

BREVARD COUNTY FIRE RESCUE
EMERGENCY MEDICAL SERVICES
2024 GRANT APPLICATION



THE EMS TRUST GRANT PROGRAM APPLICATION AND GUIDELINES.
(PLEASE READ THE GUIDELINES PRIOR TO FILLING OUT THE APPLICATION.)

INTRODUCTION

The Brevard County EMS Trust grant is a REIMBURSEMENT GRANT, with NO MATCH REQUIRED.

This grant program provides emergency medical service providers, first responder organizations, and other emergency medical service related organizations with funds for projects to acquire, repair, improve, or upgrade emergency medical service systems or equipment, and fund specialized or previously unfunded education programs that benefit the EMS community.

An applicant must meet specific eligibility requirements to be awarded a grant. Applicants certify that they meet all requirements in this application and guidelines when they sign and submit the application to the Brevard County Fire/Rescue Department.

You may submit any number of applications, and there is no limit on the amount of funds you may request. The only limitation is the amount of funds available for award.

Do not place more than one project in an application.

ELIGIBILITY

Any organization that is related to or is a member of the EMS community is eligible for an award.

This includes:

- Licensed EMS providers
- First Responder organizations
- Emergency Departments of Brevard County
- EMS training centers, academic institutions and other pre-hospital EMS service providers.
- **NOTE: Any agency that has an open prior year grant award will not be eligible to apply for current year grant funding.**

MANDATORY CRITERIA REVIEW:

Applications shall be reviewed to determine that the applicant meets the following criteria:

1. The grant applicant's organization is based in Brevard County.
2. The application demonstrates that the grant will be used to improve and expand pre-hospital Emergency Medical Services.
3. The application is completed and signed.
4. The application does not exceed the number of pages listed in the application packet.
(Letters of support may be submitted and will not be counted as pages.)

BREVARD COUNTY FIRE/RESCUE
EMS GRANT APPLICATION

(Complete all items unless instructed differently within the application)

1. Organization Name and Primary Mission/Function: <u>Brevard County Fire Rescue</u>	
2. Grant Signer: (The applicant signatory who has authority to sign contracts, grants, and other legal documents. This individual must also sign this application)	
Name: <u>Orlando Dominguez</u>	
Position Title: <u>EMS Assistant Chief</u>	
Address: <u>1040 Florida Ave S</u>	
City: <u>Rockledge</u>	County: <u>Brevard</u>
State: <u>FL</u>	Zip Code: <u>32955</u>
Telephone: <u>321-863-3734</u>	Fax Number: <u>321-633-2057</u>
E-Mail Address: <u>Orlando.Dominguez@brevardfl.gov</u>	

3. Contact Person: (The individual with direct knowledge of the project on a day-to-day basis and responsibility for the implementation of the grant activities. This person may sign project reports and may request project changes. The signer and the contact person may be the same. Additionally, the Contact Person will sign the Reimbursement request/Expenditure Report)	
Name: <u>Stephanie Cotton</u>	
Position Title: <u>Special Projects Coordinator II</u>	
Address: <u>1040 Florida Ave S</u>	
City: <u>Rockledge</u>	County: <u>Brevard</u>
State: <u>FL</u>	Zip Code: <u>32955</u>
Telephone: <u>321-505-7246</u>	Fax Number: <u>321-633-2057</u>
E-mail Address: <u>Stephanie.Cotton@brevardfl.gov</u>	

4. Type of Service (check one):	
Licensed EMS provider <input checked="" type="checkbox"/>	First Responder Organization <input type="checkbox"/> Emergency Department <input type="checkbox"/>
EMS Training Center <input type="checkbox"/>	EMS Academic Institution <input type="checkbox"/>
Other pre-hospital EMS service provider <input type="checkbox"/>	
Other (specify) _____	

Medical Director of licensed EMS provider:

If this project is approved, I agree by signing below that I will affirm my authority and responsibility for the use of all medical equipment and/or the provision of all continuing EMS education in this project. **[No signature is needed if medical equipment and professional EMS education are not in this project.]**

Signature: _____

Date: _____

Print/Type: Name of Director _____

FL Med. Lic. No. _____

Note: All organizations that are not licensed EMS providers must obtain the signature of the medical director of the licensed EMS provider responsible for EMS services in their area of operation for projects that involve medical equipment and/or continuing EMS education.

6. Certification: My signature below certifies the following:

I am aware that any omissions, falsifications, misstatements, or misrepresentations in this application may disqualify me for this grant and, if funded, may be grounds for termination at a later date. I understand that any information I give may be investigated as allowed by law. I certify to the best of my knowledge and belief all of the statements contained herein and on any attachments are true, correct, complete, and made in good faith.

I agree that any and all information submitted in this application will become a public document pursuant to Section 119.07, F.S. when received by Brevard County. This includes material which the applicant might consider to be confidential or a trade secret. Any claim of confidentiality is waived by the applicant upon submission of this application pursuant to Section 119.07, F.S., effective after opening of the application by Brevard County.

I accept in the best interests of the State, Brevard County reserves the right to reject or revise any and all grant proposals or waive any minor irregularity or technicality in proposals received, and can exercise that right.

The budget shall not exceed the department approved funds for those activities identified in the notification letter. The applicant cannot propose to use grant funds to supplant or replace any county or other governmental funding source.

