

RECIPIENT NAME: Central Iowa Hospital Corporation

AWARD NUMBER: 19-43-B10575

DATE: 11/29/2012

OMB CONTROL NUMBER: 0660-0037

EXPIRATION DATE: 12/31/2013

### QUARTERLY PERFORMANCE PROGRESS REPORT FOR SUSTAINABLE BROADBAND ADOPTION

#### General Information

<b>1. Federal Agency and Organizational Element to Which Report is Submitted</b> Department of Commerce, National Telecommunications and Information Administration	<b>2. Award Identification Number</b> 19-43-B10575	<b>3. DUNS Number</b> 075844548
<b>4. Recipient Organization</b>  Central Iowa Hospital Corporation 1200 Pleasant St, Des Moines, IA 503091406		
<b>5. Current Reporting Period End Date (MM/DD/YYYY)</b> 09-30-2012	<b>6. Is this the last Report of the Award Period?</b>  <input type="radio"/> Yes <input checked="" type="radio"/> No	
<b>7. Certification: I certify to the best of my knowledge and belief that this report is correct and complete for performance of activities for the purposes set forth in the award documents.</b>		
<b>7a. Typed or Printed Name and Title of Certifying Official</b>  Stephanie Young	<b>7c. Telephone (area code, number and extension)</b>  X	
	<b>7d. Email Address</b>  YoungSJ@ihs.org	
<b>7b. Signature of Certifying Official</b>  Submitted Electronically	<b>7e. Date Report Submitted (MM/DD/YYYY):</b>  11-29-2012	

**Project Indicators (This Quarter)**

**1. Please describe significant project accomplishments completed during this quarter (600 words or less).**

Iowa Health Des Moines (IH-DM) continues to plan, coordinate, and assist with implementation of specialty services/providers for the BTOP rural hospital partners as well as with IH-DM departments/services. BTOP site visits were held at each of the sub-recipient locations to address items such as compliance of grant regulations, budget requirements, audit and record-keeping, procurement policy, etc. The Technical Advisory Committee (TAC) completed video calls monthly to review/research technology options/updates for recommendation to the Clinical Advisory Committee and CEO Advisory Board. BTOP Video Calls were held approximately every two weeks with participation by telemedicine team members from each facility. Discussion topics typically included: review and tracking of project progress/timeline, CAI's, discussion of technical and clinical updates, technology options, etc. An introduction to telemedicine presentation and remote connection was provided to shift leaders and staff at IH-DM ED facilities as well as women's services. Meetings were held with IH-DM women's services senior management and medical directors to work through details to implement this part of the telemedicine program. IH-DM Wound Care Services clinical and medical management participated in video calls and remote connection to Guthrie County Hospital to facilitate development of this connection. Video calls/meetings were held to facilitate development of Mental Health acute patient assessment in the emergency department setting. A number of video calls were completed for discussion of the Emergency Department connection which included work flow process development, training plan for shift leaders and staff, and timeline. Installation of EX-60 video equipment was completed in the IH-DM emergency departments and education/training was provided for staff. We are continuing to address the issue of changing technology which has facilitated the research and discussion of the potential for implementation of the Cisco Health Presence solution. Health Presence is a software platform that integrates high-definition video, audio, medical devices and collaboration tools to bring greater flexibility in video endpoints, the ability to scale the number of endpoints, and enhanced security. In July, a 5-hour educational program was provided to administrative, clinical and information technology staff on the Cisco Health Presence solution and dialogue continues to take place regarding the advantages of this new approach, along with the numerous questions associated with its installation and support. Guthrie County Hospital continues to work with setting up connectivity with a cardiologist. We also began conversations with the EMS squads. Clarke County Hospital has 10 specialty clinics active in the 3rd Quarter. These specialty physicians are being utilized in the inpatient setting, to bring specialty care access to the inpatient population. Family members of inpatients are also able to join care plan meetings via the equipment. Equipment audits continue to be held, ensuring accurate tracking and monitoring of equipment. Southwestern Community College (SWCC) is utilizing the equipment to hold a class on the Osceola campus that is normally only held on the Creston campus. Through the equipment, students are able to avoid a 60 mile commute, and remain in Osceola. This class meets two times per week, totaling 3 hours per week. SWCC Vice President of Instruction states that 3 classes have been scheduled utilizing the equipment, for the spring semester. Contracts are in place for video interpreter services. This service has been utilized through the telemedicine equipment to provide interpreters for both Hispanic speaking, and deaf patients at Clarke County Hospital. Greene County Medical Center deployed equipment to 3 CAIs this quarter. The activities are included at the SBA activities spreadsheet.

