



Travis County Commissioners Court Agenda Request

Meeting Date: 02/05/2013, 9:00 AM, Voting Session

Prepared By/Phone Number: Alan Miller, Planning and Budget Office, 854-9726

Elected/Appointed Official/Dept. Head: Leslie Browder, County Executive
Planning and Budget

Commissioners Court Sponsor: Judge Samuel T. Biscoe

Review and approve requests regarding grant programs, applications, contracts and related special budgets, and permissions to continue:

- A. Annual application to the Texas Department of Public Safety, Texas Division of Emergency Management, to receive federal resources to continue the Emergency Management Performance Grant in the Emergency Services Department;
- B. Annual application to the Office of the Governor, Criminal Justice Division, to continue the Child Abuse Victim Services Personnel Grant in the Travis County Sheriff's Office;
- C. Application to the Texas Department of Transportation for the Travis County Sheriff's Office to continue to receive federal pass through funding for overtime resources for driving while intoxicated enforcement; and
- D. Response to an Internal Control Structure Questionnaire required as part of the FY 2013 Title IV-E Child Welfare Services Contract with the Texas Department of Family and Protective Services.

BACKGROUND/SUMMARY OF REQUEST AND ATTACHMENTS:

Items A, B, & C are routine applications to continue existing programs. Item D is requesting the Court review and approve an Internal Control Structure Questionnaire related to the existing FY 2013 Title IV-E Child Welfare Services Contract, this is an annual requirement of the grant.

STAFF RECOMMENDATIONS:

PBO recommends approval.

ISSUES AND OPPORTUNITIES:

Additional information is provided on the item's grant summary sheet.

FISCAL IMPACT AND SOURCE OF FUNDING:

There is no additional fiscal impact resulting from these requests.

REQUIRED AUTHORIZATIONS:

Planning and Budget Office
County Judge's Office

Leslie Browder
Melissa Velasquez

GRANT APPLICATIONS, CONTRACTS AND PERMISSIONS TO CONTINUE
FY 2013

The following list represents those actions required by the Commissioners Court for departments to apply for, accept, or continue to operate grant programs. This regular agenda item contains this summary sheet, as well as back-up material that is attached for clarification.

Application	Dept. Grant Title	Grant Period	Grant Award	County Cost Share	County Contribution	In-Kind Contribution	Program Total	FTEs	PBO Notes	Auditor's Assessment	Page #
A	147 Emergency Management Performance Grant	10/01/12 - 09/30/13	\$71,221	\$71,221	\$0	\$0	\$142,442	-	R	S	6
B	137 TCSO Child Abuse Victim Services Personnel	09/01/13 - 08/31/14	\$23,092	\$0	\$34,639	\$0	\$57,731	1.00	R	MC	46
C	137 TxDOT Impaired Driving Mobilization	03/1/13 - 09/30/13	\$16,906	\$5,684	\$0	\$0	\$22,590	-	R	MC	61
Status Report											
D	158 Title IV-E Child Welfare Services	10/01/12 - 09/30/13	\$36,488	\$81,190	\$0	\$0	\$117,678	-	R	MC	78

PBO Notes:

- R - PBO recommends approval.
- NR - PBO does not recommend approval
- D - PBO recommends item be discussed.

County Auditor's Complexity Assessment measuring Impact to their Office's Resources/Workload

- S - Simple
- MC - Moderately Complex
- C - Complex
- EC - Extremely Complex

FY 2013 Grant Summary Report
Grant Applications approved by Commissioners Court

The following is a list of grants for which application has been submitted since October 1, 2012, and the notification of award has not yet been received.

Dept	Name of Grant	Grant Term	Grant Award	County Cost Share	County Contribution	In-Kind Contribution	Program Total	FTEs	Approval Date
117	Southeast Travis County Historical Survey	10/01/12 - 09/30/14	\$7,500	\$0	\$6,000	\$1,500	\$15,000	-	10/30/2012
119	Underage Drinking Prevention Program	10/01/13 - 09/30/14	\$161,204	\$0	\$35,951	\$55,000	\$252,155	3.00	11/6/2012
124	Formula Grant- Indigent Defense Grants Program	10/01/12 - 09/30/13	\$441,998	\$0	\$0	\$0	\$441,998	-	11/27/2012
145	Juvenile probation Pre-Doctoral Psychology Internship Program	7/1/13- 6/30/14	\$34,306	\$0	\$0	\$0	\$34,306	-	12/4/2012
145	A Culture of Excellence: Enhancing Organizational Capacity to Exceed PREA Standards	4/1/2013- 3/31/2014	\$100,000	\$0	\$0	\$0	\$100,000	-	1/8/2013
145	Juvenile Treatment Drug Court	9/30/2013- 9/29/2014	\$199,970	\$0	\$0	\$0	\$199,970	-	1/8/2013
145	Juvenile Accountability Block Grant (JABG) Local Assessment Center	09/01/13 - 08/31/14	\$61,334	\$6,814	\$0	\$0	\$68,148	-	1/22/2013
158	Coming of Age (CNCS)	04/01/13 - 03/31/14	\$50,495	\$324,753	\$0	\$0	\$375,248	6.80	1/22/2013
			\$1,056,807	\$331,567	\$41,951	\$56,500	\$1,486,825	9.80	

*Amended from original agreement.

