

**COMMONWEALTH OF VIRGINIA
STATE EMERGENCY MEDICAL SERVICES ADVISORY BOARD
BYLAWS**

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ARTICLE I. AUTHORITY

The State Emergency Medical Services Advisory Board is established in the executive branch pursuant to [§ 32.1-111.4:1](#) of the Code of Virginia.

Section A. General Responsibilities

The Emergency Medical Services Advisory Board (hereafter referred to as "Advisory Board") provides advice and counsel regarding methods and procedures for planning, developing, and maintaining a statewide emergency medical services (EMS) system to the Office of Emergency Medical Services (OEMS) and the State Board of Health.

Other responsibilities include but are not limited to:

1. Advising on the administration of Title 32.1, Chapter 4, Article 2.1 of the Code of Virginia.
2. Reviewing and making recommendations on the statewide emergency medical services plan, and any revision thereto.
3. Review, on a schedule as it may determine, reports on the status of all aspects of the statewide emergency medical services system, including the Financial Assistance and Review Committee, the Rescue Squad Assistance Fund, the regional emergency medical services councils, and the emergency medical services vehicles, submitted by the OEMS.
4. Reviewing the annual report of the Virginia Association of Volunteer Rescue Squads, as required by [§ 32.1-111.13](#).
5. Providing information on the EMS system to the Governor, state legislators and local officials.
6. Maintaining a process for accepting nominees from the EMS Community for the EMS Representative to the State Board of Health and the subsequent process of selecting, recommending, and submitting three (3) names to the Governor for his consideration in the appointment to the Board.
7. Performing other duties and responsibilities as requested by the Governor, State Board of Health, State Commissioner of Health, or the OEMS.

ARTICLE II. MEMBERSHIP

The Advisory Board shall be composed of 28 members appointed by the Governor as follows:

1. One representative each from the:
 - a. Virginia Municipal League
 - b. Virginia Association of Counties
 - c. Virginia Hospital and Healthcare Association
 - d. And each of the 11 regional emergency medical services councils
2. One member each from the:
 - a. Medical Society of Virginia
 - b. Virginia Chapter of the American College of Emergency Physicians
 - c. Virginia Chapter of the American College of Surgeons
 - d. Virginia Chapter of the American Academy of Pediatrics

- e. Emergency Nurses Association or the Virginia Nurses' Association
- f. Virginia State Firefighters Association
- g. Virginia Fire Chiefs Association
- h. Virginia Ambulance Association
- i. Virginia Association of Governmental Emergency Medical Services Administrators
- j. Virginia Association of Public Safety Communications Officials
- 3. Two representatives of the Virginia Association of Volunteer Rescue Squads, Inc.
- 4. One Virginia professional firefighter
- 5. One consumer who shall not be involved in or affiliated with emergency medical services in any capacity.

Membership Roster: Annually, each member will receive a copy of the Advisory Board roster from the Office of Emergency Medical Services (OEMS) and any corrections / changes thereto.

ARTICLE III. RESPONSIBILITIES OF MEMBERS

Section A. Voting

Each member will have one (1) vote. Proxy votes are not permitted.

Section B. Attendance

The OEMS will record the attendance of all members at each Advisory Board meeting. The Chair of each committee and subcommittee is responsible for recording attendance at their respective meetings. Members who are unable to attend a meeting of the Advisory Board, committee, or subcommittee, will notify the respective committee Chair or OEMS.

The respective Chair will determine whether the absence is excused, based upon the reasons indicated by the member. The Chair will note members with two (2) consecutive unexcused absences of regular meetings of such board, committee, or subcommittee, and notify the organization the individual represents, where applicable.

Section C. Committee Service

Each Advisory Board member is expected to serve on at least one (1) committee of the Advisory Board. Attendance at such committee meetings will be monitored as outlined in Article III. Section B.

Section D. Compensation

The members of the Advisory Board are not eligible to receive compensation. Members are eligible for the reimbursement of expenses incurred in the performance of their Advisory Board duties.

Section E. Statement of Economic Interest

Each member is responsible for completing a Statement of Economic Interest with the Secretary of the Commonwealth and for maintaining current contact information with the OEMS.

