Collin County Grant Summary Form

COLLIN COUNTY HEALTH CARE SERVICES Contact Person (Grant Liaison) Taylor Burton Title Healthcare Coordinator Grant Title and Funding Year TUBERCULOSIS (TB) FEDERAL - FY 2023 Grantor (include sub-granting agencies) TEXAS DEPARTMENT OF STATE HEALTH SERVICES Brief Description Requested Comm. Court Application/Award Deadline Reducing the risk of communicable disease (TB) in the community through the TB Elimination Program as required in Texas Administrative Code Sections 97.2-97.8. Grant Categories / Funding Source Funding Source Application Type New Grant Requested Comm. Court Amendment			Journey Ora	THE Gairmina					
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. Phone / Extension 972-548-4464	Department Name	Submit completed form along with one electronic copy of the							
Commissioner Court meeting. If you have any questions ontact Janna Caponer at (972) 548-4638. Title Phone / Extension 972-548-4464	COLLIN COUNTY HEALTH C								
Title Phone Extension 972-548-4648 Phone Extension 972-548-4646 Projected	Contact Person (Grant Liais								
Phone Extension Phone Extension Phone Extension Prinding Source Payment Phone Phone Payment Phone Phone Payment Phone Ph	Taylor Burton								
Grant Title and Funding Year TUBERCULOSIS (TB) FEDERAL - FY 2023 Grantor (Include sub-granting agencies) TEXAS DEPARTMENT OF STATE HEALTH SERVICES Grant Categories /	Title	Phone / Extens	sion	Contact Janna	oaponera at (37)	2) 340-4030.			
Grant Categories / Federal Funds State Funds County Match In-Kind Match Indirect Costs Funding Source Say, 25, 2022 Siste	Healthcare Coordinator	972-548-4464							
TUBERCULOSIS (TB) FEDERAL - FY 2023 Grantor (Include sub-granting agencies) TEXAS DEPARTMENT OF STATE HEALTH SERVICES Payment Method Cost Reimbursement			Grant De	scription					
TUBERCULOSIS (TB) FEDERAL - FV 2023 Grantor (Include sub-granting agencies) TEXAS DEPARTMENT OF STATE HEALTH SERVICES Federal	Grant Title and Funding Yea	ır		Funding	Source	Applicat	tion Type		
Federal	TUBERCULOSIS (TB) FEDER	RAL - FY 2023		1_					
Other:				Federal		✓ Renewal			
Payment Method Other:	TEXAS DEPARTMENT OF S	TATE HEALTH SI	ERVICES	Other:		Amendm	ent		
Application/Award Deadline July 25, 2022 Brief Description Reducing the risk of communicable disease (TB) in the community through the TB Elimination Program as required in Texas Administrative Code Sections 97, 2-97.8. Federal Funds State Funds Local Funds County Match In-Kind Match Total Match Personnel									
Application/Award Deadline July 25, 2022 Brief Description Reducing the risk of communicable disease (TB) in the community through the TB Elimination Program as required in Texas Administrative Code Sections 97.2-97.8. Grant Categories / Funding Sources				✓ Cost Reim	-				
Brief Description Reducing the risk of communicable disease (TB) in the community through the TB Elimination Program as required in Texas Administrative Code Sections 97.2-97.8. Grant Categories / Funding Sources Personnel \$83,755.00 \$16,914.00 \$100,669.00	Application/Award Deadline	Requested Co	mm. Court						
Brief Description Reducing the risk of communicable disease (TB) in the community through the TB Elimination Program as required in Texas Administrative Code Sections 97.2-97.8. Grant Categories / Funding Sources Personnel Personnel S 83.755.00 S 16.914.00 S 100,669.00 Operating S 817.00 S 16.914.00 S 100,669.00 S 16.914.00 S 100,669.00 S 16.914.00 S 101,069.00 S 10		•					er 31 2023		
Reducing the risk of communicable disease (TB) in the community through the TB Elimination Program as required in Texas Administrative Code Sections 97.2-97.8. Grant Categories / Funding Sources Federal Funds State Funds Local Funds County Match Match Total Match General Funds S 83.755.00 S 16,914.00 S 100,669.00 S 817.00 S 81.00 S 817.00 S 81.00 S 817.00 S 81.00 S 81.00 S 817.00 S 81.00 S 817.00 S 81.00		, tagaot	10, 2022	barraary	1, 2020	Booting	01, 2020		
Grant Categories / Funding Sources Federal Funds State Funds Local Funds County Match In-Kind Match Total Match Personnel S 83,755.00 \$ 16,914.00 \$ 100,669.00 \$ 100,669.00 \$ 817.00 \$ 817.00 \$ 817.00 \$ 817.00 \$ \$ 817.00 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	•	cable disease (TF	3) in the commu	nity through the	TR Flimination F	rogram as regi	ired in Texas		
Grant Categories / Funding Sources Personnel Operating Capital Equipment Indirect Costs Total For Firs Performance Measures Applicable Outcome Measures Applicable Outcome Measures Outcome Meas				inty through the	TD LIIIIIIIIIIIIII	rogram as roqu	anca in Texas		
Personnel \$ 33,755.00 \$ 16,914.00 \$ \$100,669.00 \$ 100,669.00 \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ \$ 817.00 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Turning auto codo cocióno	07.2 07.0.							
