



FY17

PSAP GRANT PROGRAM APPLICATION





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HOW TO APPLY/DEADLINE

The grant application is available and accessible from VITA ISP's website (<http://www.vita.virginia.gov/isp/default.aspx?id=8578>). Upon completion of the application, it is to be submitted to your Regional Coordinator. Any supporting documentation must also be submitted along with the application, including mandatory budgets for projects (if applicable).

After the close of the grant application cycle, a Grant ID and email receipt notification will be sent to the e-mail address listed on the application received.

All funding requests must be submitted using the grant application. Technical assistance is available from VITA's Public Safety Communications (PSC) staff throughout the grant process. The FY17 PSAP Grant Application Cycle starts July 1, 2015 and concludes on September 30, 2015 at 5:00 pm.

ALL APPLICABLE SECTIONS MUST BE COMPLETED IN ITS ENTIRETY OR THE APPLICATION WILL BE CONSIDERED INCOMPLETE AND NOT ACCEPTED FOR CONSIDERATION.



FY17 PSAP GRANT APPLICATION

PROJECT TITLE

QA NICE RECORDER

GRANT APPLICANT PROFILE/PROJECT CONTACT

PSAP/HOST PSAP NAME: Orange County Emergency Communications Center

CONTACT TITLE: E-9-1-1 Director

CONTACT FIRST NAME: Nicola

CONTACT LAST NAME: Tidey

ADDRESS 1: 112 W Main St

ADDRESS 2: PO BOX 111

CITY: Orange

ZIP CODE: 22960

CONTACT EMAIL: ntidey@orangecountyva.gov

CONTACT PHONE NUMBER: 540-661-5433

CONTACT MOBILE NUMBER: 540-729-8189

CONTACT FAX NUMBER: 2T

REGIONAL COORDINATOR: Amy Ozeki

HOST PSAP AND PARTICIPATING PSAPS/LOCALITIES

GRANT TYPE

Individual PSAP

Shared Services



TIER

- Out of Service
- Technically Outdated*
- Not Applicable
- Non-Vendor Supported*
- x Strengthen

If technically outdated or non-vendor supported, application MUST include age and/or version of hardware/software.

VERSION: _____ # YEARS of HARDWARE/SOFTWARE: _____

PRIORITY/PROJECT FOCUS VOICE RECORDER/LOGGING

If "Other" selected, please specify: 2T

FINANCIAL DATA

Amount Requested: \$ 10,000

Total Project Cost: \$ 10,000

STATEMENT OF NEED

This statement should reference the relationship to the current funding priorities established by the Grant Committee and include evidence of any financial need, along with additional information on the impact on operational services; consequences of not receiving funding; inclusion of project in a long-term or a strategic plan; and local sustainability:



Recorders are critical components of a QA Program as they record dispatch functions in real time. APCO and NENA established the ANSI Standard 1.107.1-2015 standard for the establishment of a Quality Assurance and Quality Improvement Program for Public Safety Answering Points. Quality Assurance is a critical component to the daily operations of any 9-1-1 Center. The standard clearly outlines that necessity of effective QA Programs, “The duties and responsibilities of those who serve our communities by accepting and processing emergency calls from the public have grown exponentially over recent years. The industry, as a whole, is challenged by the type and nature of the calls received. Factors that affect the quality of service received are the heavy workload, constant changes within the PSAP, changes in technology, as well as customer expectations. Additionally, there is a lack of standardized methods to provide quality assurance and effective feedback to the telecommunicator. The heavy workload coupled in many cases with the constant change of the environment, technology and customer expectations and the lack of standardized methods to evaluate service delivery. Critical focus must be maintained to ensure a high standard of performance is delivered each and every time through phone calls and radio transmissions.” QA programs are also supported by the Commonwealth and identified as a goal in the statewide 9-1-1 Comprehensive Plan as an initiative of “Goal 5 Protect The Reliability and Security of the 9-1-1 system”. Recognizing the important of implementing and sustaining a functioning QA program, the Orange County E-9-1-1 Center currently implements a QA program and is a fully accredited EMD Agency. If this project is not funded Orange County E-9-1-1 Center will be unable to measure EMD compliance scores and not be able to meet the objectives of maintaining our accredited EMD program. Most importantly, our citizens and staff will be adversely impacted because it will be unknown if EMD protocols were followed correctly.









Describe how the grant will be maintained and supported in the future, if applicable.

This project is a onetime purchase. Recorder maintenance is a recurring cost included in the operational budget.

COMPREHENSIVE PROJECT DESCRIPTION

Identify the longevity or sustainability of the project.

