

## COMPLETE BUDGET JUSTIFICATION

### West Allis Fire Department (WAFD)

**Total Project Period: 10/1/2021 through 9/30/2024**

**A. Personnel: Total Request: \$452,547**

**Year 1: Overall Salaries and Wages**

#### Senior/Key Personnel

<b>Position Title</b>	<b>Personnel</b>	<b>Effort</b>	<b>Months</b>	<b>Salary Requested*</b>	<b>Fringe Requested</b>	<b>Amount Requested</b>
<i>Principal Investigator</i>	Assistant Chief Jason Schaak	<b>10%</b>	<b>12</b>	\$10,700	\$5,054	\$15,754
<i>Project Coordinator &amp; Mobile Integrated Healthcare (MIH) Provider</i>	Raechel Liska	<b>100%</b>	<b>12</b>	\$96,889	\$33,261	\$130,150
<i>MIH Coordinator (cost-shared)</i>	Deputy Chief Armando Suarez Del Real	<b>20%</b>	<b>12</b>	\$0	\$0	\$0

#### Other Personnel

<i>Lived Experience Peer Support Specialist</i>	TBD	<b>100%</b>	<b>12</b>	\$40,000	\$29,224	\$69,224
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\*WAFD Salaries include a 3% Cost of Living increase across the 3-year time period.

**Year 2: Overall Salaries and Wages**

#### Senior/Key Personnel

<b>Position Title</b>	<b>Personnel</b>	<b>Effort</b>	<b>Months</b>	<b>Salary Requested*</b>	<b>Fringe Requested</b>	<b>Amount Requested</b>
<i>Principal Investigator</i>	Assistant Chief Jason Schaak	<b>10%</b>	<b>12</b>	\$11,021	\$5,205	\$16,226

<b><i>Project Coordinator &amp; Mobile Integrated Healthcare (MIH) Provider</i></b>	Raechel Liska	<b>100%</b>	<b>12</b>	\$99,796	\$34,270	\$134,066
<b><i>MIH Coordinator (cost-shared)</i></b>	Deputy Chief Armando Suarez Del Real	<b>20%</b>	<b>12</b>	\$0	\$0	\$0

**Other Personnel**

<b><i>Peer Support Specialist</i></b>	TBD	<b>100%</b>	<b>12</b>	\$40,000	\$29,224	\$69,224
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**Year 3: Overall Salaries and Wages**

**Senior/Key Personnel**

<b>Position Title</b>	<b>Personnel</b>	<b>Effort</b>	<b>Months</b>	<b>Salary Requested*</b>	<b>Fringe Requested</b>	<b>Amount Requested</b>
<b><i>Principal Investigator</i></b>	Assistant Chief Jason Schaak	<b>10%</b>	<b>12</b>	\$11,352	\$5,362	\$16,714
<b><i>Project Coordinator &amp; Mobile Integrated Healthcare (MIH) Provider</i></b>	Raechel Liska	<b>100%</b>	<b>12</b>	\$102,789	\$35,280	\$138,069
<b><i>MIH Coordinator (cost-shared)</i></b>	Deputy Chief Armando Suarez Del Real	<b>20%</b>	<b>12</b>	\$0	\$0	\$0

**Other Personnel**

<b><i>Peer Support Specialist</i></b>	TBD	<b>100%</b>	<b>12</b>	\$40,000	\$29,224	\$69,224
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The West Allis Fire Department (WAFD) Team is comprised of experts in the science of community paramedic medicine, substance misuse and treatment, mental and behavioral

health and evidence-based preventative and harm-reduction strategies to serve clients across a continuum of needs. All WAFD Mobile Integrated Healthcare (MIH) Team will play an active role in the design and implementation of the program, in-process evaluation and course correction, and dissemination of the program's main findings.

**Jason Schaak, Principal Investigator and Assistant Chief of Community Risk Reduction**

**(10%, Years 1-3.** Assistant Chief Schaak will carry out all activities identified in the attached position description for the Assistant Chief of Community Risk Reduction. In addition, he will oversee the overall program implementation within the West Allis Division of Community Risk Reduction. He will maintain regular communication with and offer administrative support to Deputy Chief Suarez Del Real, the MIH provider and the Peer Specialist.

Assistant Chief Schaak will take the lead on developing the proposed educational module and other learning materials regarding how to integrate MAT promotion into standard practices of first responders. He will work with Dr. Weston and the Office of Emergency Management (OEM) to integrate the module into standard first responder training programs. He will utilize his background in delivering EMS education to support Ms. Liska and the Peer Support Specialist as they deliver the educational module to other first responder programs. He and other MAAP staff will provide ongoing educational consulting and course-correction to first responder programs in the county to ensure fidelity to educational materials.

He will work with Dr. Hernandez-Meier to carry out the first responder buprenorphine induction feasibility portion of the project, including reviewing current policy and scope of practice. He will work with Dr. Hernandez-Meier to develop a rigorous evaluation plan that includes field- and clinically-relevant outcome measures as described in the project narrative. He will work with his team to ensure that evaluation and other outcome data are collected by WAFD staff are complete and accurate. He will work with his MIH team to meet regularly to engage with process evaluation and brainstorm course correction and strategies to increase the efficiency of services provided to community members, including working with MCW Drs. Weston, Owen and Alvarez to ensure program activities are evidence-based and consistent with state-of-the-art literature on community paramedic, prehospital and emergency medicine.

