such as the following:

In July 2020, NSPA hosted a Respiratory Protection Program Overview presentation to educate our partners on the OSHA requirements and "best practices" for any organizations using N-95 masks and/ or other respirators.

August 2020, NSPA assisted the New River Valley Task Force with a Tabletop Exercise and facilitated discussions focused on an integrated approach to their COVID response for area schools and Institutes of Higher Education in the NRV, in coordination with the Virginia Dept. of Health and area medical providers.

In September 2020, NSPA delivered two virtual 4-hr sessions of Tactical Emergency Casualty Care (TECC) Course, followed by two in-person (classroom)



sessions, which were hosted by the New River Criminal Justice Training Academy, in Dublin. The training material is specifically tailored for Law Enforcement and Fire/EMS personnel. This blended training format helped to minimize staffing challenges for participating agencies, as well as reduce the risks of COVID exposure to students.

NSPA also facilitated an annual Centers for Medicare/ Medicaid Services (CMS) Workshop/Exercise Series, in September 2020, which assists CMS-regulated facilities in the region to meet their annual emergency preparedness requirements. Participants were able to use their on-going COVID response/real-world event, along with the required documentation.

A Hazard Vulnerability Assessment Webinar was offered to Coalition members/partner organizations needing assistance with completing that process.

As part of the Annual CMS Workshop Series, NSPA also conducted 3 consecutive virtual tabletop exercises in October 2020, with the theme being "Rethinking Continuity," in relation to the pandemic. The series culminated in November 2020, with walking participants through an After Action Review and Improvement Plan process and assisting them with appropriate documentation tools.

Also, in October 2020, NSPA assisted the Roanoke-Blacksburg Regional Airport with their Mass Casualty Incident Tabletop Exercise, utilizing WebEx as the platform to allow for virtual participation during the pandemic. This TTX also served as an opportunity for the Airport to review their Emergency Plan with their regional stakeholders and to obtain updated information and receive any additional input.

NSPA held its Board of Directors Annual Retreat (virtually) and Strategic Planning Session in December 2020. The Board and NSPA Staff work together to draft plans for the year ahead and ensure the work of the Coalition remains on target for all grant deliverables.

In January 2021, NSPA provided a Tactical Emergency Casualty Care (TECC) Course for Fire & EMS Providers, at the Danville Area Training Center. This training was hosted by the Danville Life Saving Crew and was open to any regional partners.

NSPA conducted a regional drill in April 2021 to test a portion of the Long-Term Care Mutual Aid Plan. (LTC-MAP,) and was followed up with an After-Action Review. This exercise will be expanded upon in the coming fiscal year.

In April of 2021, NSPA delivered a Basic Certified Healthcare Emergency Coordinator (CHEC) Course,



at the Vinton War Memorial. This course has been found to be of significant value to anyone who may have to respond to an emergency inside the walls of a healthcare facility or serve as part of an Incident Command Team.

NSPA provided a Basic Disaster Life Support course, which was hosted by the Danville Life Saving Crew, for regional first responders and other key disaster response stakeholders, in April 2021. This training was followed up with the two-day Advanced course in May of 2021.

In June 2021, NSPA conducted two consecutive Advanced Certified Healthcare Emergency Coordinator (CHEC) courses to those who had previously completed any Basic CHEC offerings.

In addition to the above activities, NSPA Staff also participates in several workgroups as well as attends the Local Emergency Planning Committee (LEPC) Meetings within the region, whenever possible. NSPA Staff is committed to ensuring that regional partners have frequent opportunities to provide input in relation to any identified training gaps that can be addressed.



2020 NSPA AWARDS

Each year, the Near Southwest Preparedness Alliance presents awards in four categories:

Outstanding Organization:

Friendship Health and Rehab Center

Outstanding Individual:

Tory Shepherd

Outstanding Partner:

New River Valley COVID-19 Task Force

Legacy Award:

Dr. Charles Law

FINANCIAL POSITION STATEMENTS OF FINANCIAL POSITION - June 30, 2021 and 2020

ASSETS	<u>2021</u>	<u>2020</u>
Cash and cash equivalents	\$236,823	\$399,309
Restricted cash	\$633,552	\$16,222
Accounts receivable	\$363,664	\$473,501
Prepaid expenses	\$72,513	\$11,433
Investments (Note 3)	\$379,533	\$340,162
Total current assets	\$1,686,085	\$1,240,627
Land, buildings, and equipment, net (Note 4)	\$552,008	\$582,076
Total assets	\$2,238,093	\$1,822,703

LIABILITIES AND NET ASSETS

Accounts payable	\$110,020	\$191,770
Accrued expenses (Note 10)	\$47,845	\$53,527
Deferred revenue	\$156,000	\$48,600
Custodial funds liability	\$529,487	
Total liabilities	\$843,352	\$293,897

NET ASSETS

Without Donor Restrictions	\$940,947	\$1,107,537
With Donor Restrictions (Note 5)	\$453,794	\$421,269
Total net assets	\$1,394,741	\$1,528,806
Total liabilities and net assets	\$2,238,093	\$1,822,703

The Notes to Financial Statements are an integral part of these statements. Complete financial report available online at www.wvems.org



