



## BYLAWS OF THE CAFC EMERGENCY SERVICES ADVISORY COUNCIL



### ARTICLE 1 - NAME

The name of the Council shall be the CAFC EMERGENCY SERVICES ADVISORY COUNCIL, as approved by the General Council of CAFC. A short title for the Council may be the “ESAC.”

### ARTICLE 2 - COMPOSITION AND MEMBERSHIP

The Council shall be comprised of appointed members, which fairly represents the services, agencies, professions and organizations, as well as the general public, which are regularly involved in the provisions and mission of Emergency Services in the Caribbean. The specific membership of the Council is as designated in prior correspondence from the General Counsel. Council members must be residents of the Caribbean or of Caribbean heritage. The terms of office shall be 3 years. The President of CAFC as provided for shall fill all vacancies. Voting members of the Council shall be as provided for based on General Counsel practice.

Council membership shall be on a voluntary basis, and members shall receive no compensation for services unless articulated in writing by the CAFC Executive Board and must support the mission of ESAC. Members may be reimbursed per diem and travel in accordance with the rules and regulations of the Caribbean Association of Fire Chiefs.

The President of CAFC may replace members, other than ex officio, missing three consecutive meetings in a two-year term, after vote from the Executive Council and on the advice of the ESAC chairperson.

All newly appointed members of the Council will receive a copy of the bylaws from the CAFC ESAC, prior to assuming their duties.





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### ARTICLE 3A - PURPOSE

The purpose of the Council is to evaluate current laws, administrative rules and policies regarding Emergency Services in the Caribbean and to make recommendations to the Caribbean Association of Fire Chiefs as to changes that might be made to provide the best emergency health care possible to the residents and visitors within the Caribbean. In prioritizing its pursuits, the Council shall be guided by the ESAC's Strategic Plan.

In executing its purpose the Council shall:

1. Promote and sustain a cooperative environment among all providers of emergency services in the Caribbean.
2. Coordinate with agencies involved in emergency services whether they be private, nonprofit, government, quasi governmental, volunteer or any other such group, whose interest is in providing emergency response, care and transportation.
3. Review EMS, health and disaster related statutes, administrative rules, planning documents, and policies to determine their appropriateness to the conduct of emergency services in the Caribbean; based upon such reviews report to CAFC the recommendations for positive change.
4. Ensure that all proposals related to current laws, administrative rules and policies regarding emergency services in the Caribbean for Council action shall be presented to CAFC's Executive Board. Other proposals or actions can be brought to the Council without 30 days notice at the discretion of the Chair upon discussion with the Executive Committee.
5. Foster the awareness and education of the general public within the various Caribbean countries regarding emergency services within their communities.





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### ARTICLE 3B - PURPOSE

Caribbean Emergency Services Registry Certification is important to the entire Caribbean. Credentialing and registration assures individuals that the emergency services professionals providing care are competent regardless of where their training was completed. The goal of the Emergency Service Advisory Council and the Registry is to offer this assurance to the residents and visitors of the Caribbean. Obtaining recognition by the Caribbean Association of Fire Chiefs' Emergency Services Advisory Council and its Registry is the only way for nation countries to communicate to the public and agencies that the credentialed members have demonstrated a Caribbean level of competency. The CAFC Emergency Services Registry process provides a standard that Caribbean citizens deserve – at their moment of greatest need whether during a natural disaster or an unfortunate call for service (fire, medical or rescue). During times of natural disasters or other situations, the Emergency Services Registry will serve as a resource with access to trained and credentialed emergency services persons.

CAFC ESAC Registry certification levels require successful completion of both cognitive and psychomotor exams. Initial credentialing will require validation of training competencies as confirmed by institutional confirmation by the Council. Institutions such as the University of the West Indies, Barbados Community College, National Council on Technical and Vocational Education and Training, National Registry (US), Canadian Registry, and any educational institution from within the United Kingdom or Canada will be granted reciprocity. The aforementioned list is not all-inclusive.

Members wishing to be granted reciprocity during the initial credentialing process must submit the required documents as indicated in the electronic submission process. After the initial period of reciprocity has been completed, any new providers wishing to be credentialed will be assessed a fee of \$25 US (payable to CAFC) / or as other arrangements made by a memorandum of understanding. After the initial open registry period, the Training Section of the ESAC (firefighting, EMD and EMS) will coordinate evaluation





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sessions for all new members to be credentialed. Upon successful completion, the candidate will be granted an acknowledgement of ESAC credential and be provided a patch to be worn on their uniform proudly displaying the CAFC ESAC credential. A certificate will also be granted. Successful completed portions of the exam (both cognitive and psychomotor) remain valid for a twenty-four (24) month period (expires December 31). Renewal of credentialing requires demonstrated portfolio competencies or re-evaluation. Portfolio competency will include attendance at the Annual CAFC Conference, attendance at the CAFF conference, and any other training conducted by a recognized institution for a total of 56 hours.