**Armando Suarez Del Real, Co-Investigator & Deputy Chief of the Bureau of Mobile Integrated Healthcare (20% Years 1-3; Cost-shared).** Deputy Chief will carry out all activities identified in the attached position description for the Deputy Chief of Community Risk Reduction. He will Direct the day-to-day activities of the MAAP. He will directly oversee the MIH provider, as well as the Lived Experience Peer Support Specialist. He will work with his team to ensure that WAFD-generated outcome data are collected and delivered to Dr. Hernandez-Meier (Evaluator). In addition, he will assist Assistant Chief Schaak with overall program oversight and integration into the West Allis Mobile Integrated Health Bureau and will assist in the management of program field operations, and service provider training. He will maintain regular communication with all project staff and offer administrative support to Assistant Chief Schaak.

**Raechel Liska, Project Coordinator & Mobile Integrated Healthcare Provider (100%, Years 1-3).**

Raechel Liska, Paramedic Officer and Active Lieutenant of Mobile Integrated Healthcare with the West Allis Fire Department, currently functions as Program Founder, Coordinator, and Manager of the Safety and Abuse elements of the team. She has experience functioning in leadership positions as part of various emergency management organizations since 2017 and experience as part of the Wisconsin Army National Guard for two years starting in 2015. During her time with the West Allis Fire Department, Raechel has been serving to lead improvements in patient outcomes as it relates to improved safety. She holds certifications with the Federal Emergency Management Agency, Blue Card Incident Command, and Crisis Intervention Training. She is also certified as a Community Paramedic. She currently holds a Master of Science Degree in Emergency Management from Jacksonville State University, Bachelor of Arts in Sociology with Global Comparative Emphasis from University of Wisconsin Whitewater, and her Nationally-Registered Paramedic License with Gateway Technical College.

The Project Coordinator and MIH provider will focus on service delivery, including all activities outlined in the attached job description for Lieutenant (Mobile Integrated Healthcare). As Project Coordinator, Raechel and the Peer Support Specialist will travel to municipalities to deliver the first responder training and follow-ups. Raechel will assist Assistant Chief Schaak with collecting process and outcome data related to uptake of the training and MIH practices. Raechel will actively engage in discussion regarding project achievements and how to enhance services provided by the MIH team.

**TBD, Lived Experience Peer Support Specialist (100% Years 1-3.** The Peer Support Specialist will be certified to share their lived experience with clients that will interface with the MIH team. They will travel with the MIH providers to provide their unique experiences to inform the MIH team's service delivery. Particular emphasis will include the challenges, facilitators and barriers of engaging with substance use treatment and harm reduction strategies, as well as navigating the substance treatment system. They will be highly valued members of the program staff and will engage with all discussions of evaluation, modifying service delivery techniques and assessing gaps in service delivery. This individual will provide critical education to other first responder agencies across Suburban Milwaukee County regarding how to integrate individuals with lived experience into day-to-day operations.

**B. Fringe Benefits: \$206,104**

The current fringe benefit rate for WAFD Union Members (MIH Provider) is 34.32% of requested salary. The current fringe benefit rate for non-union represented, salaried city employees (Assistant Chief Schaak) is 47.23% of requested salary. The current fringe benefit rate for employees of the City of West Allis (Peer Counselor) is 73.06% of requested salary.

**C. Travel: Total Request: \$20,470**

**Out-of-State Travel: \$6,790**

**Years 1 & 2: (\$2,748 per year; \$5,496 total)** The PI Assistant Chief Schaak and the MIH provider or other WAFD staff will travel to Washington DC for the two required BJA

Conferences.

Example estimated travel needs per trip:

2 people x \$350 airfare (Milwaukee, WI to DC) = \$700

4 nights GSA lodging (DC) x \$180 night x 2 people = \$1,440

4 days GSA per Diem (DC) x \$76/day x 2 people = \$608

Total per year: \$2,748

**Out-of-State Travel Year 3: (\$1,294)** The PI Assistant Chief Schaak, the MIH provider or other WAFD staff will travel for a presentation at a scientific or other training meeting to discuss the project, learn more about innovative MAT and community first responder approaches and/or disseminate findings. An example may include the National EMS Conference, which is slated for Las Vegas, NV in 2021.

Example estimated travel needs per trip:

Airfare (Milwaukee, WI to Las Vegas) = \$350

4 nights GSA lodging (Las Vegas) x \$180 night = \$720

4 days GSA per Diem (Las Vegas) x \$56/day= \$224

Total: \$1,294

**In-State Travel: \$13,680**

We are budgeting for 12,000 miles of in-county travel for the MIH team to deliver proposed services per year. The City of West Allis compensates agencies at \$0.38/mile. This equates to a total of \$4,560 per year ( $\$4,560 \times 3 = \$13,680$ ).

**D. Equipment: None**

**E. Supplies: Total Request: \$15,589**

Our supplies budget includes general office supplies, technology required to document services, provide referrals and evaluation data. We also budget for opioid harm-reduction materials to be provided to clients who interface with the program. Our supply requests include:

