

# Collin County Grant Summary Form

<b>Department Name</b> MHMC		Submit completed form along with one <u>electronic copy</u> 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 <b>(972) 548-4638</b> .
<b>Contact Person (Grant Liaison)</b> Alyse Ferguson		
<b>Title</b> Managing Attorney	<b>Phone/ Extension</b> x4805	

Grant Description		
<b>Grant Title and Funding Year</b> Community Mental Health Grant Program FY 2020	<b>Funding Source</b> <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: <u>Private</u>	<b>Application Type</b> <input checked="" type="checkbox"/> New Grant <input type="checkbox"/> Renewal <input type="checkbox"/> Amendment
<b>Grantor (include sub-granting agencies)</b> Texas HHSC	<b>Payment Method</b> <input checked="" type="checkbox"/> Cost Reimbursement <input type="checkbox"/> Other:	
<b>Application/Award Deadline</b> December 9, 2019	<b>Requested Comm. Court Date</b> 11/25/2019	<b>Grant Period</b> September 1, 2020     to     August 31, 2022

**Brief Description**

Funding for the Collin County Mental Health Managed Counsel Program for a staff member for the purpose of Coordinated Release. The addition of this position of Coordinated Release Case Manager (CRCM) will provide services to inmates flagged with needs in the identified Gap areas and including those with Serious Mental illness, Substance use disorders, developmental disabilities, and Veterans. Inmates will be identified through Early Identification Notices from the Sheriff's Office. Annual salary, fringe benefits, and expenditures for the program.

Grant Categories / Funding Source	Federal Funds	State Funds	Local Funds	County Match	In-Kind	Total
Personnel		41,639		51,684		93,323
Operating		9,516		15,086		24,601
Capital Equipment						
Indirect Costs						
Total		51,155		66,770		117,925
FTEs						

Performance Measures Applicable Outcome Measures	FY 2014 Progress to Date				FY 2015 Projected
	Q1	Q2	Q3	Q4	

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
- ☒ An electronic copy of the original, completed Application/Award
- ☐ Court Order (for award only)
- ☒ All attachments, back-up documentation or amendments to be submitted to the Grantor in support of the application

Completed by: Alyse Ferguson		
Department Head / Designee Printed Name	Signature	Date