**FY 2013 Grant Summary Report
Grants Approved by Commissioners Court**

The following is a list of grants that have been received by Travis County since October 1, 2012

Dept	Name of Grant	Grant Term	Grant Award	County Cost Share	County Contribution	In-Kind Contribution	Program Total	FTEs	Approval Date
145	Travis County Eagle Resource Project	09/01/12 - 08/31/13	\$29,930	\$0	\$0	\$0	\$29,930	-	10/2/2012
145	Trama Informed Assessment and Response Program	09/01/12 - 08/31/13	\$192,666	\$0	\$0	\$0	\$192,666	0.50	10/2/2012
137	Sheriff's Office Command and Support Vessel*	9/1/12 - 3/31/13	\$250,000	\$0	\$0	\$0	\$250,000	-	10/16/2012
139	Travis County Adult Probation DWI Court	9/1/2012 - 8/31/2013	\$229,112	\$0	\$0	\$0	\$229,112	4.00	10/16/2012
147	Emergency Management Performance Grant	10/01/11 - 03/31/13	\$71,221	\$71,221	\$0	\$0	\$142,442	-	10/16/2012
119	Family Violence Protection Team*	10/1/2010 - 03/31/2012	\$699,507	\$168,239	\$0	\$0	\$867,746	4.50	10/23/2012
122	Family Drug Treatment Court	09/01/12 - 08/31/13	\$137,388	\$0	\$0	\$0	\$137,388	1.00	10/23/2012
145	Drug Court & In-Home Family Services	09/01/12 - 08/31/13	\$66,428	\$7,381	\$0	\$0	\$73,809	0.09	10/23/2012
158	Comprehensive Energy Assistance Grant*	01/01/12 - 12/31/12	\$4,546,172	\$0	\$0	\$0	\$4,546,172	-	10/23/2012
158	Low Income Home Energy Assistance Program (LIHEAP) Weatherization Program	04/01/12 - 03/31/13	\$817,334	\$0	\$0	\$0	\$817,334	-	10/23/2012
124	Travis County Veterans' Court	09/01/12 - 08/31/13	\$186,000	\$0	\$0	\$0	\$186,000	2.00	10/30/2012
142	Drug Diversion Court	09/01/12 - 08/31/12	\$132,585	\$0	\$0	\$0	\$132,585	1.00	10/30/2012
158	Parenting in Recovery II	09/30/12 - 09/29/13	\$500,000	\$0	\$214,286	\$0	\$714,286	2.00	11/6/2012
158	Targeted Low Income Weatherization Program (TLIWP)	10/01/12 - 12/31/12	\$42,061	\$0	\$0	\$0	\$42,061	-	11/6/2012
158	Seniors and Volunteers for Childhood Immunization (SVCI)	09/01/12 - 08/31/13	\$8,845	\$0	\$0	\$0	\$8,845	0.14	11/20/2012

Dept	Name of Grant	Grant Term	Grant Award	County Cost Share	County Contribution	In-Kind Contribution	Program Total	FTEs	Approval Date
158	Coming of age (DADS)	09/01/12 - 08/31/13	\$24,484	\$24,484	\$0	\$0	\$48,968	-	11/20/2012
158	DOE Weatherization Program	04/01/12 - 03/31/13	\$60,471	\$0	\$0	\$0	\$60,471	-	11/20/2012
158	Atmos Energy Share the Warmth	11/01/12 - 10/31/13	\$13,188	\$0	\$0	\$0	\$13,188	-	11/20/2012
139	Travis County Adult Probation DWI Court	09/30/12 - 09/29/13	\$206,515	\$0	\$0	\$0	\$206,515	2.85	11/27/2012
137	State Criminal Alien Assistance Program- SCAAP 12	07/01/10 - 06/30/11	\$492,999	\$0	\$0	\$0	\$492,999	-	11/27/2012
147	"Remembering When" Scholarship	12/02/12 - 11/01/13	\$4,000	\$0	\$0	\$0	\$4,000	-	11/27/2012
158	Comprehensive Energy Assistance Program (CEAP)*	1/1/12 - 12/31/12	\$4,546,172	\$0	\$0	\$0	\$4,546,172	4.00	12/4/2012
145	National School Lunch/Breakfast Program*	7/1/12 - 6/30/13	\$217,219	\$0	\$0	\$0	\$217,219	-	12/4/2012
158	Title IV-E Child Welfare Services	10/01/12 - 09/30/13	\$36,488	\$81,190	\$0	\$0	\$117,678	-	12/11/2012
137	2012 Byrne Justice Assistance Grant	10/01/12 - 09/30/15	\$86,000	\$0	\$0	\$0	\$86,000	-	12/18/2012
158	2012 Phase 30 Emergency Food and Shelter Program	04/01/12 - 03/31/13	\$25,000	\$0	\$0	\$0	\$25,000	-	12/18/2012
140	Safe Havens: Supervised Visitation and Safe Exchange program*	10/1/10 - 9/30/13	\$400,000	\$0	\$0	\$0	\$400,000	-	12/28/2012
145	Juvenile Front End Therapeutic Services Program*	09/01/11 - 08/31/12	\$17,617	\$0	\$0	\$0	\$17,617	-	1/22/2013
145	Residential Substance Abuse Treatment Program*	10/01/11 - 09/30/12	\$132,063	\$47,512	\$0	\$0	\$179,575	1.00	1/22/2013
145	Eagle Resource Project*	09/01/11 - 08/31/12	\$34,628	\$0	\$0	\$0	\$34,628	-	1/22/2013
137	Sheriff's Office Command & Support Vessel*	09/01/12 - 06/30/13	\$250,000	\$0	\$0	\$0	\$250,000	-	1/29/2013
			\$14,456,093	\$400,027	\$214,286	\$0	\$15,070,406	23.08	

*Amended from original agreement.

