

# EMS Partnership of Kent County Meeting Minutes

May 14, 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: Tom Almonte  
City of Grandville: Ken Krombeen, Andy Richter  
City of Kentwood: Rich Houtteman, Steve Kepley  
Plainfield Charter Township: Cameron Van Wyngarden, Ruth Ann Karnes  
City of Rockford: Michael Young  
City of Wyoming: Curtis Holt

**Members Absent:** City of East Grand Rapids:  
City of Grand Rapids: Eric DeLong  
City of Grandville:  
City of Kentwood:  
Plainfield Charter Township:  
City of Rockford: Dave Jones  
City of Wyoming: James Carmody

**Also Present:** Jen DeHaan – by phone, Mark Fankhauser (City of Grand Rapids), Mike May (City of Grandville), Dale Pomeroy (Plainfield Township), Damon Obiden (KCEMS), Patrick Lickiss (AMR), Bob Waddell (KCEMS), Ken Morris (Life EMS), Mark Meijer (Life EMS), Dick Whipple (AMR)

Meeting called to order at 10:40 by Ken Krombeen

1. Minutes - The minutes of the March, 2015 meeting were reviewed. A motion was made by Donovan with support by Herald to approve the minutes. Motion Carried.
2. Finance – Chair Krombeen reviewed the finance report. A motion was made by Kepley and supported by Almonte to accept the finance report. Motion Carried.

### 3. Project Manager Report

Jen DeHaan stated that the Consortium had worked through four drafts of the Agreement and recently distributed the most updated draft to the Consortium. DeHaan noted that a legal review was ongoing by the seven participating municipalities. She stated that the input provided during the last meeting of the Consortium provided the following changes:

- Suspended penalties for 18 months to allow the Consortium, EMS Providers, and KCEMS to adequately collect, analyze, and understand the current system of service.
- Included an incentive to waive penalties when they are enacted if response times are over 92% and authorized the Consortium in coordination with KCMES to change the response times, if necessary.
- Included a provision that would enable an exception for the insurance requirement and performance bond which would be considered at the request of the EMS Providers
- Eliminated the automatic forfeiture of 50% of bond
- Clarified the notification issue

In addition, DeHaan stated that the Consortium has made a number of changes since the original draft agreement. Some of the changes include:

- At the recommendation of the EMS Providers, rely upon the CAAS accreditation process to ensure compliance with best practices for various operational issues including vehicle standards, collection processes, staff trainings, etc.
- Relied on KCEMS expertise for language regarding medical standards and has removed language which is covered by KCEMS protocols.
- Changed language regarding termination clauses by eliminating the take-over clause
- Included a provision to require EMS Providers to provide a web-based link to the PSAPS rather than a CAD to CAD link
- Reduced the number of major and minor breaches in the Agreement to enable clearer understanding
- Eliminated the duplicate service fee
- Overall, the Agreement seeks to replicate the structure of the 911 system and Services Areas as they exist today.

### 4. Ambulance Contract Update

- Chair Krombeen reported the three ambulance service providers were invited to attend today's meeting and submit written comments. Chair Krombeen and Jen had been meeting with the providers one-on-one working through the issues up to this point. Today's meeting will bring them back together with the entire Consortium to have a dialogue on the significant issues that have been a concern to the EMS Providers and so that the Consortium can hear directly from the EMS Providers. At the conclusion of the meeting, Chairman Krombeen stated the Consortium will need to determine next steps with the Agreement. Krombeen thanked the providers for attending and noted that

Rockford Ambulance did not send a representative nor submit written comments. However, Mark Meijer and Ken Morris were present from LIFE EMS and Dick Whipple was present from AMR. Chair Krombeen opened up the conversation and invited Mr. Whipple to provide his comments and/concerns about the Agreement.

- Dick Whipple of AMR stated that he applauded the process, which has been positive, and that generally speaking it is unheard of for the EMS Providers to be involved in the drafting of the Agreement to the extent that the providers have in Kent County.
  - AMR has a question regarding the web-based link to the PSAPs. What is the reasoning and what is the consortium trying to accomplish? How is the information going to be used?
    - Chair Krombeen explained the genesis of this issue went back to the origin of the contract and being able to track location in real time. He noted that each of the EMS agencies has a system in place that actively monitors location and use of ambulances and that it can be difficult to draw conclusions from the information but that it does promote transparency with the EMS Providers.
    - Curtis Holt stated the concept was a takeoff of AVL as used by police
    - AMR would like to work with the Consortium on this if it is pursued further, offering coaching and training, etc.
    - Holt stated that it can be expected that some level of education be provided related to the information being provided. Dick noted that he would appreciate the opportunity to be able to answer questions at the PSAP level regarding understanding how the EMS dispatching process works.
  