**2. Please provide the percent complete for the following key milestones in your project. Write "0" in the Percent Complete column and "N/A" in the Narrative column if your project does not include this activity. If you provided additional milestones in your baseline report, please insert them at the bottom of the table. Figures should be reported cumulatively from award inception to the end of the most recent reporting quarter. Please provide a narrative description if the percent complete is different from the target provided in your baseline plan (300 words or less).**

	Milestone	Percent Complete	Narrative (describe reasons for any variance from baseline plan or any other relevant information)
2.a.	Overall Project	57	The process for moving through education, planning, training, and implementation continues to take more time than originally planned. Several delays, including leadership changes in areas where telehealth is planned for execution, have resulted in the need for additional education and planning.
2.b.	Equipment / Supply Purchases	-	Progress reported in Question 4 below
2.c.	Awareness Campaigns	-	Progress reported in Question 4 below
2.d.	Outreach Activities	-	Progress reported in Question 4 below
2.e.	Training Programs	-	Progress reported in Question 4 below
2.f.	Other (please specify):	-	Progress reported in Question 4 below

**3. Please describe any challenges or issues faced during this past quarter in achieving planned progress against the project milestones listed above. In particular, please identify any areas or issues where technical assistance from the BTOP program may be useful (600 words or less).**

Completion of Iowa Health-Des Moines (IH-DM) Women's/Maternity Services construction project delayed plans for the telemedicine/video equipment site assessment and implementation of this connection with our rural partner hospitals. IH-DM Case Management

staff was reluctant to move forward with the telemedicine connection and communication prior to patient transfer to/from rural facility. This delayed implementation until further discussion and plan development could occur. The newly hired Executive Director for IH-DM Mental Health Services delayed planning and implementation for providing acute patient mental health assessment until telemedicine education was provided. Decision-making by the Medical Director for the IH-DM Wound Care Center slowed this part of the project until connection with wound care nurse at a rural hospital proved the value and quality of video and enhanced patient care. Pediatric Emergency Department providers have been reluctant to incorporate telemedicine into the work flow of this department. Discussion of value of project with communication to rural hospitals has been communicated. A challenge for Greene County Medical Center has been the lack of 4G service in our rural market and this continues to limit the capabilities in telehealth.

**4a. In the chart below, please provide the requested information on your BTOP grant-funded SBA activities. Please also provide a short description of the activity (600 words or less). Figures should be reported cumulatively from award inception to the end of the most recent reporting quarter. Please ensure that the numbers of new household subscribers and business or community anchor institution (CAI) subscribers reflected in the "Total" row represent the unduplicated number of new subscribers that can be attributed to your SBA project as a whole.**

Name of the SBA Activity	Location of SBA Activity	Description of Activity (600 words or less)	Size of Target Audience	Actual Number of Participants	New Subscribers: Households	New Subscribers: Businesses and/or CAIs
N/A	N/A	See attached SBA Activity Spreadsheet	55,976	51,205	0	54
<b>Total:</b>			<b>55,976</b>	<b>51,205</b>	<b>0</b>	<b>54</b>

**4b. Please describe your method for determining the number of households, businesses, and/or (CAIs) subscribing to broadband as a result of your SBA programs (600 words or less).**

The number of CAIs subscribing to broadband is determined by the number of points of presence where video-conferencing technology has been implemented as a result of SBA activities.

