

ILLINOIS STATE POLICE
Office of the Statewide 9-1-1 Administrator



State of Illinois

Application for
9-1-1 Consolidation Plan

INTRODUCTION

The following document provides the application for submitting a 9-1-1 Consolidation Plan that will supply the Department of State Police (Department), the Illinois Commerce Commission (ICC), the Statewide 9-1-1 Advisory Board (Advisory Board) and the Statewide 9-1-1 Administrator (Administrator) with the necessary information about your proposal to consolidate your 9-1-1 system. All consolidations plans must comply with 83 Ill. Adm. Code Part 1324.

The Emergency Telephone System Act ("ETSA" or "Act") (50 ILCS 750) Section 15.4a(b) states that each 9-1-1 authority or qualified governmental entity required to consolidate must file a consolidation plan by July 1, 2016.

There are three consolidation categories. Please find below the documents that need to be included when filing a consolidation plan for each category.

- 1) Consolidation of an unserved county with an existing 9-1-1 authority and the creation of a Joint ETSB
- 2) Consolidation of either paper ETSB's or multiple ETSB's resulting in the creation of a Joint ETSB and consolidation of individual PSAP's
- 3) Consolidation of PSAPs within an ETSB

Consolidation Plans defined under categories 1) and 2) above, must include the following documents when submitting a consolidation plan:

General Information	Contact and 9-1-1 System information.
Verification	Notarized statement of truth regarding information provided in the plan.
Letter of Intent	Letter that is sent to the 9-1-1 System Provider with a copy of the plan.
Plan Narrative	A summary of the changes of the proposed system's operation.
Financial Information	A summary of anticipated implementation costs and annual operating costs of the consolidated or modified 9-1-1 system that are directly associated with 9-1-1 as well as the anticipated revenues.
5-Year Strategic Plan	A detailed plan for implementation and financial projections.
Communities Served	A list of all communities that are served by the 9-1-1 System.
Participating Agencies	A list of public safety agencies (Police, Fire, EMS, etc.) who are dispatched by the 9-1-1 System.
Adjacent Agencies	A list of public safety agencies (Police, Fire, EMS, etc.) that are adjacent to the 9-1-1 System's jurisdictional boundaries.
Attachments (if applicable):	
Ordinance	Any local ordinances which dissolve an existing ETSB or creates a new ETSB.
Intergovernmental Agreement	Any intergovernmental agreements or MOU's creating a joint ETSB or any other agreements pertinent to the 9-1-1 system.
Contracts	Contract(s) with a 9-1-1 system provider or for NG-9-1-1 service.
Back-up PSAP Agreement	Establishes back-up and overflow services between PSAPs.
Network Diagram	Provided by the 9-1-1 system provider showing trunking routing and backup configuration.
Call Handling Agreements	Call handling agreements shall describe the primary and secondary dispatch method to be used by requesting parties within their respective jurisdictions.
Aid Outside Jurisdictional	Aid outside normal jurisdictional boundaries agreements shall provide that once an emergency unit is dispatched in response to a request through the system, such unit

Boundaries Agreements	shall render its service to the requesting party without regard to whether the unit is operating outside its normal jurisdictional boundaries.
Carrier Listing	A list of each carrier telephone company(s), exchange(s), prefix(es), and the various 9-1-1 System configurations that will be used in the proposed system.
Test Plan	The 911 System's overall plan detailing how and to what extent the network and data base will be tested.

These consolidation Plans must be filed electronically on the Department's website at:

<http://www.isp.state.il.us/Statewide911/statewide911.cfm> where you will see the box below to submit your plan.

**Submit Completed
911 Plans/Waivers**

The Department and the ICC have 20 days to complete the technical review of your plan. An Administrative Law Judge (ALJ) will then have 20 days to hold a hearing and make a recommendation to the Advisory Board. From that point the Advisory Board has 20 days to hold a public hearing on the plan and provide a recommendation to the Administrator. Upon receipt of the Advisory Board's recommendation, the Administrator will have 30 days to provide a written decision to the applicant.

Consolidations Plans defined under category 3) above do not need to be submitted electronically on the Department's website.

The 9-1-1 Authority must provide written notification to the Administrator at 911_tech_support@isp.state.il.us at least 10 business days prior to making the following changes pursuant to Section 1325.200(h). After review, the Administrator will provide a letter of acknowledgment. The following documents must be included in this notification:

General Information	Contact and 9-1-1 System information.
Plan Narrative	A detailed summary of the changes in the proposed system's operation.
Attachments (if applicable):	
Network Diagram	Provided by the 9-1-1 system provider showing trunking routing and backup configuration
Call Handling Agreements	Call handling agreements shall describe the primary and secondary dispatch method to be used by requesting parties within their respective jurisdictions.

