



Interoffice Memorandum

AGENDA ITEM

January 4, 2024

TO: Mayor Jerry L. Demings
-AND-
County Commissioners

THRU: Raúl Pino, MD, MPH, Director
Health Services Department

A handwritten signature in black ink, appearing to read "Raúl Pino", written over the name in the "THRU" field.

FROM: Christian C. Zuver, M.D., Medical Director
EMS Office of the Medical Director
Contact: (407) 836-7611

A handwritten signature in black ink, appearing to read "Christian C. Zuver", written over the name in the "FROM" field.

SUBJECT: Florida Department of Health
Bureau of Emergency Medical Services
2023-2024 EMS County Grant Award Application
Consent Agenda – January 23, 2024

The EMS Office of the Medical Director requests approval of the Florida Department of Health, Bureau of Emergency Medical Services 2023-2024 EMS County Grant Award Application. Proceeds from this grant are used to provide enhancements to the countywide EMS System and in the past have included items such as the implementation of a countywide EMS computer system, the placement of automatic external defibrillators throughout the county, and the development of a customer-driven, long-range Strategic Plan. In addition to the Orange County Fire Rescue Department, all municipal and private EMS agencies participate in the grant process.

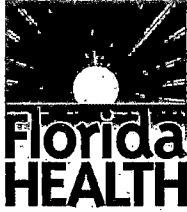
The proposed budget for the county grant award is developed and approved by the EMS Advisory Council. Proceeds from this year's grant will be used to purchase medical and training equipment, reality simulators, and other miscellaneous supplies and equipment.

Funding for the grant is derived from proceeds in the EMS Trust Fund and the actual amount received is based upon fines paid into the trust fund. The grant award will be one payment process. The total amount to be received is \$237,962.72.

ACTION REQUESTED: Approval and execution of 1) Florida Department of Health Emergency Medical Services Program EMS County Grant Award Application in the amount of \$237,962.72 and 2) Resolution of the Orange County Board of County Commissioners regarding Certification for use of Florida Emergency Medical Services Grant Act funds; and authorization for the County Mayor or designee to sign for the award payment. There is no county match required for this grant.

CCZ/jj

Attachments



Instructions: County Government Application Form 2023-2024

The first application page has five numbered items.

Please note that Item 2 on the first application page is where the county's authorized person must provide his/her signature and the date.

Item 4 describes the content of the current "resolution" that is required. However, if a previous resolution has continuing authority, include a signed message about this and provide a copy of the previous resolution.

Item 5 of the first page of the application form asks for the name of the organization(s) to which you decide to allocate funds from your new county grant. The second page of the application form is the budget page, and one of these budget pages is needed for each organization listed in Item 5.

The county alone has the authority to use all the grant funds itself or to provide some of the funds to other organizations within the county. However, the county remains responsible to the state for all the funds.

The budget costs must total to the exact amount of new funds for your grant. You can request budget changes and to add to the new grant budget unexpended previous funds from the prior grant, after the new grant begins.

The Request for Grant Fund Distribution Form is the last page herein and you must complete only the top part of the form. State EMS will complete the bottom part, as stated on the form.

You should copy all forms on your computer to use them. If you place them in restricted editing mode, you can use your keyboard Tab key to go from field to field.

Note: This instruction form is for information purposes only and is not part of form DH 1684.



OFFICE OF COMPTROLLER

**ORANGE
COUNTY
FLORIDA**

Phil Diamond, CPA
County Comptroller as
Clerk of the Board of County Commissioners
201 South Rosalind Avenue
Post Office Box 38
Orlando, FL 32802
Telephone: (407) 836-7300
Fax: (407) 836-5359

DATE: January 23, 2024

TO: Christian Zuver, Medical Director
EMS Office of the Medical Director, BCC

FROM: David Rooney, Manager *MF for DR*
Comptroller Clerk of BCC

SUBJECT: Request for Execution of Document, Health Services Department Consent
Item 2, Legislative File 24-159, January 23, 2024

Enclosed is the Florida Department of Health Emergency Medical Services Program EMS County Grant Award (1 original) which was approved by the Board of County Commissioners (BCC) at its regular meeting held on January 23, 2024.

