

2025 Annual REPORT

January 1, 2025 - December 31, 2025



OLD DOMINION EMS ALLIANCE

SERVING PLANNING DISTRICTS 13, 14, 15, & 19

Message from the Executive Director



As I reflect on the past year, I am incredibly proud of the resilience, dedication, and collaboration that defined 2025 for the Old Dominion Emergency Medical Services Alliance. This was a year of significant transition, marked by the conclusion of the Regional Drug Box Program, organizational restructuring, and the successful completion of the Commonwealth's Regional EMS Council application and designation process. Together, these efforts resulted in ODEMSA receiving a new contract to continue serving as the region's designated EMS council.

Change is never easy, but it is often necessary for growth. Throughout the year, ODEMSA remained focused on supporting our agencies and providers while adapting to new regulatory, operational, and organizational realities. This period of change also required difficult decisions, including restructuring staff roles to better align with evolving needs and priorities. These efforts were guided by a commitment to long-term sustainability and continued service to the region.

This year also marked the forty-fifth anniversary of the council as it stands today. Over more than four decades, ODEMSA has continued to evolve alongside the EMS system, strengthening partnerships and responding to the changing landscape of emergency medical services across the Commonwealth. The work completed in 2025 reflects that same spirit of adaptability and forward momentum.

I am deeply grateful to our Board of Directors, committee members, hospital partners, EMS agencies, and the dedicated EMS providers who serve their communities every day. Your professionalism, collaboration, and commitment are the foundation of everything we accomplish as a region.

As we look ahead, I am confident in what comes next. ODEMSA remains committed to growth, collaboration, and innovation as we continue to move forward together and support the future of emergency medical services in the Commonwealth.

A handwritten signature in black ink that reads "Heidi M. Hooker". The signature is fluid and cursive.

Heidi M. Hooker
Executive Director and Chief Operating Officer
Old Dominion Emergency Medical Services Alliance

Code of Virginia

§ 32.1-111.4:2. Regional emergency medical services councils.

The Board shall designate regional emergency medical services councils that shall be authorized to receive and disburse public funds. Each such 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 regional emergency medical services 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 services personnel, and other appropriate allied health professionals.

Each regional emergency medical services council shall adopt and revise as necessary a regional emergency medical services plan in cooperation with the Board.

The designated regional emergency services 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 designated regional emergency medical services council. However, this section shall not be construed to place any obligation on any local governing body to appropriate funds to any such council.

The Board shall promulgate, in cooperation with the 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.

Scope of the Report

This annual report provides a comprehensive overview of the operational, programmatic, and financial performance of the Old Dominion Emergency Medical Services Alliance, Inc. (ODEMSA) for the period of January 1, 2025, through December 31, 2025. It reflects organizational activities, staffing, program support, committee participation, and Board representation as of December 31, 2025. ODEMSA notes that Board appointments are generally completed in January of the following fiscal year, and any changes occurring after December 31 are not reflected in this document.

The financial information contained in this report is derived from the annual independent audit performed by Brown, Edwards & Company LLP, Certified Public Accountants. This ensures transparency, integrity, and adherence to established accounting standards in the organization's financial reporting.

Vision

The Old Dominion EMS Alliance will work to ensure and support an EMS system that is viable and consistently excellent through the effective use of state, local, and private funding, medical direction, and the involvement of all persons and agencies involved in the delivery of emergency care.

Mission

The Old Dominion Emergency Medical Services Alliance, an integral part of Virginia's Comprehensive Emergency Medical Services System, serves to assess, identify, coordinate, plan, and implement an efficient and effective regional EMS delivery system within Planning Districts 13, 14, 15, and 19, in partnership with the Virginia Office of Emergency Medical Services Advisory Board.

About the Region

The staff and Board of Directors of the Old Dominion Emergency Medical Services Alliance work collaboratively to carry out the directives of the Commonwealth while advancing the organization's mission to strengthen and support emergency medical services throughout the region. Through ongoing coordination, planning, and stakeholder engagement, ODEMSA ensures the effective delivery of EMS programs and services across a broad and diverse landscape.

ODEMSA serves the largest geographic area of any EMS Regional Council in Virginia, encompassing approximately nine thousand square miles throughout Planning Districts 13, 14, 15, and 19. The region includes twenty two counties, six independent cities, and three incorporated towns. These localities are Amelia, Brunswick, Buckingham, Charles City, Charlotte, Chesterfield, Cumberland, Dinwiddie, Halifax, Hanover, Henrico, Goochland, Greensville, Lunenburg, Mecklenburg, New Kent, Nottoway,

Powhatan, Prince Edward, Prince George, Surry, and Sussex Counties. The region also includes the Cities of Colonial Heights, Emporia, Hopewell, Petersburg, Richmond, and South Boston, as well as the Towns of Ashland, Farmville, and South Hill.

This service area includes urban, suburban, and rural communities and is supported by eighteen acute care hospitals and eight standalone emergency departments. With a population of more than 1,480,000 residents, the region relies on the dedication of more than 6,900 EMS providers. These professionals work closely with hospital teams, physicians, nurses, pharmacists, and other healthcare specialists to deliver high-quality emergency care to individuals and families throughout Central and Southside Virginia.

REGIONAL OVERVIEW

AREA COVERED

9,000
SQUARE MILES



RESIDENTS*

1.48 M



EMS PROVIDERS

6,600+



AGENCIES

+/- 100



EMERGENCY DEPTS

26



*Based on 2020 US Census or
ODEMS January 2023 Data



About the Regional Council

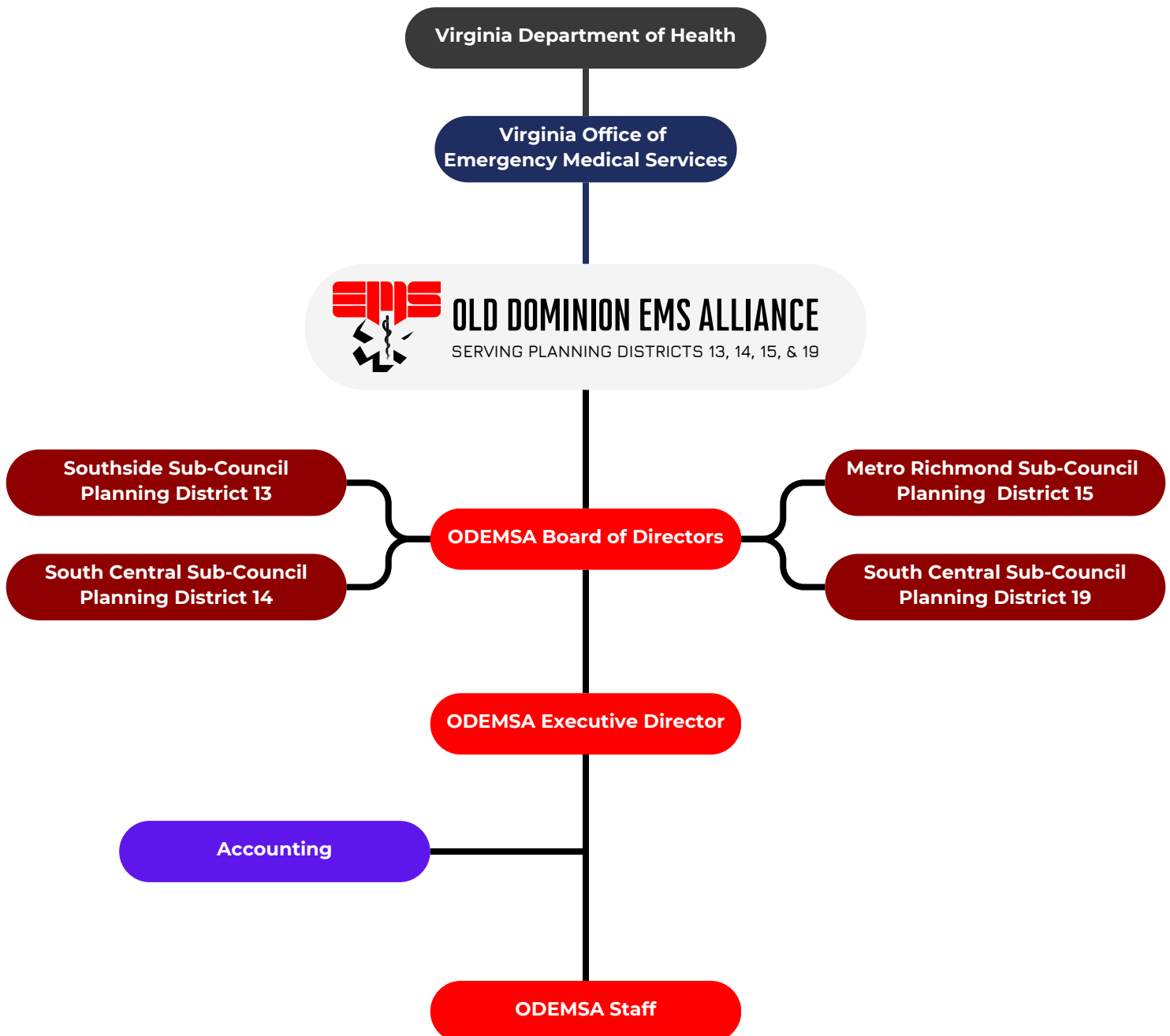
The Old Dominion Emergency Medical Services Alliance was incorporated in 1980 as a 501(c)(3) nonprofit organization. Its responsibility, defined in state law in the Code of Virginia section 32.1-111.4:2, is to support the development and implementation of a strong and effective Emergency Medical Services system throughout its service area.

Following the statewide restructuring process conducted by the Virginia Department of Health, ODEMSA has been designated as the Regional Emergency Medical Services Council for Service Area 6. Throughout the past year, ODEMSA has worked closely with state partners to ensure that this transition has not disrupted services or access to essential programs. The organization has remained focused on continuity, planning, and communication, providing the Commonwealth with information and resources needed to make well informed decisions that support emergency medical services throughout the region.

ODEMSA carries out its mission under a deliverables contract with the Virginia Office of EMS. Through this contract, the organization provides regular reporting on progress, program performance, and regional coordination efforts. This structure supports accountability while strengthening collaboration among agencies, healthcare partners, and state leadership.



Organizational Structure



Board of Directors

The Old Dominion Emergency Medical Services Alliance is governed by a sixteen member Board of Directors made up of representatives from emergency medical services agencies, providers, and acute care hospitals located within Virginia Planning Districts 13, 14, 15, and 19. All Board members serve voluntarily without compensation and meet quarterly in sessions that are open to the public.

The Board includes a physician who serves as the Regional Medical Director for the organization. The President of the Board serves as the Chief Executive Officer of ODEMSA and provides overall leadership and direction for the Regional Council. Day to day operations are managed by the Executive Director, who serves as the Chief Operating Officer and is a salaried employee responsible for administration and program oversight.

Officers

Walt Bailey	President / CEO / South Central Sub-Council President
Lisa Baber	Vice-President / Metro-Richmond Prehospital Representative / EMS Advisory Board Representative
Greg Neiman	Board Secretary / Metro-Richmond Sub-Council President
Cary Strosnider	Board Treasurer/ Crater Sub-Council President
Heidi M. Hooker	Executive Director / Chief Operating Officer

Members

Allen Yee, M.D.	Regional Medical Director
Bert Martin	Southside Sub-Council President
Joelle Cramer	Southside Sub-Council Prehospital Representative
Willoughby Hundley, M.D.	Southside Sub-Council Healthcare Representative
Vacant	South Central Sub-Council Prehospital Representative
Vacant	South Central Sub-Council Healthcare Representative
Jessica Goodman	Metro-Richmond Healthcare Representative
Pier Ferguson, R.N.	Crater Sub-Council Prehospital Representative
Kathe Ware, R.N.	Crater Sub-Council Healthcare Representative
Jimmy Lee Pair	Law Enforcement Officer
John Vasquez	Law Enforcement Officer

Committees & Chairs

ODEMSA convenes a series of committees that support the coordinated development of emergency medical services throughout the region. These committees bring together representatives from local government, fire and rescue organizations, law enforcement, hospitals, licensed physicians, nurses, mental health professionals, EMS personnel, and other allied health partners. Their combined expertise ensures a broad and informed approach to regional planning and system improvement.

Committee members and chairs volunteer their time to strengthen programs, review performance needs, and support consistent delivery of high-quality patient care. Their work contributes directly to a connected and reliable emergency medical services system across Central and Southside Virginia.

A listing of each committee and its chair is provided below.