<b>Year 1</b>				
<b>Item(s)</b>			<b>Rate</b>	<b>Cost</b>
General Office Supplies			\$25/mo. x 12 mo.	\$300.00
Postage			\$10/mo. x 12 mo.	\$120.00
iPad Pro			Qty 1 x \$999.99	\$999.99
iPhone 11 Pro			Qty 1 x \$899.99	\$899.99
Fentanyl Test Strips	166	\$1.08	100%	\$179.94
Clean Use Kits	166	\$2.84	100%	\$471.44
Naloxone	166	\$19.99	100%	\$3,318.34
Printing			\$15/mo. X 12 mo.	\$180.00
			<b>Total</b>	<b>\$6,469.70</b>
<b>Year 2</b>				
<b>Item(s)</b>			<b>Rate</b>	<b>Cost</b>
General Office Supplies			\$25/mo. x 48 mo.	\$300.00
Postage			\$10/mo. x 12 mo.	\$120.00
Fentanyl Test Strips	166	\$1.08	100%	\$179.94
Clean Use Kits	166	\$2.84	100%	\$471.44
Naloxone	166	\$19.99	100%	\$3,318.34
Printing			\$15/mo. X 12 mo.	\$180.00
			<b>Total</b>	<b>\$4,569.72</b>
<b>Year 3</b>				
<b>Item(s)</b>			<b>Rate</b>	<b>Cost</b>
General Office Supplies			\$25/mo. x 12 mo.	\$300.00
Postage			\$10/mo. x 12 mo.	\$120.00
Fentanyl Test Strips	166	\$1.08	100%	\$179.94
Clean Use Kits	166	\$2.84	100%	\$471.44
Naloxone	165	\$19.99	100%	\$3,298.35
Printing			\$15/mo. X 12 mo.	\$180.00
			<b>Total</b>	<b>\$4,549.73</b>
				\$15,589.16



**F. Contractual: The Medical College of Wisconsin (MCW)**

**COMPLETE MCW BUDGET JUSTIFICATION**

**Total MCW Project Period: 10/1/2021 through 9/30/2024**

**A. MCW Personnel: Total Request: \$102,580**

**MCW Year 1: Overall Salaries and Wages**

**Senior/Key Personnel**

<b>Position Title</b>	<b>Personnel</b>	<b>Effort</b>	<b>Months</b>	<b>Salary Requested*</b>	<b>Fringe Requested**</b>	<b>Amount Requested</b>
<i>Site PI/Co- Investigator/ Evaluator</i>	Jennifer Hernandez-Meier, PhD, MSW	13.6%	12	\$14,038	\$2,049	\$16,087
<i>Co- Investigator</i>	Benjamin Weston, MD	7%	12	\$15,346	\$2,240	\$17,586
<i>Co- Investigator</i>	Mary Beth Alvarez, MD	1%	12	\$2,192	\$320	\$2,512
<i>Co- Investigator</i>	Julie Owen, MD	1%	12	\$2,192	\$320	\$2,512

**MCW Year 2: Overall Salaries and Wages**

**Senior/Key Personnel**

<b>Position Title</b>	<b>Personnel</b>	<b>Effort</b>	<b>Months</b>	<b>Salary Requested*</b>	<b>Fringe Requested**</b>	<b>Amount Requested</b>
<i>Site PI/Co- Investigator/ Evaluator</i>	Jennifer Hernandez-Meier, PhD, MSW	13.6%	12	\$14,459	\$2,111	\$16,570
<i>Co- Investigator</i>	Benjamin Weston, MD	7%	12	\$15,346	\$2,241	\$17,587
<i>Co- Investigator</i>	Mary Beth Alvarez, MD	1%	12	\$2,192	\$320	\$2,512
<i>Co- Investigator</i>	Julie Owen, MD	1%	12	\$2,192	\$320	\$2,512

MCW Year 3: Overall Salaries and Wages

**Senior/Key Personnel**

<b>Position Title</b>	<b>Personnel</b>	<b>Effort</b>	<b>Months</b>	<b>Salary Requested*</b>	<b>Fringe Requested**</b>	<b>Amount Requested</b>
<i>Site PI/Co-Investigator/Evaluator</i>	Jennifer Hernandez-Meier, PhD, MSW	<b>13.6%</b>	<b>12</b>	\$14,893	\$2,174	\$17,067
<i>Co-Investigator</i>	Benjamin Weston, MD	<b>7%</b>	<b>12</b>	\$15,346	\$2,241	\$17,587
<i>Co-Investigator</i>	Mary Beth Alvarez, MD	<b>1%</b>	<b>12</b>	\$2,192	\$320	\$2,512
<i>Co-Investigator</i>	Julie Owen, MD	<b>1%</b>	<b>12</b>	\$2,192	\$320	\$2,512

\*DOJ's salary cap of \$219,230 (110% of 2021 Federal salary cap of \$199,300) was applied to Drs. Alvarez, Owen, and Weston; Hernandez-Meier's salary include a 3% Cost of Living increase across the 3-year program period.

\*\* MCW Fringe rate: 14.6% for faculty. See Section B below.

The program team is comprised of experts in the science of pain management, substance use disorders, paramedic and ED service delivery, mental and behavioral health and preventative hospital- and community-based programming, within harm-reduction paradigms. All Co-investigators will play an active role in the design and implementation of the program, in-process evaluation and course correction, analysis and interpretation of outcomes, and dissemination of the program's main findings.

**Jennifer Hernandez-Meier, PhD, MSW, Site Principal Investigator, Co-Investigator, Evaluator (13.6% FTE, Years 1-3)** is an Assistant Professor of Emergency Medicine in the School of Medicine at MCW. Dr. Hernandez-Meier received her BS in Psychology and a

Certificate in Criminal Justice from the University of Wisconsin-Madison. She received her Master's in Social Work from the University of Wisconsin-Milwaukee, with specializations in double methods (macro and clinical) and behavioral/physical health. She received her PhD in Social Work from the University of Wisconsin-Milwaukee. As a Research Scientist and Assistant Professor at MCW for 8 years, she is experienced in managing and leading projects in the PI/Program Director role. She has served as PI for two DOJ grants (2014-IJ-CX-0110, 2016-AJ-BX-K042), and is Site PI and Evaluator on a current COSSAP grant with the West Allis Health Department (2018-AR-BX-K106) that aims to investigate the feasibility of translating the Cardiff Model for Violence Prevention to the United States, as well as its utility for addressing the intersection of violence and opioid and substance misuse.

