

RECIPIENT NAME: Central Iowa Hospital Corporation

AWARD NUMBER: 19-43-B10575

DATE: 05/29/2012

OMB CONTROL NUMBER: 0660-0037

EXPIRATION DATE: 12/31/2013

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) 03-31-2012	6. Is this the last Report of the Award Period? <input type="radio"/> Yes <input checked="" type="radio"/> 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 Stephanie Young	7c. Telephone (area code, number and extension) X	
	7d. Email Address YoungSJ@ihs.org	
7b. Signature of Certifying Official Submitted Electronically	7e. Date Report Submitted (MM/DD/YYYY): 05-29-2012	

Project Indicators (This Quarter)

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

During the first quarter of 2012, Iowa Health-Des Moines (IH-DM) continued to plan, coordinate, and assist with the implementation of specialty services/providers and the rural hospital BTOP partners. The desktop video software, cameras/microphones and speakers were installed for the emergency department managers of 3 IH-DM hospitals to facilitate communication and decrease travel between facilities, and the timeline development and telemedicine equipment research for needs and locations was ongoing this quarter. In addition, two three hour training/education sessions on its use, a numbers of video conferences have taken place in the IH-DM conference rooms, including a connections between the three facilities several times a day during the initial week of the electronic medical record implementation in early March. BTOP video calls continued every two weeks with the sub-recipients to track progress, discuss technology, challenges, etc. The CEO Advisory board met twice this quarter with activity and discussion for development of principles for a technical advisory committee. A significant amount of work continued on a budget modification. Grundy County Memorial Hospital (GCMH) implemented equipment at four Emergency Services partners, three school facilities and one physician. The Telehealth Nurse worked with the schools to plan and develop educational programs to be delivered via video conference. GCMH continued working in the quarter to develop the telehealth marketing materials, policies and procedures, and metric tracking tools. The Information Technology staff worked diligently to research and test new telemedicine technology in the quarter, and they also spent a great deal of time configuring and troubleshooting some of the equipment in place at our facility as well as that which we have deployed to community anchor institutions. Guthrie County Hospital (GCH) worked on connecting clinics to the hospital. Connection testing to their general surgeon was implemented to allow consults and follow up using the equipment. Clarke County Hospital has initiated talks with three new specialty clinics, The Iowa Health Weight Loss Center, podiatry and Occupational Medicine. The 3 physicians and 1 PA-C from these specialties are currently being credentialed, with contracts in process. Dr. Folkers, plastic surgeon is now seeing patients via telemedicine. Dr. Folkers recently utilized telemedicine for a post surgical that was performed at Clarke County Hospital. Current specialties at Clarke County Hospital is 7, with 10 credentialed physicians. 4 hours of training has been held for Southwestern Community College instructors. Instructors were given a presentation, written resource materials, and opportunity for hands on training with Clarke County Hospital staff. The local newspaper, The Creston News Advertiser, was present for the second training which triggered a front page story. The Creston News Advertiser reaches approximately 4,500 people in its circulation. Clarke County Hospital telehealth staff held an 8 hour "telehealth" work day. In this work day, staff looked at making improvements to the clinic flow. Set up for the upcoming equipment installation in the Emergency Departments was designed, with improvements to the cart system. Presentations were completed to the surrounding city councils. Video that shows an actual telemedicine visit was used. Telemedicine equipment was also used during these presentations. A call was placed from the city council meeting, back to Clarke County Hospital where the nurse demonstrated the use of the otoscope and exam camera. Those city councils included, Osceola, Murray, Weldon, and Woodburn. Greene County Medical Center (GCMC) executed one contract this quarter with the JSPC School District that covers three (3) CAI targets including their elementary, middle and high school. GCMC had two End Point Installs and training with staff, as well as additional staff training that is being planned with each of these CAI's.

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	53	The variance from the baseline report is due to the length of time to generate interest and implement technology. The variance is also caused due to the needed budget modification that is anticipated to be submitted to NIST in Q2 2012.
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).

Iowa Health-Des Moines implemented a new electronic medical record this quarter so the timeline for deploying the emergency department connections was delayed to account for the focus on that new system by many of our managers and providers. Also, as the budget modification was being prepared, there was considerable discussion regarding the availability of new technology that

resulted in the convening of the CEO Advisory Board and the development of principles for a technical advisory committee to utilize in assessing new technology options. Grundy County Memorial Hospital (GCMH) encountered a longer implementation period than what was originally anticipated for many of their subscribers. 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 slowed down the adoption process. Guthrie County Hospital's (GCH) main challenge is finding providers to use the equipment to see the patients. Continuation on the \$400,000 re-allocation of grant funding is still under way and has delayed equipment purchase that was not originally in the budget. Coordination of scheduling between entities continues to be a challenge in regard to the timeline. Availability of multiple schedules is often limited, pushing back anticipated milestone dates. The project schedule is ever evolving with changes in availability of schedules, and return time of documents, with points of presence being brought on board. Greene County Medical Center continues to be challenged by inadequate internet speeds in several of their CAI target areas that negatively impacts their video transmission.

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 spreadsheet	29,822	25,136	0	35
Total:			29,822	25,136	0	35

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).

The total number of new subscribers differentiates from the targets provided in the baseline plan due to encountering a longer implementation period than what was originally anticipated. Current plans are in place to get back on track.

