



Board of Directors Meeting
April 17th, 2014 - 1:00 pm – 3:00 pm
Station 19, West Des Moines EMS

Conference Calling: to (857) 216-6700, Conference Code 223239

- Call To Order – Jerry Ewers—1:03 pm
- Welcome/Roll Call/Proxies/Determination of Quorum/Conflict of Interest— Quorum—no conflicts Katy Hill 1st, Linda Frederiksen 2nd
- Guest: System Standards Committee Members, Rebecca Curtiss, Steve Mercer
- Approval of Agenda – 1st Rob Marsh, 2nd Tom Summitt
- Minutes of March 20th, 2014 Meeting –Approved 1st Curtis Hopper, 2nd Jeff Dumermuth
- Treasurer's Report Mark McCulloch – Approved 1st Linda Frederiksen, 2nd Katy Hill (March Financials) Reviewed March Financials. No Big Red Flags here.
 - Billing & Management is doing well.
 - Conference Software—refund will be in next month
 - Membership registrations are down. Decline dues being paid.
 - Aging Summary – Large one for Llifequest – that's for the billing conference. Lisa will follow-up on this. Will forward to Linda Frederiksen or Jerry Ewers if needed.
- Office Administration—Updated Board on Database change from Memberzone to Avectra.
- Lobbyist Report—Tax Credit Bill is in the Senate house ways and means committee. They will be making a decision which tax credits are in the mix. There is always a push for veterans. We hope to be a part of that. We've made our case—hope for the best. 10% Medicaid increase in the. Language for firefighters was corrected—EMS not. Timeline ran short—ours is written and ready to go when they have time to address.
- Bureau of EMS Report – IDPH Staff –Rebecca Curtiss
 - House file 2463 legislative budget request for Amer. College of Surgeons. \$65,000 for ems data and collection system. On to Senate House Ways & Means. \$150,000 SF2349—is also in Senate House Ways & Means. Hoping that goes through.
 - RFP—for data system—was posted 6-8 weeks ago—lots of questions. One concern was not enough money to do this system. Applications due April 22nd, Team is together, two people evaluation people (Trauma and EMS-blind – are assigned). Three internal evaluators.
 - Linda Frederiksen commented—if not enough money what then? Rebecca Curtiss indicated she has some preparedness money we might be able to use.
 - Estimates were taken from recent purchases and maintenance cost.
 - changes in the Bureau –Katie Linn left—and Cindy Heick and Janet Houtz trauma coordinator resigned. Trauma posted with a nurse and trauma experience with that job.
 - Steve Mercer and Joe are working closely—Joe to work more with training centers and initial certification
 - Steve Mercer will work more on regulatory side.
 - Bureau—merging with CDOR—not going to do anything until session is over. To have final discussions before final decision
 - Ken Sharp, Rebecca Curtiss and Mark McCulloch—South Dakota Trip—Helmsley Grant—they have 3 programs, Tele-medicine, Lucas devices program, e-health. Two we were most interested in—simulation vehicles, which are Semi Trucks fully equipped ambulance and trauma center—manikin storage etc. Second year you have to sustain 30%, the 50% then fully sustained. Lucas compression devices and sustainability of program \$700-750 in the state of Iowa. Take a hard look at it—by population etc. Telemedicine—working with AHA Steve Mercer and Katy Hill charitable trust works with them. Looking at doing that one. Total Tele-health, Tele-medicine—large hospital systems based in Sioux Falls. Manage lots of hospitals less than 25 beds—very little staff—e-pharm e-em, e-icu. They use this to assist small hospitals. Big hospital can be online with these small hospitals with specialist—via electronic devices, video etc. Amazing—the difference it makes in quality of care in those smaller hospitals. Mark McCulloch suggested they do it for doing it in hospitals. Apply for the funds for the entire set-up 100% training and equipment. More data and more info and push it out to the hospitals. Spirit Lake Spencer, 5 Great North West area of Iowa. Jerry Ewers asked what is the timeline. Preparedness is due May1. Mid-May for Lucas devices. Lucas devices—survey by end of



