Halifax County

FIRE & EMS STUDY



In consultation with the Virginia Department of Fire Programs and the Virginia Department of Health's Office of Emergency Medical Services.



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The group above is herein after referred to as "Study Team."

ACKNOWLEDGMENT

The Virginia Fire Services Board would like to extend thanks to the following organizations and individuals for their contribution to this study:

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Scottsburg Fire Department Triangle Vol. Fire Department

Turbeville Fire-Rescue Liberty Vol. Fire Department

Virgilina Vol. Fire Department Oak Level Vol. Fire Department

Clover Vol. Fire Department

^{*}The Study Team met with Scott Simpson, Halifax County Administrator until 8/4/25.

EXECUTIVE SUMMARY

This report documents the findings and recommendations for the Halifax County Fire and Emergency Medical Services (EMS) Study. This study and the information contained herein should not be construed as legal advice or as binding recommendations for Halifax County. This report provides guidance to the Halifax County Board of Supervisors, the Halifax County Administrator, its fire and EMS organizations, and other stakeholders in the community regarding public safety. Halifax County should strive to meet and/or exceed the recommendations contained in this report. These recommendations could enhance the service provided to those dialing 911 in Halifax County.

This study was requested by a resolution of the Halifax County Board of Supervisors to analyze the following working areas which include:

- Organization
- Budget and Administration
- Training
- Delivery of Services/staffing
- Fleet Design and Management (Equipment/Apparatus)
- Emergency Medical Advisory Committee
- Halifax County Fire Commission
- Logistics of Apparatus and Staffing

The study was conducted by the Virginia Fire Services Board, in partnership with the Virginia Department of Fire Programs and the Virginia Department of Health's Office of Emergency Medical Services. The Virginia Department of Forestry was also represented by a member of the Virginia Fire Services Board as noted above. The above referenced working areas served as a guide for the study team to identify issues, evaluate current fire/EMS operations, and make recommendations to improve Halifax County fire and rescue services.

Halifax County currently has an Emergency Services Coordinator that coordinates public safety for the county and advises the County Administrator on the fire and EMS functions. This position also oversees a limited number of career EMS employees. Outside of this role, no formal oversight is provided by Halifax County over fire and EMS entities operating within the county. Of note, the Town of South Boston provides both career and volunteer fire services within town limits and to certain areas of the county. The study team identified several areas for Halifax County to examine and improve on related to fire and EMS services.

Radio communications within the county are a significant concern. Reports indicate that there are profound difficulties using the current system, including transmitting from within structures. This places first responders at risk and must be addressed. Further, Halifax County lacks a specified accountability system to track personnel on working incidents such as structure fires. This is outside of national safety standards and presents undue risk for incident commanders and the personnel they lead.

The current structure of fire and EMS in Halifax County is unclear and involves an unreasonable number of people making decisions for local departments. Halifax County should formally

establish in county ordinance the Fire and EMS Commission to serve as the official advisory body to the Halifax County Board of Supervisors. This commission should review all requests related to fire and EMS prior to it being heard by the board. Further, the role of the Emergency Services Coordinator should be clarified to ensure that daily job realities are noted, and maximum support is provided to fire and EMS departments.

Current trends related to volunteer fire and EMS providers, as well as fire and EMS call data, suggest that additional review should be considered related to staffing. Halifax County should consider whether additional paid career staff should be hired to address gaps in coverage for emergency medical services (EMS). Further, consideration should be given to employing these personnel as cross-trained fire and EMS providers. Halifax County could also strengthen recruitment and retention initiatives for volunteer personnel. Volunteer first responders are a cost-effective means to provide critical services. However, these volunteer agencies need additional incentives to retain qualified personnel and recruit new members.

As the cost of fire apparatus and equipment grows, Halifax County should consider providing additional financial support to the volunteer fire and EMS departments serving the citizens of the county like other county level departments. The county should reexamine the current capital improvement program to ensure effective replacement of critical fire apparatus and equipment. The county should also require independent audits of all entities receiving taxpayer dollars to ensure maximum transparency. Finally, Halifax County should provide greater grant application assistance to the local fire and EMS departments.

To ensure first responders meet the needs of local citizens during critical emergencies, the Fire and EMS Commission and Emergency Services Coordinator should strengthen training for both fire and EMS providers. This includes expanding course options in the area, partnering with local entities such as the school district and hospital, and ensuring that certain positions have minimum training qualifications.

A transparent and comprehensive review of the apparatus fleet and equipment should be undertaken to triage immediate needs. This will ensure no gaps exist for fire and EMS protection. The county should take inventory of current resources and ensure critical resources are slated for future replacement in partnership with the departments. Further, the county should ensure equipment meets national safety standards to protect both the public and the first responders.

Other recommendations, including cancer prevention, provider mental health and resiliency, incident reporting, and compliance with regulations, are also recommended for Halifax County.

METHODOLOGY

The following is an overview of the study process:

PHASE I: INITIATE PROJECT

Objectives: Initiation of Study

To initiate the study, the Halifax County Administrator sent a letter, on behalf of the Halifax County Board of Supervisors, to the Virginia Fire Services Board requesting a review of the fire and EMS system in the county (Reference Appendix A).

A study team was convened and began reviewing county-submitted data including the self-assessment questionnaire completed by the county. The team also began collecting and reviewing existing data, memorandums of understanding and relevant policies and procedures.

As part of Phase I, the study team met with leadership from Halifax County to establish working relationships, make logistical arrangements, and determine communication lines. During these meetings, the study team discussed the objectives of the project and identified any issues and concerns central to the study.

PHASE II: OBTAIN STAKEHOLDER INPUT

Objectives: Conduct Leadership Interviews & Capture Input from the Departments

The second phase of the study consisted of leadership interviews and department evaluations. The expectations were as follows:

- Identify opinions of department personnel concerning the operations and performance of their department and county coordination;
- Identify issues and concerns of personnel regarding fire and rescue services;
- Identify perceived gaps in existing service levels and new priorities in mission; and,
- Identify strengths and weaknesses as perceived by departmental personnel.

The study team, in coordination with county leadership, developed a schedule of face-to-face interviews with the thirteen departments, as well as county leadership as outlined below.

The study team met with leadership from Halifax County to include the Emergency Services Coordinator, 911 Director, and the County Administrator. The study team also met with fire department leadership from the Town of South Boston to better understand emergency response in the region.

All interviews were conducted during an allotted timeframe and a considerable amount of information was collected. A public hearing was advertised by the county and held on August 6, 2025 to give the public an opportunity to share feedback with the study team regarding the fire & EMS system in Halifax County.

During the interviews and public hearing, the study team received information regarding volunteer staffing levels, service delivery, budget information, apparatus, relationships between career staff and volunteers, and other information about the operation of each volunteer department. The discussion also provided an opportunity for each organization to share comments regarding service delivery of fire & EMS services in the county and possible areas for improvement.

PHASE III: PREPARE ANALYSES AND DEVELOP CORE STRATEGIES

Objectives: Evaluate Current Trends and Prepare a Report

The third phase of the study involved further investigation and understanding of the organizational structures, operations, limitations, achievements, and opportunities for improvement within the fire and EMS delivery system. The activities that supported this process consisted of additional requests for information not already obtained in Phase I and II of the work plan. Data requests, made in this phase of the study, attempt to address any issues that emerged from the interviews, and further evaluate implications of the operational issues cited. During this phase, the study team worked with public safety staff and other departments to obtain additional information. Data obtained during the study process also assists the study team in identifying issues influencing the current levels of service.

After receiving and critically evaluating information from the interviews and all supporting materials, the study team began identifying the necessary and critical components to achieve effective and uniform service levels throughout the county.

