



STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES

February 5 , 1988
Cert. #P782-674-556
Return Receipt Requested

Forest A. Willis, Jr.
Rescue Supervisor
Emergency Medical Services
11 North 14th Street, Box 12
Fernandina Beach, Florida 32034

Dear Mr. Willis:

I am pleased to send you the enclosed signed contract under the state Emergency Medical Services (EMS) Matching Grant program.

Purchases of equipment and services, with the exception of communication line items, are allowable costs as of the contract's effective date. The purchase of any communications equipment or services during the contract's effective dates must have prior written approval from the Department of General Services, Division of Communications; otherwise, we are required to disallow the communications costs.

I hope that this contract provides the opportunity for continued improvement and expansion of your EMS system.

Sincerely,

Alan Van Lewen
Alan Van Lewen
Health Services &
Facilities Consultant
Emergency Medical Services

ds/LS/025

Enclosure
1. Matching Grants Contract

150 Matching Grants



Contract No. LCNDY

STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES
OTHER GOVERNMENTAL AGENCIES CONTRACT

THIS CONTRACT is entered into between the State of Florida, Department of Health and Rehabilitative Services, hereinafter referred to as the "department," and Nassau County Board of County Commissioners

hereinafter referred to as the "provider."

The parties agree:

I. The Provider Agrees:

A. To provide services according to the conditions specified in Attachment I.

B. Federal and State Laws and Regulations

1. If this contract contains federal funds, the provider shall comply with the provisions of 45 CFR, Part 74, and other applicable regulations if specified in Attachment I.

2. If this contract contains federal funds and is over \$100,000, the provider shall comply with all applicable standards, orders, or regulations issued pursuant to the Clean Air Act as amended (42 USC 1857 et seq.) and the Water Pollution Control Act as amended (33 USC 1368 et seq.).

C. Audits and Records

1. To maintain books, records and documents in accordance with accounting procedures and practices which sufficiently and properly reflect all expenditures of funds provided by the department under this contract.

2. To assure that these records shall be subject at all times to inspection, review, or audit by state personnel and other personnel duly authorized by the department, as well as by federal personnel.

3. To maintain and file with the department such progress, fiscal, inventory and other reports as the department may require within the period of this contract.

4. To include these aforementioned audit and record-keeping requirements in all approved subcontracts and assignments.

5. To allow public access to all documents, papers, letters or other material subject to the provisions of Chapter 119, F.S., and made or received by the provider in conjunction with this contract. It is expressly understood that substantial evidence of the provider's refusal to comply with this provision shall constitute a breach of contract.

D. Retention of Records

1. To retain all financial records, supporting documents, statistical records, and any other documents pertinent to this contract for a period of five (5) years after termination of this contract, or if an audit has been initiated and audit findings have not been resolved at the end of five (5) years, the records shall be retained until resolution of the audit findings.

2. Persons duly authorized by the department, and federal auditors, pursuant to 45 CFR, Part 74.24(a), (b), and (d), shall have full access to, and the right to examine any of said records and documents during said retention period.

E. Monitoring

1. To provide progress reports, including data reporting requirements as specified in Attachment I. These reports will be used for monitoring progress or performance of the contractual services as specified in Attachment I.

2. To provide access to, or to furnish whatever information is necessary to effect this monitoring.

3. To permit the department to monitor the aforementioned service program operated by the provider or subcontractor or assignee according to applicable regulations of the state and federal governments. Said monitoring will include access to all client records.

F. Insurance

If the provider is a county or municipality, the provider shall furnish the department written verification of liability coverage in accordance with Section 768.28, F.S.

G. Safeguarding Information

The provider shall not use or disclose any information concerning a recipient of services under this contract for any purpose not in conformity with the state regulations and federal regulations (45 CFR, Part 205.50), except upon written consent of the recipient, or his responsible parent or guardian when authorized by law.

H. Client Information

The provider shall submit to the department as specified in Attachment N/A management and program data, including client identifiable data, for inclusion in the HRS Client Information System.

