

LFIR # 3133

1. Project Title	NCH Healthcare System: Syste	m Operations Center				
2. Senate Sponsor	Kathleen Passidomo					
3. Date of Request	01/20/2023					
4. Project/Program D	escription					
create a system tha agencies, NCH has	on with Collier County Emergency to twould be mutually beneficial to concern granted the ability to join the total in the concern granted to build a centralized consoc.)	mmunity partners. Throug Collier County Public Saf	gh agreement with t ety radio system. N	the above-mentioned ICH, with support from		
5. State Agency to re	ceive requested funds Depart	artment of Health				
State Agency conta	acted? Yes					
6. Amount of the Non	recurring Request for Fiscal Yea	r 2023-2024				
Type of Funding		Amo	unt			
Operations			0			
Fixed Capital Outlay	/		1,005,561			
<b>Total State Funds</b>	Requested		1,005,561			
7. Total Project Cost f	or Fiscal Year 2023-2024 (includ	ing matching funds avai	lable for this proj	ect)		
Type of Funding		Amount	Percentage			
Total State Funds R	equested (from question #6)	1,005,561	88%			
Matching Funds						
Federal		0	0%	1		
State (excluding the	amount of this request)	0	0%	1		
Local		138,368	12%	1		
Other		0	0%			
<b>Total Project Costs</b>	s for Fiscal Year 2023-2024	1,143,929	100%			
8. Has this project pr	eviously received state funding?	No				
Fiscal Year	Amount	Specific	Vetoed			
(уууу-уу)	Recurring Nonrecurring	Appropriation #				
9. Is future funding li	kely to be requested?	No				
a. If yes, indicate n	onrecurring amount per year.					
b. Describe the so	urce of funding that can be used	in lieu of state funding.				
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	uesting this project received any	y federal assistance rela	ted to the COVID-	19 pandemic?		
Yes						



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

2020: \$32,389,049; 2021 \$29,995,500; 2022: \$7,693,947 During the pandemic, the federal aid included funds to reimburse NCH for staffing increases, supplies, conversion of care spaces for pandemic care (negative pressure rooms), and other responses to the evolving standard of care.

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

on

a.	What	is	the	current	phase	of	the	proj	ject?
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O Diagning O Design O Construction

Planning Design Construction	
b. Is the project "shovel ready" (i.e permitted)?	Yes
c. What is the estimated start date of construction?	July 1, 2023
d. What is the estimated completion date of construction?	December 31, 2023

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.

NCH Healthcare System, as a non-profit enterprise, owns the property that will house the System Operations Center. NCH is a locally-governed, locally-controlled private non-profit advanced community health care system and is not owned by any other corporate entity.

#### 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		0
Expense/Equipment/Travel/Supplies/ Other	The majority of the requested funds would be used for purchase of equipment (technology, furniture, cameras, and associated items) to complete an integrated operations center.	855,561
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering	The funds would also fund minor renovation of existing space to facilitate the functionality of the proposed NCH System Operations Center. Certain floor structures are necessary for wiring along with modifications to accommodate the technology.	150,000
Total State Funds Requested (must equal total from question #6)		

#### 14. Program Performance



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

NCH Healthcare System seeks to modernize its System Operations Center to better integrate communications across NCH properties and with county & city emergency response & law enforcement agencies. This will improve the response efficiency of emergencies and also better coordinate the daily communications across NCH facilities, often separated by greater than 15 miles.

NCH has letters of support for this project from the Collier County Sheriff's Office, City of Naples Fire Rescue. NCH will continue to participate in the County EOC operations when called upon to staff the main County EOC during emergencies.

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

NCH CCTV will be accessible to Collier County Sheriff's Office during emergencies. Internal "code" alerts, switchboard operator, security, access, monitoring of remote facilities (generators during hurricanes as an example), and other emergency operation functions will be coordinated through this facility.

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

Increased efficiency, improved coordination, and quicker response to routine and emergency situations will enhance patient safety, employee safety, and the safety of first responders & law enforcement related to NCH operations.

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

NCH serves patients and families primarily from SW Florida, though tourists and other vistors to our region will be better protected while interacting with our health care system.

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

NCH tracks the number of calls for assistance annually; both internal security and external (CCSO/ Collier Cty Fire Rescue). Once the NCH System Operations Center is functional, we can share details on interactions with local first responder, law enforcement, and emergency management agencies.

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?

NCH will refund all appropriated funds should we fail to complete the project.

15. Requester Co	entact Information					
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b. Organizatio	NCH Healthcare Syste	NCH Healthcare System, Inc.				
c. E-mail Add	ress matthew.holliday@nch	matthew.holliday@nchmd.org				
d. Phone Nur	nber (239)826-7864	Ext.				
16. Recipient Contact Information						
a. Organizatio	NCH Healthcare Syste	em, Inc.				
b. Municipality and County Collier						
c. Organizatio	on Type					
□For Profit I	Entity					
☑Non Profit	501(c)(3)					



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□Non Profit 501(c	□Non Profit 501(c)(4)						
□Local Entity	□Local Entity						
□University or Co	□University or College						
□Other (please sp	pecify)						
d. First Name	Jennifer	Last Name	Smith				
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17. Lobbyist Contact Information							
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