

Step 1: Establish an EMS Council to study our county's needs and make a system recommendation



EMS—An Essential Service for Wapello County

Packet & Presentation contents for January 28th Board of Supervisors:

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Timeline to get started with Resolution and Establish Council

WAPELLO COUNTY EMS ESSENTIAL SERVICE DECLARATION RESOLUTION 2025 TIMELINE (Revised)

January 14th- Board work session to review Ch 422D, Essential Service Resolution, educate Supervisors on history and the need.

January 28th- Board discussion and approval to move forward with consideration of the resolution.

February 1st- a 60-day notice will be published in Ottumwa Courier that gives the public notice the Board will be considering the resolution on April 8th.

April 8th- First reading of Resolution. Board approval of Council Charter and Council membership appointments.

April 22nd- Second reading of the Resolution.

May 6th- Third reading and adoption of Resolution. Formal establishment of Council. Set performance metrics.

Monthly meetings of the Advisory Council TBD

Date of Ballot question TBD

RESOLUTION # _____

**DECLARE EMERGENCY MEDICAL SERVICES (EMS)
TO BE AN ESSENTIAL SERVICE IN WAPELLO COUNTY,
IOWA AS AUTHORIZED BY IOWA CODE SECTION 422D.1**

WHEREAS, the Wapello County Board of Supervisors has the authority under Iowa Code 331.301(1) to "...exercise any power and perform any function it deems appropriate to protect and preserve the rights, privileges, and property of the county or of its residents, and to preserve and improve the peace, safety, health, welfare, comfort, and convenience of its residents"; and

WHEREAS, Wapello County supports EMS to its residents and seeks to provide Emergency Medical Services to all its citizens and visitors; and

WHEREAS, ensuring efficient and effective EMS coverage is essential for maintaining the health and welfare of its residents; and

WHEREAS, the Wapello County Board of Supervisors recognizes the importance of maintaining and advancing the level of care, capability, and coverage of Emergency Medical Services (EMS) in Wapello County; and

WHEREAS, on June 9, 2021, Iowa Senate File 615 was signed into law by Governor Reynolds, amending Iowa Code Section 422D.1, giving Iowa Counties the ability to declare EMS an essential service for their respective county, thereby making it possible for counties to propose additional funding sources for EMS to the county's voters at an election.

WHEREAS, Wapello County Board of Supervisors, on January 14, 2025, directed that notice of the first meeting to consider this resolution be made and any other actions be taken as necessary to proceed with the process under Iowa Code Section 422D.1 to declare EMS to be an essential county service.

NOW, THEREFORE, BE IT RESOLVED by the Wapello County Board of Supervisors, that Emergency Medical Services (EMS) is hereby declared an essential service in and for Wapello County, Iowa, and the Wapello County Board of Supervisors will exercise the necessary power and functions appropriate to preserve the health, safety, and welfare of Wapello County residents and provide for an effective and efficient Wapello County Emergency Medical Services (EMS) System that allows for quality care for the persons living, working or traveling in Wapello County, Iowa.

Exercising said necessary power and function includes, but is not limited to, the establishment of a Wapello County Emergency Medical Services Advisory Council and the proposition of a local option income surtax and/or ad valorem property tax to fund EMS to be voted upon by Wapello County voters.

NOW, BE IT FURTHER RESOLVED, that adoption of this resolution will allow:

1) The creation of a county emergency medical services system advisory council to assist in researching/assessing the service needs of the county and guide implementation of the same under Iowa Code Section 422D.1.

2) For an election to be offered for voter approval of an ad valorem property tax not to exceed seventy-five cents per one thousand dollars of assessed value or ad valorem property tax for EMS and

NOW, BE IT FURTHER RESOLVED, if a proposition to fund EMS through either a local option income surtax or ad valorem property tax, or some combination thereof, fails to receive a favorable vote by at least sixty percent of those voting on the question, this resolution shall be deemed null and void.