Acceptance of Terms and Conditions: If awarded a grant, I certify that I will comply with all of the above and also accept the attached grant terms and conditions and acknowledge this by signing below.

Signature of Authorized Grant Signer: _____
(Individual Identified in Item 2 or 3)

MM / DD / YY: _____

7. **Justification Summary:** Maximum of three pages. Must be double spaced, single side paper. Summary must address all topics listed below.

A) Problem description (Provide a narrative of the problem or need);

B) Present situation (Describe how this grant will impact/improve the current conditions or need);

C) The proposed solution (what will be purchased with the grant funds);

D) The geographic area that will benefit from the grant (Provide a narrative description of the geographic area);

E) The proposed time frames (Provide a list of the time frame(s) for completing this project);

F) Data Sources (Provide a complete list of data source(s) you cite);

G) Statement attesting that the proposal is not a duplication of a previous effort (This project must not duplicate another grant project awarded previously).

Complete only item 8 or 9. Select the one that pertains to the preceding Justification Summary.

8. **Explain how this grant will positively affect provider service or directly affect the ability to improve emergency service.** This may include vehicles, medical and rescue equipment, communications and navigation equipment, dispatch services, and or other items or training that improve on-site treatment, rescue or benefit victims at an emergency scene. For this section you may use up to two pages, double spaced, single side of paper.

9. **Explain how this grant will improve training projects** this includes training of all types for the public, first responders, law enforcement personnel, EMS and other healthcare staff. For this section you may use up to two pages, double spaced, single side of paper.

A) How many people do you estimate will successfully complete this training in the 12 months after the grant is awarded.

B) If this training is designed to have an impact on injuries, deaths, or other emergency victim data, provide comparison data for the 12 months prior to the training and project what improvement would be realized if awarded the grant.

Brevard County Fire Rescue BUDGET/REIMBURSEMENT REQUEST EXPENDITURE REPORT

Name of Grantee: _____

Time Period Covered: Award Date: _____ Ending Date: _____

Total Amount Requested \$ _____

Major Line Items:	TOTAL
Amount Requested: (Approved Budget Expenditure by Major Line Items)	\$
TOTAL REQUESTED/BUDGETED EXPENDITURES	\$

Actual Expenditures (by Major Line Items)	\$
TOTAL EXPENDITURES (TO BE REIMBURSED)	\$

I certify the above reports are true and correct. Expenditures were made only for items allowed by the grant.

 Signature of Contact Person

 Date

RECORDS RETENTION

The grantee shall ensure that grant documentation are made available to the department, or its designee, upon request, **for a period of five (5) years**, unless modified in writing by Brevard County.

DISALLOWED EXPENDITURES

No expenditures are allowable as grant costs unless they are clearly specified as a line item in the approved grant budget including approved change requests, or are identified in an existing line item. Any disallowed EMS trust fund grant expenditure will not be reimbursed by the County and any disallowed funds received shall be returned to Brevard County by the grantee within 30 days of Brevard County Fire Rescue's notification. All costs for disallowed items are the responsibility of the grantee.

SUPLANTING FUNDS

The applicant cannot propose to use grant funds to supplant or replace any county or other governmental funding source.

EXPENDITURE REPORTS

Each grantee shall submit an expenditure report to Brevard County Fire Rescue's Grant Administrator for reimbursement purposes. The report shall include, at a minimum, copies of any training records, a narrative of the activities completed along with copies of any invoices, cancelled checks or like documentation of expenditures. The report shall be submitted by the due date listed in the award notice.

GRANT SIGNATURE

The authorized individual listed on page one of the application shall sign each original application. If this is not possible before the due date a letter shall be submitted to the department explaining why and when the signed application shall be received. The Brevard County Fire Rescue's Grant Administrator shall receive the signed application no later than the "additional data submission date" listed in the award notice.

RECORDS

The grantee shall maintain financial and other documents related to the grant to support all revenue and expenditures. A file shall be maintained by the grantee, which includes the "Notice of Grant Award", a copy of the application, the department agreement with the approved budget included and a copy of any approved changes.

REIMBURSEMENT REQUIREMENTS

All expenditures shall be completed within 180 days of the award. Within 90 days of the completion date a Reimbursement request shall be submitted to the **BREVARD COUNTY FIRE RESCUE DEPARTMENT GRANT ADMINISTRATOR**. The report shall at a minimum contain a narrative describing the activities conducted including any bid or purchasing process and a copy of all invoices, and canceled checks relating to the purchase of any equipment and supplies. If the activity funded was for training a list of all individuals receiving the training shall be submitted along with the dates, times and location of the training. If the grant was for training to be obtained by staff then a copy of all invoices and payment documents for the training shall also be submitted.

EXPENDITURES

No expenditures may be incurred prior to the grant starting date or after the grant ending date.

Completed applications should be mailed to the following address:

*Brevard County Fire Rescue
ATTN: Cindy Paulin, Grant Administrator
Timothy J. Mills Fire Rescue Center
1040 S. Florida Avenue
Rockledge, Florida 32955*

Cotton, Stephanie

From: Dominguez, Orlando J
Sent: Friday, November 15, 2024 2:52 PM
To: Dominguez, Orlando J; Cotton, Stephanie
Subject: FW: Brevard County Fire Rescue EMS Trust Award Question

Best wishes,
-Orlando

Orlando J. Dominguez, Jr., RPM
Assistant Chief of EMS Operations
Brevard County Fire Rescue
O: [321-633-2056](tel:321-633-2056)
F: [321-633-2057](tel:321-633-2057)
www.brevardfl.gov/firerescue
www.twitter.com/BCFREMS

Nearly all men can stand adversity, but if you want to test a man's character,
give him power.

