

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact

Fiscal Years	<u>2022</u>	<u>2023</u>	<u>2024</u>	<u>2025</u>	<u>2026</u>
Personal Services					
Operating Costs	\$12,840				
Grants & Aids					
External Revenues	(12,840)				
Program Income (County)					
In-Kind Match (County)					
Net Fiscal Impact	0				

ADDITIONAL FTE
POSITIONS (Cumulative)

Is Item Included In Current Budget? Yes X No
Does this item include the use of federal funds? Yes No X

Budget Account Exp No.: Fund 1425 Department 662 Unit 5230 Object various
Rev No.: Fund 1425 Department 662 Unit 5230 RevSrc 3249

B. Recommended Sources of Funds/Summary of Fiscal Impact:

Grant: EMS Public Safety
Fund: EMS Award-Grant Program
Unit: EMS-Public Safety Grants

[Handwritten signature]
10/14/21

C. Departmental Fiscal Review:

III. REVIEW COMMENTS

A. OFMB Fiscal and/or Contract Dev. and Control Comments:

[Handwritten signature] *11/19/21*
OFMB *11-18-21* *11/18/21* *11/18/21*
[Handwritten signature] *11/30/21*
Contract Administration
11-29-21 TW

B. Legal Sufficiency:

[Handwritten signature]
Assistant County Attorney

C. Other Department Review:

Department Director

This summary is not to be used as a basis for payment.



Florida Department of Health
 Emergency Medical Services Section, Grants Unit
CHANGE REQUEST FOR GRANT
 Awarded under 401.113(2) (a), Florida Statutes

Organization Name: Palm Beach County	Grant ID Code: C9050
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BUDGET LINE ITEMS	CHANGE FROM	CHANGE TO
Beginning Budget County Grant ID Code C9050	\$147,932.00	\$147,932.00
Transfer unexpended budget from ID C8050 to C9050	\$0.00	\$10,902.89
Transfer unexpended interest from ID C8050 to C9050	\$0.00	\$1,936.50
TOTAL =	\$147,932.00	\$160,771.39

Justification for Change: We hereby request state of Florida spending authority for unspent budget and interest from ID Code C8050 which has ended, for the budget of the county's active grant ID Code C9050.

This retention by the county and transfer of funds is authorized by the state EMS county grant guidelines, which are in a booklet incorporated by reference in Florida Administrative Code 64J-1.015 (6). The applicable paragraph follows.

"Any unencumbered EMS county grant program funds as of the ending date of the grant, including interest, remaining in the assigned grantee account at the end of a grant period shall be reported to the [state of Florida] department [of health]. The grantee will retain these funds in the EMS County Grant account and include them in a budget revision request after receipt of approval of their next county grant application."

After approval by the state, the transferred funds will have state spending authority under state EMS county grant C9050. The funds, which are already in county accounts, should then be made available by the county for expenditure for current line items in the approved budget of C9050, but use of these and any funds for new budget line items or significant changes in allocations must be requested by the county and approved by the state in additional change requests.

_____ Grantee Authorized Signature	10/07/21 MMM DD YYYY
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Below is for Use Only by State EMS

Approved: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> _____ State EMS Authorized Signature	Change No.: 1 10/9/2021 MMM DD YYYY
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This form is equivalent to DH Form 1684C, Rev. June 2002

APPROVED AS TO FORM AND
 LEGAL SUFFICIENCY

Assistant County Attorney

APPROVED AS TO TERMS AND
 CONDITIONS

Department Director

RESOLUTION NO. R-2021-0601

RESOLUTION OF THE BOARD OF COUNTY COMMISSIONERS OF PALM BEACH COUNTY, FLORIDA, AUTHORIZING THE COUNTY ADMINISTRATOR OR DESIGNEE TO SIGN THE FY 2020-2021 ANNUAL EMS GRANT FUND APPLICATION FOR \$147,932 AND SIGN THE EMS GRANT PROGRAM CHANGE REQUEST FORMS RELATED TO THE GRANT AFTER THE APPROVAL OF THE APPLICATION BY THE FLORIDA DEPARTMENT OF HEALTH, BUREAU OF EMERGENCY MEDICAL SERVICES AND FORWARD SAME TO THE STATE OF FLORIDA DEPARTMENT OF HEALTH, BUREAU OF EMERGENCY MEDICAL SERVICES.