Please forward the document to all required parties for signature.

Email copies of the fully-executed documents to ClerkofBCC@occompt.com and copy jennifer.mcgill@ocfl.net. Note: ClerkofBCC@occompt.com is **used only for County staff submission of pending documents.**

Please include in cover memo or subject line identification of the document by name, agenda item number, and date of BCC approval. Emailed copies must be in full-size PDF format. The document will be processed and filed for the record upon receipt.

If you are unable to return a copy of the fully-executed document before February 23, 2024, notify Jennifer Lara-Klimetz by email of the reason for the delay prior to that date.

If you have any questions, please do not hesitate to call.

dr:mf

Enclosure (1)

dl: Raul Pino, Director, Health Services Department, BCC [email]
Daniel Banks, Deputy County Administrator, BCC [email]
Sandra Roe, Executive Assistant, Health Services Department, BCC [email]
Pending File

APPROVED
BY ORANGE COUNTY BOARD
OF COUNTY COMMISSIONERS

JAN 23 2024

EMS COUNTY GRANT APPLICATION

**FLORIDA DEPARTMENT OF HEALTH
Emergency Medical Services Program
Complete all items**

ID. Code (The State EMS Program will assign the ID Code – leave this blank) _____

1. County Name: Orange
Business Address: 201 S. Rosalind Avenue
Orlando, Florida 32802
Telephone: 407-836-7350
Federal Tax ID Number (Nine Digit Number): VF 59-6000773



2. Certification: (The applicant signatory who has authority to sign contracts, grants, and other legal documents for the county.) I certify that all information and data in this EMS county grant application and its attachments are true and correct. My signature acknowledges and assures that the county shall comply fully with the conditions outlined in the Florida EMS County Grant Application.
Signature: *Jerry L. Demings* **Date:** 23 Jan 24
Printed Name: Jerry L. Demings
Position Title: County Mayor

3. Contact Person: (The individual with direct knowledge of the project on a day-to-day basis and has responsibility for the implementation of the grant activities. This person is authorized to sign project reports and may request project changes. The signer and the contact person may be the same.)
Name: Christian Zuver
Position Title: Medical Director
Address: 4654 35th Street
Orlando, FL 32806
Telephone: 407-836-7606 **Fax Number:** 407-836-7625
E-mail Address: Christian.Zuver@ocfl.net

4. Resolution: Attach a resolution from the Board of County Commissioners certifying the grant funds will improve and expand the county pre-hospital EMS system and will not be used to supplant current levels of county expenditures. We cannot process for funds without this resolution.

5. Organization List: Complete a budget page(s) for each organization, which at your option you will provide funds. List the organization(s) below. (Use additional pages if necessary)
American Medical Response
City of Orlando
Greater Orlando Aviation Authority (GOAA) Fire Department
Orange County CPR AED Committee
Orange County Fire Rescue
Orlando Fire Department
Winter Garden Fire Rescue Department
Winter Park Fire Department

BUDGET PAGE - When the budget form is in your computer, the budget totals below should be added for you if you place your cursor over a subtotal or total field, right click your mouse, then left click "Update Field" on the resulting menu.

A. Salaries and Benefits:

For each position title, provide the amount of salary per hour, FICA per hour, other fringe benefits, and the total number of hours.	Amount
TOTAL Salaries =	\$ 0.00
TOTAL FICA & Other Benefits =	
Total Salaries & Benefits =	\$ 0.00

B. Expenses: These are travel costs and the usual, ordinary, and incidental expenditures by an agency, such as, commodities and supplies of a consumable nature excluding expenditures classified as operating capital outlay (see next category).

List the item and, if applicable, the quantity	Amount
Total Expenses =	\$ 0.00

C. Vehicles, equipment, and other operating capital outlay means equipment, fixtures, and other tangible personal property of a non-consumable and non-expendable nature with a normal expected life of one (1) year or more.