**4c. Please provide a narrative explanation if the total number of new subscribers is different from the targets provided in your baseline plan (600 words or less).**

We are encountering a longer implementation period than what was originally anticipated for many of our subscribers. We have a six to eight-week lead time to acquire equipment for subscribers which, coupled with a lengthy process for creating and finalizing contractual agreements, significantly slows down the adoption process.

**4d. Please provide the number of households and the number of businesses and CAIs receiving discounted broadband service as result of BTOP funds.**

<b>Households:</b> 0	<b>Businesses and CAIs :</b> 0
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**Project Indicators (Next Quarter)**

**1. Please describe significant project accomplishments planned for completion during the next quarter (600 words or less).**

During the next quarter, the plan for implementation and connection with the rural hospitals focuses on four major areas/departments: Emergency Department, Mental Health, Women's Services, and Case Management. Training/education of Emergency Department (ED) shift leaders and staff at the three Iowa Health Des Moines (IH-DM) facilities will be completed with assistance from rural telemedicine nurses and facilities as well as planning by the IH-DM ED clinical education specialist. Training for use of video equipment and patient exam devices will be included with connection to facilitate communication for nurse-to-nurse report for patient transfers between facilities. The work flow process and details for the plan will be developed for telemedicine acute emergency department patient assessment in three IH-DM emergency departments and rural facilities to determine appropriate level of patient care needed. Installation will be completed in the IH-DM Maternity Services departments for connection between facilities for patient evaluation by a laborist physician providing 24/7 coverage at one facility. We will install video equipment and develop details for connection between IH-DM facilities and rural hospitals for the hand-off and patient report and patient/family communication prior to transfer to/from IH-DM and the rural facilities. Guthrie County Hospital is continuing to have discussions and installing equipment at new sites. Grundy County Memorial Hospital (GCMH) activities included outreach, equipment installations at three CAIs, telehealth equipment testing, development of EMS and school education, staff competency development and training on equipment usage. A total of 47 hours of education were delivered in the quarter to a combination of students and teachers in K-12 schools and Emergency Medical Services staff. Developing user guides and testing user competencies has been and will continue to be a major part of our work. Telehealth was utilized in the quarter eleven times for doctor-patient rounding on inpatients in our facility, and 66 times for medication verification in the pharmacy. GCMH plans to implement five new community anchor institutions in the upcoming quarter; including two hospitals & healthcare institutions and three emergency partners. Outreach and planning activities are also planned in Q4 for five new community anchor institutions slated for implementation in 1st quarter 2013. Finally, the Telehealth Nurse will work in Q4 with schools and EMS crews to develop and extend distance learning programming. Clarke County Hospital projects to the use of the telemedicine equipment for bedside report from Clarke County Hospital ED to the Med/Surgery floor. This will allow patients and

families to be more involved in the handoff from ED to nursing floor. This will also allow for the patient and family to ask questions of the nursing staff and physically see where they will be admitted. The community college has started using the equipment to hold classes at the more rural Osceola site. They expect to grow from 1 class, to 3 in January. Discussion will begin with Infectious disease, Urology, and The Weight loss Center. Formulate our final budget revisions that will carry us through to the end of the program. Continue to pursue CAI targets. Continue to explore sustainability measures by sharing materials and ideas with potential private partners. Link our community partners into a common network so they can better interact with one another for programs and in the event of an emergency.