Air Medical	Greg Jones MedFlight I, Chesterfield Fire & EMS
Patient Destination	Tim McKay Chesterfield Fire & EMS
Mass Casualty Incident (MCI)	Bubby Bish Virginia Association of First Responders
Medical Direction Committee	Allen Yee, M.D. State & Regional Medical Director
PEER Support Team	Jessica Goodman Administrator/ODEMSA Staff
Performance Improvement	Mike Watkins Goochland County Fire-Rescue
Pharmacy	Benjamin Hester VCU Health Systems
STEMI	Allen Yee, M.D. State & Regional Medical Director
Stroke	Stacie Stevens VCU Health Systems
Training and Education	Marquita Whisonant, Reynolds Community College

The ODEMSA Team



HEIDI M. HOOKER

EXECUTIVE DIRECTOR AND CHIEF OPERATING OFFICER

Heidi celebrated her twenty-second year with the council in April 2025. Her steady leadership supports the continued growth and success of regional emergency medical services.



J. RYAN SCARBROUGH

DEPUTY DIRECTOR AND SPECIAL PROJECTS COORDINATOR

Ryan completed his seventh year with the council in January 2025. His focus on strategic planning and program coordination strengthens daily operations and regional initiatives.



MEGAN MIDDLETON

TRAINING DIRECTOR

Megan marked her ninth year with the council in June 2025. She supported provider education and training programs until June 2025 when she accepted a position with the Richmond Fire Department.



SHANNON DANIEL

TRAINING DIRECTOR

Shannon joined the ODEMSA team in November 2025 in a part-time capacity and is transitioning into the Training Director role following the vacancy left by Megan. She will support provider education and training programs moving into 2026.



TARSHA ROBINSON

PROGRAM COORDINATOR

Tarsha reached her fifth year with the council in January 2025. She transitioned to PRN status in April 2025 to pursue instructional work with Tidewater Community College.



KATHY EUBANK

ADMINISTRATIVE COORDINATOR

Kathy completed her sixth year with the council in January 2025. She has continued to assist with administrative functions following the shift of her role in 2020.



JESSICA GOODMAN

FIELD COORDINATOR (PD 13 & 14)

Jessica finished her fourth year with the council in March 2025. She provides local support to agencies and promotes strong field engagement throughout her assigned planning districts.



RICK MCCLURE

FIELD COORDINATOR (PD 15 & 19)

Rick marked his fourth year with the council in March 2025. He works directly with providers in the southern portion of the region to support communication and operational readiness.



CATINA DOWNEY

ACCOUNTANT/CPA

Catina completed her eighteenth year with the council in 2025. Her financial expertise ensures accountable stewardship of the organization's resources.

AHA CPR Instructor

Education Coordinator

ALS Coordinator

About the Healthcare Coalition



The Virginia Department of Health has been the awardee of the Hospital Preparedness Program grant under the Assistant Secretary for Preparedness and Response within the United States Department of Health and Human Services to fund the Virginia Healthcare Emergency Management Program since 2002.

The Central Virginia Healthcare Coalition (CVHC) supports hospitals and healthcare facilities in preparing for, responding to, and recovering from emergencies that affect the healthcare delivery system in the Central Region. The coalition is one of four in the Commonwealth and represents eighteen acute care hospitals, eight stand-alone emergency centers, more than 50 long-term care facilities, dialysis providers, local emergency management, and numerous EMS agencies. Members from these organizations serve on the Advisory Committee that provides guidance for coalition activities.

Each coalition operates a Regional Healthcare Coordination Center that serves as an information-sharing and incident-coordination hub. These centers connect coalition partners with local emergency operations centers and the VDH Emergency Coordination Center according to approved regional plans.

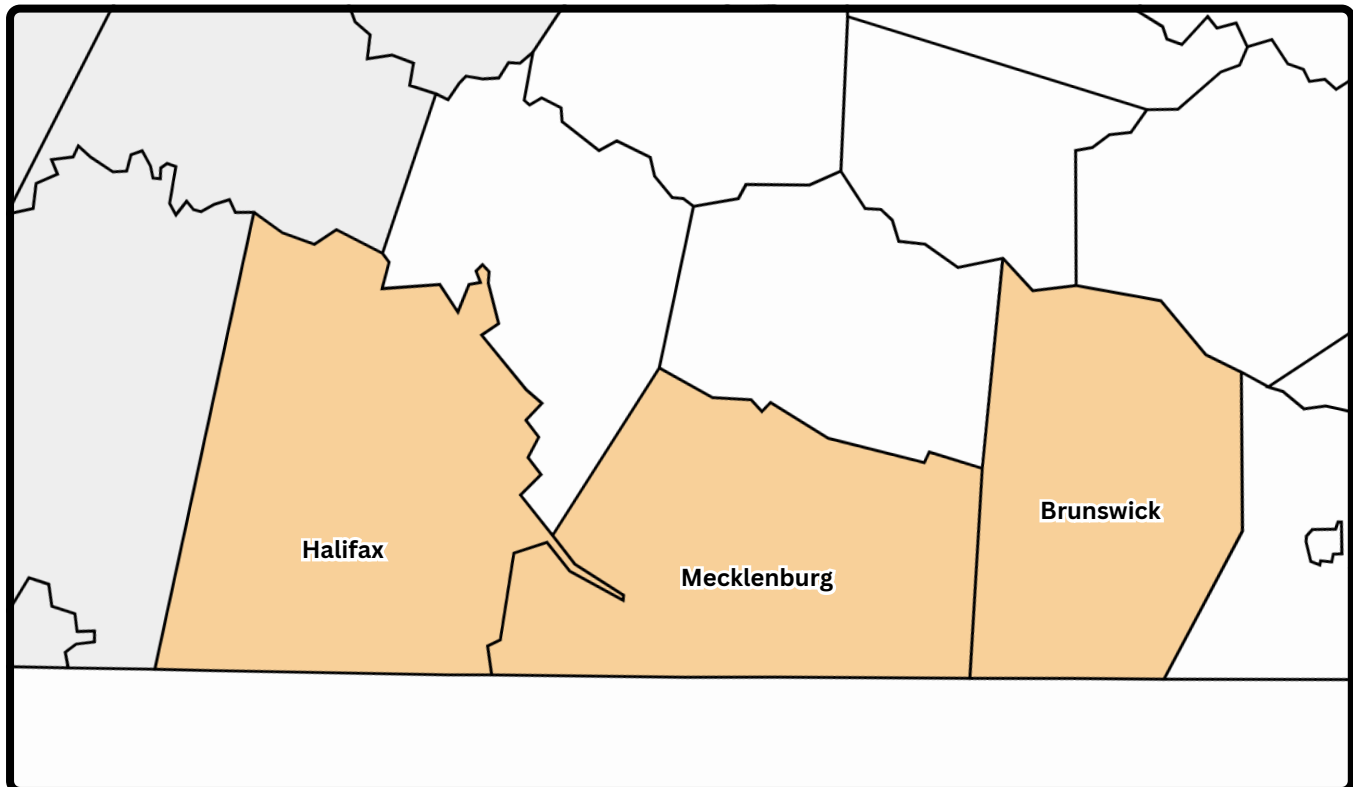
Until July 1, 2025, ODEMSA served as the fiduciary for CVHC and provided organizational oversight, financial services, and human resources support for coalition operations. On that date, fiduciary responsibilities for CVHC were transferred to the Virginia Hospital and Healthcare Association (VHHA) as part of a statewide effort to consolidate administration of the Hospital Preparedness Program and ensure consistency across all regions. All Virginia healthcare coalitions, with the exception of the Northern Virginia coalition, transitioned to VHHA at the same time.

As part of this change, only two coalition employees, David Calkins and Jennie Kammerman, transitioned to VHHA while other staff members moved on to new opportunities. CVHC continues to maintain day-to-day coordination of healthcare preparedness, and ODEMSA continues to support coalition operations as the designated EMS representative on the CVHC Advisory Committee.

Planning District 13

Southside Sub-Council Agencies

- Alberta Volunteer Fire Department, Inc.
- Boydton Life Station, Inc.
- Brunswick County Sheriff's Office *
- Brunswick Emergency Medical Services
- Central Life Saving & Rescue Squad
- Gasburg Volunteer Fire Dept. *
- Halifax County Fire Commission
- Halifax County Rescue Squad
- Lake Gaston Volunteer Fire Department *
- Mecklenburg County Emergency Services
- North Halifax Volunteer Fire Department
- Patient Transport Systems
- South Boston Fire Department *
- Southside Rescue Squad, Inc.
- Triangle Volunteer Fire Department *
- Turbeville Volunteer Fire and Rescue Association, Inc.
- Victoria Fire & Rescue
- Virginia International Raceway

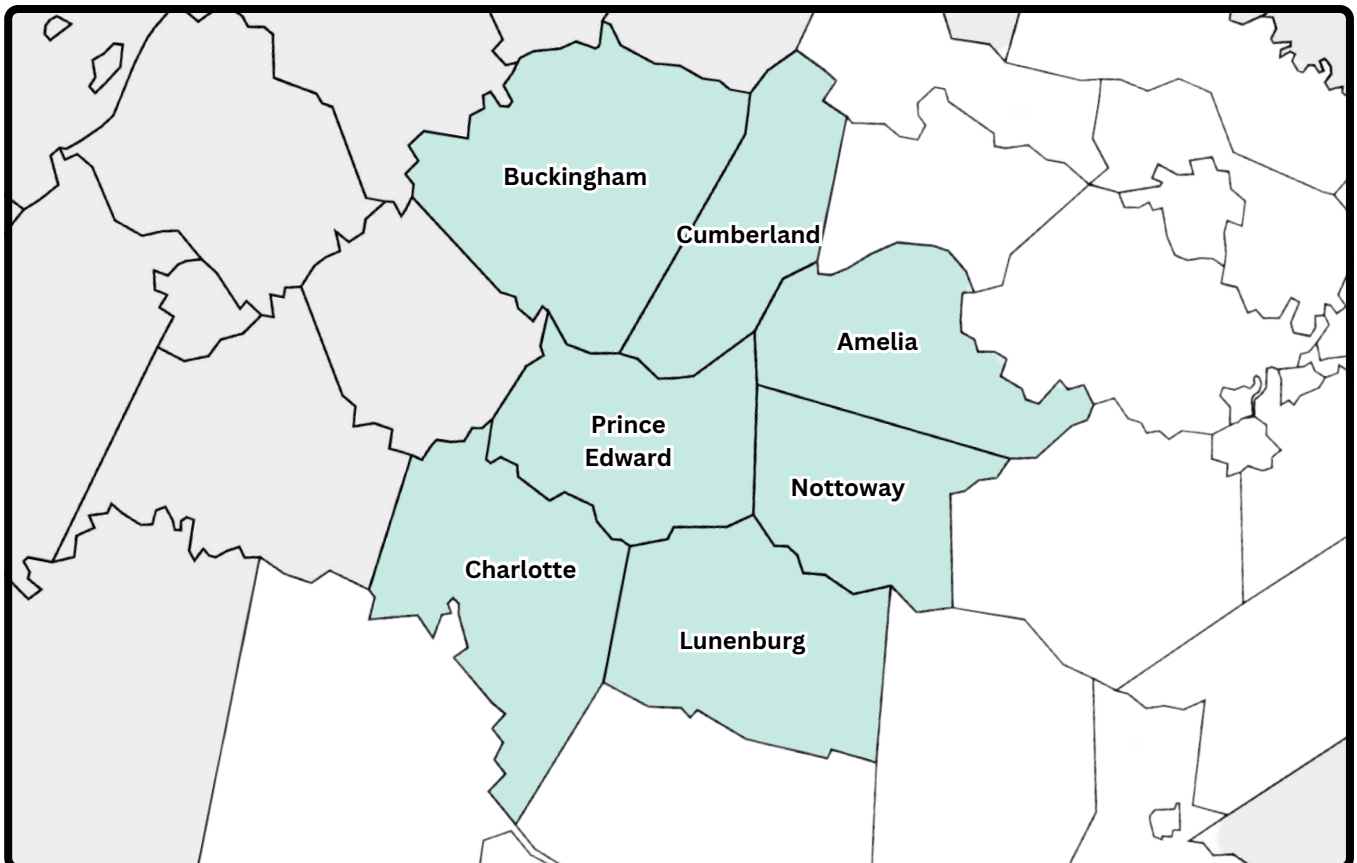


* Non-transport  Federal

Planning District 14

South Central Sub-Council Agencies

- Amelia County Fire and EMS
- Amelia County Volunteer Fire Department *
- Amelia Emergency Squad
- Blackstone Fire Department *
- Buckingham County Department of Emergency Services
- Burkeville Volunteer Fire Department
- Charlotte County Fire & Rescue *
- Charlotte County Volunteer Rescue Squad
- Crewe Volunteer Fire Department *
- Cumberland Fire & EMS
- Farmville Volunteer Fire Department *
- Fort Barfoot Fire and Emergency Services
- Hampden-Sydney Volunteer Fire Department *
- Meherrin Volunteer Fire and Rescue
- Nottoway County Emergency Squad
- Prince Edward Volunteer Rescue Squad