REVENUES, GAINS, AND OTHER SUPPORT:			
, ,	2021		
	WITHOUT DONOR RESTRICTIONS	WITH DONOR RESTRICTIONS	TOTAL
State government	\$1,522,376	-	\$1,522,376
Federal grant revenue	-	\$638,001	\$638,001
Local government (Note 7)	\$140,352	-	\$140,352
Other support and income	\$161,297	-	\$161,297
United Way organizations	\$3,523	-	\$3,523
Unrealized and realized gains	\$82,786	-	\$82,786
Investment income	\$6,001	-	\$6,001
Net assets released from restrictions (Note 6)	\$605,476	(\$605,476)	-
Total revenues	\$2,521,811	\$32,525	\$2,554,336

EXPENSES (NOTE 8)				
Program services Management and general	\$2,362,743 \$325,658	-	\$2,362,743 \$325,658	
Total expenses	\$2,688,401	-	\$2,688,401	
Change in net assets	\$ (166,590)	\$32,525	\$134,065	
NET ASSETS				
Beginning	\$1,107,537	\$421,269	\$1,528,806	
Ending	\$940,947	\$453,794	\$1,394,741	

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
Near Southwest Preparedness Alliance
United Way Roanoke Valley
Greater Alleghany United Fund
Carilion Clinic
LewisGale Medical Center
LewisGale Hospital Alleghany
LewisGale Hospital Pulaski
Sovah Health - Martinsville
Sovah Health - Danville
Veterans Affairs Medical Center – Salem
Centra Health

Alleghany County Botetourt County Craig County

> Floyd County Giles County

Franklin County

Henry 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

12020 REGIONAL EMS AWARDS

Outstanding EMS Telecommunications Dispatcher

Nicole Manspile, Botetourt County Sheriff's Office, Emergency Communications Center

Outstanding EMS Provider

John Greg Senter, LifeCare Medical Transport

Outstanding EMS Leadership

Scott Davis, Blacksburg Rescue Squad

Nurse with Outstanding Contribution to EMS

Jill Lucas Drakeford, Carilion Clinic

Outstanding Prehospital Educator

Claude Cobler, Bassett Rescue Squad

Outstanding EMS Agency

Botetourt County Department of Fire & EMS

Dr. Cheryl B. Haas Award for Outstanding EMS Physician

Carol Bernier MD, Botetourt County Department of Fire & EMS

Outstanding Contribution to EMS Emergency Preparedness and Response

Daniel Murray, Botetourt County Department of Fire & EMS

Award for Outstanding Contribution to EMS Health and Safety

Suicide Prevention Council of Roanoke Valley

Award for Excellence in EMS

Jeffrey Edwards, Rescue Chief, Roanoke County Volunteer Fire and Rescue – Hollins

Benny Summerlin Award for Service to Local Government

Joe Trigg, Public Safety Director, Pulaski County Public Safety Department

RESCUE SQUAD ASSISTANCE FUND (RSAF)

Western Virginia EMS Council (WVEMS) plays a critical role in helping EMS agencies obtain Rescue Squad Assistance Funds (RSAF) for needed equipment such as ambulances, cardiac monitors, and extrication equipment. The RSAF grants are awarded January and July 1st of each year with a grant deadline for the July cycle typically on March 15th and September 15th for the January cycle. EMS agencies are strongly urged to have WVEMS staff review their proposed grant prior to submission which ensures the grant is completed correctly. Very often EMS agencies do not submit an accurate or full accounting of their needed request and suffer a poor grading score which results in the grant not being funded. If your EMS agency is considering applying for a RSAF in the future please have them contact their Field Coordinator or the Executive Director for assistance.

OUR **VISION**

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

Continue to respond to the ongoing pandemic with direct assistance to EMS Agencies for PPE supplies, emergency management coordination, protocol revisions and testing solutions.

Provide access for victims for injury and sudden illness via a **universally available enhanced 9-1-1** emergency telephone system.

Provide for **dispatcher-provided telephone assistance** (pre-arrival instructions) to callers with life-threatening emergencies.

Provide for **timely response** of first responder and transportation, personnel and vehicles through a system of predetermined minimum response intervals, monitoring and quality assurance-performance improvement.

Provide for **high-quality**, **prehospital treatment** of patients as a result of standardized basic life support training programs, accredited advanced life support educational and mentoring programs, standardized testing programs, frequent and timely continuing education programs, and quality assurance-performance improvement programs.

Provide **triage and transport**, and transfer if necessary, of patients to the most appropriate facility based on predetermined universally accepted transport guidelines and protocols.

Provide **timely emergency department care** with emergency physicians, emergency nurses and other support personnel and **trauma care**, when necessary, with personnel and resources associated with a designated trauma center.

Provide **communications system** capabilities that enable EMS personnel to communicate with all other EMS personnel throughout the region, their dispatchers, all hospital emergency departments and other public safety personnel.

Provide resources and capabilities in order to appropriately respond to and manage large disasters and **mass casualty** situations.

Ensure EMS system **viability and excellence** through the effective use of state, local and private funding.





Western Virginia Emergency Medical Services Council, Inc.



Main Office (WVEMS & NSPA)

1944 Peters Creek Road NW, Roanoke VA 24017
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 New River Valley Field Office

6580 Valley Center Drive, Suite 152, Radford VA 24141 (Located in the Pulaski County Innovation Center)

WVEMS Piedmont Field Office

1024 DuPont Road, Martinsville VA 24112

(Located in the Henry County Department of Public Safety Complex)