The goal of this project is to match pace with the Commonwealth as they continue their work with the NG-9-1-1 Feasibility study and work to meet the goals set forth by Statewide 9-1-1 Comprehensive Plan. Additionally, Orange County will continue to work to ensure compliance with the objectives of the VA OEMS EMD Accreditation program.



Describe how this project supports the Virginia Statewide Comprehensive 9-1-1 Plan.

QA programs are identified as a goal in the Commonwealths Statewide 9-1-1 Comprehensive Plan under Goal 5-Protect the reliability and security of the 9-1-1 system, “ Adopt a quality assurance/quality improvement (QA/QI) and monitoring program to document and report the effectiveness of baseline level service and capabilities criteria.”

The NICE Inform Recorder was designed and developed exclusively for public safety to address the needs of PSAPs. Quality assessments are now available for the entire incident, as opposed to call-by-call evaluations. Personnel are evaluated using consistent parameters and scoring, Supports CALEA Accreditation with Inform Quality Assurance’s cohesive automated performance. The abilities of the Inform Reporter align with the goal of assisting the Commonwealth to establish QA/QI programs.

As noted above, the Orange County E-9-1-1 Center is already an accredited EMD Agency and QA is a necessary part of the accreditation process.

SHARED SERVICES (if applicable)



The relationship of the project to the participating PSAPs:

2T

Intended collaborative efforts:

2T

Resource sharing:

2T



How does the project impact the operational or strategic plans of the participating agencies:

2T

Provide a thorough, concise, and complete description of the project, including an outline of the goals and objectives, implementation strategy, and a work plan.

2T

**PROJECT TIMELINE FOR
SHARED SERVICES & INDIVIDUAL PSAP APPLICATIONS:**

For each applicable phase of the project, indicate the estimated completion date. Sample activities for each phase are included.

PROJECT PHASE	ESTIMATED COMPLETION DATE
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<p><input checked="" type="checkbox"/> INITIATION (Project approved by appropriate stakeholders)</p> <p>Sample activities: project concept is documented, local board or governing authority approval or endorsement is received, PSAP grant application is filed, local budgets are obtained, appropriated grant funds are approved, and budgetary estimates are obtained</p>	<p>07 / 01/2016</p>
<p><input checked="" type="checkbox"/> DESIGN/PLANNING (Project, system, or solution requirements are developed)</p> <p>Sample activities: requirements are documented, components to be purchased are identified, and general design is documented</p>	<p>08/01/2016</p>
<p><input checked="" type="checkbox"/> ACQUISITION (Selected system or solution is procured)</p> <p>Sample activities: RFP (or other bid related processes) are drafted, proposals are evaluated, contract is signed, purchase orders are issued, and quotes are obtained</p>	<p>12/01/2016</p>
<p><input checked="" type="checkbox"/> IMPLEMENTATION (Selected system or solution is configured and installed)</p> <p>Sample activities: purchased components are delivered and installed and training is performed</p>	<p>03/01/2017</p>
<p><input checked="" type="checkbox"/> TESTING/COMPLETION (Selected system or solution is tested and put in production)</p> <p>Sample activities: performance of system/solution is validated and system/solution goes "live"</p>	<p>06/01/2017</p>



BUDGET AND BUDGET NARRATIVE

List the planned expenditures to be made with grant funds. (NOTE: In lieu of a line item breakdown, an itemized cost schedule or detailed vendor prepared quote may be submitted as an attachment. However, budgetary quotes received from a particular vendor(s) during the application process do not commit the PSAP to use that vendor(s) once the grant is awarded.) Briefly explain the reason for each requested budget item and provide the basis for its cost. In addition, if contingency cost has been added, please identify the amount.

Upon research of adding QA software to the recorder this will be a onetime purchase of \$10,000.

A 10% contingency has been added in to the cost of this project.

EVALUATION



How will the project be evaluated and measured for achievement and success:

The project will be measured in the same way a 9-1-1 call for service is received. It will be reviewed via our QA guidelines and emergency requests for aid will be objectively critiqued to ensure that our call process times are meeting objective and measurable benchmarks as defined by Orange County.

The project will also be reviewed to ensure that it is meeting the guidelines of the Virginia Statewide Comprehensive 9-1-1 Plan.



CONSOLIDATION (Primary or Secondary) - (complete only if applicable)

How would a consolidation take place and provide improved service:

2T

How should it be organized and staffed:

2T

What services should it perform:

2T



How should policies be made and changed:

2T

How should it be funded:

2T

What communication changes or improvements should be made in order to better support operations:

2T