month. Simulation Vehicles—that will take some time—because we need to find someone to partner with us to sustain these vehicles. It's ¼ million to sustain them a year. We can't apply for this grant until we have a sustainability program. Jerry Ewers—any discussion about how we can put the word out—about this in our publications VOICE, E-news. Mark McCulloch—Lucas Devices might be the safest to put some word out. Report on the trip—without getting too far ahead of ourselves. E-pharm, e-hosp, e-icu. Zoll has a system that is similar to this program. Steve Mercer—Everything is really broad in their survey right now. This program is not out of the realm, but perhaps some pilot studies. Rebecca Curtiss—what the end result? Steve Mercer—the funding of equipment. Basic equipment. In order to apply for the grant you have to prove a need. Reach out to the Rural Services. Survey to access the need.

- IDPH will be surveying – recertification system. Just did it—went pretty AA piece was a little clumsy. Sent 3,900. 3,000 recertified. Why are they not recertifying. Sending out a recertification survey to figure out why we're losing 1,000 providers a year. Retire, transition...etc. Will share data when they have it.
- IPOST—surveys went out. It took Rebecca Curtiss a long time to figure it out. So if it took us that long—it must be hard too for EMS services to use. EMS Service Directors should have gotten the survey this week, which will also go out to public health for input for better ways to educate folks in EMS about it. Jerry Ewers—is on IPOST committee—there is a lot out there. EMS folks think they can't do it because it's not an authorized form. Patient centric not facility centric. Linda Frederiksen—good for pre-hospital because they can't follow advance directives. Lawyer thought we honored those. IPOST is for patients not facilities, with the original staying with the patient. Has to be filled out in conjunction with physicians. Jerry Ewers—feedback is cleaner and easier if get rid of out of hospital DNR and accept only IPOST—and that would eliminate the confusion. IPOST is in code—but IDPH has to maintain the form. Linda Frederiksen—question there is something in code—that says there in conflict with advanced directive. It's going to be great—because it eliminates the gray area.
- Diane Williams working with the program (what program?)
- Chapter 132 rewrite—Steve Mercer is leading effort. 6 more months before we're done. Steve Mercer. Try to have a draft to go to workgroup—by October—it's a tedious work. Had (6) ½ day meetings to gather information—and trying to feed that into the rules. To make sure when we put it in—we think of all the "what ifs". It's so big—next question might be to rewrite or dump and start over.

Committee Reports

- Executive – J. Ewers –Old bus mobile integrated healthcare. Billing & Management Conference-Exec. Board Strategy Meeting prior and post-conference. Be sure the planning for organization is done for this year.
- Conference – J. Dummermuth – Deferred to co-chairs for reports
- Speakers – T. Summitt – Reviewed the program for next year.
- Awards – B. Smith –no report
- Entertainment – Katy Hill – Corporate Sponsor for Entertainment—same band. Looking for a theme. Silver Anniversary—that's all that's left. To get folks to have some fun with costumes or something fun. Will do the Thursday night again too.
- Exhibit Hall – J. Jorgensen—no report
- Honoring Our Own – T. Summitt – when you know of someone passing, let Tom know. We have 10 for this year. Lots of compliments last year. Trying to get film/video of events from around the state.
- Legislative/ByLaws – L. Frederiksen-call to actions lots –getting a lot of replies and forwards. We've commented with legislators more. If we can get up to 25% on Medicare—we're still way behind. We'll be seeing the 10% approved on July 1, 2013 sometime in April Thanks everyone for their level of engagement—and involvement this year. Lynzey Kenworthy has done a great job for us. Jerry Ewers—thanked Linda Frederiksen—the boiler templates have helped. Jeff Dummermuth—Medicaid data from Midwest comparison was very telling. Mark McCulloch—consistent message from our membership has really helped. Local level—looking at the training in the military to see if we can use those providers. It goes both ways—we can't use some of their training—they (military) don't take our training. This is a push from the President. If we can find ways to get veterans involved in the community. Now they are letting him test out—initially bumps up the graduation date 6-8 weeks. Some progress, at least acknowledging some of that training.
- EMSAC – L. Frederiksen-Rebecca Curtiss covered in her report. We did some QA-benchmarks on some procedures. Some data and quality improvement programs we'll start working.
- Membership – Individual – M. McCulloch – no report
- Membership – Affiliate – C. Hopper – no report
- Membership – Corporate – J. Ewers – no report
- Marketing/Web – J. Beach-Sickels – no report
- EMS Week – K. Hill – Waiting to hear from Katrina to hear about the PR templates available for services to use. Memorial—speakers—struggling. Governor's office can't do it. Sen. Danielson possible. So Rebecca Curtiss is talking. And maybe Jerry Ewers. Elizabeth—says governor—no but possibly Kim Reynolds. Friday 16th Noon-Proclamation signing for EMS Week Governor will May 16th at Noon. Call Kim for Drury for Friday and Saturday families.
- Leadership Academy – J. Dummermuth – no report
- Voice/eNews – M. Briones – no report
- Scholarships – B. Rechkemmer – no report



