



County of King William, Virginia

**BOARD OF SUPERVISORS
WORK SESSION MEETING OF MARCH 9, 2020 – 7:00 P.M.
KING WILLIAM COUNTY ADMINISTRATION BUILDING
KING WILLIAM, VIRGINIA**

A G E N D A

- 1. Call to Order**
- 2. Roll Call**
- 3. Review and Adoption of Meeting Agenda**
- 4. Work Session Matters:**
 - a. Fire and EMS – *Laura Nunnally, Interim Chief of Fire and Emergency Services*
 - i. Staffing and Personnel
 - ii. Training
 - iii. Apparatus
 - iv. Budget
 - v. Grants
 - vi. Dispatch Call Mapping
 - vii. Atlantic Broadband
 - b. Resolution for Large Scale Solar Power Stations – *Ron Etter, Director of Community Development*
 - c. Dog Park Project – *Jennifer Leleux, Manager of Parks and Recreation*
 - d. Update on FY21 Budget Activities – *Natasha Joranlien, Director of Financial Services and Bobbie Tassinari, County Administrator*
- 5. Board of Supervisor’s Requests**
- 6. Adjourn or Recess**

AGENDA ITEM 4.a.

Fire & Emergency Medical Services
Board of Supervisors Presentation

03/02/2020

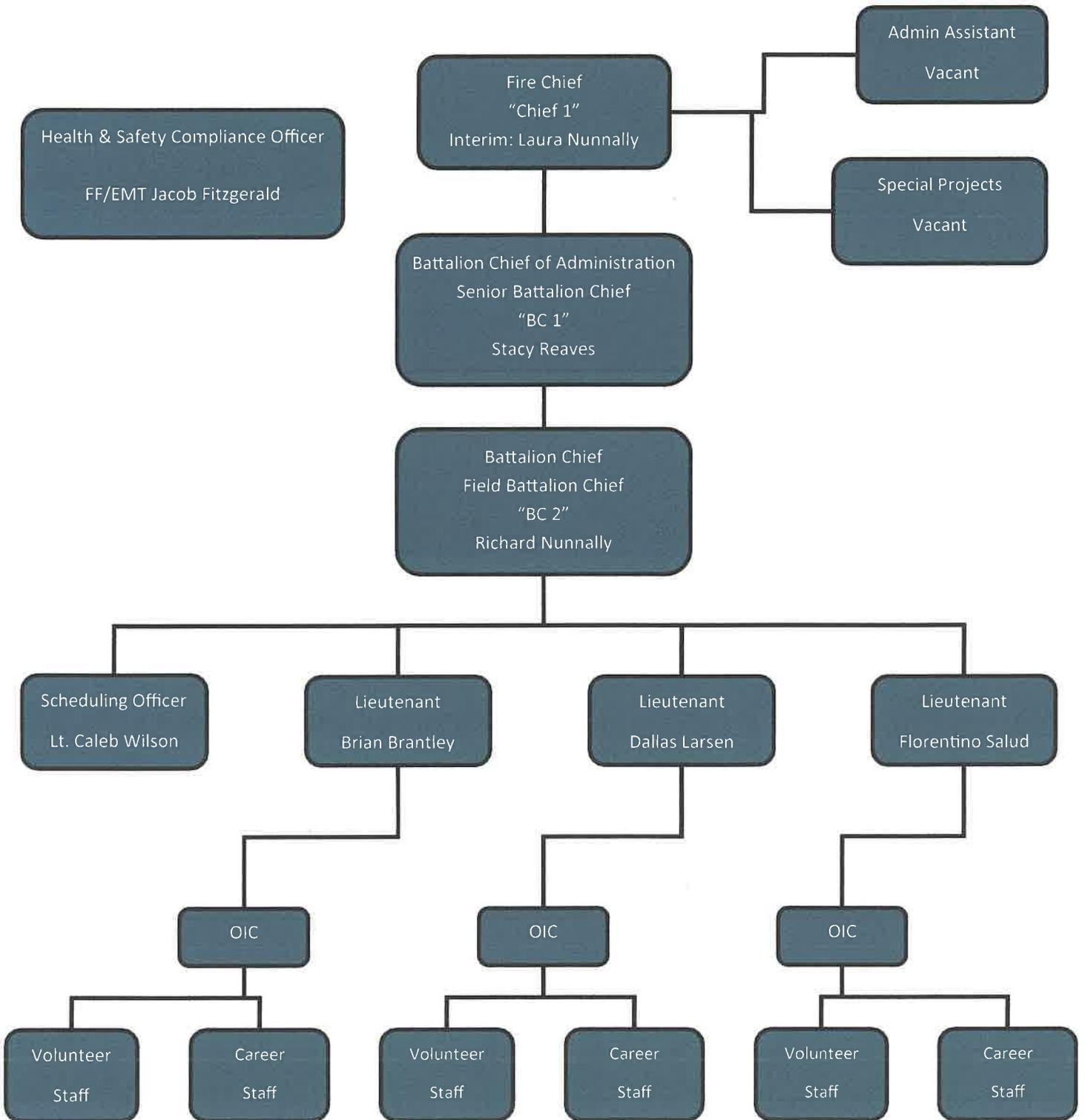


Staffing and Personnel



KING WILLIAM COUNTY FIRE & EMS

Organizational Chart Updated 03/02/2020

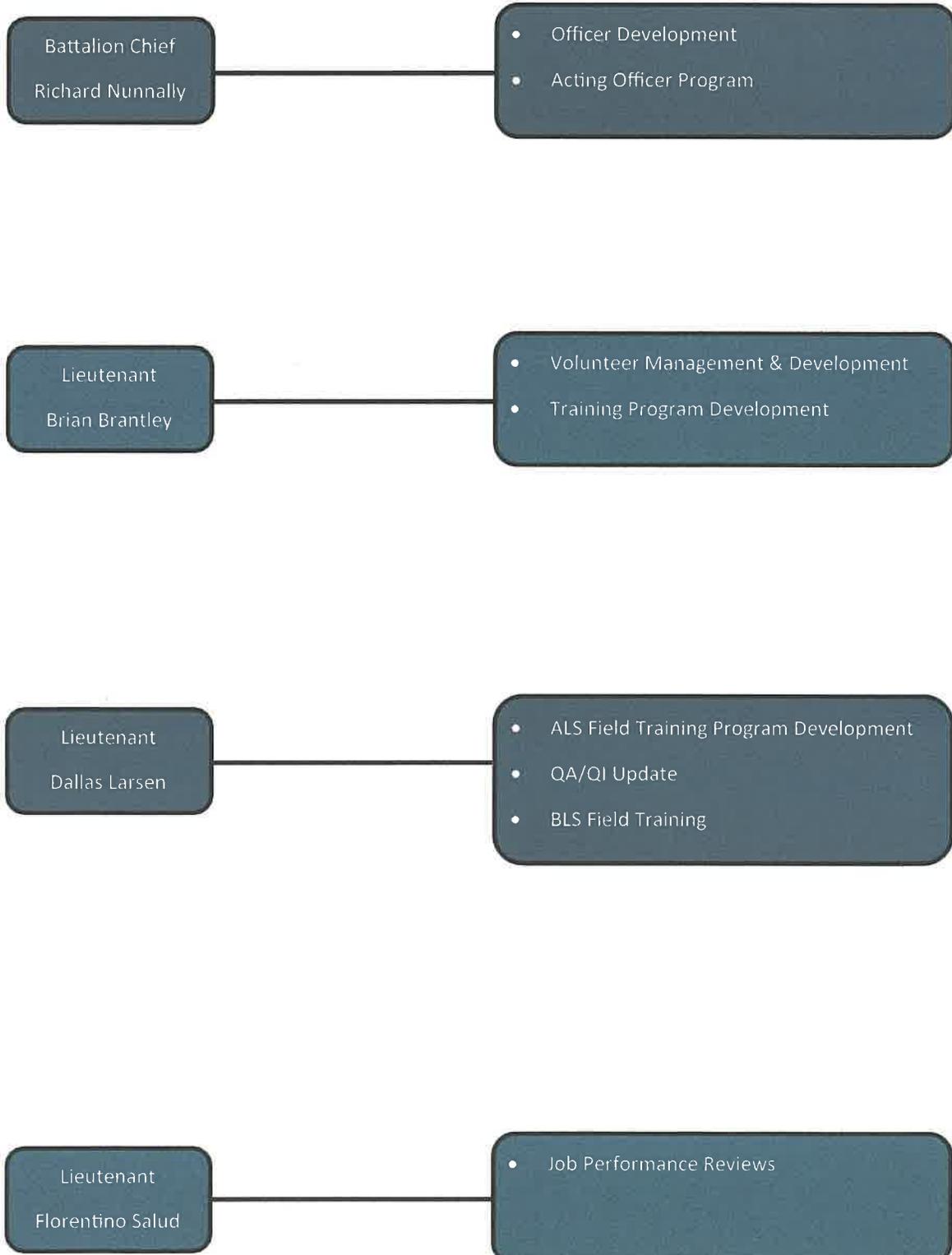




KING WILLIAM COUNTY FIRE & EMS



Officer Projects/Assignments





KING WILLIAM COUNTY FIRE & EMS



Laura Nunnally, Interim Fire Chief

MEMO

DATE: January 8, 2020
TO: King William Fire and EMS
FROM: Laura Nunnally, Interim Fire Chief
RE: Change in Shift Personnel

Effective February 1, 2020 the following personnel will report to the below shifts.

- A- Shift (*Last Day on B Shift January 29, 2020*)
 - Holden Oliff
 - Caleb Boyd

- B-Shift (*Last day on C shift January 31, 2020*)
 - Alex Taylor
 - Devon Hirsh

- C-Shift (*Last Day on A Shift January 30,2020*)
 - Tommy McKeel
 - Courtney Kurtz

This change will remain in place until further notice.

CC: Stacy Reaves, BC-Administration
Rick Nunnally, BC-Operations
Nita McInteer, HR

Addendum: *February 16, 2020 Alex Taylor accepted a full-time job with a different department and maintains part time employment with King William County Fire and EMS.*

John (Clay) Swartz transitioned from a part-time employment to full-time employment to fill the vacancy left by Alex Taylor with King William County Fire and EMS.



**COUNTY OF KING WILLIAM, VIRGINIA
DEPARTMENT OF FIRE & EMERGENCY
MEDICAL SERVICES**

JOB DESCRIPTION

Job Title:	Firefighter/Emergency Medical Technician-Basic (EMT -B)
Position Class:	Public Safety
Pay Grade:	N18
Exempt Status:	Non-Exempt
Salary Range:	\$38,651 – 54,111

GENERAL DESCRIPTION:

The Firefighter/EMT-B performs difficult protective service work providing fire suppression and rescue work, in addition to emergency medical care and transportation of the sick and injured under emergency conditions. The Firefighter/EMT-B is responsible for fire suppression, rescue operations, medical emergencies, disasters, and other emergency incidents; protecting life and property through controlling, extinguishing and preventing fires and provides emergency medical services. In emergency situations the Firefighter/EMT-B will performs hazardous tasks requiring strenuous physical exertion for extended periods of time in cramped surroundings, hot and smoky environments with limited visibility and at considerable heights.

In addition to responding to emergencies, the Firefighter/EMT-B is responsible for regularly maintaining firefighting equipment, apparatus, and quarters. Attends and actively participates in fire prevention, public education, and public relations activities. Conducts oneself in a mature, professional, and courteous manner at all times.

This is a full-time salaried position eligible for all County offered benefits. Work is performed under the command of a senior officer.

KNOWLEDGE, SKILLS, AND ABILITIES:

Knowledge of and ability to provide emergency medical procedures, techniques, drugs, and equipment related to emergency treatment of life-threatening illnesses and injuries as defined by the rules, regulations, and policies set forth by the State Department of Health, Office of Emergency Medical Services, Department Operational Medical Director, and Department of Fire and Rescue Services.

- Ability to maintain certification by the Commonwealth of Virginia as an Emergency Medical Technician- Basic.
- Ability to maintain CPR certification.
- Ability to analyze emergency situations and adopt effective courses of action following accepted practices under emergency conditions.

- Ability to drive and operate fire, rescue, and emergency medical vehicles under emergency conditions.
- Respond to emergency and non-emergency alarm calls to protect lives and property through the prevention and the extinguishments of fires.
- Perform emergency medical care when needed up to level of training.
- Performs extremely strenuous physical fire suppression work while wearing self-contained breathing apparatus (SCBA) and personal protective equipment (PPE), under some of the following conditions; deploy various hose lines and using water appliances; carry, position, climb and work from ladders and other high areas under adverse conditions; remove injured or incapacitated victims from danger and administer medical care as required; use power tools, and other mechanical equipment, to breach doors, walls, roofs, or floors, for various reasons; performs salvage and overhaul operations, operations of excretion equipment and other specialty equipment.
- Performs station equipment responsibilities by completing daily cleaning chores of buildings and grounds, assigned project(s), apparatus checks and other applicable duties as assigned; performs general maintenance work of department facilities.
- Maintains and operates fire and EMS equipment; vehicle system operation and basic maintenance; power tool operation, and basic maintenance.
- Ability to exercise good judgment under stress, flexibility, creativity, and sensitivity in response to changing situations and needs.
- Ability to maintain confidentiality of patient information.
- Ability to work well with others and work as a team member under the supervision of an officer or senior firefighter.
- Ability to effectively deal with the public and establish rapport and interact professionally, sensitively, and patiently with individuals of all ages and abilities.
- Ability to maintain accurate records, both written and computer-generated, and prepare reports.
- Monitors and communicates effectively and coherently over radio channels while initiating and responding to radio communications; exchanges information with Emergency Communication Center Dispatchers and other County Departments.
- Maintains knowledge of new trends and innovations in the fields of fire suppression, emergency medical care, hazardous materials, technical rescue, prevention and education; incorporate new developments as appropriate.
- Performs other special projects and work as assigned by the Fire Chief. Pursue preferred qualifications and career development to enhance knowledge, skills and abilities in relation to responsibilities.
- Ability to read a variety of informational and technical documentation, directions, instructions, and methods and procedures.
- Knowledge of the physical layout of the County including fire hydrants/water source and street locations in the response area of the County's Department of Fire and EMS.
- Ability to achieve and maintain adequate level of fitness to perform essential functions of the job.
- Performs other duties as assigned.
- Must work overtime as required.

MINIMUM EDUCATION, TRAINING AND EXPERIENCE:

- Any combination of education and experience equivalent to graduation of high school supplemented by required firefighting and emergency medical training.
- Must maintain a valid vehicle operator's license and a good driving record.
- Must be certified and maintain following certifications
 - EMT – Basic
 - CPR
 - EVOC S-3
 - ICS 100, 200, 700, 800
 - VDFP Certified Firefighter II
 - Haz Mat Operations
 - Mayday Operations
 - Basic Pump Operations and Rural Water Supply
- Must meet and maintain all departmental requirements for the position.
- General knowledge of the principles and techniques of emergency care, including diagnosis, proper treatment and automobile extrication and transportation.
- Thorough knowledge of the principles of anatomy, physiology and chemistry in relation to the respiratory and circulatory systems.
- Thorough knowledge of elementary physics, chemistry and mechanics as applied to fire suppression.

WORKING CONDITIONS

Significant exposure to undesirable working conditions such as:

- Airborne Particles
- Extreme Cold (Non-weather)
- Extreme Heat (Non-weather)
- Fumes
- High and Precarious Places
- Humidity
- Moving Mechanical Parts
- Outside Weather
- Poor Ventilation
- Risk of Blood Borne/airborne Pathogens
- Risk of Electrical Shock
- Risk of Radiation
- Self-contained Breathing Apparatus
- Toxic or Caustic Chemicals
- Varying Noise Levels
- Vibration
- Wetness
- Work with Explosives
- Working at Night
- Working While Wearing Heavy Equipment

PHYSICAL REQUIREMENTS:

While performing the duties of this job, the employee is frequently required to sit; stand; walk; use hands to finger, handle, or operate objects, tools, or controls; and reach and stretch with hands and arms with a full range of motion. The employee is required to climb or balance; jump; stoop, kneel, crouch, or crawl; talk and taste or smell. May be required to sit or stand for several hours each day but will also need mobility and ability to stand and walk continuously for long periods of time.

The employee must frequently lift and/or move up to 50 pounds and occasionally lift and/or move more than 175 pounds. Specific vision abilities required by this job include close vision, distance vision, color vision, peripheral vision, depth perception and the ability to adjust focus. Specific hearing abilities required by the job include the ability to distinguish faint sounds, distance and direction. Must able to wear and preform in self-contained breathing apparatus (SCBA).

All employees in this position are required to pass an annual physical provided by the County.

EMPLOYEE UTILIZATION IN ADVERSE WEATHER AND EMERGENCY CONDITIONS

All King William County employees are subject to assignment of specific positions and tasks during a "Declared Emergency" as support personnel, by the County Administrator. Once assigned, this would be the same as a regular work assignment and all policies and procedures for duty assignments apply.

**Potential candidates will be required to complete drug testing, driving and background checks.

The foregoing is a general description of job responsibilities and performance expectations and does constitute a contract for employment between the employee and the County of King William, Virginia.



**COUNTY OF KING WILLIAM, VIRGINIA
DEPARTMENT OF FIRE & EMERGENCY
MEDICAL SERVICES**

JOB DESCRIPTION

Job Title:	Firefighter/Emergency Medical Technician-Intermediate (EMT-I)
Position Class:	Public Safety
Pay Grade:	N19
Exempt Status:	Non-Exempt
Salary Range:	\$41,003 – 57,404

GENERAL DESCRIPTION:

The Firefighter/EMT-I performs difficult protective service work providing fire suppression and rescue work, in addition to emergency medical care and transportation of the sick and injured under emergency conditions. The Firefighter/EMT-I is responsible for fire suppression, rescue operations, medical emergencies, disasters, and other emergency incidents; protecting life and property through controlling, extinguishing and preventing fires and provides emergency medical services. In emergency situations the Firefighter/EMT-I will perform hazardous tasks requiring strenuous physical exertion for extended periods of time in cramped surroundings, hot and smoky environments with limited visibility and at considerable heights.

In addition to responding to emergencies, the Firefighter/EMT-I is responsible for regularly maintaining firefighting equipment, apparatus, and quarters. Attends and actively participates in fire prevention, public education, and public relations activities. Conducts oneself in a mature, professional, and courteous manner at all times.

This is a full-time salaried position eligible for all County offered benefits. Work is performed under the command of a senior officer.

KNOWLEDGE, SKILLS, AND ABILITIES:

Knowledge of and ability to provide emergency medical procedures, techniques, drugs, and equipment related to emergency treatment of life-threatening illnesses and injuries as defined by the rules, regulations, and policies set forth by the State Department of Health, Office of Emergency Medical Services, Department Operational Medical Director, and Department of Fire and Rescue Services.

- Ability to maintain certification by the Commonwealth of Virginia as an Emergency Medical Technician- Basic.
- Ability to maintain CPR certification.

- Ability to analyze emergency situations and adopt effective courses of action following accepted practices under emergency conditions.
- Advanced Life Support pre-hospital emergency medical care techniques, principles, and practices.
- Basic human anatomy and physiology, understands medical terminology, techniques and analytical processes used in the description and assessment of patient status.
- Categories, indications and contraindications, and appropriate dosage levels of medications.
- Procedures and equipment used in monitoring patient vital signs, symptoms of impaired cardiac and respiratory functioning, altered states of consciousness, various types of toxicity, and poisoning, shock, and common diseases.
- Determine appropriate BLS and ALS procedures.
- Make paramedical decisions rapidly, under stressful conditions.
- Perform BLS and ALS life support, including CPR, cardiac monitoring, and
- defibrillation.
- Administer medications via appropriate route per protocol.
- Ability to drive and operate fire, rescue, and emergency medical vehicles under emergency conditions.
- Respond to emergency and non-emergency alarm calls to protect lives and property through the prevention and the extinguishments of fires.
- Perform emergency medical care when needed up to level of training.
- Performs extremely strenuous physical fire suppression work while wearing self-contained breathing apparatus (SCBA) and personal protective equipment (PPE), under some of the following conditions; deploy various hose lines and using water appliances; carry, position, climb and work from ladders and other high areas under adverse conditions; remove injured or incapacitated victims from danger and administer medical care as required; use power tools, and other mechanical equipment, to breach doors, walls, roofs, or floors, for various reasons; performs salvage and overhaul operations, operations of excretion equipment and other specialty equipment.
- Performs station equipment responsibilities by completing daily cleaning chores of buildings and grounds, assigned project(s), apparatus checks and other applicable duties as assigned; performs general maintenance work of department facilities.
- Maintains and operates fire and EMS equipment; vehicle system operation and basic maintenance; power tool operation, and basic maintenance.
- Ability to exercise good judgment under stress, flexibility, creativity, and sensitivity in response to changing situations and needs.
- Ability to maintain confidentiality of patient information.
- Ability to work well with others and work as a team member under the supervision of an officer or senior firefighter.
- Ability to effectively deal with the public and establish rapport and interact professionally, sensitively, and patiently with individuals of all ages and abilities.
- Ability to maintain accurate records, both written and computer-generated, and prepare reports.
- Monitors and communicates effectively and coherently over radio channels while initiating and responding to radio communications; exchanges information with Emergency Communication Center Dispatchers and other County Departments.
- Maintains knowledge of new trends and innovations in the fields of fire suppression, emergency medical care, hazardous materials, technical rescue, prevention and education; incorporate new developments as appropriate.