911 GENERAL INFORMATION

DATE: 06/28/2016

Type of Change: <input type="checkbox"/> Consolidation within an ETSB <input type="checkbox"/> Joint ETSB <input type="checkbox"/> Unserved consolidation		
Current System Name:	Population Served	Land Area in Sq Miles
Winthrop Harbor Emergency Telephone System Board (ETSB)	6,733	4.79
	6,733	4.79
System Name after Consolidation:		

PSAP EFFECTED: (Consolidation Plans Only)	Consolidation/ Remain Open	Decommission/ Close	Primary	Secondary

911 System Contact: Michael Bitton

Street Address: 830 Sheridan Road

City, State and Zip Code: Winthrop Harbor, IL 60096

Office Telephone: (847) 872-2131

Cellular Telephone: (815) 236-0486


Email: mbitton@whpd.org

Wireless Coverage for Consolidated System:
100 % Phase II compliant
100 % Phase I compliant

Please check if applicable:
 NG9-1-1 capable
 Receive 9-1-1 Text
 Receive 9-1-1 Video

VERIFICATION

I, JOEL BRUMLIK, first being duly sworn upon oath, depose and say that I am CHAIRMAN, of WINTHROP HARBOR 911 ETSB; that I have read the foregoing plan by me subscribed and know the contents thereof; that said contents are true in substance and in fact, except as to those matters stated upon information and belief, and as to those, I believe same to be true.



CHAIRMAN

Subscribed and sworn to before me

this 29th day of July, 20 16.



NOTARY PUBLIC, ILLINOIS



9-1-1 SYSTEM PROVIDER LETTER OF INTENT

(Date)

(9-1-1 System Provider Company Representative)

(9-1-1 System Provider Company Name)

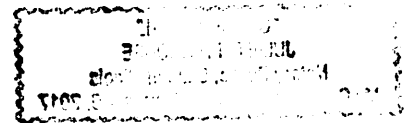
(Street Address)

(City, State, Zip Code)

Dear _____:

This letter is to confirm our intent to consolidate our 9-1-1 System with (Name all 9-1-1 authorities that will be involved). Enclosed is your copy of our consolidation plan to be filed with the Department of the Illinois State Police for approval. Thank you for your assistance in this matter.

Sincerely,



(Name)

(Title)

enclosure: Consolidation Plan

PLAN NARRATIVE

Please answer the questions below, and provide a detailed narrative to assist the Statewide 9-1-1 Advisory Board and the Statewide 9-1-1 Administrator with an understanding of the plan as it applies to this application. Please use additional sheets if necessary.

1. Do all of your PSAPs meet all of the requirements defined in 1325.415 and 1325.515	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Type of Radio/Telecommunications systems compatible with participating and adjacent agencies.	<input type="checkbox"/> STARCOMM21 <input type="checkbox"/> STARCOMM21 ITTF channels only <input type="checkbox"/> Other, explain below
3. Will all PSAPs remaining after consolidation direct dispatch all emergency calls pursuant to section 1324.200b)3)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Have you included maps to show the territory covered by the system?	<input type="checkbox"/> Yes <input type="checkbox"/> No <p style="text-align: right; margin-top: 5px;">Plans submitted without this documentation will be rejected.</p>
5. Have you included a listing of all telephone companies?	<input type="checkbox"/> Yes <input type="checkbox"/> No <p style="text-align: right; margin-top: 5px;">Plans submitted without this documentation will be rejected.</p>
6. Have you included a copy of the intergovernmental agreement, ordinance, resolution and/or contracts?	<input type="checkbox"/> Yes <input type="checkbox"/> No <p style="text-align: right; margin-top: 5px;">Plans submitted without this documentation will be rejected.</p>
7. Have you included a list of participating and adjacent agencies?	<input type="checkbox"/> Yes <input type="checkbox"/> No <p style="text-align: right; margin-top: 5px;">Plans submitted without this documentation will be rejected.</p>
8. Have you included financial information?	<input type="checkbox"/> Yes <input type="checkbox"/> No <p style="text-align: right; margin-top: 5px;">Plans submitted without this documentation will be rejected.</p>
9. Public education.	<input type="checkbox"/> This is an unserved county that will require public education. (See attachment.) <input type="checkbox"/> This is an existing 9-1-1 system(s) and does not require public education.
10. Training.	<input type="checkbox"/> This is an unserved county that will require training. (See attachment.) <input type="checkbox"/> This is an existing 9-1-1 system(s) and does not require internal training/similar/ongoing training for any GIS annexation or change of policy from agencies served.
11. Use of TTY's and Training	<input type="checkbox"/> This is a unserved county that will require training. (See attachment.) <input type="checkbox"/> This is an existing 9-1-1 system(s) and does not require internal training/similar/ongoing training for any GIS annexation or change of policy from agencies served.