List the item and, if applicable, the quantity	Amount
Total Vehicles & Equipment =	\$ 0.00
<u>Grand Total =</u>	<u>\$ 0.00</u>

FLORIDA DEPARTMENT OF HEALTH
EMERGENCY MEDICAL SERVICES (EMS) GRANT UNIT

REQUEST FOR GRANT FUND DISTRIBUTION

In accordance with the provisions of section 401.113(2) (a), *Florida Statutes*, the undersigned hereby requests an EMS grant fund distribution for the improvement and expansion of pre-hospital EMS.

DOH Remit Payment To:

The county name, address, and corresponding federal ID number used herein **must** be in the state MyFloridaMarketPlace (MFMP) system. A finance person in your organization who does business with the state can provide these.

Name of County: Orange County Board of County Commissioners

Mailing Address: 201 S. Rosalind Avenue

Orlando, Florida 32802

Federal 9-digit Identification number: 59-6000773 3-digit seq. code _____

Authorized County Official: *[Signature]* Date 23 Jan 24
Signature Date

for Jerry L. Demings, County Mayor
Type or Print Name and Title

Sign and return this page with your application to:

Florida Department of Health
Emergency Medical Services Unit, Grants
4052 Bald Cypress Way, Bin A-22
Tallahassee, Florida 32399-1722



Do not write below this line. For use by State Emergency Medical Services Section

Grant Amount for State to Pay: \$ _____ Grant ID: Code: _____

Approved By: _____
Signature of State EMS Unit Supervisor Date

Approved By: _____
Signature of Contract Manager Date

State Fiscal Year: 2023 - 2024

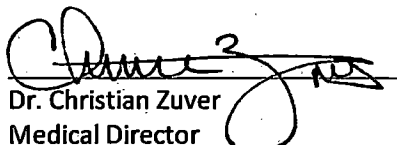
Organization Code	E.O.	OCA	Object Code	Category
64-61-70-30-000	05	SF005	751000	059998

Federal Tax ID: VF _____ Seq. Code: _____

Grant Beginning Date: _____ Grant Ending Date: _____

OLO/Department:	640000 / Dept. of Health		Agency Contact: Dr. Christian Zuver	
FLAIR Contract #:			Telephone #: 407-836-7606	
Agency Contract #:	407-836-6562			
PO #:				
Deliverables	C2048			
Deliverables as stated in the Contract (Grant)	Minimum Performance Levels	Deliverable Price	Type of Services	Method of Payment
#1 Greater Orlando Aviation Authority	Lucas Chest Compression System – mechanical CPR device.	\$18,441.32		
#2 AMR	Video Laryngoscope Equipment – airway management assistance.	\$16,811.00		
#3 Orange County Fire Rescue	AirSim Combo X (Dark Skin Tone) – training manikin.	\$ 7,084.00		
4# Winter Garden Fire Rescue Department	Airtraq Video Intubation System – airway management assistance.	\$ 9,778.00		
#5 City of Orlando Fire Department	NeoMate Pediatric Restraint System – pediatric transport assistance.	\$ 9,260.00		
#6 Orange County Fire Rescue	Resusci Anne QCPR Torsos and Simpads - mobile training device with real time CPR feedback.	\$ 7,557.12		
#7 Orange County CPR AED Committee	Palm Cards, CPR Anytime Kits, Stress Relievers – bystander CPR and AED awareness and educational materials.	\$ 5,340.56		
#8 Orange County Fire Rescue	Laerdal Airway Management Trainer – airway management training.	\$ 4,471.00		
#9 Winter Park Fire Department	Lucas Chest Compression System – mechanical CPR device.	\$21,315.84		
#10 Orange County Fire Rescue	TruBaby X (Dark Skin Tone) - training manikin.	\$ 7,680.00		
#11 Orange County Fire Rescue	iSimulate REALITI Plus and Simscope – virtual training platform and device for listening to breath sounds, etc.	\$12,085.00		
#12 City of Orlando Fire Department	Prestan AED Ultra Trainer and Manikins – AED trainer and training manikins for bystander/public CPR AED education.	\$5,772.02		
#13 Orange County Fire Rescue	TruInfant IO Leg (Dark Skin) – training limb.	\$465.60		

