

EMS Partnership of Kent County Meeting Minutes

February 12, 2015
10:30 a.m.

Riverview Building
678 Front NW, Suite 200
Conference Room

Members Present: City of East Grand Rapids: Brian Donovan, Mark Herald
City of Grand Rapids:
City of Grandville: Ken Krombeen
City of Kentwood: Rich Houtteman, Steve Kepley
Plainfield Charter Township: Cameron Van Wyngarden
City of Rockford:
City of Wyoming: Curtis Holt, James Carmody

Members Absent: City of East Grand Rapids:
City of Grand Rapids: Eric DeLong, Tom Almonte
City of Grandville: Andy Richter
City of Kentwood:
Plainfield Charter Township: Ruth Ann Karnes
City of Rockford: Dave Jones, Michael Young
City of Wyoming:

Also Present: Jen DeHaan, Mark Fankhauser (City of Grand Rapids), Mike May (City of Grandville), Dale Pomeroy (Plainfield Township), Damon Obiden (KCEMS)

Meeting called to order at 10:40 by Ken Krombeen

1. Minutes - The minutes of the November, 2014 meeting were reviewed. A motion was made by Holt with support by Donovan to approve the minutes. Motion Carried.
2. Finance – Ken Krombeen reviewed the finance report. A motion was made by Van Wyngarden and supported by Kepley to accept the finance report. Motion Carried.

3. Project Manager Report

Jen DeHaan explained that since the last meeting, the Agreement has been revised based upon the feedback from the Consortium and redistributed to the EMS Agencies. Also during this time, the Consortium has been working to complete a legal review which is being coordinated by Jeff Sluggett and that he is also working with the other municipal attorneys. DeHaan reviewed a PowerPoint presentation which explained the progress and process of the discussions with the EMS agencies and provided a summary of the changes that had been made to the Agreement and the outcomes that are to be achieved in the current draft of the Agreement.

DeHaan noted that over the past several months the Consortium had reviewed and discussed the feedback from the EMS agencies and had made revisions to the draft Agreement to address many of the concerns which were raised. A summary of those changes was briefly reviewed and included the following changes:

- Reliance on KCEMS to establish medical standards as they are the Medical Control Authority.
- At the suggestion of the EMS providers, it adds the requirement for each EMS agency to maintain accreditation with CAAS. Through the accreditation process, the EMS Providers would ensure compliance with best-practices for vehicle mileage, driving safety, and billing and collection processes. In addition, the Consortium could request review of any of those standards.
- Removal of requirements that have significant cost-implications and identified alternative solutions such as a web-based link to the CAD rather than a CAD-to-CAD link. Concerns had been raised by the EMS agencies regarding requirements for specific medical equipment which were above and beyond the requirements of KCEMS. I
- Major and Minor Breaches Simplified
- Termination Clause and Process Changed
- Removes regulation of non-emergency medical transports.
- Adds a provision that all parties may agree to make minor amendments to the service areas.

A discussion ensued as to the ability to make changes to the service areas. It was noted that the original draft did not provide any ability to amend the service areas and that if the municipalities desired to make changes to the services areas, it would not be possible with the original language. Recognizing that minor changes to the Service Areas throughout the duration of the Agreement may be desired, the revised language would allow for changes as long as the providers, KCEMS, and the municipalities agree. In addition, members discussed the language related to definition of minor and if there needed to be additional clarification regarding this language. It was noted that it is important for there to be a process in place in order to address changes to the service areas. It was noted that one option would be to clarify the language and that a participating local unit of government could make a request to the Consortium for a change to service area, provided that KCEMS supported the change, and that the Consortium could then approve a change to the service area. It was noted that the

Consortium has not desired to change the Service Areas but that having an agreement that did not have a process for changes could be challenging for the municipalities. It was noted that the language and the process for changes will continue to be reviewed by legal counsel to determine if there is alternate language that will address the concerns.

DeHaan noted the goals of the Consortium which were to work towards improving medical outcomes, creating data and reporting standards, ensuring continuity of service, and promoting transparency in the provision of EMS services.

- 1) Improve Medical Outcomes
 - ❑ Data reporting standards and data reporting process enable analysis and reporting to the municipalities on Medical Outcomes
 - ❑ Provides a platform for continued review and discussion
- 2) Data and Reporting Standards
 - ❑ Reporting Process Established
 - ❑ Response Time Metrics Established
 - ❑ KCEMS to identify medical data standards
- 3) Performance Guarantee
 - ❑ Agreement includes a provision requiring a performance bond.
- 4) Transparency
 - ❑ Achieved through regular data reporting standards and review
 - Response Times
 - Web-based link to show ambulances available
 - ❑ Rates assessed by EMS Agencies are disclosed to Consortium and limited in the amount it may increase by a CPI index.
 - ❑ EMS agencies to provide a web-based link to show online units; available at dispatch centers

DeHaan noted that there are several issues that continue to be raised by the EMS agencies which include: 1) cost implications of the performance bond, 2) Mandatory RFP Process in the 11th year, 3) 180-day termination clause, 4) arrangement with KCEMS to perform data analysis and the issue regarding KCEMS fees. DeHaan noted that the Consortium had discussed several of these issues in the past, but that they are likely to continue to be issues that are raised by the EMS providers.

A discussion ensued related to the definition of “on-scene.” It was noted that the Consortium may need to change this language in order to address concerns regarding response processes. In addition, it was noted that the response time penalties were not significant and a discussion ensued regarding the intent of the penalty. DeHaan noted that the feedback received today would be brought back to the attorneys to develop the desired language and bring that back to the Consortium at the next meeting.

Chair Krombeen noted that he is working to meet with each of the EMS agencies and has already met with AMR and is working to schedule meetings with LIFE and Rockford Ambulance. The purpose of those meetings is to identify any remaining issues that they have and to bring those back to the Consortium. Chair Krombeen stated that if members of the Consortium are interested in attending those meetings to please let him know.

4. Other Business
5. Next Meeting – March 12
6. Public Comment - The Board received no public comment.
7. Adjourn - The meeting was adjourned at 12:30.