PHASE IV: PREPARE FINAL REPORT

Objectives: Prepare and Present Final Report

The final phase of the study involved documenting the results of all previous tasks into a written report with critical components, such as an executive summary, methodology, background, and findings and recommendations. Once completed, a draft report was shared with the Halifax County Administrator to ensure the technical content in this report is accurate. Upon receiving corrections, the study team revised the draft report, as needed, to assist in the preparation and issuance of the final report.

COUNTY INFORMATION

Halifax County is located along the southern border of Virginia with North Carolina and is bordered by seven other counties (Campbell, Charlotte, Mecklenburg, Pittsylvania, Granville (NC), Person (NC), and Caswell (NC)). The Town of South Boston, an independent city until 1995, is located within the county. The county was developed in 1752 from Lunenburg County.

The county has 830 square miles of land with major transportation in the area being provided by U.S Highway 58, U.S Highway 350, and U.S Highway 501.

The estimated population in Halifax County in 2020 was 34,022 with an average household income of \$49,244 and a total of 17,275 housing units.¹

The county operates under the guidance of the Board of Supervisors. Board members represent each of the eight magisterial districts along with a tiebreaker for a total of nine members. The County Administrator serves as the Chief Administrative Officer and executive for the county. The Emergency Services Coordinator advises the county administrator on public safety in the county. Halifax County does provide paid public safety personnel that staff an EMS transport unit in North Halifax. The South Boston Fire Department is a combination fire department staffed by paid firefighters and volunteers provided by the Town of South Boston. Various volunteer departments also provide staffing for fire suppression or EMS, including the Halifax County Rescue Squad.

The foregoing is a recommendation authorized pursuant to Va. Code 9.1-203.A.4 and is not to be construed as legal

¹ "Halifax County, Virginia" U.S Census Bureau

FINDINGS AND RECOMMENDATIONS

The recommendations contained in this study are not a requirement for the county to implement. The recommendations are to be used as a guideline for potential solutions that could assist the county as it further develops its capabilities to provide fire and EMS services. The purpose of the study is to review the weaknesses and strengths of Halifax County's current fire and EMS practices, providing recommendations to better serve the citizens and visitors of Halifax County, as well as the efficiency and effectiveness of the volunteer fire/rescue system.

Recommendations below refer to National Fire Protection Association (NFPA) standards, including NFPA 1720: Standard on Organization and Deployment of Fire Suppression Operations, Emergency Medical Operations, and Special Operations to the Public by Volunteer Fire Departments. According to chapter 1 of NFPA 1720, the standard defines "levels of service, deployment capabilities, and staffing levels for substantially volunteer fire departments. It contains minimum requirements for deploying fire suppression and EMS for service delivery, response capabilities and resources. It also contains requirements for managing resources and systems such as health and safety, incident management, training, communications, and pre-incident planning. It addresses the strategic and system issues involving the organization, operations, and deployment of a volunteer fire department."²

The National Fire Protection Association provides industry-wide best practices for fire and EMS service. Although the NFPA standards are considered best practices, the study team understands that not all NFPA standards are attainable in individual jurisdictions. Halifax County should strive to meet NFPA standards to provide best-in-class service to its citizens and visitors.

I. RADIO COMMUNICATIONS AND ACCOUNTABILITY

The study team noted operational deficiencies with the County's current radio system. The existing radio system, which is not designed for firefighting operations, creates significant safety concerns. Research noted that radio units were of intrinsically safe design, but the attached battery was not. This inconsistency effectively negates the explosion-proof protection intended by the equipment, exposing responders to unnecessary risk when operating in hazardous atmospheres. Reports also indicate the presence of multiple "dead spots" throughout the county, as well as failures in radio performance within structures. The team also noted the county lacked a consistent accountability system to track first responders on critical incident scenes, and more specifically, structure fires.

Given that the county's communications system serves as the primary life-safety network for law enforcement, fire, and rescue operations, remediation of these deficiencies must be prioritized. Transition to the Virginia State Police STARS system has been suggested as a potential solution. However, there is no clear consensus on the system's capabilities, limitations, or suitability for countywide use.

One of the most important issues facing the Incident Commander (IC) is accountability at the scene of emergencies. An accountability system should be adopted and routinely used to

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² NFPA 1720: Standard for the Organization and Deployment of Fire Suppression Operations, Emergency Medical Operations, and Special Operations to the Public by Volunteer Fire Departments.

coordinate the status and location of the resources working in, or potentially working in, an immediately dangerous to life and health (IDLH) environment. In the event of a firefighter injury or if a firefighter becomes trapped, this system ensures that the IC can account for those inside the IDLH environment and direct resources to ensure their rescue. Not utilizing an accountability system is reckless and does not align with relevant standards such as NFPA 1500 and NFPA 1561³.

Recommendations:

- 1. A comprehensive and independent evaluation of available communications systems should be conducted before any funds are expended. This assessment must ensure that the selected solution provides reliable coverage, supports firefighter safety requirements (including intrinsically safe design), and meets the operational needs of all emergency response agencies.
- 2. The study team was significantly concerned over reports that personnel accountability was not being conducted on incident scenes. Halifax County is extremely vulnerable to a firefighter injury or death. A Standard Operating Procedure should be developed to include regular accountability checks of units operating on certain incident scenes, such as working fires. This should be prompted by dispatch every 10 minutes or at an interval determined by the Fire and EMS Commission. This ensures that personnel are accounted for by command and is an effort to reduce risk in an already dangerous environment.
- 3. The Standard Operating Procedure should align with NFPA 1500, Chapter 8 Emergency Operations. Further, all departments and the 911 Center should be trained in the system to ensure consistent use.
- 4. The Fire and EMS Commission should develop a consistent procedure that enables the IC to assign personnel to fireground tasks appropriate to their level of training, ensuring safe and effective operations. Examples include helmet colors, helmet shield colors, tag colors, stickers on helmets, etc.

No accountability system implemented relevant to NFPA 1500 will be sufficient without a radio communications system that allows personnel to transmit out of structures during an emergency.

The foregoing is a recommendation authorized pursuant to Va. Code 9.1-203.A.4 and is not to be construed as legal advice or as a binding recommendation.

³ NFPA 1500 Standard on Fire Department Occupational Safety, Health, and Wellness Program and NFPA 1561 Standard on Emergency Services Incident Management System and Command Safety.

II. FORMALIZATION OF STRUCTURE

In a review of the Halifax County Code of Ordinances⁴, the current structure of emergency services, the Fire Commission, and the Emergency Services Coordinator are not clearly defined. The study team was informed of the Halifax Fire Commission, but also that a Public Safety Committee, a local fire chief's association, and other entities were involved in making decisions related to fire and EMS in Halifax County. Subsequent review of the job description of the Emergency Services Coordinator (ESC) revealed that the role of the ESC was far greater than indicated. An ordinance would define the roles, responsibilities, and expectations of all entities involved in fire, EMS, and emergency management.