#14 Orange County Fire Rescue	Simulaids Humerus IO Trainer – training limb.	\$403.25		
#15 Orange County Fire Rescue	Life Form Intraosseous Infusion Simulator – training adjunct.	\$740.01		
#16 Winter Park Fire Department	ALS Megacode Kelly and Accessories – training manikin and accessories.	\$15,159.21		
#17 Orange County Fire Rescue	Laerdal AT Kelly Torso – training manikin.	\$ 5,990.34		
#18 Orlando Fire Department Training/Orange County EMS System	Cadaver Supplies (for 4 day cadaver lab training) – advanced skill labs not easily accessible to EMS.	\$44,245.00		
#19 EMS Office of the Medical Director	EZ IO	\$2,333.95		
#20 EMS Office of the Medical Director	Glidescope	\$6,000.00		
#21 EMS Office of the Medical Director	Project TBA	\$25,000.00		
#22 Orange County EMS System	Pediatric Restraint Devices	\$12,029.50		
Total		\$237,962.72		


Dr. Christian Zuver
Medical Director
 Orange County EMS System

Date 12/21/2023

 Approved Signature
 Bureau of EMS Representative or
 EMSC Program Manager
 FDOH / Division of Emergency Preparedness and Community Support
 Bureau of Emergency Medical Oversight

Date _____

Jensen, Jennifer L

From: Zuver, Christian C
Sent: Tuesday, November 7, 2023 9:53 AM
To: Jensen, Jennifer L
Subject: FW: 2023 2024 County Government EMS Grants cycle

-Christian Zuver, MD

From: zzzz Feedback, DEPCS_EMS <EMS@flhealth.gov>
Sent: Monday, November 6, 2023 4:19 PM
Subject: 2023 2024 County Government EMS Grants cycle

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Good afternoon,

This email announces the opening of the 2023-2024 County Government EMS Grants cycle.

County Government Grants 2023-2024 Paragraph (a) of Subsection 401.113 (2), Florida Statutes

This announcement authorizes county governments to request their new amounts of emergency medical services (EMS) county grant funds. The amount of funds for each county this year is in the **Total** Column of the Table at the following link. [County Amounts 2023-2024](#)

To obtain the funds, the county must appropriately complete and send to the state: (1) the two-page application form, (2) the Request for Grant Fund Distribution page, and (3) a resolution described in Item number 4 of the application form.

The application package can be accessed at the following link. [County Grant Application](#)

You may send the completed application, with signatures, by **email attachment** to the following email address EMS@flhealth.gov

Alternatively, you may **mail** the completed **original application and one copy** to: Florida Department of Health, EMS County Grants, 4052 Bald Cypress Way, Bin A 22, Tallahassee, FL 32399-1722.

Deadline: Florida Department of Health's EMS Section should receive your completed application by January 31, 2024, or by 10 days after the ending date of your prior grant of this same type - whichever is later.

Please send questions regarding application requirements to EMS@flhealth.gov.

Best regards,

Teresa Mathew



Teresa Mathew, MA, MSW, MPA

Strategic Planning and Grants Manager
Bureau of Emergency Medical Oversight
Division of Emergency Preparedness and Community Support
Florida Department of Health

4052 Bald Cypress Way, Bin #A22

Tallahassee, FL 32399

(850) 558-9542

E-mail: Teresa.Mathew@FLHealth.gov

Mission: To protect, promote & improve the health of all people in Florida through integrated state, county, & community efforts.

Please note: Florida has a very broad public records law. Most written communications to or from state officials regarding state business are public records available to the public and media on request. Your e-mail communications may therefore be subject to public disclosure.