# **R911**B O A R D

## Arkansas 911 Board Annual PSAP Report

Arkansas Code 12-10-305 requires all cities and counties operating a Public Safety Answering Point (PSAP) to complete and submit this report to the Arkansas 911 Board no later than April 1 of each calendar year.

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The following documentation must be included when submitting each PSAP Report:
☐ PSAP budget for 2023
$\square$ Journal or ledger sheets reflecting 911 funds received in 2023
☐ Journal or ledger sheets reflecting PSAP expenditures in 2023
☐ Call volume analysis for January 1 – December 31, 2023
☐ Telecommunicator Training Data for PSAP
To be in compliance, <b>ALL DOCUMENTATION</b> must be delivered either online or by mail to the Arkansas 911 Board before midnight <b>Monday, April 1</b> st, <b>2024</b> .
The report will not be considered complete until all sections and documentation are received. Quarterly PSAP Distributions and Maintenance Reimbursements requested will not be released until this PSAP Report is complete.
If you have questions about this report, please call (501) 375-9911 or email AR911Board@adem.arkansas.gov
Submit Certification by Mail
Arkansas 911 Board
P.O. Box 34075
Little Rock, AR 72203
OR
Submit Certification Online
https://911board.arkansas.gov/certification/



#### **SECTION 1: PSAP INFORMATION**

PSAP Name:	
PSAP County:	
PSAP Physical Address:	
Street:	
City:	Zip:
FCC ID:	
*Note: The FCC ID may be verified from the FCC website unhttps://www.fcc.gov/general/9-1-1-master-psap-registry#bloom  If your PSAP is not registered, please take appropriate action ensure that your PSAP is properly identified in the FCC Master	to register your PSAP with the FCC and
Wireline Type: Specify if you are a primary or secondary PSAP for wireling	e or landline 911 calls.
☐ Primary PSAP ☐ Secondary PSA	P or Dispatch Center
Wireless Type:  Specify if you are a primary or secondary PSAP for wireles	
☐ Primary PSAP ☐ Secondary PSA	P or Dispatch Center
Please indicate the Hours of Operation:	
☐ 24 x 7, 365 days/year	☐ Other
If other, describe:	



Primary Non-Emergency 24	/7 x 365 Contact Number for PSAP:
Name and Title of PSAP Poi	nt of Contact:
Name:	Title:
Agency or Department:	
Email Address:	
Mailing Address:	
Street:	
City:	Zip:
Contact Number:	
Office:	Cell:
Name and Title of Alternate	e PSAP Point of Contact:
Name:	Title:
Agency or Department:	-
Email Address:	
Mailing Address:	
Street:	<u> </u>
City:	Zip:
Contact Number:	
Office:	Cell:



Provide the total number of 911 calls your PSAP received during the period January 1 to December 31, 2023:

Wireline (Landline):
Wireless:
VoIP:
Text to 911:
Has your PSAP implemented text-to-911?
☐ Yes ☐ No
Provide the total number of Administrative or non-911 calls your PSAP received during the period January 1 to December 31, 2023:
Indicate the services that are currently dispatched by your PSAP:
☐ Police ☐ Fire ☐ EMS ☐ Other
Other:
List any active Secondary PSAPs or Dispatch Centers to whom you transfer 911 calls for dispatch:
Does your PSAP have a Continuity of Operations Plan?
☐ Yes ☐ No
List the primary PSAP(s) identified for rerouting 911 calls to during an outage:

#### **SECTION 2: PSAP EQUIPMENT INFORMATION**

#### **PSAP Call-Processing Equipment (CPE)**

What manufacturer and model is your 9-1-1 CPE?
Confirm if the CPE is hosted or stand-alone:
☐ Hosted ☐ Stand-Alone
If hosted, list the host:
How many 9-1-1 Call Processing Positions are in the PSAP?
What year was your current CPE purchased?
Who is the Maintenance Vendor for your CPE?
What is the Maintenance Cost Per Month/Year for your CPE?

If you are requesting reimbursement for CPE maintenance costs, please submit a copy of the vendor's maintenance agreement or invoice along with your maintenance reimbursement request form.



### **PSAP Computer-Aided Dispatch (CAD)**

Does your PSAP utilize CAD?
☐ Yes ☐ No
If yes, who is your CAD vendor?
PSAP Radio Equipment
What manufacturer make and model are your radio consoles?
Who is your radio communications maintenance vendor?
PSAP GIS Capabilities
Does your PSAP utilize GIS mapping for caller location?
☐ Yes ☐ No
If yes, what is your mapping solution?
What is the frequency of updates to the address points and roads in your 9-1-1 mapping solution (daily, weekly, monthly, quarterly, semi-annually, annually, not updated, other)?



Who assigns new addresses in your PSAP's jurisdiction?

