TEXAS Department of State Health Services

FY2018

Cities Readiness Initiative

Applicant Information

Legal Name of Applicant Agency: Collin County

Mailing Address:

Street / PO Box: 4300 Community Avenue
City: McKinney
Zip: 75071

Payee Name: Collin County

Payee Mailing Address:

Street / PO Box: 4300 Community Avenue
City: McKinney
Zip: 75071

State of Texas Comptroller Vendor ID # (9 digit + 3 digit mail code):

DUNS # (9 digits required for subrecipient contractors): 74873449

Type of Entity (Choose one)

City: ☐ Click on appropriate box
County: ☑
Other Political Subdivision: ☐

Project Period

Start Date: 7/1/2017
End Date: 6/30/2018

Counties Served

County(ies) Served: Collin County

Amount of Funding Allocated: $128,650.00

CONTACT PERSON INFORMATION

Legal Business Name: Collin County

This form provides information about the appropriate contacts in the contractor's organization in addition to those on the FACE PAGE. If any of the following information changes during the term of the contract, please send written notification to the Contract Management Unit.

Health Director/CEO	Candy Blair			Mailing Address (street, city, county, state, & zip):
Phone:	972-548-5504	Ext:		2300 Bloomdale #4192, McKinney, TX 75071
Fax:				
E-mail:	cblair@co.collin.tx.us			
B-13/FSR Rep:	Eileen Prentice			Mailing Address (street, city, county, state, & zip):
Phone:	972-548-4796	Ext:		2300 Bloomdale #4192, McKinney, TX 75071
Fax:	972-548-4751			
E-mail:	eprentice@co.collin.tx.us			
PHEP (HAZARDS) Program Leader:	James McCrone			Mailing Address (street, city, county, state, & zip):
Phone:	972-548-5535	Ext:		4300 Community Avenue, McKinney, TX 75071
Fax:	972-548-4747			
E-mail:	jmccrone@co.collin.tx.us			
SNS (CRI) Coordinator:	Amy Davis			Mailing Address (street, city, county, state, & zip):
Phone:	214-491-6832	Ext:		4300 Community Avenue, McKinney, TX 75071
Fax:	972-548-4747			
E-mail:	aldavis@co.collin.tx.us			
Authorized Signatory	Keith Self			Mailing Address (street, city, county, state, & zip):
Phone:	972-548-4623	Ext:		2300 Bloomdale #4192, McKinney, TX 75071
Fax:				
E-mail:	keith.self@co.collin.tx.us			
Emergency Contact	Lynnette Hudson			Mailing Address (street, city, county, state, & zip):
Cell Phone:	214-250-6627	Ext:		4300 Community Avenue, McKinney, TX 75071
Fax:	972-548-4747			
E-mail:	lhudson@co.collin.tx.us			

BUDGET SUMMARY (REQUIRED)

Legal Name of Respondent: Collin County

Budget Categories	Total Budget (1)	DSHS Funds Requested (2)	Direct Federal Funds (3)	Other State Agency Funds* (4)	Local Funding (Match) (5)	Other Funds (6)
A. Personnel	$74,650	$71,136			$3,514	
B. Fringe Benefits	$32,106	$30,894			$1,212	
C. Travel	$6,190	$6,190			$0	
D. Equipment	$0	$0			$0	
E. Supplies	$5,225	$5,225			$0	
F. Contractual	$0	$0			$0	
G. Other	$23,341	$15,205			$8,136	
H. Total Direct Costs	$141,512	$128,650	$0	$0	$12,862	$0
I. Indirect Costs	$0	$0				
J. Total (Sum of H and I)	$141,512	$128,650	$0	$0	$12,862	$0
				Match Percentage	10.00%	

If the Contractor is using Indirect Costs as Match, then enter the amount in Line 16, Column H.