Recommendations:

- 1. Codification of System: The Board of Supervisors should codify the fire and EMS system within the county. The ordinance should outline the essential duties and responsibilities of the Emergency Services Coordinator, the Fire and EMS Commission, volunteer fire and EMS departments/members, and the county staff providing fire and EMS. This clarification ensures that the Emergency Services Coordinator functions in a well-defined capacity, providing the necessary guidance, resources, and leadership for all fire and EMS components. This structure will help eliminate ambiguity and improve coordination across all levels of emergency management and response.
- 2. Fire and EMS Commission: The Fire Commission should be codified by the Board of Supervisors and altered to be more efficient.
 - a. The Fire Commission should be retitled as the Halifax County Fire and EMS Commission and include two (2) fire chiefs, two (2) EMS leadership members, (2) Board of Supervisor Members, and the Emergency Services Coordinator. The representatives of the fire chiefs and EMS leadership should be selected by the fire departments and EMS agencies.
 - b. The commission should be codified as the governing authority, with consent of the Board of Supervisors, for fire and EMS in Halifax County, They should have the power to review finances, coordinate training, and adopt and enforce Standard Operating Procedures.
 - c. All fire and EMS issues that need to be placed before the Board of Supervisors should first be heard before the Fire and EMS Commission. Additionally, the Board of Supervisors should consider eliminating the current Public Safety Committee, or combining it with, the Fire and EMS Commission. The commission should serve as the preliminary body for fire and EMS items before they reach the Board of Supervisors.
- 3. Emergency Services Coordinator:
 - a. The current Emergency Services Coordinator role should be retitled as the Public Safety Coordinator. With the addition of county staff in North Halifax, as well as the other duties of the Emergency Services Coordinator, the retitling of the position better reflects the role. As Public Safety Coordinator, an individual can coordinate the relationship between the Fire and EMS Commission and county government, manage funding

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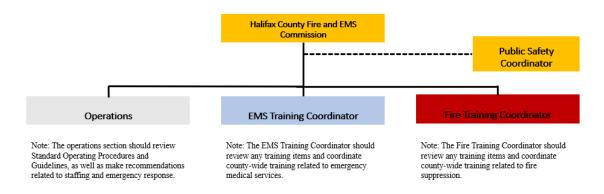
⁴ Chapter 23, Halifax County Code of Ordinances

- for local fire and EMS agencies, and serve as the overall authority for public safety within Halifax County. The field supervisor of the county staff should report to this position.
- b. The role of the Emergency Services Coordinator (ESC) is critical to ensuring effective coordination of emergency response and the efficient management of resources within Halifax County. The ESC's responsibilities should be clearly defined to include coordination of fire, EMS, and emergency preparedness operations, with specific emphasis on integrating and supporting both career and volunteer services. To strengthen organizational clarity, the county should develop and maintain an organizational chart that delineates the ESC's authority, reporting structure, and working relationships with local agencies. Such clarification will enhance collaboration, reduce duplication of effort, and ensure unified command during emergency operations. In addition, the ESC should play an active role in identifying, applying for, and administering grant opportunities to secure funding in support of training, equipment acquisition, and resource development for emergency services.
- 4. Fire and EMS Commission Organizational Chart: The newly developed Fire and EMS Commission should appoint or select individuals or groups to oversee operations, EMS training, and fire training. These could be paid, county staff, or volunteer members within Halifax County. These personnel could assist in the development of Standard Operating Procedure/Guidelines, training initiatives, and overall coordination of fire and EMS. Although the Emergency Services Coordinator is a member of the Commission, the dotted line indicates a unique role in ensuring funds are used appropriately and that all members are supported by the position.
- 5. The Fire Chiefs in Halifax County, as well as the EMS agency leadership, should formally create a Fire and EMS Association to represent their interests in the community. This association should be governed by a set of bylaws and include at least one representative from each recognized fire and EMS agency in Halifax County. The association should appoint the representatives on the Fire and EMS Commission through a standardized and fair process.
 - a. The association should meet annually with the Halifax County Board of Supervisors to review fire and EMS in the county, funding for fire and EMS, and the important relationship between volunteer fire and EMS providers and the county.
- 6. Standard Operating Procedures and Guidelines (SOP/SOG): The study team was provided Policies and Guidelines that outlined several areas, including training, station designations, annual reviews, conduct, and other areas of emergency services. It was unclear if these policies were applicable to all fire and EMS agencies in the county nor who was responsible for maintaining compliance. It appeared that most of the policies were last approved or reviewed in 2021. The policies were unclear, or in some cases, outdated compared to other localities across Virginia. This recommendation ensures the county is following NFPA 1720.4.1.1 which states, "the authority having jurisdiction (AHJ) shall promulgate the fire department's organizational, operational, and deployment procedures by

issuing written administrative regulations, standard operating procedures (SOPs), and departmental orders." The Fire and EMS Commission should conduct a comprehensive review of SOP and SOG to ensure departments are held accountable and provide an effective level of service in Halifax County.

- a. Amherst County, Virginia Standard Operating Guidelines (2012)⁵
- b. Stoney Point Fire Department (NC) Standard Operation Procedures⁶

FIGURE 1: HALIFAX COUNTY FIRE AND EMS COMMISSION ORGANIZATIONAL CHART



III. REVIEW OF STAFFING

The study team determined that current staffing, both volunteer and career, varied widely across Halifax County. The Town of South Boston provides paid firefighters that cover the town and respond into the county. The department also provides first response emergency medical services (EMS). There are no other paid firefighters in Halifax County, outside of one staff member during daylight hours at Virgilina Volunteer Fire Department. This staff member is provided by funding in North Carolina, not Halifax County funds, Additionally, at least two fire departments provide part-time EMS staffing during weekdays during daylight hours using funds from Halifax County and their own internal budgets. Halifax County recently implemented career EMS personnel at the North Halifax Volunteer Fire and Rescue Department staffing one transport unit each day (24 hours). Staff reported their primary role was EMS, but that some could assist in bringing fire equipment to incident scenes if available. Halifax County Rescue Squad provides EMS through a combination department with their own staff and volunteers. Throughout the site visit, the study team was advised of low daytime staffing for fire response and strain on the EMS system due to the lack of transport units.

The foregoing is a recommendation authorized pursuant to Va. Code 9.1-203.A.4 and is

⁵ "Standard Operating Guidelines" Amherst County Public Safety, Fire & Rescue Departments

⁶ "Standard Operating Procedures" Stoney Point Fire Department (NC)

Recommendations:

- 1. A comprehensive review of staffing should be conducted to provide the Halifax County Board of Supervisors with an accurate assessment of available fire and emergency response resources. This study will identify current staffing levels, distribution of personnel, and gaps in coverage to ensure that adequate resources are in place to protect county property and residents. The results will also inform future planning, budget allocation, and strategic investment in both career and volunteer response capabilities.
- 2. The Emergency Services Coordinator should consider cross-training of EMS providers at North Halifax. This should include changes in their employment agreements, proper training, and the issuance of equipment.

IV. FINANCE

The funding of fire and EMS is crucial to providing adequate services. Halifax County must recognize that volunteer fire and EMS agencies will require greater support from the county with funding as time moves forward. Additionally, Halifax County must ensure that fire and EMS agencies are held accountable as it relates to the use of county or state level funding for fire and EMS. The study team was also informed of a recent initiative to provide county staff at the North Halifax Volunteer Fire and Rescue Department. Halifax County must consider the financial implications of further funding county fire and EMS staff as noted in this report.

Most stakeholders described a current capital improvement program that allocates \$25,000 to four fire departments every three years. Although this is notable, this does not provide adequate capital funds to replace fire apparatus or facilities. The study team was not provided with a formal policy outlining this program.