* Non-transport

† Federal

Planning District 15

Metro Richmond Sub-Council Agencies

- American Medical Response
- Ashland Volunteer Rescue Squad
- Bensley-Bermuda Vol. Rescue Squad
- Bon Secours Critical Care Transport
- Charles City Co. Fire & Emergency Services
- Charles City Volunteer Fire-EMS
- Chesterfield Fire and EMS
- City of Richmond Dept. of Fire & Emergency Services *
- Defense Logistics Agency Richmond Fire & Emergency Services †
- Delta Medical Transport, Inc.
- East Hanover Volunteer Rescue Squad
- Emergency Services Solutions, Inc. *
- Emergency Training Systems, Inc.
- Ettrick-Matoaca Volunteer Rescue Squad
- Forest View Volunteer Rescue Squad
- Goochland Co. Dept. of Fire-Rescue
- H2H Emergency Services
- Hanover Fire and EMS
- Henrico County Division of Fire
- Kings Dominion *
- Lakeside Volunteer Rescue Squad
- LifeEvac (Med-Trans Corporation)
- Manchester Volunteer Rescue Squad
- Metro Health EMS (Western-Star Hospital Authority Inc.)
- New Kent Fire - Rescue
- Philip Morris, USA *
- Powhatan Fire and Rescue Department
- Richmond Ambulance Authority
- Richmond Int'l. Airport Fire Department *
- Richmond Volunteer Rescue Squad
- Royal Medical Transportation
- Spruance Emergency Services *
- Tuckahoe Volunteer Rescue Squad
- Vanguard Ambulance, LLC
- Virginia State Police – MedFlight I
- VA Urgent Emergent Medical Support *
- West Hanover Volunteer Rescue Squad
- WeCare Medical Transportation Inc.
- Wegmans Food Markets, Inc.

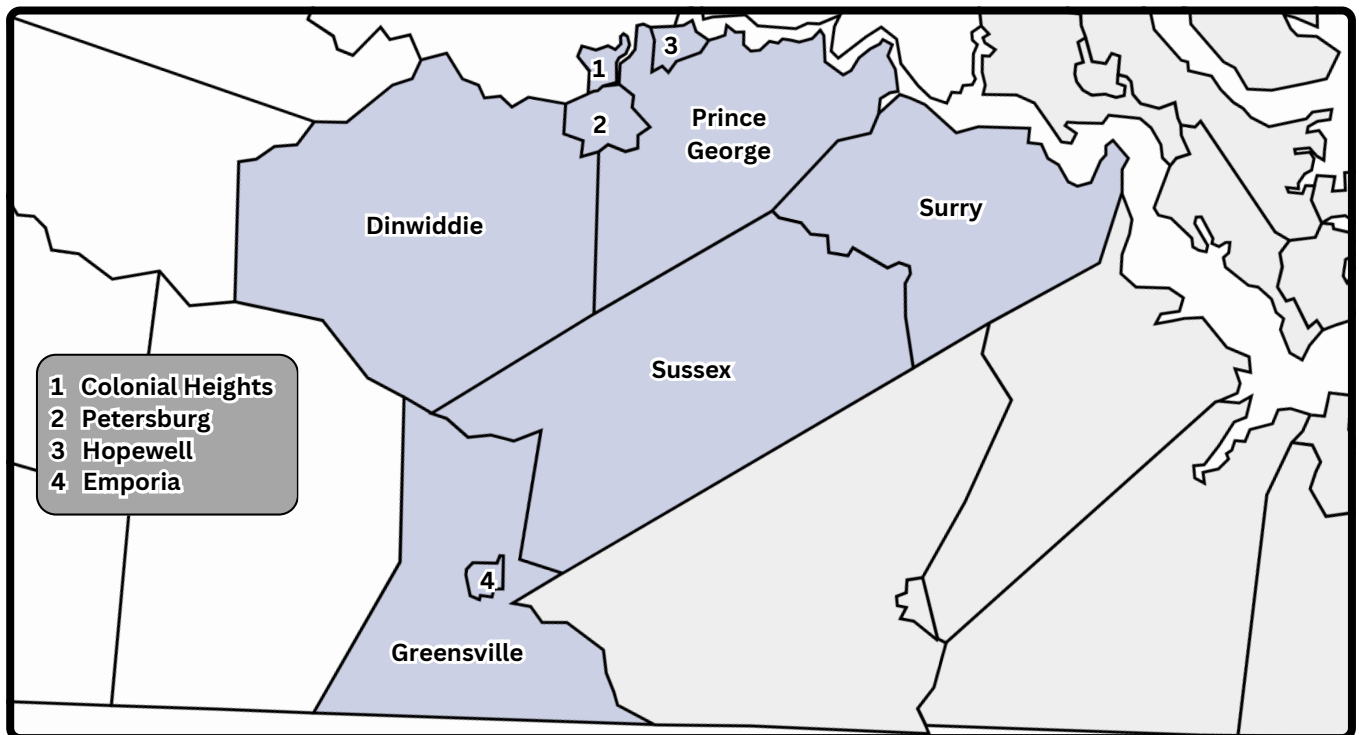


* Non-transport † Federal

Planning District 19

Crater Sub-Council Agencies

- Advansix - Hopewell
- Air Care Eagle (Rocky Mountain Holdings)
- Colonial Heights Fire/EMS & Emergency Management
- D19 Transportation Services, Inc.
- Dinwiddie County Fire and EMS
- Fort Gregg-Adams Fire and Emergency Services †
- Gerdau
- Greenville Volunteer Rescue Squad
- Hopewell Fire and EMS
- Jarratt Volunteer Fire Department *
- Lifestar Ambulance Service
- Petersburg Fire Department
- Prince George Fire and EMS
- Southside Virginia Emergency Crew
- Stony Creek Volunteer Rescue Squad
- Surry County Emergency Medical Services (Surry County Board of Supervisors)
- Surry Nuclear Power Station
- Sussex Fire & Rescue
- Waverly Rescue Squad



* Non-transport

† Federal

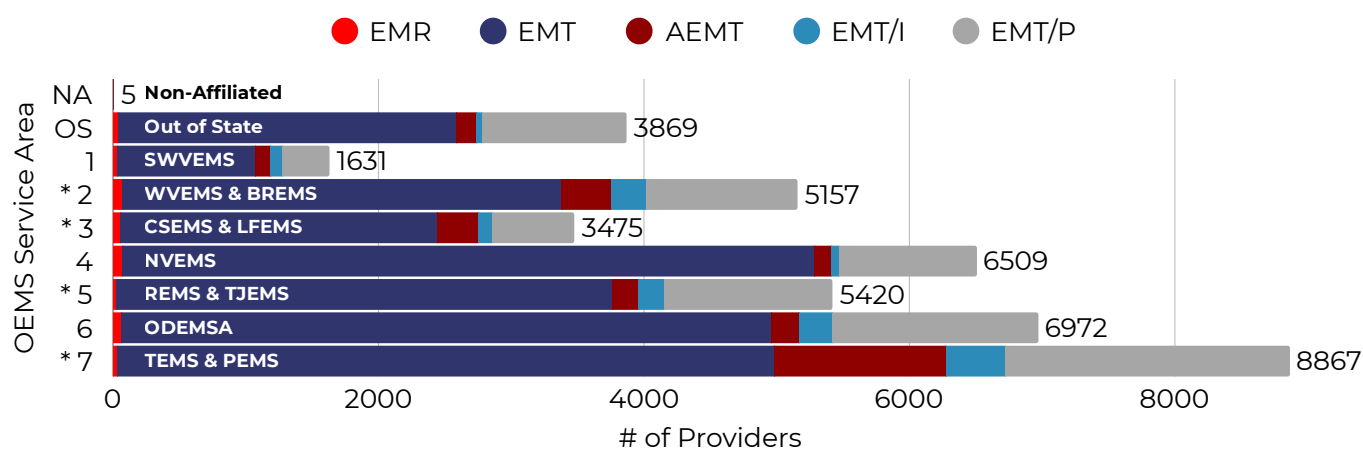
Emergency Departments

			PLANNING DISTRICT 13
Sentara Halifax Regional Hospital			VCU Health Community Memorial Hospital
PLANNING DISTRICT 14			Centra Southside Community Hospital
PLANNING DISTRICT 15			Bon Secours Chester Freestanding Emergency Center
Bon Secours Memorial Regional Medical Center			Bon Secours Richmond Community Hospital
Bon Secours Short Pump Emergency Center			Bon Secours St. Francis Medical Center
Bon Secours St. Mary's Hospital			Bon Secours Westchester Emergency Center
Children's Hospital of Richmond at VCU			HCA Chippenham Hospital
HCA Hanover Emergency Center			HCA Henrico Doctors' Hospital
HCA Johnston-Willis Hospital			HCA Parham Doctors' Hospital
HCA Retreat Doctors' Hospital			HCA Swift Creek Emergency Center
Richmond Veterans Administration Medical Center			VCU Health Emergency Center at New Kent
VCU Medical Center			
			PLANNING DISTRICT 19
Bon Secours Colonial Heights Emergency Care			Bon Secours Southern Virginia Medical Center
Bon Secours Southside Medical Center			HCA Prince George Emergency Room
HCA TriCities Hospital			

Providers by OEMS Service Area

The accompanying stacked bar charts provide a detailed breakdown of EMS providers and EMS educators, categorized by certification/educator level and organized by OEMS Service Areas as defined on January 1, 2026.

* Indicates a Service Area is comprised of two Previous Councils. |
NA=Non-Affiliated | OS=Out of State

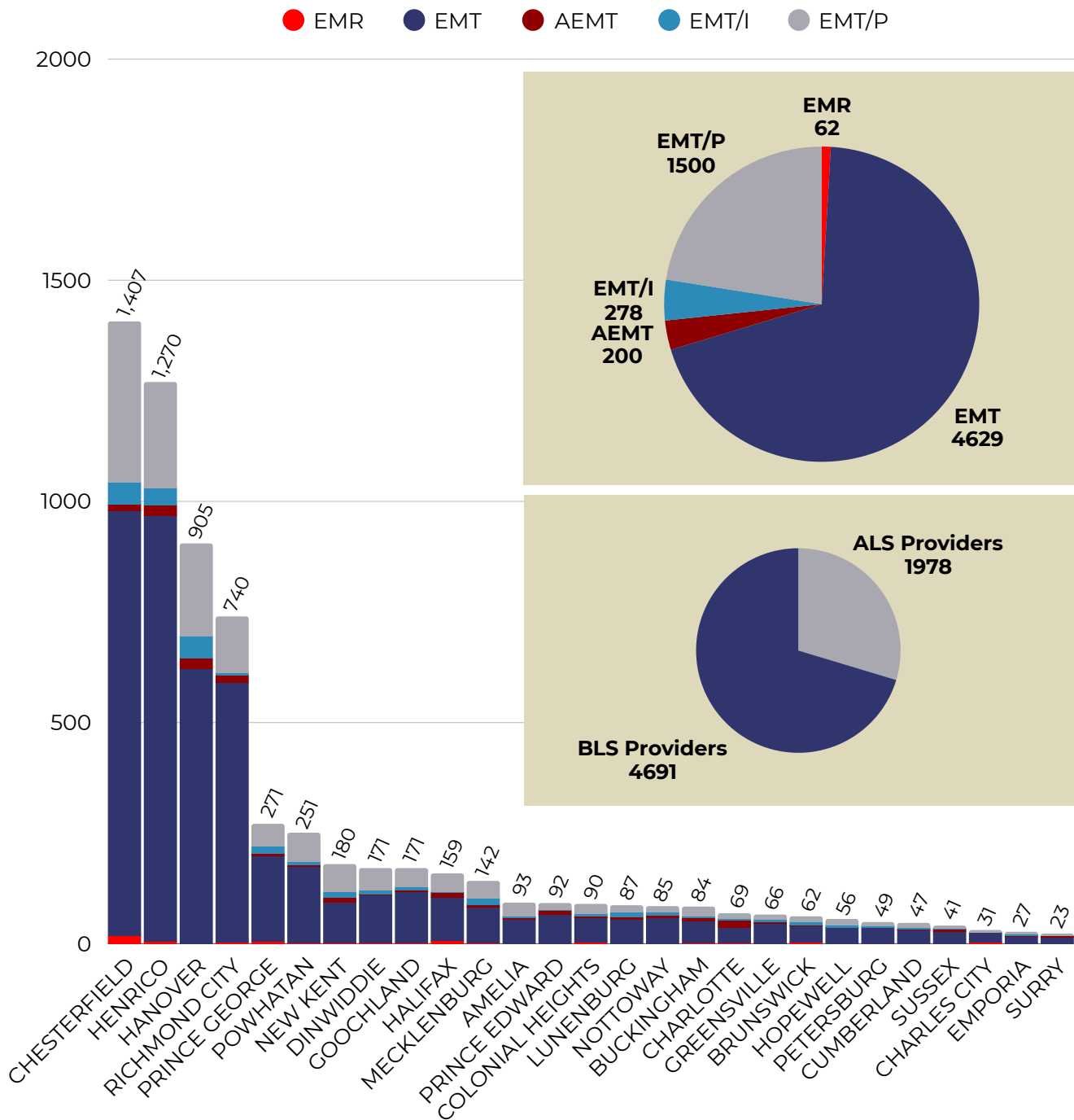


This analysis is based on data sourced on January 2, 2026.

