QUARTERLY PERFORMANCE PROGRESS REPORT FOR SUSTAINABLE BROADBAND ADOPTION

General Information

1. Federal Agency and Organizational Element to Which Report is Submitted **Department of Commerce, National Telecommunications and Information Administration**	**2. Award Identification Number** **19-43-B10575**	**3. DUNS Number** **075844548**

4. Recipient Organization

Central Iowa Hospital Corporation 1200 Pleasant St, Des Moines, IA 503091406

5. Current Reporting Period End Date (MM/DD/YYYY) 03-31-2013	**6. Is this the last Report of the Award Period?** ◯ **Yes** ◉ **No**

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.

7a. Typed or Printed Name and Title of Certifying Official Tracy D Warner Director, Rural Health Resourc	**7c. Telephone (area code, number and extension)** 515 241-3499
	7d. Email Address WarnerTD@ihs.org
7b. Signature of Certifying Official Submitted Electronically	**7e. Date Report Submitted (MM/DD/YYYY):** 05-13-2013

Project Indicators (This Quarter)

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

The grant work completed in Q1 2013 by Grundy County Memorial Hospital included community and user outreach, installation planning, equipment installations at four community anchor institutions, conducting distance learning for emergency medical services and schools, staff competency development and training on equipment usage. A total of 7.5 hours of education were delivered in the quarter to a combination of students and teachers in K-12 schools and Emergency Medical Services staff (approximately 152 people). The telehealth technology was utilized in the quarter five times for doctor-patient rounding on inpatients in our facility, and 42 times for medication verification in the pharmacy. Greene County Medical Center completed an installation with one community anchor institution target this quarter. Additional activities included: a demonstration with the chief executive officer of Genesis Development and discussion of a potential satellite clinic with their psychiatrist; a test with our emergency medical services system; participation in the VISIO Health demonstration; participation in the Iowa Health-Des Moines Weight Loss Center video call; the recording and distribution of "Trauma Talks" with the topic "Adolescent Consent and Confidentiality"; a video conferencing demonstration with 21 Greene County staff and affiliates; completion of four telehealth visits this quarter; assisted in training staff at Methodist West and Iowa Lutheran emergency departments ; a meeting with 21st Century Rehab Management to discuss equipment deployment; a meeting with Philips Monitoring Systems to discuss equipment; a Virtual Incident Command Test with all Jabber users; a Greene County Development presentation and occupational medicine discussion; a board presentation on BTOP; conducted an Iowa Health-Des Moines Women's Services virtual tour of nursery, postpartum and birthing room, including exam camera demo of newborn and fetal monitor strip; blue tooth stethoscope discussion; discussion of nursing support, nurse to nurse report and neonatal intensive care unit nurse report to mother which would occur following newborn transfer; and, a Greene County Career Class Tour which included Telehealth Presentation and demonstration. Iowa Health-Des Moines continues to plan, coordinate, and implement a number of video connections with specialists and departments for telemedicine application including: Pediatrics, Newborn Intensive Care Unit, Weight Loss Center, Hepatology, and Telemental Health. Numerous video calls utilizing grant-funded equipment have facilitated plans between Iowa Health-Des Moines and BTOP rural partner hospitals. Emergency Department video connection between 3 Iowa Health-Des Moines hospital emergency departments and rural partner hospitals has resulted in successful and effective nurse-to-nurse report at the patient's bedside prior to transfer. Telemedicine is improving quality of patient care while enhancing clinical communication and assessment as well as engaging patients and families in their care. During the past quarter, three additional telemedicine providers have become available in the Clarke County Hospital telemedicine clinic. The first was a hepatologist with the Center for Liver Disease and one of only three pepatologists in the state of Iowa. He will provide a telemedicine clinic once per month, as well as inpatient consultations as needed for Clarke County Hospital's medical/surgical patients. Urology was added in February with a physician that had a live clinic that will now have the capability to provide inpatient consultations as well as a telemedicine clinic. An additional endocrinologist was also added to provide additional clinic times to more quickly provide a service to our community that need endocrine care.

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	78	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 / 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).

Leadership changes in the BTOP rural partner hospitals as well as in the Iowa Health-Des Moines facilities has continued to cause challenges and some delays. Demonstrations and practice sessions utilizing telemedicine equipment has proven difficult to schedule and facilitate due to patient census and staffing. Telemental health has proven difficult to plan, coordinate and implement as well as to

develop work processes between facilities. Information technology support for equipment for all IH-DM telemedicine applications remains to be determined and clearly defined.

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	58,037	53,032	0	77
Total:			**58,037**	**53,032**	**0**	**77**

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 community anchor institutions (CAIs) subscribing to broadband is determined by the number of points of presence where video-conferencing technology has been implemented as a result of sustainable broadband activities.0

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.

