Fiscal Estimate - 2017 Session

Original Updated	Corrected Sup	pplemental			
LRB Number 17-2305/1	Introduction Number SB-5	j49			
Description dispatcher assisted bystander cardiopulmonary re	esuscitation and making an appropriation				
Fiscal Effect					
Appropriations Reven	ease Existing absorb within agency				
No Local Government Costs Indeterminate 1. ☑ Increase Costs Permissive ☑ Mandatory 2. ☑ Decrease Costs Permissive ☑ Mandatory Permis	saive Mandaton				
Fund Sources Affected Affected Ch. 20 Appropriations GPR FED PRO PRS SEG SEGS					
Agency/Prepared By	Authorized Signature	Date			
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Fiscal Estimate Narratives DMA 12/15/2017

LRB Number	17-2305/1	Introduction Number	SB-549	Estimate Type	Original		
Description							
dispatcher assisted bystander cardiopulmonary resuscitation and making an appropriation							

Assumptions Used in Arriving at Fiscal Estimate

This bill requires all public safety answering points to have either 1. All dispatchers certified in CPR and trained to provide telephonic instruction on administering CPR and to provide continuing education on the telephonic protocols; 2. Transfer calls to a dedicated phone line or another public safety answering point with dispatchers who are trained on the CPR telephonic protocols. Additionally, the bill requires every public safety answering point to conduct ongoing quality assurance of the CPR telephonic protocols and program and that the Department of Military Affairs (DMA) distribute grants to public safety answering points to provide required training in telephonic assistance on administering CPR. The bill allows the DMA to request funding in the 2017-19 biennium and requires the Department to request funding to provide the grants in the 2019-21 biennial budget request.

The fiscal impact of this bill is very complicated. It is unknown exactly how many dispatchers are in Wisconsin that require training. Wisconsin has approximately 109 Public Safety Answering Points (PSAPS) and, it is estimated that each PSAP has an average of 10 dispatchers (1,090 dispatchers). In smaller localities, dispatch stations may be manned by non-dispatchers such as deputies. It is unclear whether the training required by the bill would need to be extended to anyone who could be dispatching emergency calls requiring CPR.

Additionally, the requirement of evidence-based protocols for CPR have been found only in one training program (Emergency Medical Dispatching Course) which covers more than CPR. The cost of that week long training course is \$365 per person (\$398,000). Dispatchers would also be required to be CPR certified which is an additional \$20 per person (\$21,800). Many dispatchers would require overtime to attend the training. It is estimated that 4,000 hours of overtime would be required to train all of the dispatchers at an estimated hourly rate of \$35 per person (\$140,000). Also, after training, each dispatcher station would be required to have instruction cards using the trained protocols. Each set of cards costs \$500 (\$322,500 estimating five dispatch stations at each PSAP) and it is unknown how often they are modified and require a new purchase or updated section. The second year of the program it is estimated that 50% turnover of dispatchers occur (645 dispatchers) which would require \$290,300 for training course costs and dispatcher overtime to attend the training.

The bill requires DMA to develop a grant program for this training. To administer the program the following staffing annually would be needed: 1 FTE Nurse, paramedic or EMT (\$125,900) to be the subject matter expert in CPR and Program Manager, 1 FTE Grants Specialist (\$86,200) to develop, receive and approve grant applications and coordinate training courses, 1 FTE Financial Specialist (\$57,000) to process the grant payments and travel requests of staff, 2 FTE (\$197,900) and 2 LTE Compliance Officers (\$65,000) to monitor compliance with the training protocols by the PSAPS and 1 FTE Information Technology Specialist to run the computer system required for the program. Additional costs to administer the program include administrative overhead (\$30,000) and an IT system to track participants and certifications and compliance efforts (\$150,000 year 1 and \$30,000 annually).

Long-Range Fiscal Implications