I. Assignments and Subcontracts

The provider shall neither assign the responsibility of this contract to another party nor subcontract for any of the work contemplated under this contract without prior written approval of the department. No such approval by the department of any assignment or subcontract shall be deemed in any event or in any manner to provide for the incurrence of any obligation of the department in addition to the total dollar amount agreed upon in this contract. All such assignments or subcontracts shall be subject to the conditions of this contract and to any conditions of approval that the department shall deem necessary.

J. Financial Reports

To provide financial reports to the department as specified in Attachment I.

K. Return of Funds

The provider agrees to return to the department any overpayments due to unearned funds or funds disallowed pursuant to the terms of this contract that were disbursed to the provider by the department. Such funds shall be considered department funds and shall be refunded to the department. The refund shall be due within 45 days following the end of the contract or at the time the overpayment is discovered unless otherwise authorized by the department in writing and attached to this contract.

L. Unusual Incident Reporting

If services to clients will be provided under this contract, the provider and any subcontractors shall report to the department unusual incidents in a manner prescribed in HRSR 0-10-1.

M. Transportation Disadvantaged

If clients will be transported under this contract, the provider will subcontract with the designated Community Coordinated Transportation Provider, in accordance with the local Memorandum of Agreement, or otherwise comply with the provisions of Chapter 427, Florida Statutes. The provider shall submit to the department the reports required pursuant to Volume 10, HRS Accounting Procedures Manual.

N. Civil Rights Certification

The provider gives this assurance in consideration of and for the purpose of obtaining Federal grants, loans, contracts (except contracts of insurance or guaranty), property, discounts, or other Federal financial assistance to programs or activities receiving or benefiting from Federal financial assistance.

The provider assures that it will comply with:

1. Title VI of the Civil Rights Act of 1964, as amended, 42 U.S.C. 2000d et seq., which prohibits discrimination on the basis of race, color, or national origin in programs and activities receiving or benefiting from Federal financial assistance.

2. Section 504 of the Rehabilitation Act of 1973, as amended, 29 U.S.C. 794, which prohibits discrimination on the basis of handicap in programs and activities receiving or benefiting from Federal financial assistance.

3. Title IX of the Education Amendments of 1972, as amended, 20 U.S.C. 1681 et seq., which prohibits discrimination on the basis of sex in education programs and activities receiving or benefiting from Federal financial assistance.

4. The Age Discrimination Act of 1975, as amended, 42 U.S.C. 6101 et seq., which prohibits discrimination on the basis of age in programs or activities receiving or benefiting from Federal financial assistance.

5. The Omnibus Budget Reconciliation Act of 1981, P.L. 97-35, which prohibits discrimination on the basis of sex and religion in programs and activities receiving or benefiting from Federal financial assistance.

6. All regulations, guidelines, and standards lawfully adopted under the above statutes.

The provider agrees that compliance with this assurance constitutes a condition of continued receipt of or benefit from Federal financial assistance, and that it is binding upon the provider, its successors, transferee, and assignees for the period during which such assistance is provided. The provider further assures that all contractors, subcontractors, subgrantees or others with whom it arranges to provide services or benefits to participants or employees in connection with any of its programs and activities are not discriminating against those participants or employees in violation of the above statutes, regulations, guidelines, and standards. In the event of failure to comply, the provider understands that the Grantor may, at its discretion, seek a court order requiring compliance with the terms of this assurance or seek other appropriate judicial or administrative relief, to include assistance being terminated and further assistance being denied.

II. The Department Agrees:

A. Contract Amount

To pay for contracted services according to the conditions of Attachment I in an amount not to exceed \$ 7,066.00, subject to the availability of funds. The State of Florida's performance and obligation to pay under this contract is contingent upon an annual appropriation by the Legislature.