- Performs other special projects and work as assigned by the Fire Chief. Pursue preferred qualifications and career development to enhance knowledge, skills and abilities in relation to responsibilities.
- Ability to read a variety of informational and technical documentation, directions, instructions, and methods and procedures.
- Knowledge of the physical layout of the County including fire hydrants/water source and street locations in the response area of the County's Department of Fire and EMS.
- Ability to achieve and maintain adequate level of fitness to perform essential functions of the job.
- Performs other duties as assigned.
- Must work overtime as required.

MINIMUM EDUCATION, TRAINING AND EXPERIENCE:

- Any combination of education and experience equivalent to graduation of high school supplemented by required firefighting and emergency medical training.
- Must maintain a valid vehicle operator's license and a good driving record.
- Must be certified and maintain following certifications
 - EMT – Intermediate
 - CPR
 - EVOC S-3
 - ICS 100, 200, 700, 800
 - VDFP Certified Firefighter II
 - Haz Mat Operations
 - Mayday Operations
 - Basic Pump Operations and Rural Water Supply
- Must meet and maintain all departmental requirements for the position.
- General knowledge of the principles and techniques of emergency care, including diagnosis, proper treatment and automobile extrication and transportation.
- Thorough knowledge of the principles of anatomy, physiology and chemistry in relation to the respiratory and circulatory systems.
- Thorough knowledge of elementary physics, chemistry and mechanics as applied to fire suppression.

WORKING CONDITIONS

Significant exposure to undesirable working conditions such as:

- Airborne Particles
- Extreme Cold (Non-weather)
- Extreme Heat (Non-weather)
- Fumes
- High and Precarious Places
- Humidity
- Moving Mechanical Parts
- Outside Weather

- Poor Ventilation
- Risk of Blood Borne/airborne Pathogens
- Risk of Electrical Shock
- Risk of Radiation
- Self-contained Breathing Apparatus
- Toxic or Caustic Chemicals
- Varying Noise Levels
- Vibration
- Wetness
- Work with Explosives
- Working at Night
- Working While Wearing Heavy Equipment

PHYSICAL REQUIREMENTS:

While performing the duties of this job, the employee is frequently required to sit; stand; walk; use hands to finger, handle, or operate objects, tools, or controls; and reach and stretch with hands and arms with a full range of motion. The employee is required to climb or balance; jump; stoop, kneel, crouch, or crawl; talk and taste or smell. May be required to sit or stand for several hours each day but will also need mobility and ability to stand and walk continuously for long periods of time.

The employee must frequently lift and/or move up to 50 pounds and occasionally lift and/or move more than 175 pounds. Specific vision abilities required by this job include close vision, distance vision, color vision, peripheral vision, depth perception and the ability to adjust focus. Specific hearing abilities required by the job include the ability to distinguish faint sounds, distance and direction. Must able to wear and preform in self-contained breathing apparatus (SCBA).

All employees in this position are required to pass an annual physical provided by the County.

EMPLOYEE UTILIZATION IN ADVERSE WEATHER AND EMERGENCY CONDITIONS

All King William County employees are subject to assignment of specific positions and tasks during a "Declared Emergency" as support personnel, by the County Administrator. Once assigned, this would be the same as a regular work assignment and all policies and procedures for duty assignments apply.

**Potential candidates will be required to complete drug testing, driving and background checks.

The foregoing is a general description of job responsibilities and performance expectations and does constitute a contract for employment between the employee and the County of King William, Virginia.



**COUNTY OF KING WILLIAM, VIRGINIA
DEPARTMENT OF FIRE & EMERGENCY
MEDICAL SERVICES**

JOB DESCRIPTION

Job Title:	Firefighter/Paramedic (Medic)
Position Class:	Public Safety
Pay Grade:	N20
Exempt Status:	Non-Exempt
Salary Range:	\$42,582 - \$59,615

GENERAL DESCRIPTION:

The Firefighter/Medic performs difficult protective service work providing fire suppression and rescue work, in addition to emergency medical care and transportation of the sick and injured under emergency conditions. The Firefighter/Medic is responsible for fire suppression, rescue operations, medical emergencies, disasters, and other emergency incidents; protecting life and property through controlling, extinguishing and preventing fires and provides emergency medical services. In emergency situations the Firefighter/Medic will perform hazardous tasks requiring strenuous physical exertion for extended periods of time in cramped surroundings, hot and smoky environments with limited visibility and at considerable heights.

In addition to responding to emergencies, the Firefighter/Medic is responsible for regularly maintaining firefighting equipment, apparatus, and quarters. Attends and actively participates in fire prevention, public education, and public relations activities. Conducts oneself in a mature, professional, and courteous manner at all times.

This is a full-time salaried position eligible for all County offered benefits. Work is performed under the command of a senior officer.

KNOWLEDGE, SKILLS, AND ABILITIES:

Knowledge of and ability to provide emergency medical procedures, techniques, drugs, and equipment related to emergency treatment of life-threatening illnesses and injuries as defined by the rules, regulations, and policies set forth by the State Department of Health, Office of Emergency Medical Services, Department Operational Medical Director, and Department of Fire and Rescue Services.

- Ability to maintain certification by the Nation Registry of Emergency Medical Technician Paramedic.
- Ability to maintain CPR certification.
- Ability to analyze emergency situations and adopt effective courses of action following accepted practices under emergency conditions.

- Advanced Life Support pre-hospital emergency medical care techniques, principles, and practices.
- Basic human anatomy and physiology, understands medical terminology, techniques and analytical processes used in the description and assessment of patient status.
- Categories, indications and contraindications, and appropriate dosage levels of medications.
- Procedures and equipment used in monitoring patient vital signs, symptoms of impaired cardiac and respiratory functioning, altered states of consciousness, various types of toxicity, and poisoning, shock, and common diseases.
- Determine appropriate BLS and ALS procedures.
- Make paramedical decisions rapidly, under stressful conditions.
- Perform BLS and ALS life support, including CPR, cardiac monitoring, and
- defibrillation.
- Administer medications via appropriate route per protocol.
- Monitor and maintain patient airway to include endotracheal intubation, and
- needle cricothyrotomy.
- Ability to drive and operate fire, rescue, and emergency medical vehicles under emergency conditions.
- Respond to emergency and non-emergency alarm calls to protect lives and property through the prevention and the extinguishments of fires.
- Perform emergency medical care when needed up to level of training.
- Performs extremely strenuous physical fire suppression work while wearing self-contained breathing apparatus (SCBA) and personal protective equipment (PPE), under some of the following conditions; deploy various hose lines and using water appliances; carry, position, climb and work from ladders and other high areas under adverse conditions; remove injured or incapacitated victims from danger and administer medical care as required; use power tools, and other mechanical equipment, to breach doors, walls, roofs, or floors, for various reasons; performs salvage and overhaul operations, operations of excretion equipment and other specialty equipment.
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- Ability to maintain confidentiality of patient information.
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- Performs other duties as assigned.
- Must work overtime as required.

MINIMUM EDUCATION, TRAINING AND EXPERIENCE:

- Any combination of education and experience equivalent to graduation of high school supplemented by required firefighting and emergency medical training.
- Must maintain a valid vehicle operator's license and a good driving record.
- Must be certified and maintain following certifications
 - NREMT –Paramedic
 - CPR
 - EVOCS-3
 - ICS 100, 200, 700, 800
 - VDFP Certified Firefighter II
 - Haz Mat Operations
 - Mayday Operations
 - Basic Pump Operations and Rural Water Supply
- Must meet and maintain all departmental requirements for the position.
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- Moving Mechanical Parts
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- Poor Ventilation

- Risk of Blood Borne/airborne Pathogens
- Risk of Electrical Shock
- Risk of Radiation
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- Toxic or Caustic Chemicals
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- Vibration
- Wetness
- Work with Explosives
- Working at Night
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HALF YEAR TOTAL

DESCRIPTION

FIRE & EMS

SALARIES & WAGES REGULAR

WAGES-PART TIME

TOTAL

APPR. AMOUNT	CURRENT AMOUNT	Y-T-D AMOUNT	UNENCUMBERED BALANCE
\$ 235,594.00	\$ 39,036.46	\$ 250,730.01	\$ (15,136.01)
\$ 165,984.00	\$ 41,075.00	\$ 280,258.18	\$ (114,274.18)
\$ 401,578.00	\$ 80,111.46	\$ 530,988.19	\$ (129,410.19)

FULL TIME	
Jul-19	\$ 25,466.27
Aug-19	\$ 25,466.27
Sep-19	\$ 25,466.27
Oct-19	\$ 24,680.89
Nov-19	\$ 24,641.69
Dec-19	\$ 21,553.61
Jan-20	\$ 27,716.48
Feb-20	\$ 29,454.89
TOTAL OVERTIME PAID IN FY20 \$ 204,446.37	

\$ 25,555.80 Average FT/ Month

OVERTIME	
Jul-19	\$ -
Aug-19	\$ 8,103.58
Sep-19	\$ 2,816.22
Oct-19	\$ 3,620.47
Nov-19	\$ 4,924.24
Dec-19	\$ 11,181.71
Jan-20	\$ 6,055.85
Feb-20	\$ 9,581.57
TOTAL OVERTIME PAID IN FY20 \$ 46,283.64	

\$ 5,785.46 Average OT/ Month

PART TIME	
Jul-19	\$ 27,008.00
Adjustment for Accrued Wages	\$ (12,756.82)
Aug-19	\$ 36,473.00
Sep-19	\$ 33,175.50
Oct-19	\$ 37,918.00
Nov-19	\$ 39,539.00
Dec-19	\$ 41,414.00
Jan-20	\$ 36,422.50
Feb-20	\$ 41,075.00
TOTAL PART TIME PAID IN FY20 \$ 280,268.18	

\$ 35,033.52 Average PT/Month

KING WILLIAM C O U N T Y F I R E & E M S

New Hire Orientation Packet



Version 1.0

Updated 01/21/2020



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Purpose & Foreword:

Welcome to the King William Fire & Emergency Medical Services Department. You are about to become part of a proud history of service to the community that dates back to 1963.

The New Hire Orientation Packet will provide you with the basic information for a successful onboarding with the department. It is imperative that you fill all required forms in their entirety and to the best of your knowledge; as well as submit any required certifications to the Fire & EMS Administration Division.

If you require any assistance in filling out this orientation packet, please contact the Fire & EMS Administration office at 804-769-4964.

Please refer all operational orientation issues through the Chain of Command.

Note from the Fire Chief:

On behalf of the County of King William and the entire staff of the department, I would like to welcome you to the King William County Fire & Emergency Medical Services Department. The King William Fire & Emergency Medical Services Department is comprised of dedicated, community serving professionals, who are proud to serve the community of King William County.

The department is staffed with paid and volunteer professional firefighters, who are trained to provide Fire and EMS services. The professionals of the King William Fire & Emergency Medical Services Department work diligently to achieve the highest levels of preparedness, prevention, and skill level while providing quality customer service, community involvement and education. As a department we understand that it is the responsibility of all our members to serve the community of King William County and ensure that each of our department members go home safely.

Laura Nunnally
Interim Fire Chief



New Hire Orientation Packet
Version 1.0
Updated 01/06/2020



Contact information & important codes:

Position	Name	Email	Phone Number
Fire Chief (interim)	Laura Nunnally	Lnunnally@kingwilliamcounty.us	N/A
Battalion Chief of Administration	Stacy Reaves	Sreaves@kingwilliamcounty.us	N/A
Battalion Chief of Operations	Richard Nunnally	rnnally@kingwilliamcounty.us	N/A
Special Projects Analyst/ Health & Safety Officer	Jacob Fitzgerald	jfitzgerald@kingwilliamcounty.us	O: 804-769-4960 C: 804-592-8221
Scheduling Officer	Lt. Caleb Wilson	cwilson@kingwilliamcountny.us	N/A
Admin Assistant	Vacant		
Ops. Lieutenant	John Heller	jheller@kingwilliamcounty.us	804-248-8811
Ops. Lieutenant	Vacant		
Ops. Lieutenant	Vacant		
Human Resources/Payroll	Juanita McInteer	jmcinteer@kingwilliamcounty.us	804-769-4968

Location	Code
Company 1 Door	4252
Drug Box Locks	1119
Engine Drug Box Lock	1119



Employee Name: _____ Employee #: _____



Employee Information Form

Name: _____ DOB: __/__/__

Social Security Number: ___-___-___ Sex: _____

Cell: (___) ___-___ Home: (___) ___-___ Work: (___) ___-___

Physical Address: _____

Mailing Address: _____

Emergency Contact #1

Name: _____ Relation: _____

Address: _____

Day Phone: (___) ___-___ Night Phone: (___) ___-___

Emergency Contact #2

Name: _____ Relation: _____

Address: _____

Day Phone: (___) ___-___ Night Phone: (___) ___-___



KING WILLIAM C O U N T Y

Citizen Alert System

The KW Citizen Alert System is an Emergency Notification system that King William County uses to send certain notifications to employees such as:

- Delayed office opening
- Office Closure
- Emergency Operations Center (EOC) activation
- Immediate threats

The system is also utilized to notify Citizens in the Event of an Emergency – if you wish to sign up for the CITIZEN side please visit: <https://member.everbridge.net/index/892807736728250#/login> and create an account.

Employee Notifications will be sent via text, phone call or email – Based on how you choose to receive Alerts. An alert will be sent to all methods of contact provided.

The information requested below will be entered into the King William County Citizen Alert system. It will stay private and will not be shared with outside companies or individuals. Should **ANY** of your contact information change, please submit an updated form with the New Information.

Please print

Name:	
Department:	
Position:	
Job type:	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time
Home phone:	
Primary Cell phone:	<input type="checkbox"/> Text <input type="checkbox"/> Phone Call <input type="checkbox"/> Both Provider:
Secondary Cell Phone:	<input type="checkbox"/> Text <input type="checkbox"/> Phone Call <input type="checkbox"/> Both Provider:
Primary Email:	
Secondary Email:	

For questions or concerns, please contact
Jacob Fitzgerald
Special Projects Analyst/Health & Safety Officer
jfitzgerald@kingwilliamcounty.us
804-769-4960



KING WILLIAM COUNTY
DIRECT DEPOSIT AUTHORIZATION FORM

I hereby authorize King William County to initiate credit entries to the account(s) listed below, and the depository(ies) to credit the same to such account(s). I also authorize King William County to draw drafts on my account(s), *but solely in order to adjust an error* resulting from a deposit or credit that has been made under this authorization *in an amount that is not correct*. The depository shall not be held liable for honoring any draft, debit entry or withdrawal initiated by King William County. **I agree to provide written notification to King William County within 5 days of any change to this information so that my pay may be properly disbursed.**

PRINTED NAME

SIGNATURE

DEPARTMENT

DATE

.....

1. BANK NAME _____ CHECKING _____
SAVINGS _____
BANK ADDRESS _____
FIXED AMOUNT \$ _____
TRANSIT ROUTING NO. _____ PERCENTAGE _____ %
ACCOUNT NO. _____ REMAINING AMOUNT _____

.....

2. BANK NAME _____ CHECKING _____
SAVINGS _____
BANK ADDRESS _____
FIXED AMOUNT \$ _____
TRANSIT ROUTING NO. _____ PERCENTAGE _____ %
ACCOUNT NO. _____ REMAINING AMOUNT _____

.....

3. BANK NAME _____ CHECKING _____
SAVINGS _____
BANK ADDRESS _____
FIXED AMOUNT \$ _____
TRANSIT ROUTING NO. _____ PERCENTAGE _____ %
ACCOUNT NO. _____ REMAINING AMOUNT _____

.....

ATTACH A CHECK FOR EACH ACCOUNT LISTED ABOVE.

FINANCE DEPARTMENT USE ONLY:			
PRENOTE ENTERED:	23 CHECKING ___	UPDATED:	22 CHECKING ___
_____	33 SAVINGS ___	_____	32 SAVINGS ___



Employee e-Pay

E-Pay stub is a secure way for an employee to view and/or print their earnings and/or W2's via the Internet from their office or home. You will first need to go to the web site and set up your PIN number. The following information is what you will need to type in to register.

- Use the web address: https://e-services.kingwilliamcounty.us/bai_software/bai_admin/login.aspx
- The username and password on this first screen are both **epay01**
- On the navigation menu, click the drop down box for either "check processing" for your pay stub or "W2's" for your W2.
- Click the bottom left "EPay Stubs" under Options
- On the next screen, midway down, locate where it says, "To create PIN or access PIN options, click here". Click there!
- Click "Create New PIN"
- Enter requested information and submit. You will receive an email confirming your information.
- Click the "Return to Processing" and enter your Last Name, Birth Date, and PIN you just created. *Note - the epay information defaults into the birth date and PIN fields. Delete that and enter your information as requested.
- Submit.
- You should see your most recent paystub or W2 on the screen!

If you forget your PIN, the "Forgot PIN" link does not work. It does not send you an email to reset it. You will need to call the payroll person to have it reset.

INFORMATION REQUEST

CRD 93 (05/25/2016)

Purpose: Use this form to request information from DMV records.

Instructions: Type or print clearly.

REQUESTER INFORMATION			
REQUESTER FULL NAME (last, first, mi, suffix) King William County		FEDERAL TAX ID OR SOCIAL SECURITY NUMBER* 54-6001376	
ORGANIZATIONAL AFFILIATION (if any) Employer	TELEPHONE NUMBER 804-769-4919	USE AGREEMENT NUMBER (if applicable)	
STREET ADDRESS 180 Horse Landing Rd, P.O. Box 215		CITY King William	
STATE VA	ZIP CODE 23086	ACCESS CODE (if applicable)	TNC CERTIFICATE NUMBER (if applicable)
REASON FOR REQUEST (be specific) (attach additional sheets if necessary) Check of driving record to authorize employee to operate county owned vehicles and apparatus.			

SUBJECT INFORMATION			
If you are requesting driving record information, the subject will be the person you are requesting information on. If you are requesting vehicle information, the subject will be the vehicle owner (if available).			
SUBJECT FULL NAME (last, first, mi, suffix)		<input type="checkbox"/> CHECK TO INDICATE SUBJECT NAME AND ADDRESS IS THE SAME AS THE REQUESTER ABOVE.	
STREET ADDRESS			
CITY		STATE	ZIP CODE

INFORMATION REQUESTED	
Check one or more boxes below to indicate the type of information you wish to receive. All data fields must be completed for Driving Record Information, Vehicle Information and Decedent Photo Requests. For Police Crash Reports provide as much information as possible.	