- Abraham Lincoln

From: Dominguez, Orlando J <orlando.dominguez@brevardfl.gov>
Sent: Friday, January 26, 2024 9:41 AM
To: zzzz Feedback, DEPCS_EMS <EMS@flhealth.gov>; Mathew, Teresa <Teresa.Mathew@flhealth.gov>
Cc: Dominguez, Orlando J <orlando.dominguez@brevardfl.gov>
Subject: RE: Brevard County Fire Rescue EMS Trust Award Question

Hi Teresa:

I hope all is well and thank you so much. I appreciate you and I hope you have a great weekend.

-Orlando

Best wishes,
-Orlando

Orlando J. Dominguez, Jr., RPM
Assistant Chief of EMS Operations
Brevard County Fire Rescue
O: [321-633-2056](tel:321-633-2056)
F: [321-633-2057](tel:321-633-2057)
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- Abraham Lincoln

From: zzzz Feedback, DEPCS_EMS <EMS@flhealth.gov>
Sent: Thursday, January 25, 2024 10:50 AM
To: Dominguez, Orlando J <orlando.dominguez@brevardfl.gov>; Mathew, Teresa <Teresa.Mathew@flhealth.gov>
Cc: zzzz Feedback, DEPCS_EMS <EMS@flhealth.gov>
Subject: RE: Brevard County Fire Rescue EMS Trust Award Question

[EXTERNAL EMAIL] DO NOT CLICK links or attachments unless you recognize the sender and know the content is safe.

Good morning, Orlando,

And thank you for reaching out. My apologies for my delay in getting back to you. This should not be a problem. The statute covering the county grants is very broad in scope, leaving a lot of flexibility for counties to spend these funds in the way they deem most useful to their local EMS providers. Continuing to use these funds for PulsePoint should not be a problem.

If you have any other questions or concerns, please do not hesitate to ask.

Best regards,

Teresa Mathew



Teresa Mathew, MA, MSW, MPA

Strategic Planning and Grants Manager
Bureau of Emergency Medical Oversight
Division of Emergency Preparedness and Community Support
Florida Department of Health
4052 Bald Cypress Way, Bin #A22
Tallahassee, FL 32399
(850) 558-9542
E-mail: Teresa.Mathew@FLHealth.gov

Mission: To protect, promote & improve the health of all people in Florida through integrated state, county, & community efforts.

Please note: Florida has a very broad public records law. Most written communications to or from state officials regarding state business are public records available to the public and media on request. Your e-mail communications may therefore be subject to public disclosure

Award dollars to support the following alerting system as part of our cardiac arrest resuscitation program county-wide. This would be an on-going initiative that would not only benefit Brevard County Fire Rescue and residents in the unincorporated areas of the county, but all the local municipal first responder agencies and residents as well. Please let me know if this possible and I can't thank you enough for your consideration. I hope you have a great week and thanks again.

-Orlando

Best wishes,
-Orlando

Orlando J. Dominguez, Jr., RPM
Assistant Chief of EMS Operations
Brevard County Fire Rescue
O: 321-633-2056
F: 321-633-2057
www.brevardfl.gov/firerescue
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- Abraham Lincoln

7. Justification Summary

A: (Problem Description) In the event of an emergency where every minute matters and the prompt availability of resources means the difference between life and death, we want to ensure that the citizens of Brevard County are protected as well as equipped to aid others in need. Brevard County covers over 1000 square miles and is home to a population of approximately 643,979. The area also serves as a popular travel destination to more than 3 million people annually.

B: (Present Situation) In Brevard County, we are presented with a problem. An expedient response of resources trained in early Cardiopulmonary Resuscitation (CPR) and access to Automated External Defibrillators (AEDs) for our residents and visitors can be challenging. A need has been identified to have a system in place that will provide lifesaving intervention prior to emergency personnel arriving on scene. It has been proven that early interventions such as CPR and use of an AED have had a positive outcome on patients suffering from sudden cardiac arrest.

C: (The Proposed Solution) Traditionally, the ability to defibrillate rested solely in the hands of emergency medical personnel, first responders or with the hopes of having a bystander trained in CPR/AED present. Survival depends on the Emergency Medical Services system being contacted and arriving quickly. Unfortunately, a quick EMS response isn't always possible. The most efficient EMS system will have delays from traffic, secured buildings, gated communities, large buildings complexes and high-rises.