<p>12. Have you included call handling and aid outside jurisdictional boundary agreements?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Plans submitted without this documentation will be rejected.</p>
<p>13. Have you included a new system diagram?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Plans submitted without this documentation will be rejected.</p>
<p>13a. Does the new system diagram include all PSAP(s) and backup PSAP location(s)?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Plans submitted without this documentation will be rejected.</p>
<p>14. Have or will all areas within the 9-1-1 system be addressed for the database? If no, please explain.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>14a. Explain all aspects of the database, i.e., how often is it updated, where is it located, etc.</p>	
<p>15. Who is the 9-1-1 system provider for your 911 system? Please explain whether the system will be legacy based, next generation based or a combination.</p>	

(Please include additional pages if needed.)

NARRATIVE STATEMENT:

(Provide a detailed summary of system operations for either a consolidation or modified plan. If incorporating an NG9-1-1 solution, please include the additional items listed below pursuant to 1325.205b)12).

- 1) Indicate the name of the certified 9-1-1 system provider being utilized.
- 2) Explain the national standards, protocols and/or operating measures that will be followed.
- 3) Explain what measures have been taken to create a robust, reliable and diverse/redundant network and whether other 9-1-1 Authorities will be sharing the equipment.
- 4) Explain how the existing 9-1-1 traditional legacy wireline, wireless and VoIP network, along with the databases, will interface and/or be transitioned into the NG9-1-1 system.
- 5) Explain how split exchanges will be handled.
- 6) Explain how the databases will be maintained and how address errors will be corrected and updated on a continuing basis.
- 7) Explain who will be responsible for updating and maintaining the data, at a minimum on a daily basis Monday through Friday.
- 8) Explain what security measures will be placed on the IP 9-1-1 network and equipment to safeguard it from malicious attacks or threats to the system operation and what level of confidentiality will be placed on the system in order to keep unauthorized individuals from accessing it.

Plan Narrative:

June 28, 2016

Ms. Cindy Barbera-Brelle
Statewide 9-1-1 Administrator
Illinois State Police
801 South 7th Street
Springfield, Illinois 62703

RE: Extension of Time to file 9-1-1 Consolidation Plan

Dear Administrator Barbera-Brelle:

I am the Chairman of the Winthrop Harbor Emergency Telephone System Board (ETSB). The Winthrop Harbor ETSB has one Public Safety Answering Point (PSAP) located at the Winthrop Harbor Police Station. This PSAP provides 24-hour emergency E911 and administrative answering for the Winthrop Harbor Police and Fire Departments, and radio dispatch service for those same agencies. It is staffed by one Telecommunicator per shift. These Telecommunicators also provide coverage for walk-in reports and records support functions for the Winthrop Harbor Police Department. The Telecommunicators are also certified Part-Time Police Officers who are used to supplement police coverage for the Village.

Because the Winthrop Harbor ETSB serves a population of just over 6,700 which is less than the 25,000 population threshold, we recognize that we are covered by the statutory mandate to consolidate. We have begun discussions with the City of Zion ETSB regarding consolidation of the two Boards. The City of Zion operates a single PSAP which serves the Zion Police and Fire Departments. The Zion ETSB serves a population of just over 24,400 people based on the 2010 census, making that ETSB also subject to the consolidation requirement of P.A. 99-0006.

The two major issues that Winthrop Harbor and Zion must sort through in order to make a consolidation viable are financial concerns and technology replacement. Because both centers are relatively small and provide multiple services to their respective communities, they have been economical to operate. Winthrop Harbor's review of per call dispatch fees at other neighboring communication centers indicates that it will be significantly more expensive to contract out dispatch service than to keep the operation in-house. Additionally, in Winthrop Harbor's case, the closing of our PSAP may result in the lay-off of sworn police personnel, threatening the public safety of the community.

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Narrative Plan:

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In terms of technology, both the Winthrop Harbor and Zion PSAPs operate different 9-1-1 phone systems and Computer Assisted Dispatch (CAD) systems. Obviously, any consolidation will result in the need to purchase additional technology by one of the PSAPs, if not both. This will result in a significant financial impact, as well as the necessary delay inherent in the process of obtaining bids, purchasing and implementing these technologies.

