

**STAFF MEETING MINUTES
LANCASTER COUNTY BOARD OF COMMISSIONERS
COUNTY-CITY BUILDING
ROOM 113
TUESDAY, MAY 16, 2000
3:30 P.M.**

Commissioners Present: Larry Hudkins, Vice Chair
Linda Steinman
Bernie Heier
Bob Workman

Commissioners Absent: Kathy Campbell, Chair

Others Present: Kerry Eagan, Chief Administrative Officer
Bruce Medcalf, County Clerk
Gwen Thorpe, Deputy County Clerk
Ann Taylor, County Clerk's Office

AGENDA ITEM

1 APPROVAL OF STAFF MEETING MINUTES OF THURSDAY, MAY 11, 2000

MOTION: Steinman moved and Workman seconded approval of the Staff Meeting minutes dated May 11, 2000. Heier, Steinman, Workman and Hudkins voted aye. Motion carried.

2 ADDITIONS TO THE AGENDA

None were stated.

3 EMERGENCY MEDICAL SERVICES (EMS), INC. - Ron Schwartz, EMS Inc. Executive Director; Doug Ahlberg, Emergency Management Director

Ron Schwartz, EMS Inc. Executive Director, distributed copies of the agreement EMS, Inc. entered into with the City of Lincoln, St. Elizabeth Community Health Center, Bryan Memorial Hospital, and Lincoln General Hospital in 1994 for the provision of medical control for Lincoln's emergency medical care system (Exhibit A) and a renewal agreement that was entered into in 1997 (Exhibit B).

Schwartz explained that EMS, Inc. was created in 1994 after the ambulance contract was awarded to Rural/Metro Medical Services. He said it was formed to provide medical direction and was given authority to establish medical dispatch protocols, to which agencies in the system were bound. Schwartz said quality assurance and medical direction was initially subcontracted through the Lincoln Medical Education Foundation (LMEF). It was subsequently decided that it was more appropriate for the Medical Director and Quality Improvement Coordinator to serve directly under EMS, Inc. and these positions and funds that were paid to LMEF for these services were shifted to EMS, Inc. Schwartz noted that for the first three and a half years, a Medical Director and an Assistant Medical Director were employed. He said the Assistant Medical Director left a year and a half ago and the position was not filled.

In response to a question from Hudkins, Schwartz said Dr. Reckewey remains accessible through his cellular phone and pager when out of town. He added that Mike Marinovski, Quality Improvement Coordinator, also provides assistance.

Schwartz explained that paramedics work off standing protocols and are no longer required to contact the hospital for medical direction and guidance.

Hudkins asked how often protocols are updated.

Schwartz said new medical protocols went into effect April 1, 2000. He said the protocols were divided into separate categories (Pediatrics, Cardiac, Respiratory and Trauma) and paramedics from the Fire Department and Rural/Metro Medical Services, with interest in those areas, met with physicians from the Lancaster County Medical Society (LCMS) Medical Directions Board to review and update those protocols. These protocols were then submitted to the Medical Directions Board for approval. That body forwarded the protocols, with recommendations, to Dr. Reckewey, Medical Director, who in turn submitted the protocols to the EMS, Inc. Board for approval. Schwartz noted that the paramedics serve under Dr. Reckewey's license, so his approval is crucial, and the EMS, Inc. Board serves as a check and balance.

In response to a question from Workman, Schwartz said he believes it is important to have parameters for system design in place prior to selection of a provider in order to define expectations and allow for pricing accordingly. He said the system design should be based on the patients' needs, not those of the individual providers.

Hudkins inquired about funding of EMS, Inc.

Schwartz referred to Exhibit B and said the intent of the existing contract was for the City of Lincoln to pick up the difference between the total of the approved budget of EMS, Inc. and the annual contributions of \$55,000 by St. Elizabeth Hospital, BryanLGH Medical Center East and BryanLGH Medical Center West, up to an amount of \$100,000 in any one fiscal year. He said the City's capped its contribution at \$55,000 for Fiscal Year 2000 with no prior notice to the EMS, Inc. Board.

Hudkins asked whether the City had requested an accounting of what would be cut as a result.

Schwartz said no, the City had requested resubmission of the budget with that contribution and an indication of what categories the funding would be placed in. He said the City and hospitals allowed EMS, Inc. to carry over a \$16,000 surplus from the prior fiscal year. In addition, the Medical Director accepted a pay cut of \$10,000, the travel/conference budget was reduced 80 percent, the education program was cut \$1,800 and the Contingency Fund was eliminated.

Schwartz distributed copies of the budget request EMS, Inc. submitted to the City for Fiscal Year 2001 requesting an \$86,500 contribution and a history of the City's contribution for the past five fiscal years (Exhibit C).

In response to a question from Workman, Schwartz said EMS Inc. also collects fees for medical control services that are provided to the Hickman, Cortland, Firth, Hallam, Douglas and Southeast Rural Fire Districts and the Airport Fire Rescue. He said this fee is based on call volume and averages \$200-\$350, per year. Schwartz explained that agencies providing transport or Advanced Life Support (ALS) service are now required to have a medical director.