B. Contract Payments

Pursuant to section 215.422, F.S., on receipt of an invoice and receipt, inspection, and approval of the goods or services, the department shall file the invoice with the Comptroller within 15 days. If the payment of the invoice is not mailed by the department to the vendor within 45 days after receipt of the invoice and receipt, inspection, and approval of the goods and services, the department will pay the vendor, in addition to the amount of the invoice, interest at a rate of 1 percent per month or portion thereof on the unpaid balance from the expiration of such 45 day period until such time as the warrant is mailed to the vendor. Exceptional circumstances as defined in section 215.422(2), F.S., may permit the deadline for payment to be revised.

III. The Provider and Department Mutually Agree:

A. Effective Date

1. This contract shall begin on November 1, 1987 or the date on which the contract has been signed by both parties, whichever is later.

2. This contract shall end on October 31, 1988.

B. Termination

1. Termination at Will

This contract may be terminated by either party upon no less than thirty (30) days notice, without cause. Said notice shall be delivered by certified mail, return receipt requested, or in person with proof of delivery.

2. Termination Because of Lack of Funds

In the event funds to finance this contract become unavailable, the department may terminate the contract upon no less than twenty-four (24) hours notice in writing to the provider. Said notice shall be delivered by certified mail, return receipt requested, or in person with proof of delivery. The department shall be the final authority as to the availability of funds.

3. Termination for Breach

Unless the provider's breach is waived by the department in writing, the department may, by written notice to the provider, terminate this contract upon no less than twenty-four (24) hours notice. Said notice shall be delivered by certified mail, return receipt requested, or in person with proof of delivery. If applicable, the department may employ the default provisions in Chapter 13A-1, Florida Administrative Code. Waiver of breach of any provision of this contract shall not be deemed to be a waiver of any other breach and shall not be construed to be a modification of the terms of this contract. The provisions herein do not limit the department's right to remedies at law or to damages.

C. Notice and Contact

The name and address of the contract manager for the department for this contract is _____

Department of HRS, Office of Emergency Medical Services, 1317 Winewood Boulevard, Tallahassee, Florida 32399-0700

The representative of the provider responsible for the administration of the program under this contract is _____

In the event that different representatives are designated by either party after execution of this contract, notice of the name and address of the new representative will be rendered in writing to the other party and said notification attached to originals of this contract.

D. Renegotiation or Modification

1. Modifications of provisions of this contract shall only be valid when they have been reduced to writing and duly signed. The parties agree to renegotiate this contract if federal and/or state revisions of any applicable laws, or regulations make changes in this contract necessary.

2. If this contract contains a fixed-price method of payment section, and the rate of payment is determined through the appropriations process, then this contract may be amended to reflect the new rate established through the appropriations process retroactive to the effective date of this contract.

3. If the contract contains either a cost-reimbursement or a fixed-price method of payment, the rate of payment and the total dollar amount may be adjusted prospectively to reflect price-level increases determined through the appropriations process and subsequently identified in the department's operating budget.

E. Name and Address of Payee

The name and address of the official payee to whom the payment shall be made:

Nassau County Board of County Commissioners
Post Office Box 1010
Fernandina Beach, Florida 32034

F. All Terms and Conditions Included

This contract and its attachments as referenced, (I, II, III, IV, V, VI, and VII

_____),
_____ ,
_____ ,
contain all the terms and conditions agreed upon by the parties.

IN WITNESS THEREOF, the parties hereto have caused this 19 page contract to be executed by their undersigned officials as duly authorized.

NASSAU COUNTY BOARD OF
COUNTY COMMISSIONERS
PROVIDER

STATE OF FLORIDA DEPARTMENT OF
HEALTH AND
REHABILITATIVE SERVICES

SIGNED BY: Charles A. Pickett

SIGNED BY: Larry S. Jordan

NAME: Charles A. Pickett

NAME: LARRY S. JORDAN

TITLE: Chairman

TITLE: Program Administrator

DATE: 1-19-88

DATE: 1 Feb 88

FEDERAL ID NUMBER:

VF-59-1863042

ATTACHMENT I

A. RESPONSIBILITIES OF PROVIDER:

The provider is responsible for: (1) improving the existing quality of prehospital Emergency Medical Service (EMS) activities, services, or having a positive impact on patient mortality and morbidity; and, (2) expanding the extent, size, or number of existing prehospital EMS activities or services. The activities and services to be provided are described in the provider's EMS matching grant Request for Proposal (RFP) which is on file at the State of Florida, Department of Health and Rehabilitative Services, Office of EMS, Tallahassee, Florida 32399-0700.

