**Collin County Grant Summary Form** 

Department Name	0011111	Journey Ora	Submit complet	9	with one electro	onic conv of the	
Health Care Services	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						
Contact Person (Grant Liaison) Taylor Burton			Commissioner Court meeting. If you have any questions				
Title	Dhana / Evtan	-1	contact Janna C	Caponera at <b>(97</b>	<b>'2) 548-4638</b>		
		Phone / Extension					
Healthcare Coordinator	972-548-4464	Cront Do					
One at Title and Free din a V			scription	Carrea	Annline	tion Time	
Grant Title and Funding Year Infectious Disease Control Unit/ Surveillance and Epidemiology Activities (IDCU/SUR) FY 2024 - FY 2025						ation Type	
			Federal		<ul><li>New Grant</li><li>✓ Renewal</li></ul>		
Grantor (include sub-granting agencies) Texas Department of State Health Services					Amendment		
			Payment Method  ✓ Cost Reimbursement ☐ Other:				
Amuliantian/Amand Dandlin	a Daminatad Ca			bursement	Other:		
	oplication/Award Deadline Requested Comm. Court			Grant Period			
April 11, 2023 Brief Description	April 24,	2023	Septem	ber 1, 2023 to	Augu:	st 31, 2025	
The purpose of the IDCU/SU specifically the surveillance a	and epidemiology a	activities associa	ated with foodbor	ne and waterbo			
Salmonellosis, E. coli, Camp	oylobacteriosis, Cry	ptosporidiosis, a	and Cyclosporias	sis.			
Grant Categories /	<b>.</b>			County	In-Kind		
Funding Sources	Federal Funds	State Funds	Local Funds	Match	Match	Total	
Personnel		\$ 250,815.00				\$ 250,815.00	
Operating		\$ 91,631.00				\$ 91,631.00	
Capital Equipment							
Indirect Costs							
Total		\$ 342,446.00				\$ 342,446.00	
# of FTEs		·				1.15	
	•				•	•	
Performance Me	asures		Current FY Pro	ogress to Date		Next FY	
Applicable Outcome	Measures	Q1	Q2	Q3	Q4	Projected	
					<u> </u>		
The Department named abo							
for the management of any f							
forth by the Grantor and its r departments. To that end, p	_	-		•	iiiaiiciai aiid a	aummonanve	
_		a the following i	Cino ioi iiiliai le	V 1 C VV .			
<ul><li>✓ Grant Summary Form</li><li>✓ Memo of request to C</li></ul>		t for application	/award accentan	ce and approva	al		
✓ Electronic copy of the				oo ana appiove	41		
☐ Approval to apply Cou	urt Order (for award	d only)					
☑ All attachments, back			s to be submitted	d to the Grantor	٢		
Completed by:							
Candy Blair		Candy Blair			April 11, 2023		

## **Grant Resource-Benefit Summary**

<b>Grant Title</b> Infectious Disease Control Unit/Surveillance and Epidemiology Activities (IDCU/SUR) FY 2024 - FY 2025			Contact Person	(Grant Liaison)	☐ Preliminary
			Taylor Burton		☐ Final
Grant Period		Phone / Ext	Department		
September 1, 2023 to	August 31, 2025		972-548-4464	Health Care Services	
COUNTY RESOURCES REQUIRE					
Match	Amount	Identity N	Match Source	Benefits to County and Citizens	
1) Cash				The purpose of the IDCU/SUR funds	
2) In-Kind				local health departments in addressi specifically the surveillance and epic	lemiology activities
☐ No Match Required				associated with foodborne and wate	
Implementation / Start Up	Amount	Des	scription	Salmonellosis, E. coli, Campylobacto Cryptosporidiosis, and Cyclosporias	
1) Equipment				are responsible for the investigation, electronic reporting to DSHS of food	
2) Training				illnesses as required in the Texas Ad	dministrative Code §
3) Inter-departmental / Other:				97.3 for Collin County. By maintainir surveillance capacity, CCHCS is stri	
☐ No Implem / Start-up Costs				spread of foodborne and waterborne community.	e illnesses in our
Operational / Maintenance	Amount	Des	scription	Community.	
Recurring Maintenance					
2) Salary / Benefits					
3) Continuing Ed / Training					
4) Office / Program Space					
5) Travel					
6) Other:					
☐ No Oper / Maintenance Costs					
NON-COUNTY RESOURCES REC	QUIRED				
Match	Amount	Identify N	Match Source		
1) Voluntary / Donation					