<input checked="" type="checkbox"/> DRIVING RECORD INFORMATION (Includes license history and conviction data) (complete SUBJECT INFORMATION above)		
SUBJECT DRIVER LICENSE NUMBER	OR	SUBJECT BIRTH DATE (mm/dd/yyyy)
REASON FOR REQUEST (check one) <input type="checkbox"/> Insurance <input type="checkbox"/> Employment, School, or Military <input type="checkbox"/> Member/Applicant/Volunteer <input type="checkbox"/> Personal Use, Court, or Attorney <input type="checkbox"/> TNC		
An authorization from the subject is required for employers and others not authorized by Virginia code. I authorize the Department of Motor Vehicles to furnish, for this one time only, information pertaining to my driving record to the requester identified above.		
SUBJECT SIGNATURE		DATE (mm/dd/yyyy)

<input type="checkbox"/> VEHICLE INFORMATION (Includes vehicle description and registration data) (complete SUBJECT INFORMATION above)		
VEHICLE IDENTIFICATION NUMBER (VIN)	VEHICLE MAKE	VEHICLE YEAR

<input type="checkbox"/> POLICE CRASH REPORT		
IMPORTANT NOTE: The Department may only release a full crash report in accordance with VA Code § 46.2-380.		
Check one or more boxes to indicate your involvement in the crash:		
<input type="checkbox"/> I was a DRIVER.	<input type="checkbox"/> I was a PASSENGER.	
<input type="checkbox"/> I legally REPRESENT a person injured or involved in the crash.	<input type="checkbox"/> I was injured in the crash or as a result thereof (ex: injured pedestrian).	
<input type="checkbox"/> I am the parent or legal guardian of a minor injured or killed in the crash.	<input type="checkbox"/> I am the owner of a vehicle/property involved in the crash.	
<input type="checkbox"/> I am the personal representative (guardian, executor, next of kin, etc.) of a person injured or killed in the crash.		
<input type="checkbox"/> I am an authorized representative of any insurance carrier reasonably anticipating exposure to civil liability as a consequence of the crash or to which a person has applied for issuance or renewal of a policy of automobile insurance.		
CRASH DATE (mm/dd/yyyy)	TIME OF CRASH	CRASH LOCATION (highway or street name)
CITY/COUNTY/TOWN WHERE CRASH OCCURRED		DRIVER FULL NAME (last, first, mi, suffix)
		DRIVER LICENSE NUMBER
1. PASSENGER/PEDESTRIAN FULL NAME (last, first, mi, suffix)		2. PASSENGER/PEDESTRIAN FULL NAME (last, first, mi, suffix)
3. PASSENGER/PEDESTRIAN FULL NAME (last, first, mi, suffix)		4. PASSENGER/PEDESTRIAN FULL NAME (last, first, mi, suffix)

Employee's Withholding Certificate

▶ Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay.
 ▶ Give Form W-4 to your employer.
 ▶ Your withholding is subject to review by the IRS.

2020

Step 1: Enter Personal Information	(a) First name and middle initial	Last name	(b) Social security number
	Address		▶ Does your name match the name on your social security card? If not, to ensure you get credit for your earnings, contact SSA at 800-772-1213 or go to www.ssa.gov .
	City or town, state, and ZIP code		
	(c) <input type="checkbox"/> Single or Married filing separately <input type="checkbox"/> Married filing jointly (or Qualifying widow(er)) <input type="checkbox"/> Head of household (Check only if you're unmarried and pay more than half the costs of keeping up a home for yourself and a qualifying individual.)		

Complete Steps 2–4 ONLY if they apply to you; otherwise, skip to Step 5. See page 2 for more information on each step, who can claim exemption from withholding, when to use the online estimator, and privacy.

Step 2: Complete this step if you (1) hold more than one job at a time, or (2) are married filing jointly and your spouse also works. The correct amount of withholding depends on income earned from all of these jobs.

Multiple Jobs or Spouse Works Do **only one** of the following.

(a) Use the estimator at www.irs.gov/W4App for most accurate withholding for this step (and Steps 3–4); or

(b) Use the Multiple Jobs Worksheet on page 3 and enter the result in Step 4(c) below for roughly accurate withholding; or

(c) If there are only two jobs total, you may check this box. Do the same on Form W-4 for the other job. This option is accurate for jobs with similar pay; otherwise, more tax than necessary may be withheld.

TIP: To be accurate, submit a 2020 Form W-4 for all other jobs. If you (or your spouse) have self-employment income, including as an independent contractor, use the estimator.

Complete Steps 3–4(b) on Form W-4 for only ONE of these jobs. Leave those steps blank for the other jobs. (Your withholding will be most accurate if you complete Steps 3–4(b) on the Form W-4 for the highest paying job.)

Step 3: Claim Dependents	If your income will be \$200,000 or less (\$400,000 or less if married filing jointly): Multiply the number of qualifying children under age 17 by \$2,000 ▶ \$ _____ Multiply the number of other dependents by \$500 ▶ \$ _____ Add the amounts above and enter the total here	3	\$
Step 4 (optional): Other Adjustments	(a) Other income (not from jobs). If you want tax withheld for other income you expect this year that won't have withholding, enter the amount of other income here. This may include interest, dividends, and retirement income	4(a)	\$
	(b) Deductions. If you expect to claim deductions other than the standard deduction and want to reduce your withholding, use the Deductions Worksheet on page 3 and enter the result here	4(b)	\$
	(c) Extra withholding. Enter any additional tax you want withheld each pay period	4(c)	\$

Step 5: Under penalties of perjury, I declare that this certificate, to the best of my knowledge and belief, is true, correct, and complete.

Sign Here

▶ _____ ▶ _____
 Employee's signature (This form is not valid unless you sign it.) Date

Employers Only	Employer's name and address	First date of employment	Employer identification number (EIN)
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Employment Eligibility Verification
Department of Homeland Security
 U.S. Citizenship and Immigration Services

USCIS
Form I-9
 OMB No. 1615-0047
 Expires 03/31/2016

▶ **START HERE.** Read instructions carefully before completing this form. The instructions must be available during completion of this form.
ANTI-DISCRIMINATION NOTICE: It is illegal to discriminate against work-authorized individuals. Employers **CANNOT** specify which document(s) they will accept from an employee. The refusal to hire an individual because the documentation presented has a future expiration date may also constitute illegal discrimination.

Section 1. Employee Information and Attestation *(Employees must complete and sign Section 1 of Form I-9 no later than the first day of employment, but not before accepting a job offer.)*

Last Name (Family Name)		First Name (Given Name)		Middle Initial	Other Names Used (if any)	
Address (Street Number and Name)			Apt. Number	City or Town		State
Zip Code			Date of Birth (mm/dd/yyyy)		U.S. Social Security Number	
E-mail Address		Telephone Number				

I am aware that federal law provides for imprisonment and/or fines for false statements or use of false documents in connection with the completion of this form.

I attest, under penalty of perjury, that I am (check one of the following):

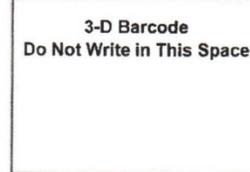
- A citizen of the United States
- A noncitizen national of the United States *(See instructions)*
- A lawful permanent resident (Alien Registration Number/USCIS Number): _____
- An alien authorized to work until (expiration date, if applicable, mm/dd/yyyy) _____. Some aliens may write "N/A" in this field. *(See instructions)*

For aliens authorized to work, provide your Alien Registration Number/USCIS Number OR Form I-94 Admission Number:

1. Alien Registration Number/USCIS Number: _____

OR

2. Form I-94 Admission Number: _____



If you obtained your admission number from CBP in connection with your arrival in the United States, include the following:

Foreign Passport Number: _____

Country of Issuance: _____

Some aliens may write "N/A" on the Foreign Passport Number and Country of Issuance fields. *(See instructions)*

Signature of Employee:	Date (mm/dd/yyyy):
------------------------	--------------------

Preparer and/or Translator Certification *(To be completed and signed if Section 1 is prepared by a person other than the employee.)*

I attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.

Signature of Preparer or Translator:		Date (mm/dd/yyyy):	
Last Name (Family Name)		First Name (Given Name)	
Address (Street Number and Name)		City or Town	State
		Zip Code	



Employer Completes Next Page



Section 2. Employer or Authorized Representative Review and Verification

(Employers or their authorized representative must complete and sign Section 2 within 3 business days of the employee's first day of employment. You must physically examine one document from List A OR examine a combination of one document from List B and one document from List C as listed on the "Lists of Acceptable Documents" on the next page of this form. For each document you review, record the following information: document title, issuing authority, document number, and expiration date, if any.)

Employee Last Name, First Name and Middle Initial from Section 1:

List A Identity and Employment Authorization	OR	List B Identity	AND	List C Employment Authorization
Document Title:		Document Title:		Document Title:
Issuing Authority:		Issuing Authority:		Issuing Authority:
Document Number:		Document Number:		Document Number:
Expiration Date (if any)(mm/dd/yyyy):		Expiration Date (if any)(mm/dd/yyyy):		Expiration Date (if any)(mm/dd/yyyy):
Document Title:				
Issuing Authority:				
Document Number:				
Expiration Date (if any)(mm/dd/yyyy):				
Document Title:				
Issuing Authority:				
Document Number:				
Expiration Date (if any)(mm/dd/yyyy):				

**3-D Barcode
Do Not Write in This Space**

Certification

I attest, under penalty of perjury, that (1) I have examined the document(s) presented by the above-named employee, (2) the above-listed document(s) appear to be genuine and to relate to the employee named, and (3) to the best of my knowledge the employee is authorized to work in the United States.

The employee's first day of employment (mm/dd/yyyy): _____ (See instructions for exemptions.)

Signature of Employer or Authorized Representative		Date (mm/dd/yyyy)	Title of Employer or Authorized Representative Fiscal Specialist Senior	
Last Name (Family Name) McInteer	First Name (Given Name) Nita	Employer's Business or Organization Name King William County		
Employer's Business or Organization Address (Street Number and Name) 180 Horse Landing Road No.4		City or Town King William	State VA	Zip Code 23086

Section 3. Reverification and Rehires (To be completed and signed by employer or authorized representative.)

A. New Name (if applicable) Last Name (Family Name) First Name (Given Name) Middle Initial	B. Date of Rehire (if applicable) (mm/dd/yyyy):
--	---

C. If employee's previous grant of employment authorization has expired, provide the information for the document from List A or List C the employee presented that establishes current employment authorization in the space provided below.

Document Title:	Document Number:	Expiration Date (if any)(mm/dd/yyyy):
-----------------	------------------	---------------------------------------

I attest, under penalty of perjury, that to the best of my knowledge, this employee is authorized to work in the United States, and if the employee presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.

Signature of Employer or Authorized Representative:	Date (mm/dd/yyyy):	Print Name of Employer or Authorized Representative:
---	--------------------	--

LISTS OF ACCEPTABLE DOCUMENTS
All documents must be UNEXPIRED

Employees may present one selection from List A
or a combination of one selection from List B and one selection from List C.

LIST A Documents that Establish Both Identity and Employment Authorization	OR	LIST B Documents that Establish Identity	AND	LIST C Documents that Establish Employment Authorization
1. U.S. Passport or U.S. Passport Card		1. Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address		1. A Social Security Account Number card, unless the card includes one of the following restrictions: (1) NOT VALID FOR EMPLOYMENT (2) VALID FOR WORK ONLY WITH INS AUTHORIZATION (3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION
2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)		2. ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address		2. Certification of Birth Abroad issued by the Department of State (Form FS-545)
3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa		3. School ID card with a photograph		3. Certification of Report of Birth issued by the Department of State (Form DS-1350)
4. Employment Authorization Document that contains a photograph (Form I-766)		4. Voter's registration card		4. Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal
5. For a nonimmigrant alien authorized to work for a specific employer because of his or her status: a. Foreign passport; and b. Form I-94 or Form I-94A that has the following: (1) The same name as the passport; and (2) An endorsement of the alien's nonimmigrant status as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.		5. U.S. Military card or draft record		5. Native American tribal document
		6. Military dependent's ID card		6. U.S. Citizen ID Card (Form I-197)
		7. U.S. Coast Guard Merchant Mariner Card		7. Identification Card for Use of Resident Citizen in the United States (Form I-179)
		8. Native American tribal document		8. Employment authorization document issued by the Department of Homeland Security
		9. Driver's license issued by a Canadian government authority		
6. Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI		For persons under age 18 who are unable to present a document listed above:		
		10. School record or report card		
		11. Clinic, doctor, or hospital record		
	12. Day-care or nursery school record			

Illustrations of many of these documents appear in Part 8 of the Handbook for Employers (M-274).

Refer to Section 2 of the instructions, titled "Employer or Authorized Representative Review and Verification," for more information about acceptable receipts.

FORM VA-4

COMMONWEALTH OF VIRGINIA DEPARTMENT OF TAXATION PERSONAL EXEMPTION WORKSHEET

(See back for instructions)

1. If you wish to claim yourself, write "1"
2. If you are married and your spouse is not claimed on his or her own certificate, write "1"
3. Write the number of dependents you will be allowed to claim on your income tax return (do not include your spouse).....
4. Subtotal Personal Exemptions (add lines 1 through 3).....
5. Exemptions for age
 - (a) If you will be 65 or older on January 1, write "1"
 - (b) If you claimed an exemption on line 2 and your spouse will be 65 or older on January 1, write "1"
6. Exemptions for blindness
 - (a) If you are legally blind, write "1"
 - (b) If you claimed an exemption on line 2 and your spouse is legally blind, write "1"
7. Subtotal exemptions for age and blindness (add lines 5 through 6).....
8. Total of Exemptions - add line 4 and line 7

Detach here and give the certificate to your employer. Keep the top portion for your records

FORM VA-4 EMPLOYEE'S VIRGINIA INCOME TAX WITHHOLDING EXEMPTION CERTIFICATE

Your Social Security Number	Name		
Street Address			
City	State	Zip Code	

COMPLETE THE APPLICABLE LINES BELOW

1. If subject to withholding, enter the number of exemptions claimed on:
 - (a) Subtotal of Personal Exemptions - line 4 of the Personal Exemption Worksheet.....
 - (b) Subtotal of Exemptions for Age and Blindness line 7 of the Personal Exemption Worksheet.....
 - (c) Total Exemptions - line 8 of the Personal Exemption Worksheet.....
2. Enter the amount of additional withholding requested (see instructions).....
3. I certify that I am not subject to Virginia withholding. I meet the conditions set forth in the instructions (check here)
4. I certify that I am not subject to Virginia withholding. I meet the conditions set forth Under the Service member Civil Relief Act, as amended by the Military Spouses Residency Relief Act (check here)

Signature

Date

EMPLOYER: Keep exemption certificates with your records. If you believe the employee has claimed too many exemptions, notify the Department of Taxation, P.O. Box 1115, Richmond, Virginia 23218-1115, telephone (804) 367-8037. *Note:* Employers may establish a system to electronically receive Forms VA-4 from employees, provided the system meets Internal Revenue Service requirements as specified in § 31.3402(f)(5)-1(c) of the Treasury Regulations (26 CFR).



New Hire Orientation Packet

Version 1.0

Updated 01/06/2020



Adopted February 22, 2010, Revised April 26, 2010 and September 27, 2010 **Screening for Alcohol and Substance Abuse**

The County may elect to perform alcohol and controlled substances screening in the following situations:

1. Pre-Employment Screening

a. Persons offered employment with the County may be required to submit to a controlled substances test as a condition of the offer of employment. Those who test positive for a controlled substance shall not be employed.

b. A candidate for employment who receives an initial positive test for alcohol or a controlled substance shall be offered a confirmatory test at the employee's expense. The confirmatory test shall be scheduled by the employer with no prior notice to the employee who received an initial positive result. A positive confirmatory test will disqualify a candidate from further consideration.

c. Screening arrangements will be made by the county administrator's office and coordinated with the employee's department head when necessary.

2. Post-Accident Screening

In addition to the screening required for commercial driver's license (CDL) holders, any employee operating a County vehicle which is involved in any accident causing property damage or personal injury will immediately submit for screening of alcohol and controlled substances when there is reasonable suspicion that the employee is under the influence of alcohol or a controlled substance.

3. Reasonable Suspicion Screening

a. All County employees are subject to alcohol and controlled substances screening when reasonable suspicion exists that he or she is under the influence of alcohol or a controlled substance while at work or on duty. Reasonable suspicion exists when it is based on specific articulated facts and resulting inferences of these facts. By way of example, and without limitation, any of the following conditions or circumstances, alone or in combination, may create a reasonable suspicion:

- Unexplained inability to perform normal job functions;
- Slurred speech;
- The smell of alcohol or drugs in the breath or on the body;
- Any unusual lack of physical coordination or loss of equilibrium;
- Unexplained hyperactivity, depression or withdrawal;
- Unexplained inability to think or reason at normal levels;
- Unusual or bizarre behavior
- Involvement in an accident that caused, or had the potential to cause, personal injury or property damage;
- Involvement in an accident while operating a County vehicle;
- Unexplained change in affect or mood;
- Unexplained shortness of temper;
- Violent or unexplained response to daily problems.



New Hire Orientation Packet
Version 1.0
Updated 01/06/2020



b. When a supervisor, in his or her judgment, has reason to believe that an employee has used and is under the influence of drugs and /or alcohol, the supervisor should ask his or her supervisor to corroborate the observations. Such tests may include, but shall not be limited to, having the employee take a breathalyzer test or submit a urine sample for analysis. Such tests shall be administered only after prior notice and approval by the county administrator or his designee. Failure or refusal of an employee to participate in such a test shall be cause for dismissal.

c. If a supervisor suspects that an employee may have violated the policy, he or she shall investigate the situation and interview the employee, where practical. The supervisor should have a second witness at the supervisory level observe the employee and be present for any interview, if possible.

d. Even if the employee does not admit to a violation of this policy, the supervisor may require immediate screening if there is reasonable suspicion the employee is under the influence of alcohol or a controlled substance. Screening must be authorized by and coordinated with the county administrator's office.

e. Any employee who is relieved of because of reasonable suspicion of alcohol or drug use shall not be permitted to operate a County vehicle or County equipment.

4. Random Screening

a. All employees in safety sensitive positions are subject to random controlled substances screening. CDL holders are also subject to random alcohol and substance abuse screening in accordance with applicable Department of Transportation (DOT) regulations.

b. Employees who are considered high risk, safety sensitive may be subject to random alcohol and/or controlled substances screening.

5. Follow Up Screening

Periodic, unannounced follow up screening is required for all employees that tested positive for alcohol or controlled substances. An employee who receives an initial positive test for alcohol or a controlled substance shall be offered a confirmatory test at the employee's expense. The confirmatory test shall be scheduled by the employer with no prior notice to the employee who received an initial positive result. A positive confirmatory test result will result in disciplinary action up to and including termination.

6. Certification of Employee

By signing below, each employee acknowledges that he or she has read, understands and agrees to follow to the policy.

Employee Name and Date

Department



County Email

Your county email is the main line of communication from Fire & EMS Administration, it is your responsibility to check this email consistently.

Your county email log in information is as follows:

Username: _____@kingwilliamcounty.us

Password: _____

To access your county email address, visit the following link:
<https://west.exch091.serverdata.net/>

If you require any assistance with your county email, please contact:

Jacob Fitzgerald

Special Projects Analyst/Health & Safety Officer

804-769-4960

jfitzgerald@kingwilliamcounty.us

Training



Cleared Providers

Updated 03/02/2020



<i>Full Time</i>	FR/Car	Ambulance	Brush	Engine	Tanker	OIC	Preceptor
Name							
Boyd, Caleb	✓	✓	✓	✓	✓	✓	✓
Hirsh, Devon	✓	✓	✓	✓	✓		
Kurtz, Courtney	✓	✓	✓	✓	✓		
Mckeel, Thomas	✓	✓	✓	✓	✓	✓	✓
Nunnally, Laura	✓	✓	✓	✓	✓	✓	✓
Oliff, William 'Holden'	✓	✓	✓	✓	✓		✓

<i>Part Time</i>	FR/Car	Ambulance	Brush	Engine	Tanker	OIC	Preceptor
Name							
Badger, Brian	✓	✓	✓	✓	✓	✓	✓
Barron, Elaina	✓	✓					
Brantley, Brian	✓	✓	✓	✓	✓	✓	✓
Brown, Darius	✓	✓					
Crump, Johnathan	✓	✓					
Echols, Ross "Pierce"	✓	✓	✓				
Fitzgerald, Jacob	✓	✓	✓	✓	✓	✓	✓
Heller, John	✓	✓	✓	✓	✓	✓	✓
Hodges, Jason	✓	✓	✓	✓	✓		
Johnson, Mark	✓	✓					
Landrum, Micaiah	✓	✓	✓	✓	✓	✓	✓
Larsen, Dallas	✓	✓	✓	✓	✓	✓	✓
Nunnally, Richard	✓	✓	✓	✓	✓	✓	✓
Reaves, Stacy	✓	✓	✓	✓	✓	✓	✓
Salud, Florentino	✓	✓	✓	✓	✓	✓	✓
Swartz, John 'Clay'	✓	✓	✓	✓	✓	✓	
Taylor, Alex	✓	✓	✓	✓	✓	✓	
Wilson, Caleb	✓	✓	✓	✓	✓	✓	✓
Egan, Courtney	✓						
Dahl, Brett (David)	✓						
Lewis, Carter	✓						
Kump, Tanner	✓						
Wood, Erica	✓	✓					

KING WILLIAM C O U N T Y F I R E & E M S

BLS Field Training Program



Version 3.2 revised on 01/27/2020



BLS Field Training Program
Version 3.2



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BLS Field Training Program
Version 3.2

BLS Provider

Field Training Program

Purpose:

This program's primary purpose is developing the system's EMS providers at the Basic Life Support training level. Providers who have received the proper BLS training will benefit the EMS system through the delivery of quality patient care, personal leadership development, and investment in the goals of the system.