B. MANNER OF SERVICE PROVISION:

Services will be rendered by the provider in a manner consistent with Chapter 401, Florida Statutes, and the work plan, Attachment VII.

C. METHOD OF PAYMENT:

1. This is a cost reimbursement contract. The department agrees to reimburse the provider for a total amount not to exceed \$7,066.00, per line item budget, Attachment VI, subject to the availability of funds.

2. The provider shall submit monthly reimbursement requests to the department accompanied by signed invoices. The invoices must clearly indicate the service or product delivered, date delivered, date paid, item cost, total cost, condition or quality, and identification of the person receiving the service or product.

3. The provider shall submit monthly reimbursement requests using the format provided, Attachment III (may be duplicated), in accordance with the approved line item budget, Attachment VI. Funds paid to the provider according to the terms of this contract must be spent by the provider as detailed in the line item budget, Attachment VI.

4. The provider shall submit invoices for personnel services and fees on a time/rate basis. The invoice must clearly identify by name each individual, a general statement of services provided, the time period covered by the invoice, and the hourly rate times the number of hours worked for each individual. Appropriate timesheets or timelogs must accompany the invoice.

5. The provider must submit the final invoice for payment to the department no later than 45 days after the contract ends or is terminated; if the provider fails to do so, all right to payment is forfeited, and the department will not honor any requests submitted after the aforesaid time period. Any payments due the provider under the terms of this contract may be withheld until all evaluation and financial reports due from the provider, and necessary adjustments thereto, have been approved by the department.

D. SPECIAL PROVISIONS:

1. The provider agrees to implement provisions of this contract in accordance with federal, state, and local laws, and rules, regulations, and policies that pertain to emergency medical services.

2. The provider assures that County Award funds will not be used to fulfill any matching grant program requirements. Except as provided by state and federal statute, a matching requirement may not be met by costs supported by another state, federal or other governmental agency contract or grant. No costs or third-party in-kind contributions may count towards satisfying a matching requirement of a department contract if they are used to satisfy a matching requirement of another state contract or federal grant.

3. The provider agrees to have an annual financial and compliance audit performed by an independent auditor as specified in Attachment IV. This audit is not required for "For Profit" organizations.

4. The provider agrees to submit a written report to the department, within 45 days after the contract ends or is terminated, describing the degree to which these contractual services have improved and expanded prehospital EMS.

5. Communications Activities and Equipment.

a. The provider agrees that all communications activities and equipment shall be approved by the State of Florida, Department of General Services, Division of Communications as required by section 401.024, Florida Statutes. The department further requires that such approval be in writing.

b. The approval referred to in the preceding paragraph, must be dated after the date the contract was executed and prior to the purchase of the requested activities or equipment. This approval is required in addition to any previous Division of Communications conceptual review, approval, or recommendation dated prior to the date the contract was executed. Any costs for communications activities and equipment which do not receive this written approval shall be disallowed.

6. Vehicles.

If the project includes the purchase of a ground emergency transport or response vehicle, the provider agrees to submit a written report to the department, within 45 days after the contract ends or is terminated. The report shall include the following information regarding vehicles purchased under this contract: number of emergency and nonemergency responses; total mileage accrued; number of days in service; number of days out of service; and mean response time (measured from the time an EMT dispatcher is notified until the crew arrives on scene) for emergency calls.

7. Equipment.

If the project includes purchase of medical or rescue equipment, the provider agrees to submit a written report to the department, within 45 days after the contract ends or is terminated. The report shall include the number of individual instances in which defibrillators and power rescue tools were utilized.

8. Community Lay Education.

If the project includes community lay education activities or services, the provider agrees to provide the department, in addition to quarterly reports, class rosters indicating: course title; beginning and ending dates; total class hours; name and social security number of participants; and, indication of participants who successfully complete the course.

