Collin County Grant Summary Form

Department Name Health Care Services			Submit completed form along with one electronic copy of the grant application and all supporting documentation to the					
Contact Person (Grant Liaison)					not less than 14			
Taylor Burton			Commissioner Court meeting. If you have any questions					
Title	Phone / Extension			contact Janna Caponera at (972) 548-4638 .				
Assistant Public Health Director	972-548-4464							
Grant Description								
Grant Title and Funding Year Texas Epidemiology			Funding Source Application Type					tion Type
Capacity Expansion Grant (IDPS/SUR) FY2025 - FY2026			\checkmark	State			New Gra	nt
Grantor (include sub-granting agencies)			□ Federal ☑ Renewal					
Texas Department of State Health Services			□ Other: □ Amendment				ent	
					Paymen	t Met	hod	
			\checkmark	Cost Reim	nbursement		Other:	
Application/Award Deadline	Requested Co	mm. Court	Gra	nt Period				
February 13, 2025	July 21	1, 2025	September 1, 2025 to August 31, 2026					31, 2026
specifically the surveillance and Salmonellosis, E. coli, Campylo						ne IIIr	iesses suo	cn as
Grant Categories / Funding Sources	Federal Funds	State Funds	Lo	cal Funds	County Match		n-Kind Match	Total
Personnel		\$ 171,223.00			\$ 149,281.00			\$ 320,504.00
Operating		\$-						\$-
Capital Equipment								\$-
Indirect Costs		\$-						\$-
Total	\$-	\$ 171,223.00	\$	-	\$ 149,281.00	\$	-	\$ 320,504.00
# of FTEs		1						1
Performance Measures			Cui		ogress to Date			Next FY
Applicable Outcome Measures		Q1		Q2	Q3		Q4	Projected

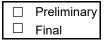
The Department named above is applying for the Grant Program named above, and if awarded, will accept full responsibility for the management of any funds awarded to the County under this grant, and will adhere to any polices and procedures set forth by the Grantor and its related agencies or agents, 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
- $\ensuremath{\boxdot}$ $\ensuremath{\square}$ Electronic copy of the original, completed application/award
- □ Approval to apply Court Order (for award only)
- I All attachments, back-up documentation or amendments to be submitted to the Grantor

Completed by:		
Taylor Burton	Taylor Burton	June 27, 2025
Department Head / Designee Printed Name	Signature 🥖	Date

Grant Resource-Benefit Summary

Grant Title Texas Epidemiology Capacity Expansion Grant			Contact Person (Grant Liaison)		
(IDPS/SUR) FY2025 - FY2026			aylor Burton		
Grant Period			Phone / Ext	Department	
September 1, 2025	to	August 31, 2026	972-548-4464	Health Care Services	



COUNTY RESOURCES REQUIRED

Match	Amount	Identify Match Source	Benefits to County and Citizens
1) Cash	\$ 149,281.00	Existing staff salary/fringe	The purpose of the IDPS/SUR fund deaprtments in addressing public h
2) In-Kind	\$ -	-	and epidemiology activites associa illnesses such as Salmonellosis, E
No Match Required			Cryptosporidosis, and Cyclosporia for the investigation, data entry, an
Implementation / Start Up	Amount	Description	foodbrone and waterborne illnesse Code § 97.3 for Collin County. By r
1) Equipment			surveillance capacity, CCHCS is st
2) Training			and waterborne illnesses in our co
3) Inter-departmental / Other:			
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:			
□ No Oper / Maintenance Costs			
			-
NON-COUNTY RESOURCES RE Match	QUIRED Amount	Identify Match Source	
	Amount		1

The purpose of the IDPS/SUR funds is to support efforts by local health deaprtments in addressing public health issues, specifically the surveillance and epidemiology activites associated with foodborne and waterborne llnesses such as Salmonellosis, E. coli, Campylobacteriosis, Cryptosporidosis, and Cyclosporiasis. The Epidemiologists are responsible for the investigation, data entry, and electronic reporting to DSHS of foodborne and waterborne illnesses as required in the Texas Administrative Code § 97.3 for Collin County. By maintaining our epidemiology and surveillance capacity, CCHCS is striving to reduce the spread of foodborne and waterborne illnesses in our community.

1) Voluntary / Donation