VALLEY SHORE EMERGENCY COMMUNICATIONS, INCORPORATED

State Police Troop F
315 Spencer Plains Road
P.O. Box 497
Westbrook, CT 06498

Communications Center: 860-399-7921
Administrative Office: 860-399-2435
Fax: 860-399-6456
Web: www.valleyshore911.org

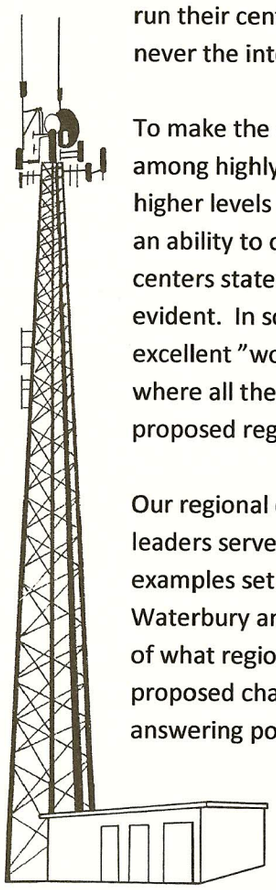
March 15, 2015

DSET Docket No. 13-01
Department of Emergency Services and Public Protection
Division of Statewide Emergency Telecommunications
1111 Country Club Road
Middletown, CT 06457

RE: **DSET Docket No. 13-01**

To Whom It May Concern:

Valley Shore Emergency Communications Inc., (VSECI), contends that the current system of funding regional dispatch systems is undeniably inequitable and results in an unfair advantage for highly funded centers as they provide 9-1-1 services and emergency communications. Underfunded centers are forced to depend on local municipalities for substantial financial support. The Department of Emergency Services and Public Protection (DESPP) identified this issue when some regional systems began to see funding levels reaching near the one-million dollar mark, in some cases providing nearly 80% of the cost to run their centers. This degree of subsidization from the 9-1-1 Telecommunications Fund was never the intent of the subsidy.



To make the system fair will result in painful adjustments that are a great cause for concern among highly funded regional dispatch centers statewide. These centers enjoy access to higher levels of technology, administrative staff for training and operating management, and an ability to offer more competitive service fees to prospective member towns. All regional centers statewide were colleagues and partners until the ill-effect of the formula became evident. In some cases having now been reduced to a level of disrespect that tarnishes the excellent "working together" environment fostered from the volunteer emergency services where all these centers evolved from. An even playing field will be established if the proposed regulation is passed.

Our regional center, organized in 1976 by visionary fire and emergency medical service (EMS) leaders serves 10 towns in Middlesex and New London Counties. It was designed from examples set forth by KX in Colchester, TN in Tolland, QV in Danielson, Northwest in Waterbury and WW in Willimantic. Despite our allegiance to these centers as the foundation of what regionalization ought to be, our organization stands firmly in support of the proposed changes to regulations pertaining to the funding of regional public safety answering points. If the State hopes to move toward 9-1-1 center efficiencies by reducing

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the 100+ centers statewide, then this division that has resulted from the inherent defect to the current funding formula must be changed. In fact this faulty formula in its present form has the potential to cause the demise of centers that have been built over decades. The regional centers must be the model from which others seek ways to work together.

We base our opinion on the findings of the 2011 L.R. Kimball consulting study where irrefutable funding disparities were identified. In review of the Kimball study, the State 9-1-1 Commission, through subcommittee review and recommendation, agreed that the formula should be modified to make it equitable and subsequently referred it to DSET for regulatory change.

Examples set forth in DSET's excellent NPRC (Notice of Proposed Regulatory Change) document, including the proposed regulation, point out that centers with nearly equal populations can receive vastly different funding (see Docket page 4, Item 15 – $300,000 variance). The imbalance creates a wide range of support in some cases *nearly equal* to operating budgets (see Docket page 5, figure A – 76%-11.9% variance). Financially polarized regional centers deliver 9-1-1 services to municipalities and the public at highly disparate rates. Underfunded centers are forced, in seeking better technology and organizational human resources, to bear the burden of cost on member towns.

The chronology of funding formula review verifies, reflects and reinforces that every objective consideration has been taken into account, and that the findings were comprehensive and conclusive in every respect. It was identified years ago by DSET, made part of the Kimball Report where it was identified as an inequity, reviewed and endorsed by the Statewide 9-1-1 Commission in full and in subcommittee. It is now fully supported by DESPP.

In summary, the State through exhaustive effort and through expansive vetting has concluded that this change is necessary and creates no financial increase on any level. We strongly urge that this regulation be moved to the Regulatory Committee unchanged.

Sincerely,

Richard M. Darin

Richard M. Darin, Executive Director