**2. Please provide the percent complete anticipated for the following key milestones in your project as of the end of the next quarter. Write "0" in the second column if your project does not include this activity. If you provided additional milestones in your baseline report, please insert them at the bottom of the table. Figures should be reported cumulatively from award inception to the end of the next reporting quarter. Please provide a narrative description if the planned percent complete is different from the target provided in your baseline plan (300 words or less).**

	Milestone	Percent Complete	Narrative (describe reasons for any variance from baseline plan or any other relevant information)
2.a.	Overall Project	61	Continuing the momentum but still expect to have delays as we undertake the necessary steps to implement the various endpoints. These delays are being caused by changes in key leadership positions. The length of time to generate interest and implement technology at the projected institutions is much longer than expected. Newer technology solutions are also significantly less expensive than the technology originally planned.
2.b.	Equipment Purchases	-	Milestone Data Not Required
2.c.	Awareness Campaigns	-	Milestone Data Not Required
2.d.	Outreach Activities	-	Milestone Data Not Required
2.e.	Training Programs	-	Milestone Data Not Required
2.f.	Other (please specify):	-	Milestone Data Not Required

**3. Please describe any challenges or issues anticipated during the next quarter that may impact planned progress against the project milestones listed above. In particular, please identify any areas or issues where technical assistance from the BTOP program may be useful (600 words or less).**

Gaining acceptance of the technology and the required contractual agreements continues to be an obstacle with some of our CAI targets, training is underway and continued communication with implementing end users.

## Sustainable Broadband Adoption Budget Execution Details

### Activity Based Expenditures (Sustainable Broadband Adoption)

1. Please provide details below on your total budget, cumulative actual expenditures (for the period ending the current quarter), and cumulative anticipated expenditures (for the period ending next quarter) for each line item, including detailed disbursements of both matching funds and federal funds from project inception through end of this quarter (actual) or next quarter (anticipated). Actual and anticipated figures should be reported cumulatively from award inception to the end of the applicable reporting quarter.

Budget for Entire Project				Actuals from Project Inception through End of Current Reporting Period			Anticipated Actuals from Project Inception through End of Next Reporting Period		
Cost Classification	Total Cost (plan)	Matching Funds (plan)	Federal Funds (plan)	Total Cost	Matching Funds	Federal Funds	Total Costs	Matching Funds	Federal Funds
a. Personnel	\$2,337,276	\$754,475	\$1,582,801	\$1,288,817	\$577,986	\$710,831	\$1,483,178	\$658,178	\$825,000
b. Fringe Benefits	\$631,064	\$342,251	\$288,813	\$333,261	\$194,052	\$139,209	\$426,288	\$239,288	\$187,000
c. Travel	\$128,046	\$18,989	\$109,057	\$65,922	\$7,093	\$58,829	\$69,931	\$7,931	\$62,000
d. Equipment	\$10,201,547	\$4,877,107	\$5,324,440	\$7,534,948	\$3,994,223	\$3,540,725	\$7,768,408	\$4,096,408	\$3,672,000
e. Supplies	\$847,073	\$47,360	\$799,713	\$233,593	\$13,492	\$220,101	\$248,808	\$13,808	\$235,000
f. Contractual	\$211,500	\$13,009	\$198,491	\$133,674	\$0	\$133,674	\$161,500	\$7,500	\$154,000
g. Construction	\$85,958	\$85,958	\$0	\$0	\$85,958	\$0	\$85,958	\$85,958	\$0
h. Other	\$104,280	\$85,780	\$18,500	\$63,464	\$63,464	\$0	\$73,474	\$73,474	\$0
i. Total Direct Charges (sum of a through h)	\$14,546,744	\$6,224,929	\$8,321,815	\$9,653,679	\$4,936,268	\$4,803,369	\$10,317,545	\$5,182,545	\$5,135,000
j. Indirect Charges	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
k. TOTALS (sum of i and j)	\$14,546,744	\$6,224,929	\$8,321,815	\$9,653,679	\$4,936,268	\$4,803,369	\$10,317,545	\$5,182,545	\$5,135,000

2. Program Income: Please provide the program income you listed in your application budget and actuals to date through the end of the reporting period.

a. Application Budget Program Income: \$0

b. Program Income to Date: \$0