Recommendations:

- 1. Financial Oversight: It is recommended that a regular audit process be implemented for all fire and EMS agencies. Transparency in the use of funds fosters accountability, confirms compliance with financial guidelines, and allows for public trust in the management of taxpayer dollars. Audits should include a thorough review of agency budgets, expenditures, and grant allocations.
- 2. Capital Improvement Program: The Fire and EMS Commission should revise the Capital Improvement Program to reflect ongoing and future fleet requirements, including apparatus replacement schedules. This revised program should incorporate the results of a fleet and facility study to determine what apparatus and facilities require replacement. As opposed to regular, capital funding split amongst agencies equally, the program should prioritize capital improvements based on an unbiased assessment of use/age. Further, apparatus deemed in excess or reserve status from the fleet and facility study should not be directly replaced with capital funds.
- 3. Operational Cost Coverage: The County should consider assuming responsibility for fuel, maintenance, and insurance costs associated with fire and EMS apparatus to ensure consistency across departments. Each department expressed that they were responsible for insurance, fuel, and maintenance. Halifax County should examine utilizing one fuel contract, one maintenance contract, and one insurance policy for all

- fire and EMS vehicles operating in the county. This will likely reduce costs and ensure consistency as noted.
- 4. Damaged Equipment Fund: Halifax County should establish a dedicated fund to repair or replace damaged equipment, thereby reducing financial strain on individual departments. This fund would be used for equipment damaged in the routine performance of the job of emergency response. This budget item would provide a financial safety net for agencies, ensuring that emergency response capabilities are not compromised due to unforeseen equipment issues.
- 5. Collective Purchasing: Halifax County should consider centralized and cooperative purchasing for fire and EMS. Many items, including medical supplies and items used daily, can be centrally stored in accordance with OEMS regulation and distributed. In addition, many equipment purchases could be made county-wide to increase interoperability and reduce costs. Cooperative purchasing is frequently used by government and among businesses to aggregate demand to reduce prices from suppliers. This option often reduces costs for localities and leverages buying power more effectively than ordering supplies independently. Halifax County has already embarked down this path with the purchase of Scott Self-contained Breathing Apparatus. Other examples include personal protective equipment, hand tools, and hose.
- 6. Grant Writing: The Emergency Services Coordinator should be tasked to assist fire and EMS agencies, as well as the locality, with grant writing. This could also be done by contracting with a regional grant writer to assist in preparing federal, state, and private grant applications. With the increasing cost of fire and EMS equipment, as well as the saturation of applications for available grant programs, the quality of grant applications is vital. Halifax County must leverage all available funding resources and assist their volunteer agencies with applying for these grants. Possible grants at the state level to consider include:
 - a. Federal Firefighter Property Program: Through an agreement with the Department of Defense (administered by the USDA Forest Service), the Virginia Department of Forestry can obtain surplus military equipment that can be used by emergency service providers. The major difference between this program and the Federal Excess Personal Property Program (FEPP) is that qualifying organizations may be eligible to receive ownership of the equipment with few restrictions on use or disposal and at no cost.
 - b. Community Wildfire Defense Grant Program: The Community Wildfire Defense Grant program offers financial assistance to at-risk communities for the development of Community Wildfire Protection Plans (CWPP) and associated mitigation projects. This grant funds projects for two primary objectives: the development and revision of Community Wildfire Protection Plans, and the implementation of projects described in a Community Wildfire Protection Plan that is less than 10 years old.⁸
 - c. *Dry Hydrant Program:* The Virginia Dry Fire Hydrant grant program provides funding to cover the costs of installation and repair of dry hydrants to support firefighting operations. The program is a joint effort between the

⁸ "Community Wildfire Defense Grant Program" Virginia Department of Forestry

⁷ "Federal Firefighter Property Program" Virginia Department of Forestry

- Virginia Department of Fire Programs and the Virginia Department of Forestry (DOF) that provides state level funding on an annual basis for the installation of dry hydrants across the Commonwealth.⁹
- d. Volunteer Fire Assistance Grant Program: DOF provides assistance through the Volunteer Fire Assistance (VFA) grant program. The program provides a 50% cost reimbursement for the purchase of personal protective equipment (PPE), tools, and equipment for rural volunteer fire departments. As a key cooperator in the suppression of nearly every Virginia wildfire, this program allows the agency to provide critically-needed federal funding to directly support fire departments in the Commonwealth.
- e. Regional Fire Services Training Grant Program: Any training facility owned by a jurisdiction with the exclusive or primary purpose of being used for fire services training delivery for two or more jurisdictions. The funding will be utilized for the acquisition, renovation, repair, service, and management of fire services training props to provide training opportunities to multiple jurisdictions in support of training throughout the Commonwealth of Virginia per the NFPA 1001 and 1403 training standards.¹⁰
- f. Firefighter PPE and Equipment Grant: The funding priorities for the FY2026 grant cycle is first time Personal Protective Equipment: turnout gear and self-contained breathing apparatus (SCBA). Individual PPE-Grant award amounts shall be decided by the Virginia Fire Services Board based upon need. The maximum allowable amount of any PPE-Grant shall be \$100,000 per applicant.¹¹
- g. Rescue Squad Assistance Fund (RSAF): RSAF is a multi-million-dollar matching grant program for Virginia governmental, volunteer, and non-profit EMS agencies/organizations to provide financial assistance based on demonstrated need. Funding is recommended on the documented need of the specific item being requested. The primary goal of this program is to financially assist governmental, volunteer, and non-profit EMS agencies to purchase EMS equipment, vehicles, and provide needed EMS programs and projects. RSAF is primarily a reimbursement grant that requires the grantee to make the purchase for the awarded item(s) and then submit an invoice for reimbursement.¹²

⁹ "Dry Hydrant Program" Virginia Department of Forestry

¹⁰ "Regional Fire Services Training Grant Program" Virginia Department of Fire Programs

^{11 &}quot;Personal Protective Equipment (PPE) Grant Program" Virginia Department of Fire Programs

¹² "Virginia Office of Emergency Medical Services Financial Assistance for Emergency Medical Services (FAEMS) General Grant Information" Virginia Department of Health

V. TRAINING

Halifax County Emergency Services Policies and Guidelines do require training for firefighters and EMS providers. Each department is required to submit a summary of their training each calendar year, with firefighters required to attend thirty-six (36) hours per year. If a department responds to EMS calls, their members should receive twelve (12) hours of training per year related to EMS. The document further states that members must "complete a Virginia Department of Fire Programs administered/approved fire school of at least sixteen (16) hours once every two (2) calendar years." Many chief officers did not express a fundamental understanding of current policies and guidelines.

Most departments reported that they conducted regular training, at least monthly, on topics that they determined. This training was sometimes open to other departments. Departments also expressed that they desired to send more of their volunteers to formalized training classes in the region hosted by organizations like the Department of Fire Programs (VDFP).

The study team was also aware of an open grant with the Department of Fire Programs for a Live Fire Training Structure at the current training site. This training site previously hosted training events, including live fire training, until it was closed for live fire training due to needed repairs/renovations.

Recommendations:

- 1. The Policies and Guidelines related to training must be updated to better reflect training needs and requirements through the Fire and EMS Commission. This update should outline specific training that should be required for those entering an immediately dangerous to life and health (IDLH) environment. Additionally, referencing a VDFP "fire school" should be updated to reference any relevant VDFP course or equivalent training. Further, the Fire and EMS Commission should examine whether minimum firefighter training such as Firefighter I should be required or emergency vehicle operator course (EVOC) training for the drivers of emergency vehicles. The policy must outline minimum requirements to serve as an EMS provider as required by state law and regulation.
- 2. All line officers and chief officers should be trained on the effective use of the incident command system and the accountability system developed by the Fire and EMS Commission.
- 3. A Standard Operating Procedure (SOP) should be developed for the use of the proposed Live Fire Training Structure to meet NFPA 1403 requirements and ensure safe operation of the facility. Further, this policy should outline appropriate use of the structure to ensure that public funds are protected.
- 4. It is recommended that the County increase funding for Virginia Department of Fire Programs (VDFP) courses, establish multi-agency training sessions, and offer more flexible scheduling, including evenings and weekends, to accommodate volunteer availability. The Emergency Services Coordinator should explore creating a training fund to cover any VDFP training course where the minimum number of students was not obtained. The Fire and EMS Commission training coordinators should develop an annual training schedule and maintain accurate

- records for all personnel to ensure compliance, accountability, and tracking of skill development.
- 5. The Halifax Fire and EMS Commission should formally partner with Sentara Halifax Regional Hospital to increase training between the hospital and EMS providers in the region. Some stakeholders said the hospital did provide some training already, but this should be expanded where possible.
- 6. The Halifax Fire and EMS Commission should, working with the Emergency Services Coordinator, offer an annual Firefighter I course within the county. Consideration should be given to the VDFP Modular Firefighter I program. The study team recommends the county reach out to the VDFP Division 3 Chief concerning this program.