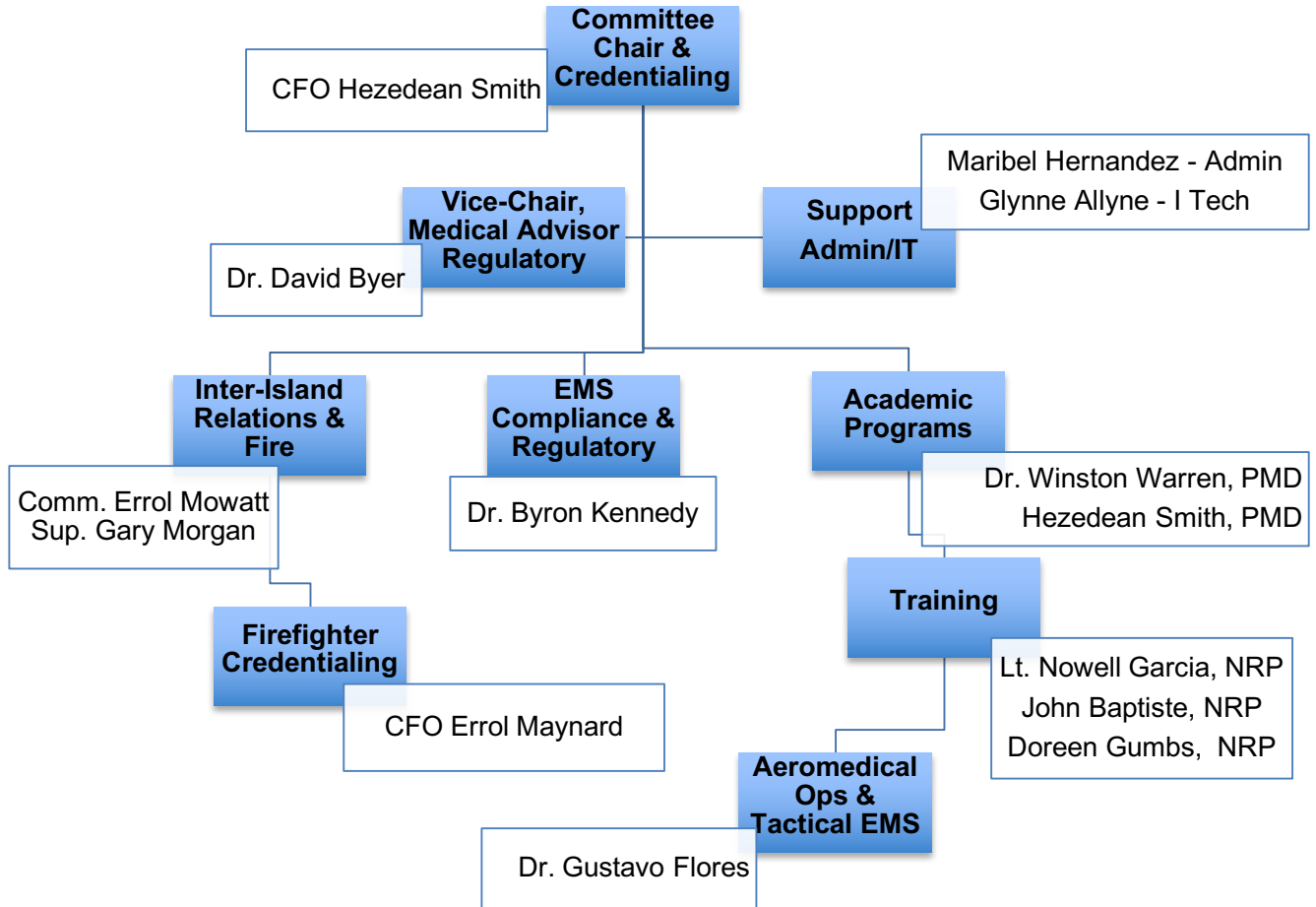
### ARTICLE 4 - OFFICERS

The eight (8) directors/officers shall include Committee Chair/Credentialing, Vice-Chair/Medical and Advisor/Regulatory, Administrative Support, and Technical Communications, Inter-Island Relations Representatives, EMS Compliance /Regulatory, Academic Programs, Training, Aeromedical Operations and Tactical EMS Sub-Directors,

The President of CAFC and Executive body shall make the initial appointments for a term of three (3) years. These officers shall serve as the Executive Committee.