1st Reading Date: _____ Pass/Fail _____

2nd Reading Date: _____ Pass/Fail _____

3rd Reading and Approval Date: _____ Pass/Fail _____

Upon final reading, the Roll Call vote thereon was as follows:

_____ Aye ___ Nay ___
Darren Batterson, Chair

_____ Aye ___ Nay ___
Bryan Zeigler, Supervisor

_____ Aye ___ Nay ___
Carrie Teninty, Supervisor

WHEREUPON, the Resolution was declared duly adopted this _____ day of _____, 2025.

ATTEST:

Kelly Spurgeon, County Auditor

CHAPTER 422D

OPTIONAL TAXES FOR EMERGENCY MEDICAL SERVICES

Referred to in §298.14

422D.1	Authorization — election — imposition and repeal — use of revenues.	422D.4	Payment to local government — use of receipts.
422D.2	Local income surtax.	422D.5	Property tax levy.
422D.3	Administration.	422D.6	Emergency medical services trust fund.

422D.1 Authorization — election — imposition and repeal — use of revenues.

1. a. Upon adoption of a resolution declaring emergency medical services to be an essential county service under subsection 2, and subject to the limitations of this chapter, a county board of supervisors may offer for voter approval the authorization to impose any of the following taxes or a combination of the following taxes:

(1) Local option income surtax.

(2) An ad valorem property tax not to exceed seventy-five cents per one thousand dollars of assessed value on all taxable property within the county.

b. Revenues generated from these taxes shall be used for emergency medical services as provided in section 422D.6.

2. a. To be effective, the resolution declaring emergency medical services to be an essential service shall be considered and voted on for approval at two meetings of the board prior to the meeting at which the resolution is to be finally approved by a majority of the board by recorded vote, as defined in section 331.101. Notice of the first meeting of the board at which the resolution is considered and voted on shall be published not less than sixty days prior to the date of the meeting in one or more newspapers that meet the requirements of section 618.14. The board shall not suspend or waive the requirements for approval of the resolution or approval of the imposition of a tax under this chapter.

b. Each county for which a resolution has been adopted under this subsection shall coordinate efforts with the local emergency medical services agencies to establish a county emergency medical services system advisory council to assist in researching and assessing the service needs of the county and guiding implementation of services in the county within a council structure.

c. The county emergency medical services system advisory council established under paragraph "b" shall recommend to the board of supervisors an amount of funding to be specified on the ballot, and if one or more of the taxes are approved at election, shall annually assess and review the emergency medical services needs of the county, and shall include the results of such review and assessment in an annual report filed with the board of supervisors. The annual report shall be publicly available upon filing with the board of supervisors. The board of supervisors shall receive public comment regarding the report at one or more meetings of the board of supervisors. Any meeting of the board of supervisors at which public comment on the annual report is heard shall be at least fourteen days following the date the annual report is filed with the board of supervisors.

d. A resolution declaring emergency medical services to be an essential service shall be deemed void if the proposition to impose the taxes fails at election, authority to impose the taxes expires, or if discontinuance of the authority to impose the tax is approved at election under subsection 5.

3. a. The taxes for emergency medical services shall only be imposed after an election at which sixty percent of those voting on the question of imposing the tax or combination of taxes specified in subsection 1, paragraph "a", subparagraph (1) or (2), vote in favor of the question. However, the tax or combination of taxes specified in subsection 1 shall not be imposed on property within or on residents of a benefited emergency medical services district under chapter 357F. The question of imposing the tax or combination of the taxes may be submitted at the regular city election, a special election, or the general election. Notice of the question shall be provided by publication at least sixty days before the time of the election and shall identify the tax or combination of taxes and the rate or rates, as applicable. If sixty

percent of those voting on the question approve the imposition of the tax or combination of taxes, the tax or combination of taxes may be imposed as follows:

(1) A local option income surtax may be imposed for tax years beginning on or after January 1 following the date the ordinance is filed with the director of revenue under [section 422D.3, subsection 3](#).