VI. FLEET AND EQUIPMENT

The apparatus and equipment used by first responders is of immense importance to ensure that both the public and the responder themselves are protected. A comprehensive assessment must look at the apparatus fleet, facilities, other equipment of the fire and EMS system deemed necessary by the locality. It is noted that outside of an EMS transport unit on order, and the aerial device housed in South Boston, that the county does not own any fire or EMS apparatus. As emergency incidents increase, and if current or additional staff are provided greater responsibility for fire or EMS protection, Halifax must formalize agreements with each department for the use of fire and EMS apparatus. Further, as apparatus continues to expand in cost, Halifax County must prepare to further support the purchase of this lifesaving equipment. The recommendations below should be informed by NFPA 1901: Standard for Automotive Fire Apparatus. Utilizing equipment outside its explicit expiration date should be examined compared to regulatory requirements imposed by the Occupational Safety and Health Administration and Virginia Occupational Safety & Health.

Recommendations:

- 1. The Fire and EMS Commission should conduct a fleet risk assessment that focuses on apparatus that meet community specific needs such as population density, zoning, development, previous call data, etc. The assessment should examine what the adequate number of each category of response vehicle is for each fire district or EMS district. The referenced categories of response vehicles include:
 - i. engine/pumper
 - ii. aerial device
 - iii. tanker/tender
 - iv. brush vehicle
 - v. EMS vehicle (ambulance or other).
- 2. From the fleet risk assessment noted above, a fleet replacement schedule should be developed. Vehicles used more often should be rotated into a reserve status or provided to response districts with less call volume. Capital Improvement funds should be directed to fund, along with fundraising and grants, the replacement of frontline apparatus. In

¹³ NFPA 1901: Standard for Automotive Fire Apparatus

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- regard to replacing apparatus, priority should be provided to vehicles based on their age, if they gain more mileage or engine time, and the number of calls answered.
- 3. Apparatus that are not the primary apparatus in a station or cannot be regularly staffed by volunteers or career staff (75% of the time) should be considered surplus apparatus and be of lower priority compared to frequently used apparatus. Further, each fire district should only have one frontline piece of apparatus in each category noted above, while others should be retained for use as reserve apparatus by the fire and EMS agencies in Halifax County. At least two engines, one tanker, and one brush truck should be designated as reserve apparatus which the county should maintain for use by all fire departments.
- 4. As noted above, the county should consider assuming responsibility for fuel, maintenance, and insurance costs associated with fire and EMS apparatus. If the county does not assume responsibility for maintenance, a Standard Operating Procedure should require that regular maintenance be reported to the Fire and EMS Commission or Emergency Services Coordinator. If the county assumes these responsibilities, consideration should be given to dual-titling emergency vehicles to ensure both the local agency and the county have legal control of the vehicle.
- 5. The Emergency Services Coordinator provided a "Department Information Worksheet" which asked, among other things, for information related to apparatus and equipment. This sheet further requires information on the dates purchased, the last date of service, and other information. *This is a worthy idea that should be required of each department to ensure the safety and maintenance of equipment.* At present, there is no consistent understanding across departments regarding annual testing requirements for emergency response equipment (e.g., fire hoses, SCBA, ladders). Further, responsibility for funding such testing is unclear. While some departments have indicated that the county has begun to assume these costs, others have reported no such arrangement, creating a lack of uniformity in program administration. Standard Operating Procedures should outline these requirements and who is responsible for the funding and services.

VII. RECRUITMENT AND RETENTION

The Commonwealth of Virginia has seen a steep decline in volunteer first responders for a variety of reasons as outlined in two recent reports to the Virginia General Assembly¹⁴. This poses a significant threat to public safety in Virginia if numbers continue to decline.

Recruitment and retention of both volunteer and career personnel is crucial to ensuring that Halifax County can continue to respond to emergency incidents. The ability to maintain a well-staffed and skilled workforce is vital to providing the level of service the community deserves.

Recommendations:

- 1. Use "Make Me a Firefighter" Tool: Over the past thirty years, the number of volunteer firefighters has **declined** while call volume continues to **increase**. Halifax County Fire and EMS responders are primarily volunteers, and based on interviews conducted by the study team, the county is experiencing a decline in membership. The National Volunteer Fire Council's (NVFC) "Make Me a Firefighter" tool provides a public website for prospective volunteers to find local emergency service opportunities for fire and EMS departments in their area. With this national recruitment and retention campaign portal you can enter local existing volunteer opportunities into a database that is searchable to potential volunteers, customize marketing materials with department specific information for use in the community, and access additional resources, tips, and recruitment ideas to make local campaigns a success.
- 2. The Fire and EMS Commission should approach Halifax County Public Schools to formally request the reestablishment of a high school-based firefighter program. The academic portion of the course could be taught within Halifax County Public Schools, with the Fire and EMS Commission handling skills training with the assistance of the volunteer fire departments. Rockbridge County recently implemented a high school firefighter course that trains new firefighters and also provides college credit hours. ¹⁵
 - a. The Office of EMS notes that the Fire and EMS Commission should also consider a high school based emergency medical responder (EMR) or emergency medical technician (EMT) course to assist local fire/EMS agencies and prepare students for a future career.
- 3. There is a lack of clarity regarding how first responders are covered under the county's workers' compensation insurance program. Some departments report that they provide and pay for their own coverage, creating inconsistencies and possible financial redundancies across the county. This program could benefit from a centralized or collective purchasing approach to ensure uniform coverage and cost efficiency. Additionally, the county should provide training and informational resources to all first responders to clearly communicate the scope of

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¹⁴ "Service to the Commonwealth: A Report on the Commonwealth's Fire and EMS Service" *Department of Fire Programs* and "Review and Assessment of the Sufficiency of Fire and EMS In The Commonwealth of Virginia" *VCU Center for Public Policy*

¹⁵ "Transformation of Rockbridge career and technical education center brings renewed attention to hands-on high school programs" *Cardinal News*

- insurance coverage, reporting procedures, and any responsibilities of the individual departments. Ensuring first responders feel protected is a key recruitment and retention component.
- 4. The Emergency Services Coordinator, in consultation with the County Administrator and Board of Supervisors, should explore matching funding using the Volunteer Firefighters' & Rescue Squad Workers' Service Award Program (VOLSAP). VOLSAP, created by state statute, is a mechanism by which optional retirement savings for volunteer firefighters and rescue squad workers can be invested. Members contributions, coupled with contributions made by the department/locality, are invested by the Virginia Retirement System, and can be withdrawn at a certain age much like a standard employee retirement.¹⁶
- 5. Halifax County currently relies on a majority volunteer system. *Volunteer first* responders are a cost-effective way of providing emergency services, but must be supported since services are never free. The Emergency Services Coordinator, in consultation with the Halifax Fire and EMS Commission, should create an incentive program funded through a combination of county funds, volunteer department funds where available, and support from local businesses. This incentive fund should be utilized to provide funds to volunteers to purchase individual equipment items, uniform items, or other items identified by the commission. A SOP should be implemented that outlines the program requirements and how funds would be disbursed equitably. Botetourt County recently implemented a new incentive program that offers volunteer firefighters \$5 to \$20 per call as well as bonuses for completing training. This concept could be implemented on a smaller scale in Halifax County to encourage additional volunteer fire and EMS providers.
- 6. Stakeholders expressed that funds from the former "county decal" provided as part of vehicle registrations used to be reimbursed to volunteer fire and EMS providers in the county. County leadership stated that the decal fund was eliminated in November of 2024 and replaced with a county stipend of \$2,000 per department. The Halifax County Board of Supervisors should consider reimbursing the full amount of the decal fee to volunteer providers.
- 7. The Halifax County Board of Supervisors should consider eliminating personal property taxes on the primary, personal response vehicle for all bona fide volunteer firefighters and EMS providers in the county. Code of Virginia § 58.1-3506 allows localities the discretion to classify these vehicles separately from other tangible property that is taxed if a volunteer can certify that they are members of a recognized volunteer fire or EMS agency. The board should work with the Commissioner of the Revenue to determine who would be eligible for this tax incentive and the relative cost to the county.
- 8. The Fire and EMS Commission should explore recruitment and retention resources provided by various organizations such as the Virginia Fire Chief's Association, Virginia State Firefighters Association, the Virginia Association of Volunteer Rescue Squads, the National Volunteer Fire Council, International Association of Fire Chiefs, and local insurance companies.