- Old Business

- AD&D Insurance Rider for Flight Providers
 - The carrier has provided the following information: *“The annual cost to remove exclusion 3b & c, and to add the flight program risk is an additional \$1,458.00 (this would be prorated based on the effective date of coverage).”*
 - *We posted the rider on our website—we did a survey of the state association to see what they offer. Extra \$24 per person to cover. Regional safety program.*
- Para-Medicine Task Force Meeting Met this morning 9-11:15 , Linda Frederiksen—lot of different parties at the table, 25 people there. A good mix of professions. Identified what do and what we call it, what’s the education curriculum, endorsement for it, gap analysis to see what the community needs. Some already working together with hospital. Do patients in your community have readmission issues because of congestive heart failure? Rebecca Curtiss had a power point from NAEMT. Mobile Integrated Healthcare involves the use of a scale for body weight monitoring, point of care labs, monitoring and educating regarding prescribed medications, and following the patient from the billing perspective. EMS is the defacto community healthcare provider because of the patient’s ability to call 9-1-1. Linda Frederiksen has a dispatcher EMS perspective take away—better job communications and educating; there is nothing that prevents an EMS service from doing this today. This area is not yet addressed in either legislation or scope of practice. Need to work out the liability—medical director would be taking that on. Nursing is nervous. What would the functions of this service be? Goals to filling what kind of gap? Is it assessment and analysis or diagnosis? IEMSA will champion, IDH will assist— assemble an executive team of varied professions to identify the appropriate questions. Meet a couple times in May and then meet again. To look at some template – Mt. Pleasant could be a pilot program—because it’s got a public health and EMS program. IEMSA goal—highlight a successful system—and then others can mimic it and massage it to meet their community and service needs. Jeff Dumermuth—Medicare denials high-how’s this effect that. Jerry Ewers—A Mason City Chief presented some data he’s been tracking for a while. We’re just going to have to work through this the ACA is going to change the way we do business. No answer right now.
- Helmsley Grant Update – M. McCulloch – Helmsley grant covered in IDPH report.