(2) An ad valorem property tax may be imposed for property taxes due and payable in fiscal years beginning after the fiscal year in which the election was held.

b. Before a county imposes an income surtax as specified in [subsection 1, paragraph “a”](#), subparagraph (1), a benefited emergency medical services district in the county shall be dissolved, and the county shall be liable for the outstanding obligations of the benefited district. If the benefited district extends into more than one county, the county imposing the income surtax shall be liable for only that portion of the obligations relating to the portion of the benefited district in the county.

4. Revenues received by the county from the taxes imposed under [this chapter](#) shall be deposited into the emergency medical services trust fund created pursuant to [section 422D.6](#) and shall be used as provided in that section.

5. For a county that is [not one of the eleven most populous counties](#) in the state, as determined by the latest preceding certified federal census or the latest applicable population estimate issued by the United States census bureau, whichever is most recent, [any tax or combination of taxes imposed shall be for a maximum period of fifteen years](#). For a county that is one of the eleven most populous counties in the state, as determined by the latest preceding certified federal census or the latest applicable population estimate issued by the United States census bureau, whichever is most recent, any tax or combination of taxes imposed shall be for a maximum period of ten years. Discontinuance of the authority to impose a tax under [this chapter](#) prior to the expiration of the period of years for which the tax is approved shall be by petition and election. Upon receipt of a petition signed by eligible electors of the county equal in number to at least twenty-five percent of the votes cast in the county for the office of president of the United States or governor at the last preceding general election or five thousand, whichever is less, the board of supervisors shall direct the county commissioner of elections to submit to the voters of the county the question of whether to discontinue the authority to impose one or more of the taxes under [this chapter](#). If a majority of those voting on the question of discontinuance of the board’s authority to impose the tax favors discontinuance, the board shall not impose the property tax for any fiscal year beginning after the election approving the discontinuance and shall not impose the income surtax for any tax year beginning after the election approving the discontinuance unless imposition is subsequently again authorized at election. Following expiration or discontinuance of the authority to impose the taxes under [this chapter](#), authority to reimpose the taxes requires approval in accordance with [this section](#).

[92 Acts, ch 1226, §17; 2011 Acts, ch 25, §83; 2013 Acts, ch 30, §92; 2021 Acts, ch 174, §55](#)

Referred to in [§422D.2, 422D.3, 422D.5, 422D.6](#)

2021 amendment to section does not affect the imposition and collection of taxes under [chapter 422D](#) in effect on July 1, 2021, and such taxes shall continue to be imposed and administered until the period of authority to impose such taxes in effect immediately prior to July 1, 2021, expires; [2021 Acts, ch 174, §60](#)

422D.2 Local income surtax.

A county may impose by ordinance a [local income surtax](#) as provided in [section 422D.1](#) at the rate set by the board of supervisors, of [up to one percent](#), on the state individual income tax of each individual residing in the county at the end of the individual’s applicable tax year. However, [the cumulative total of the percents of income surtax imposed on any taxpayer in the county shall not exceed twenty percent](#). The reason for imposing the surtax and the amount needed, as determined by the board of supervisors after recommendation of the county emergency medical services system advisory council, shall be set out on the ballot and in the ordinance. The surtax rate shall be set to raise only the amount needed. For

purposes of [this section](#), “*state individual income tax*” means the tax computed under [section 422.5](#), less the amounts of nonrefundable credits allowed under [chapter 422, subchapter II](#).

[92 Acts, ch 1226, §18; 97 Acts, ch 23, §46; 2006 Acts, ch 1158, §39; 2013 Acts, ch 123, §44 – 46; 2018 Acts, ch 1161, §51, 53, 54; 2020 Acts, ch 1062, §94; 2021 Acts, ch 174, §56](#)

Limit on local surtax, §298.14

2018 amendment applies retroactively to January 1, 2018, for tax years beginning on or after that date; 2018 Acts, ch 1161, §54

2021 amendment to section does not affect the imposition and collection of taxes under [chapter 422D](#) in effect on July 1, 2021, and such taxes shall continue to be imposed and administered until the period of authority to impose such taxes in effect immediately prior to July 1, 2021, expires; [2021 Acts, ch 174, §60](#)

422D.3 Administration.

