

Joann Gilbride

From: Joann Gilbride
Sent: Wednesday, August 28, 2019 1:13 PM
To: 'Boggs,Jennifer (DSHS)'
Cc: Candy Blair; Eileen Prentice; 'phep@dshs.texas.gov'; Taylor Burton
Subject: RE: FY20 Allocation- CRI Budget Revision- Collin County Health Department
Attachments: Final_FY20 CRI Budget Templates with Match CCHCS 8 27 2019.xls
Importance: High

Ms. Boggs,

Please see our revised FY20 CRI Budget Template as requested. The additional funds have been absorbed by the salary and fringe costs of current employees who work on CRI activities. Please let me know if you have any questions or concerns.

Thank you,

Joann L. Gilbride, MBA
Healthcare Coordinator
Collin County Health Care Services
825 N. McDonald #130
McKinney, TX 75069
P: 972-548-5503
F: 972-548-4441

From: Mendez,Amanda (DSHS) [mailto:Amanda.Mendez@dshs.texas.gov]
Sent: Friday, August 16, 2019 8:42 AM
To: Candy Blair <cblair@co.collin.tx.us>; Eileen Prentice <eprentice@co.collin.tx.us>; Joann Gilbride <jgilbride@co.collin.tx.us>; Amy L. Davis <aldavis@co.collin.tx.us>; Chris Hill <chill@co.collin.tx.us>
Cc: Boggs,Jennifer (DSHS) <Jennifer.Boggs@dshs.texas.gov>
Subject: FY20 Allocation- CRI Budget Revision- Collin County Health Department

***** **WARNING:** External Email. Do not click links or open attachments that are unsafe. *****

Good afternoon:

As you know, the Texas Department of State Health Services (DSHS) received a modest increase to the Public Health Emergency Preparedness (PHEP) Cooperative Agreement, Laboratory Response Network (LRN), and Cities Readiness Initiative (CRI) allocations for Budget Period 1 (July 1, 2019 – June 30, 2020). The Texas base (Hazards) funding increased 2.2%; CRI funding increased 3.2%; and LRN funding increased 2.2% from the prior budget period.

Please find attached your current FY20 CRI Budget Template to add your revisions. You will have two (2) weeks to complete and submit a revised budget. The revised budget template should be completed and returned to **Jennifer Boggs**, Jennifer.Boggs@dshs.texas.gov and CC the PHEP inbox (PHEP@dshs.texas.gov) by **Friday, August 30, 2019.**

Your additional FY20 allocation dollar amount is **\$4,117.00 for a new total allocation of \$132,767.00** for Program ID: CPS/CRI.

Please read the following carefully.

- The submitted budget will be reviewed and processed in the order in which it is received. Please note FY20 contractors are required to provide matching funds of 10% of the allocation amount.
- Dollar amounts must be in whole numbers. Budgets with dollar amounts not represented as whole numbers or inadequate justifications will be returned for revision.
- Please limit FTEs to two decimal places.
- Please do not use cents or formulas in the Excel cells.

****For revisions, please skip a line and add your changes (see below).**

Description of Item Provide estimated quantity and cost	Purpose & Justification	Total Cost
Office Supplies	Office supplies needed to support PHP activities, supplies include copy paper, pens, printer and fax supplies, paper clips, sticky notes, etc.	\$1,096
Custodial Supplies	Custodial supplies needed to support PHP activities, supplies included paper towels, cleaning supplies, and toilet paper	\$750
Office Supplies	Office supplies needed to support PHP activities, supplies include copy paper, pens, printer and fax supplies, paper clips, sticky notes, etc.	\$300

If any other revisions are made to the budget (besides adding the new allocation), please describe the changes in the email when you submit the revised budget. Please include:

- a brief description of how much funding is being redirected;
- a brief description of which category funds are being redirected from/to/within and why; and
- ensure a brief justification is included in the revised budget.

Amendments will be initiated in September 2019.

