PSAP Survey 2018

Missouri state statute 650.330.4(13) requires that the Missouri 911 Service Board conduct and annual survey of public safety answering points in Missouri to evaluate potential for improved services, coordination, and feasibility of consolidation. This survey will also be used to inform the 911 Service Board's triennial report to the governor and general assembly regarding the status of 911 services statewide, as well as specific efforts to improve efficiency, cost effectiveness, and levels of service, as required under 650.330.4(5) RSMO.

We are requesting public safety communicators to participate in this survey, which will allow us to provide the legislature with a reliable picture of emergency telecommunications capabilities, their structure, and funding in Missouri. State statute prohibits any PSAP from receiving grants and loans from the Missouri 911 Service Trust Fund established (190.420 RSMO) if the applicant failed to complete this survey (650.355.13 RSMO).

* Required

1.   Email address *

    _____

    Untitled Section

    State statute prohibits any PSAP from receiving grants and loans from the Missouri 911 Service Trust Fund established (190.420 RSMO) if the applicant failed to complete this survey (650.355.13 RSMO).

    Please answer the following questions.

    PSAP Information

2.   What is the name of your PSAP? *

    _____

3. Is this a PRIMARY or SECONDARY PSAP? *

Primary: A PSAP that takes 911 calls directly, to which 911 calls are routed directly from the 911 control office. Secondary: A PSAP to which 911 calls are transferred to from a primary PSAP.

_____

4. Name and title of the individual completing this survey *

_____

5. Phone number of the individual completing this survey *

_____

6. Email of the individual completing this survey *

_____

7. What is the address of your PSAP *

_____

8. What is the name and title of the person who oversees the PSAP's daily operations? *

_____

9. Name and title of the PSAP's point of contact (if different than the person filling out the survey).

_____

10. Email of the PSAP's point of contact (if different than the person filling out the survey).

_____

11. Phone number of the PSAP's point of contact (if different than the person filling out the survey).

_____

PSAP Service Area

12. What is your PSAP Service Area including all counties, cities, and/or jurisdictions? *

_____

_____

_____

_____

_____

PSAP Call Volume

What was the TOTAL number of in-bound contacts your PSAP recieved in the 2018 calendar or budget year? If possible, please list your call in-bound volume for each of the following modes. If your PSAP is unable to receive calls of any of these types, please state "n/a".

13. Number of Landline Calls *

_____

14. Number of Wireless Calls *

_____

15. Number of Text Messages *

_____

16. Number of Voice-Over-Internet Protocol Calls *

_____

17. Number of Other Calls (please define) *

_____

18. TOTAL NUMBER OF 2018 CONTACTS (Including both calls and text messages) *

_____

PSAP Dispatch | How many agencies of each discipline receive dispatches from your PSAP?

19. Law Enforcement *

_____

20. Fire *

_____

21. EMS *

_____

22. Emergency Management *

_____

23. Public Works *

_____

24. Animal Control *

_____

25. Missouri State Highway Patrol *

_____

26. Other agency (please specify agency and number) *

_____

27. Does your PSAP provide medical post-dispatch and pre-arrival instructions through use of an Emergency Medical Dispatch program? *

   Mark only one oval.

   ⬭ Yes

   ⬭ No

PSAP Staffing

28. Does your PSAP share 911 answering equipment with another PSAP? *

   Mark only one oval.

   ⬭ Yes

   ⬭ No

29. Do telecommunicators perform services for your PSAP/Jurisdiction other than answering 911 calls and PSAP administration (i.e. jailer, warrant entry, clerical, etc.) If yes please specify. *

_____

30. How many authorized, budgeted telecommunicator positions does your PSAP have? *

31. Full-time *

32. Part-time *

33. How many actual staff do you have at this time? *

34. Are you understaffed due to vacancies? If so, how many vacancies do you have? *

PSAP Funding

35. What was your PSAP's TOTAL operating budget for the 2018 calendar or budget year? (including personnel, equipment, overhead, supplies, etc.) *

36. 21. Please describe your PSAP's source of revenue (describe/answer all that apply)

37. Landline Surcharge Tax – Wireline (Landline Levy) of up to 15 percent (190.305 RSMO) *

_____

38. County Sales Tax – County-level sales tax (190.335/190.292 RSMO) *

_____

39. Wireless Option - Tax of up to $1/month on any device capable of contacting 911 (190.455 RSMO) *

_____

40. City Sales Tax *

_____

41. County General Revenue *

_____

42. City General Revenue *

_____

43. Jurisdiction Memberships (list jurisdictions) *

_____

_____

_____

_____

_____

44. Other (please explain)

_____

_____

_____

_____

_____

45. Is your jurisdiction interested in pursuing a different funding mechanism? If yes please specify. For example, County Sales Tax – County-level sales tax (190.335/190.292 RSMO) or Wireless Option - Tax of up to $1/month on any device capable of contacting 911 (190.455 RSMO) *

_____

_____

_____

_____

_____

PSAP Consolidation

46. Are you currently consolidated with another PSAP? *

Mark only one oval.