Service Area	EMR	EMT	AEMT	EMT/I	EMT/P	Total
NA	0	4	1	0	0	5
OS	43	2544	152	46	1084	3869
1	35	1038	113	91	354	1631
* 2	68	3312	376	264	1137	5157
* 3	58	2389	304	105	619	3475
4	68	5220	127	59	1035	6509
* 5	28	3734	200	191	1267	5420
6	61	4898	213	250	1550	6972
* 7	33	4954	1292	443	2145	8867
Totals	394	28093	2778	1449	9191	41905

Providers by Regional Locality

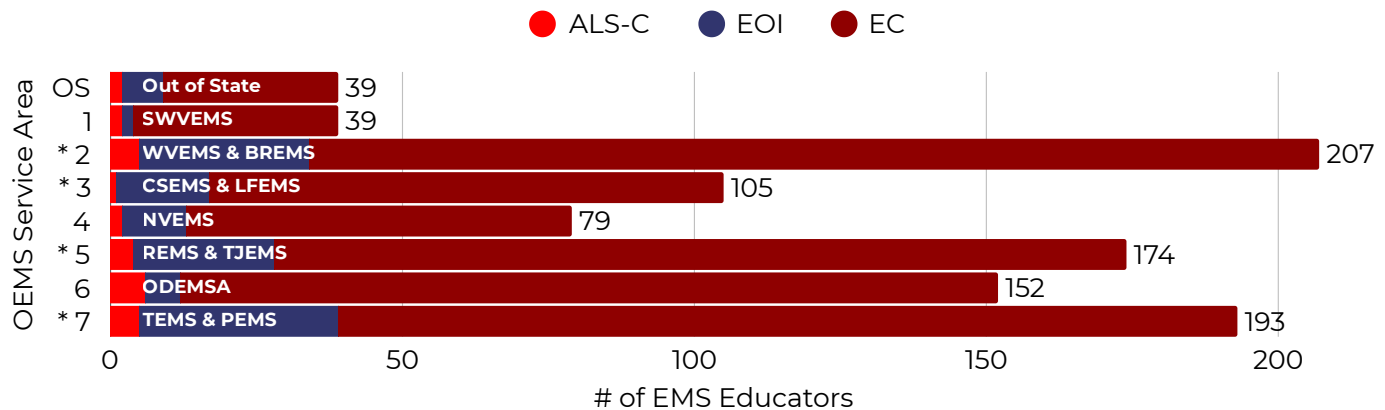
The stacked bar chart below delineates EMS providers within the region, categorizing them by certification level and organizing the data by locale as of January 2, 2026. Complementing the bar chart, pie charts further disaggregate the data, presenting a separate analysis of provider certifications and care levels at the regional level.



Educators by OEMS Service Area

The accompanying stacked bar charts provide a detailed breakdown of EMS providers and EMS educators, categorized by certification/educator level and organized by OEMS Service Areas as defined on January 1, 2026.

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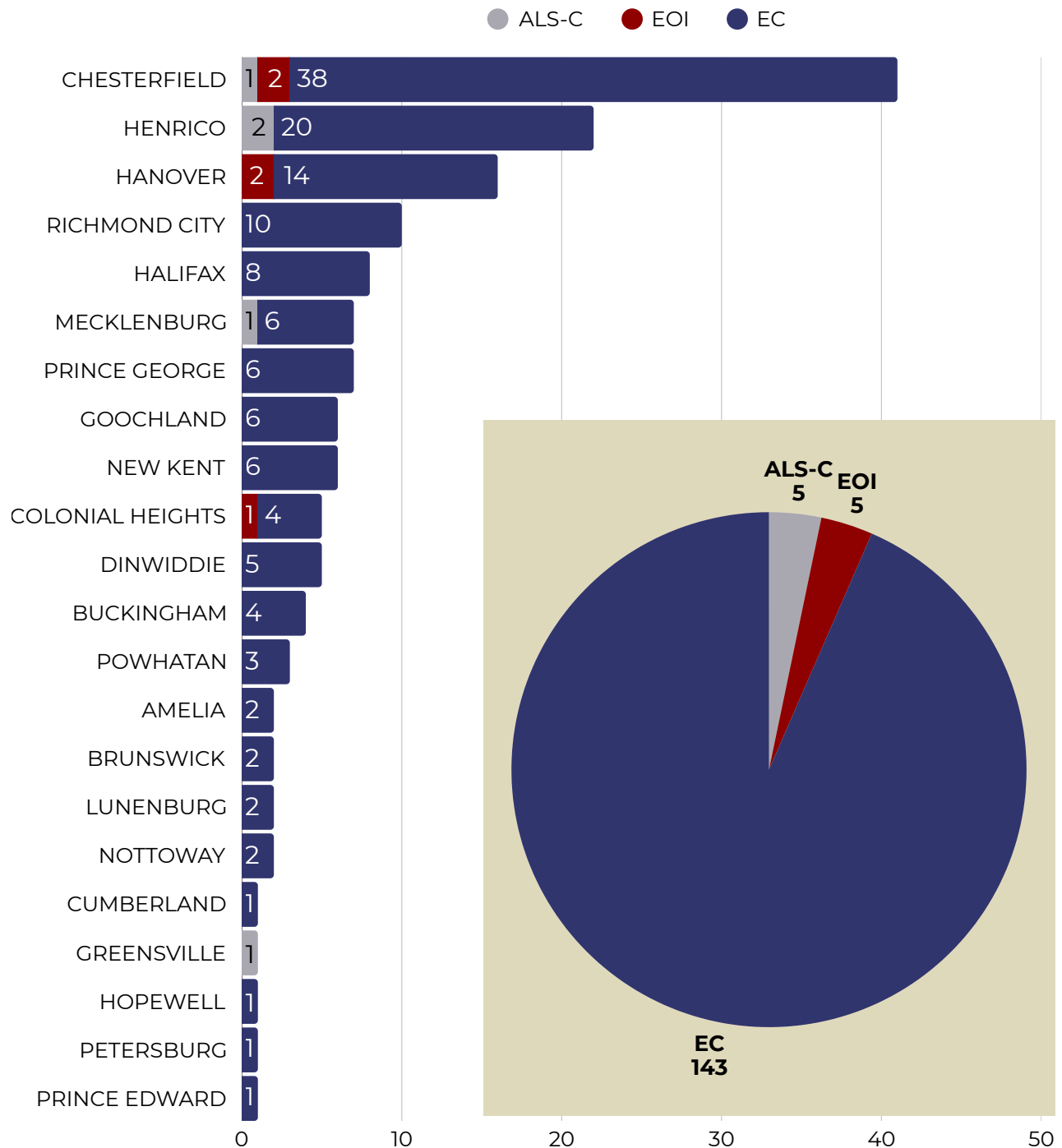


This analysis is based on data sourced on January 2, 2026.

Service Area	ALS-C	EOI	EC	Totals
OS	2	7	30	39
1	2	2	35	39
* 2	5	29	173	207
* 3	1	16	88	105
4	2	11	66	79
* 5	4	24	146	174
6	6	6	140	152
* 7	5	34	154	193
Totals	27	129	832	988

EMS Educators by Regional Locality

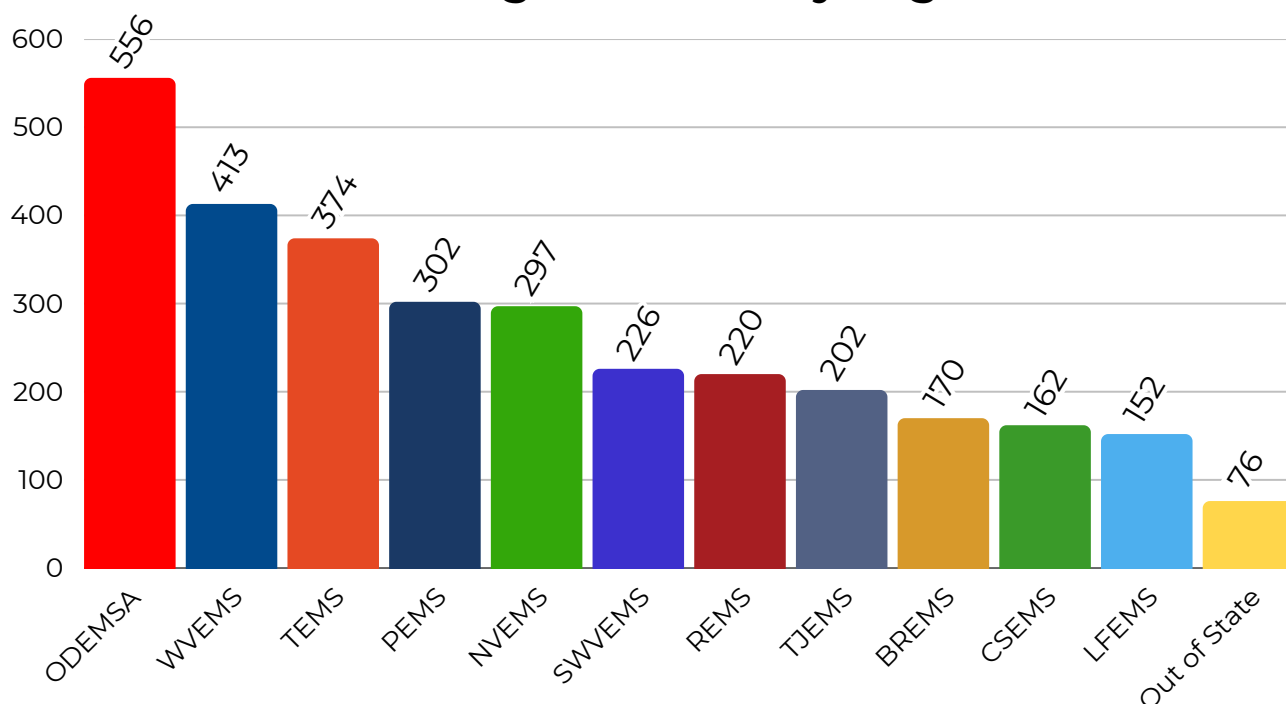
The bar chart below offers a detailed examination of the number of EMS Educators by level within the region, categorized according to the locale of residence. Accompanying pie charts provide additional insights, further delineating educator levels within the region. This comprehensive analysis is based on data collected as of January 2, 2026.



State Continuing Education

The bar chart presented below furnishes an overview of the Emergency Medical Services (EMS) State Continuing Education (CE). It details the number of education programs offered, segmented by region, highlighting the regional distribution and availability of CE opportunities. This analysis is grounded on data collected up to January 2, 2026.

Continuing Education by Region



Deficits in State EMS Training Funding Accessibility

Since May 23, 2019, EMS educators across the Commonwealth have faced substantial challenges in accessing training funds from the Office of Emergency Medical Services (OEMS). On this date, OEMS implemented a significant policy change, entering into contracts exclusively with a limited group of EMS educators statewide. This decision effectively ended all Continuing Education (CE) funding for educators not included in the contract.