Personnel \$ 33,755.00 \$ 16,914.00 \$ \$100,669.00 \$ 100,669.00 \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ \$ 817.00 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$									
Personnel \$ 33,755.00 \$ 16,914.00 \$ \$100,669.00 \$ 100,669.00 \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ \$ 817.00 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$									
Personnel \$ 33,755.00 \$ 16,914.00 \$ \$100,669.00 \$ 100,669.00 \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ 817.00 \$ \$ \$ 817.00 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$									
Personnel \$83,755.00 \$16,914.00 \$100,669.00	Grant Categories /	Fodoral Funds	State Funds	Local Funda	County Match	In-Kind	Total		
Capital Equipment Indirect Costs	Funding Sources	r ederai i dilus	State Funds	Local Fullus	· ·	Match			
Capital Equipment Indirect Costs Total \$ - \$ 84,572.00 \$ - \$ 16,914.00 \$ - \$ 101,486.00 \$ -	Personnel		\$ 83,755.00		\$ 16,914.00		\$ 100,669.00		
Total # of FTEs Set	Operating		\$ 817.00				\$ 817.00		
# of FTES Sal,572.00 Sal,5914.00 Sal,	Capital Equipment						\$ -		
Performance Measures Applicable Outcome Measures Applicable Outcome Measures Rewny-reported 15 cases must have an invited test performed unless there is documented evidence of an HIV-positive result or the All suspected and confirmed TB patients are placed on DOT at the start of treatment. Newly-reported suspected and committed cases of TB are started on the standard four-drewny-reported suspected and committed cases of TB are started on the standard four-drewny-reported suspected and committed cases of TB are started on the standard four-drewny-reported suspected and committed cases of TB are started on the standard four-drewny-reported suspected and committed cases of TB are started on the standard four-drewny-reported suspected and committed cases of TB are started on the standard four-drewny-reported suspected and committed cases of TB are started on the standard four-drewny-reported suspected and committed cases of TB are started on the standard four-drewny-reported suspected and committed cases of TB are started on the standard four-drewny-reported suspected and committed to the started on the standard four-drewny-reported suspected and committed to the County under this grant, and will adhere to any polices 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 acceptance and approval Electronic copy of the original, completed application/award acceptance and approval Approval to apply Court Order (for award only) All attachments, back-up documentation or amendments to be submitted to the Grantor	Indirect Costs						\$ -		
Performance Measures Applicable Outcome Measures Newly-reported To cases must have an invitest performed unless there is documented evidence of an HIV-positive result or the All suspected and confirmed TB patients are placed on DOT at the start of treatment. Newly-reported suspected and commined cases of TB are started on the standard four-discount cases of TB are started on the standard four-discount culture results must have documented conversion to south microlland 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 polices 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: CANDY BLAIR August 2, 2022	Total	\$ -	\$ 84,572.00	\$ -	\$ 16,914.00	\$ -	\$ 101,486.00		
Applicable Outcome Measures Q1 Q2 Q3 Q4 Projected Newsy-reported in Exases in its chave an inity test performed unless there is documented evidence of an HIV-nositive result or the All suspected and confirmed TB patients are placed on DOT at the start of treatment. Newsy-reported suspected and commined cases of TB are started on the standard four- Newsy-reported cases on TB with AFB-positive sputum culture results must have documented conversion to southum culture-negative within 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 polices 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: CANDY BLAIR August 2, 2022	# of FTEs		•				0		
Applicable Outcome Measures Q1 Q2 Q3 Q4 Projected Newsy-reported in Exases in its chave an inity test performed unless there is documented evidence of an HIV-nositive result or the All suspected and confirmed TB patients are placed on DOT at the start of treatment. Newsy-reported suspected and commined cases of TB are started on the standard four- Newsy-reported cases on TB with AFB-positive sputum culture results must have documented conversion to southum culture-negative within 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 polices 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: CANDY BLAIR August 2, 2022		_							
Newly-reported TB cases must have an FIV test performed unless there is documented evidence of an HIV-nositive result or the All suspected and confirmed TB patients are placed on DOT at the start of treatment. Newly-reported suspected and confirmed cases of TB are started on the standard four-drew regiments are sputum culture results must have documented conversion to southm culture-negative within 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 polices 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: CANDY BLAIR August 2, 2022	Performance Mea	sures		Current FY Pr	ogress to Date		Next FY		
test performed unless there is documented evidence of an HIV-positive result or the All suspected and confirmed TB patients are placed on DOT at the start of treatment. 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 polices 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: CANDY BLAIR August 2, 2022	Applicable Outcome N	Measures	Q1	Q2	Q3	Q4	Projected		