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### ARTICLE 5 - PROCEDURES

Among the responsibilities of the Executive Committee are:

- Ensuring the priorities of the CAFC, as articulated in the Strategic Plan, are addressed
  - Developing the agenda for upcoming meetings
- Representing the CAFC EMSAC at needed meetings and discussing the merits
- Developing strategic partnerships
- Advancing the
- Identifying and deliberating on emerging issues that may require the Council's attention and/or resources



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The ESAC chairperson shall preside at all regular and special meetings of the CAFC ESAC. The chairperson shall conduct the meetings in accordance with Robert's Rules of Order, provide agendas in advance of the meetings and will provide all Committee members equal opportunity to be heard.

The vice-chairperson or another CAFC ESAC member designated by the chairperson shall perform the duties of the chairperson in the absence of said chair, including representing the chairperson at Caribbean-wide meetings with strategic partners.

The Administrative Assistant shall monitor and report on the attendance of CAFC ESAC member and other committees. The Administrative Assistant also will ensure accurate minutes of all meetings.

The parliamentarian shall be knowledgeable of Robert's Rules of Order, advise the chairperson, the Executive Committee and CAFC EMS Advisory Council, and chair the Nominations Committee. The Nominations Committee will be responsible for the nominating process and will be appointed by the chairperson.

Any vacancies in the above offices that occur prior to the complete term being served, shall be filled by chairperson appointment, subject to Council approval. A vacancy in the chairperson's office will be filled by appointment by the President of CAFC.

### ARTICLE 6 - MEETINGS

The CAFC Emergency Services Advisory Council shall hold meetings monthly meetings on the 4<sup>th</sup> Wednesday every month at 8:00 a.m. Eastern Standard Time via the use of the CAFC conference line or other electronic medium. Additionally, at the request of the chairperson, as provided for or upon the written request of five (5) members of the Council, or at the call of the Director of CAFC meetings shall be held. Proper notice (email) shall be communicated at least three (3) days prior to any special meeting.





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The year shall be the same as the CAFC's fiscal year beginning January 1, and ending December 31.

A majority of the members of the CAFC EMS Advisory Council shall constitute a quorum. The Caribbean Medical Advisor will join and be seated in person or virtually with the Council at their regularly scheduled meetings.

### ARTICLE 7 - COMMITTEES

In addition to the CAFC EMS Advisory Executive Committee, the standing committees of the Council shall include, but shall not be limited to,

- Interprofessional Education Committee
- Medical Care Committee
- Disaster Response Committee
- Legislative Committee
- Data Committee
- Public Information Committee
- EMS Strategic Visions Committee

The CAFC Advisory Council chairperson shall be an ex officio member of all standing and ad hoc committees and shall be responsible for their task completion. The chairperson shall appoint at least one member of the Council to each committee. The committees will meet in conjunction with the Emergency Services Advisory Council as requested and conduct one mid-term conference call.

Ad hoc committees of the CAFC Emergency Services Advisory Council may be appointed a chairperson as needed. If not appointed by the ESAC chairperson, committee chairpersons shall be elected from the members of each committee by a simple majority vote.

The tasks and products of any such committee shall be well defined by the ESAC and will





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include progress made toward achieving the CAFC ESAC Strategic Plan. Specific dates for reports to the entire Council will be established.

### ARTICLE 8 – CERTIFICATION LEVELS

- EMR (emergency medical responder)
- EMT-B (emergency medical technician - basic level)
- EMT-A (emergency medical technician – advanced level)
- EMT-P (emergency medical technician – paramedic)
- EMD (emergency medical dispatcher)
- CERT (community emergency responder team member)
- FF I (firefighter – Level I)
- FF II (firefighter – Level II)
- FO (fire officer)
- CFO (chief fire officer) / CEMSO (chief EMS officer)

### **CERTIFICATION DEFINITIONS**

Adopted from the National EMS Scope of Practice Model: EMS Personnel Licensure Levels

- Emergency Medical Responder

The primary focus of the Emergency Medical Responder is to initiate immediate lifesaving care to critical patients who access the emergency medical system. This individual possesses the basic knowledge and skills necessary to provide lifesaving interventions while awaiting additional EMS response and to assist higher level personnel at the scene and during transport. Emergency Medical Responders function as part of a comprehensive EMS response, under medical oversight. Emergency Medical Responders perform basic interventions with minimal equipment.







