

LFIR # 1686

. Project Title	University of Miami - Medical Training and Simulation Laboratory
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2. Senate Sponsor Bryan Avila

3. Date of Request 10/31/2023

4. Project/Program Description

The University of Miami Medical Training and Simulation Laboratory (MTSL) has been an important asset to the State of Florida through its development and dissemination of state-of-the-art lifesaving training programs in prehospital response, emergency medicine, and surgery for medical, nursing, allied healthcare and 1st responders. The MTSL accomplishes this through the development and use of web-based and mobile multimedia learning systems and simulation technology. The specific goals of this project are to: 1) Create and disseminate advanced prehospital training programs for Florida's first responders; 2) Develop patient simulation training scenarios to improve the hands-on advanced life-saving skills that are learned and practiced without placing real patients at risk. These programs will focus on: 1) response to active shooter hostile events; 2) response to natural disasters (hurricanes, pandemics); 3) community paramedicine for public health and primary healthcare.

5. State Agency to receive requested funds

Department of Education

State Agency contacted? Yes

6. Amount of the Nonrecurring Request for Fiscal Year 2024-2025

Type of Funding	Amount	
Operations	2,500,000	
Fixed Capital Outlay	0	
Total State Funds Requested	2,500,000	

7. Total Project Cost for Fiscal Year 2024-2025 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	2,500,000	24%
Matching Funds		
Federal	1,000,000	9%
State (excluding the amount of this request)	3,500,000	32%
Local	300,000	3%
Other	3,500,000	32%
Total Project Costs for Fiscal Year 2024-2025	10,800,000	100%

8. Has this project previously received state funding? Yes

Fiscal Year	Amount		Specific	Vetoed
(уууу-уу)	Recurring	Nonrecurring	Appropriation #	
022-23	3,500,000	1,000,000	56	No

9. Is future funding likely to be requested?

Yes

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a. If yes, indicate nonrecurring amount per year.

b. Describe the source of funding that can be used in lieu of state funding.

Local

20



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

No

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

Complete questions 11 and 12 for Fixed Capital Outlay Projects

11. Status of Construction

O Planning

a. What is the current phase of the project?

🔘 Planning	🔘 Design	Construction

b. Is the project "shovel ready" (i.e permitted)?

O Design

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

12. List 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.

🔘 N/A

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		
Salary and Benefits	Direct and organize curricula and training programs. Oversee operations and course logistics. Prepare training equipment, classrooms, and simulation settings. Provide training and evaluate learners' knowledge and skills.	1,625,000
Expense/Equipment/Travel/Supplies/ Other	Patient simulation training systems. Medical procedural task trainers. Consumable supplies.	625,000
Consultants/Contracted Services/Study	Contracted services to support tele-training throughout Florida, including remote and rural geographical regions.	250,000
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering		0
Total State Funds Requested (m	ust equal total from question #6)	2,500,000

14. Program Performance

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



The goals are to: 1) Create and disseminate advanced prehospital training programs for Florida's first responders; 2) Develop patient simulation training scenarios to improve the hands-on advanced life-saving skills that are learned and practiced without placing real patients at risk. These programs will focus on: 1) response to active shooter hostile events; 2) response to natural disasters (hurricanes, pandemics); 3) community paramedicine for public health and primary healthcare.

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

Advanced, lifesaving, critical skills for first responders (law enforcement / fire rescue / EMS) to respond to active shooter hostile events and natural disasters (hurricane). Advanced public health and preventive health services skills for fire rescue / EMS to serve as community paramedic.

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

These training programs focus on advanced lifesaving skills and recommended best practices for the pre-hospital management of active shooter/assailant events, natural disasters (hurricanes) and public health and preventive health services for all populations.

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

All Florida residents who are at risk of active shooter/assailant hostile events, and natural disasters (hurricanes), or who required need for community paramedicine services.

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

Improvement of knowledge and skills in the response to active shooter/assailant hostile events, natural disasters (hurricanes) and pre-hospital community and public healthcare and services. These will be measured through surveys of 1st responders (law enforcement / EMS); simulation scenarios, and examinations to assess knowledge and skills.

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?

Subject to the penalties put forth by the Florida Department of Education Gen. Assurances, Terms & Conditions, for Participation in Federal & State Programs.

15. Requester Contact Information

a. First Name	Barry	Last Name	Issenberg
b. Organization	University of Miami		
c. E-mail Address	bissenbe@miami.edu		
d. Phone Number	(305)243-6491	Ext.	

16. Recipient Contact Information

a. Organization	University of Miami	
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b. Municipality and County Miami-Dade

c. Organization Type

□For Profit Entity

□Non Profit 501(c)(3)

□Non Profit 501(c)(4)

□Local Entity



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Other (please specify)

d. First Name	Barry	Last Name	Issenberg
e. E-mail Address	bissenbe@miami.edu		
f. Phone Number	(305)243-6491		

17. Lobbyist Contact Information

a. Name	Scott L. Ross
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