Tama County EMS System

Essential Services Advisory Council

FY 26 Report - Board of Supervisors

Financial report (summary and transactions) covers January 1, 2026 thru June 30, 2026 (FY 2025-2026) No funds were available for reimbursement prior to January 1, 2026.

SWOT Assessment is based on data provided by services, survey conducted by TCEMSA and survey by Essential Service Advisory Council

Committee Members

Julie Scadden – TCEMSA
Billie Van Egmond – Dysart EMS
Alcia Lidtke -Elberon EMS
Shaun Kennedy – Traer EMS
Kern – Gladbrook-Lincoln EMS
Sherry Parks – Garwin EMS
Jesse Brown – Toledo EMS
Don Weitzel– Tama EMS
Sharon Knoop – Clutier First Responders
Mike Buchanan – Montour First Responders
Jacob Reineke– 911 Director
Ryan Goodenbour – EMA Coordinator
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Alternates:

Randie Brodigan – Dysart
Todd Barnes - Elberon
Alea Dvorak – Traer
Kathy Vavrock- Gladbrook
Debbra Stamp - Garwin
Delrae Hennessy – Toledo
Ruth Hildahl - Tama
Ronda Edwards Clutier
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Submitted July 28, 2026

Julie K. Scadden

Julie Scadden - Chair

SWOT Assessment:

Tama County EMS System

This SWOT (strengths, weaknesses, opportunities, threats) analysis evaluates the current state of the Tama County EMS System and can be used for strategic planning, EMS Essential Service implementation, grant applications, and county-wide system development.

Strengths

Strong Community-Based EMS Network

- Multiple established EMS agencies strategically distributed throughout the county, including Dysart, Toledo, Tama, Traer, Gladbrook-Lincoln, Garwin, Elberon, Clutier, and Montour.
- Out of county EMS agencies enhance Tama County EMS System covering the boarder areas of the county to ensure timely response and patient care: Belle Plaine, Gilman, Grundy Center, Reinbeck, La Porte City.
- Long history of local volunteerism and community support for EMS services.
- Deep community trust and strong local identity within individual service areas. (Tama County EMS Association)

County-Wide Collaboration

- Creation of the Tama County EMS Association and the Tama County Essential Services Advisory Council provides a formal structure for regional planning and resource coordination. (Tama County)
- Representation from every EMS agency, Emergency Management, Public Health, and 911 Communications creates a unified planning framework. (Tama County)

Dedicated Workforce

- Strong cadre of experienced EMTs, AEMTs, Paramedics, and First Responders.
- Significant institutional knowledge among long-serving volunteers and service leaders.
- Existing culture of mutual aid and interagency cooperation.

Geographic Coverage

- Ambulance services distributed throughout the county provide relatively short access to initial emergency response despite the county's large geographic area.
- Ambulance services distributed on the borders of Tama County that function as part of the EMS system provide additional support to ensure access to initial emergency response.

- Access to major transportation corridors including U.S. Highway 30 and U.S. Highway 63. (Wikipedia)
- Relatively short transports to regional hospitals that provide advanced cardiac and stroke care as well as level 3 trauma capabilities.

Essential Service Designation

- EMS has been declared an essential county service, creating a pathway toward stable long-term funding and system-wide planning. (Tama County)

Weaknesses

Workforce Shortages

- Declining volunteer participation remains the single greatest operational challenge.
- Fewer employers allow employees to leave work for emergency responses.
- Aging workforce and difficulty recruiting younger providers. (Tama County EMS Association)

Financial Sustainability

- Insurance reimbursement does not cover the true cost of readiness and response.
- Many EMS activities (lift assists, wellness checks, standby coverage) generate little or no reimbursement.
- Increasing costs for ambulances, cardiac monitors, medications, training, and regulatory compliance. (Tama County EMS Association)

Fragmented Service Models

- Varying staffing models, response capabilities, and financial resources between agencies.
- Limited economies of scale in purchasing, training, fleet replacement, and administration.
- Potential duplication of resources across neighboring services.

Recruitment and Retention Challenges

- Growing educational requirements for EMS certification.
- Increasing time commitments required for training and continuing education.
- Competition from larger healthcare systems and urban EMS employers offering more competitive wages and career advancement
- Lower call volumes less attractive to newer recruits to the EMS profession

Rural Response Demands

- Long transport times to specialty care and trauma resources.
- Reliance on mutual aid during periods of low staffing.
- Inability for a service to transport requiring need to page two or more services simultaneously.
- Limited ability to maintain full-time coverage in some communities.