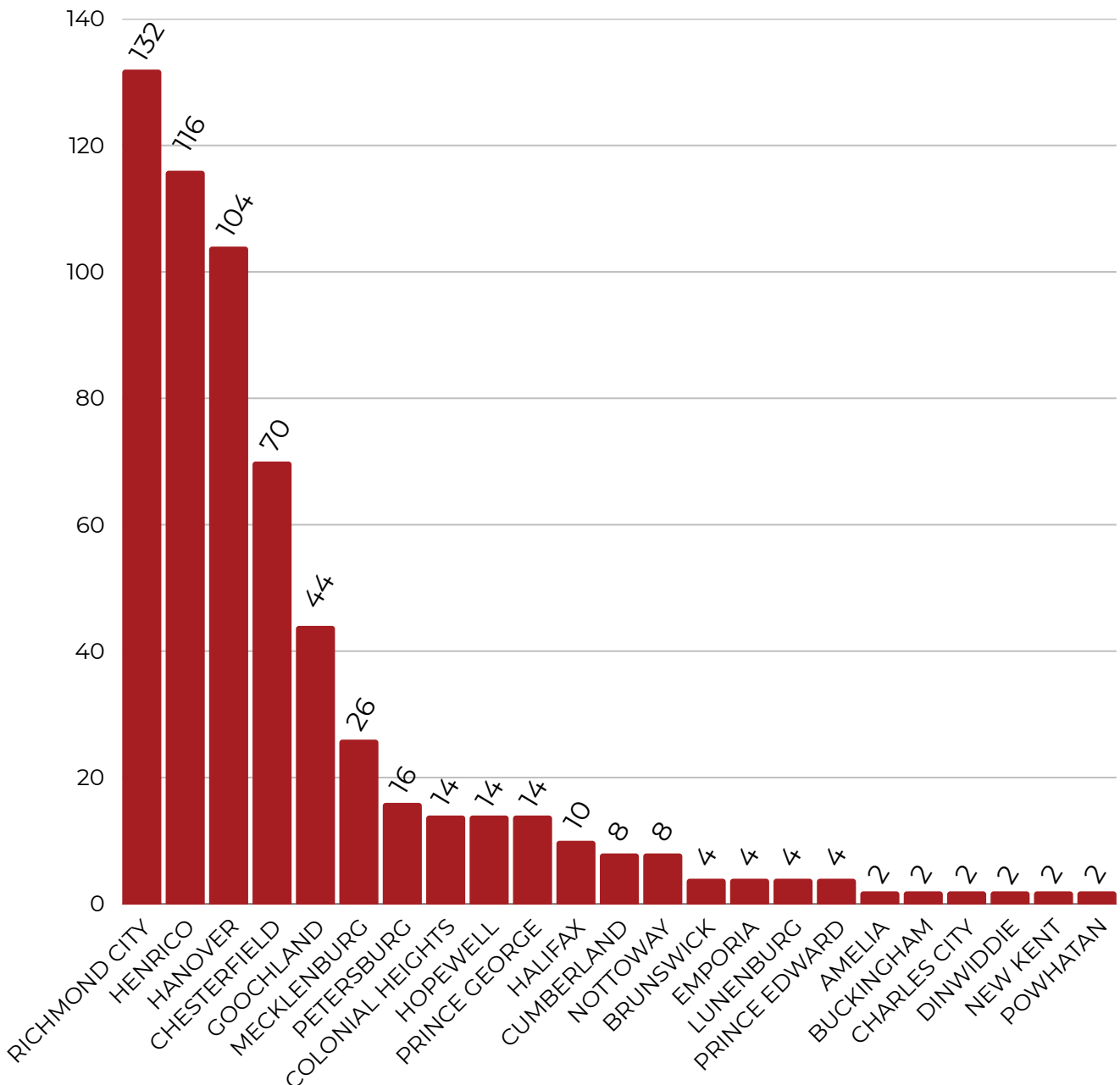
Additionally, due to a funding deficit from OEMS in FY2023, all initial EMS program scholarships were suspended, and CE programs previously supported through Four for Life state funding were discontinued without an alternative funding source provided. As of this report, these programs remain unfunded, with no timeline or updates from OEMS regarding the resumption of financial support. Consequently, CE has become an unfunded mandate, leaving the responsibility of funding to EMS councils, agencies, providers, and educators across the state.

This situation marks a significant shift in the financial framework for EMS education within the Commonwealth, as these state training funds are no longer accessible.

Regional Continuing Education

The bar chart presented below furnishes an overview of the Emergency Medical Services (EMS) Regional Continuing Education (CE). The bar chart delineates education programs based on the locality where each course was held, providing insights into the geographical accessibility of these educational sessions. This analysis is grounded on data collected up to January 2, 2026.

Continuing Education by Locality



Meetings and Training Facilitation

The ODEMSA Training and Education Center continues to serve as a vital resource for education and collaboration within the EMS system, offering a fully equipped classroom and meeting space, an Emergency Room simulator, an Ambulance simulator, a house simulator, office space, and breakout rooms. The center is provided at no cost to support the development of current and future responders across the region. In 2025, enhancements were made to the audio and visual capabilities to further improve hybrid delivery of meetings and trainings, including improved display functionality and the addition of two ceiling mounted PTZ cameras to enhance video quality for virtual and hybrid participants.

Throughout the year, ODEMSA facilitated numerous meetings and events including:

- Supported filming operations for Henrico Fire training media in August
- Hosted specialized EMT skills scenarios for the Breaking Barriers high needs adult training in September
- Virginia Office of EMS
 - Training and Certification Committee Meetings in January, April, and October
 - Medical Direction Committee Meetings in January, April, and October
 - Education Coordinator Update sessions hosted in April and July
 - Education Coordinator Institutes hosted in April and again in September
 - RSAF Course facilitated at ODEMSA and coordinated at Amelia VFD in July
 - FARC Committee Meeting hosted in December
 - Regional Council Directors Meeting and State PI Forum sessions hosted in February and May
- Central Virginia Healthcare Coalition
 - After-Action Review for the Richmond Water Outage in February
 - Medically Vulnerable Populations (MVP) tabletop exercises in February and May
- Hospital Emergency Response Training for Mass Casualty (HERT) multi-day training in April
 - Regional Hazard Vulnerability Assessment Workshop in November
- VCU Health
 - Fight Against Hunger charity, classroom space for the packaging event in January.
 - Hosted onboarding for fifty-six VCU Health nurse externs in May due to downtown water disruptions
 - LifeEvac Ground Schools hosted in March, June, and again in July
 - LifeEvac Preceptor Training and Medical Director Check-ins in February, July, August, and September
 - Human Resource and Talent Experience Summit in March
 - CTCCE PEARS courses in July, August, September, and October
- Hospital to Home
 - EMT education support in May, June, September, and December
 - PALS and ACLS recertification courses in October and December

Advancing EMS Education in the Region

ODEMSA continues to invest in the development of the regional emergency medical services workforce by providing access to high-quality education, psychomotor skill verification, and certification support. These offerings ensure that EMS students and providers have the knowledge, confidence, and clinical preparedness necessary to deliver exemplary emergency medical care throughout the region.

Richmond Fire Department Academy Instruction

- ODEMSA supported the delivery of the EMT portion of the Richmond Fire Department's fire academy. The course enrolled 29 students; 23 completed the program and achieved certification as Virginia and Nationally Registered EMTs.



BLS Psychomotor Skill Verification

- In Virginia, candidates seeking Virginia EMT certification through Legal Recognition, reentry, or challenge (an alternative route to certification for those who already have recognized healthcare experience) must have their psychomotor competency formally verified before becoming eligible for EMT credentialing. This process requires two timed integrated out-of-hospital (IOOH) testing scenarios, one focused on a medical emergency and one focused on trauma, observed by a certified Education Coordinator using official state evaluation forms. Throughout 2025, ODEMSA conducted eight testing sessions for a total of 16 candidates, providing standardized equipment, trained evaluators, and a realistic patient care environment to ensure the accurate demonstration of core EMS skills.

Emergency Medical Technician Course Support

- The ODEMSA Training and Education Center continued to serve as a valued learning venue by hosting an EMT program delivered by Front Line Educators. Participants received instruction that built clinical knowledge and practical field-service competency.

American Heart Association CPR Training

- 10 Heartsaver CPR classes were offered during the year, resulting in 32 individuals becoming (re)certified. These courses enhanced community and provider readiness by equipping students, healthcare professionals, and laypersons with lifesaving skills.

Rescue Squad Assistance Fund (RSAF) Education

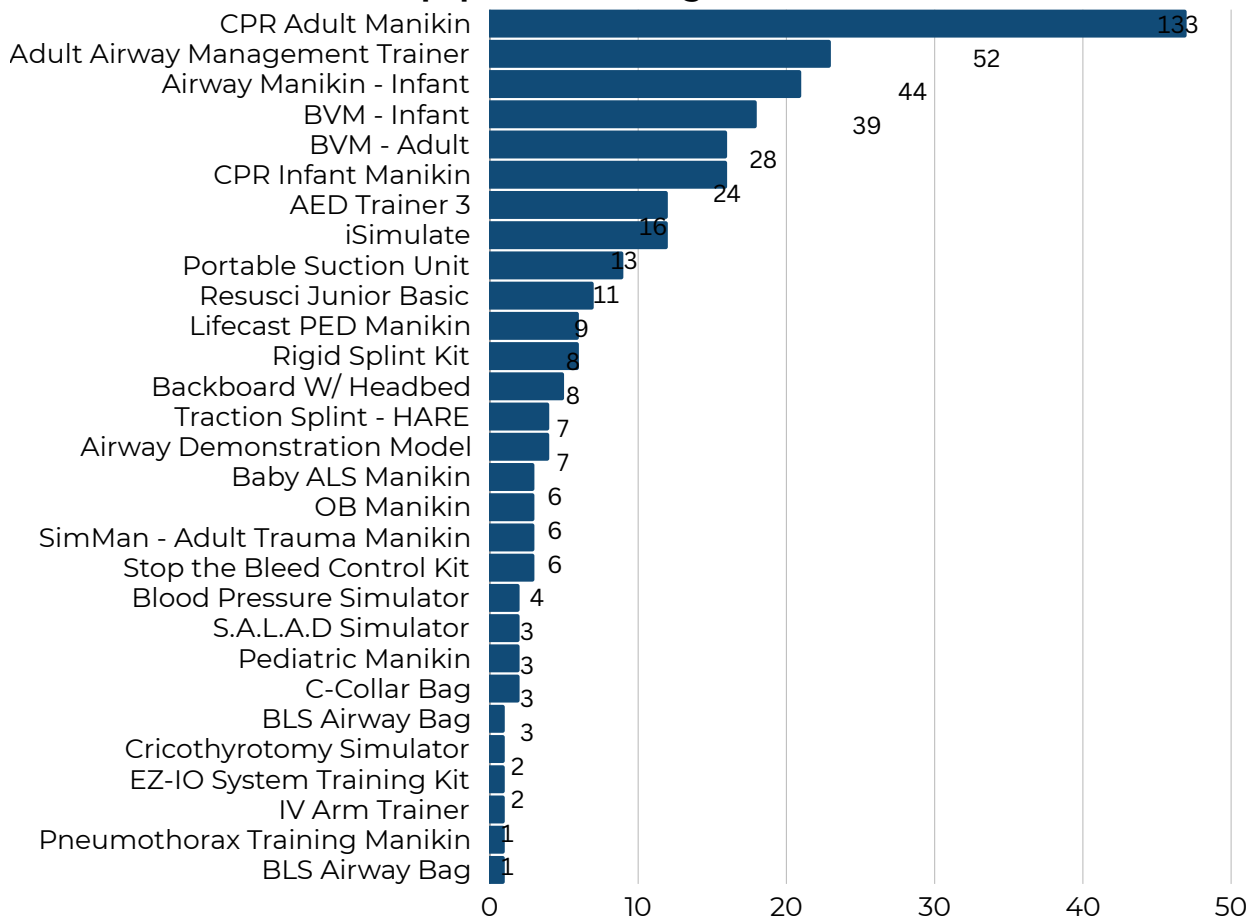
- In collaboration with the state, ODEMSA hosted OEMS-instructed RSAF grant workshops at the Training Center and at Amelia Volunteer Fire Department. This dual-location approach improved outreach and ensured providers' access.