Households: 0	**Businesses and CAIs :** 0

Project Indicators (Next Quarter)

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

Grundy County Memorial Hospital plans to implement three new community anchor institutions in the upcoming quarter; including one hospitals & healthcare provider and two community colleges. The team will continue to develop the services of the healthcare community anchor institutions that have been established in prior quarters. This will involve training staff at the various healthcare institutions, developing policies and procedures for use, and executing trial visits with the providers and their staff. Additionally, the GCMH telehealth team will continue outreach and planning activities for the remaining community anchor institutions on our plan in the next quarter. We will continue extending distance learning programming with the emergency medical services crews and K-12 schools, as we currently have two more continuing education programs planned for emergency medical services and additional courses set up with the schools. Finally, in May, our telehealth team will be attending the American Telemedicine Association annual conference in Austin, Texas where we will be investigating many of the new technologies in the telemedicine market. Greene County Medical Center will continue to explore sustainability measures by sharing materials and ideas with potential private partners in hopes to engage them from a financial and service perspective and Greene County Medical Center will also continue to link our community partners into a common network so they can better intereact with one another for programs and in the event of an emergency. At Iowa Health-Des Moines, telemedicine equipment will be installed and staff education provided in Newborn Intensive Care Unit, Pediatric Emergency Department, and for further connection for Telemental Health. Further discussion will be held for Wound Care Center telemedicine application. Planning and coordination will be facilitated to provide case review and education for emergency medical services/paramedic personnel in Des Moines and in the BTOP rural communities. Details for education and credentialing will be further developed and facilitated for Iowa Health-Des Moines emergency department providers to connect and communicate with rural hospital emergency departments. Work flow processes will continue to be refined for telemental Health. Details for a pilot project will be developed and a plan initiated for nurse-to-nurse bedside report from the emergency department in rural and Iowa Health-Des Moines for admit to inpatient unit. Information technology support for telemedicine equipment and video equipment will be further discussed and details for a plan defined.   In the next quarter, Clarke County Hospital has three major goals. The first is nurse to nurse report from our rural hospital to the receiving tertiary hospital. Infectious disease physicians will be brought on board to provide inpatient consultations along with an antimicrobial stewardship program. The program is designed to provide suggestion with antibiotic therapy. This program will aim to decrease the use of expensive antibiotics when not absolutely necessary. The weight loss center equipment will be deployed and we will start providing community education on weight loss alternatives.   We will also submit a budget modification that is intended to true up actual costs with the project's spending and to begin examining activities that will be necessary for closing out the project when the grant ends on August 31.

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**	86	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).

Mobile equipment solution decisions need to be determined to move forward further with case management and certain telemedicine applications in Women's Services and the Newborn Intensive Care Unit. Working through the details of a plan with information technology and making decisions for responsibility for support continues to be a challenge. Adoption of use of the emergency department telemedicine equipment by staff and providers is slowly developing. Developing the workflow with Newborn Intensive Care Unit and obstetrics providers in communication with rural hospitals providing obstetrics services will be challenging due to the low volume in the rural settings.

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.

Cost Classification	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		
	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	$1,709,815	$764,194	$945,621	$1,949,172	$859,054	$1,090,118
b. Fringe Benefits	$631,064	$342,251	$288,813	$458,595	$258,153	$200,442	$524,101	$291,561	$232,540
c. Travel	$128,046	$18,989	$109,057	$77,242	$13,456	$63,786	$105,668	$14,533	$91,135
d. Equipment	$10,201,547	$4,877,107	$5,324,440	$8,219,957	$4,365,128	$3,854,829	$8,882,685	$4,440,799	$4,441,886
e. Supplies	$847,073	$473,560	$799,713	$511,055	$15,239	$495,816	$590,352	$16,440	$573,912
f. Contractual	$211,500	$13,009	$198,491	$220,323	$442	$219,881	$267,224	$442	$266,782
g. Construction	$85,958	$85,958	$0	$86,737	$86,737	$0	$86,737	$86,737	$0
h. Other	$104,280	$85,780	$18,500	$91,828	$73,328	$18,500	$111,868	$93,368	$18,500
i. Total Direct Charges (sum of a through h)	$14,546,744	$6,651,129	$8,321,815	$11,375,552	$5,576,677	$5,798,875	$12,517,807	$5,802,934	$6,714,873
j. Indirect Charges									
k. TOTALS (sum of i and j)	$14,546,744	$6,651,129	$8,321,815	$11,375,552	$5,576,677	$5,798,875	$12,517,807	$5,802,934	$6,714,873

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