This Field Training Program places the responsibility for completing the program and becoming a BLS Provider on the individual Provider Candidates. The Candidate must maintain the documentation, demonstrate the skills, and develop the knowledge to practice. The candidate must be motivated, determined, and diligent. The Field Training Instructor (Preceptor) is responsible for guiding and mentoring the Candidate, but should not be providing basic instruction and should not need to motivate the candidate to complete the work.

Program Objectives:

- 1) Observing the field experience of the preceptee, through Field Training Instructors (preceptor), who provide qualitative feedback, interaction, and concentrated didactic information.
- 2) Measuring skills with regular grading of performance and attitude, through the FTIs and the Fire & EMS Supervisors.
- 3) Establish progress points to continuously evaluate the provider. The provider candidate will be measured by progressing to the BLS AIC level using skill and scenario-based training.
- 4) Recognize previous experience and account for it through didactic and practical skill verification, with focus on department specific protocols and procedures.

Take the time familiarize yourself with the contents the field training program.

This workbook is a legal document that could serve as proof of your competency as a BLS provider with King William County Fire & EMS, and will be filed in your employee record, this workbook should be treated with utmost importance and professionalism.



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Department Requirements to Practice

Experienced Providers or currently practicing providers with a letter of clearance from another EMS system

EMT

- State Certification
- Current AED/CPR Professional certification
- Hazmat Awareness, or higher certification
- Complete department orientation requirements
- Complete scenario and protocol training with an FTI
- Complete minimum 2 shifts with an FTI
- Lead provider for a maximum of 5 total EMS incidents
- EMS unit orientation
- Endorsement from Lead FTI
- Endorsement from Battalion Chief of Administration
- Endorsement from primary agency OMD if applicable

Personnel with NO PRIOR EXPERIENCE

EMT

- State Certification
- Current AED/CPR Professional certification
- Hazmat Awareness, or higher certification
- Complete department orientation requirements
- Complete department orientation classroom portion
- Complete department BLS Field Training Program
- EMS unit orientation
- Lead Provider for a maximum 10 total EMS incidents
- Complete minimum of 10 shifts of orientation with an FTI
- Endorsement from Lead FTI
- Endorsement from Battalion Chief of Administration



(PAGE 5 FOR FTI USE)

Field Training Instructor (preceptor) Requirements

The FTI system is designed to place responsibility for the training of provider candidate on their peers. This will help motivate the performance of provider candidates and create an investment in the future for current providers acting as FTIs. They will supervise the overall field training process and will have the responsibility to coach the provider candidate through the entire FTP. The FTI has demonstrated clear aptitude for leadership and teaching, possesses experience to guide the provider candidate, and operates with clinical excellence. The FTI will make key decisions about the flow and outcome of a provider candidates' training. The provider candidate will be assigned one primary FTI and scheduled predominantly to ride with that individual.

Minimum Requirements:

The FTI for the BLS provider candidate should be an experienced BLS provider or ALS provider. The provider should have a minimum of 3 years of experience as a released BLS AIC or otherwise a provider who, as determined by the Battalion Chief of Administration exhibits the qualities and skills of an FTI, submit a letter of intent to either the Battalion Chief of Administration & the Lead FTI to become a BLS FTI, and have the recommendation of those individuals and the candidates company officer. These individuals will be assigned to the BLS candidate by the Battalion Chief of Administration or Lead FTI.

Field Training Officer Expectations

1. Lead by example: on time, on target, in uniform
2. Provide a positive learning environment
3. Direct and Focus the Candidate
4. Monitor candidate and provide constructive feedback
5. Complete the Daily Log with the Provider Candidate
6. Give progress reports to company or County leadership.
7. Assure that all reports are completed to the department standard.

The FTI is ultimately responsible for all patient care delivered by the provider candidate. He or she holds the right to intervene as needed. It is important that any time the FTI intervenes, the provider candidate learns from the experience and documents appropriately.

**DOCUMENTATION IS TO BE COMPLETED ON FTI IMAGETREND LOG IN!
Have the candidate note in the narrative "all patient care rendered by preceptee (their name) under the direct supervision of FTI (your name)"**



Provider Candidate Expectations

1. **Punctuality and Appearance** – report for scheduled shifts on time and in appropriate uniform.
2. **Initiative** – ask questions, take the lead, and look for training opportunities. The Candidate should ask for skills and training, not just “Tag along”. The Candidate is expected to function comfortably as the team leader on incidents by the end of the Program.
3. **Listen** – learn from everyone and everything; develop your own individual patterns
4. **Understand critical decisions** – not every call will be the best learning experience.
5. **Teamwork** – participates in daily activities at all levels, learn to work with different types of providers.
6. **Develop skills and clinical scope** - demonstrate understanding of all regional and departmental policies and protocols.
7. **Leadership** – demonstrate ability to coordinate team and lead
8. **Progress** – the Candidate must continuously demonstrate progress toward becoming a competent BLS provider.
9. **Communication** – at the end of every shift throughout your perception process you will be expected to keep open lines of communication between yourself and the lead FTI, it is your responsibility to communicate any issues you may encounter.



BLS Field Training Program
Version 3.2

Workbook Instructions:

At the beginning of the Field Training Program, the provider candidate will meet with the Lead FTI and receive this Field Training Program workbook. The Lead FTI will explain the process and help the candidate identify key focus areas. The provider candidate will maintain the workbook, make a copy of the signature page and turn that into the Company Officer. The FTI will then notify the training division upon the completion of the candidate. The provider candidate will retain all other paperwork.

It is suggested that the candidate organize this workbook and supporting documents as outlined in a three-ring binder.

At the conclusion of every shift throughout your perception process you will be required to send an email to the Lead FTI summarizing the days events, any BLS training conducted, any issues encountered, any positives that you wish to communicate, and the incident numbers for any call in which you provided *patient care.

If the candidate misplaces or loses their field training workbook at any time throughout the process the candidate must restart the program from the beginning.

FTP Binder Contents Outline:

- Section 1: Administrative Documents as needed, Copies of EMS Certifications
- Section 2: BLS Skills
- Section 3: Daily Call Logs with attached EPCR's
- Section 4: Scenarios
- Section 5: Signature pages

*" Patient care" is defined as any time you perform an assessment or provide any treatments directly to a patient; you do not have to remain in the ambulance during transport for a call to count towards your process.



BLS Field Training Program
Version 3.2

**Field Training Program
Learning Objectives**

FTP: General Operations Section

Purpose: Provider Candidates shall demonstrate knowledge and skill of the following; these also outline daily expectations of all EMS unit personnel.

Objectives:

- 1) Ambulance operations
- 2) Communications
- 3) Resource Management
- 4) Operational Medical Director/Medical Control
- 5) Medical Legal
- 6) Medical Ethics
- 7) Interpersonal Skill/customer service
- 8) Documentation
- 9) Technical Operations and the EMS role in the following:
 - a. Rescue (Vehicle, Confined Space, Ropes)
 - b. Medevac helicopter
 - c. HAZMAT
 - d. Fire



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Daily Call Log Instructions

The Provider Candidate shall complete this log at the end of each shift. This gives a complete summary of the progress the candidate is making on calls.

1. The candidate shall print out a “precept report” from ImageTrend for each incident where patient care was provided.
2. Complete the daily call log form. This functions as the cover page for the day’s calls. **All calls for the day should be logged**, if patient care was provided, regardless of type.
3. The candidate should print out a “precept report” for all incidents that he/she functioned as the attendant in charge or performed a critical invasive skill.
4. Appropriate Code Summaries should be attached or placed in an envelope with the precept report.
5. The “precept report” should be attached to the correlating “Daily Call Log” and filed in your workbook.

The Skills and Scenario Sheets are the responsibility of the candidate. The FTI initials and dates the individual skills as they are performed.

The daily log will also help evaluate the following criteria:

Professionalism: *Involves attitude, demeanor, and inter-personal relations. Interaction is vital to the BLS provider. This also involves the delivery of skills and knowledge.*

Leadership/Teamwork: *Involves initiative, self-reliance, confidence, and delegation of tasks and responsibility. Measures the ability to control all types of scenes and manage different types of resources. Ability to make an incident “flow.”*

Clinical Judgment and Skill: *Application of medical knowledge and direct skill. Candidate’s ability to comprehend protocols and apply to specific situations is evaluated.*

Operational Knowledge: *Familiarity with department protocols and procedure. Comfortable in the ambulance environment and on the emergency incident, the candidate demonstrates understanding of the dynamic nature of daily operations.*

*” Patient care” is defined as any time you perform an assessment or provide any treatments directly to a patient; you do not have to remain in the ambulance during transport for a call to count towards your process.

The following page should be copied for each day or “shift”.

Each day or “shift” requires its own Daily Call Log.



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This form shall be used for each shift on the ambulance. A new form should be started at the beginning of every shift and attached to EPCR's that correspond. This form will help to document the progress of the candidate. Please use the following rating scale for each block.

N/A=N/A to the call 1- Unable to perform without assistance 2- Performed without assistance 3- CRITICAL FAILURE: must be accompanied with a letter from the preceptor.

King William Fire and EMS Daily Call Log

Evaluation Criteria	Call 1	Call 2	Call 3	Call 4	Call 5	Call 6	Call 7	Call 8	Call 9	Call 10
Demonstrates appropriate radio communication										
Demonstrates ability to select an optimal route to call using all given resources										
Demonstrates a safe working environment										
Demonstrates appropriate patient assessment skills										
Demonstrates leadership ability										
Demonstrates appropriate treatment and follows protocols										
Demonstrates ability to accurately and timely complete an EPCR										
Demonstrates the ability to communicate with the patient, family and other call related personnel										
Demonstrates the ability to clean, restock and assure working order of ambulance prior to returning to service										



Date _____ Candidate Name _____ FTI Name _____

BLS Field Training Skill Evaluation

Candidates must show competency in the following skills. They may be performed during training scenarios or on actual calls. The number of times needed to become competent and cleared on each skill will be determined by the FTI.

Airway/Breathing	Description of skill	FTI Initial of competency
Changing of O2 cylinders	Describes when and how to properly change both types of O2 cylinders	
Use of nasal cannula	Chooses appropriate size, uses correct liter flow, applies correctly	
Use of non-rebreather	Chooses appropriate patient, uses correct liter flow, applies correctly	
Use of nebulizer	Chooses appropriate patient, uses correct liter flow, applies correctly, can assist ALS provider in administration of meds	
Use of BVM	With proper form ventilates manikin or patient with proper form, uses correct liter flow and selects proper size for patient	
Use of nasal and oral airway	Chooses appropriate patient, measures properly, inserts airway successfully	
Inserts King Airway	Chooses appropriate patient, chooses appropriate size, States possible complications and methods for confirmation of placement	
Use of onboard and portable suction	Chooses appropriate patient, demonstrates use of all attachments and proper technique	
Use of CPAP	Chooses appropriate patient, can assemble device, applies device correctly to patient	
Assist ALS with intubation	Familiar with location of intubation equipment, Capnography, loading of Bougie with an ALS provider	
AED/ LP 15/ZOLL E SERIES		
Use of AED	Chooses appropriate patient, chooses appropriate pads, operates AED appropriately, can change to AED mode successfully	



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Use of LP 12 & ZOLL E-Series	Operates LP/ZOLL in both AED mode and manual mode under direction of ALS provider. Able to perform user test, access archives, events, change other settings and change the date and time.	
12 Lead	Chooses appropriate patient, properly places all leads, and demonstrates function on LP/ZOLL. Discuss 12 lead protocol for BLS providers	

Immobilization and splinting	Description of skill	FTI initial of competency
Adult Back-boarding	Choose appropriate patient, discuss primary and secondary equipment in immobilizing patients, able to perform out of vehicle, standing, or on ground. Straps in proper position and patient doesn't move. Discuss C-spine policy	
Pediatric Back-boarding/Pedi Pack	Chooses appropriate patient, discuss primary and secondary equipment in immobilizing, able to perform out of vehicle, standing, on ground, or in a car seat	
Use of KED	Choose appropriate patient, successfully applies in car or from chair, discuss secondary uses of KED. Straps in proper location and patient doesn't move	
Use of Board Splints	Choose appropriate patient, applies splints appropriately	
Use of Traction Splints	Choose appropriate patient, applies splint appropriately, Kendrick device as well as standard	
Pediatric transport options	Demonstrates knowledge of alternate transportation methods of pediatric patients. For example, with or without their car seats. In the provided fold down seats in medic unit. Etc...	
<i>this space intentionally left blank</i>		



Miscellaneous skills		
Use of glucometer	Choose appropriate patient, demonstrates use	
Use of stair chair	Sets up stair chair, carries patient down set of -steps, able to fold and put away	
Use of stretcher	Able to raise and lower stretcher, discuss moving parts, able to lower with one person or with help, able to load into ambulance with one person or with help. General etiquette.	
Use of Reeves stretcher	Demonstrates proper time to use device. Carry patient down flight of steps and onto stretcher. Removes successfully upon arrival at stretcher or hospital	
Use of scoop stretcher	Demonstrates proper time to use device. Carry patient to stretcher and then remove device.	
Use of tourniquet	Choose appropriate patient, successful application,	
Set up IV administration set	Demonstrates proper assembly of IV set up. Flows line and assists ALS provider in starting of IV. Discuss drip set selection with ALS provider.	
Use of Broselow tape	Demonstrates the use of the device. Able to assist in reading information to ALS provider if necessary.	
Drug box orientation	Demonstrates the location of the drug box. Basic orientation of the drug box is completed with ALS provider.	
Medication administration	Description of skill	FTI initial of competency
Narcan: IN and Nebulized	Choose appropriate patient. Demonstrates when and how to administer medication appropriately.	
Epinephrine: Epi-Pen	Choose appropriate patient. Demonstrates when and how to administer medication appropriately.	
Prescribed inhaler	Choose appropriate patient. Demonstrates when and how to administer medication appropriately.	



Aspirin	Choose appropriate patient. Demonstrates when and how to administer medication appropriately.	
Oral-glucose	Choose appropriate patient. Demonstrates when and how to administer medication appropriately.	
Glucagon: IM & IN	Choose appropriate patient. Demonstrates when and how to administer medication appropriately.	

Field Training Program
General Operations

These questions are a general overview of ambulance operations and resource information. This section is designed to cover many different topics. Please complete this section and use to stimulate discussion.

- 1) Discuss the appropriate way to check out the EMS equipment on your unit. This should include the weekly EMS inspection form.
- 2) Discuss the importance of the unit inspection prior to your shift. This should include the weekly apparatus inspection form.
- 3) What are the advantages and disadvantages of the following?
County Map book

King William County GIS

Emergency Response Guidebook

HEAR system

Cellular Phone
- 4) What is the purpose of the “state wide” radio frequencies? How can we access these?
- 5) What are the different methods of communicating in mutual aid situations?



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- 6) Discuss how to use the PEMS protocol manual.
- 7) List the responsibilities of the EMS Sector in the incident management system.
- 8) What are the assessment points of the START triage system, and how do they relate to the color-coded triage tags?
- 9) What is the definition of a Mass Casualty Incident?
- 10) According to the VAOEMS Trauma Triage guidelines, what are key steps to take in a Mass Casualty Incident?
- 11) What are suggested criteria for the utilization of a medevac helicopter?
- 12) Why do you NOT “check on the availability of med flight”?
- 13) What are the Richmond/Peninsula areas air medical resources?
- 14) What special resources does a medevac helicopter provide?
- 15) What types of bariatric resources does King William have? What resources do other local jurisdictions have if needed?
- 16) What resources are coordinated through the Virginia Emergency Operations Center?
- 17) Describe emergency patient decontamination in a HAZMAT situation.
- 18) What are key steps to take in on a suspected Hazardous Materials incident?
- 19) Name 2 specific roles for an ambulance on the HAZMAT incident?



- 20) What are the regional Hazardous Material Response resources and how are they initiated?
- 21) What are King William Fire EMS's in-county Technical Rescue resources?
- 22) What are the regional Technical Rescue resources?
- 23) What are the specific roles of the ambulance/medic during a structure fire? Discuss how this may change if the ambulance/medic has firefighters on board. Discuss placement of unit on the scene, expectations etc...
- 24) What are the specific roles of the ambulance/medic during an MVA? Discuss unit placement, expectations etc....
- 25) What does patient confidentiality mean?
- 26) What do the three types of consent mean to the pre-hospital provider?
- Expressed
 - Implied
 - Involuntary
- 27) A 16-year-old baseball player, hit in the head with a ball and has an obvious injury, refuses medical care. How can he be treated? Should he be treated? Discuss the VAOEMS & PEMS administrative protocol for minors and qualifications for emancipation.
- 28) What is implied by an informed refusal?
- 29) In cases of negligence, what must be proved?
- 30) What is "duty to act?"
- 31) Discuss ECO/TDO.



32) From the following 3 cross street/intersection locations, detail routing to the hospitals listed below.

Location 1: Woodburry Rd. & Walkerton Rd.

Location 2: McKendree Ln & W. River Rd.

Location 3: King William Rd., Cross Streets of Dabney's Mill Rd. & Olde Footpath Rd.

Hanover Emergency Center

- Location 1
- Location 2
- Location 3

VCU Medical Center

- Location 1
- Location 2
- Location 3

Memorial Regional Medical Center

- Location 1
- Location 2
- Location 3

Riverside Tappahannock Hospital

- Location 1
- Location 2
- Location 3

33) Give the street locations of the following hospitals. Include any nearby major access roads.

a. Memorial Regional Medical Center



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- b. St. Mary's
- c. Riverside Tappahannock
- d. Hanover Emergency Center
- e. VCU Medical Center
- f. Henrico Doctors Hospital Parham
- g. Henrico Doctors Hospital Forest
- h. McGuire VA Medical Center



ACHARTE Narrative Sample

A (Arrival on-scene): Arrived on-scene to find male pt. sitting upright in chair and holding his chest. Pt. appears anxious. King William Fire EMS E20 is on-scene and performing VS upon EMS arrival.

C (Chief Complaint): "I have pain in my chest"

HPI (HX of present illness and medical hx): Pt had a sudden onset of sub-sternal chest pain ~1-hour prior. PMHx of AMI 2 years prior with cardiac catheterization with stints placed, COPD, 20+ year smoker, hypercholesteremia.

A (Assessment): Pt AOX4, GCS=15. Skin pale, cool, & diaphoretic. No JVD noted. Pt c/o chest pain/pressure 8/10. Lung sound clear += in all fields. Abdomen is soft and non-tender on palpation. No peripheral edema noted. Pt also c/o nausea. Pt. denied dyspnea, vomiting, dizziness or syncope. Last oral intake was breakfast at 08:00 this am.

R (RX/Treatments): Performed VS. 15L O2 via NRB. Applied cardiac monitor and performed 12-lead ECG. 12-lead shows ST elevation in Leads II & III. 324 mg ASA PO, 18g IV in right AC w/ saline drip TKO. 0.4mg Nitro administered SL x 2. Pt. reported his pain was lowered after 2nd Nitro from 8/10 to 4/10.

T (Transport info): Pt transferred to stair chair and transported down stairs. Pt transferred to gurney and then ambulance. Report to medical control, no instructions received. Pt transported to hospital without incident. Pt condition improved.

E (Events during/after transport): No noted events noted during/after transport. Report given and pt. care transferred to RN.

*It is suggested that the candidate creates a personalized signature for the end of their narratives.



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Scenario Testing

Purpose: Scenario based testing allows the opportunity for Provider Candidates to demonstrate the comprehensive skills obtained through the Field Training process. This testing is a key part of the final clearance process and represents the most critical skills utilized by Basic Life Support Providers. This testing is designed to simulate the stress of critical situations.

Scenario based testing will be conducted at the final clearance board.

Evaluation of Scenario Testing: At this point in the Field Training Program, the candidate is expected to function with complete independence. The FTI's role becomes that of an advisor or observer and is making minimal intervention during the course of an emergency response. In the scenario testing, the Provider Candidate must demonstrate the following:

- 1) Clear Situational Awareness – understands response needs and resources needed to manage situation
- 2) Leadership – takes charge of situation, delegates tasks, anticipates problems, makes decisions, and communicates intentions
- 3) Protocol Knowledge – identifies correct protocol and applies it to the scenario. Able to recite critical interventions without prompting
- 4) Skill Performance – comfortably performs procedure without assistance and demonstrates ability to problem solve with situation
- 5) Communication – obtains information, disseminates critical points, and delivers report on situation. Awareness of ALL aspects of communication in EMS situations.