◯ No

◯ Yes

47. If yes, list all participating PSAPs.

_____

_____

_____

_____

_____

48. If not, are you planning to consolidate with another PSAP?

Mark only one oval.

◯ No

◯ Yes

49. If yes, please explain and identify participating PSAPs

_____

_____

_____

_____

_____

PSAP Equipment and Technology

50. 19. How many physical workstations do you have at your PSAP to answer 911 calls? *

_____

51. Who is your 911 System Service Provider (check all that apply) *

Check all that apply.

☐ AT&T

☐ CenturyLink

☐ T-Mobile

☐ Verizon

☐ Mid-America Regional Council

Other: ☐ _____

52. What is your Dispatch Service/CAD? (check all that apply) *

Check all that apply.

☐ All Points

☐ ARMS End2End

☐ Capers

☐ CODY Systems

☐ Computer Information Systems (CIS)

☐ Enterpol/Huber

☐ GeoComm

☐ ITI

☐ Keystone

☐ Lawman

☐ Locution Systems, Inc.

☐ Motorola Solutions

☐ New World Systems

☐ Omingo

☐ Plant/Airbus

☐ Spillman

☐ Superion

☐ Tyler Tech

☐ TriTech Software Systems

☐ Valor Systems

☐ Vision Air

☐ Winsoms

☐ X-Wave

☐ Zetron, Inc.

☐ Zoll

☐ West Safety Services

Other: ☐ _____

53. If you are using more than one CAD system, please explain

_____

_____

_____

_____

_____

54. When was your current CAD system purchased *

_____

Example: January 7, 2019

55. When do you expect you will next need to upgrade or purchase a new CAD system? *

_____

Example: January 7, 2019

PSAP Radio Technology

56. What is your radio console make and model? *

_____

57. How many radio consoles does your PSAP have? *

_____

58. When was your current radio console purchased *

_____

Example: January 7, 2019

59. When do you expect you will need will next need to upgrade or purchase a new radio console? *

_____

Example: January 7, 2019

PSAP Customer Premise Equipment

60. Who is your 911 Customer Premise Equipment provider? *

_____

61. When was your current customer-premise equipment purchased? *

_____

Example: January 7, 2019

62. When do you expect you will next need to upgrade or purchase new customer-premise equipment? *

_____

Example: January 7, 2019

PSAP GIS Capabilities

The information utilized in the dispatch map is derived from GIS data. The following questions are about GIS (Geographic Information System) capabilities. Examples of GIS data layers are address points, roads, city/county boundaries, PSAP boundaries, and ESN boundaries.

63. Does your PSAP have GIS? *

Mark only one oval.

◯ Yes

◯ No

◯ Other: _____

64. If yes, who maintains your GIS data?

_____

65. Is your 911 data in a GIS format?

Mark only one oval.

◯ Yes

◯ No

◯ Other: _____

66. If No, what format is your data?

_____

67. Does your 911 GIS data meet NENA Standards? If not, what standard does it meet, if any?

Mark only one oval.

◯ Yes

◯ No

◯ Other: _____

68. Is your 911 GIS data NG911 compliant? This includes address points, roads, and boundaries.

Mark only one oval.

◯ Yes

◯ No

◯ Other: _____

Additional PSAP Information

69. Is there any additional information that was not asked in this survey that would help the Department of Public Safety and Missouri Legislators gain a better understanding of how your unique PSAP functions?

_____

_____

_____

_____

_____

70. I'm interested in consolidating my PSAP. *

Mark only one oval.

( ) Yes

( ) No

( ) Other: _____

71. I'm interested in implementing text-to-911 at my PSAP. *

Mark only one oval.

( ) Yes

( ) No

( ) Other: _____

72. I'm interested in implementing Emergency Medical Dispatch at my PSAP. *

Mark only one oval.

◯ Yes

◯ No

◯ Other: _____

73. How many Continuing Education (CEU) credits do you require annually per employee? *

_____

Google Forms