Opportunities

EMS Essential Services Funding

- Dedicated county EMS levy creates the opportunity for predictable and sustainable funding.
- Ability to support:
  - Staffing stabilization
  - Shared equipment replacement
  - Training and education programs
  - Regional EMS coordination
  - Capital improvement projects (Times Republican)

Regionalization and System Integration

- Development of county-wide resources:
  - Staffing pools
  - Shared paramedic resources
  - Fleet replacement plans
  - Medical direction
  - Quality improvement programs
  - Training systems

Workforce Development

- Partnerships with:
  - Community colleges
  - High schools
  - Fire departments
  - Healthcare organizations
- EMS career pathways for local residents.
- Earn-and-learn EMT programs.
- Recruitment of younger providers.

Technology Expansion

- Telemedicine support.
- Mobile training programs.
- Regional simulation education.
- Electronic quality improvement and data analytics systems.

Community Paramedicine

- Non-emergency community health initiatives.
- Fall prevention programs.
- Chronic disease monitoring.
- Hospital readmission reduction efforts.
- Potential future reimbursement opportunities.

Regional Partnerships

- Expanded collaboration with:
  - Tama County Public Health
  - Tama County Emergency Management
  - Regional hospitals
  - Iowa EMS Association
  - State and federal grant programs. (Tama County)

Threats

Continued Volunteer Decline

- Ongoing reduction in volunteer availability threatens the sustainability of traditional staffing models.
- Increased dependence on paid personnel raises operational costs. (Tama County EMS Association)
- Inability to compete with urban wages
- Replacing Ambulance budgets instead of supplementing them at the municipal level with Essential Services Tax dollars.

Population Trends

- Tama County population has declined modestly over recent decades and remains predominantly rural, reducing the tax base available to support EMS operations. (Wikipedia)
- Aging population increases EMS demand while shrinking the potential workforce. Approximately one-fifth of county residents are age 65 or older. (Wikipedia)

Rising Healthcare Costs

- Escalating costs for:
  - Ambulances
  - Fuel
  - Medical equipment
  - Insurance
  - Medications
  - Personnel

Regulatory Burden

- Increasing certification, documentation, and compliance requirements.
- Expanded quality reporting expectations.
- Potential unfunded mandates from state or federal agencies.

Hospital and Healthcare System Changes

- Rural healthcare consolidation could increase transport distances.
- Emergency department closures or service reductions could affect patient access and EMS workload.

Burnout and Mental Health Risks

- Small workforce carrying increasing call volumes and administrative responsibilities.
- Difficulty balancing EMS duties with family and employment obligations.
- Increased risk of provider fatigue and turnover.
- Mental health resource dollars lacking for smaller, rural service providers

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Strategic Summary

Tama County EMS possesses a strong foundation built on community commitment, experienced providers, and growing county-wide collaboration. The greatest challenge remains workforce sustainability, particularly the decline of traditional volunteer staffing. The newly established EMS Essential Services framework provides a historic opportunity to transition from a collection of independent local services into a coordinated county-wide EMS system focused on workforce stabilization, sustainable funding, shared resources, and improved patient outcomes. If implemented effectively, Tama County can become a model for rural EMS system development in Iowa. (Tama County)

Tama County EMS Trust Fund — Detail vs. Budget

Complete three-page report | Period: 07/01/2025–06/30/2026 | Report timestamp: 07/14/2026 10:38:30 AM

Account	Account Name	Encumbrances	Fiscal Budget	Total Activity	Budget Remaining	% Remainin
0022-99-1200-000-10000	SALARIES/STIPEND	$0.00	$296,637.00	$199,275.54	$97,361.46	32.82%
0022-99-1200-000-26000	ADMINISTRATION/OPERATION	$0.00	$296,637.00	$53,581.49	$243,055.51	81.94%
0022-99-1200-000-29100	MEDICAL AND LAB SUPPLIES	$0.00	$296,637.00	$4,108.92	$292,528.08	98.61%
0022-99-1200-000-42200	EDUCATIONAL/TRAINING	$0.00	$296,637.00	$2,030.00	$294,607.00	99.32%
0022-99-1200-000-44000	VEHICLE/EQUIPMENT MNTS	$0.00	$296,637.00	$11,121.42	$285,515.58	96.25%