She has received funding for two SAMHSA State Opioid Response (SOR) projects in partnership with the Wisconsin Department of Health, which developed and is now implementing a novel ED-based buprenorphine induction program at the Froedtert Health system that will collaborate with the MAAP team for the proposed project. In addition, Dr. Hernandez-Meier is currently Contact PI on an NIH NINDS HEAL Initiative Early Phase Pain Investigation Clinical Network (EPPIC-Net) grant (1U24NS115679-01; \$889,613). EPPIC-Net will provide a robust and readily accessible infrastructure for carrying out in-depth phenotyping and biomarker studies in patients with specific pain conditions, and the rapid design and performance of high-quality Phase 2 clinical trials to test promising novel therapeutics for pain. MCW serves as the Hub for five spoke clinical trial sites across the country, including Chicago, Texas and Indiana.

Dr. Hernandez-Meier has also overseen and managed all aspects of many research projects, including pre-award activities, IRB, the budget, progress reporting, subcontracting, internal requirements and dissemination activities, including DOJ/BJA grants.

**Duties and Responsibilities:** Dr. Hernandez-Meier will serve as Co-Investigator, Site Principal Investigator and Evaluator of the project. She will focus on overall grant management and administration on the MCW side, including contracting between MCW and WAFD, overseeing the budget, and advising on progress and final reporting to BJA. She will ensure coordination between her current BJA COSSAP grant, and SAMHSA SOR funding for an ED-based buprenorphine program, as well as other local BJA- and federally-funded projects, and the proposed project to maximize access to MAT in Milwaukee County while ensuring that services are not duplicated across projects and programs.

Dr. Hernandez-Meier will take the lead on carrying out Goal #4: Complete a policy analysis to determine barriers and facilitators to first responders initiating buprenorphine at point of patient engagement. She will work with WAFD and Drs. Weston, Owen and Alvarez to review the literature regarding first responder provision of substance use disorder treatment, specifically MAT. She will also review policies and legislation related to current practice and scope of Wisconsin and Milwaukee County for first responders. She will take the lead on identifying barriers and facilitators to first responder provision of substance use disorder treatment, including surveying local first responders to assess demand for first responder ability to provide MAT and perceived barriers and facilitators for first responders engaging with MAT and substance use disorder treatment and outreach more broadly. She will develop

and disseminate policy briefs targeted at relevant audiences and work with the team to develop recommendations for best practice, standing operating protocols, and engage with discussions related to changes in scope of practice if supported by local first responders, and the literature and policy analysis.

Dr. Hernandez-Meier will also serve as the program's Evaluator. She will lead the development and execution of a rigorous evaluation plan that aligns with the goals and objectives of the project, will ensure the fidelity of methods and will lead activities related to the analysis, interpretation and dissemination of evaluation findings. She will secure any required institutional and human subjects approval to carry out the proposed program activities. She will work with Assistant Chief Schaak and the MAAP team to develop an effective plan to receive patient consent and collect relevant evaluation outcomes, including building data collection variables into the customizable software that WAFD already uses for service delivery and abstraction of relevant health outcomes from WAFD software and medical records (e.g., overdose, health care utilization). She will engage in regular meetings with the MAAP team to review and monitor data collection and outcomes and will engage with strategy development to ensure that the project meets or exceeds proposed data collection metrics. She will work with MAAP to disseminate findings at relevant first responder venues, including conferences, journal articles, educational materials and policy briefs.

**Benjamin Weston, MD, Co-Investigator & County EMS Medical Director (7% FTE, Years 1-3)**

Dr. Weston is an Associate Professor in the Department of Emergency Medicine MCW. He serves as Director of Medical Services for the Milwaukee County Office of Emergency Management (OEM), overseeing medical services for the 15 fire departments throughout the county, including West Allis Fire Department and other suburban departments that MAAP will partner with for distribution of first responder education on engaging with substance use disorders. He is the Associate Program Director for the ACGME Emergency Medical Services Fellowship Program. He practices clinically in the emergency department at Froedtert Hospital.

Dr. Weston received his baccalaureate degree at Lawrence University, his medical degree and master of public health from the University of Wisconsin School of Medicine and Public Health and completed his emergency medicine residency at Hennepin County Medical Center.

Dr. Weston is dual board-certified in Emergency Medicine as well as Emergency Medical Services by the American Board of Emergency Medicine after completing his Emergency Medical Services Fellowship at the Medical College of Wisconsin. He previously served as Medical Director for the Kenosha Fire Department.

**Duties and Responsibilities:** As Director of Medical Services for the Milwaukee County OEM, and overseeing the WAFD and all county Departments, Dr. Weston will work with the MAAP to ensure that service delivery is within best clinical practice guidelines and is adequately delivered to clients.

Dr. Weston will co-author the first responder educational package, legal documents, operating guidelines and other necessary materials required for integrating the first responder training into OEM. He will serve a champion of the program at the Milwaukee County level and will ensure that the MAAP team adequately collaborates with any other first responder teams in Milwaukee County—including potentially other COSSAP funded programs—to deliver comprehensive, unduplicated services. For the buprenorphine induction feasibility goal, Dr. Weston will assist Dr. Hernandez-Meier and WAFD with reviewing the literature within current practice and scope of Wisconsin and Milwaukee County. He will review identified policy, barriers and facilitators with the team and develop recommendations for best practice and engage with discussions related to changes in scope of practice if supported by the literature and policy analysis.

