

LFIR # 1639

	nonrecurring amoun	t per year.	No No Iieu of state funding.					
(уууу-уу)								
	Recurring	Nonrecurring	у прогорналоги					
	Recurring	Nonrecurring	Appropriation "					
	Amo		Specific Appropriation #	Vetoed				
8. Has this project p			No	Vateril				
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	s for Fiscal Year 202	22-2023	1,328,874	100%				
Local Other			0 328,874	0% 25%				
, ,	e amount of this reque	est)	0	0%				
Federal			0	0%				
Matching Funds								
	Requested (from ques	stion #6)	1,000,000	75%				
Type of Funding			Amount	Percentage				
Fixed Capital Outla Total State Funds 7. Total Project Cost	Requested	-2023 (includin	ng matching funds ava	1,000,000 ilable for this proje	ect)			
Operations			1,000,000					
Type of Funding			Amo	unt				
6. Amount of the Nor	nrecurring Request f	or Fiscal Year	2022-2023					
5. State Agency to re State Agency cont	<u>-</u>	ids Divisio	on of Emergency Manag	ement				
	· · · · · ·	ala Bi iii	of Cuseuman - 84					
throughout not only management response support organization response team and for team deployment assist and respond	r Broward County, but onse including comma ons throughout the sta I portable field hospita ont. Broward Health cu to medical crises, tre expand Broward Healt	the State of Flound logistics, clir te. B-MAT will in tl, trauma and tr rrently works wi ating victims of	respond to and assist worlda as a whole. B-MAT nical triage and care plan nclude the creation and riage staff training, and the local, state, and internatural, biological, manoperations by providing	will provide comprending, and emergen implementation of a development of prational emergency made, and terror-re	ehensive incident cy medical response to n emergency medical policies and procedures operations networks to lated disasters. The B-			
4. Project/Program D	·	 \						
3. Date of Request	11/10/2021							
2. Senate Sponsor	Lauren Book							
1. Project Title	Broward Medical	Aleit Team						



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10. H	as the	entity	requesting	this p	oroject	received	any f	ederal	assistance	related	to the	e COVII)-19 pa	ndemic?
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If yes, indicate the amount of funds received and what the funds were used for.

Yes, Broward Health received federal assistance related to the COVID-19 from both direct federal grants and Provider Relief Funding. Grant funds from the CARES Act in the amount of \$6,174,767 were used to increase service delivery capacity during the COVID-19 pandemic. Additionally, Broward Health received \$78,627,812.27 in Provider Relief Funding to assist in covering unfunded costs related to treating patients with COVID-19.

11. Details on how the requested state funds will be expended

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits	Admin costs will cover 30% of the salary and benefits of the Manager of Emergency Preparedness to implement and administer the B-MAT project.	37,750
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/ Other		0
Consultants/Contracted Services/Study		0
Operational Costs: Other		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/ Other	Expenses to include a portable field hospital (\$500,000), trailer for the field hospital (\$100,000), transport vehicle (\$60,000), portable generators (\$50,000), MasCache DQE units to care for up to 1,000 patients during a crisis event (\$225,000), training in FEMA crisis response best practices (\$20,000), uniforms for B-MAT staff (\$2,250), and education and outreach supplies to inform the community of B-MAT practices and response (\$5,000).	962,250
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering		0
Total State Funds Requested (m	ust equal total from question #6)	1,000,000

12. Program Performance

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

B-MAT is needed to support state-wide crisis response efforts, regardless of federal disaster declaration, ensuring hospital systems may divert less-critical cases to field care locations and treat those needing a higher level of care within the hospitals' four walls. The purpose of the proposed project is to create an emergency medical response team deployable within 24 hours to any location within the State of Florida. The goal of B-MAT will be to build, recruit, train, and deploy a multidisciplinary team of clinicians and emergency medical specialists ready to respond to a crisis requiring medical services, as quickly as possible. Funds requested will be used to build, recruit, and train the team. Matching funds will fund clinician time to participate in the team during crisis response.

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



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To meet the intended purpose of these funds, B-MAT will provide the following services:

- comprehensive incident management response;
- command logistics;
- clinical triage and care planning;
- emergency medical response;
- training of emergency medical professionals; and
- outreach and education for community stakeholders.
- c. What direct services will be provided to citizens by the appropriation project?

Citizens experiencing a medical crisis will be triaged and navigated, have their care coordinated, cared for, and referred to additional health services or a higher level of care as necessary, when served by B-MAT during crisis response. B-MAT may respond to incidents like hurricanes and other natural disasters, terror attacks, and/or man-made disasters, managing the incidents response, triaging citizens, and ensuring they receive an appropriate level of care as quickly as possible.

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

The target population are those experiencing crisis or needing immediate emergency assistance. B-MAT will deploy to any location throughout the state needing emergent medical care for citizens.

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

Impact will be tracked using the following outcomes:

- Number of emergency medical personnel trained for B-MAT participation.
- Number of emergencies/crises responded to.
- Number of emergencies where B-MAT provides logistical response and support.
- Number of citizens provided medical care.
- Number of regions B-MAT travels to for crisis incident response.
- 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?

Standard contract penalties are sufficient.

13. The owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.

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N/A			
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14.	Requestor Contact	Informati	ion						
	a. First Name	Alex		Last Name	Fernandez				
	b. Organization	North Broward Hospital District d/b/a Broward Health							
	c. E-mail Address	amfernandez@browardhealth.org							
	d. Phone Number	(954)473	(954)473-7483 Ext .						
15.	15. Recipient Contact Information								
	a. Organization North Broward Hospital District d/b/a Broward Health								
	b. Municipality and County Broward								
	c. Organization Ty	ре							
	□For Profit Entity								
	☑Non Profit 501(c	c)(3)							
	□Non Profit 501(c	c)(4)							
	□Local Entity								
	□University or Co	ollege							
	□Other (please sp	ecify)							
	d. First Name	Kelly		Last Name	Hearne				
	e. E-mail Address	khearne@browardhealth.org							
	f. Phone Number								
16.	16. Lobbyist Contact Information								
	a. Name	Kelly C. I	Mallette						
	b. Firm Name	Ronald L	. Book PA						
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	d. Phone Number	(305)935-1866							