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- Emergency Medical Technician

The primary focus of the Emergency Medical Technician is to provide basic emergency medical care and transportation for critical and emergent patients who access the emergency medical system. This individual possesses the basic knowledge and skills necessary to provide patient care and transportation. Emergency Medical Technicians function as part of a comprehensive EMS response, under medical oversight. Emergency Medical Technicians perform interventions with the basic equipment typically found on an ambulance. The Emergency Medical Technician is a link from the scene to the emergency health care system.

- Emergency Medical Technician - Intermediate

The primary focus of the Advanced Emergency Medical Technician is to provide basic and limited advanced emergency medical care and transportation for critical and emergent patients who access the emergency medical system. This individual possesses the basic knowledge and skills necessary to provide patient care and transportation. Advanced Emergency Medical Technicians function as part of a comprehensive EMS response, under medical oversight. Advanced Emergency Medical Technicians perform interventions with the basic and advanced equipment typically found on an ambulance. The Advanced Emergency Medical Technician is a link from the scene to the emergency health care system.

- Paramedic

The Paramedic is an allied health professional whose primary focus is to provide advanced emergency medical care for critical and emergent patients who access the emergency medical system. This individual possesses the complex knowledge and skills necessary to provide patient care and transportation. Paramedics function as part of a comprehensive EMS response, under medical oversight. Paramedics perform interventions with the basic and advanced equipment typically found on an ambulance. The Paramedic is a link from the scene into the health care system. Each educational level assumes mastery of previously





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stated competencies. Each individual must demonstrate each competency within his or her scope of practice and for patients of all ages.

- Emergency Medical Dispatcher

The emergency medical dispatcher (EMD) is the principle link between the public caller requesting emergency assistance and the emergency service resource delivery system. As such, the EMD plays a fundamental role in the ability of the EMS system to respond to a perceived medical emergency. With proper training, program administration, supervision, and medical direction, the EMD accurately queries a caller, selects an appropriate method of response, provides pertinent information to responders and gives appropriate aid and direction for patients through the caller. Through careful application and reference to a written, medically approved, emergency medical dispatch protocol, the EMD is a core team member of an emergency services system.

- CERT

Individuals trained and prepared to respond during a disaster to any hazards that may impact their area and is also trained in basic emergency response skills, such as fire safety, medical emergencies, light search and rescue, team organization, and disaster medical operations. Using training learned in the classroom and during exercises, CERT volunteers can assist others in their community responding to the needs of their community during and emergency or a disaster when professional responders are not immediately available to help.

- Firefighter I

The primary function of the Firefighter I is to protect the community from disaster situations, including house and building fires, and promote an environment of public safety within their response area. This position also participates in fire prevention and inspection activities, equipment and quarters maintenance, and training dealing with all phases of fire suppression, prevention, inspection, rescue and emergency operations.





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- Firefighter II

The primary function of the Firefighter II is inclusive of the aforementioned, however this position carries responsibilities of supervisory accountability that may include driver, lead or other appropriate designation based on country.

- Fire Officer

The credential is held by a firefighter who has attained the rank of Sub-Officer, Junior Fire Officer or above but is considered a Fire Officer (or equivalent based on resident country) however may still be involved in front line operational service or assigned administrative responsibilities.

- Chief Fire Officer (CFO) / Chief EMS Officer (CEMSO)

Performs a variety of technical, administrative, and supervisory work in planning, organizing, directing and implementing fire prevention, suppression and/or emergency medical services to prevent or minimize the loss of life and property by fire and emergency medical conditions. Plans, coordinates, supervises and evaluates Fire and/or EMS operations. Advises on and establishes policies and procedures for Fire and/or EMS. Plans and implements Fire and/or EMS programs for a particular jurisdiction or department in order to better carry out policies and goals including those set forth in the various Ordinances, and Fire Codes. Reviews Departmental performance and effectiveness. May be involved in the supervision and coordination, preparation, presentation, and spending of an Annual Budget for a Fire and/or EMS agency. Plans for and reviews specifications for new or replacement equipment for agency. Responds to alarms, administers initial emergency (care or response and or service) when necessary and directs activities at the scene of emergencies as required. Is involved and responsible for the inspection of buildings and other properties for fire hazards and enforces local fire prevention ordinances as well in Fire Code as applicable. Controls the expenditure of departmental appropriations. Ensures Departmental discipline is maintained and the conduct and general behavior of assigned personnel appropriate.