Key findings from the complete three-page

	Salaries/Stipend has $199,275.54 of activity.Total from 6 of 9 services - 36.82% remaining
1	Administration/Operations has $53,581.49 of activity leaving 81.94% remainging
2	Medical & Lab Supplies, Educational/Training, and Vehicle/Equipment Maintenance each show the same $296,637 fiscal budget. Their combined activity is $17,260.34, leaving 98.06% unspent.
3	All 24 detail transactions reconcile exactly to the reported fund activity of $270,117.37. The fund has $619,793.63 (69.65%) budget remaining.
4	

Reported activity total **$270,117.37**

All expenses reimbursed from from January 1 2026 to June 30, 2026.
FY 26 - 6 months of reimbursement due to no funds available for reimbursement prior to January 1, 2026

Post Date	Pmt	Description	Vendor	Amount
2026-03-16	387504	JAN-MARCH NET WAGES	01578 - DYSART AMBULANCE	$34,566.21
2026-06-15	388473	MEDICAL, EDUCATIONAL, SALARIES, & ADMINISTRATION	00990 - CITY OF GARWIN	$3,159.32
2026-06-15	388473	MEDICAL, EDUCATIONAL, SALARIES, & ADMINISTRATION	00990 - CITY OF GARWIN	$5,173.88
2026-06-15	388473	MEDICAL, EDUCATIONAL, SALARIES, & ADMINISTRATION	00990 - CITY OF GARWIN	$1,126.04
2026-06-15	388473	MEDICAL, EDUCATIONAL, SALARIES, & ADMINISTRATION	00990 - CITY OF GARWIN	$25.00
2026-06-29	388682	EDUCATIONAL/TRAINING, SALARIES, & ADMINISTRATION	01639 - GLADBROOK-LINCOLN	$21,316.50
2026-06-29	388682	EDUCATIONAL/TRAINING, SALARIES, & ADMINISTRATION	01639 - GLADBROOK-LINCOLN	$12,105.21
2026-06-29	388682	EDUCATIONAL/TRAINING, SALARIES, & ADMINISTRATION	01639 - GLADBROOK-LINCOLN	$325.00
2026-05-26	388275	PAYROLL REIMBURSEMENT	07322 - GRUNDY AMBULANCE	$4,615.88
2026-05-26	388288	MISC SERVICES	01929 - TAMA AMBULANCE SERVI	$22,701.47
2026-05-26	388288	MISC SERVICES	01929 - TAMA AMBULANCE SERVI	$1,680.00
2026-05-26	388288	MISC SERVICES	01929 - TAMA AMBULANCE SERVI	$26,428.26
2026-05-26	388288	MISC SERVICES	01929 - TAMA AMBULANCE SERVI	$4,273.00
2026-02-16	387183	JAN 2026 NET WAGES EMS	00993 - CITY OF TOLEDO	$16,654.73
2026-03-16	387500	FEBRUARY WAGES	00993 - CITY OF TOLEDO	$10,821.86
2026-03-16	387500	SUPPLIES	00993 - CITY OF TOLEDO	$542.94
2026-03-16	387500	MEDICAL & LAB SUPPLIES	00993 - CITY OF TOLEDO	$814.11
2026-03-16	387500	EQUIPMENT MAINTENANCE	00993 - CITY OF TOLEDO	$4,035.00
2026-04-20	387857	SALARIES & VEHICLE EQUIPMENT/MAINTENANCE	00993 - CITY OF TOLEDO	$11,616.00
2026-04-20	387857	SALARIES & VEHICLE EQUIPMENT/MAINTENANCE	00993 - CITY OF TOLEDO	$2,813.42
2026-05-26	388268	SALARIES & MEDICAL SUPPLIES	00993 - CITY OF TOLEDO	$1,625.83
2026-05-26	388268	SALARIES & MEDICAL SUPPLIES	00993 - CITY OF TOLEDO	$16,937.36
2026-06-15	388552	SALARIES 1/1/2026-5/31/2026	07328 - TRAER AMBULANCE	$66,097.50
2026-04-20	387879	ADMINISTRATION/OPERATIONS(computer for Essential Services	06552 - TAMA COUNTY EMS ASSC	$662.85