evidence of an HIV-positive result or the All suspected and confirmed TB patients are placed on DOT at the start of treatment. Newly-reported suspected and confirmed cases of TB are started on the standard four-fired regiment culture results must have documented conversion to sputum culture-negative within 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 polices 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: CANDY BLAIR August 2, 2022									
All suspected and confirmed TB patients are placed on DOT at the start of treatment. Newly-reported suspected and confirmed cases of TB are started on the standard four- Newly-rejiberted cases of TB with AFB-positive sputum culture results must have documented conversion to soutum culture-negative within 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 polices 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: CANDY BLAIR August 2, 2022									
placed on DOT at the start of treatment. Newly-reported suspected and commined cases of TB are started on the standard four- Newly-reported cases of TB with AFB-positive sputum culture results must have documented conversion to southwe culture-negative within 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 polices 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: CANDY BLAIR August 2, 2022									
cases of TB are started on the standard four- New year periphere cases or TB with AFB-positive sputum culture results must have documented conversion to soutum culture-negative within 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 polices 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: CANDY BLAIR August 2, 2022	I								
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 polices 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: CANDY BLAIR August 2, 2022	1 · · · · · · · · · · · · · · · · · · ·								
Sputum culture results must have documented conversion to sputum culture-negative within 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 polices 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: CANDY BLAIR August 2, 2022									
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 polices 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: CANDY BLAIR August 2, 2022	Newly-reported cases of 15 with AFB-positive								
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 polices 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: CANDY BLAIR August 2, 2022									
for the management of any funds awarded to the County under this grant, and will adhere to any polices 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: CANDY BLAIR Candy Blaur August 2, 2022	conversion to soutum culture-	negative within							
for the management of any funds awarded to the County under this grant, and will adhere to any polices 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: CANDY BLAIR Candy Blaur August 2, 2022	The Department named above	e is applying for th	e Grant Program	m named ahove	and if awarded	will accept full	responsibility		
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: CANDY BLAIR Candy Blaun August 2, 2022									
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: CANDY BLAIR Candy Blaur August 2, 2022									
 ✓ 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: CANDY BLAIR Candy Blaur August 2, 2022 									
 ✓ 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: CANDY BLAIR Candy Blaur August 2, 2022 									
 ✓ 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: CANDY BLAIR Candy Blaur August 2, 2022 		mmissioner Cour	t for application/	award acceptan	ice and approval				
All attachments, back-up documentation or amendments to be submitted to the Grantor Completed by: CANDY BLAIR Candy Blaur August 2, 2022					• •				
Completed by: CANDY BLAIR Candy Blaur August 2, 2022									
CANDY BLAIR Candy Blaur August 2, 2022	✓ All attachments, back-t	up documentation	or amendments	s to be submitted	d to the Grantor				
CANDY BLAIR Candy Blaur August 2, 2022	Completed by:								
			Randy Blaum			August 2 2022	•		
		d Name	•						

Grant Resource-Benefit Summary

Grant Title TUBERCULOSIS (TB) FEDERAL - FY 2023			Contact Person	☐ Preliminar			
			Taylor Burton				
Grant Period			Phone / Ext	Department			
January 1, 2023 to	December December	31, 2023	972-548-4464	COLLIN COUNTY HEALTH CARE SERVICE	OUNTY HEALTH CARE SERVICE		
COUNTY RESOURCES REQUIF	RED						
Match			Match Source	Benefits to County and Citizens Renewal grant for \$84,572.00 from the Texas Department of State Health Services for Tuberculosis (TB) program funding. The county's match as			
1) Cash	\$ 16,914.00	Existing staff salary/fringe					
2) In-Kind	\$ -			required by the contract is \$16,914.00. Both funds and the county's match funds will be us	the awarded renewal grant		
☐ No Match Required				salaries of several TB program staff member	s as part of the effort to		
Implementation / Start Up	Amount	De	scription	provide TB services for the community. The included in the contract are directed towards	the TB program's ability to		
1) Equipment				provide, evaluate, and treat individuals who a or have active TB disease. The TB clinic man			
2) Training				infected or ill patients from 6 months up to 2 treatment in order to ensure they successfull	years during the course of thei		
3) Inter-departmental / Other:				,	,,		
☐ No Implem / Start-up Costs							
Operational / Maintenance	Amount	De	scription				
1) Recurring Maintenance							
2) Salary / Benefits							
3) Continuing Ed / Training							
4) Office / Program Space							
5) Travel							
6) Other:							
☐ No Oper / Maintenance Costs	s						
NON-COUNTY RESOURCES RIMAtch	EQUIRED Amount	Identify I	Match Source				
Voluntary / Donation	/ whould	idonary i					