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^{16 &}quot;Virginia Volunteer Firefighters' & Rescue Squad Workers' Service Award Program" Virginia Retirement System

¹⁷ "Va. county launches pay-per-call program to boost volunteer firefighter recruitment" FireRescuel

VIII. STRATEGIC PLAN

County leadership should collaborate with fire and EMS departments to establish both short- and long-term strategic goals, incorporating input from the community to ensure that priorities align with public needs. Strategic plans increase transparency, establish a clear direction, and improve decision making related to funding and personnel needs. The resulting plan should be reviewed on a regular basis and comprehensively address personnel, facilities, equipment, and infrastructure requirements.

Recommendations:

- 1. It is recommended that the new Fire and EMS Commission develop a list of short- and long-term goals related to fire, EMS, and public safety in Halifax County. Short term goals should be identified for the next 1-2 years, while long term goals should range from 2-5 years. The list should include goals from county leadership which impact fire and EMS departments, personnel, facilities, and equipment or other infrastructure.
- 2. It is recommended to hold a series of community meetings throughout the county to solicit goals from the community related to fire and EMS services. These community meetings should be well advertised and be an open forum for citizens to discuss needs and their intended goals.
- 3. More information on strategic plans:
 - a. Four Steps to High-Impact Strategic Planning in Government¹⁸
 - b. Fire Department Strategic Planning¹⁹

IX. EMERGENCY MEDICAL SERVICES

Halifax County's EMS system faces critical challenges in leadership, staffing, funding, and coordination. While agencies and volunteers remain deeply committed to serving their communities, the system is fragmented, financially strained, and at risk of collapse if immediate corrective action is not taken.

Note: The term "EMS Director" is used generically to represent a county-level EMS leadership position. The actual title and reporting structure are subject to county government decisions.

Key Findings

- **Fragmentation of service delivery** multiple independent agencies with varying policies, training, and procedures.
- **Limited county-level coordination** absence of a unified structure for oversight, planning, and accountability.
- **Inconsistent standards** differences in protocols, equipment, and documentation practices.
- **Sustainability concerns** reliance on volunteers, weak recruitment/retention, and limited fiscal planning threaten stability.

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¹⁸ Boland (2018). BCG Global

¹⁹ Fire Department Strategic Planning 101. Fire Engineering

- **Financial strain** rising costs of apparatus, insurance, and equipment, with no consistent county audits or centralized purchasing.
- Workforce pipeline gaps lack of consistent EMR/EMT training programs hampers recruitment.
- Imminent collapse risk stakeholder interviews warn that portions of the EMS system could face collapse within five years without county action. This presents a serious threat to the long-term availability of county emergency services.
- **System readiness** CP/MIH programs are not currently feasible; a stable 911 system must come first.
- **Risk exposure** absence of countywide policies and accountability increases liability, QA/QI vulnerabilities, and Medicare/audit risks.

Recommendations:

- 1. Establish County EMS Leadership
 - a. Create a county-level EMS Director position to provide systemwide leadership, oversight, and accountability.
 - b. This role should coordinate with the County Emergency Services Coordinator to improve EMS and fire integration, strengthen county planning, and lead development of countywide SOPs/SOGs.
 - c. The EMS Director should be selected based on appropriate credentialing, proven leadership experience, and the ability to manage systemwide initiatives.
 - d. The county should also develop a plan to provide career advancement opportunities, credentialing pathways, and professional development for agency leaders and county-employed staff. This will support the retention of qualified providers by offering a clear path for growth and long-term commitment within Halifax County.
 - e. As staffing expands, Halifax County should prioritize adding station or shift supervisors to provide frontline leadership, ensure operational accountability, and support personnel at the agency and station level. These positions will serve as the initial layer of leadership oversight and form the foundation for consistent system operations.
 - f. Over time, the county should expand its leadership structure to include administrative, training, and QA/QI roles to strengthen system oversight, ensure compliance, and create future career pathways for Halifax providers. This layered approach builds both stability and advancement opportunities within the county EMS system.
- 2. Formalize Designated Emergency Response Agreements (DERAs)
 - a. Evaluate and update all DERA agreements to ensure consistent response times, staffing, and operational requirements.
 - b. Strive for robust, goal-oriented agreements that set measurable standards for coverage, performance, and accountability across all EMS agencies.
 - c. Agreements should involve the Medical Director(s), EMS agencies, and county leadership to create a standardized and efficient countywide EMS system.

d. DERAs should be subject to regular review and QA/QI processes, with participation from the OMD, county government, and agency leadership, to ensure expectations are being met and adjustments are made as needed.

3. Mutual Aid & MOUs

- a. Develop formal MOUs between in-county agencies to strengthen cooperation and ensure shared resources.
- b. Extend MOUs to out-of-county jurisdictions for both fire and EMS to guarantee regional support.
- c. Require that all MOUs be filed with the County EMS Director and dispatch center.
- d. Conduct MOU reviews at 6, 12, and 18 months to ensure consistency and identify any gaps. After the initial period, transition to an annual evaluation process to monitor for gaps and establish a standardized periodic review cycle once agreements are firmly in place.

4. EMS Leadership Training & Standards of Excellence

- a. Halifax County should adopt the Virginia OEMS EMS Officer program as the standard for EMS leadership roles within the county EMS system.
 - i. EMS Officer 1 should be required for entry-level supervisory and leadership positions.
 - ii. EMS Officer 2 and 3 should be encouraged and supported as they become available, providing a clear career advancement pathway.
- b. All agencies should participate in ongoing leadership development to ensure consistent supervision and professional standards.
- c. Halifax County and its independent EMS agencies should actively utilize the Virginia OEMS Standards of Excellence (SOE) Program as both:
 - i. A self-assessment tool to evaluate agency performance, sustainability, and operational effectiveness.
 - ii. A goal-setting framework for continuous improvement, with the long-term objective of achieving formal recognition as an Agency of Excellence where possible.
- d. Require NIMS compliance: 100, 200, 700, 800 for all providers; 300+ for mid/upper leadership as baseline readiness.

5. Recruitment & Retention

Halifax County should develop a **county-supported recruitment and retention (R&R) structure** that focuses primarily on sustaining the volunteer system while also supporting limited county staffing efforts.

- a. Coordinate countywide volunteer recruitment campaigns, processing applications centrally and directing new members to agencies in need.
- b. Provide local EMR and EMT training programs to expand the pipeline of new providers.
- c. Develop retention initiatives to keep skilled volunteers engaged, such as stipends, tax relief, tuition reimbursement, or LOSAP-style retirement benefits.

- d. Establish a county retention program for newly hired county staff to reduce turnover as Halifax begins building a supplemental career presence.
- e. Halifax County has recognized and acknowledged that it is late in entering the career staffing arena and cannot build a fully county-run system at this time. Volunteer recruitment and retention must therefore remain the backbone of the system, with targeted career positions serving as supplemental support.
- f. Agencies should adopt staffing rotation practices to prevent burnout, reduce fatigue, and avoid skill dilution, with countywide evaluation of staffing models at 6, 12, and 18 months to ensure consistency and identify any gaps. After the initial period, transition to an annual evaluation process to monitor for gaps and establish a standardized periodic review cycle once agreements are firmly in place.