**Mary Beth Alvarez, MD, MPH Co-Investigator & Addiction Psychiatrist Consultant (1% FTE; Years 1-3).** Dr. Alvarez is an Assistant Professor of Psychiatry at MCW and the Director of the innovative and expanding Integrated Behavioral Health program at Froedtert Hospital & MCW. As a dual-boarded physician in Psychiatry and Internal Medicine, she brings a comprehensive approach to the way the brain and body interact. She has experience across the lifespan, and work towards recovery of function through adjustment of medication, personal goal-setting and making changes in patients' lives to bring wellness. Her goal is to make treating depression, anxiety and addictive disorders a normal part of the services primary care doctors provide.

**Duties and Responsibilities:** Dr. Alvarez will serve as a Co-I, providing main consultation over the proposed MAAP program linkage to long-term provision of MAT, especially within the Froedtert and MCW system. As a clinical champion of the project, Dr. Alvarez will be involved in infusing proposed program elements within the MCW Integrated Behavioral Health program for potential referrals from the MAAP team or patients who are induced on buprenorphine in Froedtert or other local EDs and require ongoing treatment. She will act as a physician liaison between the study team and the primary care clinics throughout the Froedtert Health system and will assist with identifying primary care and other providers who are able to provide ongoing substance use disorder treatment. Dr. Alvarez will be providing expert psychiatric and addiction consultative services to the MAAP team and to the primary care physicians and advanced practice providers who will be managing the MAT for the patients referred from MAAP and the ED. Dr. Alvarez will assist with interpretation of and problem-solving around barriers to first responders providing MAT. Dr. Alvarez will work with Dr. Hernandez-Meier and the MAAP, to continuously review the project's identified outcomes and evaluation plan to ensure clinically relevant outcomes are included.

**Julie Owen, MD, Co-Investigator & ED Psychiatrist Consultant (1% FTE, Years 1-3)** is an Assistant Professor at MCW, with dual appointments in the Departments of Emergency Medicine and Psychiatry and Behavioral Medicine. Dr. Owen received her B.F.A. and B.A. at the University of Central Florida and her MD at the Medical College of Wisconsin. She has worked as a staff psychiatrist at the Milwaukee County Behavioral Health Division in the free-standing Psychiatric Crisis Service, where she also served as Chief Resident. Dr. Owen's subspecialty training focused on the care of patients experiencing co-occurring medical and



psychiatric illness (including substance use and dependence) while placing a special emphasis on the collaborative aspect of medicine and patient care. Dr. Owen is also Co-Investigator and is a key clinical consultant on the MCW WI DHS SAMHSA SOR grants, one of which is currently implementing an ED-based buprenorphine induction program at Froedtert Hospital. She will be taking the lead on inducing patients on buprenorphine in the ED when the program is implemented in July 2021, as well as providing telehealth to facilitate induction of patients in the Froedtert System's four community hospital sites.

**Duties and Responsibilities:** Dr. Owen will serve as Co-Investigator and key ED Physician consultant and Champion of the program. She will advocate for MAAP collaboration within the Froedtert ED and other local health systems and will advise on the development of all substance use disorder treatment elements, particularly the utilization of MAT for opioid use disorder. She will consult on clinical best practices and relevant training opportunities for the MAAP, including the Peer Specialists. She will act as a physician liaison between the MAAP and the Emergency Department at Froedtert Hospital. Dr. Owen will serve as a key clinical advisor for the MAAP team as they develop any mental or behavioral health service delivery procedures or models, especially any telehealth and first responder provision of MAT. Dr. Owen will work with Dr. Hernandez-Meier and the MAAP, to continuously review the project's identified outcomes and evaluation plan to ensure clinically relevant outcomes are included.

**B. MCW Fringe Benefits: \$14,976**

The current fringe benefit rate for faculty of the Medical College of Wisconsin is 14.6%.

We are requesting the following amounts per year:

Year 1: \$4,929

Year 2: \$4,992

Year 3: \$5,055

The fringe rates are made up of the following areas:

**MCW Fringe Costs:**

Healthcare	4.3%
Prescriptions	1.2%
Dental care	0.2%
FICA	4.0%
Retirement	4.0%
Other Fringe Costs	<u>0.9%</u>
Total Fringe Benefit Costs	<u>14.6%</u>

Other Fringe Costs include: Staff

Tuition

Workers Compensation

Dependent Care/Health Flex Spending

Unemployment Compensation

Life Insurance Disability

Insurance Benefits

Administration

Employee Parking

**C. MCW Travel: None**

**D. MCW Equipment: None**

**E. MCW Supplies: None**

**F. MCW Construction: None**

**G. MCW SubAwards: None**

**H. MCW Procurement Contracts: None**

**I. Other MCW Costs: None**

**J. Total MCW Direct Costs: \$117,556**

**Year 1: \$38,697**

**Year 2: \$39,181**

**Year 3: \$39,678**

**Total MCW MTDC: \$117,556**

**Year 1: \$38,697**

**Year 2: \$39,181**

**Year 3: \$39,678**

**K. Total MCW Indirect Costs (on MTDC): \$65,831**

**Year 1: \$21,670**

**Year 2: \$21,941**

**Year 3: \$22,220**

The rate of 56% for facilities and administrative (F&A) costs and general overhead costs is applied based on the federally negotiated rate for the Medical College of Wisconsin.