Revised: 04/14/2014

PERSONNEL Budget Category Detail Form

Legal Name of Respondent: Collin County

PERSONNEL Name + Functional Title	Vacant Y/N	Job Summary	FTEs	Certification or License (Enter NA if not required)	Estimated Monthly Salary/Wage	Number of Months	Salary/Wages Requested for Project
Amy Davis, CRI Coordinator	N	Performs SNS and emergency preparedness activities; assists with MRC	1.00	NA	$3,963	12	$47,556
Nathan Peterson, MRC Coordinator	N	Coordinates volunteers for SNS and emergency preparedness activities	0.50	NA	$3,930	12	$23,580
							$0
							$0
							$0
							$0
							$0
							$0
							$0
							$0
							$0
							$0
							$0
							$0
							$0
							$0
							$0
							$0
							$0
							$0
				TOTAL FROM PERSONNEL SUPPLEMENTAL SHEETS			$0
					SalaryWage Total		$71,136

FRINGE BENEFITS **Itemize the elements of fringe benefits in the space below:**

FRINGE BENEFITS: FICA/Medicare (salary x 0.0765), Insurance Premiums ($1050 for medical/dental/RX and $4.95 for term life per month), Long Term Disability (salary x 0.0026), Short Term Disability $3.20/month, Long Term Care $15/month, Retirement (salary x 0.08), Supplement Death Benefit (salary x 0.0025), Unemployment Insurance (salary x 0.001)

Total Number of FTEs:	**1.55**		**Fringe Benefit Rate %**	43.43%
			Fringe Benefits Total	$30,894

TRAVEL Budget Category Detail Form

Legal Name of Respondent: Collin County

Conference / Workshop Travel Costs

Description of Conference/Workshop	Justification	Location City/State	Number of: Days & Employees	Travel Costs	
Public Health Preparedness Summit	Conference for public health and emergency preparedness professionals	New Orleans, LA	5 days/1 employee	Mileage	$100
				Airfare	$450
				Meals	$250
				Lodging	$650
				Other Costs	$100
				Total	$1,550
Region VI Talon MRC Meeting	Regional MRC annual meeting	TBD	3 days/1 employee	Mileage	$100
				Airfare	$400
				Meals	$150
				Lodging	$500
				Other Costs	$100
				Total	$1,250
Texas Emergency Management Conference	Conference for public health and emergency preparedness professionals	San Antonio, TX	5 days/1 employee	Mileage	$100
				Airfare	$300
				Meals	$250
				Lodging	$700
				Other Costs	$100
				Total	$1,450
Preparedness Coalition Symposium	Conference for public health and emergency preparedness professionals	Galveston, TX	4 days/1 employee	Mileage	$100
				Airfare	$350
				Meals	$200
				Lodging	$650
				Other Costs	$100
				Total	$1,400
TOTAL FROM TRAVEL SUPPLEMENTAL CONFERENCE/WORKSHOP BUDGET SHEETS					$0

Total for Conference / Workshop Travel $5,650

Revised: 3/25/2014

Other / Local Travel Costs

Justification	Number of Miles	Mileage Reimbursement Rate	Mileage Cost (a)	Other Costs (b)	Total (a) + (b)
Out of office meetings, seminars, exercises, trainings, including day travel within DFW metroplex. Will be utilized by all PHEP funded staff.	750	$0.540	$405		$405
Short seminars, conferences, meetings within the state of Texas. Will be utilized by all PHEP funded staff.	250	$0.540	$135		$135
			$0		$0
			$0		$0
			$0		$0
			$0		$0
			$0		$0
TOTAL FROM TRAVEL SUPPLEMENTAL OTHER/LOCAL TRAVEL COSTS BUDGET SHEETS					$0

Total for Other / Local Travel $540

Other / Local Travel Costs: $540 **Conference / Workshop Travel Costs:** $5,650 **Total Travel Costs:** **$6,190**

Indicate Policy Used: **Respondent's Travel Policy** _____ **State of Texas Travel Policy** _____

Revised: 3/25/2014

SUPPLIES Budget Category Detail Form

Legal Name of Respondent: Collin County

Itemize and describe each supply item and **provide an estimated quantity and cost (i.e. #of boxes & cost/box) if applicable.** Provide a justification for each supply item. Costs may be categorized by each general type (e.g., office, computer, medical, educational, etc.)