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BLS Field Training Final Scenarios

Scenarios will be supplied by the Lead FTI or Battalion of Administration

The final section of the BLS field training program are the final scenarios. These scenarios should be done in a panel style format. There are no specific requirements for evaluators, but the recommendation is that at least one FTI, the candidate's supervisor, and one provider not on the same shift be on the panel. The panel can be creative within the scenarios listed below. The evaluations of each scenario shall be done on the given assessment sheet for consistency. A minimum of 4 scenarios should be done for each potential provider. Upon completion of the final scenarios, the panel will make a decision for the promotion of the provider to a BLS AIC.

1st Scenario- BLS Cardiac arrest with LP15 or ZOLL E-Series

2nd Scenario- Medical patient/ Assessment

3rd Scenario- Traumatic Injury

4th Scenario- Pediatric scenario

*The following page should be copied 4 times.
Each scenario requires its own evaluation form.*



Final Scenarios Evaluation Form

Scenario # _____

Each section shall be graded with the following scale:

Fail: Provider does not demonstrate competency/proficiency

Pass: Provider demonstrates competency/proficiency

In order for the candidate to complete each scenario successfully, they must be competent in all fields.

Scene

-Provider appropriately manages scene and safety _____

-Provider appropriately utilizes personnel and resources _____

-Provider properly uses equipment _____

-Provider makes appropriate transport decisions _____

Treatment

-Provider appropriately verbalizes general impression _____

-Provider determines chief complaint/apparent life threats _____

-Provider appropriately manages ABC's _____

-Provider takes appropriate patient history _____

-Provider takes vital signs _____

-Provider conducts secondary assessments _____

-Provider appropriately treats the patient _____

-Provider reassesses the patient if necessary _____

-Provider gives appropriate turn over report at ED _____

Comments-

Evaluator name _____

Evaluator signature _____



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Field Training Instructor

Signature Page

All personnel functioning in a Training Capacity for the Provider Candidate should sign this signature page. It will provide a reference for the initials placed on the skills pages.

Lead FTI (preceptor)	Signature	Initials	Date

Secondary FTIs (Preceptors)	Signature	Initials	Date



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Field Training Program

Endorsement for

BLS Provider Clearance

Once the provider candidate has completed all of the clinical, didactic, and operational requirements for the Field Training Program & successfully receives endorsement from BLS AIC clearance board; the following endorsements will complete the process and clear the Provider to operate in the King William Fire and EMS system as a Basic Life Support Attendant In Charge.

We, the undersigned, endorse _____, as an operational Basic Life Support provider.

Lead FTI	Signature	Date

This Field Training Packet has been reviewed and endorsed by the following chief officers:

Battalion Chief of Administration	Signature	Date

Comments/Required Actions:



KING WILLIAM C O U N T Y F I R E & E M S



Laura Nunnally, Interim Fire Chief

The following individual was cleared on the apparatus stated in this letter during a past administration and adequate documentation of this does not exist. The purpose of this letter is to serve as adequate documentation for apparatus clearance.

INSERT NAME, is cleared on the following apparatus: ***quick response vehicle/car, ambulance, brush, engine, and tanker.***

This individual is cleared by legacy, meaning they were cleared within our department however no documentation of this exists. They have proven themselves competent through observations and training within the King William Fire & EMS Department.

Approximate Date of clearance: __/__/____

Today's Date: __/__/____

Personnel Signature: _____

Battalion Chief of Operations Signature: _____



Laura Nunnally, Interim Fire Chief

The following individual was cleared on the apparatus stated in this letter during a Job Performance Review Performed by the Battalion Chief of Operations. The purpose of this letter is to serve as adequate documentation for apparatus clearance.

INSERT NAME, is cleared on the following apparatus: ***quick response vehicle/car, ambulance, brush, engine, and tanker.***

This individual is cleared by proxy from another accepted career fire department and has proven themselves competent through observations and training within the King William Fire & EMS Department.

Attached to this letter is documentation of clearance from the accepted career fire department in question.

Date of clearance: __/__/____

Today's Date: __/__/____

Personnel Signature: _____

Battalion Chief of Operations Signature: _____

Apparatus

Apparatus Expenses

As of 03/02/2020



Troys Automotive

Date	Amount	Apparatus
6/17/2019	\$983.43	200 Ford E-450
7/30/2019	\$341.83	2012 Chevy Tahoe
7/30/2019	\$447.26	2018 Dodge Ram 4500
8/19/2020	\$445.77	2006 Ford E-450
8/19/2019	\$2,058.64	2006 Ford E-450
10/31/2019	\$765.30	2006 Ford E-450
11/5/2019	\$28.00	2007 Ford Crown Victoria
9/10/2019	\$510.13	2007 Ford Crown Victoria
12/16/2019	\$139.95	2018 Dodge Ram 4500
1/8/2020	\$20.00	2012 Chevy Tahoe
1/8/2020	\$203.00	2007 Crown Victoria
1/8/2020	\$92.00	2006 Ford E-450
1/6/2020	\$661.69	2014 Chevy Tahoe
Total	\$6,697.00	

Atlantic Emergency Solutions

Date	Amount	Apparatus
11/19/2019	\$2,077.11	2018 Dodge Ram 4500
9/19/2019	\$7,742.85	2011 Spartan Metrostar
9/20/2019	\$3,864.22	2006 Ford E-450
9/20/2019	\$2,288.47	1994 Pierce Dash
1/22/2020	\$1,447.13	1994 Pierce Dash
1/23/2020	\$114.72	2011 Spartan Metrostar
1/22/2020	\$3,273.77	2009 Pierce Contender
2/24/2020	\$816.48	2009 Pierce Contender
2/24/2020	\$623.15	2011 Spartan Metrostar
1/22/2020	\$3,273.33	2009 Pierce Contender
Total	\$25,521.23	

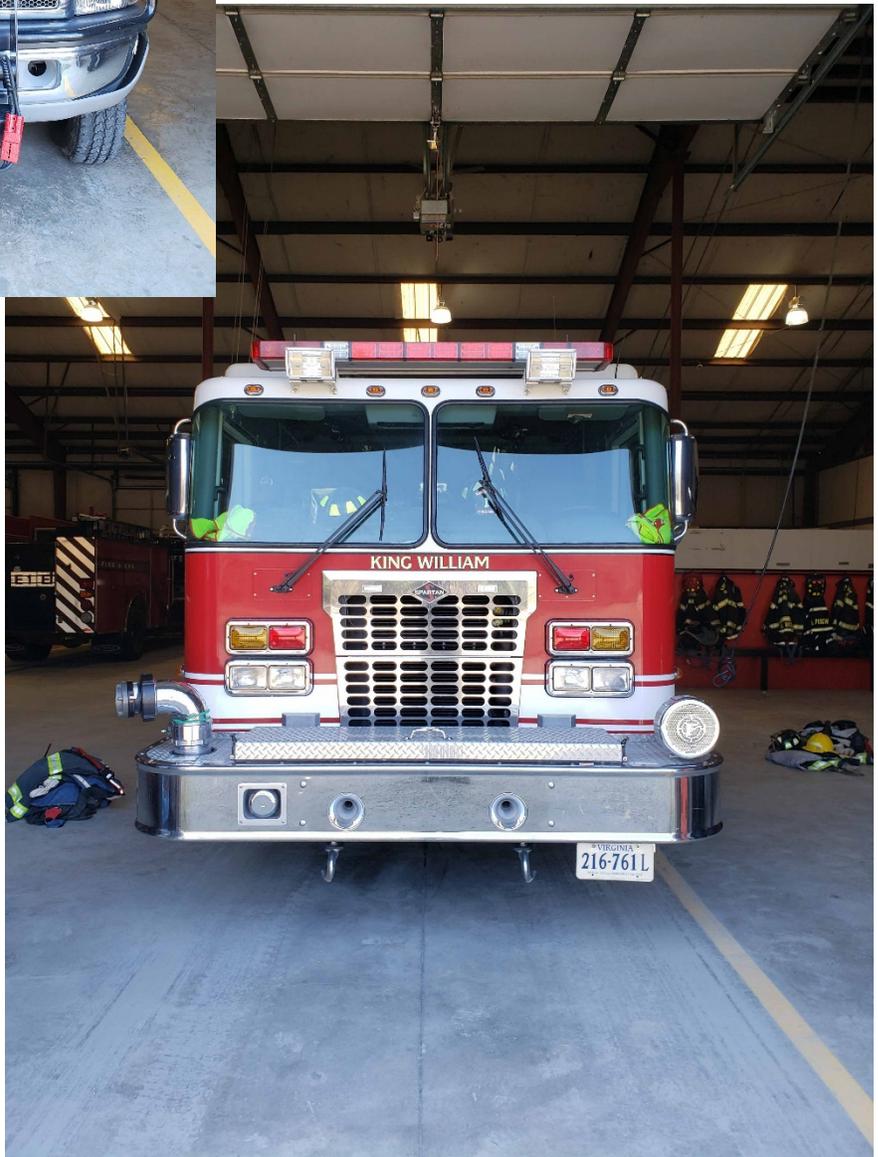
Aylett Tire

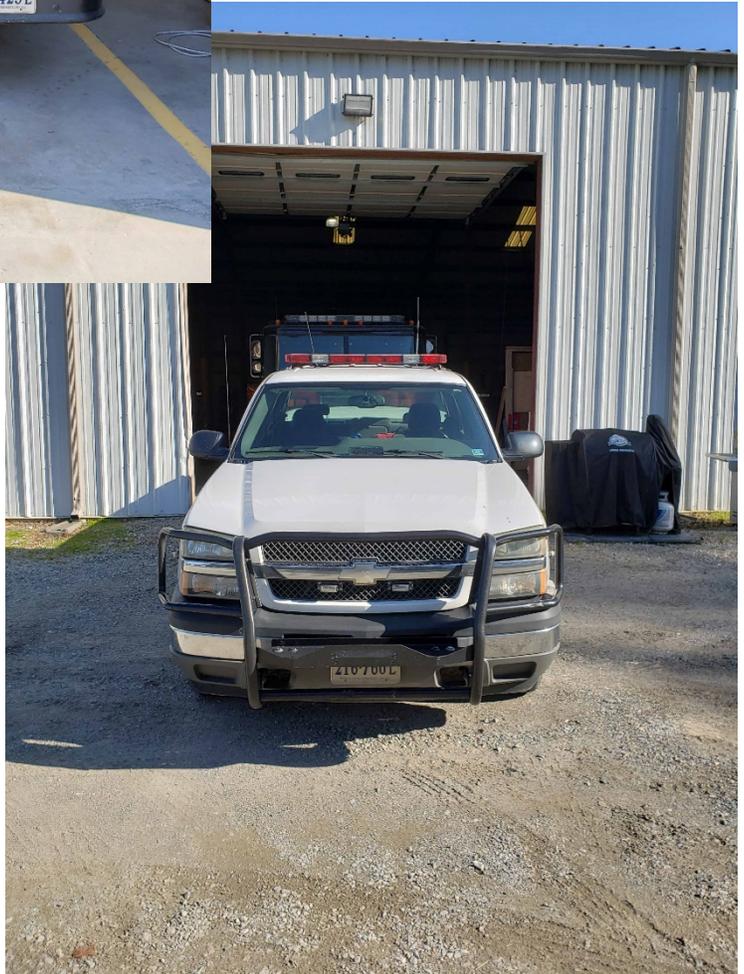
Date	Amount	Apparatus
2/24/2020	\$4,844.05	2011 Spartan Metro Star
2/10/2020	\$687.73	2018 Dodge Ram 4500
Total	\$5,531.78	

Abbot Truck Sales Inc.

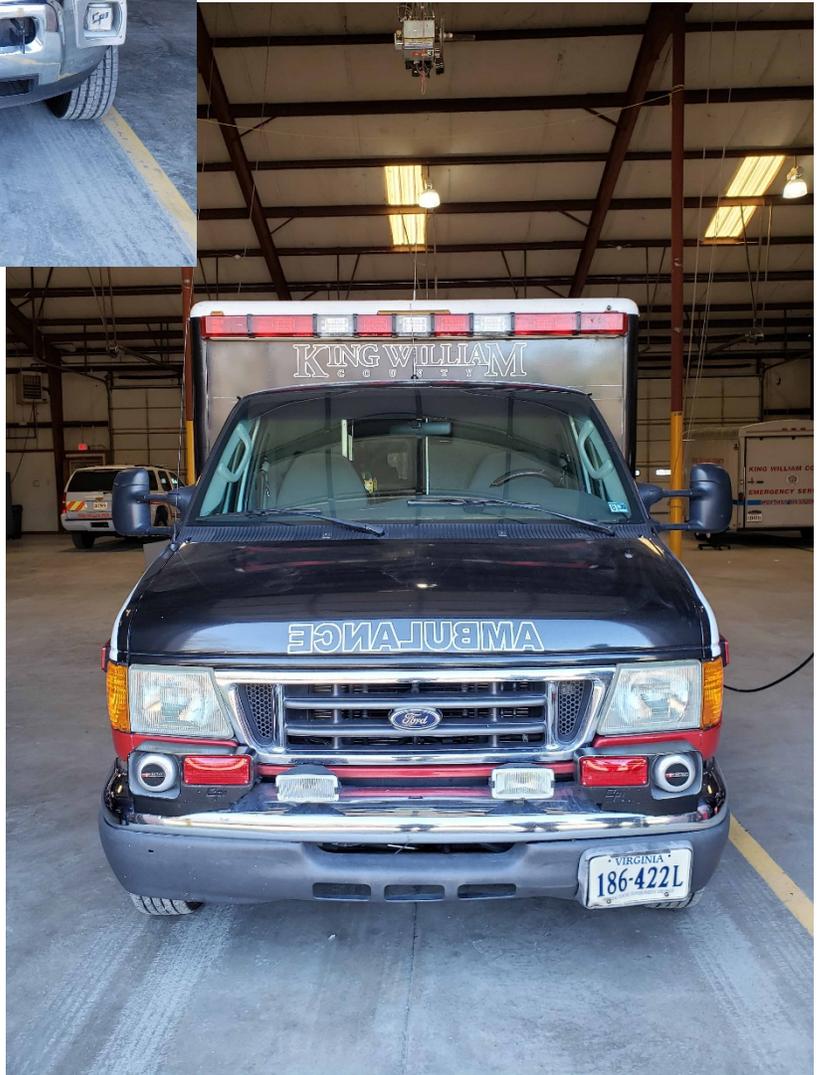
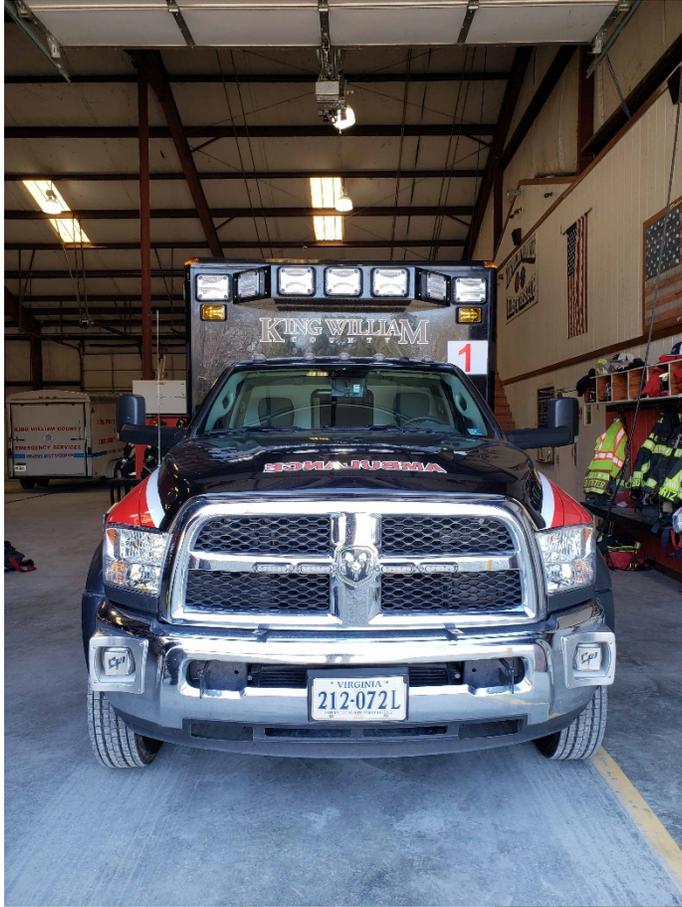
Date	Amount	Apparatus
7/5/2019	\$224.00	2009 Pierce Contender
Total	\$224.00	













TANKER 1

VIRGINIA
216-762L
THE COMMONWEALTH OF VIRGINIA

New Ambulance





KING WILLIAM

C O U N T Y

F I R E & E M S

Department Budget FY20



FUND #-100 GENERAL FUND EXPENDITURES

ACCT#	DESCRIPTION	APPROPRIATED AMOUNT	CURRENT		YTD AMOUNT	BALANCE	
			PERIOD AMOUNT			REMAINING	% REMAIN.
32400	FIRE & EMS						
1100	SALARIES & WAGES REGULAR	\$ 235,594.00	\$ 39,036.46	\$ 250,730.01	\$ (15,136.01)	(6.42)	
1201	OVERTIME	\$ 16,655.00	\$ -	\$ -	\$ 16,655.00	100.00	
1300	WAGES-PART TIME	\$ 165,984.00	\$ 41,075.00	\$ 280,258.18	\$ (114,274.18)	(68.84)	
2100	FICA	\$ 32,633.00	\$ 6,081.61	\$ 43,135.55	\$ (10,502.55)	(32.18)	
2210	VRS RETIREMENT	\$ 22,098.00	\$ 2,350.36	\$ 17,321.94	\$ 4,776.06	21.61	
2300	HEALTH INSURANCE	\$ 73,752.00	\$ 3,084.32	\$ 27,819.52	\$ 45,932.48	62.27	
2400	GROUP LIFE INSURANCE	\$ 3,414.00	\$ 363.09	\$ 2,675.93	\$ 738.07	21.61	
2550	VRS SHORT TERM DISABILITY	\$ 1,866.00	\$ 199.57	\$ 1,330.78	\$ 535.22	28.68	
2600	UNEMPLOYMENT INSURANCE	\$ 200.00	\$ -	\$ 332.76	\$ (132.76)	(66.38)	
2710	WORKERS COMP	\$ 10,302.00	\$ -	\$ 35,055.29	\$ (24,753.29)	(240.27)	
3160	PROFESSIONAL SERVICES-OTHER	\$ 250.00	\$ 74.00	\$ 633.45	\$ (383.45)	(153.38)	
3310	REPAIRS & MAINTENANCE	\$ 7,500.00	\$ 961.23	\$ 1,362.23	\$ 6,137.77	81.83	
3320	MAINTENANCE CONTRACTS	\$ 700.00	\$ -	\$ 948.83	\$ (629.43)	(89.91)	
4101	DATA PROCESSING	\$ 500.00	\$ -	\$ -	\$ 500.00	100.00	
4150	RADIO ISF CHARGES	\$ 98,913.00	\$ 22,888.42	\$ 59,197.79	\$ 39,715.21	40.15	
5210	POSTAL SERVICES	\$ 250.00	\$ 7.15	\$ 67.73	\$ 182.27	72.90	
5230	TELECOMMUNICATIONS TELEPHONES	\$ 753.00	\$ 178.64	\$ 794.44	\$ (41.44)	(5.50)	
5231	TELECOMMUNICATIONS WIRELESS	\$ 2,743.00	\$ 731.98	\$ 1,824.27	\$ 918.73	33.49	
5305	MOTOR VEHICLE INSURANCE	\$ 3,300.00	\$ -	\$ 3,041.76	\$ 258.24	7.82	
5308	GENERAL LIABILITY INSURANCE	\$ 3,000.00	\$ -	\$ -	\$ 3,000.00	100.00	
5410	LEASE & RENT OF EQUIPMENT	\$ 350.00	\$ -	\$ 571.03	\$ (221.03)	(63.15)	
5540	TRAVEL(CONVENTION/TRAINING)	\$ 2,500.00	\$ -	\$ 1,118.29	\$ 1,381.71	55.26	
5650	LINE OF DUTY LODA	\$ 360.00	\$ -	\$ 3,165.96	\$ (2,805.96)	(779.43)	
5810	DUES & MEMBERSHIPS	\$ 1,000.00	\$ -	\$ 75.00	\$ 925.00	92.50	
6001	OFFICE SUPPLIES	\$ 1,100.00	\$ 505.46	\$ 3,300.83	\$ (2,200.83)	(200.07)	
6007	REPAIRS & MAINTENANCE SUPPLIES	\$ 500.00	\$ 611.19	\$ 920.19	\$ (420.19)	(84.03)	
6008	VEH/POWER EQUIP FUELS	\$ 15,000.00	\$ -	\$ 4,846.78	\$ 10,153.22	67.68	
6009	VEH/POWER EQUIP SUPPLIES	\$ 500.00	\$ -	\$ 587.21	\$ (87.21)	(17.44)	
6011	UNIFORM & APPAREL	\$ 7,664.00	\$ -	\$ 405.13	\$ 7,258.87	94.71	