**L. Total MCW Project Costs: \$183,387**

**Year 1: \$60,367**

**Year 2: \$61,122**

**Year 3: \$61,898**

**G. Construction: NONE**

**H: Other: Total Request: \$21,900**

We are budgeting for data plans in order to utilize the technology budgeted for in the supplies section. We also budget for essential software that will facilitate Telehealth (Doxy.me), Tracking of patients over time and across health systems for comprehensive follow-up and evaluation data (Patient Ping Software) and HIPPA-compliant sharing software to follow clients across their continuum of care (KNO2FY HIPPA Doc Transfer Software). Our specific requests include:

<b>Year 1</b>		
<b>Item</b>	<b>Rate</b>	<b>Cost</b>
Data plan for iPad	\$50.00 per month x 12 mos. X 1	\$600.00
Voice and data plans for iPhones	\$50.00 per month x 12 mos. X 1	\$600.00
Doxy.me Telehealth Software	\$50.00 per month x 12 mos. X 1	\$600.00
Patient Ping Software	500 user license	\$5,000.00
KNO2FY Hippa Doc Transfer Software	annually	\$500.00
	<b>Total</b>	\$7,300.00
<b>Year 2</b>		
<b>Item</b>	<b>Rate</b>	<b>Cost</b>
Data plan for iPad	\$50.00 per month x 12 mos. X 1	\$600.00
Voice and data plans for iPhones	\$50.00 per month x 12 mos. X 1	\$600.00
Doxy.me Telehealth Software	\$50.00 per month x 12 mos. X 1	\$600.00
Patient Ping Software	500 user license	\$5,000.00
KNO2FY Hippa Doc Transfer Software	annually	\$500.00
	<b>Total</b>	\$7,300.00
<b>Year 3</b>		
<b>Item</b>	<b>Rate</b>	<b>Cost</b>
Data plan for iPad	\$50.00 per month x 12 mos. X 1	\$600.00
Voice and data plans for iPhones	\$50.00 per month x 12 mos. X 1	\$600.00
Doxy.me Telehealth Software	\$50.00 per month x 12 mos. X 1	\$600.00
Patient Ping Software	500 user license	\$5,000.00
KNO2FY Hippa Doc Transfer Software	annually	\$500.00
	<b>Total</b>	\$7,300.00
		\$21,900.00

**I. Total Direct & MTDC Costs: \$900,000**

**Year 1: \$296,576**

**Year 2: \$299,816**

**Year 3: \$303,608**

**J. Total Indirect Costs (on MTDC): \$0**

The WAFD does not have a federally-negotiated indirect rate and has waived its ability to elect to charge a de minimis rate on MTDCs.

**K. Total Project Costs:**

**Year 1: \$296,576**

**Year 2: \$299,816**

**Year 3: \$303,608**

**Total WAFD Project Costs: \$900,000**

## JOB DESCRIPTION



**CLASS TITLE: Assistant Fire Chief – Division of Community Risk Reduction and Support Services**

**DEFINITION:** Under general direction performs work of considerable difficulty in supervision of the Bureau of Community Risk Reduction and Support Services, and performs related work as required. Regular and predictable attendance is an essential function of this position.

**EXAMPLES OF DUTIES:** Administers the function of a division, directing and coordinating its activities; acts as Fire Chief in his/her absence; works with other commanders to insure consistency of operation among divisions and bureaus; directs the assignment and scheduling of subordinate personnel; assists in preparation of the budget; prepares and transmits communications, instructions and procedures; implementation of plans to the Fire Chief; makes recommendations, oversees activities and prepares reports regarding the activities of the division; handles complaints and emergencies; investigates complaints against the department or a member; provides public information as necessary; resolves conflicts within fire stations and at emergency scenes; evaluates working conditions for maximum efficiency and morale; determines need for services; assists subordinates with problems; resolves employee grievances; investigates recommended commendations and formal discipline, issues reprimands; performs studies for special problems and handles special duties as assigned; supervises, evaluates and inspects the work of the division; performs studies for special problems and handles special duties as assigned; coordinates division activities with public events; reviews and approves written reports; issues special equipment and assures proper use of such equipment; meets with and speaks before groups; confers with other City departments; ensures proper familiarization with procedures and assists with training programs; performs annual evaluations on subordinate fire officers; assists in screening, interviewing and reviewing fire fighter applicants; attends conferences and classes for current techniques and information;

Has responsibility for the development and implementation of Mobile Integrated Healthcare (MIH) and community risk reduction policies and procedures; oversees the purchase or replacement of equipment and apparatus to enhance the efficiency and effectiveness of hazard mitigation, fire suppression and EMS; oversees maintenance, repair and inspections of department vehicles and facilities; researches and prepares appropriate grant and alternative funding applications; ensures that all fires are appropriately investigated for cause and origin; maintains the department's library of policies and procedures; regularly meets with local public and private officials to assure that departmental activities are coordinated with external agencies.

Disseminates administrative policy and directives to fire officers; receives written and verbal citizen complaints for processing; oversees investigation of fire scenes to determine cause and origin; preserves evidence of arson or criminal offense; assures that patient treatment and confidentiality laws are followed at EMS scenes; prepares confidential medical, fire and service reports; testifies as court witness as requested.