FY 2013 Grants Summary Report

Permission to Continue

Dept	Name of Grant	Grant Term per Application	Amount requested for PTC			Filled FTEs	PTC Expiration Date	Cm. Ct. PTC Approval Date	Cm. Ct. Contract Approval Date	Has the General Fund been Reimbursed?
			Personnel Cost	Operating Transfer	Total Request					
137	Child Abuse Victim Services Personnel**	9/1/12-8/31/13	\$8,920	\$0	\$8,920	1.00	10/31/2012	8/14/2012	N/A	Yes
119	Family Violence Accelerated Prosecution Program	9/1/12-8/31/13	\$12,620	\$0	\$12,620	1.00	10/31/2012	8/21/2012	N/A	Yes
122	Family Drug Treatment Court	09/01/12 - 08/31/13	\$10,922	\$0	\$10,922	1.00	10/31/2012	8/28/2012	N/A	No
124	Travis County Veterans Court	09/01/12 - 08/31/13	\$25,630	\$0	\$25,630	2.00	10/31/2012	8/28/2012	N/A	Yes
142	Drug Diversion Court	09/01/12 - 08/31/13	\$10,144	\$0	\$10,144	1.00	10/31/2012	8/28/2012	N/A	Yes
145	Juvenile Accountability Block Grant- Local Assessment Center	09/01/12 - 08/31/13	\$13,747	\$0	\$13,747	1.00	11/30/2012	8/28/2012	N/A	Yes
145	Residential Substance Abuse Treatment Program	10/01/12 - 09/30/13	\$15,046	\$0	\$15,046	1.00	12/31/2012	8/28/2012	N/A	Yes
158	Parenting in Recovery (PIR) FY 12	09/30/12 - 09/29/13	\$94,630	\$0	\$94,630	-	12/31/2012	9/25/2012	N/A	No
158	Parenting in Recovery (PIR) FY 13	09/30/12 - 09/29/13	\$84,756	\$0	\$84,756	-	12/31/2012	10/2/2012	N/A	No
158	Comprehensive Energy Assistance Program	1/1/2013-12/31/2013	\$29,196	\$200,000	\$229,196	4.00	3/31/2013	1/8/2013	N/A	No
Totals			\$305,611	\$200,000	\$505,611	12.00				



**TRAVIS COUNTY
FY 13 GRANT SUMMARY SHEET**

Check One:	Application Approval: <input checked="" type="checkbox"/>	Permission to Continue: <input type="checkbox"/>
	Contract Approval: <input type="checkbox"/>	Status Report: <input type="checkbox"/>
Check One:	Original: <input type="checkbox"/>	Amendment: <input type="checkbox"/>
Check One:	New Grant: <input type="checkbox"/>	Continuation Grant: <input checked="" type="checkbox"/>
Department/Division:	Travis County Emergency Services	
Contact Person/Title:	Pete Baldwin/Emergency Management Coordinator	
Phone Number:	512-974-0472	

Grant Title:	Emergency Management Performance Grant		
Grant Period:	From: <input type="text" value="Oct 1, 2012"/>	To: <input type="text" value="Sep 30, 2013"/>	
Fund Source:	Federal: <input checked="" type="checkbox"/>	State: <input type="checkbox"/>	Local: <input type="checkbox"/>
Grantor:	FEMA/ /Texas Division of Emergency Management		
Will County provide grant funds to a sub-recipient?	Yes: <input type="checkbox"/>	No: <input checked="" type="checkbox"/>	
Are the grant funds pass-through from another agency? If yes, list originating agency below.	Yes: <input type="checkbox"/>	No: <input checked="" type="checkbox"/>	
Originating Grantor:	FEMA/ /Texas Division of Emergency Management		

Budget Categories	Grant Funds	County Cost Share	Budgeted County Contribution #595010 (Cash Match)	In-Kind	TOTAL
Personnel:	\$ 71,221	\$ 71,221	\$ 0	\$ 0	\$ 142,442
Operating:	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Capital Equipment:	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Indirect Costs:	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Totals:	\$ 71,221	\$ 71,221	\$ 0	\$ 0	\$ 142,442
FTEs:	3.00	0.00	0.00	0.00	3.00

Permission to Continue Information					
Funding Source (Cost Center)	Personnel Cost	Operating Cost	Estimated Total	Filled FTE	PTC Expiration Date
	\$ 0	\$ 0	\$ 0	0.00	

Department	Review	Staff Initials	Comments
County Auditor	<input type="checkbox"/>		
County Attorney	<input type="checkbox"/>		

Performance Measures					
#	Measure	Actual FY 11 Measure	Projected FY 12 Measure	Projected FY 13 Measure	Projected FY 14 Measure
+ -	Applicable Departmental Measures				
1.	Assist Cities/Agencies	10	30	30	30
2.	Emergency Mgt Training Provided	4	12	12	12
3.	Drills/Activations	1	8	5	8
+ -	Measures for the Grant				
1.					
	Outcome Impact Description				
2.					
	Outcome Impact Description				
3.					
	Outcome Impact Description				

PBO Recommendation:

Travis County has received this grant for several years to support the activities of the Office of Emergency Management. The match requirements for this grant are met through existing staff, no new match is required and there is no obligation to continue the grant if approved. PBO recommends approval.

1. Brief Narrative - Summary of Grant: What is the goal of the program? How does the grant fit into the current activities of the department? Is the grant starting a new program, or is it enhancing an existing one?

The Emergency Management Performance Grant (EMPG) has been received by Travis County OEM for the past fifteen years. The purpose of the grant is to help pay for emergency management activities. The Travis County OEM has maintained State and Federal requirements to keep the program in compliance. The work plan that is associated with the EMPG incorporates what is being done at this time. The EMPG enhances the existing Travis County OEM program. In previous years Travis County OEM received the amounts between \$58,000 and \$78,000.

2. Departmental Resource Commitment: What are the long term County funding requirements of the grant?

There are no long term funding requirements.

3. County Commitment to the Grant: Is a county match required? If so, how does the department propose to fund the grant match? Please explain.

The EMPG is a 50-50 match that is reimbursed after expenditures. Travis County uses the budgeted salaries of the three OEM FTEs as the match.