Section F. Fiscal Year Definition

The fiscal year of the Advisory Board will begin on July 1 and end June 30 the following calendar year.

Section G. Conflict of Interest

All members of the Advisory Board and its committees are required to adhere to the laws of the Commonwealth of Virginia regarding conflicts of interest as detailed in [§ 2.2-3100](#) et seq. of the Code of Virginia.

Section H. Virginia Freedom of Information Act.

All members of the Advisory Board and its committees and subcommittees are required to adhere to the laws of the Commonwealth of Virginia regarding the Virginia Freedom of Information Act that are detailed in [§ 2.2-3700](#) et seq. of the Code of Virginia.

ARTICLE IV. OFFICERS

Section A. Elections and Term of Office

1. Election of Officers and Chairs of standing committees will occur at the last regular meeting of each calendar year.
2. Officers and Chairs of standing committees shall serve a term of one year or until their successor is elected.
3. The Officers will be a Chair, Vice-Chair and five (5) coordinators. Any member is eligible to be an Officer.

Section B. Duties of the Chair

1. The Chair will preside over all Advisory Board and Executive Committee meetings.
2. The Chair will preserve order and regulate debate according to parliamentary procedure.
3. The Chair will establish subcommittees necessary to perform the work of the Advisory Board.
4. The Chair will be an ex-officio member of all committees and subcommittees.
5. The Chair shall serve as liaison between the Executive Committee and the Advisory Board.
6. The Chair will interact with outside agencies or entities on behalf of the Advisory Board.
7. In the absence or inability of the Chair and Vice Chair, the Administrative Coordinator, Infrastructure Coordinator, Patient Care Coordinator, Professional Development Coordinator, and Trauma System Coordinator in this order of succession, shall discharge all the duties of the Chair.

Section C. Duties of the Vice-Chair

1. The Vice-Chair, in the absence or inability of the Chair, will discharge all the duties of the Chair.
2. The Vice-Chair, upon direction of the Chair, will serve as liaison to outside agencies or entities and perform other duties as assigned by the Chair.

Section D. Duties of the Coordinators

1. In general, the Administrative, Infrastructure, Patient Care, Professional Development and Trauma System Coordinators shall oversee the activities of the committees assigned to them for the purpose of ensuring that their activities are aligned with the EMS Strategic Plan.
 - a. Administrative Coordinator shall oversee the activities of the Rules and Regulations and Legislative and Planning Committees.
 - b. Infrastructure Coordinator shall oversee the activities of the Transportation, Communications and Emergency Management Committees.
 - c. Patient Care Coordinator shall oversee the activities of the Medical Direction, **Air Medical**, and EMS for Children Committees.
 - d. Professional Development Coordinator shall oversee the activities of the Training and Certification, Workforce Development and Provider Health and Safety Committees.
 - e. Trauma System Coordinator shall oversee the activities of the Trauma Administrative and Governance Committee, and the following trauma subcommittees: System Improvement, Injury and Violence Prevention, Prehospital Care, Acute Care, Post-Acute, Emergency Preparedness and Response.
2. Coordinators shall also maintain communications among all activities to ensure the strategic alignment of the committees' collective work.

ARTICLE V. OFFICE OF EMERGENCY MEDICAL SERVICES (OEMS)

The Office of Emergency Medical Services (OEMS) will provide support staff to the Advisory Board in the performance of its duties, which will include but is not limited to:

1. Recording and publishing the official minutes of all Advisory Board meetings.
2. Maintaining the rosters of the Advisory Board, committees, and subcommittees.
3. Posting notices of all scheduled meetings of the Advisory Board on the Commonwealth Calendar and other appropriate sites in accordance with [Chapter 37](#) of the Code of Virginia.

ARTICLE VI. MEETING SCHEDULE, NOTICES, QUORUM, AND AGENDA

Section A. Meetings

The Advisory Board will meet in public session as frequently as required to perform its duties, but not less than four (4) times per year. A special meeting may be convened at the request of the Governor,

Advisory Board Chair, Director of the OEMS, State Health Commissioner, Secretary of Health and Human Resources, or by one-third (1/3) of the members.