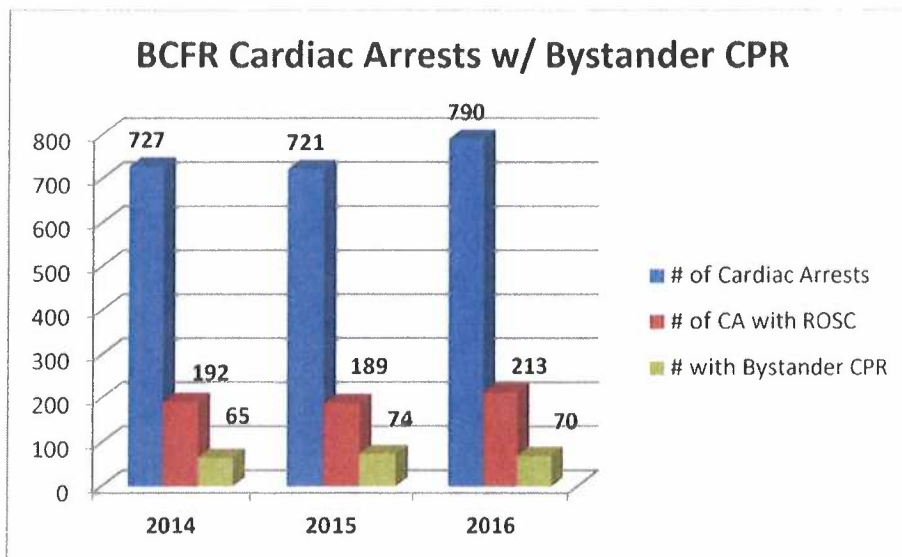
With the community AED program PulsePoint and a combined effort of working with local municipalities and the residents of Brevard County, we will be able to increase the survival rates of cardiac arrest victims. This result will be achieved by increasing citizen awareness of cardiac events and informing residents of public access defibrillator (AED) locations through real-time mapping of nearby devices. In addition, the program also encompasses a registration of trained CPR/AED bystanders who, by the activation of a smartphone app, would respond if nearby to the public location of the cardiac arrest. The goal is to initiate bystander CPR as soon as possible, before EMS arrives on the scene, giving the patient the best chance of survival. This system has already saved countless lives and is installed in hundreds of jurisdictions worldwide (PulsePoint 2017).

D: (Geographic Area) 24.9% of the county's permanent residents are over the age of 65 and, according to the Centers for Disease Control and Prevention, are statistically at a greater risk for heart disease, heart attack, or sudden cardiac arrest. Each year over 300,000 Americans suffer an out-of-hospital cardiac arrest. Most cardiac arrests are due to abnormal heart rhythms called arrhythmias. Ventricular Fibrillation (VF) is the most common arrhythmia that causes cardiac arrest. VF is a condition in which the heart's electrical impulses suddenly become chaotic, often without warning. This condition causes the heart's pumping action to abruptly stop. Defibrillation is the only known therapy for VF.

The victim's chances of survival falls 7-10% every minute without bystander CPR until defibrillation. The goal of the PulsePoint AED program is to deliver defibrillation to a sudden cardiac arrest victim within 3 to 5 minutes. Nationally, only about a third of cardiac arrest

victims receive bystander CPR, and AEDs are used only 3% of the time when needed and available (Centers for Disease Control and Prevention 2011).

With sudden cardiac arrests being the leading cause of death in the United States, more and more communities throughout the country are training individuals in CPR and the proper use of an AED. In the United States, nearly 2.3 million people every year take the Red Cross First Aid/CPR/AED training (The American National Red Cross 2017). In 2016, Brevard County had a total of 790 cardiac arrest cases prior to EMS arriving, 213 of which had a Return of Spontaneous Circulation (ROSC). Out of those 213 patients who regained spontaneous circulation, 65 had received CPR from a bystander prior to EMS arrival.



According to the American Heart Association, CPR that is performed within the first few minutes of a cardiac arrest can double or triple a person's chance of survival (AHA 2017). Most individuals trained in CPR and AED want to assist in saving another person's life; they just need the right tools to do so. Our goal is to enhance the frequency of early onset resuscitation efforts

in order to increase the chance of survival through public awareness and access to a system that allows them to respond to sudden cardiac arrests nearby. As you can see with the statistics of Brevard County, there is room for us as a department as well as a community to benefit dramatically by having a program in place that would provide the initiation of CPR within seconds of a cardiac arrest through the application PulsePoint.

E: (Proposed Time Frame) With an aggressive execution, Brevard county would like to continue have the PulsePoint program without disruption in service for the next 5 years.

F (Data Source)

American Heart Association

http://cpr.heart.org/AHA/ECC/CPRAAndECC/AboutCPRFirstAid/CPRFactsAndStats/UCM_475748_CPR-Facts-and-Stats.jsp

The American National Red Cross

<http://www.redcross.org/news/article/CPRAED-Training-Saves-Lives>

Out-of-Hospital Cardiac Arrest Surveillance --- Cardiac Arrest Registry to Enhance Survival (CARES), United States, October 1, 2005--December 31, 2010

<http://www.cdc.gov/mmwr/preview/mmwrhtml/ss6008a1.htm>

PulsePoint App

<http://www.pulsepoint.org>

G) Statement attesting that the proposal is not a duplication of a previous effort (This project must not duplicate another grant project awarded previously):

Brevard County Fire Rescue has received approval from the Florida Department of Health to allow the continuation of this program through the use of EMS Trust Award Grant Funds. (Please see attached email and supporting documentation)

8. Explain how this grant will positively affect provider service or directly affect the ability to improve emergency service.

According to AHA, early CPR and application of the AED are two of the five essential links to the chain of survival. By utilizing PulsePoint as part of the emergency response system, it would allow for those citizens trained in CPR/AED and who are part of the BCFR PulsePoint registry to receive the notification of a cardiac arrest at the same time as first responders. The notification is received through the smartphone app from the 911 dispatch center and, once notified, the bystander will acknowledge their availability to assist with the cardiac arrest victim. The smartphone app not only provides information as to the location of the victim, but also allows the bystander to notify the dispatch center they are responding and then the app will display a map of the nearest AED locations.