9. Professional Education.

If the project involves professional education activities or services, the provider agrees to provide the department, in addition to quarterly reports, a syllabus of training activities, and class rosters indicating: title of activity; beginning and ending dates; name and signature of provider's medical director; name and signature of presenter; total class hours; name and state certification number of all participants; and, an indication of those individuals successfully completing the training.

10. Research and Evaluation.

If the project involves research or evaluation the provider agrees that all research and evaluation activities will comply with U.S. Department of Health and Human Services Regulations for Protection of Human Subjects (45 CFR, as amended) regarding the protection of human research subjects.

11. Nonexpendable Property.

Both Parties Agree that:

a. The provider shall have title to all nonexpendable property purchased under this contract. The provider shall clearly document any assignment of ownership or usage of nonexpendable property.

b. The provider shall be responsible for the proper insurance, licensing, permitting and maintenance of nonexpendable property purchased under this contract.

c. Nonexpendable property purchased under this contract shall be used solely for improving and expanding prehospital emergency medical services.

12. Matching Grants Funds.

Both Parties Agree that:

a. The provider shall designate a separate account into which the EMS matching grant award monies are to be deposited for this contract.

b. All matching grant funds shall be used solely for activities and services as described in the provider's EMS matching grants RFP which is on file at the State of Florida, Department of Health and Rehabilitative Services, Office of EMS, Tallahassee, Florida 32399-0700.

c. Any disallowed matching grant funds which remain in the provider's account at the end of the contract period, shall be returned to the department within 45 days after the contract ends or is terminated.

d. No change in the budget for any line item, or the addition or deletion of line items will be made without the written prior approval of the department's contract manager and the Central Financial Services Contract Administration Office. The provider shall revise the appropriate line items and submit justification for the change to the department using the Contract Budget Revision Request, Attachment V. Any expenditures made without this approval will be disallowed.

e. Exclusive of personnel salaries and fringe benefits categories, the provider is not restricted to staying within the line item amounts reflected in the budget. However, the provider must stay within the total combined amount budgeted for all other categories. The provider shall be solely responsible for any amount reflected in the budget which is in excess of the amount specified in Section II. A. of the core contract.

f. No budget change can be made which will increase the budgeted salary line item for any provider staff person, unless such an increase was projected in the original contract budget, without prior approval of the department's contract manager and Central Financial Support Services Contract Administration Office. The provider will revise the appropriate line items and submit justification for the change to the department using the Contract Budget Revision Request, Attachment V. Any salary or fringe benefit increase made by the provider without an approved line item budget revision will be disallowed.

13. Reports and Documentation:

The provider agrees to submit to the department one original and one copy of the Program Performance Report, Attachment II. The required deadlines for providing the department with a written Program Performance Report are as follow:

a. February 29, 1988 for the period November 1, 1987 through January 31, 1988;

b. May 31, 1988 for the period February 1, 1988 through April 30, 1988;

c. August 31, 1988 for the period May 1, 1988 through July 31, 1988;

d. November 30, 1988 for the period August 1, 1988 through October 31, 1988.

14. Any scientific or other report written about this project will contain a proper credit statement that system funding for this project, in whole or part, whichever the case may be, was provided through the Florida Department of Health and Rehabilitative Services, Office of Emergency Medical Services.

15. As specified in Attachment I, Section C.2., bills for fees and other compensation for services or expenses will be submitted by the provider in detail sufficient for a proper pre-audit and post-audit thereof.

16. If applicable, bills for any travel expenses must be submitted by the provider in accordance with section 112.061, Florida Statutes, (F.S.). The department may establish rates lower than the maximum provided in section 112.061, F.S.

17. Units of deliverables including reports, findings and drafts which must be received and accepted by the contract manager prior to payment as specified in Attachment I, Section D.13.

18. The criteria and final date by which such criteria must be met for completion of this contract are specified in Section III. A.2. on page 4 of the core contract.