Section B. Notice of Public Meeting

Written notice will be given for all meetings of the Advisory Board. For all regularly scheduled meetings, at least ten (10) days' notice is required.

Section C. Quorum

A simple majority of the members of the Advisory Board will constitute a quorum. A quorum is required to take any formal action.

A simple majority vote will be required to take formal action except as otherwise noted within this document. Such majority is determined by the number of members present and voting at the time of the vote.

Section D. Agenda

An agenda will be published by the OEMS and provided to the Advisory Board members for all Advisory Board meetings.

Section E. Minutes of Meetings

The OEMS will be responsible for maintaining an official copy of the approved Advisory Board minutes. Their representative shall be designated the Recording Secretary. The Chair of each committee and subcommittee is responsible for maintaining an official copy of the approved minutes of their respective meetings.

Section F. Public Participation

With permission of the Chair, non-board members may address the board.

ARTICLE VII. PARLIAMENTARY PROCEDURE

All meetings of the Advisory Board and its associated committees and subcommittees shall be conducted in accordance with the latest edition of Roberts Rules of Order.

The Chair may appoint a parliamentarian.

ARTICLE VIII. COMMITTEES AND SUBCOMMITTEES

Section A. General Committee Responsibilities

1. All committees and subcommittees shall meet as necessary to perform the duties and responsibilities of the committee.
2. All committees and subcommittees shall maintain communications with its respective coordinator.
3. All committees and subcommittees are responsible for identifying and making recommendations regarding public illness and injury prevention.
4. All committees and subcommittees are responsible for identifying and making recommendations regarding funding of EMS system components.

Section B. Standing Committees

Executive Committee

1. The Executive Committee will be composed of the Chair, Vice Chair, and the Five Coordinators. The EMS Representative to the State Board of Health shall serve as an ex officio member.
2. The Executive Committee will have general supervision of the affairs of the Advisory Board between regular meetings, which, except when the Governor shall declare a state of general emergency, shall be subject to ratification by the Advisory Board. This supervision shall include the approval of each committee organizational structures and membership and the monitoring of the progress of the EMS Strategic Plan.

Financial Assistance Review Committee (FARC)

1. The FARC is responsible for recommending to the Commissioner of Health monetary awards as stipulated in the Code of Virginia, Section [32.1-111.12](#). Membership, authority, and responsibilities are stipulated in the Code of Virginia.
2. FARC will report biannually, after each funding cycle, the number of grant applications received, the total costs of grant applications funded, the number of grant applications denied funding, the total costs of grant applications denied funding, and the nature of the denied requests and the reasons for denying funding, to the Advisory Board and the Commissioner.
3. This committee's work is considered confidential working papers of the Governor. Minutes of its meetings shall be filed but not publicly published.

Administrative

1. **Rules & Regulations:** The Rules and Regulation Committee is charged to ensure the system's regulations are reflective of the needs and operation of EMS agencies and to aid in ensuring there is high quality service delivery within the Commonwealth. This is accomplished by environmental monitoring and collecting input related to the Rules and Regulations. The Committee will also be responsible for developing regulations because of new or revised legislation and/or Code changes at the Federal and State level.

2. **Legislative & Planning:** The Legislative and Planning Committee will advise and coordinate efforts of the state EMS Advisory Board in its various standing and ad hoc committees as they relate to legislation and planning to best serve the overall needs of the EMS system in Virginia. The committee will review and assess state and federal legislation and inform the Advisory Board of any potential impact on the EMS system in Virginia. The committee is responsible for revising and updating the state EMS plan on a triennial basis. The Plan will be submitted to the Advisory Board for review and approval prior to requesting approval of the Plan from the Board of Health.