1. A local income surtax may be imposed for tax years beginning on or after January 1 following the date the ordinance is filed with the director of revenue under [subsection 3](#), and is repealed as provided in [section 422D.1, subsection 5](#).

2. The director of revenue shall administer the local income surtax as nearly as possible in conjunction with the administration of state income tax laws. The director shall provide on the regular state tax forms for reporting local income surtax.

3. An ordinance imposing a local income surtax shall adopt by reference the applicable provisions of the appropriate sections of [chapter 422, subchapter II](#). All powers and requirements of the director in administering the state income tax law apply to the administration of a local income surtax, including but not limited to, the provisions of [sections 422.4, 422.20 through 422.31, 422.68, 422.70, and 422.72 through 422.75](#). Local officials shall confer with the director of revenue for assistance in drafting the ordinance imposing a local income surtax. A certified copy of the ordinance shall be filed with the director as soon as possible after passage.

4. The director, in consultation with local officials, shall collect and account for a local income surtax and any interest and penalties. The director shall credit local income surtax receipts and any interest and penalties collected from returns filed on or before November 1 of the calendar year following the tax year for which the local income surtax is imposed to a local income surtax fund established in the department of revenue. All local income surtax receipts and any interest and penalties received or refunded from returns filed after November 1 of the calendar year following the tax year for which the local income surtax is imposed shall be deposited in or withdrawn from the state general fund and shall be considered part of the cost of administering the local income surtax.

[92 Acts, ch 1226, §19; 99 Acts, ch 151, §35, 89; 2003 Acts, ch 145, §286; 2018 Acts, ch 1026, §131; 2020 Acts, ch 1062, §94; 2021 Acts, ch 174, §57](#)

Referred to in [§422D.1](#)

2021 amendment to subsection 1 does not affect the imposition and collection of taxes under [chapter 422D](#) in effect on July 1, 2021, and such taxes shall continue to be imposed and administered until the period of authority to impose such taxes in effect immediately prior to July 1, 2021, expires; [2021 Acts, ch 174, §60](#)

422D.4 Payment to local government — use of receipts.

1. On or before December 15, the director of revenue shall make an accounting of the local income surtax receipts and any interest and penalties collected from returns filed on or before November 1 and shall certify to the treasurer of state this amount collected. The treasurer of state shall remit within fifteen days of the certification by the director to each county which has imposed a local income surtax the amount in the local income surtax fund collected as a result of its surtax.

2. Local income surtax moneys received by a county shall be deposited and used as provided in [section 422D.6](#).

[92 Acts, ch 1226, §20; 2003 Acts, ch 145, §286](#)

422D.5 Property tax levy.

A county may levy an emergency medical services tax at the rate set by the board of supervisors subject to the limitation under [section 422D.1, subsection 1](#), paragraph “a”, subparagraph (2), and approved at the election as provided in [section 422D.1](#), on all taxable property in the county for fiscal years beginning with property taxes due and payable in the fiscal year beginning after the fiscal year in which the favorable election was held. The reason for imposing the tax and the amount needed, as determined by the board of supervisors

after recommendation of the county emergency medical services system advisory council, shall be set out on the ballot. The rate shall be set so as to raise only the amount needed.

[92 Acts, ch 1226, §21](#); [2021 Acts, ch 174, §58](#)

2021 amendment to section does not affect the imposition and collection of taxes under [chapter 422D](#) in effect on July 1, 2021, and such taxes shall continue to be imposed and administered until the period of authority to impose such taxes in effect immediately prior to July 1, 2021, expires; [2021 Acts, ch 174, §60](#)

422D.6 Emergency medical services trust fund.