Regional Lending Library Program

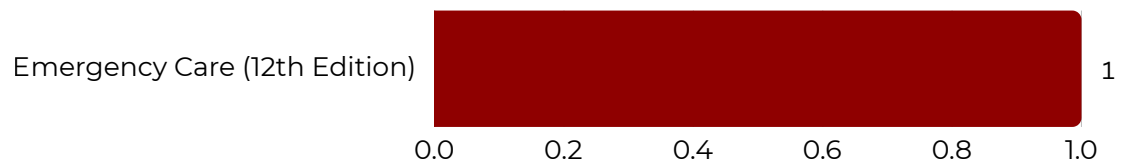
ODEMSA consistently provides EMS equipment and educational materials to various regional agencies and educators. It is important to note that this figure excludes the internal utilization of items for on-site classes or EMT programs taught by ODEMSA.

To explore the array of items available, interested parties are encouraged to visit the ODEMSA lending library at <https://odemsa.net/odemsa-lending-library-libib/>.

Equipment Lending Totals



Text Book Lending Totals



2024 Governor's EMS Award Honorees



Official Photos by Christian Martinez, Office of Governor Glenn Youngkin.

On May 19, 2025, the Virginia Office of Emergency Medical Services and the Virginia Department of Health honored the recipients of the 2024 Governor's EMS Awards at an event held at the Governor's Mansion during Virginia EMS Week. These awards represent the highest level of recognition in the Commonwealth's EMS system and celebrate individuals and organizations whose service, leadership, and innovation have advanced emergency medical services statewide.

The Old Dominion EMS Alliance proudly recognizes the award recipients from the ODEMSA region who were honored at the state level for their outstanding contributions to EMS.

2024 ODEMSA Region Governor's EMS Award Recipients

- **Outstanding Contribution to EMS Health and Safety**
 - Richmond Ambulance Authority
- **Innovation Excellence in EMS**
 - Caroline Juran, Virginia Board of Pharmacy

These recognitions reflect the strength of leadership, collaboration, and innovation within the ODEMSA region. The achievements of these honorees demonstrate a continued commitment to improving patient safety, strengthening EMS systems, and advancing the profession across the Commonwealth.



The Old Dominion EMS Alliance recognized outstanding individuals and organizations across the region through the 2025 Regional EMS Awards. Award recipients were formally acknowledged for their contributions to emergency medical services and their continued commitment to advancing care within the ODEMSA region.

The 2025 awards cycle reflected a period of transition and refinement within the regional awards program. ODEMSA aligned its Regional EMS Awards with the criteria used for the Governor's EMS Awards, adapting recognition for presentation at the regional level under the designation of ODEMSA Regional Awards. This approach ensured consistency with statewide recognition standards while maintaining a focus on regional impact.

Several award categories remained unchanged, including Excellence in Emergency Medical Services, Outstanding Prehospital Provider, Physician with Outstanding Contribution to EMS, Outstanding EMS Agency, and Outstanding EMS Telecommunicator. Other categories were refined to better reflect the evolving scope of EMS roles. Eligibility for the Outstanding EMS Prehospital Educator and Outstanding EMS Leadership awards was expanded to recognize contributions from a broader range of EMS professionals, healthcare providers, and first responders.

As part of these updates, specific award categories were eliminated due to limited participation in prior years, allowing the program to focus on recognition areas with broader applicability and sustained engagement. The Outstanding Contribution to EMS for Children award continued through the 2025 cycle and was evaluated to determine future inclusion. The EMS Scholarship continued as a separate, application-based program, and nominations for Lifetime Achievement in EMS will be accepted for consideration through established advisory and awards committee processes.

The 2025 Regional EMS Awards highlighted the collaborative spirit of the EMS community and celebrated excellence across prehospital care, education, leadership, agency performance, telecommunication, physician involvement, and system support. Each honoree's recognition reflected the professionalism, dedication, and innovation that define emergency medical services throughout the ODEMSA region.

Protocol Development Update

Throughout 2025, ODEMSA staff have dedicated significant effort toward a comprehensive revision of our regional medical protocols. This work has focused on incorporating the October 2025 American Heart Association guidelines, aligning with current Virginia OEMS regulations, and integrating best practices from national standards and regional feedback.

Key areas actively revised by staff include:

- **Administrative & Foundational Sections:** Updated purpose statements, acknowledgments, regional skills tables, and alignment with the current Virginia Scope of Practice.
- **Adult Cardiovascular Protocols:** Full integration of the new AHA guidelines, including updated algorithms and flowcharts for ACS/STEMI, cardiac arrest, tachycardia, bradycardia, and advanced interventions such as ECMO.
- **Adult Medical Emergencies:** Modernized universal assessment tools, transition to BEFAST + VAN for stroke, updated seizure management with revised midazolam dosing/routes, and enhanced difficult airway guidance with LEMON assessment and capnography requirements.
- **Adult Trauma Emergencies:** Reworked trauma assessment with new SALT/START triage flowcharts, significantly expanded sexual assault protocol (strangulation screening, evidence preservation, human trafficking indicators, regional SANE table), and clarified abuse/neglect reporting per Virginia code.
- **Pediatric Medical Emergencies:** Comprehensive updates to pediatric assessment, vital-sign interpretation, exposure/hypothermia prevention, and transportation decision-making.
- **Medication Reference:** Dosage and route reconciliation for critical medications (midazolam, diazepam, etc.) to reflect current national and AHA standards.

Dozens of protocols have been fully drafted or substantially revised by ODEMSA staff. These completed drafts are now positioned to move through the formal governance process in 2026.

Although no formal protocol update was released in 2025, this extensive behind-the-scenes work represents one of the most thorough revisions in recent years. We look forward to releasing a modern, evidence-based protocol set in 2026, complete with updated flowcharts, training support, and widespread distribution to all agencies across the ODEMSA region.

Leveraging Technology for Better Workflow

ODEMSA continues to grow its use of Monday.com to improve organizational workflow and support efficient operations across the region. These tools now serve as a central platform for managing core functions including:

- Regional medication kit transition tracking throughout the transition
- Classroom and vehicle scheduling that supports efficient use of training and fleet resources
- Project collaboration that assigns tasks and helps staff work together across multiple initiatives
- Award nomination and review process management
- Pharmacy supply requests and turnaround tracking through April 2025
- Committee membership tracking that maintains up-to-date contact information and automatically updates each committee's public-facing roster on the ODEMSA website without displaying personal contact information
- Task management is used to maintain progress on organizational priorities

In 2025, ODEMSA further expanded its digital infrastructure to support stronger engagement with EMS agencies. Dedicated boards now maintain up-to-date agency contact details, record communication history, and support ongoing coordination efforts. These resources have proven essential during periods of system change by simplifying follow-up and ensuring timely information sharing with the field.

The continued integration of Monday.com demonstrates ODEMSA's commitment to adopting modern technology that advances communication, strengthens project oversight, and supports responsive service delivery across the EMS community.



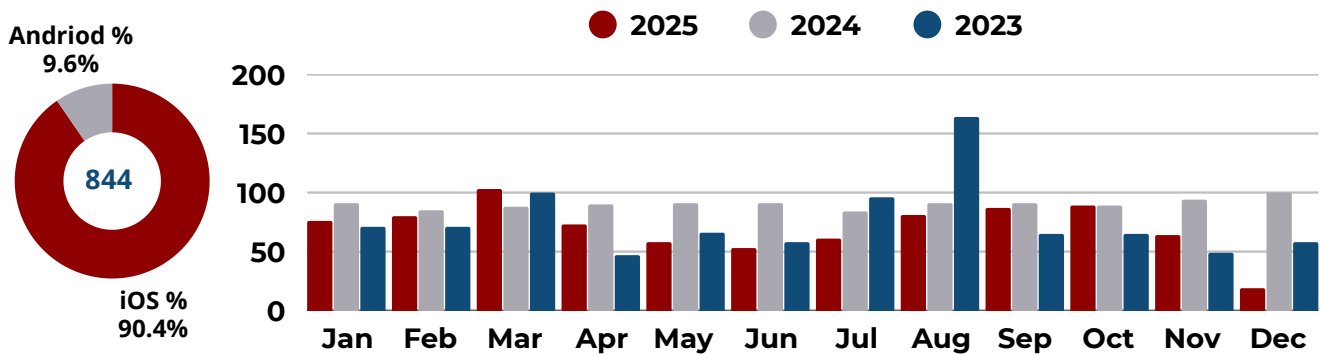
Regional Connectivity

The ODEMSA app provides EMS providers with a single source for essential regional information, including protocols, education, meeting schedules, reference documents, and other support resources. It also enables ODEMSA to deliver timely notifications to registered users throughout the region. The organization continues to enhance the app to maintain a reliable and user-friendly experience. The mobile app is available at no cost in the Apple App Store and Google Play Store.

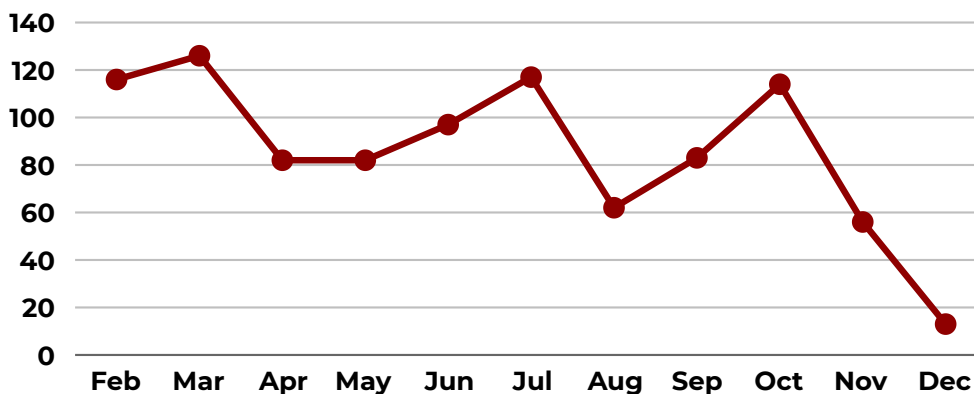
Monthly Downloads

A noticeable decline in download activity occurred early in 2025 after a change in Google Play Store requirements temporarily removed the ODEMSA app from the platform. A similar interruption previously occurred in September 2021 when Google updated its terms of service. The removal did not significantly affect overall totals because only a limited number of users access the app from Android devices. Once required updates were completed, the app was restored and downloads resumed.

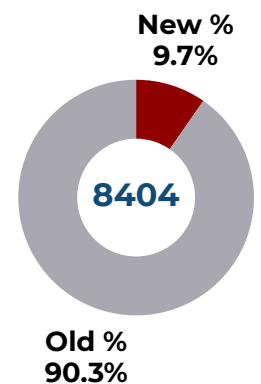
Downloads



Monthly App Opens



Active Users



Streamlining EMS Patient Follow-Ups

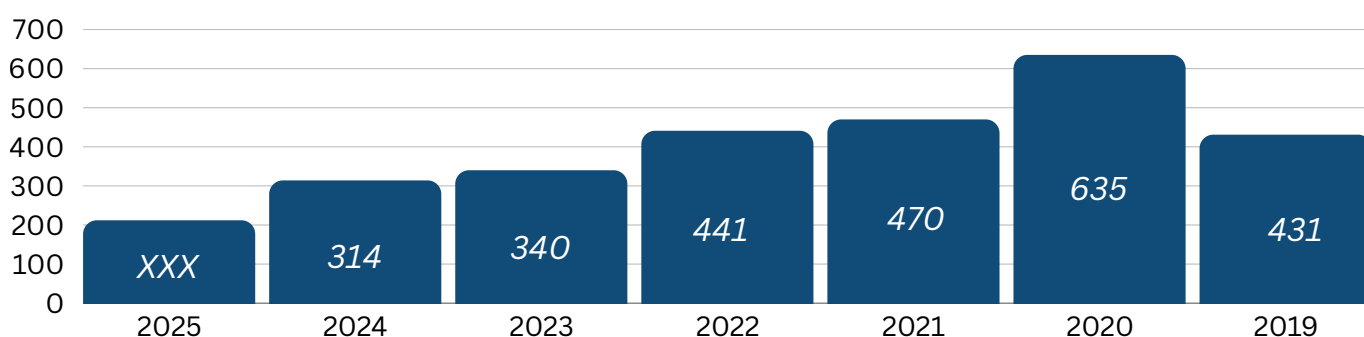
Launched in 2019, the ODEMSA EMS Patient Follow-Up Program streamlined how EMS providers request clinical updates after a patient encounter. Prior to its implementation, each hospital used its own process, which often led to inconsistent responses and delays.