4. Does the grant program have an indirect cost allocation, in accordance with the grant rules? If not, please explain why not.

The EMPG states "In order to be allowable, indirect costs must be covered by an approved cost allocation plan. Salaries and administrative expenses of performing audits and eligible costs that cross program lines for programs authorized by the Federal Civil Defense Act of 1950, as amended, but which are not covered by a cost allocation plan, may be charged under the EMPG Program as direct costs."

5. County Commitment to the Program Upon Termination of the Grant: Will the program end upon termination of the grant funding: Yes or No? If No, what is the proposed funding mechanism: (1) Request additional funding or (2) Use departmental resources. If (2), provide details about what internal resources are to be provided and what other programs will be discontinued as a result.

The Travis County OEM is funded under normal budget procedures and would not be discontinued with the loss of the EMPG.

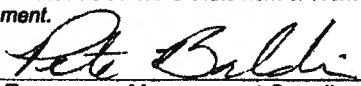
6. If this is a new program, please provide information why the County should expand into this area.

The EMPG is an enhancement of an existing program.

7. Please explain how this program will affect your current operations. Please tie the performance measures for this program back to the critical performance measures for your department or office.

The EMPG allows Travis County to meet costs associated with a shared Emergency Operations Center without requesting appropriations from the general fund and to acquire needed equipment and support services. This will assist Travis County OEM in meeting the performance measures for providing emergency management planning activities.

FISCAL YEAR 2013 EMERGENCY MANAGEMENT PERFORMANCE GRANT APPLICATION

1. APPLICANT NAME (Jurisdiction): Travis County			
2. COUNTY: Travis	3. DISASTER DISTRICT: 6B		
4. EMPG STATUS: <input checked="" type="checkbox"/> Current EMPG Program participant <input type="checkbox"/> New EMPG Program applicant			
5. PROGRAM PARTICIPANTS: (List all jurisdictions that are participants in your emergency management program. Identify any jurisdictions that have joined or withdrawn from your program in the last year.)) Bee Cave, Briarcliff, Creedmoor, Point Venture, Village of Webberville, Volente, Jonestown, Lago Vista, Manor, Mustang Ridge, Pflugerville, Rollingwood, San Leanna, Sunset Valley, The Hills, West Lake, City of Lakeway.			
6. CHECKLIST OF APPLICATION ATTACHMENTS: (See the FY 2013 <i>Emergency Management Performance Grant (EMPG) Guide</i> for information on completing these forms.)			
<input checked="" type="checkbox"/> Designation of Grant Officials (TDEM-17B) <input checked="" type="checkbox"/> Statement of Work & Cumulative Progress Report (TDEM-17A) - This form shall be signed by the EMC <input checked="" type="checkbox"/> EMPG Staffing Pattern (TDEM-66) - The Authorized Official shall sign this form <input checked="" type="checkbox"/> Application for Federal Assistance (TDEM-67) -The Authorized Official shall sign this form <input checked="" type="checkbox"/> EMPG Staff Job Description (TDEM-68) - A current job description is required for each staff member listed in the FY 2013 EMPG Staffing Pattern (TDEM-66) <input checked="" type="checkbox"/> FEMA Form 20-16 Summary Sheet for Assurances & Certifications - Shall be signed by an Authorized Official Attached: <input checked="" type="checkbox"/> FEMA Form 20-16A, Assurances – Non-Construction Programs <input checked="" type="checkbox"/> FEMA Form 20-16C, Certifications Regarding Lobbying, Debarment, Suspension, & Other Responsibility Matters; and Drug-Free Workplace Requirements <input type="checkbox"/> FEMA Form SF LLL, Disclosure of Lobbying Activities - Signed by the Authorized Official required only if the applicant performs lobbying to influence federal actions <input checked="" type="checkbox"/> Direct Deposit Authorization (form 74-146) or Application for Payee ID Number (form AP-152) - The Grant Financial Officer shall sign this form <input checked="" type="checkbox"/> Travel Policy Certification (TDEM-69) - The Grant Financial Officer shall sign this form			
7. CERTIFICATION: <i>This Application, together with the approved EMPG Statement of Work & Cumulative Progress Report (TDEM-17A), constitutes the annual work plan for the emergency management program whose participants are listed above. The undersigned agree to exert their best efforts to accomplish all activities listed in the Statement of Work & Cumulative Progress Report approved by the Texas Division of Emergency Management.</i>			
Authorized Official (Original Signature)	Date	 Emergency Management Coordinator (Original Signature)	Date
Printed Name Samuel T. Biscoe	Printed Name: Pete Baldwin		

Mall completed forms and application materials to:

Grant Coordinator
 Office of Management and Budget
 Texas Division of Emergency Management
 Texas Department of Public Safety
 PO Box 4087
 Austin, TX 78773-0223

**FISCAL YEAR 2013
DESIGNATION OF EMPG GRANT OFFICIALS**

APPLICANT NAME (Jurisdiction): Travis County	
EMERGENCY MANAGEMENT COORDINATOR*	
NAME	<input checked="" type="checkbox"/> Mr. <input type="checkbox"/> Ms. Pete Baldwin *If newly appointed, attach form DEM-147
Official Mailing Address Please include mail stop code	Travis County Department of Emergency Services PO Box 1748 Austin, TX 78767
Daytime Phone Number	(512) 974-0472
Fax Number	(512) 974-0499
E-mail Address	Pete.baldwin@co.travis.tx.us
GRANT FINANCIAL OFFICER (CANNOT BE EMC)	
NAME	<input type="checkbox"/> Mr. <input checked="" type="checkbox"/> Ms. Nicki Riley
Title	County Auditor
Official Mailing Address Please include mail stop code.	Travis County Auditor PO Box 1748 Austin, Texas 78767
Daytime Phone Number	(512) 854-9125
Fax Number	(512) 854-9164
E-mail Address	
AUTHORIZED OFFICIAL (MAYOR, COUNTY JUDGE, CITY MANAGER)	
NAME	<input checked="" type="checkbox"/> Mr. <input type="checkbox"/> Ms. Samuel T. Biscoe
Title	Travis County Judge
Official Mailing Address Please include mail stop code.	Travis County Judge PO Box 1748 Austin, Texas 78767
Daytime Phone Number	(512) 854-9555
Fax Number	(512-) 854-9535
E-mail Address	Sam.biscoe@co.travis.tx.us