6012 BOOKS & SUBSCRIPTIONS	\$	700.00	\$	212.01	\$	212.01	\$	487.99	69.71
6014 OTHER OPERATING SUPPLIES	\$	10,800.00	\$	22.61	\$	4,789.22	\$	6,010.78	55.65
6015 EMERGENCY OPERATING SUPPLIES	\$	250.00	\$	-	\$	-	\$	250.00	100.00
6025 TOOLS AND TEST EQUIP	\$	250.00	\$	-	\$	29.37	\$	220.63	88.25
8207 LEMP GRANT	\$	7,500.00	\$	163.79	\$	3,245.57	\$	4,254.43	56.72
8208 DOM REPP GRANT	\$	10,000.00	\$	3,098.75	\$	7,273.75	\$	2,726.25	27.26
FIRE & EMS	\$	738,881.00	\$	121,645.64	\$	757,070.80	\$	(18,570.40)	(2.51)

FUND #-240 EMS BILLING REVENUES

ACCT#	DESCRIPTION	APPROPRIATED AMOUNT	CURRENT		YTD AMOUNT	BALANCE		% REMAIN.
			PERIOD AMOUNT	AMOUNT		REMAINING		
16040	EMS BILLING REVENUE	\$ 300,000.00	\$ 9,636.85	\$ 45,053.92	\$ 254,946.08	84.98		
	EMS BILLING REVENUES	\$ -	\$ -	\$ 5,444.52	\$ (5,444.52)	(100.00)		
	EMS BILLING - MEDICARE REVENUE	\$ -	\$ -	\$ 3,029.96	\$ (3,029.96)	(100.00)		
	EMS BILLING - MEDICAID REVENUE	\$ -	\$ -	\$ 35,703.92	\$ (35,703.92)	(100.00)		
	EMS REVENUE - COMMERCIAL INSURANCE	\$ -	\$ -	\$ 11,478.35	\$ (11,478.35)	(100.00)		
	EMS REVENUE - SELF PAY	\$ -	\$ -	\$ 100,710.67	\$ 199,289.33	66.42		
	EMS BILLING REVENUE	\$ 300,000.00	\$ 9,636.85	\$ 100,710.67	\$ 199,289.33	66.42		
18990	MISCELLANEOUS REVENUE	\$ -	\$ 323.75	\$ 7,215.00	\$ (7,215.00)	(100.00)		
	5 SALE OF SURPLUS PROPERTY	\$ -	\$ -	\$ 360.00	\$ (360.00)	(100.00)		
	25 CPR CLASS REVENUE	\$ -	\$ -	\$ 55.00	\$ (55.00)	(100.00)		
	99 MISCELLANEOUS REVENUE	\$ -	\$ 323.75	\$ 7,630.00	\$ (7,630.00)	(100.00)		
	MISCELLANEOUS REVENUE	\$ -	\$ 323.75	\$ 7,630.00	\$ (7,630.00)	(100.00)		
	---REVENUE TOTAL---	\$ 300,000.00	\$ 9,960.60	\$ 108,340.67	\$ 191,659.33	63.88		

FUND #-240 EMS BILLING EXPENDITURES

ACCT#	DESCRIPTION	CURRENT			YTD AMOUNT	BALANCE	
		APPROPRIAT ED AMOUNT	PERIOD AMOUNT	AMOUNT		REMAINING	% REMAIN.
32300	EMS BILLING EXPENDITURES						
1100	SALARIES & WAGES - REGULAR	\$ 61,621.00	-	\$ 4,200.47	\$ 57,420.53	93.18	
2100	FICA	\$ 3,911.00	-	\$ 297.98	\$ 3,613.02	92.38	
2210	RETIREMENT -VRS	\$ 4,335.00	-	\$ 356.20	\$ 3,978.80	91.78	
2300	HOSPITAL/MEDICAL PLANS	\$ 9,435.00	-	\$ 786.24	\$ 8,648.76	91.66	
2400	GROUP INSURANCE	\$ 670.00	-	\$ 55.03	\$ 614.97	91.78	
2550	VRS SHORT TERM DISABILITY	\$ 42.00	-	-	\$ 42.00	100	
2710	WORKERS' COMPENSATION INSURANCE	\$ 4,686.00	-	\$ 4,686.00	\$ -	0	
2845	TUITION REIMB	\$ -	-	\$ 1,166.20	\$ (1,166.20)	-100	
3160	PROFESSIONAL SERVICES	\$ -	-	\$ 1,921.00	\$ (1,921.00)	-100	
3310	REPAIR & MAINTENANCE - FACILITY	\$ 15,000.00	\$ 90.00	\$ 1,256.04	\$ 12,368.96	82.45	
5110	ELECTRICAL SERVICE	\$ 12,000.00	\$ 935.62	\$ 5,298.89	\$ 6,701.11	55.84	
5120	PROPANE & HEATING SERVICES	\$ 8,000.00	-	\$ 878.93	\$ 7,121.07	89.01	
5150	WASTE DISPOSAL	\$ 2,000.00	-	\$ 1,040.65	\$ 959.35	47.96	
5160	CABLE/SATELLITE TV SERVICE	\$ 2,000.00	-	-	\$ 2,000.00	100	
5170	INTERNET SERVICE	\$ 1,500.00	-	-	\$ 1,500.00	100	
5210	POSTAL SERVICES	\$ -	-	\$ 7.42	\$ (7.42)	-100	
5230	TELECOMMUNICATIONS PHONES	\$ 6,000.00	-	\$ 961.64	\$ 5,038.36	83.97	
5231	TELECOMMUNICATIONS WIRELESS	\$ -	\$ 240.06	\$ 4,549.21	\$ (4,549.21)	-100	
5305	MOTOR VEHICLE INSURANCE	\$ 5,000.00	-	\$ 712.45	\$ 4,287.55	85.75	
5308	GENERAL LIABILITY INSURANCE	\$ 7,000.00	-	\$ 7,128.00	\$ (128.00)	-1.82	
5650	LODA	\$ 8,000.00	-	\$ 7,656.00	\$ 344.00	4.3	
5810	DUES ASSOCIATION MEMBERSHIPS	\$ 400.00	-	-	\$ 400.00	100	
6001	OFFICE SUPPLIES	\$ 2,000.00	\$ 126.68	\$ 914.10	\$ 1,085.90	54.29	
6005	JANITORIAL SUPPLIES	\$ 3,500.00	-	-	\$ 3,500.00	100	
6007	REPAIR & MAINTENANCE SUPPLIES	\$ 15,000.00	\$ 141.95	\$ 15,141.37	\$ (1,738.05)	-11.58	
6008	VEHICLE FUELS	\$ 20,000.00	-	\$ 7,013.94	\$ 12,986.06	64.93	
6009	VEHICLE POWERED EQUIP SUPPLIES	\$ 15,000.00	-	\$ 55.16	\$ 14,944.84	99.63	
6011	UNIFORMS & WEARING APPAREL	\$ 5,000.00	-	\$ 417.25	\$ 4,582.75	91.65	
6014	OTHER OPERATING SUPPLIES	\$ 40,000.00	\$ (2,208.59)	\$ 2,856.70	\$ 37,143.30	92.85	

6015 EMERGENCY OPERATING SUPPLIES	\$ 1,000.00	\$ -	\$ 1,197.53	\$ (197.53)	-19.75
6020 EMS EQUIPMENT	\$ 32,000.00	\$ 92.00	\$ 960.13	\$ 31,039.87	96.99
6030 FIRE FIGHTING EQUIPMENT	\$ 7,200.00	\$ -	\$ 934.80	\$ 2,021.20	28.07
6140 TRAVEL & MILEAGE	\$ 200.00	\$ -	\$ -	\$ 200.00	100
6143 EDUCATION	\$ 1,500.00	\$ -	\$ -	\$ 1,500.00	100
8202 FURNITURE & FIXTURES	\$ 1,500.00	\$ -	\$ 211.40	\$ 1,288.60	85.9
8215 DRUG SCREENS	\$ 4,000.00	\$ 42.00	\$ 517.50	\$ 3,482.50	87.06
8220 CPR CERTIFICATION	\$ 500.00	\$ -	\$ -	\$ 500.00	100
EMS BILLING EXPENDITURES	300,000.00	-540.28	73,178.23	219,606.09	73.2
---FUND TOTAL---	300,000.00	-540.28	73,178.23	219,606.09	73.2
-EXPENDITURE TOTAL-	300,000.00	-540.28	73,178.23	219,606.09	73.2
---GRAND TOTAL---	0	-10,500.88	-35,162.44	27,946.76	-100

Grants



Laura Nunnally, Interim Fire Chief

Current Grants

LEMPG

- The Local Emergency Management Performance Grant (LEMPG) is provided by the Virginia Department of Emergency Management to assist with funding local Emergency Management Services Departments
- The total grant award is \$15,000 requiring fifty percent of that award to be local match.
- Local match portion is our current Fire Chief's salary.
- Traditionally, we have used this grant to assist with funding services to both our primary and secondary EOC, education for the members of our Emergency Services Department, and educational materials for citizens
- This year, we have used some of these funds to upgrade the technology in the Emergency Management Department and continue the education of our staff.
- In the future, we hope to use these funds to help pay for our Mass Notification System (currently contracted to Everbridge) as well as continue to educate and inform both our staff and citizens about emergency preparedness.

REPP

- The Radiological Emergency Preparedness Program (REPP) is also provided by the Virginia Department of Emergency Management to support the activities of local emergency management agencies
- The annual funding amount received is \$10,000, with \$15,000 being received this year due to only accepting half of the proposed amount in fiscal year 2019.
- No local match
- We are using funds from this grant to fund systems vital to the operation of our Fire & EMS

RSAF

- The Rescue Squad Assistance Fund (RSAF) is provided by the Virginia Department of Health
- The purchase of EMS equipment and vehicles, computers, EMS management programs, courses/classes, and projects benefiting the recruitment and retention of EMS members
- Over the last two fiscal years, King William County has utilized this grant to purchase new apparatus, specifically ambulances, to help our growing EMS presence within the county
- This grant also requires a local match, which we provide through the funding of our Capital Projects

Four For Life

- The Four-For-Life Program is provided by the Virginia Department of Health to provide funding for training of volunteer or salaried emergency medical service personnel as well as the purchase of necessary equipment and supplies
- These funds are split evenly between King William County Fire & EMS, West Point Volunteer Fire Department and Rescue Squad, and Mangohick Volunteer Fire Department. This grant requires no local match.
- Total allotted as of 06/2019- 19,574.88. Per org 6,524.31. Funds roll over if not used
- KWFR used a portion thus far for to train 8 staff (Caroline County EMT course)

Aid to Localities

- The Aid to Localities Program is provided by the Virginia Department of Fire Programs and the Virginia Fire Services Board
- Used for the training of volunteer or career firefighting personnel, funding fire prevention and public safety education programs, purchasing emergency medical care and equipment for fire personnel, or purchasing personal protective equipment, vehicles, equipment and supplies for fire service purposes
- Similar to the Four-For-Life funds, the funds from this program are distributed equally between King William County Fire & EMS, Mangohick Volunteer Fire Department, and West Point Volunteer Fire Department and Rescue Squad.
- Requires no local match
- Total allocation as of 06/2019-43,713.00. Per org 14,569. Funds roll if not used
- KWFR has used a portion of funds for Firefighting equipment



Laura Nunnally, Interim Fire Chief

In Process

AFG

- The Assistance to Firefighters Grant Program (AFG) is issued by the Department of Homeland Security
- Our current request is to replace our 1994 Pierce Fire Engine with a new engine to provide reliable fire coverage throughout the County
- Jurisdiction of under 100,000 residents, we are within an award range of up to \$1 million
- This grant does come with a local match, however because we are a jurisdiction of less than 20,000 residents this match is only five percent
- We are currently working with Vickers Consulting to create our narrative for this grant cycle, very helpful. Have been successful in creating successful applications
- As this has been deemed a priority, we thought it would be wise to enlist assistance to increase our chances of being successful.
- We will receive award information by April, 30th 2020

Fire House Subs Public Safety Foundation

- We recently applied for a Firehouse Subs Public Safety Foundation Grant to assist with the purchase of new fire equipment
- These funds are available to provide lifesaving equipment and prevention education tools to first responders and public safety organizations
- Our current request is to purchase a full set of replacement hose
- Our current hose selection ranges from ten to twenty years old coupled with us having to borrow our 4' LDH from Mangohick Volunteer Fire Department.
- The total of this expenditure for the full complement of hose and accessories is just north of \$20,000
- Award status by end of April, can reapply until we receive. 2 year waiting period

Future Proposals

AFG

- If we are not successful with this year's proposal, we can have Vicker's work on our narrative again next year and resubmit for a nominal fee
- If we are successful, we can apply with a new proposal in FY2021
- Motorola's grant finding network has noted that we can use AFG funds to replace radios
- Radios must be 8 years old, we purchased a large portion of ours in 2013 so by next year we will hit that threshold

VFIRS Hardware Grant

- The Virginia Fire Incident Reporting System (VFIRS) Hardware Grant is provided by the Virginia Department of Fire Programs
- Purchase or upgrade of existing personal computers and/or tablets for proper reporting of incidents under VFIRS.
- We were able to utilize this grant in fiscal year 2019
- Missed the time frame in 2020
- Will reapply for 2021 to continue technological upgrades

Emergency Signal

- The Fire Chief and I are researching funding sources to assist in the installation of an emergency signal at the exit of Station 1
- There is a strong case for the need of this project due to the speed limit and the visibility hazards.
- We have looked into DMV and VDOT grants with no positive results.
- We are continuing to search



Laura Nunnally, Interim Fire Chief

CSX

- CSX has a Pride in Service and Community Service grants we are looking into
- Looking for possible equipment, community outreach, or educational uses for funds
- Currently in talks with the CSX grant staff, will have more information as we move forward

Homeland Security Grant Program

- National priority has been enhancing cybersecurity, including election security
- Our Systems Engineer is currently reviewing the Security Standards Compliance Checklist and Rick profile supplied by our Registrar to see where the County needs to improve in relation to cyber security.
- Once we know where we stand on these areas, Travis and I will discuss how to build a proposal

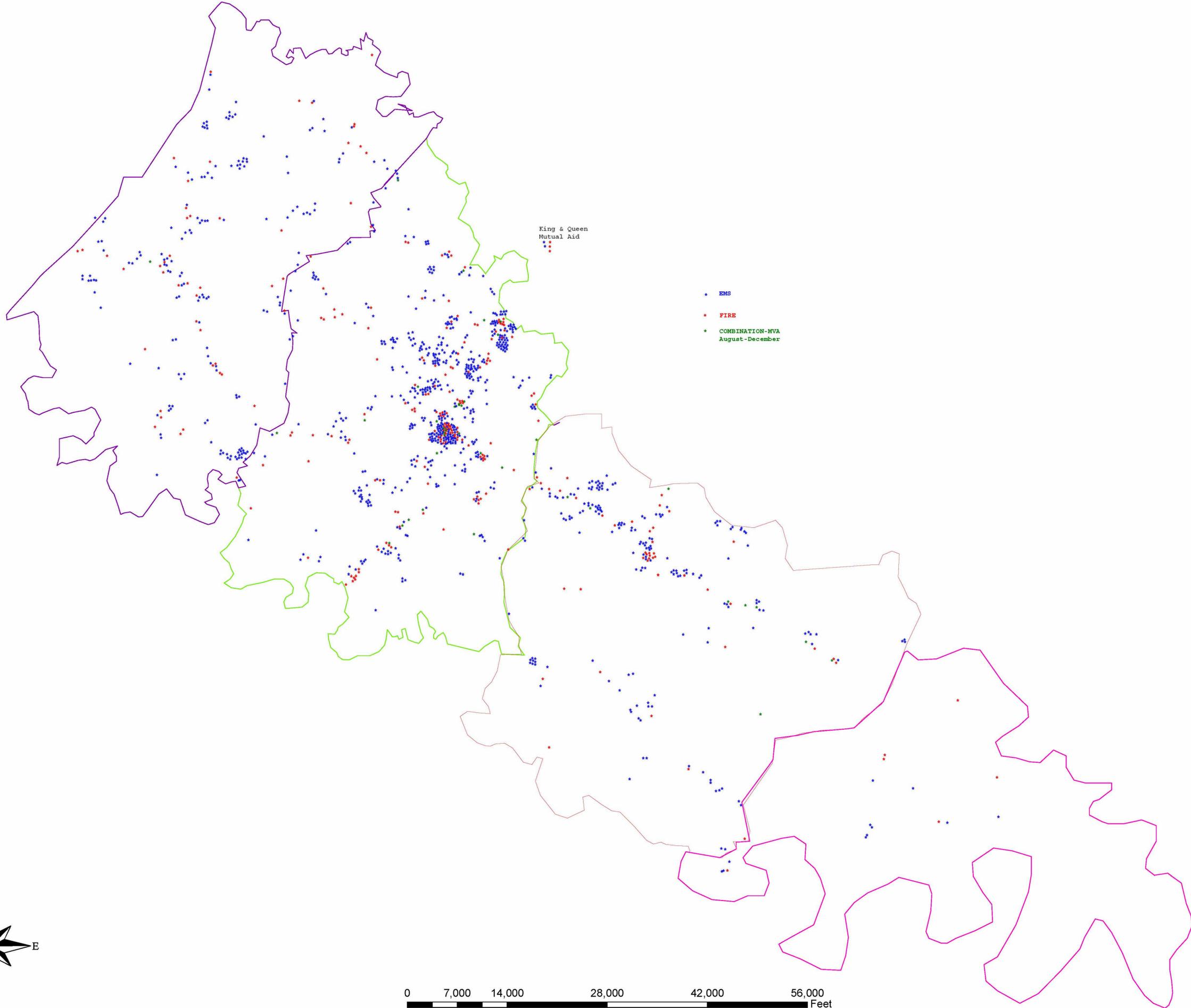
RSAF

- We are reviewing possibilities for reapplying for the RSAF grant this year.
- Current prospects are to assist with the radio replacement or MDCs for our apparatus
- Important to maintain active status in reoccurring grants as it is more difficult to get back in once you have become inactive from active status

SVPP

- School Violence Prevention Program
- Offered by U.S. Department of Justice Office of Community Oriented Policing Services
- Working with the Sheriff's department on possible uses for funds
- One option is the replacement of the rugged laptops and docking stations within the current Sheriff's department vehicles.
- Acquisition and installation of technology for expedited notification (to law enforcement) during an emergency
- These laptops for the delivery of calls for service, check wanted, run vehicle checks, and run reports