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ARTICLE 9 – COGNITIVE EXAMINATION

The ESAC Registry will establish reliable and valid cognitive testing examinations based on established standards for EMS, Firefighting, EMD professions appropriate for the Caribbean. The ESAC is committed to determining competency in the most reasonable, precise and defined method possible, the goal of ESAC is to develop a process that will implement computer adaptive testing to deliver all examinations.

The Training Committee team (EMS and Fire) will work collaboratively with established academic institutions within the Caribbean, Caribbean Association of Firefighters, along with CAFC to develop the cognitive assessment process.

With computer adaptive testing (CAT), each question will be tailored to the individual candidate. This means that if you answer the question correctly, the next question can be slightly more challenging. If you answer a question incorrectly, the following question will be slightly easier. With each question examinees are asked; the computer algorithm statistically re-estimates your ability. This estimate gets more and more precise as the exam progresses. This means no two exams are exactly alike. The exam however is designed so that all competent candidates can pass. The number of items a candidate can expect on the exams and maximum amount of time given to complete the examination vary by exam.

Exam level	Questions	Maximum Time
First Responder	80 - 110	1 hour 45 minutes
EMT-Basic	70 - 120	2 hours
EMD	70 - 120	2 hours
EMT-P	80 - 150	2 hours 30 minutes
Fire Officer	70 - 120	2 hours





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Firefighter I & II	70 - 120	2 hours
CFO/CEMSO	None	Portfolio Review

All exams include pilot test items that do not count for or against exam results. Pilot questions are being evaluated for possible inclusion on future exams based on established guidelines and directions from a recognized academic institution within the Caribbean.

All exams will cover the entire spectrum of EMS care including: Airway and Breathing, Cardiology, Trauma, Medical, Obstetrics and Pediatrics, and EMS Operations in addition to all aspects of firefighting to include: forcible entry, branch line deployment, ladders, breathing apparatus competency, basic firefighter search and ventilation techniques, community emergency response, emergency medical dispatcher and any other discipline within the scope of these bylaws.

In order to pass the exam, emergency services providers in the Caribbean must meet a standard level of competency. The passing standard is defined by the ability to provide safe and effective entry-level emergency medical care, firefighting, emergency response and Chief Officer roles regardless of country of original training. The ESAC will provide feedback on performance in these areas in the event an examinee is unsuccessful in passing the exam.

### ARTICLE 9 – PSYCHOMOTOR EXAMINATION

The ESAC Registry will establish reliable and valid psychomotor evaluations based on established standards for EMS and Firefighting professions appropriate for the Caribbean. The ESAC is committed to determining competency in the most reasonable, precise and defined method possible, the goal of ESAC is to develop a process that will implement computer adaptive testing to deliver all examinations.

The psychomotor evaluation provides a hands-on opportunity for the examinee to





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demonstrate the skills necessary to function in any Caribbean country upon migration or during natural disaster recovery efforts.

Psychomotor exams will cover the entire spectrum of EMS care based on level of training. These areas include: Airway and Breathing, Cardiology (EKG recognition), Trauma Assessment, Medical Assessment, Obstetrics and Pediatric Emergencies, and EMS Operations in addition to all aspects of firefighting to include: forcible entry, branch line deployment, ladders, breathing apparatus competency, basic firefighter search and ventilation techniques.

Arrangements for this examination will be made with the designated CAFC ESAC Examination Coordinator. A current listing of scheduled psychomotor examination sites will be established and published on the CAFC's website. Additional testing opportunities will be conducted annually at the CAFC Conference.

A CAFC Representative who oversees the administration of the psychomotor examination will forward results of exams to the Regulatory Director for official processing. The Training Committee team (EMS and Fire) will work collaboratively with established academic institutions within the Caribbean, Caribbean Association of Firefighters, along with CAFC to develop the psychomotor skills assessment process.

### ARTICLE 10 - AMENDMENTS

These Bylaws may be repealed or amended upon a majority vote of the ESAC by recommendations brought forth by:

1. A recommendation of five or more members of the CAFC Emergency Advisory Council.
2. A recommendation of the Director of CAFC
3. Documentation will substantiate any changes to these bylaws





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### ARTICLE 10 – MISCELLANEOUS

Official written communication from the ESAC shall be signed by the chairperson and be placed on Council stationery.

### ARTICLE 11 – SUPPLEMENTS

Supplements will be provided to address specific competencies that encompass the credentialing efforts of this advisory committee.

Approved by Council approval on April 27, 2016