### **MINIMUM QUALIFICATIONS**

**Training and Experience:** Bachelors Degree in Fire Science, Business Management or related field required; Wisconsin Certified Fire Officer 1 or highest level available at appointment; Wisconsin EMT-Paramedic licensure; Incident Safety Officer certification; ICS 400 certification; six years of fire fighting and EMS experience with the West Allis Fire Department or equivalent, or as determined by the West Allis Board of Police and Fire Commissioners. Must maintain a valid State of Wisconsin Driver's License.

### **Knowledge and Skills:**

Considerable knowledge of:

- a) departmental policies, rules, regulations and operating guidelines
- b) principles, methods, practices and techniques of municipal fire department administration
- c) operating procedures of fire departments and limitations upon departmental authority
- d) fire investigation and community risk reduction administration
- e) emergency scene safety and preservation of evidence in potential criminal investigative cases
- f) state, county and municipal emergency management interactive services
- g) streets and locations within the city and good knowledge of federal, state and local laws and ordinances

Considerable skill in:

- a) the application of all types of fire suppression, hazardous materials and emergency medical services principles and practices
- b) the application of sound techniques of fire department management and leadership
- c) the planning, organizing, assigning, supervising and inspecting the work of subordinates
- d) establishing and maintaining working relationships with other public officials, departmental members and the general public
- e) observing analytically and objectively and recording clearly and completely
- f) reacting quickly and calmly in emergencies
- g) expressing oneself clearly and concisely, both verbally and in writing
- h) exercising unusually good judgement in evaluating situations and making decisions



## JOB DESCRIPTION

**CLASS TITLE:** Program Coordinator - Mobile Integrated Healthcare

**DEFINITION:** Under direction of the Assistant Chief of Community Risk Reduction, performs work of considerable difficulty in supervision of the Bureau of Mobile Integrated Healthcare, and performs related work as required. Regular and predictable attendance is an essential function of this position.

**EXAMPLES OF DUTIES:** Administers the function of a bureau directing and coordinating its activities; works with other members of the administrative staff to insure consistency of operation among divisions and bureaus; prepares and transmits communications, instructions, and procedures; makes recommendations, oversees activities and prepares reports regarding the activities of the bureau; oversees response to emergent and non-emergent medical incidents; investigates complaints against the department or members of it; provides public information as necessary; resolves conflicts within fire stations and at emergency scenes; evaluates working conditions for maximum efficiency and morale; determines need for services; assists subordinates with problems; supervises, evaluates and inspects the work of the bureau; performs studies for special problems and handles special duties as assigned; coordinates bureau activities with public events; reviews and approves written reports; issues special equipment and assures proper use of such equipment; prepares budget recommendations for inclusion in the department's operating budget; meets with and speaks before groups; confers with other City departments; ensures proper familiarization with procedures and assists with training programs; provides training; attends conferences and classes for current techniques and information.

Under oversight of the Assistant Chief of Community Risk Reduction, assists with development and implementation of Mobile Integrated Healthcare policies, procedures, and best practices; serves as liaison to external agencies, updates and drafts policies and contractual agreements; provides advice regarding the purchase or replacement of equipment and apparatus to enhance the efficiency and effectiveness service delivery; assists with EMS training; regularly meets with local public and private officials to assure that MIH activities are coordinated with external agencies.

Disseminates administrative policy and directives to fire officers; receives written and verbal citizen complaints for processing; assesses emergency situations to determine corrective action, performs duties of incident commander on occasion, assigning responding companies and assuring scene safety and incident remediation; assures that patient treatment and confidentiality laws are followed at EMS and MIH scenes; obtains patient histories and reports to medical control or incident command; prepares confidential medical, fire and service reports; testifies as court witness as requested.

### **The Delivery of Contracted MIH Services:**

The MIH Program Coordinator may be required to fill in for the MIH Lieutenant to conduct scheduled and unscheduled consultations for patients who are identified and enrolled in the formal MIH program. These consultations primarily take place in patients' homes but may also occur in other locations as dictated by patient need. The MIH provider is tasked with providing, documenting and reporting multiple types of detailed assessments. They shall assist with navigating care of enrolled patients including both initial and reoccurring education on preventative care and wellness. The MIH provider shall work collaboratively with healthcare providers to assist enrolled patients with care plan adherence.

### **Response to EMS Scenes:**

The MIH Program Coordinator may be required to fill in for the MIH Lieutenant during response to EMS incidents to assist with the care of high acuity patients, provide palliative support, and maintain quality assurance. The MIH Program Coordinator may be required to fill in for the MIH Lieutenant when available and also to respond or be requested via a special call to any scene where the skill set of an MIH provider may be beneficial.

### **Response to Fire or Emergency Scenes:**

During fire or related emergencies, the MIH Program Coordinator, when available, shall respond to the emergency scene to function in the role of an aid to the Operations Chief or in another role as assigned by the Incident Commander.

## **MINIMUM QUALIFICATIONS**

**Training and Experience:** Associate Degree in Fire Science, Business Management, or related field preferred; Wisconsin Certified Fire Officer 1 or highest level available at appointment; Wisconsin EMT-Paramedic licensure; Department approved Community Paramedic/MIH certification or equivalent education; Incident Safety Officer certification; ICS 300 certification; six years of firefighting and EMS experience with the West Allis Fire Department or equivalent or as determined by the West Allis Board of Police and Fire Commissioners. Must maintain a valid State of Wisconsin Driver's License.