FISCAL YEAR 2013 EMPG STATEMENT OF WORK & CUMULATIVE PROGRESS REPORT

APPLICANT NAME (Jurisdiction):				
Document	Submitted By	Date	TDEM Review By	Date
Statement of Work	S Moore-Guajardo	1/31/13		
Progress Report #1				
Progress Report #2				
TASK 1—WORK PLAN & SEMIANNUAL PROGRESS REPORT				
<input checked="" type="checkbox"/> Work Plan	Our jurisdiction will submit an EMPG Application, two Progress Reports, and four Quarterly Financial Reports Our jurisdiction has appointed a NIMSCAST point of contact, established a NIMSCAST account, and is 100% compliant with FY 2009 NIMSCAST objectives and metrics			
<input type="checkbox"/> Progress Report #1	<input type="checkbox"/> This Progress Report # 1 is being submitted to the TDEM Preparedness Section <input type="checkbox"/> First & Second Quarter Financial Reports have been submitted to TDEM Support Services			
<input type="checkbox"/> Progress Report #2	<input type="checkbox"/> This Progress Report # 2 is being submitted to the TDEM Preparedness Section <input type="checkbox"/> Third & Fourth Quarter Financial Reports have been submitted to TDEM Support Services			
TASK 2—LEGAL AUTHORITIES FOR EMERGENCY MANAGEMENT PROGRAM				
<input checked="" type="checkbox"/> Work Plan	Our jurisdiction will maintain current legal documents establishing our emergency management program <input checked="" type="checkbox"/> Our NIMSCAST account is 100% compliant with all objectives and metrics <input checked="" type="checkbox"/> Our TRRN registration completed and resources entered <input checked="" type="checkbox"/> Our legal documents are current & on file with TDEM; no additional action is required <input type="checkbox"/> Our jurisdiction will prepare or update & submit to TDEM: <ul style="list-style-type: none"> <input type="checkbox"/> Commissioner's Court Order # <input type="checkbox"/> City Ordinance(s) for: <input type="checkbox"/> Updated Joint Resolution dated: <input type="checkbox"/> NIMS Adoption dated: 			
<input type="checkbox"/> Progress Report #1 October 1 – March 31	<input type="checkbox"/> Our NIMSCAST account is 100% compliant with all objectives and metrics <input type="checkbox"/> Our TRRN registration completed and resources entered <input type="checkbox"/> Our legal documents are current & on file with TDEM, no additional action is required <input type="checkbox"/> Our jurisdiction completed & submitted to TDEM: <ul style="list-style-type: none"> <input type="checkbox"/> Commissioner's Court Order # <input type="checkbox"/> City Ordinance(s) for: <input type="checkbox"/> Updated Joint Resolution dated: <input type="checkbox"/> NIMS Adoption dated: 			
<input type="checkbox"/> Progress Report #2 April 1- September 30	<input type="checkbox"/> Our NIMSCAST account is 100% compliant with all objectives and metrics <input type="checkbox"/> Our TRRN registration completed and resources entered <input type="checkbox"/> Our legal documents are current & on file with TDEM, no additional action is required <input type="checkbox"/> Our jurisdiction completed & submitted to TDEM: <ul style="list-style-type: none"> <input type="checkbox"/> Commissioner's Court Order # <input type="checkbox"/> City Ordinance(s) for: <input type="checkbox"/> Updated Joint Resolution dated: <input type="checkbox"/> NIMS Adoption dated: 			

TDEM-17A
11/2012

Mail completed form to:

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Grant Coordinator
Office of Management and Budget
Texas Division of Emergency Management
Texas Department of Public Safety
P O Box 4087
Austin, TX 78773-0223