A decline in follow-up requests was observed in 2024. This trend appears linked to several facilities south of the James River in the Metro Richmond area, including multiple specialty campuses for trauma, burn, and stroke care. Staffing changes within that hospital system contributed to inconsistencies in response rates, which may have discouraged EMS providers from submitting requests when patients were transported to those locations.

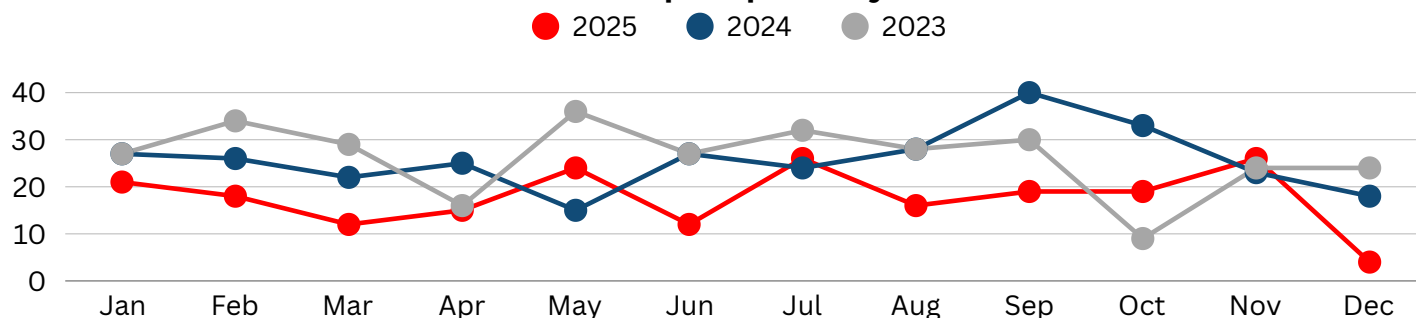
Following recent improvements within that system, response rates are increasing, and ODEMSA is actively communicating these positive developments to providers. It is anticipated that usage will return to expected levels in the coming months as confidence in the process continues to grow.

ODEMSA remains committed to supporting this program and strengthening communication between healthcare partners and EMS agencies. Continued collaboration will enhance efficiency, improve access to clinical follow-up information, and support high-quality patient care throughout the region.

Total Follow-Up Requests by Year



Total Follow-Up Requests by Month



Regional Peer Support Team

TEAM OVERVIEW

ACTIVATIONS

4



PRESENTATIONS

6



MEMBERS

10



LIVES TOUCHED

73

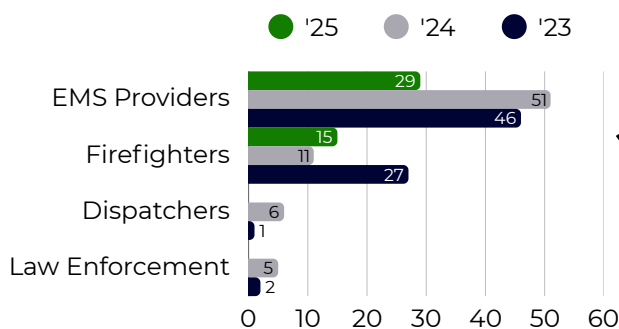


The ODEMSA Peer Support Team is comprised of trained volunteer members who provide critical support to first responder personnel experiencing stress, trauma, or emotionally challenging events in the line of duty. The team serves as an important resource for promoting resilience and mental wellness across the region.

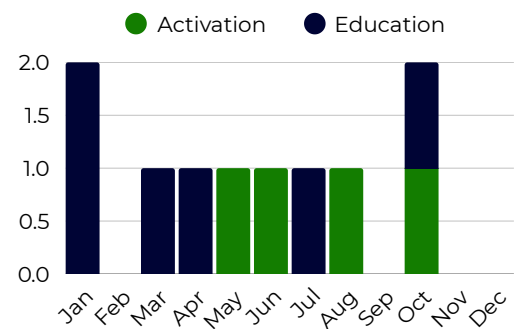
During 2025, the ODEMSA Peer Support Team responded to four activations, offering timely support following incidents involving fatalities and other high stress situations. These responses focused on providing immediate peer based assistance and connecting individuals with additional resources when needed.

Beyond individual activations, the team continued efforts to establish a Regional Peer Support Coalition. This initiative includes collaboration with law enforcement, fire, and EMS agencies throughout the region to promote a coordinated and sustainable approach to peer support. The team also engaged with organizations interested in developing peer support programs of their own, reinforcing ODEMSA's commitment to advancing mental health awareness and support across the broader first responder community.

Lives Touched



Activations & Education



For more information on the Peer Support Team visit:

odemsa.net/help

The ODEMSA Peer Support Team is available 24/7 and can be activated through the:

Virginia Emergency Operations Center

(804) 750-8845 (Voice & TDD)

Sentara Special Grant Funding Program

Program Overview and Purpose

In response to the regional transition away from hospital supported medication restocking and toward agency owned medication kits, ODEMSA pursued a one time grant opportunity with Sentara Healthcare to help offset the financial burden placed on EMS agencies. The resulting Sentara Special Grant Funding Program reimbursed eligible agencies for medication related costs associated with establishing independent medication inventories.

The program provided direct financial support during a period of significant regulatory and operational change. It was structured as a reimbursement based grant to ensure funds were used exclusively for medication purchases and compliance related expenses. This was a one time funding opportunity and was not intended to establish a recurring program.

Funding Source and Distribution

Sentara Healthcare awarded ODEMSA \$16,677.90 to distribute directly to EMS agencies within the region. One hundred percent of the funds were distributed to agencies. No portion was retained by ODEMSA for administrative costs, and no funds were returned to the donor.

Funds were allocated based on demonstrated financial need, application documentation, and available funding. No eligible agency was denied funding, although some agencies received partial awards to ensure equitable distribution.

Application Period and Participation

The application period opened on October 6, 2025 and closed on November 15, 2025. Ten EMS agencies submitted complete applications requesting reimbursement for eligible medication expenses incurred during the transition to agency owned medication kits.

Applications required invoices for medication purchases, proof of compliance, and verification of a valid Controlled Substance Registration with the Virginia Board of Pharmacy. All documentation was reviewed and verified by ODEMSA staff prior to application scoring. Only complete applications were considered.

Review and Approval Process

Applications were evaluated by a workgroup composed of representatives from each ODEMSA sub council. Submissions were scored using a standardized rubric that considered financial impact, documentation completeness, and alignment with program intent.

Funding recommendations were presented to the ODEMSA Board of Directors, which formally approved allocations on December 18, 2025.

Payment and Financial Reporting

Grant payments were issued following Board approval and fully disbursed prior to program closeout. Although administered during calendar year 2025, payments were processed during ODEMSA's second quarter of fiscal year 2026.

Because ODEMSA financial reporting follows a July 1 through June 30 fiscal year, these funds are not reflected in the calendar year 2025 financial statements.

Program Outcomes

- Ten EMS agencies participated
- All eligible applicants received funding
- Partial awards were issued where necessary
- \$16,677.90 was distributed directly to agencies
- No administrative fees were retained
- No funds were returned to the donor

The program achieved its objective of reducing the financial impact of the medication kit transition while maintaining accountability and compliance.

Program Closeout and Future Considerations

The program concluded once all funds were distributed. The application period marked the final opportunity for participation, and the program officially ended upon full disbursement of funds.

This was a one time program and will only be reestablished if future grant funding is secured.

Regional Impact

The Sentara Special Grant Funding Program provided timely and meaningful support to EMS agencies navigating a complex regulatory transition. By reimbursing medication costs, the program helped agencies maintain readiness, preserve service levels, and ensure uninterrupted access to essential medications.

The program reflects strong regional collaboration, effective grant administration, and the value of targeted partnerships that directly support frontline EMS operations.



Virginia EMS Regional Restructuring

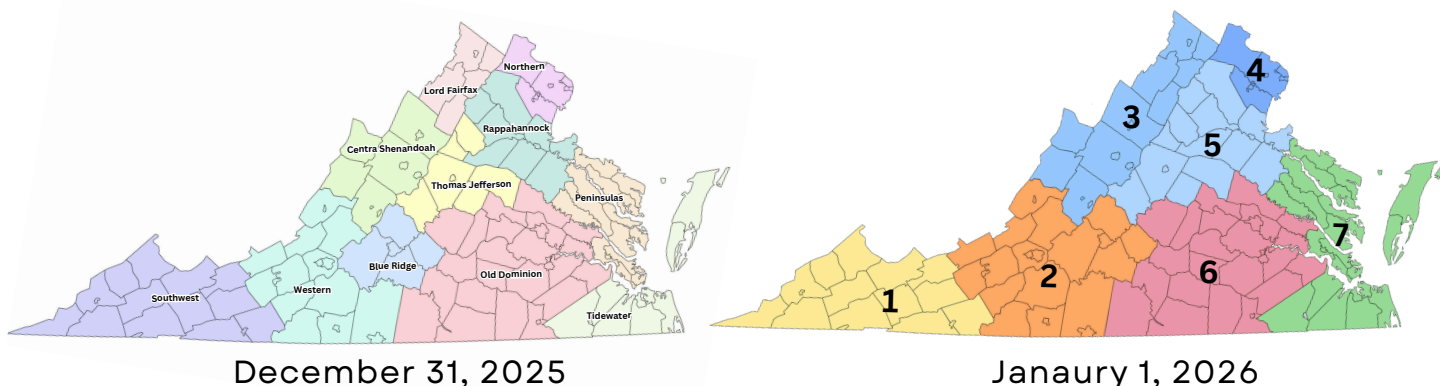
In 2025, the Commonwealth of Virginia restructured the Regional Emergency Medical Services Council system, reducing the number of regional councils from eleven to seven designated service areas. This statewide realignment, led by the Virginia Department of Health's Office of Emergency Medical Services, was undertaken to modernize regional alignment, address long standing structural inconsistencies, and strengthen coordination and accountability across the Commonwealth's EMS system.

Under the new structure, regional boundaries were adjusted to better align with healthcare coalitions, planning districts, and state priorities while maintaining the core mission of regional EMS system support. OEMS issued a formal Request for Applications in July 2025, requiring councils to demonstrate governance capacity, operational readiness, and compliance with statutory and regulatory requirements in order to be designated under the new model.

For the ODEMSA region, this process reaffirmed the council's role as the designated EMS council for Service Area 6. Although the statewide structure changed, ODEMSA's geographic boundaries remained unchanged, ensuring continuity of service for agencies, hospitals, and regional partners. Throughout the designation process, ODEMSA worked closely with OEMS to complete all required steps while maintaining uninterrupted regional support and deliverables.

This transition reflects a broader effort by the Commonwealth to strengthen regional governance and improve consistency across Virginia's EMS system. ODEMSA embraces these changes and looks forward to advancing emergency medical services in the Commonwealth through continued collaboration, adaptability, and sustained regional leadership.

Regional Service Areas Before and After Restructuring



Regional EMS Medication Kit Transition

Background and Purpose

For more than forty years, ODEMSA managed a Regional Drug Box Program that allowed hospital pharmacies throughout and near the region to restock medication kits for EMS agencies. This long-standing partnership ensured that life-saving medications were always available to EMS providers without each agency needing to maintain its own federal or state registrations.

Regulatory changes now prevent hospitals from supplying or restocking controlled substances directly to EMS agencies unless the agency holds its own Controlled Substance Registration and its own federal registration to maintain those medications. To remain compliant and protect the continuity of care across the region, ODEMSA terminated the Regional Drug Box Program and transitioned all advanced life support agencies to medication kits owned and managed by each EMS agency.

This transition aligns the region with current laws, strengthens accountability for controlled substances, and ensures ongoing access to essential medications for emergency patients.

Transition Timeline and Key Milestones

- ODEMSA issued regulatory guidance throughout 2024 to prepare agencies for upcoming changes
- Supporting instructions, forms, and reference materials were posted on the ODEMSA website throughout 2024 and 2025
- The Regional Drug Box Program officially ended at noon on April 15, 2025
- Final hospital stocked kit transfers occurred between April 15 and April 18, 2025
- After April 15, 2025, no hospital pharmacy within the program restocked EMS medication kits after a patient was transported to a facility.

Final Collection and Transfer Process

During the transition week, hospital pharmacy partners prepared the final supply of stocked medication kits. EMS agency representatives retrieved their assigned kits during the three-day collection window. Required federal transfer forms were provided by agencies when controlled substances were present, and all transfers were recorded in the Clearly Inventory system to ensure accurate documentation.

Following the collection, agencies removed any remaining ODEMSA-specific program materials so the medication kits would be fully owned and managed by each agency.