1. A county authorized to impose a tax under [this chapter](#) shall establish an emergency medical services trust fund into which revenues received from the taxes imposed shall be deposited. Moneys in the trust fund shall be used for emergency medical services. In addition, moneys in the fund may be used for the purpose of matching federal or state funds for education and training related to emergency medical services. Moneys remaining in the fund following expiration or discontinuance of the authority to impose the taxes as provided in [section 422D.1, subsection 5](#), shall remain in the fund and may be expended for the purposes specified in [this section](#).

2. A county may enter into [chapter 28E](#) agreements with other counties in order to ensure adequate coverage of the county's service area.

3. Costs which are eligible for emergency medical services trust fund expenditures include, but are not limited to:

- a. Defibrillators.
- b. Nondisposable essential ambulance equipment, as defined by rule by the Iowa department of public health.
- c. Communications pagers, radios, and base repeaters.
- d. Training in the use of emergency medical services equipment.
- e. Vehicles including, but not limited to, ambulances, fire apparatus, boats, rescue/first response vehicles, and snowmobiles.
- f. Automotive parts.
- g. Buildings.
- h. Land.

[92 Acts, ch 1226, §22](#); [2021 Acts, ch 174, §59](#)

Referred to in [§135.25](#), [422D.1](#), [422D.4](#)

2021 amendment to subsection 1 does not affect the imposition and collection of taxes under [chapter 422D](#) in effect on July 1, 2021, and such taxes shall continue to be imposed and administered until the period of authority to impose such taxes in effect immediately prior to July 1, 2021, expires; [2021 Acts, ch 174, §60](#)

		Summary action items	2023 progress	2024 Action items
<p>1.01 System Administration: EMS System Structure; Organization; Mission</p>	<p>The EMS system shall have an advisory group with representation from one member of the County Board of Supervisors, one member from each of the EMS services in the EMS System, and one EMS physician medical director (designated as the EMS System medical director).</p>	<p>Establish who should be on the EMS Advisory Board that reports to the Board of Supervisors. Establish EMS Board as arm of County Board of Supervisors (5 to 7 people)</p>	<p>Formulated a potential list of members (position-based)</p>	<p>1. Agree on the list and get the list formally approved into an Advisory Group. 2. Take a look at the Assn. bylaws and create a solid definition of what membership in the Association means.</p>
<i>The EMS System advisory group shall annually:</i>				
<p>1. Assess each of the Iowa EMS System Minimum Standards and make provisions accordingly for emergency medical services treatment and transport within the system response area.</p>		<p>Action items: Check status of each service's protocols. Check status of the protocol update Andreas was working on. Relevant policies such as driving policy. Universal protocols. Annual update and education</p>	<p>New medical director hired by ORHC- Dr. Lyssy. He met with all service directors and agreed to oversee all the non- transports as well. He discussed county-wide protocols and electronic CQI with directors.</p>	<p>1. Work with Dr. Lyssy on implementing one set of county-wide protocols. 2. Establish an electronic CQI process in all services and connect with Dr. Lyssy.</p>

<p>2. Submit the assessment to the Iowa Department of Public Health Bureau of Emergency Medical and Trauma Services.</p>	<p>What is global big picture plan? What would our ideal EMS system look like? Individual townships/fire departments/Independent EMS agencies provide this service.</p>	<p>Wapello County EMS System in the post-pandemic world. How are we going to deliver services in 2023 and beyond? Vision document created- three revisions. Researched community paramedicine- funding and staffing key barriers to implementation. Discussed alternate transport options with public transit- made some progress with skilled facilities.</p>	<p>1. EMS Association/EMS Advisory Board agree upon a county-wide EMS structure 2. Present to Board of Supervisors to adopt as part of Essential Services.</p>
<p>3. Complete strategic plans to assure that gaps in Iowa EMS system standards assessments are met.</p>	<p>WCEMSA is completing system standards assessment and developing a plan for long-term system development. Completing 2022 assessment- first revision since 2012.</p>	<p>Annual update completed</p>	<p>Annual update completed</p>
<p>4. Develop policies and procedures to implement the Iowa EMS System Standards.</p>	<p>Action item: Need to assure common system standards for all services, and reviewed annually. Long-term goal based on pending changes of provider status and need to update system-wide.</p>	<p>No progress. We cannot proceed without having a true system.</p>	<p>No progress. We cannot proceed without having a true system.</p>