Infrastructure

1. **Transportation:** The Transportation Committee is a resource committee that provides a review of EMS vehicle specifications for functional adequacy and safety and to ensure design features contribute to the efficiency of the unit and to facilitate good patient care; and recommends routine, standardized methods and procedures for inspection and permitting of all EMS agency vehicles; and reviews and makes recommendations on Rescue Squad Assistance Funds grant requests for EMS vehicles to the Financial Assistance Review Committee (FARC) and the Advisory Board to promote a high-quality EMS system in Virginia.
2. **Communications:** The Communications Committee provides both technical and operational overview and guidance of communications issues affecting local, state, and federal emergency medical systems to the Advisory Board. This includes, but not limited to Federal Communication Commission (FCC) rules and regulations, State and Federal policies regarding wireless communications and industry advances that effect the EMS systems in Virginia.
3. **Emergency Management:** The Emergency Management Committee, through the Advisory Board, shall focus on providing recommendations and guidance for EMS agencies in Virginia to enhance and assist in their development and incorporation of strategies for approaching the four phases of emergency management and using those phases to best prepare and respond as an EMS agency. The committee will also assist the Virginia Office of Emergency Medical Services in the development and revision of Emergency Management Training Programs that focus on the pre- hospital area of EMS and emergency management.

Patient Care

1. **Medical Direction:** The Medical Direction Committee will review and recommend guidelines and/or standards to assist EMS agencies, providers, and physicians with medical procedures. It shall provide guidance to the EMS system with medical oversight, specifically in the areas of protocols, on-line medical direction, system audits, quality improvement and the improvement of patient care.
2. **Air Medical:** The Air Medical Committee provides expert guidance to the Advisory Board regarding appropriate standards and recommendations to promote a high quality, safe, and reliable **Air Medical** system for Virginia.
3. **EMS for Children (EMSC):** The EMS for Children (EMSC) Committee provides expertise and advice to the Advisory Board regarding EMS issues affecting children in Virginia. The EMSC

Committee also serves as an advisor to Virginia's EMSC program, an initiative designed to reduce child and adolescent disability and death due to severe illness or injury.

Professional Development

1. **Training & Certification:** The Training and Certification Committee will, in collaboration with the Medical Direction Committee and other stakeholders, promote quality educational, operational, and other affiliated aspects related to the enhancement of the EMS profession across the Commonwealth. The committee will review and recommend changes to policies and regulations affecting the training and certification of pre-hospital providers, including procedures and guidelines for each level of certification and standardized education and testing curricula; training and continuing education requirements and improvements; monitoring of EMS training programs; Quality Assurance, Quality Improvement, and Accreditation of EMS Educational Programs.
2. **Workforce Development:** The Workforce Development Committee reviews, develops, and recommends recruitment, retention, leadership and management programs and services designed to help EMS agencies maintain and increase their human resources to deliver prompt, high quality emergency medical care while meeting the emergency medical services demands and expectations of the communities they serve.
3. **Provider Health & Safety:** The Provider Health & Safety Committee will recommend policies and practices for the development of EMS provider health and safety programs, including physical and mental health and wellness and critical incident stress management (CISM).

Trauma System

1. **Trauma Administrative and Governance:** Utilizing a public health approach, the Trauma Administrative and Governance Committee will maintain an inclusive system that ensures that when the severity and incidence of trauma cannot be decreased, all injured persons within the Commonwealth have rapid access to optimal, equitable, efficient specialized trauma care to prevent further disability. The EMS Advisory Board's Trauma System Coordinator will serve as chair of the Trauma Administrative and Governance Committee.
2. **Standing Subcommittees of the Trauma Administrative and Governance Committee:**
 - a. **System Improvement:** The System Improvement Subcommittee will use data to optimize patient care, implement best practices, develop clinical practice guidelines, and engage the populace in the trauma system through training, advocacy and understanding.
 - b. **Injury and Violence Prevention:** The Injury and Violence Prevention Subcommittee will use an integrated data surveillance process to strengthen analyses, establish injury and violence prevention priorities and further statewide injury prevention efforts.
 - c. **Pre-hospital Care:** The Prehospital Care Subcommittee, in collaboration with the Medical Direction Committee and other stakeholders, will develop and make practice recommendations concerning the treatment and transport of injured pediatric, adult, and geriatric patients.

- d. **Acute Care:** The Acute Care Subcommittee will provide technical assistance to ensure that all acute care facilities are integrated into a resource- efficient, inclusive network that meets required standards, maintains a competent workforce and is patient outcome focused
- e. **Post-Acute:** The Post-Acute Subcommittee will work with community stakeholders to integrate rehabilitation facilities into the trauma system and ensure that these resources are made available to all populations as required.
- f. **Emergency Preparedness and Response:** The Emergency Preparedness and Response Subcommittee will work with the Emergency Management Committee, Regional Councils, and EMS Agencies to ensure that the trauma system is engaged in the State disaster planning process.