- New Business

- EMS Bureau “System Standards Review” – Looking for another representative for this committee. Where is it going now that the funding has dried up. Some instructors are using the same PowerPoint.
- Overview of System Standards—so we can support IDPH in this system. We did the pilot study we did the work. But where are we now?
- Guest—System Standards Committee Members (SS) --EMS Bureau supports it—but it’s a committee of providers that are volunteering to put in time. 2010 formally recognized as a subcommittee EMS Advisory Council. The actual chair EMS standards committee chair is Keri Hall. Rex H. Newton Fire also works on the committee is also here. We are trying to make sure people understand they are SS voluntary. Documents are on website –for the bureau under bureau programs. Started in 2006 met for a year 25 people of various backgrounds—to write some standards that would help define minimums. It can be interesting and controversial—and heated discussion. We had to agree—that the point is to design a system taking everything out of it—and now putting in the pieces of an ideal EMS system. Take all the challenges away. Once we got to that point we were able to make a lot of progress. Designed with respect to what works in one county doesn’t work in another. It does not tell you how to do it. Guiding principles in this set of standards—is flexibility. Started drafted 80 standards, after 4 counties piloted it—there was some redundancy—and revised it down to 52 system standards. 8 different sections. A few controversial. Example: EMD—is controversial. But, everyone agrees EMD is important part of a vital EMS system. There is so much interest and momentum—so they decided to let services take it and use it. Take pieces of it and use it. Educate services on request to help services overcome objections and hurdles to implementing a part of the system. Did regional workshops on it around the state. Now it’s as requested. Not a bureau of EMS initiative. It’s all volunteer committee that go out and help services. Lot of progress with folks doing it on their own. The money that comes out from the department—is specifically targeted for systems standards. \$200,000 training. It’s been used for training—but it should also be used system development.
- Jerry Ewers question—are there any county coordinator to help with this system. Rex H. --Idea is to create this utopia of EMS. Use the funding to hire a contractor to access county—to set forth a strategic plan how to move forward to improve their system. Most use it to train EMT’s but using it like that will improve the whole system. Not a competitive grant—it’s just an application. Helps to educate Legislative people about EMS systems. Lots of kinds of success stories. Just have to apply for monies that will be used to improve your service to meet a system standard.
- Hiring somebody to do administration and paperwork, some doing other things with the money. The service defines what they do—they just have to have the goal—to meet a system standard. Identify your need—then look and see if it’s in the system standards—then you can apply and improve your system.



- Not dictating—what EMS Systems do—but to be a guide to develop to the standard. What tools can we take out to departments, services. Doesn't have to be county.
- Trying to push a process—not a product.
- Tom Summitt—in Muscatine—reviewed the system standards to see if it fit what we're doing in Muscatine. Some groups don't want anything to do with it—if it isn't about training. But we try to show them it's about more than system standards.
- Pilots and folks now—are surprised when they look at the System Standards they are surprised by how much they meet already. Self—assessment—is a win. It's not a mandate. The assessment is going to help them identify an area where they can improve.
 - Webinars & Video overview of it about to hit.
 - Steve Mercer it's a tool not regulation.
 - Article in Voice. Rex H. will talk to Keri Hall.

Motion to Adjourn: 3:32pm --1st Tom Summitt, 2nd Cherri Lynch



Board of Directors Meeting
 Attendance --April 20th, 2014
 West Des Moines Fire Station #19 – 1-3pm

Board Members - Please place your initials in the column provided to indicate your attendance. If you are delivering a proxy, please write the word "Proxy" and your initials in the space provided for the member for whom you are delivering the proxy.

Member's Name	Area of Responsibility	Initials/Proxy
Beach-Sickels, Jan	Southwest Region	Present
Briones, Mary	Education	Present
Buck, Brad	At Large	Present by Proxy J Ewers
Davison, Robert	North Central Region	Absent
Dumermuth, Jeff	South Central Region	Present
Ewers, Jerry	At-Large	Present
Frederiksen, Linda	Southeast Region	Present
Dan Paulsen	Northwest Region	Present (Dan Paulsen)
Hill, Katy	South Central Region	Present
Hopper, Curtis	Northeast Region	Present (Conf Call)
Jorgensen, John	Northwest Region	Present
Libby, Bob	Southeast Region	Absent
Marsh, Rob	Southwest Region	Present
McCulloch, Mark	South Central Region	Present
Morgan, Rick	Northeast Region	Absent
Rechkemmer, Brian	Education	Present by Proxy M Briones
Ridge, Lee	Northeast Region	Absent
Fuerhing, Cherri	Southwest Region	Present
Stecker, Terry	Northwest Region	Absent
Smith, Brandon	At-Large	Present by Proxy L. Frederiksen
Summitt, Tom	Southeast Region	Present
Sachen, Mark	North Central Region	Present
Eastman, Jeff	North Central Region	Present (Conf Call)
Guest: EMS System Standards Committee Members, Rebecca Curtiss IPDH, Steve Mercer		
Arndt, Lisa	Office Manager	Present