TASK 3—PUBLIC EDUCATION/INFORMATION	
<input checked="" type="checkbox"/> Work Plan	<input type="checkbox"/> Option 1: Our jurisdiction will conduct 30 hours of hazard awareness activities for local citizens <p style="text-align: center;">– OR A COMBINATION OF –</p> <input checked="" type="checkbox"/> Option 2: Our jurisdiction will prepare & distribute public education/information materials to a <u>substantial portion</u> of the community. In the space below, describe the materials to be distributed: Travis County OEM sponsors the month of July In the City of Austin's 2013 Home Safety Calendar providing safety recommendations associated with the use of Fireworks. 16,000 calendars will be printed and distributed. <p style="text-align: center;">**You may provide a combination of both options.</p>
<input type="checkbox"/> Progress Report #1 October 1 – March 31	<input type="checkbox"/> Our jurisdiction completed the following hazard awareness and/or public education/information activities: <input type="checkbox"/> No Task 3 progress was made this report period.
<input type="checkbox"/> Progress Report #2 April 1 – September 30	<input type="checkbox"/> Our jurisdiction completed the following hazard awareness and/or public education/information activities: <input type="checkbox"/> No Task 3 progress was made this report period.
TASK 4—EMERGENCY MANAGEMENT PLANNING DOCUMENTS	
<input checked="" type="checkbox"/> Work Plan	<input checked="" type="checkbox"/> Our jurisdiction reviewed our emergency management plan & annexes for currency and NIMS compliance <input checked="" type="checkbox"/> Our emergency management plan and all annexes are current and NIMS compliant <input type="checkbox"/> We will develop, update, or change these planning documents: <input type="checkbox"/> Basic Plan Annexes: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/> F <input type="checkbox"/> G <input type="checkbox"/> H <input type="checkbox"/> I <input type="checkbox"/> J <input type="checkbox"/> K <input type="checkbox"/> L <input type="checkbox"/> M <input type="checkbox"/> N <input type="checkbox"/> O <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> R <input type="checkbox"/> S <input type="checkbox"/> T <input type="checkbox"/> U <input type="checkbox"/> V <input type="checkbox"/> Other documents: NOTE: Plans & annexes dated prior to September 30, 2008 must be revised or updated this year. All Plans and Annexes must be NIMS compliant.
<input type="checkbox"/> Progress Report #1 October 1 – March 31	<input type="checkbox"/> Our jurisdiction reviewed our emergency management plan & annexes for currency and NIMS compliance <input type="checkbox"/> Our emergency management plan and all annexes are current and NIMS compliant <input type="checkbox"/> We updated by revision or change these planning documents: <input type="checkbox"/> Basic Plan Annexes: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/> F <input type="checkbox"/> G <input type="checkbox"/> H <input type="checkbox"/> I <input type="checkbox"/> J <input type="checkbox"/> K <input type="checkbox"/> L <input type="checkbox"/> M <input type="checkbox"/> N <input type="checkbox"/> O <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> R <input type="checkbox"/> S <input type="checkbox"/> T <input type="checkbox"/> U <input type="checkbox"/> V <input type="checkbox"/> Other documents:
<input type="checkbox"/> Progress Report #2 April 1 – September 30	<input type="checkbox"/> Our jurisdiction reviewed our emergency management plan & annexes for currency and NIMS compliance <input type="checkbox"/> Our emergency management plan and all annexes are current and NIMS compliant <input type="checkbox"/> We updated by revision or change these planning documents: <input type="checkbox"/> Basic Plan Annexes: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/> F <input type="checkbox"/> G <input type="checkbox"/> H <input type="checkbox"/> I <input type="checkbox"/> J <input type="checkbox"/> K <input type="checkbox"/> L <input type="checkbox"/> M <input type="checkbox"/> N <input type="checkbox"/> O <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> R <input type="checkbox"/> S <input type="checkbox"/> T <input type="checkbox"/> U <input type="checkbox"/> V

	<input type="checkbox"/> Other documents:
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TASK 5— TEP, NOTIFICATION AND EXERCISE PARTICIPATION

<input checked="" type="checkbox"/> Work Plan	<p>Training and Exercise Plan</p> <p>Each jurisdiction must develop and submit a multi-year Training and Exercise Plan (TEP), not less than three years, to the TDEM Exercise Unit @ TDEM.EXERCISES@dps.texas.gov .</p> <p>Each jurisdiction must submit the Pre-Exercise Notification Form to the TDEM Exercise Unit not less than 45 days prior to a planned exercise event.</p> <p>Each jurisdiction must submit an After Action Report (AAR) and Improvement Plan (IP) for a minimum of two (2) discussion-based exercises and one (1) operations-based exercise. All AARs/IPs all exercise activities to the TDEM Exercise unit not more than 45 days after the conclusion of the exercise.</p> <p><u>Real world events are currently allowed.</u></p> <p><i>NOTE: A Full-Scale exercise must be conducted every three (3) years.</i></p>
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REQUIRED EXERCISE SCHEDULE

Performance Period	Exercise Type	Exercise Name & Exercise Date	Quarter of Year
Fiscal Year 2013 (October 1, 2012 - September 30, 2013)	<input checked="" type="checkbox"/> Discussion Based	Formula 1 Race Event 11/16-11/18	<input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4
	<input checked="" type="checkbox"/> Discussion Based		<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> 3 <input type="checkbox"/> 4
	<input type="checkbox"/> Operational Based		<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4
	<input type="checkbox"/> Real World Event		<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4
	<input checked="" type="checkbox"/> Full Scale	Urban Shield – 12/1 – 12/2	<input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4
Our last Full-Scale exercise was conducted on (date): December 1 & 2, 2012			

<input type="checkbox"/> Progress Report #1 October 1 – March 31	We conducted the following exercises and provided documentation to TDEM: Name of Submitter: _____ Date submitted: _____			
	Exercise Type	Exercise Name	Exercise Date	EMPG Funded Y/N
	<input type="checkbox"/> Discussion <input type="checkbox"/> Discussion <input type="checkbox"/> Operation <input type="checkbox"/> Real World Event <input type="checkbox"/> Full Scale			
<input type="checkbox"/> Our jurisdiction completed NO exercise and did not request credit for an real world event <input type="checkbox"/> Exercise approved documentation attached				

<input type="checkbox"/> Progress Report #2 April 1 – September 30	We conducted the following exercises and provided documentation to TDEM: Name of Submitter: _____ Date Submitted _____			
	Exercise Type	Exercise Name	Exercise Date	EMPG Funded Y/N
	<input type="checkbox"/> Discussion <input type="checkbox"/> Discussion <input type="checkbox"/> Operation <input type="checkbox"/> Real World Event <input type="checkbox"/> Full Scale			
<input type="checkbox"/> Our jurisdiction completed NO exercise and did not request credit for an real world event <input type="checkbox"/> Exercise approved documentation attached				

TASK 6—TRAINING FOR EMERGENCY MANAGEMENT PERSONNEL

<input checked="" type="checkbox"/> Work Plan	ALL EMPG-funded emergency management personnel will participate in the following training during FY 2013:		
	Position & Name	Course Name or Number	
	Pete Baldwin	G270.4	
	Stacy Moore-Guajardo/Asst. EMC Stacy Moore-Guajardo/Asst. EMC	G – 270 G-703/ Resource Management	
<input type="checkbox"/> Progress Report #1 October 1 – March 31	Emergency management personnel completed the following training and documentation is attached:		
	Position & Name	Course Name or Number	Date Completed
	<input type="checkbox"/> No training took place this report period.		
<input type="checkbox"/> Progress Report #2 April 1 – September 30	Emergency management personnel completed the following training and documentation is attached:		
	Position & Name	Course Name or Number	Date Completed
	<input type="checkbox"/> No training took place this progress report period.		