WHEREAS, the State of Florida has established an Emergency Medical Services Trust Fund consisting of a portion of every municipal and county moving violation and driving under the influence conviction in Palm Beach County; and

WHEREAS, the Palm Beach County share of the Emergency Medical Services Trust Fund for FY 2020-2021 is **\$147,932** to be used to improve and expand pre-hospital emergency medical services in the County; and

WHEREAS, the County may reimburse and disburse the funds to licensed emergency medical service providers; and

WHEREAS, various pre-hospital emergency medical service providers have applied to the Palm Beach County Division of Emergency Management for a share of the County award; and

WHEREAS, the Palm Beach County Emergency Medical Services Advisory Council and the Division of Emergency Management have reviewed the grant award proposal and have recommended the appropriate awarding and distribution of funding; and

WHEREAS, the agencies requesting a share of the funding have certified that their requests are improvements and expansions of pre-hospital emergency medical services within the County; and

WHEREAS, prior to any disbursement of funds from the County Grant Award Program, each agency authorized to receive funds from the program will provide documentation to the Department of Public Safety, Division of Emergency Management, affirming that they agree to the reimbursement of funding or distribution of equipment and will permit an audit; and

WHEREAS, the Palm Beach County Emergency Medical Services Grant Award Application is made a part of and attached hereto.

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF PALM BEACH COUNTY, FLORIDA, THAT:

The Board of County Commissioners certifies that this Grant Award Application and request is an improvement and expansion of the pre-hospital emergency medical services system in Palm Beach County and that the funding will not be used to supplant existing County EMS budget applications.

1. The County Administrator or designee is authorized to sign the County Grant Award application.
2. The County Administrator or designee is authorized to sign the EMS Grant Fund Distribution Form.
3. The County Administrator or designee is authorized to sign the Grant Budget Change Request form for the EMS County Grant Award funds.

4. The EMS Coordinator of the Division of Emergency Management is designated as the "Authorized Contact Person" pursuant to application requirements.

This Resolution shall be effective immediately upon adoption of the Board. The foregoing Resolution was offered by Commissioner Weiss who moved its adoption. The motion was seconded by Commissioner Marino, and upon being put to a vote, the vote was as follows:

Commissioner Dave Kerner, Mayor	<u>Aye</u>
Commissioner Robert S. Weinroth, Vice Mayor	<u>Aye</u>
Commissioner Maria G. Marino	<u>Aye</u>
Commissioner Gregg K. Weiss	<u>Aye</u>
Commissioner Maria Sachs	<u>Aye</u>
Commissioner Melissa McKinlay	<u>Aye</u>
Commissioner Mack Bernard	<u>Aye</u>

The Mayor thereupon declared the Resolution duly passed and adopted this 4th day of May 2021.

PALM BEACH COUNTY, FLORIDA, BY ITS
BOARD OF COUNTY COMMISSIONERS

SHARON R. BOCK, CLERK & COMPTROLLER

By: Nancy Powell
Deputy Clerk



APPROVED AS TO FORM
AND LEGAL SUFFICIENCY

By: [Signature]
Assistant County Attorney

Mission:

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



Governor

Scott A. Rivkees, MD
State Surgeon General

Vision: To be the Healthiest State in the Nation

May 12, 2021

RECEIVED
MAY 17 2021
FLORIDA DEPARTMENT OF HEALTH

Verdenia C. Baker, County Administrator
Palm Beach County
301 North Olive Avenue
West Palm Beach, Florida 33401

Dear Ms. Baker:

I am pleased to award the Emergency Medical Services (EMS) County Grant, ID Code C9050 in the amount of \$147,932.00 to Palm Beach County. The purpose of this grant is to improve and expand pre-hospital EMS. Section 401.113(2) (a), Florida Statutes, authorizes and requires this grant program, which is Number 64.005 in the Florida Catalog of State Financial Assistance. The money is state funds from the Department of Health's EMS Trust Fund, and there are no federal funds involved.

Your funds for the stated amount will be sent in full, in advance, within approximately 30 days. The grant begins the date of this letter and ends March 25, 2022. Please note that the county must report to the state its grant activities and purchases by the following dates: July 30, 2021, December 3, 2021, and April 8, 2022, the final report. Your signed grant application affirms you have read, understand, and will comply with the conditions and requirements in the "Florida EMS County Grant Program Application Packet, December 2008."

Thank you for your participation in this state EMS grant program. If you need assistance, please contact Mr. Alan Van Lewen, Health Services and Facilities Consultant in the Bureau of Emergency Medical Oversight, EMS Section at (850) 558-9550.

Sincerely,

Douglas H. Woodlief
Division Director
Emergency Preparedness and Community Support

DHWavi

cc: Mary Blakeney, Director, Division of Emergency Management

Florida Department of Health
Division of Emergency Preparedness and Community Support
Bureau of Emergency Medical Oversight
4052 Bald Cypress Way, Bldg A-22 • Tallahassee, FL 32399-1722
PHONE: 850/245-4440 • FAX: 850/400-9400



Accredited Health Department
Public Health Accreditation Board