- Mark Meijer of Life EMS offered the following comments:
  - Mr. Meijer had concerns with language regarding exclusive operating areas and suggested that the language throughout the Agreement be changed to “No-Preference 911 Service Areas” rather than assigning the exclusive operating areas as currently provided in the Agreement. He stated that this would allow his agency to respond to any call received provided that they could meet the response times.
    - A discussion ensued regarding the protocols for 911 calls as well as the process for transferring 7-digit calls that are received directly by the EMS Provider but that are coded through the EMD system and are required to be transferred unless the EMS Providers agree that there is a closer unit available that can meet the response times.
    - Chair Krombeen stated that the language of the Agreement is intended to reflect the system as it exists now and that it reflects the service areas which were agreed to through an Agreement with the Providers and with KCEMS in several years ago, approximately 2009.
    - Damon Obiden representing KCEMS provided an explanation of how the system works now under the current KCEMS protocols. He stated that a

911 call when it is received in the PSAP will be transferred to the EMS Provider that has the designated services area from where the call originated. He stated that the EMS Providers will then code the call through the EMD process and that will determine how the call is handled. For example, if the call is determined to be an “ECHO” call or cardiac cases, the EMS Providers will poll the other agencies to determine the closest unit available and that closest unit will respond. If it is not an ECHO call, the EMS Provider receiving the call from the PSAP will respond within the response times or if they are unable to meet that demand they may transfer the call; the transfer of that call must be done within a specified amount of time that the call was received so as to ensure care to the patient. These processes are covered under KCEMS protocols. Obiden stated that in the event of an emergency, the 911 system is designed with the patient in mind and in getting the services to the patient. He noted, that in some cases, a patient may request transport by another agency, but that for the purposes of KCEMS, the policies address getting the patient care rather than what agency will respond.

- Mr. Meijer stated that the way the current system is today, he couldn’t respond to a 911 call at his Headquarters because the facility is within AMR’s Service Area.
- Curtis Holt asked if the current language of the Agreement restricted the ability of LIFE to sell memberships in areas outside of the designated Service Area. Mr. Meijer stated that if he can meet the response time, it should not matter what EMS Provider is responding to the call.
- Mr. Meijer stated that the Agreement could potentially impact private contracts that he holds with medical facilities such as senior care facilities that he holds outside of his existing Service Area. He stated that these organizations should be able to select the provider that they want.
- Mr. Meijer stated that there are terms within the Agreement that are adding cost with no benefit such as the Performance Bond requirement.
- Mr. Meijer also expressed concern regarding the language regarding rate regulation as it is above and beyond what is currently done. He stated that by ordinance the EMS Providers must publish their rates for the City of Grand Rapids, and that the idea of regulating rates is not acceptable. He stated that the providers can set a rate, however it depends upon what the third-party payer will pay, not on what they charge.
- Mr. Meijer stated that the language includes a provision to conduct a satisfaction survey and he already conducts one of those.
- Mr. Meijer stated that he also had concerns with the language that prohibited a supervisory vehicle not being able to stop the clock.

A discussion ensued regarding the concerns that Mr. Meijer stated and Brian Donovan recommended that the Consortium hold a workshop meeting regarding these concerns prior to

the next meeting. There was general consensus that a workshop meeting to talk through these specific issues would be helpful to the members of the Consortium.

Chairman Krombeen thanked the EMS Providers for attending today and providing their feedback regarding the significant issues that are remaining.

Chairman Krombeen stated that the Consortium will hold a workshop on May 28<sup>th</sup> at 9AM to discuss the specific concerns that were identified today.

5. Other Business
  
6. Next Meeting – May 28<sup>th</sup> at GVC 9:00 a.m. Public Work Session
  
7. Public Comment - The Board received no public comment.
  
8. Adjourn - The meeting was adjourned at 12:30.