Hampshire County Emergency Services Agency – Director

Job Summary

The Director of the Hampshire County Emergency Services Agency (HCESA) serves as the chief administrative and operational leader for the county EMS system. The Director is responsible for overall agency management, including personnel administration, budgeting, compliance, system performance, and coordination with county leadership and partner agencies. The Director ensures that HCESA delivers safe, effective, and efficient EMS services and maintains compliance with all applicable laws and standards.

The Director reports to the Hampshire County Commission with HCESA Board recommendation.

CORE DUTIES AND RESPONSIBILITIES

Administrative and Organizational Leadership

- Provide leadership and direction for all HCESA operations, personnel, and programs.
- Establish organizational goals, performance expectations, and operational priorities.
- Supervise command staff and administrative personnel; conduct evaluations and manage personnel matters.
- Ensure policies, procedures, and operational guidelines are current, compliant, and consistently applied.

Operations Management

- Oversee daily EMS operations, deployment strategies, response performance, and service delivery.
- Ensure adequate staffing levels and approve schedules developed by supervisory staff.
- Maintain oversight of fleet, facilities, equipment, and operational readiness.
- Respond to major incidents or emergencies as needed; not assigned to routine field shifts.

Operational Response Expectation

- The Director is expected to maintain operational awareness and competency as a certified Paramedic (if credentialed). The Director may respond to major incidents, multi-unit responses, or emergent staffing shortages when necessary to ensure system readiness and public safety.
- The Director is not assigned to routine field shifts and shall not be used as primary staffing except in circumstances where minimum staffing cannot be met.
- Any operational response or field assignment shall not interfere with the Director’s administrative, leadership, or strategic responsibilities and must be balanced to ensure continuity of agency operations.

Financial and Resource Management

- Develop and manage the annual operating budget.
- Monitor expenditures, revenues, billing practices, and financial performance.
- Oversee procurement, asset management, and long-term capital planning.
- Prepare financial reports and present recommendations to the Board and County Commission.

Compliance and Risk Management

- Ensure compliance with federal, state, and county EMS regulations, licensure requirements, HIPAA, and agency policies.
- Oversee internal audits, incident reviews, and corrective actions.
- Maintain secure and confidential records.

Quality and System Performance

- Oversee system-level quality improvement efforts in coordination with the Medical Director and Training Officer.
- Review system performance data, response metrics, and operational trends.
- Implement system improvements based on data analysis and QA/QI findings.

Interagency and Community Relations

- Serve as the primary liaison to the HCESA Board, County Commission, volunteer agencies, hospitals, law enforcement, emergency management, and community partners.
- Represent HCESA at meetings, public events, and interagency planning activities.
- Address public concerns and service-related issues professionally and promptly.

Emergency Management

- Participate in county emergency planning and support emergency operations during disasters or major incidents.
- Ensure agency preparedness for severe weather, mass-casualty incidents, and other emergencies.

MINIMUM QUALIFICATIONS

Required

- Valid West Virginia driver’s license.
- NREMT Paramedic certification.

- Minimum ten (10) years of EMS experience, including at least five (5) years in a supervisory or management role.
- Demonstrated experience in budgeting, personnel management, and regulatory compliance.
- NIMS: IS-100, 200, 700, 800; ability to obtain IS-300 and 400 within one year.
- Proficiency with Microsoft Office and data-driven decision-making tools.

Preferred

- West Virginia Paramedic certification (or ability to obtain within six months).
- Bachelor's degree in EMS Administration, Public Administration, Healthcare Administration, Business Administration, or related field. *Strongly preferred.*
- Advanced EMS leadership or management training.
- Experience working with volunteer EMS or fire agencies.
- Experience in government or public-sector administration.

WORK ENVIRONMENT

Work is performed in office and field environments with occasional exposure to emergency scenes, adverse weather, and hazardous conditions. Evening, weekend, and on-call availability are required. The position is designated as essential personnel.

HCESA will review all applications before beginning interview process.

All applications / resumes are required to be delivered by 4PM September 10th, 2026 to the

Hampshire County Clerk

19 East Main St.

Romney, WV 26757

Or via email to

Clerk@hampshirewv.com

EOE

HAMPSHIRE COUNTY COMMISSION
HAMPSHIRE COUNTY EMERGENCY SERVICES AGENCY

55 Sunrise Blvd. - Romney, WV 26757
Ph: (304) 822-8518 Fax: (304) 822-7430

Application for Employment

Disclaimer: We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

PLEASE TYPE OR PRINT

Position(s) Applied for:

How did you learn about the position? (please --√)

☐ Advertisement ☐ Relative ☐ Inquiry ☐ Friend

☐ Employment Agency ☐ Other: _____

Last Name	**First Name**	**Middle Name**	
Mailing Address	**City**	**State**	**Zip code**
Physical Address (If PO Box or if different from Mailing Address:			
Telephone numbers: Home: Cell: Other:	**Best time to contact you?**	**am/pm**	**Social Security Number** - -
Email Address:			**Date of Birth:**

Please check yes or no to the questions below:	Yes	No
Have you ever filed an application with us before? If yes, Give date:		
Do any of your family members work here?		
Are you currently employed?		
May we contact your present employer?		
Are you legally eligible for employment in the United States? *(proof of citizenship or immigration status required upon employment)*		
Are you currently on "lay-off ' status and subject to recall?		
Can you travel if a job requires it?		

Have you ever been charged of a crime (excluding traffic violations)?