19. A complete copy of the executed contract with all attachments must be on file with the person responsible for the administration of the contract, specifically the authorized person identified on page 5, Section III.C., of the core contract.

20. The provider certifies that the cash and in-kind match required by the provision of the RFP will be available and in direct support of the project as proposed in this contract and its attachments. The provider's failure to complete the terms of this contract due to insufficient cash or in-kind match will result in the termination of this contract for cause.

DEPARTMENT OF HEALTH & REHABILITATIVE SERVICES
PROGRAM PERFORMANCE REPORT

PROVIDER/Name/Address

CONTRACT # _____

Dates Covered
By this Report

Submit 1 Original + 1 Copy to:

Department of Health and Rehabilitative
Services, Office of Emergency
Medical Services
1317 Winewood Boulevard
Tallahassee, Florida 32399-0700

Proposed Objectives

Objectives Achieved

II

Proposed Actions

Actions Achieved

I certify the above report is a true and correct reflection of this period's activities and services, which are allowable and directly related to the above referenced contract.

Date _____

Date _____

Signature of Provider's Authorized
Official

Signature of HRS Contract Manager

ATTACHMENT II

DEPARTMENT OF HEALTH & REHABILITATIVE SERVICES
EXPENDITURE REPORT

PROVIDER/Name/Address

CONTRACT # _____

Dates Covered
By this Report

Submit 1 Original + 1 Copy to:

Department of Health and Rehabilitative
Services, Office of Emergency
Medical Services
1317 Winewood Boulevard
Tallahassee, Florida 32399-0700

APPROVED LINE ITEMS	BEGINNING	REVISED	EXPENDITURES		CONTRACT
	CONTRACT	CONTRACT	THIS	EXPENDITURES	
	BUDGET	BUDGET	REPORT	YEAR-TO-DATE	BALANCE

Sub-Totals This Page

DEPARTMENT OF HEALTH & REHABILITATIVE SERVICES
EXPENDITURE REPORT

PROVIDER/Name/Address _____

CONTRACT # _____

Dates Covered
By this Report _____

Submit 1 Original + 1 Copy to:

Department of Health and Rehabilitative
Services, Office of Emergency
Medical Services
1317 Winewood Boulevard
Tallahassee, Florida 32399-0700

APPROVED LINE ITEMS	BEGINNING CONTRACT BUDGET	REVISED CONTRACT BUDGET	EXPENDITURES THIS REPORT	EXPENDITURES YEAR-TO-DATE	CONTRACT BALANCE
---------------------	---------------------------------	-------------------------------	--------------------------------	------------------------------	---------------------

13

Attachment III continued

TOTAL THIS REPORT _____
 TOTAL TO BE REIMBURSED THIS REPORT _____

I certify the above report is a true and correct reflection of this period's activities and services, which are allowable and directly related to this above referenced contract.

Date _____ Signature of Provider's Authorized Official _____

Date _____ Signature of HRS Contract Manager _____ Approved _____ Disapproved _____

Financial and Compliance Audits

This attachment is applicable if the provider is a state or local government, university, hospital or other nonprofit entity. It shall not apply if the total of all funds received during the provider's fiscal year from contracts with the department is less than \$25,000.

The provider agrees to have an annual financial and compliance audit performed in accordance with Standards for Audit of Governmental Organizations, Programs, Activities, and Functions developed by the Comptroller General of the United States, dated February 27, 1981 (also referred to as the "yellow book"). State and local governments shall comply with Office of Management and Budget (OMB) Circular A-128, "Audits of State and Local Governments". Universities, hospitals and other nonprofit providers shall comply with OMB Circular A-110, "Grants and Agreements with Institutions of Higher Education, Hospitals, and Other Nonprofit Organizations". Audits shall cover the entire organization for the organization's fiscal year, and shall be performed by state or local government auditors or certified public accountants who meet the independence standards specified in the the yellow book.

The provider shall ensure that audit workpapers and reports are retained for a minimum of five years from the date of the audit report, unless the provider is notified in writing by the department to extend the retention period. The provider shall also ensure that audit workpapers are made available upon request to the department or its designee.

