LEGISLATIVE FACT SHEET

DATE: 07/21/20	BT or RC No: BT20-106
	(Administration & City Council Bills)
SPONSOR: Emergency Preparednes	es Division
	Department/Division/Agency/Council Member)
Contact for all inquiries and presentations:	Director of Emergency Preparedness
Provide Name:	Steve Woodard
Contact Number:	904-255-3123
Email Address:	Swoodard@coj.net
	cessary? Provide; Who, What, When, Where, How and the Impact.) Council slation and the Administration is responsible for all other legislation.
Year 2020 Assistance to Firefighters Grant Year 2020 Assistance to Firefighters Grant funds for the purchase of Personal Protectire imbursements, to prevent, prepare for, and The Fiscal Year 2020 Assistance to Firefight supplemental funding opportunity under the of three grant programs that constitute the Management Agency's (FEMA) focus on er to fire and fire-related hazards. The AFG-S directly to eligible fire departmentss for critic respond to the COVID-19 public health embedomprehensive set of measures authorized Program supports the goal to Strengthen North AFG-S grant funding will assist the Jacfor PPE purchased for COVID-19 response	nters Grant Program COVID-19 Supplemental (AFG-S) is a Assistance to Firefighters Grant Program (AFG). AFG is one Department of Homeland Security (DHS) Federal Emergency phancing the safety of the public and firefighters with respect Program accomplishes this by providing financial assistance cal Personal Protective Equipment and Supplies needed to be ergency. The AFG-S Program represents part of a by Congress and implemented by DHS. The AFG-S

List the source <u>name</u> and provide Object and Subobject Numbers for each category listed below:

(Name of Fund as it will appear in title	of legis	slation) Fire & Rescue Grants		
Name of Federal Funding Source(s):	From:	11409-122003-331236 US Dept of Homeland Security	Amount:	\$620,723.53
	_	11409-122003-552160-009141 Other Operating Supplies; 11409-122003-552170-009141 Medical		4000 700 50
	То:	Supplies	Amount:	\$620,723.53
Name of State Funding Source(s):	From:		Amount:	
	То:		Amount:	
· · · · · · · · · · · · · · · · · · ·		00111-195003-599100 Reserve for Federal Programs -		
Name of City of Jacksonville Funding	From:	Contingency	Amount: _	\$62,072.35
Source(s):	0.00	11409-122003-552160-009141 Other Operating Supplies; 11409-122003-552170-009141 Medical		
	То:	Supplies	Amount:	\$62,072.35
				*
Name of In-Kind Contribution(s):	From:		Amount: _	
	To:		Amount:	
	Τ			
Name & Number of Bond Account(s):	From:		Amount: _	
	To:		Amount:	

PLAIN LANGUAGE OF APPROPRIATION / FINANCIAL IMPACT / OTHER:

Explain: Where are the funds coming from, going to, how will the funds be used? Does the funding require a match? Is the funding for a specific time frame? Will there be an ongoing maintenance? ... and staffing obligation? Per Chapters 122 & 106 regarding funding of anticipated post-construction operation costs.

(Minimum of 350 words - Maximum of 1 page.)

The funding for this project is from FEMA Fiscal Year 2020 Assistance to Firefighters Grant Program COVID-19 Supplemental (AFG-S). Agreement No. EMW-2020-FG-00255. Funds for the AFG-S grant program are awarded from the Department of Homeland Security (DHS), Federal Emergency Management Agency (FEMA), and Grants Programs Directorate (GPD) to the City of Jacksonville/Jacksonville Fire and Rescue Department.

The period of performance and budget period of this grant is from 07/03/2020 to 07/02/2021. The awarded/approved budget for the AFG-S Grant is \$682,795.88. DHS/FEMA will provide Federal funding in the amount of \$620,723.53. As a condition of this grant, the City of Jacksonville/Jacksonville Fire and Rescue Department is required to contribute non-Federal funds equal to or greater than 10 % of the Federal funds awarded, \$62,072.35 for a total approved budget of \$682,795.88.

The funds will be used to reimburse the City of Jackonsville/Jacksonville Fire and Rescue Department \$194,229.88 for Personal Protective Equipment (PPE) and supplies such as hand sanitizer, sanitzing wipes, surgical type face masks, isolation gowns, eye protection and Vital Oxide Disinfecting Solution purchased for COVID-19 response from January 1, 2020 to March 30, 2020. The remaining budget funds of \$488,566.00 will be utilized to purchase PPE and supplies for future COVID-19 response such as hand sanitizer, surgical type face masks, isolation gowns, eye protection, HEPA filters for BVMs and medical exam gloves.