The particular program for consideration is PulsePoint. Because the implementation has already taken place, the request is for the future EMS Trust Award dollars in the amount of \$18,000 annually for subscription fees for the next 5 years. This is the same model used when the county served as the project coordinator to equip all EMS departments and hospitals with the capability of transmitting and receiving STEMI ECG's approximately 15 years ago.

In the EMS Trust Award Grant application, we have included a sole source letter from the company stating that PulsePoint is the only provider of this type of community AED mobile application. There is also a letter from Brevard County Fire Rescue's Medical Director Dr. John McPherson discussing his strong endorsement of the product and how he believes it will be highly beneficial not only for our department, but the municipality agencies in our community as well. Our IT department's Systems Administer Matthew Wolfe has confirmed that the PulsePoint software is compatible with our E911 CAD software program for emergency response which we have shown through his email exchange with PulsePoint Vice President Kraig Erickson.

Overall, Brevard County Fire Rescue would like to thank you for your consideration of implementing the PulsePoint system into our community which will truly benefit Brevard County citizens, guests, employees and municipalities alike.

WESTERN FIRE CHIEFS ASSOCIATION

LEAD. EDUCATE. SUPPORT. PROTECT.

Resolution – PulsePoint Exclusive CPR/AED Platform -04-2022

WHEREAS, *Out-of-hospital cardiac arrest (OHCA) is a time-sensitive, life-threatening emergency that occurs millions of times every year.¹ Data from countries around the world with emergency medical services (EMS) in place suggest a global average of 82.1 EMS-attended OHCA's per 100,000 people per annum. Ten percent (range, 6%–22%) of people who experience OHCA can expect to survive with a favorable neurological outcome.² The probability of survival after OHCA can be markedly increased if immediate cardiopulmonary resuscitation (CPR) is provided and an automated external defibrillator (AED) is used.^{3,4}*

WHEREAS, *The chances of survival from cardiac arrest fall rapidly for every minute that CPR and defibrillation is delayed.⁵⁻⁷ Median response time intervals for professional EMS responders after a call for help are often >6 minutes, even in developed urban settings with optimized EMS.⁸*

WHEREAS, *PulsePoint is a public 501(c)(3) non-profit foundation that builds applications for use by public safety agencies to increase community awareness during critical events such as cardiac arrest. The foundation was formed in 2011 to expand the work initiated by the San Ramon Valley Fire Protection District (CA).*

WHEREAS, *The PulsePoint Respond mobile app notifies trained individuals of the nearby need for CPR. PulsePoint Respond is currently deployed in more than 4,200 communities, including broadly throughout the western states. PulsePoint processes ~800 reported cardiac arrest events each day. PulsePoint also provides specialized mobile apps for professional responders.*

WHEREAS, *PulsePoint provides a hosted AED registry that identifies Automated External Defibrillator locations for use by the public and 9-1-1 telecommunicators during emergency calltaking. PulsePoint has several statewide deployments of its AED registry and recommends hundreds of nearby AEDs each day. As a core part of its mission to improve cardiac arrest survival PulsePoint provides all aspects of the AED registry including its Telecommunicator AED (T-AED) initiative at no cost.*

WHEREAS, *PulsePoint Respond and PulsePoint AED are both FirstNet Certified™ applications.*

WHEREAS, American Heart Association CPR & ECC Guidelines state "Emergency dispatch systems should alert willing bystanders to nearby events that may require CPR or AED use through mobile phone technology (Class 1, LOE B-NR). Notification of lay rescuers via a mobile phone app results in improved bystander response times, higher bystander CPR rates, shorter time to defibrillation, and higher rates of survival to hospital discharge."

WHEREAS, CARES analysis of PulsePoint agencies who were also CARES participants in 2018, 2019, and 2020 showed that PulsePoint communities had better non-traumatic etiology survival rates and better bystander intervention rates. In all three years PulsePoint agencies had higher bystander CPR rates, greater public AED use, and higher overall survival for sudden cardiac arrests that were witnessed and shockable (Utstein).⁹

WHEREAS, PulsePoint's widely deployed real-time emergency dispatch system interface provide a unique, normalized data set with enormous potential for the fire service. PulsePoint has shown a great willingness to share data for public safety use when requested or directly authorized by the associated agency. Current uses of PulsePoint data and APIs include FIRIS, NFORS, and the WCFA Fire Map. In each use case data privacy and permission for use is ensured. The WCFA Data Use Committee provides industry oversight of the use of PulsePoint data.

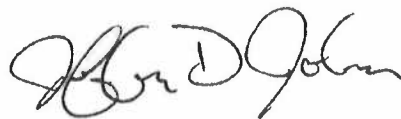
WHEREAS, Multiple CPR/AED-needed notification systems will confuse the public and reduce effectiveness.

NOW THEREFORE WCFA Board of Directors recognizes and supports PulsePoint as
BE IT RESOLVED: the exclusive CPR/AED-needed notification platform for the United States and Canada and recommends its use and requests the adoption of a similar resolution by the IAFC, other Divisions of the IAFC, and other allied associations.