	<p>5. Identify funding mechanisms that are sufficient to ensure continued operation of the EMS System and services required to meet the needs of the population.</p>	<p>Work with Wapello County Board of Supervisors and EMS Taskforce to work toward EMS Essential Service designation and vote. WCEMSA to develop a system concept.</p>	<p>System concept documents created. Essential service resolution drafted and presented to BOS. Scheduled for vote but County Auditor failed to publish.</p>	<p>Need to start over with Essential Service Resolution.</p>
<p>1.03 System Administration: Medical Director / Medical Direction</p>	<p>The EMS system shall have an active physician medical director that participates on the advisory council. If multiple physician medical directors work with services within the EMS system, a physician medical director committee will be formed to support the EMS system physician medical director.</p>	<p>Action Items: Need to ensure coordination with County Medical Examiner. Need to work with Dr. Lyssy to streamline review processes to ensure accuracy and efficiency for his reviews. Need to ensure that there is a process for services to assure completion of continuing education (ie child/adult abuse training) and that providers know their scope of practice.</p>	<p>New medical director hired by ORHC- Dr. Lyssy. He met with all service directors and agreed to oversee all the non-transports as well. He discussed county-wide protocols and electronic CQI with directors.</p>	<p>Formal Advisory Council to be established and approved by BOS.</p>
	<p>The EMS system physician medical director shall assure that medical direction and medical consultation plans are in place to identify the role of hospitals and alternate medical consultation, as well as the roles, responsibilities, and relationships of out-of-hospital providers.</p>	<p>Action item: work to be done to educate public on community-wide medical services and how to access. Education on appropriate medical resources based on needs.</p>	<p>No progress</p>	<p>EMA has begun progress on this educational product.</p>

<p>The EMS system shall assess and document EMS resources and services available within the system's service area to respond to day-to-day and large scale emergencies. In coordination with county partners, a detailed inventory of EMS resources (e.g., personnel, vehicle, and facilities) within its area shall be maintained and, at least annually, updated in the electronic system provided by the Bureau.</p>	<p>Each service sends inventory to EMA to include vehicles, EMS inventory, radios that would be covered by insurance annually.</p>	<p>No progress</p>	<p>Still a need. Resources need uploaded into EMResources.</p>
<p>The EMS system advisory group shall annually review 911 services and the county EMS system as a whole based on this assessment to assure resources meet the needs of the public.</p>	<p>What does "meets the need" mean? What is our local definition? Every call gets an ambulance? Alternate modes of treatment such as community paramedicine? Home health care nursing?</p>	<p>No advisory group established. Members of the Assn. attempt to collect data and ask pertinent questions. CP programs researched. Discussions with PH regarding home health care-- lack of providers and agency de-certification a barrier.</p>	<p>Adopt an EMS System design document with buy-in from all potential participants.</p>
<p>The EMS system shall maintain up to date service rosters and assure provider certification.</p>	<p>Image Trend by each service director. Oversight by ? Need a central coordinator to manage data for all services. Long term goal: integration between Central Square dispatch CAD and Image Trend.</p>		
<p>The EMS system or services within the system shall have a policy regarding background checks.</p>	<p>Assessed by each service director currently. Action item: Identify the source used & who is HR that screens incoming applicants on hire-- survey services.</p>	<p>Information shared in Wapello Co. Mutual Aid Assn. meetings on process used in fire departments.</p>	<p>Create and share sample policies to be used by all services to establish congruency.</p>

