

**OSF-19**

Opioid Settlement
Fund Application

Status: Active

Submitted On: 7/10/2024

Primary Location

No location

Applicant

Virgil White



304-744-0079



vwhite@cityofsouthcharleston.com



315 4th av

South Charleston, WV 25303

Internal Section

Decision

—

Award Amount

—

Additional Comments

Certification

PLEASE CERTIFY THAT YOU HAVE REVIEWED THE SCHEDULE A CORE STRATEGIES AND SCHEDULE B-APPROVED USES

Digital Signature*

Virgil White

Jun 26, 2024

[Click here for more information.](#)

Contact Information

Organization Name*

South Charleston Fire Dept.

Address* ?

315 4th Av

Website (if applicable)

cityofsouthcharleston.com

Phone Number* 

304-744-0079

Email Address*

vwhite@cityofsouthcharleston.com

 Tax ID Number

Tax ID Type*

TIN

Tax ID Number*

***-**-0255

Project Summary

Please provide a narrative overview or summary of your proposal, including but not limited to the following:

1. Brief description of the proposal *

To purchase Automatic CPR devices and monitoring devices to aid in resuscitation of overdosed patients in cardiac arrest.

2. Purpose and key anticipated outcomes*

Higher success rate of survival in cardiac arrest due to overdoses.

3. Individuals or communities served*

South Charleston and Kanawha County

4. Amount of funding requested*

164000

5. Amount of any bids or cost estimates received to date, if applicable

164000

6. Amount of matching funds raised or committed by your organization*

0

7. Source of matching funds raised or committed by your organization*

n/a

8. How Opioid Settlement funds, if awarded, will be used*

These funds would be used to purchase the life saving equipment needed to provide better care of a overdosed patient in cardiac arrest.

9. Which Core Strategies or approved uses will be met*

Schedule A
G. Prevention programs Line 5
Schedule B
C. Connections to Care Line 9
M. Ensure appropriate equipment

10. How long it will take you to complete the project if awarded funding

Within a year

Proposal Details

1. Please describe the problem or need which your project seeks to address*

This project is to assist in CPR in overdosed patients. High quality CPR with early defibrillation increases survivability. Narcan does not work in a patient in cardiac arrest, so CPR is the only treatment if they are in cardiac arrest.

2. Please provide the details regarding the design and strategy of your proposal*

The main goal was to assess the quality of CPR in cardiac arrest in overdosed patients and if there was a way to increase survivability. Automated CPR devices have proven to deliver high quality, consistent chest compressions where a responder's quality and consistent chest compressions decrease after minutes of CPR. It is for this assessment of cardiac arrest patients this is much needed.

3. Please provide your project timeline* ?

If awarded, it is anticipated within a year or less.

4. Please provide your project's total proposed budget.*

The total proposed budget is 164,000.00 This will cover all equipment.

5. Please list any partners in this proposal, and the partner's role and your relationship with them. *

None

6. Please identify the anticipated leadership of the proposal and upload/attach their resume(s) or CVs*

N/A

7. Please describe your plan for sustainability of the project or initiative after the grant award has been exhausted

If awarded we would purchase the replacement accessories and maintain the usage, care, and maintenance.

Organization Information

1. Please provide your organization's mission statement. *

We provide quality service, professional fire protection and life safety to meet the needs of our community.

Our values are:

Diversity, Strength through diversity;

Respect, Trust, support and honor both internal and external;

Teamwork, Our team members are our most valuable assets;

Service, We strive for excellence.

2. Describe the history of your organization, tell us about your current programs and activities*

The South Charleston Fire Dept. was formed in 1918. We have provided emergency services for over 100 years. This includes fire suppression, ems, hazardous materials, and technical rescue. We currently have 5 fire stations, 52 firefighters providing service 24 hours a day, 7 days a week. Currently we are conducting community relations with the citizens with our smoke alarm program, education in the schools and day cares centers, and training on various disciplines of the fire service.

3. List any federal, state, local or private grant awards or funding received in the last three years and the current status of those funds. If your organization has previously received funds from Kanawha County, please list the amount, nature of the project(s) and current status of the funding and project(s). *

Port Security Grant Program \$302,186 Fire Boat (closed out)
 WV Homeland Security \$25,000 Mobile Radio upgrades (closed out)
 Kanawha County Commission \$109,250 Generators for Fire Stations (in progress. money has been collected. Will closeout in a couple of months.)
 Kanawha County Public Safety Grant \$60,000 Cancer Testing, Fire Gear, Extrication Gear, (closed out)
 DOW \$30,000 HazMat equipment, fire hose (closed out)

4. Please list your Owner(s), Board of Directors, senior staff members, or other key members of your organization:*

City Administration
Mayor.....Frank Mullens
Council Members
Kathleen Walker
Tommy Spurlock
Adam Strider
Adam Smolder
Kent Rymer
Laura Marker
Bob Lilly
David Di Flippo

Fire Chief
Virgil White
Asst. Fire Chiefs
Steve Copley
Wayne Miles
Cain Flores

5. Please list the staff involved with this project and describe their roles and responsibilities:*

Fire Chief
Administration and responsible for the operations of the fire department.

6. Please upload/attach the following financial documents, if applicable:

Cash flow statement for applicant's most recent fiscal year



No File Uploaded

Two years of audited financial statements



South Charleston 2022.pdf

Current operating budget



South Charleston 2024 Budget.pdf

If the applicant has not been audited, please include an unaudited balance sheet and income statement as prepared by the applicant



No File Uploaded

7. If you have made an application for funding for this project from other sources (city, state, private or non-profit organizations) please list the same here.*

None

8. Please describe three significant accomplishments of your organization within the last three years

1. Obtained a Insurance Service Offices (ISO) classification of 1.
2. Built a new fire stationswith local community center
3. Upgraded our fire apparatuses.

Supplementary Information

1. Please enter contact information (name, email, and phone) for at least one third-party reference. *

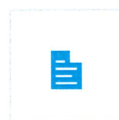
Chief Virgil White
vwhite@cityofsouthcharleston.com
304-744-0079

2. Please include any supplementary information or documentation (such as letters of support, newspaper articles, etc) which you feel will be essential to the County's review.



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Attachments



South Charleston 2023.pdf

South Charleston 2023.pdf

Uploaded by Virgil White on Jul 10, 2024 at 1:53 PM

History

Date	Activity
7/10/2024, 1:57:57 PM	changed the deadline to Jul 11, 2024 on approval step Application Review on Record OSF-19
7/10/2024, 1:57:55 PM	Virgil White submitted Record OSF-19
6/27/2024, 3:29:25 PM	Virgil White updated secured field "Tax ID Number" to "xxx-xx-0255" on Record OSF-19
6/27/2024, 3:28:45 PM	Virgil White updated secured field "Tax ID Number" to "xxx-xx-0255" on Record OSF-19
6/26/2024, 3:11:00 PM	Virgil White started a draft of Record OSF-19

Timeline

Label	Activated	Completed	Assignee	Due Date	Status
✓ Application Review	7/10/2024, 1:57:56 PM	-	-	7/10/2024	Active
📄 Request Letter of Acknowledgement	7/10/2024, 1:57:56 PM	7/10/2024, 1:57:56 PM	-	-	Completed