Adopted by the Board of Directors this 23rd Day of August, 2022



Scott Miller, President



Jeffrey Johnson, Executive Director

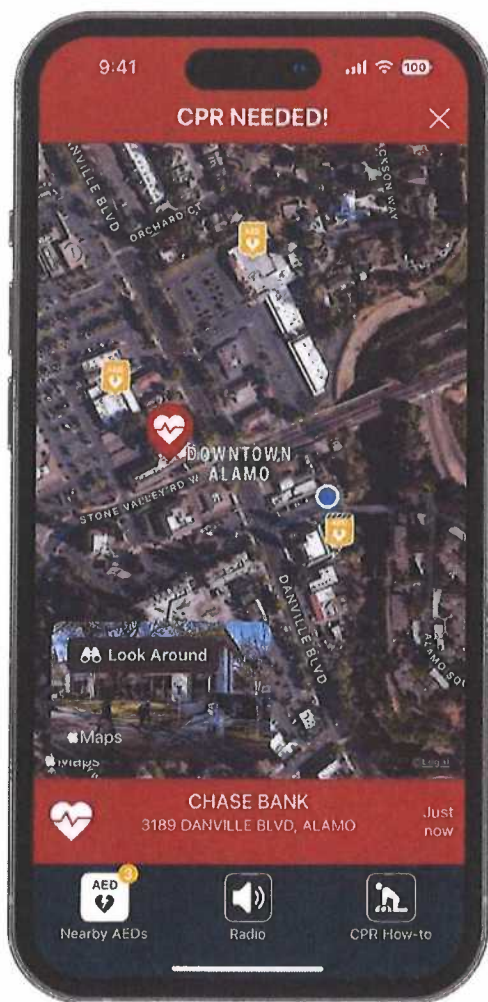
References

- 1. Berdowski J, Berg RA, Tijssen JG, Koster RW. Global incidences of out-of-hospital cardiac arrest and survival rates: systematic review of 67 prospective studies. **Resuscitation**. 2010; 81:1479–1487. doi: 10.1016/j.resuscitation.2010.08.006 [Crossref](#) [Medline](#) [Google Scholar](#)
- 2. Dyson K, Brown SP, May S, Smith K, Koster RW, Beesems SG, Kuisma M, Salo A, Finn J, Sterz F, et al.. International variation in survival after out-of-hospital cardiac arrest: a validation study of the Utstein template. **Resuscitation**. 2019; 138:168–181. doi: 10.1016/j.resuscitation.2019.03.018 [Crossref](#) [Medline](#) [Google Scholar](#)
- 3. Pollack RA, Brown SP, Rea T, Aufderheide T, Barbic D, Buick JE, Christenson J, Idris AH, Jasti J, Kampp M, et al.; ROC Investigators. Impact of bystander automated external defibrillator use on survival and functional outcomes in shockable observed public cardiac arrests. **Circulation**. 2018; 137:2104–2113. doi: 10.1161/CIRCULATIONAHA.117.030700 [Link](#) [Google Scholar](#)
- 4. Weisfeldt ML, Sittani CM, Ornato JP, Rea T, Aufderheide TP, Davis D, Dreyer J, Hess EP, Jui J, Maloney J, et al.; ROC Investigators. Survival after application of automatic external defibrillators before arrival of the emergency medical system: evaluation in the Resuscitation Outcomes Consortium population of 21 million. **J Am Coll Cardiol**. 2010; 55:1713–1720. doi: 10.1016/j.jacc.2009.11.077 [Crossref](#) [Medline](#) [Google Scholar](#)
- 5. Blom MT, Beesems SG, Homma PC, Zijlstra JA, Hulleman M, van Hoeijen DA, Bardai A, Tijssen JG, Tan HL, Koster RW. Improved survival after out-of-hospital cardiac arrest and use of automated external defibrillators. **Circulation**. 2014; 130:1868–1875. doi: 10.1161/CIRCULATIONAHA.114.010905 [Link](#) [Google Scholar](#)
- 6. Drennan IR, Lin S, Thorpe KE, Morrison LJ. The effect of time to defibrillation and targeted temperature management on functional survival after out-of-hospital cardiac arrest. **Resuscitation**. 2014; 85:1623–1628. doi: 10.1016/j.resuscitation.2014.07.010 [Crossref](#) [Medline](#) [Google Scholar](#)
- 7. Hawkes C, Booth S, Ji C, Brace-McDonnell SJ, Whittington A, Mapstone J, Cooke MW, Deakin CD, Gale CP, Fothergill R, et al.; OHCAO Collaborators. Epidemiology and outcomes from out-of-hospital cardiac arrests in England. **Resuscitation**. 2017; 110:133–140. doi: 10.1016/j.resuscitation.2016.10.030 [Crossref](#) [Medline](#) [Google Scholar](#)
- 8. Buick JE, Drennan IR, Scales DC, Brooks SC, Byers A, Cheskes S, Dainty KN, Feldman M, Verbeek PR, Zhan C, et al.; Rescu Investigators. Improving temporal trends in survival and neurological outcomes after out-of-hospital cardiac arrest. **Circ Cardiovasc Qual Outcomes**. 2018; 11:e003561. doi: 10.1161/CIRCOUTCOMES.117.003561 [Link](#) [Google Scholar](#)
- 9. Cardiac Arrest Registry to Enhance Survival (CARES); **PulsePoint Report Utilizing CARES 2018-2020 Data**. Analysis of PulsePoint agencies who were also CARES participants in 2018, 2019, and 2020. **MyCARES**. 2021; [Crossref](#)

PULSEPOINT RESPOND

PulsePoint Respond is a 911-connected mobile app that alerts CPR/AED-trained individuals to someone nearby having a sudden cardiac arrest.