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
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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, Iowa Health-Des Moines (IH-DM) will continue to move forward with demonstrations, facilitation, education and installation of telehealth endpoints. The focus will continue on the emergency department and critical care, with education and training for emergency department providers, management and staff on video conference equipment and examination devices for use in telemedicine consults and patient assessment connection between IH-DM facilities. IH-DM will install computer terminals to be used for telemedicine consult, nurse-to-nurse report, and mobile patient examination carts at three IH-DM emergency departments. In addition, desktop software, cameras, microphones and speakers will be installed in IH-DM critical care departments to facilitate communication between management in these units with emergency department managers for daily staffing and other meetings, and in preparation for connection with the rural hospital sub-recipients in third quarter 2012. Details for mental health telemedicine coverage will be finalized between IH-DM and rural hospital grant partners, including an introduction to telemedicine and demonstration with IH-DM's Lakeview Counseling Center for planning/coordination of counseling and medication management appointments via telemedicine. BTOP video calls will continue every two weeks to facilitate telemedicine schedule and equipment deployment, and to discuss operations, finances and grant administration. The technical advisory committee will be utilized to provide advice and feedback on technology solutions and architecture in support of telehealth capabilities. Grundy County Memorial Hospital (GCMH) will continue to conduct distance health education programming with schools for part of the upcoming quarter, until the schools break for the summer. We will be focusing on expanding the programs we have already instituted with the schools, and we will work to develop new distance learning opportunities. Following the final EMS implementations in the current quarter, GCMH will begin to roll out CEH opportunities via videoconference to these entities. This involves developing education in-house, as well as coordinating with third party resources to provide educational offerings that could be simultaneously broadcast to multiple crews. One

of the things we need to work on with the variety of distance learning opportunities is effectively communicating and collaborating with all of the community anchor institutions we have implemented. GCMH intends to direct effort in the quarter to developing the hospital website as a mode of communication with all of the CAIs. Extensive outreach and planning work will be required to execute the six healthcare providers planned for this quarter. GCMH will test the peripheral diagnostic accessories with the providers and work with them to develop policies and procedures for providing telemedicine services at GCMH. As telemedicine services are added, GCMH will focus heavily on developing and maintaining the hospital staff's competencies using the technology. Guthrie County Hospital (GCH) continues to be connecting to specialty clinics to better serve their residents. Guthrie will begin using the equipment as a way to expand and improve how we provide care to our patients that is being requested with the budget modification. Clarke County Hospital will complete the implementation of 3 new specialty clinics, to include urology, weight loss center, and endocrinology. Discussion will begin with, pain center, wound center, infectious disease, and internal medicine. The time line will continue to be assessed weekly in order to closely monitor progression, and evaluate opportunities to move dates up. A training activity will take place among other BTOP grant participants in May 2012. Clarke County Hospital will provide one of the learning sessions with a demonstration of how the site assessment tool is used to bring new physicians on board. Clarke County Hospital will continue to collaborate with educational institutions to promote the use of the telemedicine equipment and ensure institutions are made aware of offerings. Project management, including project plans, needs assessment, communication planning, equipment audits, and skills audits are ongoing.

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	67	This variance from the baseline report is due to the time frame between purchase orders and equipment deliveries and installation.
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).

Technology changes will continue to exist as our primary challenge in timely deployment of the end points named in the original budget. The industry is moving toward more mobile solutions yet these solutions are not yet the industry standard so we are faced with the decision to either deploy technology that will be quickly outdated or wait until the industry tests and standardizes the more mobile equipment such as iPads.

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	\$2,472,276	\$754,475	\$1,717,801	\$815,718	\$389,915	\$425,803	\$1,273,424	\$532,770	\$740,654
b. Fringe Benefits	\$667,515	\$355,261	\$312,254	\$213,366	\$129,076	\$84,290	\$316,533	\$172,604	\$143,929
c. Travel	\$148,046	\$18,989	\$129,057	\$32,152	\$4,839	\$27,313	\$57,044	\$8,796	\$48,248
d. Equipment	\$10,847,584	\$4,929,263	\$5,918,321	\$6,175,939	\$3,107,064	\$3,068,875	\$7,467,472	\$3,963,947	\$3,503,525
e. Supplies	\$197,085	\$17,703	\$179,382	\$367,394	\$11,485	\$355,909	\$367,394	\$11,485	\$355,909
f. Contractual	\$0	\$0	\$0	\$0	\$0	\$0	\$123,375	\$0	\$123,375
g. Construction	\$85,958	\$85,958	\$0	\$86,737	\$86,737	\$0	\$86,737	\$86,737	\$0
h. Other	\$128,280	\$63,280	\$65,000	\$48,541	\$48,541	\$0	\$54,386	\$54,386	\$0
i. Total Direct Charges (sum of a through h)	\$14,546,744	\$6,224,929	\$8,321,815	\$7,739,847	\$3,777,657	\$3,962,190	\$9,746,365	\$4,830,725	\$4,915,640
j. Indirect Charges	\$0	\$0	\$0						
k. TOTALS (sum of i and j)	\$14,546,744	\$6,224,929	\$8,321,815	\$7,739,847	\$3,777,657	\$3,962,190	\$9,746,365	\$4,830,725	\$4,915,640

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