**2.01 Staffing:
Personnel**

	The EMS system of services within the system shall credential personnel as per EMS certification level, scope of practice, and local protocol as authorized by the physician medical director.	Action item: Integrate the credentialing process with Wapello County EMA resource tracking system.	No progress on establishing a system. New medical director does seem interested in working on this.	
	The EMS system advisory group will assess staff numbers and staffing gaps in the system.	Review at annual meeting. Action item: Create an annual report to the public.	No progress due to no Advisory Council established.	Without central coordination, this task is difficult. Advisory Council still needs established. EMA attempts to fill the void.
	The EMS system advisory group will develop a training plan that details anticipated trainings in the system as needed by services within the system. The plan will coordinate education and training opportunities to reduce duplication of efforts and leverage local and system funding.	Low volume, high risk tasks. Scenario critical thinking situations. Medical director oversight from quality assessments. WCEMSA submits annual training plan to Region 5 for training funding reimbursements. Action item: document system training plan.	No progress to establish a true system. Without any type of central coordination, this task is impossible to do. IHCC has restarted an annual EMS conference. Several successful EMT courses in the area including the summer youth internship program.	Need to establish a system with a coordinator to ease burden on individual services. IHCC is working to provide more training opportunities locally.
3.01 Communications: Plan	The EMS system will work to establish an emergency medical dispatch priority reference system, including systemized caller interrogation, dispatch triage policies, and pre-arrival instructions.	Action items: a) Needs formal plan and subcommittee to work on; b) Needs further discussion, remote possibility; c) – Needs Subcommittee for review, definition of roles/responsibility (911 Dispatch Center)	No progress. Some discussion on combining our two PSAPs. Funding an issue.	EMD still a goal. More conversations are happening as it is starting to get recognized as a necessary first step to better utilize resources of all services.
3.03 Communications: Education	The EMS system shall be involved in public education regarding system access.	Need subcommittee for review, definition of roles/responsibility/plan design	No progress	Sub-committee needs established to create messaging.

<p>4.01 Response & Transportation: Service Area</p>	<p>The EMS system shall, in coordination with neighboring EMS systems, determine the emergency medical service response areas to assure the most efficient 911 responses.</p>	<p>Based on pre 1975 Fire Act, and determined per Township Fire Response. No specific method for determining response. District lines do not take into consideration proximity of EMS providers to patients. Needs subcommittee and plan (based on taxation/dispatch planning) Action item: Exploring options for county wide roster of EMS providers.</p>	<p>The fire MABAS plan has been extremely successful in the townships. The City of Ottumwa chooses to not participate. The conflicts between the full-time entity and the volunteer entities proves to be a barrier.</p>	<p>Create a System document that delineates how participating departments handle responses yet allow providers to function anywhere in the county.</p>
<p>4.02 Response & Transportation: Change to Policies and Procedures</p>	<p>The EMS system advisory group shall develop standard policies and procedures regarding response, transport, and minimum response times.</p>	<p>Action item: Research what are the current research points on safety for safe response times? Working group? NHTSA and NFPA?</p>	<p>No progress</p>	<p>Not on radar. We must establish fundamental elements first- EMS as an Essential Service, county-wide system and coordination. Buy-in from BOS and all services. Sections 1 & 2 remain priority focus.</p>
	<p>Policies and procedures will include response type, minimum response times, backup response plan, peak response and backup, and transport protocols.</p>	<p>New review of current staff struggles & increased call volumes. Part of current discussions with system standards assessment and future system design work by WCEMSA and EMS Taskforce. BLS services handling patient refusals really help protect system resources (available ambulance crews).</p>	<p>No progress</p>	<p>"</p>