The scope of Standards for Audit of Governmental Organizations, Programs, Activities, and Functions (the "yellow book") includes (1) financial and compliance, (2) economy and efficiency and (3) program results. For purposes of this attachment, the scope of audits performed should include only financial and compliance.

Copies of the audit report shall be submitted to the Office of Audit and Quality Control Services, Audit Services Administrator, Building 3, Room 219, 1317 Winewood Boulevard, Tallahassee, Florida 32399-0700 and to the contract manager for the department within 120 days after the end of the provider's fiscal year unless otherwise required by Florida statutes. If a management letter or any other reports or correspondence relating to the audit findings or recommendations are issued in connection with the audit, copies shall accompany the audit report.

ATTACHMENT V
CONTRACT BUDGET REVISION REQUEST

CONTRACT # _____

Name of Provider

REQUESTED EFFECTIVE DATE OF THIS AMOUNT _____

APPROVED CATEGORY/LINE ITEMS	CURRENT BUDGET	REQUEST * CHANGES	PROPOSED NEW BUDGET
------------------------------	-------------------	----------------------	------------------------

GRAND TOTAL

Request by _____ Date _____

Approved by HRS Contract Manager _____ Date _____

Approved by HRS Contract Administrator _____ Date _____
(ASCAF)

*Justifications for changes may be written on the reverse of this Request or on a separate sheet of paper.

LINE ITEM BUDGET

ATTACHMENT VI

FINANCIAL INFORMATION

Budget Section

Line Item	% Time	Proposer		State	
		Cash Match	In-Kind Match	Grant Funds	Total Cost
<u>Salaries</u>					
Project Coordinator Salary	20% for six months		1,490		1,490
Fringe Benefits			298		298
<u>Expenses</u>					
Duplication - copy instructional materials and other items			40		40
Postage - for bid procurement and data obtainment			20		20
Advertising - to obtain bids for equipment			100		100
Site visit travel			100		100
<u>Equipment</u>					
Hydraulic extrication equipment		3,034		6,566	9,600
Hand tools - as specified in, or related to, Chapter 10D-66, Florida Administrative Code		500		500	1,000
Training (approx. 50 persons, 16 hours of instruction each)			1,485		1,485
<u>Total</u>		3,534	3,533	7,066	14,133

ATTACHMENT VII
WORK PLAN

WORK PLAN

Section 1: Project Area (check only the one area for which this project applies).

Section 2: Objectives are specific quantifiable statements identifying activities and services whose completion serves to address the stated need.

Section 3: Actions are the processes that enable completion of the specific objective.

Section 4: Time frames provide limits within which the activities, services, objectives, and actions are initiated and completed and may be stated as "appropriate" dates or times.

Section 1: Communication Project Professional Education Project

Community Lay Education Project

Ground Emergency Medical/Rescue Equipment
 Transportation Project
 Vehicle Project

Evaluation Project Research Project

Section 2 Measurable Objectives	Section 3 Actions	Section 4 Time Frames
<p>19</p> <p>Identify a model vehicle extrication program for the Yulee, Fla. EMS area.</p>	<p>Site visits to other agencies. Review of related literature. Analyzation of available data. Development of model program concept.</p>	<p>Complete, two months after contract starts</p>
<p>Establishment of an initial and an ongoing vehicle extrication training program for the Yulee area.</p>	<p>Identify resource base (if paid, volunteer, combination, etc.) Ascertain present skill levels, if any, of resources. Establish guidelines and standards for training for incountry recertification.</p>	<p>Complete, five months after contract starts</p>
<p>Identify and procure needed extrication equipment.</p>	<p>Identify special equipment needed. Initiate bid process. Take delivery on equipment.</p>	<p>Complete, six months after contract starts</p>
<p>Train approximately 50 volunteers and professional staff; approximately 16 hours of instruction each.</p>	<p>Develop course materials. Schedule and hold courses.</p>	<p>Complete, eight months after contract starts</p>