Support and Resources for EMS Agencies

ODEMSA developed and maintained a transition resource center to help agencies become fully compliant with state and federal requirements. This included:

- Registration guidance for state and federal controlled substance authorizations
- Sample policies for secure medication storage and accountability
- Resources for ordering, inventory tracking, and documentation
- Support contact information for transition questions
- Coordinated scheduling tools for pharmacies to reduce pickup delays

Throughout the year, ODEMSA continued to communicate updates on any changes in requirements from federal or Virginia regulatory partners.

Key Outcomes for 2025

- The Regional Drug Box Program came to a complete and official close on April 15 2025
- Every advanced life support agency in the region successfully transitioned to agency-owned medication kits
- Final medication kits were retrieved by participating agencies during the April 15 to April 18 pickup window
- Agencies assumed full responsibility for medication storage, procurement, and compliance going forward
- No disruption to medication access or EMS operations was reported during or after the transition
- Accountability and regulatory alignment were strengthened through direct agency ownership
- ODEMSA continues to provide information as changes occur in federal or Virginia pharmacy requirements and continues assisting agencies as questions arise

Significance and Regional Impact

This transition represents a major change in how emergency medications are supplied within the ODEMSA region. While this change required significant planning and administrative action, agencies across Virginia successfully completed the shift without any impact on patient care.

This transition has strengthened medication accountability, improved regulatory compliance, and created a more sustainable approach to supporting EMS operations throughout the region. Agencies are now fully empowered to manage their own medication kits and maintain access to clinical guidance and support from ODEMSA whenever needed.

Acknowledgments

ODEMSA extends sincere appreciation to the Pharmacy Committee, the hospitals and their pharmacy teams, and the hundreds of professionals who supported the Regional Drug Box Program across the many decades it operated. Their partnership and dedication ensured reliable access to essential medications for countless patients throughout the region and laid the foundation for a successful transition into the future of EMS medication management.

Corporate Partners

Strong collaboration with community and industry partners is essential to advancing the delivery of emergency medical services (EMS) across the ODEMSA region. Through generous financial contributions and valuable in-kind support, our partners help strengthen regional programs, expand access to educational opportunities, and improve the resources available to our EMS agencies and providers.

ODEMSA is grateful for the organizations that invest in the health and safety of our communities. Their support enables us to continue delivering training, coordination, and regional system improvement efforts that directly benefit the first responders who serve every day. Each sponsor level recognizes the meaningful impact of these contributions, with Platinum, Gold, Silver, and Bronze tiers reflecting the commitment provided throughout the year.

As we look toward the future, we remain thankful for the continued partnership of these organizations and for their shared dedication to improving emergency medical care throughout the ODEMSA Region.

Anyone wishing to learn more about becoming a corporate partner may contact odemsa@vaems.org or call (804) 560-3300.

Interested organizations may also scan the QR Code below to begin the sponsorship process.



<https://form.jotform.com/OldDomEMSAlliance/odemsa-ally>



Platinum Level



VCU Health™



Gold Level





OLD DOMINION EMS ALLIANCE

SERVING PLANNING DISTRICTS 13, 14, 15, & 19



Financial Report

Fiscal Year

2025

July 1, 2024 – June 30, 2025



Statement of Financial Condition

As of June 30, 2025

Assets

Cash and Cash Equivalents	\$	350,839
Accounts Receivable	\$	180,066
Prepaid Expenses and Other Current Assets	\$	8,088
Total Current Assets		\$ 538,993
Property and Equipment, Net	\$	31,308
Other Assets	\$	3,099
Total Assets		\$ 573,400

Liabilities & Net Assets

Accounts Payable	\$	13,358
Accrued Expenses	\$	66,800
Other Current Liabilities	\$	0
Total Current Liabilities		\$ 80,158

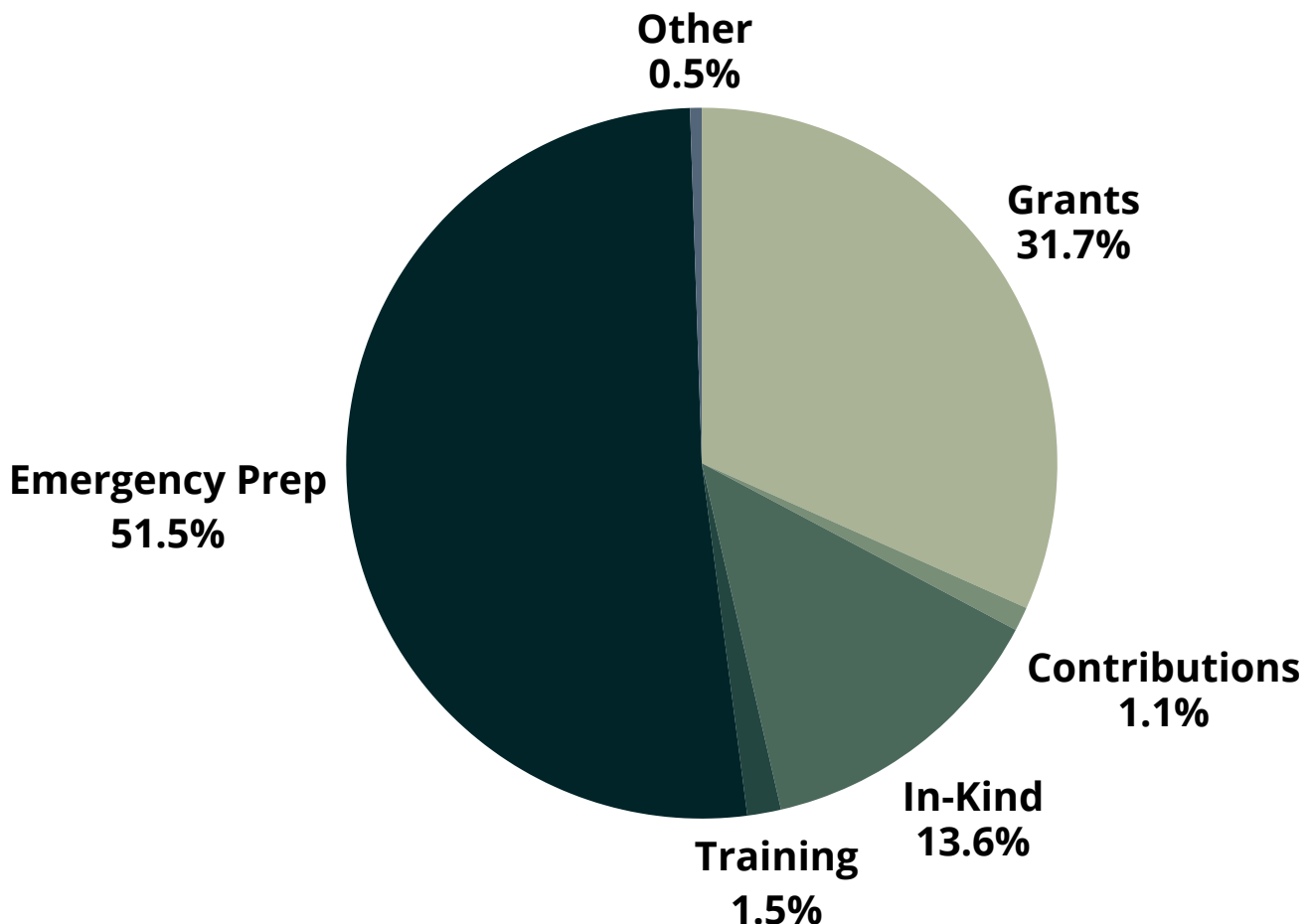
Net Assets

Net assets without donor restrictions	\$	459,812
Net assets with self-imposed restrictions	\$	13,653
Net assets with donor restrictions	\$	19,777
Total Net Assets		\$ 493,242
Total Liabilities & Net Assets		\$ 573,400

Statement of Operating Activities

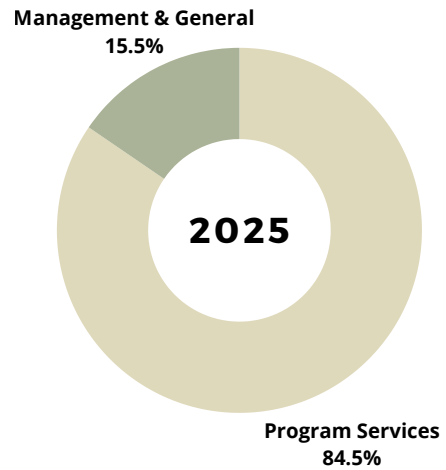
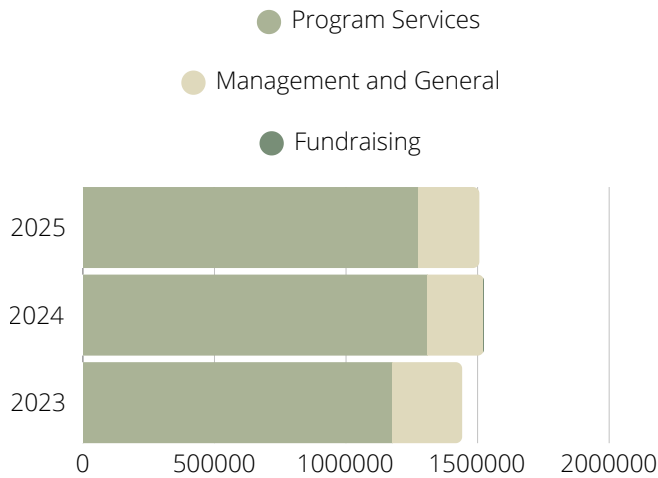
Revenue & Support

	2025	2024
Grants	\$ 483,667	\$ 492,415
Contributions	\$ 16,678	\$ 2,500
In-Kind Contributions	\$ 208,368	\$ 208,404
Training Income	\$ 23,384	\$ 17,655
Emergency Preparedness	\$ 786,530	\$ 794,475
Other Income	\$ 8,072	\$ 5,587
Total Revenue & Support	\$ 1,526,699	\$ 1,521,036



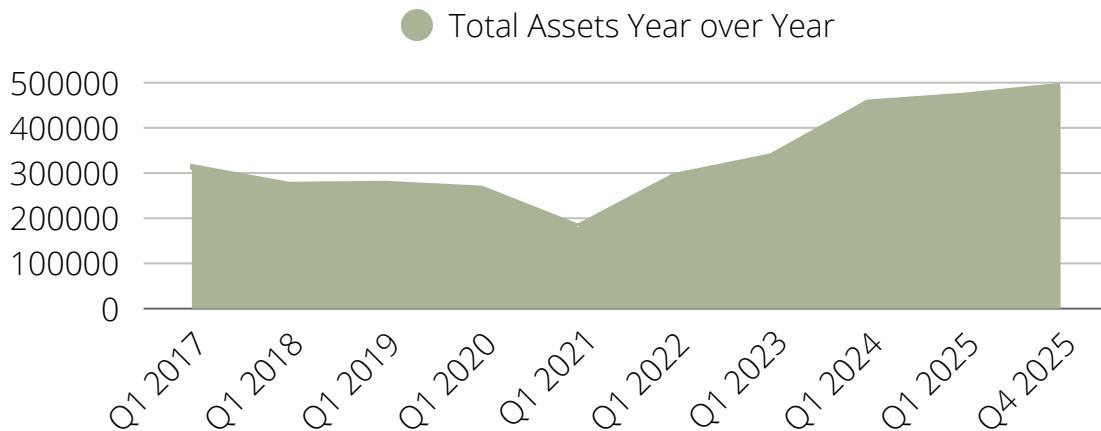
Expenses

	2025	2024
Program Services	\$ 1,272,174	\$ 1,306,478
Management and General	\$ 232,575	\$ 212,268
Fundraising	\$ 0	\$ 3,480
Total Expenses	\$ 1,504,749	\$ 1,522,226



Change in Net Assets

	2025	2024
Net Assets Beginning of Year	\$ 471,292	\$ 472,482
Net Assets End of Year	\$ 493,242	\$ 471,292
Total Change	\$ 21,950	\$ (1,190)





OLD DOMINION EMS ALLIANCE

SERVING PLANNING DISTRICTS 13, 14, 15, & 19



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odemsa@vaems.org

AN INTEGRAL PART OF VIRGINIA'S COMPREHENSIVE
EMS SYSTEM SERVING TO ASSESS, IDENTIFY,
COORDINATE, PLAN AND IMPLEMENT AN EFFECTIVE
AND EFFICIENT REGIONAL EMS SYSTEM.