Based on these factors and the additional planning necessary to accomplish consolidation, we are requesting a twelve month extension to June 30, 2017 to file our consolidation plan. Thank you for your consideration and if you have any additional questions, please do not hesitate to contact me.

Sincerely,

Joel H. Brumlik
Chief of Police
Chairman, Winthrop Harbor ETSB
Ph. (847) 872-2131 ext. 2010
E-mail: chiefbrumlik@whpd.org

FINANCIAL INFORMATION

Name of ETSB(s) that are being dissolved	Total Reserves to be transferred to the Joint ETSB
_____	\$ _____
_____	\$ _____

Dispatch Staff and Positions

- _____ Number of answering positions prior to the consolidation (total for all entities)
- _____ Number of answering positions in the consolidated system
- _____ Number of full time dispatchers/call takers prior to the consolidation (total for all entities)
- _____ Number of full time dispatchers/call takers in the consolidated system
- _____ Number of part time dispatchers/call takers prior to the consolidation (total for all entities)
- _____ Number of part time dispatchers/call takers in the consolidated system

Total amount (and percentage) of salaries paid for by 9-1-1 authority prior to consolidation:

\$ _____ %

Total amount (and percentage) of salaries to be paid for by 9-1-1 authority after consolidation:

\$ _____ %

9-1-1 Network Cost (per year)

- a) Total network cost for each entity prior to the consolidation \$ _____
- b) Total network cost of consolidated system \$ _____
- c) Net change in network costs: \$ _____ \$ 0.00

If no cost savings in network please explain:

FINANCIAL INFORMATION

Identify Network Costs that the ETSB believes the State will pay for the Consolidated System:

Network Cost	Estimated Amount (per year)
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Other Consolidation Cost

PSAP, CPE, CAD Equipment, logging recorders	\$ _____
MSAG and Mapping Development or changes	\$ _____
Radio Consoles	\$ _____
Construction or Remodel of PSAP	\$ _____
Personnel	\$ _____
Other (Please place total amount in the blank at the right and explain below).	\$ _____

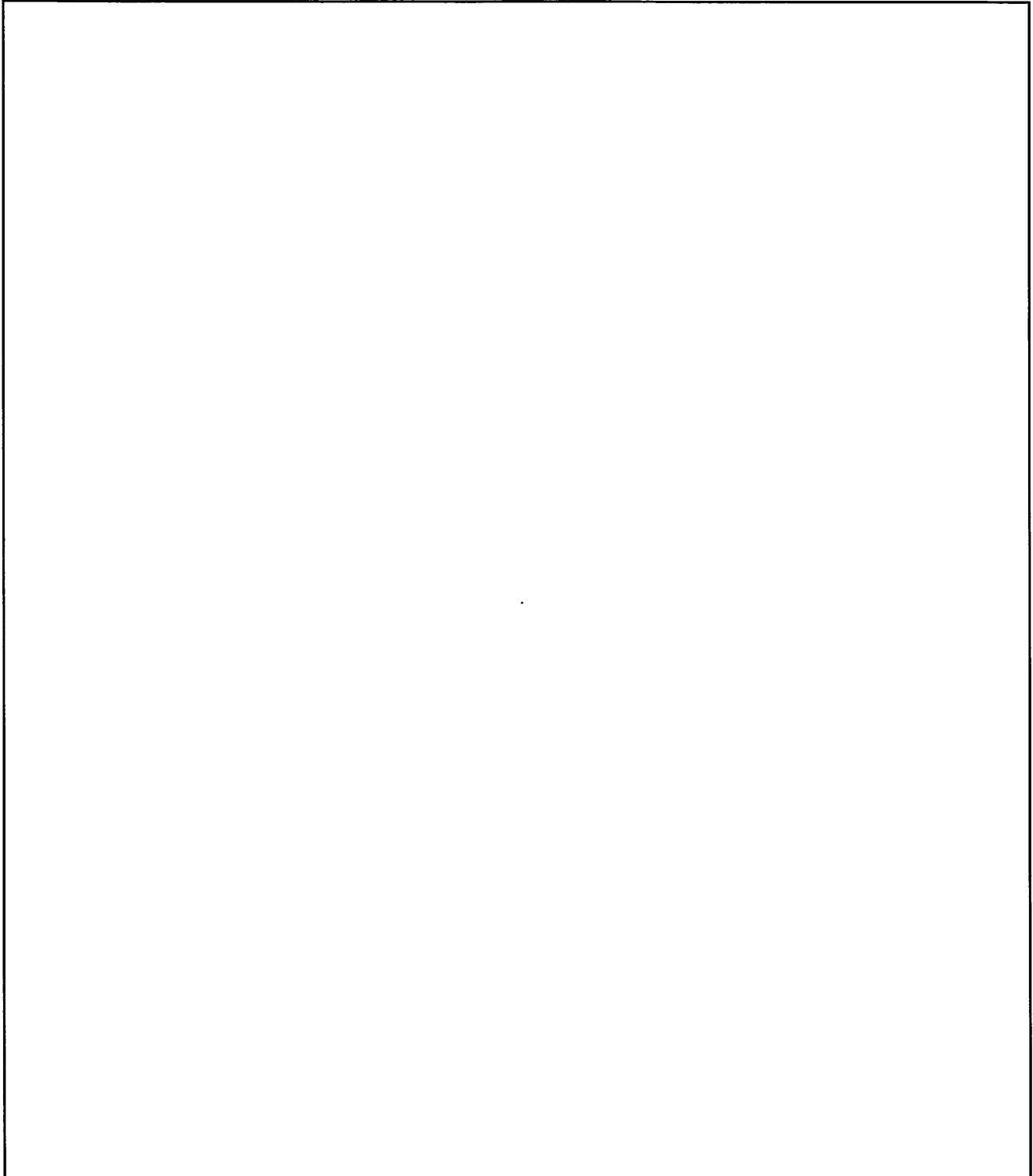
Recurring and Nonrecurring Cost (per year)