6. Financial Oversight & Risk Management

- a. Require regular financial audits for all fire/EMS agencies receiving county or public funds, including tax-based support, public donations, and state/federal funding streams (e.g., 4-for-Life, RSAF, grants).
- b. Consider insuring all fire/EMS apparatus under the county plan to relieve agency burden.
- c. Develop/define a county-level Capital Improvement Plan (CIP) for apparatus, recognizing rising costs and supply-chain delays.
- d. Implement centralized purchasing and distribution to reduce costs and streamline supply management.
- e. Evaluate options for providing or coordinating medical malpractice, liability, workers' compensation, injury, and accidental death & dismemberment (AD&D) coverage for EMS providers under county-backed policies, to reduce risk exposure and financial strain on individual agencies.
- f. While workers' compensation is already covered county-wide, malpractice, liability, and AD&D coverage remain fragmented and inconsistently understood. Halifax County should develop clear, written policies and program documentation so that all agencies know exactly what coverages exist, who is responsible, and how benefits are applied.
- g. Agency building/property insurance may remain at the agency level; however, the county should also explore leveraging its purchasing power to pool or negotiate coverage where feasible to secure favorable rates.
- h. Halifax County should make available a public-facing document that outlines:
 - i. The process for how funding, CIP allocations, and insurance programs are administered.
 - ii. What expenditures are or are not eligible for county/public support.
 - iii. Program stipulations and requirements for participation.
 - iv. The status of agency audits (pending or complete) to ensure transparency and accountability to both the agencies and the community.

7. Centralized Medical Direction & Advanced Protocols

Currently, all agencies share the same OMD, though only Halifax County Rescue Squad uses expanded protocols. A countywide EMS structure should expand access to these advanced scope protocols, ensuring all qualified providers can utilize them across the county. This will improve consistency of care and expand advanced-level services for all residents.

8. Staffing & Peak-Hour Coverage

Evaluate call volume trends to identify periods of high demand. Where volunteer or career coverage is insufficient, explore hybrid staffing models (volunteer/career mix) or peak-hour staffing to ensure ambulances are available during statistically high-volume periods.

a. Incorporate 6-, 12-, and 18-month reviews into staffing evaluations to monitor coverage, burnout, and system needs. After the initial period, transition to an annual evaluation process to monitor for gaps and establish a standardized periodic review cycle once agreements are firmly in place.

9. Dispatch & Communications Improvements

- a. Ensure standardized fire and EMS dispatch protocols. EMS currently uses EMD; fire protocols should be further developed (e.g., tiered responses, dispatch matrices, or PDRPs).
- b. Incorporate GIS or similar tools to improve unit selection, especially given limited river crossings and geography challenges.
- c. Develop a strong QA/QI program within dispatch, making regular adjustments to improve accuracy and efficiency.
- d. The County PSAP should pursue **Virginia OEMS PSAP Accreditation** (VDH OEMS Program Link).

10. Radio System Reliability

- a. Conduct an independent third-party review of the Halifax County radio system to evaluate safety, reliability, and compliance with NFPA 1802 and other public safety standards.
- b. Address issues documented by the Fire Commission, including portable radio failures, pager connectivity, and lack of durability in emergency conditions.
- c. Establish a remediation plan with a timeline for equipment replacement or upgrades.
- d. Include communications review in the 6-, 12-, and 18-month county evaluations to ensure accountability and progress. After the initial period, transition to an annual evaluation process to monitor for gaps and establish a standardized periodic review cycle once agreements are firmly in place.

11. Governance & Accountability

a. Halifax County government should hold ultimate authority for EMS system oversight, with direct support from the EMS Director.

- b. County government should require:
 - i. Submission of annual financial audits for all fire and EMS agencies receiving county funding.
 - ii. Compliance with DERA agreements, MOUs, and countywide SOPs/SOGs.
 - iii. Participation in county-level planning and coordination processes.
- c. Eligibility for county funding should be contingent on meeting these requirements.
- d. County government must ensure that agencies have a clear understanding of all county programs and benefits, supported by:
 - i. Written policies and documentation covering insurance, funding, capital replacement, and benefits.
 - ii. Transparent explanation of eligibility requirements and what agencies receive in return.
 - iii. Regular communication so agencies know exactly how participation supports their sustainability and the overall system.
- e. Dispatch leadership should be integrated into county-level planning to ensure communications policy, QA/QI, and protocols are consistent with county EMS goals

12. Future System Development

While Community Paramedicine (CP) and Mobile Integrated Healthcare (MIH) may provide long-term benefit, these programs should only be considered once a stable 911 EMS system is established.

Conclusion

Halifax County's EMS system is at a crossroads. The commitment of both volunteer and career providers remains strong, but the current structure is fragmented, financially strained, and at risk of collapse within five years if corrective action is not taken. The recommendations outlined in this report provide a clear and achievable path forward. By establishing county-level leadership, formalizing agreements, strengthening medical direction, improving recruitment and retention, and ensuring fiscal accountability, Halifax County can build a unified and sustainable EMS system that serves residents and visitors effectively.

Ultimately, the success of this effort will require ongoing collaboration between county government, EMS agencies, fire services, dispatch, medical direction, and the community. With shared responsibility, consistent standards, and immediate investment, Halifax County can stabilize its emergency response system and prepare it to meet both present and future needs.

X. OTHER RECOMMENDATIONS

The information below is included as recommendations independent of the above categories. Select recommendations are both pertinent to Halifax County, as well as most fire and EMS studies conducted by the Virginia Fire Services Board. The recommendations are broad but encompass best practices to support future growth for Halifax County and the Commonwealth of Virginia, as well as the safety and well-being of first responders and the citizens they protect.

Recommendations:

- 1. The Emergency Services Coordinator should ensure that all county fire departments report via VFIRS or NFIRS. Not only does this process provide insight into the county's emergency responses and trends, but it can also provide a means of comparing local trends to regional and national trends. Additionally, the Emergency Services Coordinator should prepare for the transition from NFIRS to NERIS being administered through the U.S Fire Administration. As stated above, this information is critical for the identification and mitigation of any community risks. This is also applicable to EMS call data. The transition to NERIS is expected to provide faster and more effective data for the fire service. All fire departments and companies in Virginia shall report as a condition to receive Aid to Localities funding starting in July of 2026²⁰.
- 2. Responder health and wellness should be a priority consideration for Halifax County. The County should evaluate the development of a Critical Incident Stress Management (CISM) and/or Peer Support program to provide structured mental health and resiliency resources for firefighters, EMS providers, law enforcement officers, and 911 dispatchers. Once such a program is established and operational, the County should strongly consider pursuing accreditation through the Virginia Office of EMS²¹ to ensure adherence to recognized standards, enhance program credibility, and support long-term sustainability.
- 3. Cancer prevention is important in the fire service. Cancer is the leading health risk facing firefighters, largely due to the chemicals and carcinogens they are exposed to while engaged in response activities.²² Chemically based plastics are in use in nearly every product in our homes, business and vehicles and when they burn, their chemical composition changes.
 - a. The Emergency Services Coordinator should develop operational SOP's that establish safe cancer prevention practices such as:
 - i. Gross decontamination after fire incidents
 - ii. Washing of firefighter PPE following fire or hazardous materials incidents
 - iii. A fire hood exchange program
 - iv. Shower facilities at fire stations

²² "Lavender Ribbon Report-Best Practices for Preventing Firefighter Cancer" (2021) NVFC & IAFC