Name:	Title:
Email:	Telephone:
PSAP Cybersecurity	
During 2023, did your Psprogram or training?	AP implement or participate in a cybersecurity
	☐ Yes ☐ No
Did your PSAP expend a	ny funds on cybersecurity programs in 2023?
	☐ Yes ☐ No
If yes, how much?	
PSAP Language Translat  Does your PSAP utilize a	ion Service language translation service?
	☐ Yes ☐ No
If yes, what vendor?	
Smart911	
Is Smart911 currently ut	lized in your PSAP?
	☐ Yes ☐ No
Is Smart911 installed at	each position in your PSAP?
	☐ Yes ☐ No



Is Rave Panic Button still being utilized within your jurisdiction?
☐ Yes ☐ No
Do you feel Smart911 is beneficial as a service?
☐ Yes ☐ No
If no, why not?
RapidSOS
Has a RapidSOS Portal been created for your PSAP?
☐ Yes ☐ No
Is RapidSOS currently utilized in your PSAP?
☐ Yes ☐ No
SECTION 3: PSAP PERSONNEL
Please provide the total number of budgeted and currently employed public safety telecommunicators (call takers, dispatchers) for your PSAP:
Number of Full-Time Positions Budgeted:
Number of Part-Time Positions Budgeted:
Number of Positions Budgeted Total:



Number of Currently Employed Full-Time Personnel:
Number of Currently Employed Part-Time Personnel:
Number of Currently Employed Personnel Total:
What shift duration does your PSAP operate on?
☐ 8-Hour ☐ 10-Hour ☐ 12-Hour ☐ Hybrid  Number of Telecommunicators per shift:
Starting Salary Range for Public Safety Telecommunicators:
Identify any other duties required for public safety telecommunicators in your PSAP (Select all that apply):
<ul> <li>□ Jailer</li> <li>□ Public Facing Walk-In</li> <li>□ Physical Access Control and Monitoring for Facility</li> <li>□ Warrant Entry and Validation</li> <li>□ Payment Collection for Fines</li> <li>□ Non-Emergency Clerical Duties</li> </ul>



### **SECTION 4: PSAP PERSONNEL TRAINING**

Basic Telecommunicator in accordance with the Public Safety Act of 2019?
☐ Yes ☐ No
Are all telecommunicators employed at your PSAP who have worked as a telecommunicator for one (1) year or longer trained in Basic Telecommunicator in accordance with the Public Safety Act of 2019?
☐ Yes ☐ No
Confirm which entity(s) your PSAP utilizes for the 40-hour Basic Telecommunicator training (Select all that apply):
☐ ALETA ☐ APCO ☐ NENA ☐ OTHER
If other, which entity?
Does your PSAP provide Medical Pre-Arrival Instructions such as CPR over the phone?
☐ Yes ☐ No
If yes, does your PSAP require Telephone-CPR (T-CPR) training in accordance with Act 505 of 2021?
☐ Yes ☐ No
Does your PSAP utilize protocol dispatching based on a formal system such as APCO, PowerPhone, IAED, etc.?
Emergency Medical Dispatch (EMD)
Fire Service Dispatch (FSD)
Law Enforcement Dispatch (LED)



If yes, what provider does your PSAP utilize for these protocols?	
Does your PSAP require telecommunicators to obtain additional training hours on an annual basis?	
☐ Yes ☐ No	
If yes, how many:	

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### Arkansas 911 Board Annual PSAP Report

#### **SECTION 5: PSAP FUNDING**

What was your PSAP's TOTAL operating budget for 2023 (including personnel, equipment, supplies, etc.)?	
Include a copy of the PSAP budget with this report.	
What was your PSAP's TOTAL expenses for 2023?	

Include a journal or ledger sheets of the PSAP expenses with this report.

List all Quarterly PSAP Distributions, Maintenance Reimbursements, and Equipment Upgrade Reimbursements received from the Arkansas 911 Board in 2023:

Payment Type	Check Number	Amount	Deposit Date
4Q22 PSAP Distribution			
1Q23 PSAP Distribution			
2Q23 PSAP Distribution			
3Q23 PSAP Distribution			
Maintenance Reimbursement (if applicable)			
Equipment Upgrade Reimbursement (if applicable)			

Total Funds Received by PSAP from Arkansas 911 Board in 2023	\$

Include a journal or ledger sheets of the PSAP revenues with this report.



### List all 911 Funding Revenue Sources:

Funding Source	Amount
Wireless Funds from Arkansas 911 Board *Total from Above	
Wireline Funds from Landline Service Providers	
Act 442 Funds (Smart911) from ADEM	
TOTAL 911 REVENUE - 2023	

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#### Arkansas 911 Board Annual PSAP Report

#### Section 6 - Authorization of Data Reported in Annual PSAP Report

I hereby certify that all receipts and expenses reported on this form are complete and accurate and that all funding from the Arkansas 911 Board was expended in accordance with Ark. Code Ann. § 12-10-301, et seq. I further acknowledge that the documentation supporting these receipts and expenses may be reviewed at any time by Legislative Audit, the Arkansas 911 Board or the Board's designee.

EXECUTIVE SIGNATURE				
Date:				
Name:	Title:			
County or City:				
Subscribed and sworn to before me, the undersigned Notary Public within and for the county and state aforesaid this day of, 2024.				
My commission expires:				

This PSAP Certification and all supporting documentation must be filed by April 1, 2024. The 2024 Quarterly PSAP Distributions and Maintenance Reimbursements will not be released until the PSAP Certification is complete.