Date available for work:

___ /___/___

If yes, what State? Date of Charge:

*Desired salary range?*_____

Are you available to work:

(Please check all that apply)

☐ *Full time* ☐ *Part-time*
☐ *Temporary* ☐ *Rotating shifts?*

Do you have a preferred shift? ☐ *Days*
☐ *Evenings* ☐ *Nights*

EDUCATIONAL INFORMATION

	Name and Address of School	Course of Study	Years completed	Diploma/Degree
High School				
Technical School				
Undergraduate College				
Graduate Professional				
Other (specify)				

Describe any specialized training, apprenticeship, skills and extra-curricular activities below (including any job-related training received in the United States Military:

EMPLOYMENT HISTORY

Start with your present or last job. *Attach additional pages as necessary. Include any job-related military service assignments and volunteer activities. You may exclude organization which indicate race, color, religion, gender, national origin disability or other protected status.*

Employer:		Dates Employed		Work Performed:
Address :		From	To	
Telephone Number(s):		Starting Salary	Final Salary	
Job Title:	Supervisor:			Reason for leaving:

Employer:		Dates Employed		Work Performed:
Address :		From	To	
Telephone Number(s):		Starting Salary	Final Salary	
Job Title:	Supervisor:			Reason for leaving:

Employer:		Dates Employed		Work Performed:
Address :		From	To	
Telephone Number(s):		Starting Salary	Final Salary	
Job Title:	Supervisor:			Reason for leaving:

Employer:		Dates Employed		Work Performed:
Address :		From	To	
Telephone Number(s):		Starting Salary	Final Salary	
Job Title:	Supervisor:			Reason for leaving:

List professional, trade, business or civic activities and offices held. *(You may exclude membership which would reveal gender, race, religion , national origin, age, ancestry, disability or other protected status.)*

Other Qualifications: Summarize special job-related skills and qualifications acquired from employment or other experience.

Check below to indicate any specialized skills and equipment you have experience with:

☐ PC/MAC ☐ Typewriter (_ wpm) ☐ Keyboarding (wpm) ☐ Spreadsheets

☐ NIMS Training (Nat'l Incident Management System/Incident Command) ☐ EMT ☐ Paramedic

State any additional information you feel may be helpful to us in considering your application:

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given?

☐ Yes ☐ No

REFERENCES

*You must include three **non-family member references** who can speak to us as to your character and abilities as they would apply to this position.*

Reference 1

Name: _____ Phone number(s)_____

Mailing address: _____

Email Address : _____

Reference 2

Name: _____ Phone number(s) _____

Mailing address: _____

Email Address: _____

Reference 3

Name:_____ Phone number(s):_____

Mailing address: _____

Email Address: _____

For Personnel Office Use Onlv

References:

1- ☐ Favorable ☐ Unfavorable Date checked:_____Checked by:_____

Comment: _____

2- ☐ Favorable ☐ Unfavorable Date checked:_____Checked by:_____

Comment: _____

3- ☐ Favorable ☐ Unfavorable Date checked:_____ Checked by:_____

Comment: _____

Office Use Only

Position(s) Applied For Is Open: ☐ Yes ☐ No Position(s) considered for: _____

_____

Date:_____

APPLICANT'S STATEMENT

I certify that the answers given are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge the Employee at any time, with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand also, that I am required to abide by all rules and regulations of the employer.

_____	_____	_____
Printed / Typed Name of Applicant	Signature of Applicant	Date signed

WE ARE AN EQUAL OPPORTUNITY EMPLOYER.

For Personnel Department Use Only

Arrange Interview? ☐ Yes ☐ No

Hired ☐ Yes ☐ No Date of Hire:_____

Job Title _____ Hourly rate/Salary:_____

Department_____ Supervisor_____

Hired by_____	_____	_____
Printed Name	Signature	Title and Date

Ph: 304 822-8518
Fax: 304 822-7430

Return Application to:

Hampshire County Clerk
19 E. Main Street Romney, WV 26757
Email: clerk@hampshirewv.com

PLEASE READ THIS APPLICATION CAREFULLY

All sections of this application shall be completed, submit any additional information which you feel is pertinent to the position you are seeking. Do Not erase, scratch through or change this application in any manner. Application is to be clean and legible.

This position for which you are about to apply for requires pre-employment drug screening.

The position for which you are about to apply for will expose you to information that must, as a requirement by law, be kept confidential. For this reason, in order for you to be considered for the position, you will be required to submit to rigid testing standards, through interview(s) and a COMPLETE background investigation.

STATEMENT OF UNDERSTANDING

Read and Sign this statement to indicate your agreement to these terms and conditions:

TO: Any Law Enforcement agency, court or other governmental body; or

Any Doctor, Hospital, Medical Association; U.S. Armed Forces, Maritime Service Veterans Administration; the U.S. Selective Service System; or

Any academic Dean, Registrar, Principal, Guidance Counselor, or other authorized person at any College, business trade or high school; or

Any past or present employer; Credit Bureau or Retail Merchants Association; Bank financial Institution or any other credit extending agency.

I have applied for employment with the Hampshire County Commission and I am aw re that my entire background is to be investigated. Upon presentation of this release or copy hereof, I hereby respectfully y request and authorize you to furnish the Hampshire County Sheriff's Office /Commission any and all information you have concerning me my work performance, school record and conduct my reputation and any of my financial and credit status. Please include any and all medical and physical and mental records or reports, including information of a confidential or privileged nature, and photocopies of the same if required. This information is to be used to assist the Hampshire County Commission in determining my qualifications and fitness for the position I am seeking.

I hereby waive all rights to view or have access to any information given to the Hampshire County Sheriff's Office/Commission as part of the employment investigation. I hereby release you, your organization or other from any liability or damage which may result from furnishing the information requested to be released above.

_____ _____ _____ _____

Signature of Applicant Date signed