Dispatch Call Mapping

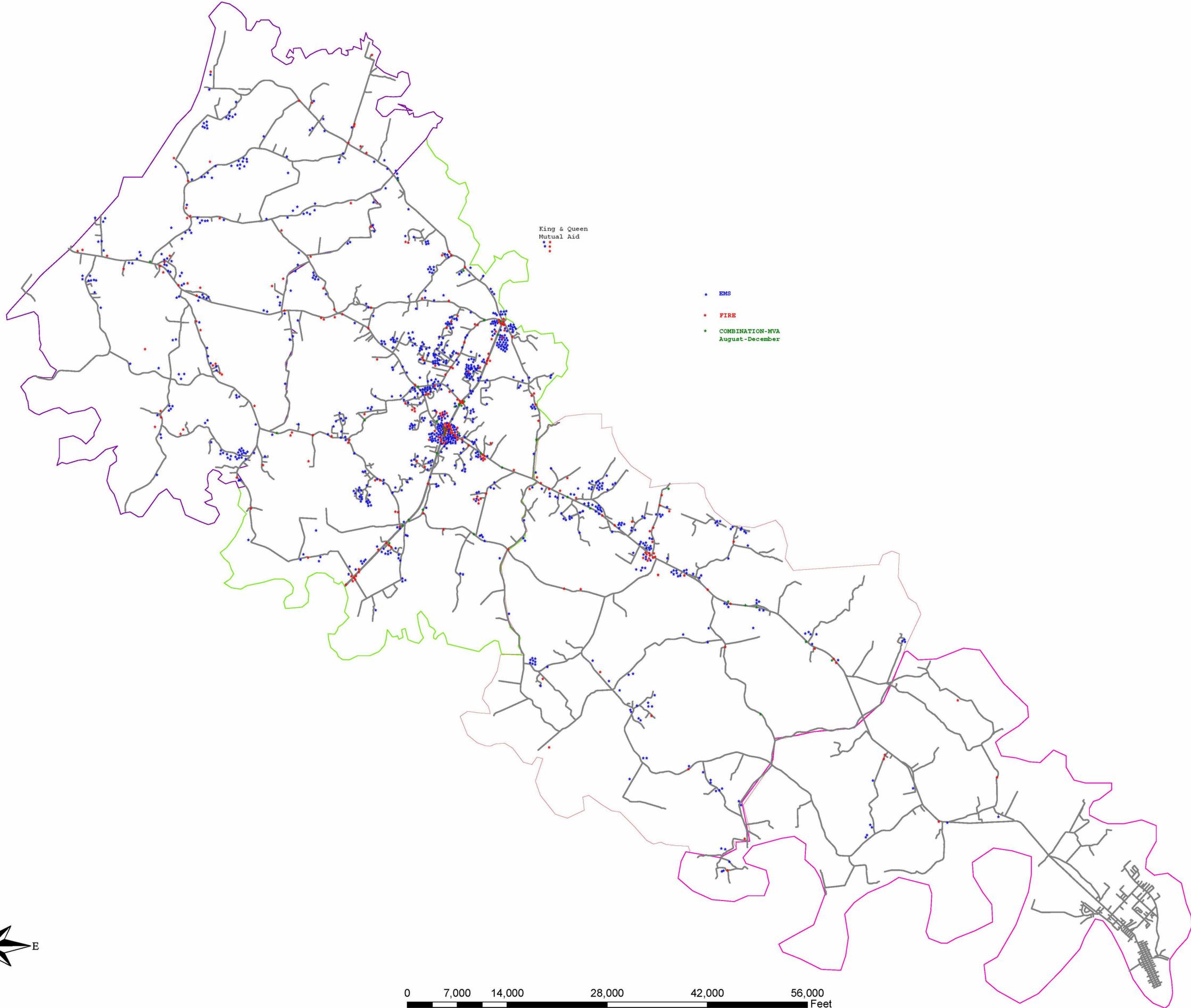


King & Queen
Mutual Aid

- EMS
- FIRE
- COMBINATION-MVA
August-December



0 7,000 14,000 28,000 42,000 56,000
Feet

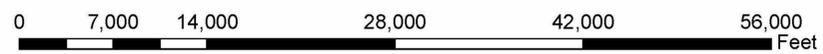
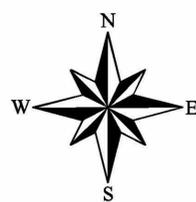


King & Queen
Mutual Aid

- EMS
- FIRE
- COMBINATION-MVA
August-December



0 7,000 14,000 28,000 42,000 56,000 Feet



Driving Time Calculations

Primary Road Response						
Distance/Miles	Speed/MPH	Time/Hrs	Time/Min	65 vs 55 Savings	70 vs 55 Savings	Reckless Driving
						75 vs 55 Savings
5	55	0.09	5.5			
5	60	0.08	5.0			
5	65	0.08	4.6	-0.8		
5	70	0.07	4.3		-1.2	
5	75	0.07	4.0			-1.5
7.5	55	0.14	8.2			
7.5	60	0.13	7.5			
7.5	65	0.12	6.9	-1.3		
7.5	70	0.11	6.4		-1.8	
7.5	75	0.10	6.0			-2.2
10	55	0.18	10.9			
10	60	0.17	10.0			
10	65	0.15	9.2	-1.7		
10	70	0.14	8.6		-2.3	
10	75	0.13	8.0			-2.9

Secondary Road Response						
Distance/Miles	Speed/MPH	Time/Hrs	Time/Min	50 vs 40 Savings	55 vs 40 Savings	Reckless Driving
						60 vs 40 Savings
5	40	0.13	7.5			
5	45	0.11	6.7			
5	50	0.10	6.0	-1.5		
5	55	0.09	5.5		-2.0	
5	60	0.08	5.0			-2.5
7.5	40	0.19	11.3			
7.5	45	0.17	10.0			
7.5	50	0.15	9.0	-2.3		
7.5	55	0.14	8.2		-3.1	
7.5	60	0.13	7.5			-3.8
10	40	0.25	15.0			
10	45	0.22	13.3			
10	50	0.20	12.0	-3.0		
10	55	0.18	10.9		-4.1	
10	60	0.17	10.0			-5.0

Velocity conversion is 1.47 times speed = feet per second traveled- 68 mph = 100 feet per second

Try to streamline your exiting the station procedures/methods rather than speeding

Due Regard does apply to all licensed emergency vehicles

Atlantic Broadband



Laura Nunnally, Interim Fire Chief

Atlantic Broadband

In order to serve King William County in a much more efficient way we have requested quotes from Atlantic Broadband to provide Fire Station 1 with Fiber service. The service will provide internet access, phone service and cable television.

The internet service:

- Receive Emergency Calls.
- Mobile devices used by the staff in the emergency vehicles.
- Mandatory reporting.
- All for an additional EOC

Phone service:

- Uninterrupted voice calls that cellular phones struggle with today.
- Voicemail
- Phones for EOC

Cable television

- News and weather Updates
- Needed for EOC

At the moment Atlantic Broadband is the only reliable provider of these services in the area. We have asked them to provide us with multiple quotes so we can choose what will work best for us.

AGENDA ITEM 4.b.



King William County
Est. 1702

Board of Supervisors

Community Development

William L. Hodges, First District
Travis J. Moskalski, Second District
Stephen K. Greenwood, Third District
C. Stewart Garber, Jr., Fourth District
Edwin H. Moren, Jr., Fifth District

DATE: March 9, 2020
TO: King William County Board of Supervisors
FROM: Ron Etter, Director of Community Development
SUBJECT: Resolution for Large-Scale Power Stations

SUMMARY

At the February 26, 2020 Planning Commission work session, the Commissioners unanimously agreed to recommend that the Board of Supervisors review the standards, application procedures, and land use suitability relating to Large-Scale Power Stations. The Commission recommends that application reviews and public hearings for new Large-Scale Power Stations be halted until further notice.

The commission feels that this step is necessary to allow for a thorough review of the impact solar facilities have on the County and how Solar fits into the future land use of the County. This review should include recommendations for revisions to the performance standards for Solar or removal of Solar Facilities as a permitted use in the County.

This resolution is intended to apply to conditional use permit applications for Solar Power Stations as defined in the Code of King William, to wit:

“Solar power station means a system consisting of solar panels, modules, accessory structures and related equipment (e.g., heat exchanger, pipes, inverter, wiring, storage) that collects solar energy and converts it into heat and/or electricity. It is designed to provide service at the utility-scale. This definition is not intended to regulate solar structures on individual residential or business properties primarily serving the energy needs for the subject property, so long as such structures meet applicable requirements of local, state and federal regulation.”

Utility-scale solar facilities are those that sell power to the grid. The Department of Environmental Quality (DEQ) defines Small Renewable Energy Projects (Solar) as solar energy projects at 150 mega-watts or less. For the purposes of this resolution the facility size is not relevant.



King William County
Est. 1702

Board of Supervisors

Community Development

William L. Hodges, First District
Travis J. Moskalski, Second District
Stephen K. Greenwood, Third District
C. Stewart Garber, Jr., Fourth District
Edwin H. Moren, Jr., Fifth District

The Planning Commission intends to form a subcommittee to examine Solar in the County and develop recommendations for the Board of Supervisors. The subcommittee should be established at the Planning Commission's next regular meeting scheduled for March 12, 2020. Time frames for completing the review and developing recommendations will be determined by the subcommittee.

RESOLUTION 20-XX

Large-Scale Solar Power Stations

1
2
3 **WHEREAS**, the Planning Commission voted unanimously on February 26, 2020 to request
4 that the Board of Supervisors review the standards and acceptance of permit applications for
5 large-scale solar power stations and further that it does not intend to schedule public hearings on
6 such applications until further notice.

7 **NOW, THEREFORE, BE IT RESOLVED**, that the King William County Board of Supervisors is
8 reviewing the acceptance and standards under which applications for large-scale solar power
9 stations are reviewed and further that it does not intend to refer such applications to the Planning
10 Commission or schedule public hearings on such applications until further notice. The King William
11 County Board of Supervisors voted unanimously on March 23, 2020 to approve this request of the
12 Planning Commission.

DRAFT

AGENDA ITEM 4.c.
Dog Park Project
No Attachment



In partnership
with



About Us: Nestlé Purina

Mission: At Nestlé Purina PetCare, we are committed to helping pets live longer, happier and healthier lives through proper nutrition and care. We have a fundamental responsibility to provide safe, palatable and nutritious products made to the highest standards of quality and safety. We understand and share the strong feelings of love and respect pet owners develop for their pets, because most of us are pet owners, too. Therefore, at Nestlé Purina PetCare, the welfare of dogs and cats is our top priority and a responsibility we will not compromise..



About Us:
King William County Parks and Recreation

The MISSION of King William Parks and Recreation Department is to provide and maintain a comprehensive program of leisure opportunities, facilities and services that enhance the quality of life in King William County



The Problem: How can we help the community?



Travel / Time

More and more people are traveling to Mechanicsville to socialize their furry friends.

28 Miles round trip

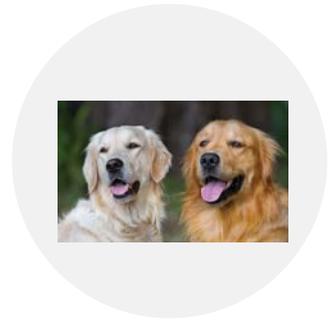
36 minutes round trip

Economic impact as well



Environment

Proper etiquette is expected at the dog park. Picking up trash and waste. Current citizens are allowing their dogs to use the baseball fields to go to the bathroom.



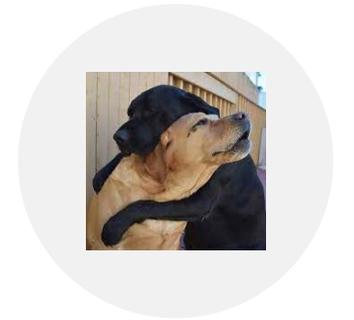
Socialization

Socializing at the Park? Dog lovers alike come to the park for the opportunities to meet others.



New Terrain

Our 2 separate dog locations allow for large dogs to play in one area and smaller ones in a safer, less intimidating one. Having dedicated play areas, setting us apart from other dog parks.

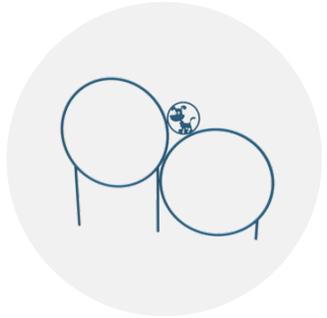


Industrial Impact

Even though we live in a rural area, a large majority of pet owners do not allow their dogs to be off a leash.



The Solution:



Revenue

\$5.00 per year per dog license

Must have it to enter dog park

Tax Revenue from people spending in King William



Shaded areas

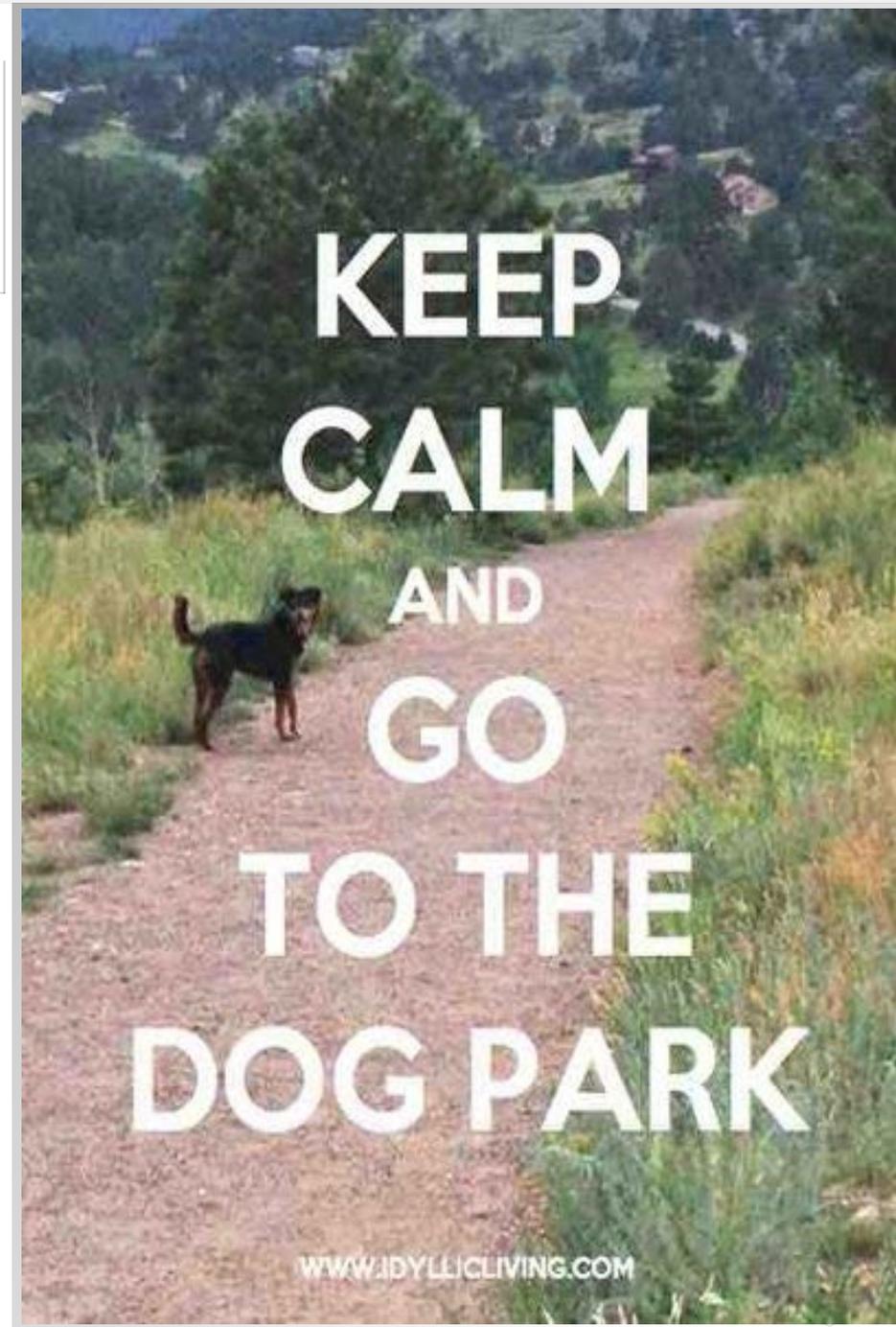
While dogs play, owners rest on benches in shaded areas.

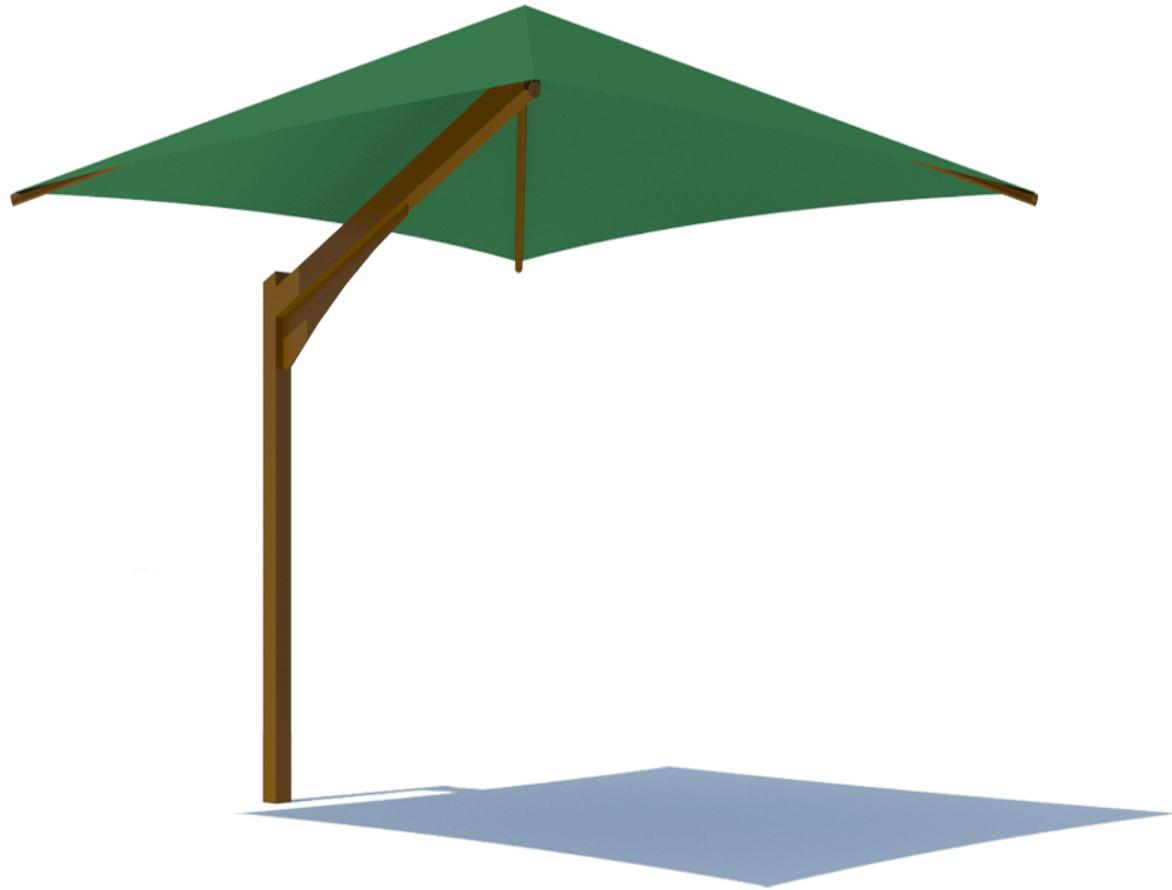


Healthy Dogs

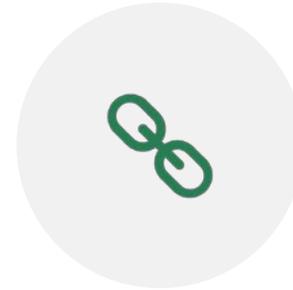
A Healthy dog is a happy dog

A happy dog is a happy owner



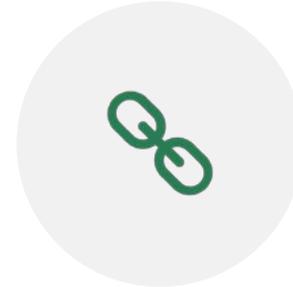


Amenities



Cantilever Shade Structure

Ideal for areas requiring shade but with limited space for columns or posts



Utilizes vertical supports vs horizontal posts



Very popular in recreation facilities and parks



Socializing

Why benches?

Provides opportunities to rest

Providing somewhere to sit will allow people to spend more time in the park

Reduces isolation

Gets you more active

Buddy Benches are specifically designed to encourage friendships-especially among children-outside the dog area



Market Opportunity

- **Why Should We Have More Dog Parks?**
- **Dog parks can act as a gathering spot for pet parents. They bring their pets to the park to get exercise and socialize with other pets. Dog owners do the same thing. While the dogs are playing, community members are more likely to form relationships, participate in conversation and exchange community information such as events, doctors, and veterinarians.**
- **As leash laws continue to become increasingly restrictive, many community public leadership committees are seeing dog parks as a way to let dogs run free without penalty to pet owners or damage to private property. Dog parks also promote safety because the pet owners are not walking on busy streets.**
- **Public canine parks allow dogs to get ample off-leash exercise and social activity with other animals. When dogs get the adequate physical and mental exercise they need, humans are able to notice a decrease in the level of troublesome behavior from their dogs which will benefit society as well.**





**Durable and safe
fencing**

Funding



Nestle Purina

In meeting with the plant manager, he expressed his desire to be a community partner.