PulsePoint Respond supports multiple responder types, including community members, healthcare professionals, and public safety personnel. Specialized app capabilities are available for professional, on-duty use.



- PulsePoint aims to initiate CPR earlier and more often as well as increase the use of automated external defibrillators (AED), prior to emergency responders arriving on scene.
- PulsePoint is integrated directly into the public safety communications center. When a call taker determines CPR may be needed, an alert is sent to nearby app subscribers simultaneously with the dispatch of emergency responders.
- To promote daily app usefulness and encourage program participation, community users are shown select emergencies occurring in the community and offered notifications of public interest events such as traffic collisions and wildland fires.
- According to the latest AHA guidelines, emergency dispatch systems should alert willing bystanders to nearby events that may require CPR or AED use through mobile phone technology.



Learn more at pulsepoint.org
Download PulsePoint Respond



911 called for victim.



911 center initiates PulsePoint alert.



Nearby PulsePoint subscribers alerted simultaneously with emergency responders.



PulsePoint responders directed to victim location and notified of nearest AEDs.

PulsePoint



RESPONDER TYPES

PulsePoint Respond offers three responder types. Deploying a combination of these types can maximize PulsePoint's community impact.

Public CPR Responders are typically community members trained in CPR and automated external defibrillator (AED) use and willing to assist if an incident occurs near them. These community first responders are only notified of nearby cardiac arrest events occurring in public places.

Registered CPR Responders are agency-invited members of the community with medical or rescue training, such as public safety retirees, CERT members, medical professionals, and residential security staff or residents with special neighborhood responsibilities. These community responders are alerted to all nearby cardiac arrest events, including private residences. With nearly 70% of cardiac arrest events occurring in the home, this difference is significant.

Professional Responders are active public safety employees, typically firefighters, paramedics, and law enforcement officers assigned Professional Responder status by their organization. Typically these employees respond and care for patients in residential settings while on duty. To encourage adoption, professional users are provided with specialized app capabilities for on-duty use. When off-duty, Professional Responders are alerted to all nearby cardiac arrest events in the jurisdiction.

See the comprehensive overview.



PulsePoint AED

PULSEPOINT AED

Next Generation AED Management

PulsePoint AED is a powerful tool to help build and maintain the AED registry in your community. AEDs managed with PulsePoint AED are accessible to emergency dispatchers during cardiac arrest call processing and disclosed to emergency responders, including nearby individuals trained in CPR and AED use.

- Agency-authorized users can edit the complete AED record using their mobile device — no desktop needed.
- Includes business open/closed details based on linked public data sources and support for 24/7 "always available" AEDs.
- Manage and display colocated resources such as Bleeding Control Kits, Naloxone and Epinephrine, including dressing and drug expiration dates.
- PulsePoint AED is integrated with leading emergency medical dispatch protocol systems, including Priority Dispatch ProQA®, PowerPhone Total Response® and APCO IntelliComm®.
- Extensive AED device and consumable information supporting expiration reminders and manufacturer notices.

Community members can also report AED locations on the website, aed.new.



Learn more at pulsepoint.org
Download PulsePoint Respond



AED-NEEDED ALERTS

When a cardiac arrest occurs near a registered AED, subscribers to that device receive an AED-needed alert requesting they deliver the AED to the reported location.

Responsible parties can subscribe to receive AED-needed alerts for their own devices. Other users can request authorization from the responsible party to receive alerts as well.

- Industry-wide support for all AED manufacturers and models.
- Notifications are based on AED proximity to the cardiac event – no personal location sharing.
- Receive AED-needed alerts on your phone, watch, or tablet – and simultaneously across all signed-in devices.
- Are you part of a neighborhood AED program or workplace safety team? Multiple participants can subscribe to a single AED.
- Critical alert support can override the Do Not Disturb setting. Time sensitive and normal alerts can be managed using focus settings.
- View street-level imagery of where the AED is needed, including an interactive 360° daytime panorama of the destination address.
- Tap an AED icon for additional details, including device/cabinet image in the context of its surroundings, full location description, and accessibility information such as access codes and business/location hours.
- Responsible parties can independently conduct testing for individual subscribers.
- Utilizes PulsePoint’s existing network of ECC system integrations.



911 is called to report a person in need.



Emergency communications center confirms possible cardiac arrest.



Subscribers to nearby AEDs alerted simultaneously with emergency responders.



AED is delivered to the incident location.

PulsePoint is a public 501c3 non-profit foundation.



Scan to download PulsePoint AED from the Apple App Store or Google Play.



Learn more at pulsepoint.org



Annual Performance Summary - Previous 12 Months



Community	Bravard County FL	Report Prepared by
Estimated Population	644,000	Kraig Erickson
Soft Launch Month/Year	March , 2018	kraig.erickson@pulsepoint.org
Prepared Month/Year	November , 2024	
Years Live	6.8	
AED Map	https://aedviewer.pulsepoint.org/?agency_id=EMS1236	

By participating in the lifesaving PulsePoint network, you've taken an essential step towards improving response to OHCA (Out of Hospital Cardiac Arrest). This report is designed to provide a snapshot of key performance indicators to help your agency measure the optimization of your PulsePoint implementation and identify potential areas for improvement.