Description of Item Provide estimated quantity and cost	Purpose & Justification	Total Cost
Office supplies	Clipboards, paper, writing utensils, labels, etc. (approximately $1000/FTE)	$1,500
POD Supplies	Various medical and non-medical supplies for 4 deployable POD kits (approximately $750/POD kit). These include additional POD signage inside the POD, external signage and drive-thru items (such as cones, safety lights, and small barriers), replacement of existing expired POD supplies (such as hand sanitizer and bandages), administrative supplies for drive-thru PODs (such as enclosed clipboards), and POD inventory supplies (such as inventory marking tools and supplies).	$3,000
Grant Program Supplies	Gloves, masks, crowd control posts, signs, etc., as needed to support various deliverables, including Mass Prophylaxis operations and dispensing models other than open PODs. Also includes alpha or first responder POD planning not covered by POD supplies. Medical supplies ~$800 and non-medical office-type supplies ~$200; specific quantities or items are not finalized at this time	$725

TOTAL FROM SUPPLIES SUPPLEMENTAL BUDGET SHEETS	$0

Total Amount Requested for Supplies: **$5,225**

OTHER COSTS Budget Category Detail Form

Legal Name of Respondent: Collin County

Description of Item Include quantity and cost/quantity	Purpose & Justification	Total Cost
AT&T Wireless	Phone/data service (2 users, $70/month, 12 months)	$1,680
Facility Rental Fee	Facility rental fees associated with training classes/events (2 events, ~$150 each event as one-time payment	$300
Outreach	Annual budget for MRC recruitment and outreach materials, including print advertising	$6,000
Conference/Workshop Registration Fees	Registration fees for Public Health Summit ($750/person, 1 person); registration for Texas Emergency Management Conference ($225/person, 1 person); registration for Preparedness Coalition ($250/person, 1 person)	$1,225
Printing and Communication Materials	Printing fees for SNS brochures and materials	$6,000
	TOTAL FROM OTHER SUPPLEMENTAL BUDGET SHEETS	$0

Total Amount Requested for Other: **$15,205**

Revised: 3/25/2014

PERSONNEL Budget Category Detail Form (Match)

Legal Name of Respondent: Collin County

PERSONNEL Name + Functional Title	Vacant Y/N	Job Summary	FTEs	Certification or License (Enter NA if not required)	Estimated Monthly Salary/Wage	Number of Months	Salary/Wages Requested for Project
Eileen Prentice, Grant Accountant	N		0.05		$5,857	12	$3,514
							$0
							$0
							$0
							$0
							$0
							$0
							$0
							$0
							$0
							$0
							$0
							$0
					SalaryWage Total		$3,514

FRINGE BENEFITS Itemize the elements of fringe benefits in the space below:

FRINGE BENEFITS: FICA/Medicare (salary x 0.0765), Insurance Premiums ($1050 for medical/dental/RX and $4.95 for term life per month), Long Term Disability (salary x 0.0026), Short Term Disability $3.20/month, Long Term Care $15/month, Retirement (salary x 0.08), Supplement Death Benefit (salary x 0.0025), Unemployment Insurance (salary x 0.001)

Fringe Benefit Rate %	34.50%
Fringe Benefits Total	$1,212

OTHER COSTS Budget Category Detail Form (Match)

Legal Name of Respondent: Collin County

Description of Item [If applicable, include quantity and cost/quantity (i.e. # of units & cost/unit)]	Purpose & Justification	Total Cost
MATCH - Volunteer Activities	MRC volunteer training kand events participation ($25.11/hour - calculated from Independent Sector for 324 hours of service.	$8,136

Total Amount Requested for Other: **$8,136**

Revised: 3/25/2014