TASK 7—EMERGENCY MANAGEMENT TRAINING FOR OTHER PERSONNEL				
<input checked="" type="checkbox"/> Work Plan	Our jurisdiction will conduct or arrange emergency management related training for elected officials, other local officials, & support agencies.			
<input type="checkbox"/> Progress Report #1 October 1 – March 31	The following formal training courses were taught or contracted:			
	Date	Course Title	Class Description	# Trained
<input type="checkbox"/> No training took place this progress report period.				
<input type="checkbox"/> Progress Report #2 April 1 – September 30	The following formal training courses were taught or contracted:			
	Date	Course Title	Class Description	# Trained
<input type="checkbox"/> No training took place this progress report period.				
TASK 8—EMERGENCY MANAGEMENT ORGANIZATIONAL DEVELOPMENT				
<input checked="" type="checkbox"/> Work Plan	Our jurisdiction will participate in the following emergency management organizational development activities: 2013 State Emergency Management Conference			
<input type="checkbox"/> Progress Report #1 October 1 – March 31	Our jurisdiction completed the following staff development activities:			
<input type="checkbox"/> Progress Report #2 April 1 – September 30	Our jurisdiction completed the following staff development activities:			

APPLICANT NAME:

REMARKS
(Use an Additional Sheet if Necessary)

**FISCAL YEAR 2013
EMPG STAFFING PATTERN**

1. APPLICANT NAME (as is appears on EMPG application)				2. COUNTY		
Travis County				Travis		
3. FULL-TIME EMPLOYEES <i>(including those who work all or only a portion of their time in emergency management duties)</i>	4. Gross Annual Salary	5. Gross Annual Benefits	6. Gross Salary & Benefits (4+5)	7. % Work in EM Duties	8. Salary & Benefits for EM (6x7)	9. Est EM Travel Costs
Name: Pete Baldwin						
Position: EMC	92,629.92	29,972.50	122,602.42	100%	122,602.42	1,000.00
Name: Stacy Moore - Guajardo						
Position: Asst. EMC	69,127.20	20,953.67	90,080.87	100%	90,080.87	1,000.00
Name: Patrice Reisen						
Position: Emergency Planner	47,605.87	17,728.84	65,334.71	100%	65,334.71	1,000.00
Name:			0.00		0.00	
Position:			0.00		0.00	
Name:			0.00		0.00	
Position:			0.00		0.00	
Name:			0.00		0.00	
Position:			0.00		0.00	
A. SUBTOTAL:					278,018.00	3,000.00

10. PART-TIME EMPLOYEES	11. % of Full Time	12. Gross Annual Salary	13. Gross Annual Benefits	14. Gross Salary & Benefits (12+13)	15. % Work in EM Outies	16. Salary & Benefits for EM (14x15)	17. Est EM Travel Costs
Name:				0.00		0.00	
Position:				0.00		0.00	
Name:				0.00		0.00	
Position:				0.00		0.00	
Name:				0.00		0.00	
Position:				0.00		0.00	
Name:				0.00		0.00	
Position:				0.00		0.00	
Name:				0.00		0.00	
Position:				0.00		0.00	
B. SUBTOTAL:						0.00	0.00
TOTAL:						278,018.00	3,000.00

CERTIFICATION: <i>I certify that no individual listed above holds an elected office.</i>
Signature of Authorized Official:
Printed name of Authorized Official: Pete Baldwin
Date Signed:

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**FISCAL YEAR 2013
APPLICATION FOR FEDERAL ASSISTANCE**
(Instructions on Reverse)

NAME OF PROGRAM/ ASSISTANCE: EMERGENCY MANAGEMENT PERFORMANCE GRANT (EMPG)		1. CFDA NUMBER: 97.042		2. APPLICANT STATUS: New Applicant <input type="checkbox"/> Renewal <input checked="" type="checkbox"/>		
3. FEDERAL FISCAL YEAR: FY 2013		4. START DATE: OCTOBER 1, 2012		5. END DATE: SEPTEMBER 30, 2013		
6. APPLICANT INFORMATION						
a. Legal Name of Applicant Organization (as it appears on the EMPG Application (TDEM-17): Travis County			b. Name & Telephone Number of Emergency Management Coordinator: Pete Baldwin 512-974-0472			
c. Mailing Address: PO Box 1748 Austin, TX 78767 Employer Identification Number/Tax ID# 74-6000192			d. Physical Address (if different from Mailing Address): CTECC 5010 Old Manor Rd Austin, TX 78723			
7. EMPG PERSONNEL SUMMARY (Include only those staff that will be paid with EMPG funds):						
a. Number of EMPG Staff & Percentage of Time Worked in Emergency Management Duties:						
	# Staff	Percent	# Staff	Percent	# Staff	Percent
1) Full Time:	3	100%				
2) Part Time						
b. Total Number of EMPG-Funded Personnel: 3						
8. ESTIMATED EXPENSES:						
a. Salary & Benefits (from line 18, form TDEM-66)					\$278,018	
b. Travel Expenses (from line 19 form TDEM-66)					\$3,000	
c. Other Expenses (from section 11 on reverse)					\$857.00	
d. Total Expenses (A + B + C)					\$281,875	
e. Federal Share (D x .50)					\$140,937.50	
Note: If you cannot meet the cash match requirement, check the box below and attach a match proposal as specified in Section 2 of the <i>Local Emergency Management Performance Grant Guide</i> . TDEM must review and approve any exceptions made to the cash match requirement at the time of application. <input type="checkbox"/> Cash Match Exception Requested						
9. CERTIFICATION: I certify that to the best of my knowledge and belief this application and its attachments are true and correct.						
a. Typed Name of Authorized Official:			Samuel T. Biscoe			
b. Title of Authorized Official:			Travis County Judge			
c. Original Signature of Authorized Official:						
d. Date Signed:						