Thank you,

Jennifer Boggs
Contract Specialist V
Contract Management Section (CMS)
Department of State Health Services
P.O. Box 149347
Austin, TX 78714-9347
(512)776-3967 (Direct)
(512)776-7391 (Fax)
Jennifer.Boggs@dshs.texas.gov



FY2020

Cities Readiness Initiative

Applicant Information

Legal Name of Applicant Agency:

Mailing Address:

Collin County

Street / PO Box: 825 N. McDonald Street, Suite #130

City: McKinney

Zip: 75069

Payee Name:

Collin County-537-18-0141-00001

Payee Mailing Address:

Street / PO Box: 825 N. McDonald Street, Suite #130

City: McKinney

Zip: 75069

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: ☐

County: ☒

Other Political Subdivision: ☐

Click on appropriate box

Project Period

Start Date: 7/1/2019

End Date: 6/30/2020

Counties Served

County(ies) Served:

Collin County (revised 8/27/2019)

Amount of Funding Allocated:

\$132,767.00

CONTACT PERSON INFORMATION

Legal Business Name:

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
Phone: Ext:
Fax:
E-mail:

Mailing Address (street, city, county, state, & zip):

B-13/FSR Rep:
Phone: Ext:
Fax:
E-mail:

Mailing Address (street, city, county, state, & zip):

PHEP (HAZARDS) Program Leader:
Phone: Ext:
Fax:
E-mail:

Mailing Address (street, city, county, state, & zip):

SNS (CRI) Coordinator:
Phone: Ext:
Fax:
E-mail:

Mailing Address (street, city, county, state, & zip):

Authorized Signatory for **DocuSign**
Phone: Ext:
Fax:
E-mail:

Mailing Address (street, city, county, state, & zip):

**Additional Authorized Signatory for
DocuSign only if applicable
(FFATA, Certs, etc)**

Phone: Ext:
Fax:
E-mail:

DocuSign "CC" Person
Phone: Ext:
Fax:
E-mail:

Emergency Contact
Cell Phone: Ext:
Fax:
E-mail:

Mailing Address (street, city, county, state, & zip):

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	\$88,022	\$83,873			\$4,149	
B. Fringe Benefits	\$34,988	\$33,637			\$1,351	
C. Travel	\$6,163	\$6,163			\$0	
D. Equipment	\$0	\$0			\$0	
E. Supplies	\$4,584	\$4,584			\$0	
F. Contractual	\$0	\$0			\$0	
G. Other	\$12,287	\$4,510			\$7,777	
H. Total Direct Costs	\$146,044	\$132,767	\$0	\$0	\$13,277	\$0
I. Indirect Costs	\$0	\$0				
J. Total (Sum of H and I)	\$146,044	\$132,767	\$0	\$0	\$13,277	\$0
				Match Percentage	10.00%	

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

PERSONNEL Budget Category Detail Form

Legal Name of Respondent:

Collin County[illegible]

FRINGE BENEFITS

Itemize the elements of fringe benefits in the space below:

FRINGE BENEFITS: FICA/Medicare (salary x 0.0765), Insurance Premiums (\$1100 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 \$26.25/month, Retirement (salary x 0.08), Supplement Death Benefit (salary x 0.0025), Unemployment Insurance (salary x 0.001)

Total Number of FTEs:	1.49		Fringe Benefit Rate %	40.11%
			Fringe Benefits Total	\$33,637

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:	Travel Costs	
			Days & Employees		
Preparedness Coalition Symposium	Conference for public health and emergency preparedness professionals	TBD	4 days, 1 employee	Mileage	\$200
				Airfare	\$400
				Meals	\$200
				Lodging	\$600
				Other Costs	\$100
				Total	\$1,500
Region VI Talon MRC Meeting	Regional MRC Annual Meeting	TBD	4 days/1 Employee	Mileage	\$200
				Airfare	\$400
				Meals	\$200
				Lodging	\$600
				Other Costs	\$100
				Total	\$1,500
Texas Emergency Managmeent Conference	Conference for public health and emergency preparedness professionals	TBD	5 days/1 employee	Mileage	\$200
				Airfare	\$400
				Meals	\$300
				Lodging	\$800
				Other Costs	\$100
				Total	\$1,800
				Mileage	\$0
				Airfare	\$0
				Meals	\$0
				Lodging	\$0
				Other Costs	\$0
				Total	\$0
TOTAL FROM TRAVEL SUPPLEMENTAL CONFERENCE/WORKSHOP BUDGET SHEETS					\$0

Total for Conference / Workshop Travel

\$4,800

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.	1500	\$0.545	\$818		\$818
Short seminars, conferences, meetings within the state of Texas.	1000	\$0.545	\$545		\$545
			\$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 **\$1,363****Other / Local Travel Costs:** **\$1,363****Conference / Workshop Travel Costs:** **\$4,800****Total Travel Costs:** **\$6,163**

Indicate Policy Used:

