

1. Project Title

## The Florida Senate Local Funding Initiative Request Fiscal Year 2023-2024

Boynton Beach Fire Rescue Fire Alerting System Upgrades

LFIR # 2034

3. Date of Request  02/20/2023  4. Project/Program Description  Boynton Beach Fire Rescue respectfully requests \$800,000 to upgrade the Fire alerting system at the five fire stations in the City of Boynton Beach. The current system used to alert the stations is an antiquated Zetron FSA. Alerts are sudden, wake up the entire station although only select units are activated and there is a delay between the alert and the lime the dispatchers start speaking. During high discress calls, the dispatchers voice may reflect the emotion lineasity of the situation and lack preciseness during the exchange and may be difficult to understand causing details to be missed. The requested fire alerting system alerts the preselected units during incidents, allowing the other responders to rest, is equipped with an automated voice which remains consistent and clear at all times; and displays the call details such as the location of the incident in real time, reducing response time by 60 seconds which can be critical in saving lives.  5. State Agency to receive requested funds  State Agency contacted?  No  6. Amount of the Nonrecurring Request for Fiscal Year 2023-2024  Type of Funding  Amount  Operations  Stock Capital Outlay  Total State Funds Requested  7. Total Project Cost for Fiscal Year 2023-2024 (including matching funds available for this project)  Type of Funding  Total State Funds Requested (from question #6)  800,000  100%  Matching Funds  Federal  0 0 0%  State (excluding the amount of this request) 0 0 0%  State (excluding the amount of this request) 0 0 0%  Other  0 0 0%  Total Project Costs for Fiscal Year 2023-2024  800,000  100%  No  Fiscal Year  Amount  Amount  Specific  Appropriation #  No  1. If yes, indicate nonrecurring amount per year.  b. Describe the source of funding that can be used in lieu of state funding.  Grant Funding	2.	Senate Sponsor	Lori Berman				
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Grant Funding		b. Describe the so	urce of funding that can	be used in I	ieu of state funding.		
		Grant Funding					

10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?



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Yes		

11. Status of Construction

If yes, indicate the amount of funds received and what the funds were used for.

FEMA - AFG Covid-19 Supplemental Assistance - \$571,000 for PPE equipment

### Complete questions 11 and 12 for Fixed Capital Outlay Projects

a. What is the	current phase	of the project?			
OPlanning	ODesign	Construction			
b. Is the proje	ct "shovel read	y" (i.e permitted)?			
c. What is the	estimated start	date of construction?			
d. What is the	estimated com	pletion date of construction?			
12. List the ownerelationship	ers of the facilit between the ow	y to receive, directly or indirec mers of the facility and the ent	tly, any fixed capital ity.	outlay funding. Include the	

#### 13. Details on how the requested state funds will be expended

Spending Category	Description	Amount			
Administrative Costs:					
Executive Director/Project Head Salary and Benefits		0			
Other Salary and Benefits		0			
Expense/Equipment/Travel/Supplies/ Other		0			
Consultants/Contracted Services/Study		0			
Operational Costs: Other	Operational Costs: Other				
Salary and Benefits		0			
Expense/Equipment/Travel/Supplies/Other	Fire Alerting System for five fire stations	800,000			
Consultants/Contracted Services/Study		0			
Fixed Capital Construction/Major Renovation:					
Construction/Renovation/Land/ Planning Engineering		0			
Total State Funds Requested (m	Total State Funds Requested (must equal total from question #6) 800,000				

#### 14. Program Performance

a. What specific purpose or goal will be achieved by the funds requested?

The most prominent goal to be achieved is reducing firefighter response time to emergencies by 60 seconds.

b. What activities and services will be provided to meet the intended purpose of these funds?



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Activities will include a procurement process to obtain the equipment from provider; a walk-through of each fire station; system installation and training of personnel to effectively use the new system.

c. What direct services will be provided to citizens by the appropriation project?

Direct services to be provided are: Firefighting response; Firefighting intervention; Emergency Medical Services; and Public Safety.

d. Who is the target population served by this project? How many individuals are expected to be served?

This project directly serves the 80,139 residents of Boynton Beach, the surrounding communities through mutual agreement, and enhances Boynton Beach Fire Rescue's readiness to respond to state declared emergencies.

e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?

Firefighters will be able to shave 60 seconds off their response time, a critical lifesaving benefit; firefighting personnel will gain the benefit of a more restful sleep which directly contributes to better overall health, decrease in heart-related illnesses, and increase in job longevity. The methodology will be measured by the number of calls answered prior to the previous year and the number of illnesses and sick time reported by personnel.

f. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for the contract?

Failure to meet installation and implementation deliverables should result in the City of Boynton Beach forfeiting the funds.

. Requester Contact	t imormation				
a. First Name	Tess	Last Name	Lacroi		
b. Organization	b. Organization The City Of Boynton Beach				
c. E-mail Address	Lacroixt@bbfl.us				
d. Phone Number	(561)742-6087	Ext.			
. Recipient Contact	Information				
a. Organization	Boynton Beach Fire Res	scue			
b. Municipality and	d County Palm Beach				
c. Organization Ty	pe				
□For Profit Entity	□For Profit Entity				
□Non Profit 501(d	□Non Profit 501(c)(3)				
□Non Profit 501(d	□Non Profit 501(c)(4)				
☑Local Entity	☑Local Entity				
□University or College					
□Other (please specify)					
d. First Name	Hugh	Last Name	Bruder		
e. E-mail Address	e. E-mail Address BruderH@bbfl.us				



# The Florida Senate Local Funding Initiative Request Fiscal Year 2023-2024

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b. Firm Name	Ballard Partners		
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d. Phone Number	(561)253-3232		