ACTION ITEMS: Purpose / Check List. If "Yes" please provide detail by attaching justification, and code provisions for each.

ACTION ITEMS: Yes	No	hastification of Consumer than a supplementation and the desired making of
Emergency?	×	Justification of Emergency: If yes, explanation must include detailed nature of emergency.
Federal or State		Explanation: If yes, explanation must include detailed nature of mandate
Mandate?	×	including Statute or Provision.
Fiscal Year Carryover?	х	Note: If yes, note must include explanation of all-year subfund carryover language.
CIP Amendment? Contract / Agreement	X	Attachment: If yes, attach appropriate CIP form(s). Include justification for mid- year amendment. Attachment & Explanation: If yes, attach the Contract / Agreement and name of Department (and contact name) that will provide oversight. Indicate if negotiations are on-going and with whom. Has OGC reviewed / drafted?
		Agreement EMW-2020-FG-00255. DHS/FEMA AFG-S agreement submitted to COJ OGC for review and execution. The Emergency Preparedness Division Director, Steve Woodard, will provide oversight of the award.
Related RC/BT? Waiver of Code?	X	Attachment: If yes, attach appropriate RC/BT form(s). Code Reference: If yes, identify code section(s) in box below and provide
		detailed explanation (including impacts) within white paper.
Code Exception?	x	Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper.
Related Enacted Ordinances?	x	Code Reference: If yes, identify related code section(s) and ordinance reference number in the box below and provide detailed explanation and any changes necessary within white paper.

ACTION ITEMS CONTINUED: Purpose / Check List. If "Yes" please provide detail by attaching justification, and code provisions for each.

ACTION ITEMS: Yes	No	
Continuation of Grant?	x	Explanation: How will the funds be used? Does the funding require a match? Is the funding for a specific time frame and/or multi-year? If multi-year, note year of grant? Are there long-term implications for the General Fund?
		New grant award. The period of performance and budget period of this grant is from 07/03/2020 to 07/02/2021. The awarded/approved budget for the AFG-S Grant is \$682,795.88. DHS/FEMA will provide Federal funding in the amount of \$620,723.53. As a condition of this grant, the City of Jacksonville/Jacksonville Fire and Rescue Department is required to contribute non-Federal funds equal to or greater than 10 % of the Federal funds awarded, \$62,072.35 for a total approved budget of \$682,795.88.
Surplus Property Certification?	х	Attachment: If yes, attach appropriate form(s).
AND MEDICAL CONTROL CO		Explanation: List agencies (including City Council / Auditor) to receive reports
Reporting X Requirements?		and frequency of reports, including when reports are due. Provide Department
		(include contact name and telephone number) responsible for generating During the Period of Performance and prior to the grant's closeout, the recipient is required (semi-annually) to submit two separate reports, January 1, 2021 and June 30, 2021. The required semi-annual reports include a Programmatic Performance Report and Federal Financial Report.
No.	44	2/2/2
Division Chief:	117	(signature)
Prepared By:		Date:
		(signature)

ADMINISTRATIVE TRANSMITTAL

To:	MBRC, c/o Roselyn Chall, Budget Office, St. James Suite 325
Thru:	Leeann Krieg, Director of Intergovernmental Affairs, Office of the Mayor
	(Name, Job Title, Department)
	Phone: 904-255-5015 E-mail: <u>LeeannK@coj.net</u>
From:	Steven Woodard, Director of Emergency Preparedness
	Initiating Department Representative (Name, Job Title, Department)
	Phone: 904-255-3123
Primary	Steven Woodard, Director of Emergency Preparedness
Contact:	(Name, Job Title, Department)
	Phone: 904-255-3123 E-mail: <u>swoodard@coj.net</u>
COUN	CIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL
То:	Peggy Sidman, Office of General Counsel, St. James Suite 480
10.	Phone: 904-630-4647 E-mail: psidman@coj.net
From:	
1 10111.	Initiating Council Member / Independent Agency / Constitutional Officer
	Phone: E-mail:
Primary	Steve Woodard, Director of Emergency Preparedness
Contact:	(Name, Job Title, Department)
	Phone: 904-255-3123 E-mail: swoodard@coj.net
CC:	Leeann Krieg, Director of Intergovernmental Affairs, Office of the Mayor
	904-255-5015 E-mail: LeeannK@coj.net
Legislati	on from Independent Agencies requires a resolution from the Independent Agency Board
approvin	g the legislation.
Independ	dent Agency Action Item: Yes No
i	Boards Action / Resolution? Attachment: If yes, attach appropriate documentation. If no, when is board action scheduled?

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED

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