Section C. Ad Hoc Committees and Subcommittees

- 1. **Nominating Committee:** The Nominating Committee will be composed of five (5) members, three (3) of whom shall be appointed by the Chair and two (2) of whom shall be elected by the members. The committee shall present a slate of nominations to the Board thirty (30) days prior to the election.
- 2. **Bylaws Committee:** The Bylaws Committee shall be responsible for review of the Bylaws and considering amendments to the Bylaws.
- 3. **Other Ad Hoc Committees:** Ad Hoc committees may be appointed by the Advisory Board Chair to accomplish specific designated functions. Each individual appointed will continue to serve for a period of one (1) year. This time period may be extended with approval of the Advisory Board.
- 4. **Ad Hoc Subcommittees:** The Chair of each committee may appoint subcommittees to address specific functions. Each individual appointed will continue to serve for a period of one (1) year. This time period may be extended by the Advisory Board Chair.

Section D. Committee Management

Unless otherwise specified by the Code of Virginia, the Chair of each committee will be elected from the membership of the Advisory Board, and the members of the committees and subcommittees may be appointed from among the board members or from other qualified citizens of the Commonwealth of Virginia. In general, all issues brought before the Advisory Board will be referred to the appropriate committee for review and recommendation before the Executive Committee and/or Advisory Board will act.

- 1. The Chair of each committee, in consultation with his/her Coordinator, and with approval of the Executive Committee, will annually appoint the membership of the committee. Consideration shall be given to diverse geographic representation from the entire state, inclusion of the system's stakeholders, and committee continuity. Alternates are not permitted.
- 2. Committee membership will be limited to ten (10) members unless approved by the Executive Committee or stipulated in the Code of Virginia.
- 3. Each Committee shall elect a Vice Chair from the Committee membership. The Vice Chair in the absence of the Committee Chair will discharge all duties of the Chair.

4. The Chair of each committee, in consultation with his/her Coordinator, shall make recommendations on committee organizational structure to the Executive Committee for approval.
5. The Committee Chair is responsible for maintaining minutes and an attendance roster for each meeting and forwarding them to the OEMS following the meeting.
6. The Chair of each committee will pay special attention to minimize the financial obligations of the Commonwealth to support the activities of the committee.
7. The Chair of each committee will submit a report of the prior fiscal year's activities to the Vice-Chair of the Executive Committee at the end of each fiscal year.
8. Trauma System Subcommittee Structure: Chairs of the Trauma System subcommittees will be appointed by the Trauma System Coordinator, with approval of the Advisory Board Executive Committee.
 - a. The Trauma System Coordinator will ensure that all subcommittees have fair and equal representation from trauma system stakeholders.
 - b. The Chair of the System Improvement, Acute Care, and Post-Acute Care subcommittees shall serve a three (3) year term with a limit of two consecutive terms.
 - c. The Chairs of the Injury & Violence Prevention, Prehospital and Emergency Preparedness and Response subcommittees shall serve a two (2) year term with a limit of two consecutive terms.
 - d. The members of each subcommittee will serve alternating two (2) year and three (3) year terms with a limit of two (2) consecutive terms with no more than 50% committee members rotating at the end of a term. The Chair of each committee will submit the name and position of the rotating members and the proposed incoming members to the Trauma System Coordinator for consideration and approval.

ARTICLE IX. AMENDMENT OF BYLAWS

Any proposed change to the existing bylaws shall be submitted in writing to the Advisory Board members at least ten (10) days prior to a scheduled meeting. The proposed change(s) and substantiation will be reviewed during the next scheduled meeting. The minutes of that meeting will include the proposed change(s) and any pertinent discussion information. The vote to effect the change can then be taken at the next scheduled meeting. A two-thirds majority vote of all members is needed to pass the proposed amendment.

These bylaws shall become effective on August 5, 2022.

The Bylaws were amended on November 17, 2023 - reflect changes to terminology from "Medevac" to "Air Medical" on pages 5 and 8.

Approved by the Advisory Board