Respondent's Travel Policy State of Texas Travel Policy

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, folders, binders, etc...to produce reports, documentation, and support grant functions.	\$800
Reflective Safety Vests/Deployment Supplies	<p>Designated reflective safety vests for Medical Reserve Corps members, to be worn at POD sites (drive-thru, outdoor or indoor location), real world events, or exercises and drills. Reflective safety vests will identify roles and specific skillset of volunteers at POD site locations or MRC events, as well as distinguish volunteers from public health emergency preparedness staff. The reflective safety vests will help identify volunteers stationed in various sections at a POD (i.e. Safety, Logistics, Screening, etc.), as well as distinguish our staff and volunteers from other jurisdictions. The reflective safety vests are essential for safety and traffic control at PODs and MRC events. Approximately \$20 each. Specifications: ANSI compliance preferred, breathable material with reflective tape.</p> <p>Deployment supplies are for the MRC members to be prepared for activation to an incident, event or POD site; these supplies include preparedness items and the necessary supplies to sustain activities (i.e., preparedness supplies, "go bag" supplies, blankets, first aid kits, totes, portable chargers, etc....)</p>	\$800

Alternate Dispensing 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 and non-medical office-type supplies, specific quantities or items are not finalized at this time.	\$800
POD Supplies	Various medical and non-medical supplies for deployable POD kits. These include additional POD signage inside the POD, external signage and drive-thru items (such as cones, safety lights, and small barriers), replacement or existing expired POD supplies (such as hand sanitizer, hand held radios, batteries, bandages, scales, masks, PPE, storage containers and bags, training assets for drills, etc...), administrative supplies for drive-thru PODs (such as enclosed clipboards), and POD inventory supplies (such as inventory marking tools and supplies).	\$1,000
MRC Deployment Supplies	Deployment supplies are for the MRC members to be prepared for activation to an incident, event or POD site; these supplies include preparedness items and the necessary supplies to sustain activities (i.e. preparedness supplies, "go bag" supplies, blankets, first aid kits, totes, portable chargers, etc....)	\$1,184
TOTAL FROM SUPPLIES SUPPLEMENTAL BUDGET SHEETS		\$0

Total Amount Requested for Supplies:

\$4,584

OTHER COSTS Budget Category Detail Form

Legal Name of Respondent:

Collin County

Description of Item Include quantity and cost/quantity	Purpose & Justification	Total Cost
ATT Wireless Cell Phone	Phone/data service (2 users, \$70/month, 12 months)	\$1,680
Facility Rental Fee	Facility rental fees associated with training classes/events (1 event at \$150 each event as one-time payment	\$150
Printing and Communication Materials	Printing for additional grant related activities, events and public education or other outreach brochures, flyers, postcards, coloring books, posters and other materials to educate the public about SNS and mass prophylaxis; printing of employee business cards, as needed.	\$450
Conference/Workshop Registration Fees	Registration fees for; registration for Texas Emergnecy Management Conference; registration for Preparedness Coalition and other conference/workshop fees relavent to the program	\$500
CPR Training Costs	Training for grant employees and MRC members to obtain essential CPR skills. This training will ensure responder safety and health at PODs, alternate dispensing locations, and other locations that may utilize the MRC volunteers. Training will prepare public health agency staff and MRC volunteers responding to an incident.	\$500

Online Training	Bloodborne pathogens, HIPPA and Confidentiality online training for PHEP staff and Medical Reserve Corps members. The bloodborne pathogens training is intended to educate about bloodborne diseases and proper PPE which during a large scale disaster or POD activation the MRC may be rendering medical care 100 modules @ \$15.00 = \$1500. HIPPA and confidentiality training to assure compliance with Federal HIPPA regulations,PHEP staff and the MRC will be involved with patient data through screening forms at POD sites and at flu clinics. Modules will be purchased as needed.	\$1,230
TOTAL FROM OTHER SUPPLEMENTAL BUDGET SHEETS		\$0

Total Amount Requested for Other:

\$4,510

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
MATCH - Eileen Prentice, Accountant I	N	Completes FSRs and maintains fiscal auditing documentation	0.05	NA	\$6,915	12	\$4,149
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
						SalaryWage Total	\$4,149

FRINGE BENEFITS	Itemize the elements of fringe benefits in the space below:
FRINGE BENEFITS: FICA/Medicare (salary x 0.0765), Insurance Premiums (\$1100 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 \$26.25/month, Retirement (salary x 0.08), Supplement Death Benefit (salary x 0.0025), Unemployment Insurance (salary x 0.001)	
	Fringe Benefit Rate % 32.56%
	Fringe Benefits Total \$1,351

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 and events participation (25.10/hour - calculated from Independent Sector for 310 hours of service	\$7,777

Total Amount Requested for Other:

\$7,777