Estimated nonrecurring cost for consolidation	\$ _____
a) Recurring costs prior to consolidations (all entities)	\$ _____
b) Proposed recurring cost for consolidated system	\$ _____
c) Net change in recurring costs: a – b = c	\$ _____ \$ 0.00
 Revenue (per year)	
Projected surcharge revenue	\$ _____
Projected revenue from local governments	\$ _____
Projected revenue from other sources (grants)	\$ _____
Revenue in reserves	\$ _____
Total Revenue	\$ _____ \$ 0.00

FIVE YEAR STRATEGIC PLAN FOR CONSOLIDATION PLAN

(Provide a detailed summary of the proposed system's operation, including but not limited to, a five-year strategic plan for implementation of the consolidation plan with financial projections)

Narrative:



ATTACHMENTS

Ordinance - Documentation that supports the dissolution of the individual ETSB and its replacement with a JOINT ETSB per an intergovernmental agreement once the consolidation plan is approved by the Statewide 9-1-1 Administrator.

Contracts - The contract for a new 9-1-1 system provider or for NG 9-1-1 service.

Intergovernmental Agreement - The agreement creating the Joint ETSB.

Back-up PSAP Agreement - The agreement that establishes back-up service due to interruptions or overflow services between PSAPs.

Network Diagram - Diagram provided by the 9-1-1 System Provider. Re-evaluate P.O1 grade of Service for cost savings and network efficiency.

CALL HANDLING AND AID OUTSIDE JURISDICTIONAL BOUNDARIES AGREEMENT

For 9-1-1 Emergency Communications

This agreement is made between the 9-1-1 Authority, and the (Public Safety Agency) _____, for the purpose of effective handling and routing of 9-1-1 Emergency calls.

CALL HANDLING

(9-1-1 System Name) _____ receiving a call for emergency services in your jurisdiction shall dispatch the call in the following manner:

Primary: _____ (State Specific Procedures if radio frequency-identity number, if talk group-identity name, if telephone-identity telephone number)

Secondary: _____ (State Specific Procedures if radio frequency-identity frequency number, if talk group-identity name, if telephone-identity number)

AID OUTSIDE JURISDICTION BOUNDARIES

Once an emergency unit is dispatched in response to a request through the system, such unit shall render its service to the requesting party without regard to whether the unit is operating outside its normal jurisdictional boundaries.

The legislative intent is that 9-1-1 be used for emergency calls only. Therefore, all calls of an administrative or non-emergency nature shall be referred to your agency's published telephone number.

The PSAP Center agrees to keep all records, times, and places of all calls. All records will be available to all participants of the 9-1-1 System.

It shall be the responsibility of your agency to maintain the report of the call and the disposition of each call received.

All agreements, management, records, and service will be the responsibility of the 9-1-1 authority.

9-1-1 Authority	Public Safety Agency
By _____	By _____
Title _____	Title _____

TEST PLAN DESCRIPTION

1) Description of test plan (back-up, overflow, failure, database).

2) List wireline exchanges to be tested.

3) List of wireless and VoIP Carriers to be tested.