Workman asked whether initiation of this fee had caused some of the rural fire districts to seek medical control services elsewhere.

Schwartz said the Southwest and Waverly Fire Districts were the only losses and he has not received any indication that this was due to the fee. He said EMS, Inc. was concerned with the Southwest Rural Fire District's decision to become an ALS provider and had questioned whether proficiency levels could be maintained. He said Southwest's decision to move to this level was based on difficulties experienced with Rural/Metro Medical Services.

Steinman noted that many of the Southwest Rural Fire District's volunteers are Lincoln firefighters and may have issues with EMS, Inc.

Schwartz said the hospitals, which contribute to funding, favor having EMS, Inc. provide medical control to the rural fire districts, as it ensures continuity of protocols.

Hudkins said some of the rural fire districts feel that EMS, Inc. and Dr. Reckewey, Medical Director, are not always responsive to their problems and don't provide them with opportunities to provide input on protocols.

Schwartz said EMS, Inc. may have been too aggressive in trying to bring the rural fire districts under their medical control. He said EMS, Inc. has met several times with the rural fire districts as a collective group and sought input on protocols. EMS, Inc. also provides training to the six rural fire districts it provides with medical control and holds bi-monthly meetings with them, although Dr. Reckewey has not attended these on a consistent basis.

Schwartz noted that Reckewey is leaving his position as Medical Director, but has agreed to stay until uncertainties regarding the position and its authority are answered.

Doug Ahlberg, Emergency Management Director, remarked that the needs of the County need to be addressed in the process to select a new medical director.

Schwartz distributed copies of the revised job description for Emergency Medical Services Medical Director (Exhibit D), noting Dr. Reckewey assisted with the revisions. He said the Lancaster County Medical Society (LCMS) will screen applicants for EMS, Inc. Schwartz added that EMS, Inc. believes the new Medical Director should be a member of LCMS and that that body should play a major role in the independent medical oversight.

In response to a question from Hudkins, Schwartz said since it is clear that the EMS, Inc. format is not acceptable to the City and the Fire Department, the Lancaster County Medical Society was asked to prepare a plan for independent medical oversight. He added that their proposal is merely a working draft.

In response to a question from Workman, Schwartz said the Lancaster County Medical Society is least likely to become political in terms of oversight.

Steinman noted there are concerns that if the provider has its own medical oversight, it may become a "rubberstamp".

Board members expressed concern regarding the proposed change to the system of appointment in the LCMS proposal, stating the elected officials are accountable to the public and should remain responsible for appointments to the oversight board.

Schwartz said before the decision was made to proceed with a Request for Information (RFI), the Fire Department and Rural/Metro attempted to negotiate a compromise. The Fire Department asked Rural/Metro to sign an agreement that made reference to a Lincoln Fire Department Medical Director and listed 23 points that it wanted Rural/Metro to agree to, including participation in a joint presentation on the needless expense of EMS, Inc. He said the contract was financially challenging and included standards that differed from those passed by LCMS. Rural/Metro rejected the agreement.

In response to a question from Hudkins, Schwartz said the new standards require paramedics to perform 12 IV's, 4 intubations, and have 24 ALS contacts, per six months. He reported that Rural/Metro met all of these requirements and 20 percent of the Fire Department paramedics met the intubation requirement, 25-30 met the IV requirement and the ALS requirement was not met. He said the system allows paramedics to fulfill IV and intubation requirements in the hospitals. Rural/Metro elected to do this, but the Fire Department did not.

Hudkins asked Schwartz for his opinion on how many paramedics are needed to serve the population of the City and County.

Schwartz said 18, although the system could afford to support 30-35 paramedics and keep them at a high level of proficiency, if there were a cooperative environment. He said Advanced Life Support (ALS) ambulances are more critical in rural areas where transport time is lengthy, adding it could be argued that the City could be adequately served by Basic Life Support (BLS) ambulances with defibrillation equipment, since transport time to hospital averages 4-8 minutes.

Ahlberg briefly reported on the Mutual Aid Association meeting that was held Monday night, noting rural fire district attendance was poor.

4 ACTION ITEMS

A. Microcomputer Requests:

1. C#200-157, Public Defender for \$1,169.96 from the Public Defender's Budget for Four (4) 17" Monitors

MOTION: Workman moved and Heier seconded to deny the request and suggest inclusion in the budget request for next fiscal year. Workman, Heier, Steinman and Hudkins voted aye. Motion carried.

2. C#200-158, County Extension Office for \$1,632 from the County Extension Budget for Forty (40) Ethernet Adapters

MOTION: Steinman moved and Heier seconded approval. Steinman, Heier, Workman and Hudkins voted aye. Motion carried.

- B. Vacation Request from Gary Chalupa, Veterans Services Officer, for May 22-26, 2000

MOTION: Steinman moved and Heier seconded approval. Steinman, Workman, Heier and Hudkins voted aye. Motion carried.

5 ADJOURNMENT

MOTION: Workman moved and Steinman seconded to adjourn the meeting. Workman, Steinman, Heier and Hudkins voted aye. Motion carried.

Bruce Medcalf
Lancaster County Clerk