ENGAGEMENT

Achieving the goal of PulsePoint responders routinely beginning CPR and retrieving a nearby AED prior to the arrival of advanced care requires a significant number of local app users. Communities with a high density of app users greatly improve the odds of having at least one responder within the cardiac arrest activation radius.

AEDs with Alert Subscriptions	0
Monthly Active Users	8,133
CPR-enabled Followers	2,518
Registered/Pro Responders	0
Average Responders / Activation - Public	2.7
Average Responders / Activation - Private	0.0

PERFORMANCE

As engagement increases, the overall performance of the PulsePoint system increases. Measuring performance can also uncover opportunities to improve the interface, identify the density of AED's registered, and realize the "network effect" of having neighboring communities using PulsePoint.

Total Annual CPR-Needed Alerts Sent	173	
Early Notification Opportunity	4m 43s	<i>Early Notification Opportunity is the amount of time PulsePoint users were notified of the nearby need for CPR/AED before on-duty Fire/EMS personnel arrived, averaged over the post 30 days.</i>
Public SCA's Processed	127	<i>SCA=Sudden Cardiac Arrest</i>
Public SCA's Activated	64	
Public SCA Activation %	50%	
Private SCA's Processed	559	
Private SCA's Activated	0	<i>Requires Registered and Professional Responders</i>
Private SCA Activation %	0%	
Approved AED's (Goal 1:1,000 people)	321	0.50 per 1,000 people

If your agency participates in the national CARES registry (Cardiac Arrest Registry to Enhance Survival, you can enter your two key summary metrics below to compare your community's bystander intervention rates against the national CARES rates. This information can be found in your CARES Annual Report. More information about CARES can be found here: mycares.net

CARES	PulsePoint Network Average	National Average	Agency Average
Private SCA %	70.5%	70.5%	81%
Bystander CPR Rate	44.7%	41.2%	
Bystander PAD Rate	14.3%	12.2%	

ENGAGEMENT AND PERFORMANCE IMPROVEMENT IDEAS

Create and execute a new community outreach campaign / news release.
 Verify the PulsePoint call feed is robust.
 Adopt / expand Registered/Professional Responders.
 Regionalize and help adjacent communities join the PulsePoint network.

Marketing Resources: <https://www.pulsepoint.org/marketing/>

Contact PulsePoint for assistance: <https://www.pulsepoint.org/support/>

BREVARD COUNTY FIRE RESCUE GRANT COMMITTEE SCORECARD

Criteria	Score				
Problem Description: The agency clearly identifies the problem or need facing the community.	1	2	3	④	5
Benefit to Emergency Victims: The agency clearly describes beneficial impact toward emergency victims, as well as identifying the geographic area that will benefit from the grant funds.	1	2	3	④	5
Needs Based: Has identified a clear need and presents a clear value proposition.	1	2	3	4	⑤
Project Definition: The agency provides clear plan with key milestones and timeframes, specific beneficiaries and performance criteria to measure success.	1	2	3	④	5
Mission: Offers a clearly defined vision that aligns with the intent of the grant award.	1	2	3	④	5
Commitment: A thorough time line that executes the grant project within a 12 month period.	1	2	3	④	5
Outcome for Training Projects: Training will be beneficial to a large subset of EMS providers, including first responders.	1	2	3	④	5
Adverse Consequences: Clearly defines and/or illustrates the consequence(s) of not funding the grant project.	1	2	3	4	⑤
Management Team: Is led by a committed management team with proven ability or potential to execute project.	1	2	3	4	⑤
Budget: Provides a detailed budget that outlines use of granting funds and the complete funding strategy.	1	2	3	④	5
Innovative: Fits current county-wide EMS model.	1	2	3	④	5
Improvement of EMS System: Awarded funds will improve and expand Emergency Medical Services within Brevard county.	1	2	3	4	⑤
Replicable: Model is defined and appears to be easily replicable.	1	2	③	4	5
Justification Summary Provided: Clearly addresses and provides a detailed explanation of bullets (A-H) found on Brevard County EMS Grant Application.	1	2	③	4	5
TOTAL SCORE	58				

Applicant Name: BCFR-1

Grant Request Description: Pulse Point

Reviewer: Cory Richter

Signature: Cory S. Richter

Digitally signed by Cory S. Richter
DN: cn=Cory S. Richter, o, ou, email=crich296@att.net,
c=US
Date: 2024.12.05 17:11:17 -05'00'

BREVARD COUNTY FIRE RESCUE GRANT COMMITTEE SCORECARD

Criteria	Score				
Problem Description: The agency clearly identifies the problem or need facing the community.	1	2	3	4	5
Benefit to Emergency Victims: The agency clearly describes beneficial impact toward emergency victims, as well as identifying the geographic area that will benefit from the grant funds.	1	2	3	4	5
Needs Based: Has identified a clear need and presents a clear value proposition.	1	2	3	4	5
Project Definition: The agency provides clear plan with key milestones and timeframes, specific beneficiaries and performance criteria to measure success.	1	2	3	4	5
Mission: Offers a clearly defined vision that aligns with the intent of the grant award.	1	2	3	4	5
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TOTAL SCORE					

Applicant Name: _____

Grant Request Description: _____

Reviewer: _____

Signature: _____