## **Knowledge and Skills:**

Considerable knowledge of:

- a) departmental policies, rules, regulations, and Operating Guidelines
- b) principles, methods, practices, and techniques of municipal fire department administration
- c) operating procedures of fire departments and limitations upon departmental authority
- d) chronic disease processes and treatment conditions including but not limited to:
  - 1. Congestive Heart disease (CHF)
  - 2. Chronic Obstructive Pulmonary Disease (COPD)
  - 3. Myocardial Infarction (MI)
  - 4. Pneumonia
- e) emergency scene safety and preservation of evidence in potential criminal investigative cases
- f) state, county, and municipal emergency management interactive services
- g) streets and locations within the city and good knowledge of federal, state, and local laws and ordinances
- h) Milwaukee County Emergency Medical Services policies and protocols
- i) emergency scene and personnel management

Considerable skill in:

- a) the application of all types of fire suppression, hazardous materials, and emergency medical services principles and practices
- b) the application of sound techniques of fire department management and leadership
- c) management of large scale and/or complex projects
- d) planning, organizing, assigning, supervising and inspecting the work of subordinates
- e) establishing and maintaining working relationships with other public officials, department members, and the general public
- f) observing analytically and objectively
- g) reacting quickly and calmly in emergencies
- h) expressing oneself clearly and concisely, both verbally and in writing
- i) exercising good judgement in evaluating situations and making decisions
- j) the efficient operation of mobile and desktop computers and electronic devices
- k) the efficient operation of advanced software packages such as electronic patient care reporting, word processing, fire records management, presentation, and spread sheet programs
- l) the preparation and analysis of program data and benchmark achievement
- m) public relations, public speaking, and public education program development and delivery





## JOB DESCRIPTION

### **CLASS TITLE: Lieutenant (Mobile Integrated Healthcare)**

**DEFINITION:** Under the supervision of the Captain in the Bureau of MIH, the MIH Lieutenant, as a primary job function, shall direct and perform the tasks associated with the supervision of home-based healthcare so as to enhance the quality of life for program identified and referred patients. As secondary job functions the MIH Lieutenant shall, as operational availability permits, respond to scenes and assist companies/crews with the provision and coordination of care for high acuity patients or with any situation where the skill set of an MIH provider may be beneficial. The MIH Lieutenant shall respond to medical facilities and emergency scenes to perform as a critical care paramedic for high acuity, time-sensitive patients when applicable. The MIH Lieutenant shall be available to function as an Incident Safety Officer (ISO) at fire and emergency scenes at the discretion of the incident commander and whenever logistically possible.

### **EXAMPLES OF DUTIES:**

#### **The Delivery of Contracted MIH Services:**

The MIH Paramedic Lieutenant's primary responsibility is conducting scheduled and unscheduled consultations for patients who are identified and enrolled in the formal MIH Program in a timely fashion. These consultations will primarily take place in patients' homes but may also occur in other locations as dictated by patient need. The MIH Lieutenant is tasked with providing, documenting and reporting multiple types of detailed assessments. He/she shall assist with navigating care of enrolled patients including both initial and reoccurring education on preventative care and wellness. The MIH Lieutenant shall work collaboratively with healthcare providers to assist enrolled patients with care plan adherence. These services are aimed at providing care choices to achieve the ultimate goal of allowing patients to remain at home, thereby reducing preventable medical care.

#### **Response to EMS Scenes:**

The MIH Lieutenant shall respond to EMS incidents to assist with the care of "high acuity" patients, provide palliative support, and maintain quality assurance. When applicable, MIH Lieutenants may provide Critical Care Paramedic level services along with the above-stated functions. The MIH Lieutenant, when available, may also respond or be requested via a special call to any scene where the unique skill set of an MIH provider may be beneficial.

#### **Response to Fire or Emergency Scenes:**

During fire or related emergencies, MIH Lieutenants, when available, shall respond to the emergency scene to function in the role of an aid to the Operations Section Chief or in another role as assigned by the Incident Commander.

### **MINIMUM QUALIFICATIONS**

**Training and Experience:** State of Wisconsin Paramedic license with critical care endorsement; Department approved Community Paramedic/MIH certification or equivalent education; Incident Safety Officer certification; State of Wisconsin Fire Officer 2 within one year of appointment. Minimum six years of firefighting and EMS experience with the West Allis Fire Department or as determined by the West Allis Board of Police and Fire Commissioners.

### **Knowledge and Skills:**

Considerable knowledge of:

1. WAFD policies, rules, regulations, procedures and Standard Operating Guidelines
2. Milwaukee County Emergency Medical Services policies and protocols
3. Chronic disease processes and treatment conditions including but not limited to:
  - a. Congestive Heart disease (CHF)
  - b. Chronic Obstructive Pulmonary Disease (COPD)
  - c. Myocardial Infarction (MI)
  - d. Pneumonia
4. Emergency scene and personnel management

Considerable skill in:

1. Practical application of WAFD fire suppression tactics and strategies
2. The efficient operation of mobile and desktop computers and electronic devices
3. The efficient operation of advanced software packages such as electronic patient care reporting, word processing, fire records management, presentation, and spread sheet programs
4. The preparation and analysis of program data and benchmark achievement
5. Public relations, public speaking and public education program development and delivery
6. Critical thinking during both emergency and non-emergency events

Working skill in:

1. Supervising, mentoring and inspecting the work of subordinates
2. Observing situations analytically and objectively while recording information clearly and competently
3. Reacting calmly during both emergencies and non-emergency situations
4. Communicating and documenting detailed medical information
5. Assessing patient needs and acquiring appropriate resources
6. Developing new and innovative solutions to encountered hurdles and problems