Nestle visibility in our communities

Promotional opportunity for the county and a nationally recognized business



■ 1 ■ 2 ■ 3

• **Adventure Playgrounds:**

- 2 Umbrella Cantilever 10 x 10 x 9
- 2 Sit and stay Benches
- 2 Fire Hydrants
- 1 Buddy Bench
- 1 (2 Hoop Jump)
- 1 Large Hoop Jump
- 2 Trash Receptacles

• **Fence Scapes**

- 346 Linear Foot Black Chain link fence
- 48 inches Tall
- 3 X 3 foot gates
- 2 pair of 3 foot gates



DOG PARK RULES

- **Users of the dog park do so at their own risk. King William County shall not be liable for any injury or damage caused by any dog in the dog park.**
- **The dog park is for dogs, their owners, and those accompanying them. No other use is allowed.**
- **No animals other than dogs are permitted.**
- **All dogs must be licensed and vaccinated for rabies. Dogs should wear a visible dog license and rabies tag.**
- **Dogs under (4) four months of age and female dogs in heat are not allowed in the park.**
- **Dogs must be on a leash when entering and exiting the dog park.**
- **Dogs must be under the control of their owner and in view of their owner at all times.**
- **Children under (16) sixteen years of age must be accompanied by an adult. It is recommended that**
- **children under (5) five years of age not enter the dog park.**
- **Each owner is limited to a maximum of two dogs.**
- **Owners must pick up and dispose of their dog's waste and fill any holes dug by dogs under their control.**
- **Food, treats, alcohol and the use of tobacco are prohibited.**
- **Dogs must be removed from the dog park at the first sign of aggression. Dogs with a history of aggression are prohibited.**
- **Owners are responsible for any injuries caused by dogs under their control.**
- **All dog bites and serious injuries occurring in the dog park must be reported to Animal Control at (804)**
- **Any damage or unsafe conditions should be reported to the Parks and Recreation Department at (804) 769-4981.**
- **Those not following the rules will be asked to leave the dog park immediately. We sincerely hope you enjoy your visit and will come back again.**

Thank You



AGENDA ITEM 4.d.
Update on FY21
Budget Activities
No Attachment

Budget Information



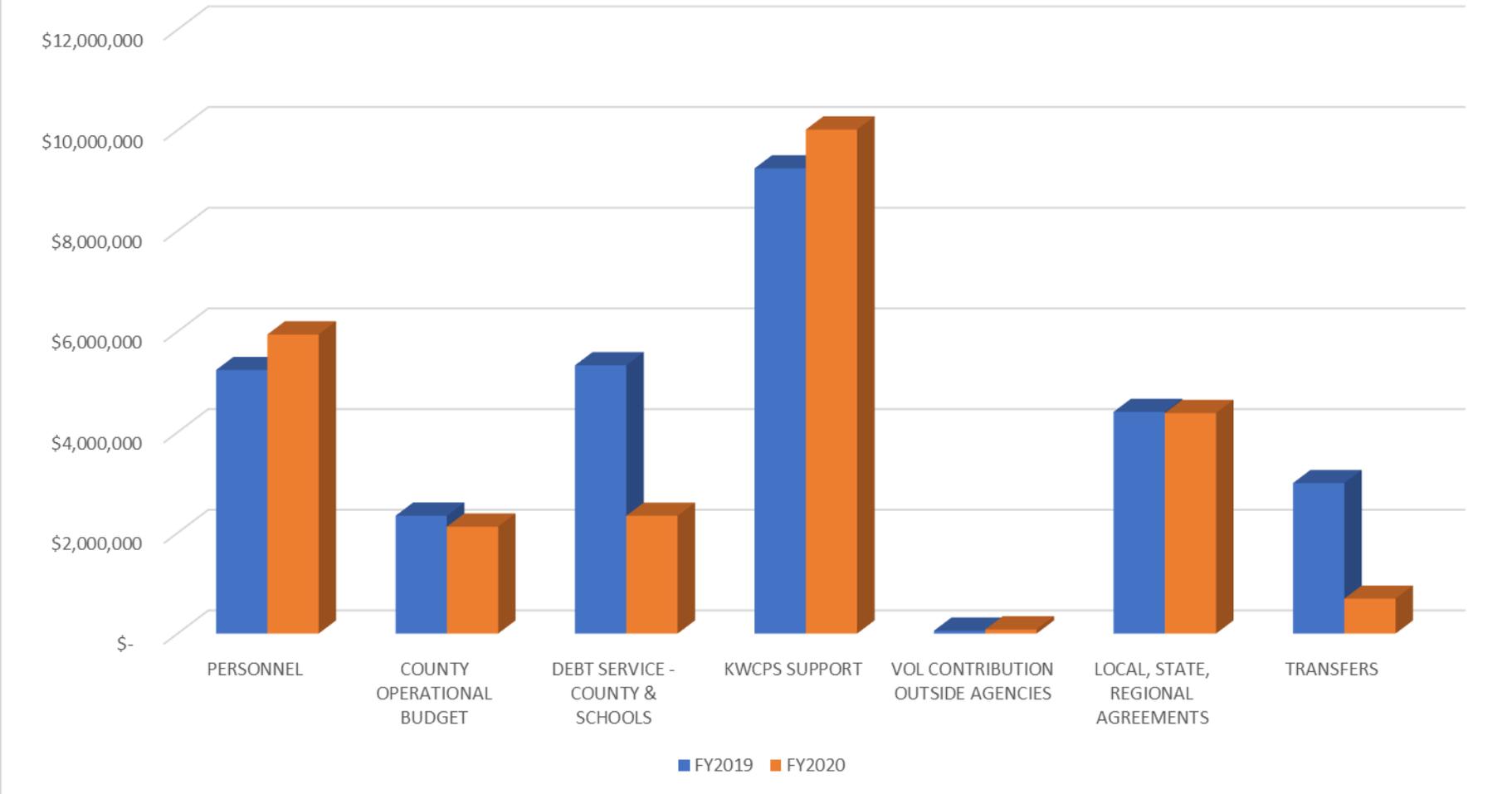
MARCH 9, 2020

BOBBIE TASSINARI, COUNTY ADMINISTRATOR

County Operational Funding

- FY2019 County's Operational Funding was 7.9% of Total Budget
- FY2020 County's Operational Funding is 8.3% of Total Budget
- Operational Funding includes; reassessment costs, IT support/annual software maintenance, insurance on vehicles and buildings, telecommunications, fuel, utilities, legal services, auditing services, broadband, maintenance service contracts, repairs, janitorial supplies, postal costs, training, memberships, lease and rentals, uniforms, advertising, etc.

GENERAL FUND - APPROPRIATED AND ACTUAL



REVENUE - FUND 100	FISCAL YEAR 2020		FISCAL YEAR 2019	
	APPR	ACTUAL TO DATE	APPR	ACTUAL
REAL PROPERTY TAXES	\$ 12,382,831.00	\$ 5,882,505.00	\$ 12,241,200.00	\$ 11,966,395.00
PUBLIC SERVICE CORP.	\$ 440,000.00	\$ 402,654.00	\$ 450,000.00	\$ 418,543.00
PERSONAL PROP TAXES	\$ 3,628,410.00	\$ 3,384,403.00	\$ 3,205,800.00	\$ 3,617,824.00
MACHINERY & TOOLS	\$ 1,716,819.00	\$ 1,893,465.00	\$ 1,648,300.00	\$ 1,721,401.00
PENALTIES & INTEREST	\$ 306,000.00	\$ 190,476.00	\$ 306,000.00	\$ 328,897.00
LOCAL SALES TAX (1%)	\$ 1,347,820.00	\$ 801,289.00	\$ 1,286,400.00	\$ 1,389,581.00
CONSUMER UTILITY TAXES	\$ 220,000.00	\$ 139,935.00	\$ 215,500.00	\$ 255,977.00
UTILITY GROSS RECEIPTS	\$ 70,000.00	\$ 26,362.00	\$ 62,000.00	\$ 50,430.00
BPOL TAXES	\$ 375,000.00	\$ 75,717.00	\$ 350,000.00	\$ 451,190.00
MOTOR VEHICLE LICENSES	\$ 415,000.00	\$ 368,993.00	\$ 412,000.00	\$ 438,319.00
BANK STOCK	\$ 104,000.00	\$ -	\$ 165,000.00	\$ 119,162.00
RECORDATION AND WILLS	\$ 205,000.00	\$ 195,756.00	\$ 165,000.00	\$ 226,000.00
MEALS TAX	\$ 420,000.00	\$ 253,542.00	\$ 439,300.00	\$ 400,794.00
ANIMAL LICENSES	\$ 5,750.00	\$ 3,775.00	\$ 5,750.00	\$ 5,772.00
LAND USE FEES	\$ 20,000.00	\$ 41,829.00	\$ 22,500.00	\$ 26,032.00
TRANSFER FEES	\$ 500.00	\$ 492.00	\$ 500.00	\$ 718.00
PERMITS & OTHER LICENSES	\$ 294,500.00	\$ 242,743.00	\$ 268,500.00	\$ 289,167.00
FINES & FORFEITURES	\$ 80,500.00	\$ 43,450.00	\$ 80,500.00	\$ 81,656.00
REVENUE FROM USE OF \$	\$ 75,000.00	\$ 87,320.00	\$ 55,000.00	\$ 137,298.00
REVENUE FROM PROPERTY	\$ 50,000.00	\$ 36,556.00	\$ 50,000.00	\$ 60,390.00
COURT COSTS	\$ 18,900.00	\$ 2,419.00	\$ 18,500.00	\$ 17,014.00
COMM. ATTY. FEES	\$ 1,250.00	\$ 833.00	\$ 1,250.00	\$ 1,961.00
CHARGES FOR LAW ENFORCEMENT	\$ 300.00	\$ 244.00	\$ 300.00	\$ 329.00
CHARGES - COMM. DEV.	\$ 750.00	\$ 355.00	\$ 750.00	\$ 1,383.00
PRIOR YR REFUNDS	\$ 3,500.00	\$ 2,552.00	\$ 5,000.00	\$ -
LOCAL REV. AGREEMENTS	\$ 400.00	\$ 3,449.00	\$ 3,900.00	\$ 21,148.00
RECOVERED COSTS	\$ 44,800.00	\$ 16,362.00	\$ 44,800.00	\$ 42,391.00
NON-CATEGORICAL AID	\$ 1,570,331.00	\$ 1,323,725.00	\$ 1,570,331.00	\$ 1,534,701.00
CONSTITUTIONAL OFFICES	\$ 1,340,085.00	\$ 632,074.00	\$ 1,303,430.00	\$ 1,287,819.00
OTHER CATEGORICAL AID	\$ 127,300.00	\$ 82,736.00	\$ 130,300.00	\$ 162,422.00
PUBLIC SAFETY	\$ 50,000.00	\$ 34,244.00	\$ 15,000.00	\$ 54,374.00
FUND TRANSFERS	\$ 260,391.00	\$ -	\$ 2,942,848.00	\$ 2,942,848.00
APPR. BUDGET	\$ 25,575,137.00		\$ 27,465,659.00	
ACTUAL BUDGET REC'D		\$ 16,170,255.00		\$ 28,051,936.00

Fiscal Years 2020 and 2019 Revenues By Cost Category

Note: Fund Transfers category in Fiscal Year 2019 includes funding for pay off of long term debt and strategic refinancing of three long term loans.

Fiscal Years 2020 and 2019 General Fund Appropriated and Actual Expenditures

CATEGORY	FY2019 ACTUAL EXPENDITURES	FY2020 APPROPRIATED	NOTES
Personnel:			
Salaries	\$ 3,769,936	\$ 4,322,243	FY2020 - Personnel were given up to a 5% merit and COLA increase. FYI - VRS Retirement, FICA are impacted with payroll increases; new staff coming onboard are younger and utilizing the family plans more so than the older employees.
Benefits	\$ 1,466,106	\$ 1,619,371	
Subtotal	\$ 5,236,042	\$ 5,941,614	
Operational Budget	\$ 2,340,863	\$ 2,123,760	FYI - All operational costs such as telecommunications, IT, insurance, fuel, service contracts, training, office supplies, Legal services, assessor services, rentals, furniture, etc.
Subtotal	\$ 2,340,863	\$ 2,123,760	
Debt Service:			
County Debt	\$ 745,967	\$ 746,986	
KWCPS Debt	\$ 4,584,275	\$ 1,593,705	FY2019 - Paid off two long term debts for Schools and refinanced three (2-Schools and 1-County) long term debt.
Subtotal	\$ 5,330,242	\$ 2,340,691	
KWCPS Support:			
Operational Support	\$ 9,135,061	\$ 10,012,161	FYI - Strictly operational support; does not include debt service or capital request.
Capital Support	\$ 105,909	\$ -	FYI - Any debt service included in School support MUST fit within constraints of Split Levy funding.
Subtotal	\$ 9,240,970	\$ 10,012,161	
Voluntary Contribution to Outside Agencies:			
Economic Development Authority	\$ 6,228	\$ 30,000	
Arts Alive	\$ 10,000	\$ 9,500	FYI - County allocates 50% and the balance is matched.
Bay Aging	\$ 7,800	\$ 7,800	
Bay Transit	\$ 25,350	\$ 26,667	FYI - Funding levels is split between King & Queen and the Town of West Point. Any changes made to this allocation impact the other parties and vice versa.
Indian River Humane Society	\$ 1,500	\$ 1,500	
KW Senior Center	\$ 1,600	\$ 1,600	
LegalAid	\$ 5,440	\$ 5,440	
Subtotal	\$ 57,918	\$ 82,507	

Fiscal Years 2020 and 2019 General Fund Appropriated and Actual Expenditures

Local, Regional and State Agreements:			
Med-Flight Program	\$ 700	\$ 600	
Peninsula EMS Council	\$ 2,113	\$ 2,162	
Dept of Forestry	\$ 9,698	\$ 9,698	
Adult Regional Security Center	\$ 870,131	\$ 903,209	
Probation/Pre-Trial Services	\$ 12,500	\$ 20,475	
Juvenile Detention Homes	\$ 59,518	\$ 59,221	
Medical Examiner	\$ 100	\$ 300	
VPPSA	\$ 867,434	\$ 884,681	Will increase in FY2021-FY2026 due to agreement to fund portion of maintenance building currently under construction.
Three Rivers Health Department	\$ 140,000	\$ 140,000	
Middle Peninsula-Northern Neck Community Services Board	\$ 55,325	\$ 60,624	
Rappahannock Community College	\$ 7,815	\$ 8,635	
Pamunkey Regional Library	\$ 420,360	\$ 440,481	
Middle Peninsula Regional Airport	\$ 30,000	\$ 30,000	
Middle Peninsula Planning Commission	\$ 19,900	\$ 35,437	FYI - Includes more than just membership to MPPDC.
Three Rivers Soil and Water Conservation Board	\$ 5,000	\$ 5,000	
Cooperative Extension Service	\$ 23,776	\$ 41,936	FYI - On a reimbursement basis.
Hanover County Radio Support	\$ 353,069	\$ 360,859	
King William Volunteer Fire and Rescue Direct Contribution	\$ 99,436	\$ -	FY2020 - No longer an organization that runs fire and ems calls.
Mangohick Volunteer Fire and Rescue Direct Contribution	\$ 92,680	\$ 92,680	
West Point Volunteer Fire and Rescue Direct Contribution	\$ 273,840	\$ 273,840	
Walkerton Volunteer Fire Department Direct Contribution	\$ 39,320	\$ 39,320	
Mattaponi Volunteer Fire and Rescue Direct Contribution	\$ 39,320	\$ -	FY2020 - No longer funding organization.
Town of West Point Unified Tax Levy	\$ 155,310	\$ 159,969	FYI - Contract approved for 10 years.
VPA - Social Services Support	\$ 227,219	\$ 197,078	
CSA - Childrens Services Act	\$ 434,153	\$ 450,000	
Victim Witness	\$ 3,505	\$ 3,505	
VJCCCA	\$ 18,850	\$ 18,850	
Regional Animal Shelter	\$ 142,394	\$ 142,394	
Subtotal	\$ 4,403,466	\$ 4,380,954	
Transfers:			
County Capital Projects	\$ 2,990,000	\$ 693,450	FY2019 - Larger amount due to setting aside \$2M for infrastructure improvements.
Subtotal	\$ 2,990,000	\$ 693,450	
TOTAL	\$ 29,599,501	\$ 25,575,137	

Fiscal Year 2020 through 2018 KWCPS Financial Support

CATEGORY	FISCAL YEAR 2020		FISCAL YEAR 2019		FISCAL YEAR 2018	
	APPR	ACTUAL TO DATE	APPR	ACTUAL	APPR	ACTUAL
KWCPS - OPERATIONS - FUND 205						
KWCPS OPERATIONS						
REVENUE - FUND 205	\$ 26,662,546	\$ 17,418,219	\$ 23,725,980	\$ 25,902,259	\$ 23,224,944	\$ 25,180,051
Revenue - Fund 205 - Other Portion	\$ 112,900	\$ 157,065	\$ 127,200	\$ 200,527	\$ 118,100	\$ 146,366
Revenue - Fund 205 - Local Portion (Includes States Sales Tax and Debt Service)	\$ 13,891,176	\$ 8,906,044	\$ 13,370,335	\$ 13,459,398	\$ 13,219,816	\$ 13,069,271
Revenue - Fund 205 - State Portion	\$ 11,701,880	\$ 7,166,657	\$ 11,187,920	\$ 11,413,198	\$ 10,950,650	\$ 11,088,630
Revenue - Fund 205 - Federal Portion	\$ 956,590	\$ 1,188,454	\$ 957,230	\$ 829,135	\$ 894,760	\$ 875,785
KWCPS OPERATIONS						
EXPENDITURES - FUND 205	\$ 26,670,406	\$ 13,582,805	\$ 23,725,980	\$ 25,837,257	\$ 23,224,944	\$ 25,180,051

FY2020 – KWCPS Operational Support \$10,012,161 + Debt Service \$1,593,705 + Share of Tax Sales Tax \$2,285,310

Split Levy Impact to KWCPS Funding

- Legislation cites no TWP funding for Real Properties be allocated to KWCPS financial support.
- Split Levy funding dollars available to KWCPS must cover operational needs, capital needs and annual debt service.
- Legislation dictates revenue categories; such as BPOL, Local Sales Tax, etc. that may be used for funding without impact to TWP.
- If County provides other funds (outside of split levy revenue) in support of KWCPS, then a proportional payment calculated from the total amount is required to be paid to the TWP.
- Projected revenue numbers are generated through historical trends, COR input, State reports, etc.
- Board of Supervisors appropriates through the budget process funding levels from all applicable revenue categories for KWCPS annually.
- Appropriation means “up to”. If revenue is collected at a lower level than expected, KWCPS receives collected amount. If revenue is collected at a higher level (except Real Properties) than expected, KWCPS still receives appropriated amount.
- At year-end County staff reconcile the Split Levy revenue to ensure KWCPS receives their correct share of the revenue received and the TWP is not owed any monies.
- This information is shared with TWP, KWCPS and Board of Supervisors in October of each year. Any funds due to KWCPS are identified as Restricted General Fund dollars and included in the CAFR Report.
- These Restricted General Fund monies are available for KWCPS operational and capital needs. Request must be made to the Board of Supervisors to expend these funds.

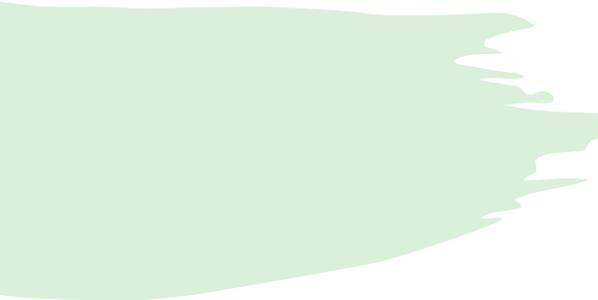
County and KWCPS Debt Service

- **County Debt:**

- County has six (6) outstanding loans
- County refinanced three (3) including Schools in FY 2018-2019
- County will pay off –
 - Sona Bank in FY24
 - Series 2012 in FY 26
 - Series 2002 in FY29
 - BOA Lease in FY30
 - Series 2006C in FY30
 - Series 2017B in FY33

- **KWCPS Debt:**

- Schools have six (6) outstanding loans
- County paid off two School loans early in FY2019
- School will pay off -
 - Series 2003 in FY24
 - Series 2004A in FY25
 - Series 2010 in FY27
 - Series 2013 in FY30
 - Series 2017B in FY33
 - Series 2017 in FY38



Needs Critical To Improving Business Processes

- Financial Software System Replacement
- Assessors Software System Replacement
- CivicClerk platform for Boards and Commissions
- County website Upgrade
- Tough Books for Patrol Cars
- Next Gen 9-1-1 Fiber and Equipment (VITA and AT&T)
- Radio Units Replacement Schedule
- Radio Coverage Project Contracts with Cell Towers



Maintenance of Existing Business Processes

- Master Utility Plan
- Classification and Compensation Review
- Financial Policies to Guide Staff and Future Boards
- Ordinances (ALL) Updated
- Updating of Comprehensive Plan
- Emergency Operations Plan

AGENDA ITEM 5.
BoS Requests