²⁰ "Mandated Fire Reporting as a Condition for Aid to Localities Payment" Department of Fire Programs

²¹ "Critical Incident Stress Management – Peer Support" Department of Health's Office of EMS

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- a. The Emergency Services Coordinator should encourage /facilitate National Firefighter Registry (NFR) sign up. The Firefighter Cancer Registry Act of 2018 mandated the Centers for Disease Control and Prevention (CDC) create a voluntary registry of firefighters to collect health and occupational information to determine cancer incidence in the U.S. fire service. In response to this mandate, CDC's National Institute of Occupational Safety and Health (NIOSH) established the National Firefighter Registry (NFR).²³ The NFR will help researchers better understand and reduce cancer in firefighters by matching the information provided by participating NFR firefighters with cancer diagnosis information from state cancer registries. This matching process will allow NIOSH to study the relationship between firefighting and cancer outcomes over time.
 - Step 1: Firefighters sign up for the NFR.
 - Step 2: NIOSH researchers match firefighter profiles with potential information in state cancer registries over time. This makes it possible to study the relationship between firefighting and cancer over time, even if cancer diagnoses occur in the future.
 - Step 3: NIOSH captures work history details. This information can be used to better understand firefighters' exposures and how they may be related to cancer.
 - Step 4: Stronger evidence can help inform new health and safety measures to protect firefighters from cancer. Combining information from firefighters across the U.S. will help researchers better understand cancer and its risk factors in the fire service, which could ultimately help reduce cancer among firefighters for generations to come.
- 4. Employment Status and Regulatory Compliance: The Halifax County Board of Supervisors should work with the County Attorney to obtain legal determination regarding the employment status of volunteer fire and EMS personnel and whether they are to be classified as non-paid employees. The county should also review the status of volunteer responders to determine the extent of coverage and compliance obligations related to Virginia Occupational Safety and Health (VOSH) regulations. For example, permitting first responders to operate self-contained breathing apparatus (SCBA) without required medical evaluations, fit testing, and annual training constitutes an imminent danger condition for those engaged in response operations in atmospheres deemed immediately dangerous to life and health (IDLH).

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²³ H.R 931"Firefighter Cancer Registry Act of 2018". (2018) 115th U.S Congress

- 5. Localities should consider conducting a community risk assessment, which is a vital step in improving fire and EMS services. The study team recognizes that community risk assessments (CRA) can be wide or narrow in scope. Understanding the risks in the community better allows the system to identify potential risk, and prioritize those risks, to better utilize resources and plan for the future. Halifax County should specifically include a review of emergency services staffing during a community risk assessment. Although there is no specific blueprint for developing CRR plans, much of the current literature and training materials suggest that community risk reduction programs use a six-step approach towards development outlined below:
 - 1) Identify Risks
 - 2) Prioritize Risks
 - 3) Develop Strategies
- 4) Prepare Plan
- 5) Implement Plan
- 6) Monitor, Evaluate, & Modify Plan

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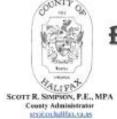
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 https://www.vdh.virginia.gov/content/uploads/sites/23/2023/09/RSAF-Grants-Program-091523.pdf
- Virginia Volunteer Firefighters' & Rescue Squad Workers' Service Award Program. (2024) Virginia Retirement System. https://www.volsap.org/

Standard Operating Procedures. Stoney Point Fire Department. https://www.stoneypointfirerescue.com/sops

APPENDIX A

Letter Requesting a Fire and EMS Study from the Halifax County Administrator



HALIFAX COUNTY BOARD OF SUPERVISORS

1050 Mary Bethune Street P. O. Box 699 Halifax, VA 24558-0699 (434) 476-3300 Fax: (434) 476-3384 www.halifaxcountyva.gov W. BRYANT CLAIBORNE - ED48 CHAIRMAN

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May 06, 2025

Virginia Department of Fire Programs Virginia Fire Services Board Chief Keith Johnson, Chairman 1005 Technology Park Drive Glen Allen, VA 23059

Re: Request for a Comprehensive Analysis Study of the Halifax County Fire/EMS System

Dear Chief Johnson:

This letter is to request the services of the Virginia Fire Services Board (VFSB) in conducting a complete and thorough review of the Fire and EMS system in Halifax County.

This study has the support of the Halifax County Board of Supervisors and County Administration as shown by the unanimous vote to request the study at the recent May 5th Board of Supervisors meeting.

The requested areas of concentration of this study include:

- Organization
- Budget and Administration
- Training
- Delivery of Services / Staffing
- · Fleet Design and Management (Equipment/Apparatus)
- Emergency Medical Advisory Committee
- Halifax County Fire Commission
- · Logistics of Apparatus and Staffing

It is the Board's and County Administration's proposal to have a complete and thorough review of the aforementioned areas of concentration and a comprehensive list of recommendations to enhance the delivery of services to the citizens of Halifax County.

Your consideration of this request at the next available opportunity would be greatly appreciated. I am available to respond to any questions you might have regarding this request. I can be reached by phone at the above number, or by email at srs@co.halifax.va.us. Thank you for your assistance with this important project.

Sincerely,

Sun

Scott R. Simpson, PE, MPA Halifax County Administrator

APPENDIX B

Other resources available to the Emergency Services Coordinator and Halifax County

1. Community Paramedicine

- a. https://www.vdh.virginia.gov/emergency-medical-services/community-paramedicine-mobile-integrated-healthcare/
- b. NFPA 450: Guide for Emergency Medical Services and Systems, 2021 Edition
 - i. Chapter 14 Operations
 - ii. Annex B Time Intervals and Components.
 - 1. https://catalog.nfpa.org/NFPA-450-Guide-for-Emergency-Medical-Services-and-Systems-P1307.aspx#:~:text=The%20comprehensive%202021%20edition%20of%20NFPA%20450%2C%20Guide,well%20as%20during%20the%20evaluation%20of%20measurable%20outcomes.

2. Manuals

- a. NVFC: Understanding & Implementing Standards: NFPA 1500,1720, and 1851
 - i. https://www.nvfc.org/resource_item/understanding-implementing-nfpa-standards-1500-1720-1851-english/
- b. NVFC: Understanding & Implementing Standards: NFPA 1407 and 1021
 - i. https://www.nvfc.org/wp-content/uploads/2015/09/Standards-Guide-Vol2-1407-1021.pdf
- c. NVFC: Psychologically Healthy Fire Departments Implementation Toolkit
 - i. https://www.nvfc.org/wp-content/uploads/2021/01/PHFD-Implementation-Toolkit.pdf
- d. NVFC: What to expect: A Guide for Family Members of Volunteer Firefighters Volunteer Fire Services Culture: Essential Strategies for Success
 - i. https://www.nvfc.org/guide-for-family-members-of-volunteer-responders-now-available/

3. Informational Sheets

- a. Training Volunteer Firefighters to be Combat Ready
 - i. Section 9: Developing and Implementing Training Best Practices
 - ii. Appendix B: Sample Knowledge and Skills Based Annual Training Topics Plan
 - iii. Appendix E: How to Use NFPA Standards To your Department's Advantage
 - 1. https://www.iafc.org/docs/default-source/1vcos/operational-training-guide.pdf
- b. The 16 Firefighter Life Safety Initiatives
 - i. https://www.everyonegoeshome.com/16-initiatives/
- c. VFIS: NFPA 1500 Fire Department Occupational Safety, Health and Wellness Program Worksheet (2018 Edition)
 - https://education.vfis.com/Portals/0/Documents/wellness/NFPA-1500-Worksheet-2018-Edition.pdf
- d. NVFC: Conducting a Recruitment and Retention Needs Assessment

i.	https://www.nvfc.org/wp-content/uploads/2016/12/RR-Needs-Assessment.pdf