<p>4.03 Response & Transportation: Air Medical Services</p>	<p>The EMS system shall have a process for identifying specialty air medical transport services and shall develop policies and procedures regarding: Request of air medical services Addressing/resolving formal complaints</p>	<p>Use of Air Services (Mercy, UIHC, etc. based on location/pt need) Action Item: education of all providers on current policies (common handbook). How to access. Dispatch contact with airmed dispatch. Recent visits by AirCare and LifeFlight. Spring LZ classes planned.</p>	<p>No progress</p>	<p>"</p>
	<p>The EMS system will work to establish an emergency medical dispatch priority reference system, including systemized caller interrogation, dispatch triage policies, and pre-arrival instructions.</p>	<p>Driven by police chief & sheriff. Doesn't seem to be a priority. Staffing and funding would be an issue.</p>	<p>No progress</p>	<p>"</p>
	<p>The EMS system shall have contingency plans and assure the development of mutual aid agreements to provide for emergent and non-emergent response and transport during increased system volume.</p>	<p>Mutual Aid Agreements; Tiered Response in conjunction with Fire or Law providers. Mutual Aid Assn. is working on revising the current county-wide mutual aid agreement. We cannot rely on surrounding counties to come in and help us with transports because they have challenges also. Going forward, ORMICS will not be able to be the sole 911 service provider. ORMICS revising contingency plan.</p>	<p>No progress</p>	<p>"</p>

<p>5.03 Trauma Care Facility Verification</p>	<p>The EMS system partners shall participate in the trauma verification process as available in the system area.</p>	<p>(Need to determine State Review) We are not conducting system-wide evaluations of actual incidents that include all providers or not including volunteers who need continuing education related to this. Discussion on scene flight protocol. Utilize GPS with the new Central Square CAD software to track units location.</p>	<p>No progress</p>	<p>"</p>
<p>6.01 System Evaluation: Continuous Quality Improvement Plan</p>	<p>The EMS system shall establish an EMS CQI program to evaluate the response to emergency medical incidents and the care provided to specific patients. The program shall address the total EMS system, including all pre-hospital provider agencies and hospitals. It shall address compliance with policies, procedures, and protocols and identification of preventable morbidity and mortality and document resolution of deficiencies found.</p>	<p>In place; Dr. Dieleman reviews; State reviewed criteria ?using Image Trend? Med Control prefers electronic run audits. Action item: get all services utilizing the electronic audit process in ImageTrend</p>	<p>No progress</p>	<p>"</p>
	<p>The EMS system shall establish an EMS CQI program to evaluate quality management, quality assurance and the system capabilities in order to establish benchmarks. The program shall address the total EMS system from dispatch to patient outcome.</p>	<p>Determine new benchmarks, revise CQI policy. Current policy not effective. Action item: write a new county-wide audit policy and implement electronic reviews.</p>	<p>No progress</p>	<p>"</p>

	<p>The EMS system shall conduct audits of out-of-hospital care including overall EMS system response to ensure that the patients' needs are matched to available resources including, but not limited to established benchmarks. It shall address compliance with policies, procedures, and protocols, and identification of preventable morbidity and mortality, and document resolution of deficiencies found.</p>	<p>Currently evaluating through this group (WCCEMSA). Needs a key person to assist with the data input & gathering.</p>	<p>No progress</p>	<p>"</p>
	<p>The EMS system shall develop and implement a procedure to review medical dispatch to assess if the appropriate level of medical response is sent for each 911 call and to monitor the appropriateness of pre-arrival/post-dispatch directions.</p>	<p>Refer to earlier discussions of dispatch system (3.03)</p>	<p>No progress</p>	<p>"</p>
<p>6.03 System Evaluation: Reporting</p>	<p>The EMS system shall complete an annual report on the results of the evaluation of EMS system operations to the County Board(s) of Supervisors.</p>	<p>Action Item: WCCEMSA to mail or in person presentation of annual report of service activities/statistics to each clerk for reporting.</p>	<p>No progress</p>	<p>"</p>
<p>7.01 Public Information:</p>	<p>Opportunities exist but will not be prioritized at this juncture.</p>			
<p>8.01 Disaster Medical Response:</p>	<p>Opportunities exist but will not be prioritized at this juncture.</p>			