

Collin County Grant Summary Form

Department Name Collin County District Attorney's Office		Submit completed form along with one electronic copy of the grant application and all supporting documentation to the Auditor's Office not less than 14 days prior to the scheduled Commissioner Court meeting. If you have any questions contact Janna Caponera at (972) 548-4638.
Contact Person (Grant Liaison) Kimberly Laseter		
Title Assistant District Attorney	Phone / Extension 4345	

Grant Description		
Grant Title and Funding Year Comprehensive Opioid, Stimulant, and Substance Abuse Site-	Funding Source <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other:	Application Type <input checked="" type="checkbox"/> New Grant <input type="checkbox"/> Renewal <input type="checkbox"/> Amendment
Grantor (include sub-granting agencies) U.S. Department of Justice (DOJ), Office of Justice Programs (OJP), Bureau of Justice Assistance (BJA)	Payment Method <input type="checkbox"/> Cost Reimbursement <input type="checkbox"/> Other:	
Application/Award Deadline May 21, 2020	Requested Comm. Court May 18, 2020	Grant Period October 1, 2020 to September 30, 2023

Brief Description
The Collin County District Attorney Opioid Treatment Program (DAOTP) is a first of its kind pretrial diversion program to address opioid addiction in the criminal justice system and a collaborative effort among health care and mental health providers, probation, and prosecutors to provide those battling addiction the support, skills, and insight needed to break free. The proposed projects seeks to round out funding needed to administer the DAOTP and to provide participants with the services, medication and counseling needed to address their addiction while also ensuring that their most basic needs are also met. The cost for this will be \$1,036,649.00

Grant Categories / Funding Sources	Federal Funds	State Funds	Local Funds	County Match	In-Kind Match	Total
Personnel	\$ 235,113.00					\$ 235,113.00
Operating	\$801,536.00					\$ 801,536.00
Capital Equipment						\$ -
Indirect Costs						\$ -
Total	#####	\$ -	\$ -	\$ -	\$ -	#####
# of FTEs	1 FTE					0

Performance Measures Applicable Outcome Measures	Current FY Progress to Date				Next FY Projected
	Q1	Q2	Q3	Q4	
Ensure minimum of 95% of eligible committed participants seeking assistance are served					
Demonstrate maximum 10% increase yearly in participant enrollment.					
Graduate 15 from project by 3rd year.					

The Department named above is applying for the Grant Program named above, and if awarded, will accept full responsibility for the management of any funds awarded to the County under this grant, and will adhere to any policies and procedures set forth by the Grantor and its related agencies or agents, as well as those of the County, and its financial and administrative departments. To that end, please find enclosed the following items for initial review:

- Grant Summary Form
- Memo of request to Commissioner Court for application/award acceptance and approval
- Electronic copy of the original, completed application/award
- Approval to apply Court Order (for award only)
- All attachments, back-up documentation or amendments to be submitted to the Grantor

Completed by: <u>Asst. District Attorney Kim Laseter</u>	<u>/s/Kimberly Laseter</u>	<u>May 5, 2020</u>
Department Head / Designee Printed Name	Signature	Date

Grant Resource-Benefit Summary

Grant Title Comprehensive Opioid, Stimulant, and Substance Abuse Site-Bas		Contact Person (Grant Liaison) Kimberly Laseter	
Grant Period October 1, 2020 to September 30, 2023		Phone / Ext 4345	Department Collin County District Attorney's Office

<input type="checkbox"/> Preliminary
<input type="checkbox"/> Final

COUNTY RESOURCES REQUIRED

Match	Amount	Identify Match Source
1) Cash	\$ -	
2) In-Kind	\$ -	
<input type="checkbox"/> No Match Required		

Implementation / Start Up	Amount	Description
1) Equipment		
2) Training		
3) Inter-departmental / Other:		
<input type="checkbox"/> No Implem / Start-up Costs		

Operational / Maintenance	Amount	Description
1) Recurring Maintenance		
2) Salary / Benefits		
3) Continuing Ed / Training		
4) Office / Program Space		
5) Travel		
6) Other:		
<input type="checkbox"/> No Oper / Maintenance Costs		

NON-COUNTY RESOURCES REQUIRED

Match	Amount	Identify Match Source
1) Voluntary / Donation		

Benefits to County and Citizens