EMPG STAFF JOB DESCRIPTION

Jurisdiction Name	Travis County
Staff Member Name	Pete Baldwin
Position Title	Emergency Management Coordinator
Description Prepared By	Travis County Human Resources
Date Prepared	

JOB DESCRIPTION

Current Job Description Attached

See Below

A. Provide a general description of the duties performed by this staff member.

B. If this staff member performs both emergency management duties and other duties, identify the specific emergency management duties performed.

**Travis County Human Resources Management Department
Job Description DRAFT**

Job Title: 9 Emergency Mgmt Coord

Job Code: 24245

Pay Grade: 24

Effective Date: 09/16/04

SUMMARY OF FUNCTION:

Develops, coordinates, implements, manages and monitors the Travis County Emergency Operations Plan to meet local, state and federal requirements. Works with other departments and agencies to prepare for emergencies. Advises Commissioners Court, Elected Officials, Appointed Officials and department heads on status of response and recovery operations. Represents Travis County on local, regional and state emergency management issues. Coordinates response and recovery activities during disasters.

DISTINGUISHING CHARACTERISTICS:

This is in a Public Safety/Emergency Management series of job classifications. This classification supervises the emergency management program. This classification is distinguished by the incumbent's focus on the emergency management program being coordinated, rather than having responsibility for the entire work unit. This classification requires a flexible work schedule to meet the needs of the department. This classification requires a flexible work schedule during a state of emergency.

EXAMPLES OF WORK PERFORMED:

- | | Essential (E)
or Non-
Essential (N) |
|---|---|
| • Coordinates development and implementation of departmental and countywide emergency option plans. Coordinates initial and ongoing assessments of risks and services necessary to assure that any interruption of county services is minimized. | E |
| • Coordinates development of internal emergency operating procedures and action plans. Manages the test plan elements and disaster exercises. | E |
| • Facilitates involvement of regional and county agencies in coordinating and planning committees for disaster preparedness, response and recovery. | E |
| • Develops and monitors department annual budget, including grants. | E |
| • Responds to Emergency Operations Center when notified of emergency conditions. Directs the response and recovery efforts of Travis County during disasters. Advises Commissioners Court, Elected Officials, Appointed Officials and department heads on status of response and recovery operations. | E |
| • Attends training programs, including required and optional courses. Provides emergency management training to departments and other agencies. Represents county at various meetings with other agencies. | E |
| • Performs other job-related duties as assigned. | N |

QUALIFICATION REQUIREMENTS:

Education and experience equivalent to:

Bachelor's degree in Emergency Management, Public Administration, Business Management, Criminal Justice or a directly related field AND five (5) years of directly related increasingly responsible managerial experience in the public safety field that may include emergency management, fire service, law enforcement, or emergency medical services; industrial safety, business or government continuity planning, or related field, including three (3) years of mid- to senior level supervisory experience or management experience.

Preferred:

Completion of Professional Development Series Course from FEMA.

License:

Possession of a valid Texas Driver's License.

**Travis County Human Resources Management Department
Job Description DRAFT**

Job Title: 9 Emergency Mgmt Coord

Job Code: 24245

Pay Grade: 24

Effective Date: 09/16/04

KNOWLEDGE, SKILLS, AND ABILITIES:

Knowledge of:

- Public administration and governmental agencies.
- Legislative process.
- Principles of emergency management administration.
- Policies, practices, procedures and terminology.
- Federal, State, Local, and County applicable laws, rules and regulations, codes, and guidelines.
- State and Federal regulatory or administrative requirements and practices.
- Standard management theory, principles, practices, and techniques.
- Management and supervisory principles, practices and techniques.
- Budgetary and fiscal process.
- Supervisory principles, practices and techniques.
- Online computer searching, and internet.
- Computer equipment to include word processing, windows, spreadsheets and databases.
- Business letter writing, grammar and punctuation and report preparation.

Skill In:

- Researching and analyzing emergency management related issues.
- Supervising others, including team building.
- Meeting emergencies.
- Research, analysis, compiling, preparing and presenting technical data/information and reports.
- Explaining complicated technical problems in simple non-technical language.
- Facilitating cooperative group decision making among diverse organizations and individuals.
- Planning and organizing work assignments.
- Problem solving and decision-making.
- Public speaking and content delivery.
- Conflict resolution and community relations.
- Both verbal and written communication.

Ability to:

- Supervise work of staff members.
- Communicate effectively.
- Function calmly, effectively, and decisively in emergency situations.
- Plan, assign, supervise and review the work of subordinates.
- Reason and make judgments and decisions.
- Manage time well and perform multiple tasks, and organize diverse activities.
- Perform in a stressful environment, while maintaining a professional manner.
- Work on a wide variety of tasks simultaneously and produce timely and tangible results.
- Utilize online resources.
- Prioritize needs, develop and implement plans of action.
- Work as a team member within a diverse organization.
- Research, compile, analyze, interpret and prepare a variety of memorandums or reports.
- Establish and maintain effective working relationships with county staff and officials, representatives of outside agencies, other county staff and officials, news media, private business people and the general public.

PHYSICAL/ENVIRONMENTAL FACTORS:

Physical requirements include lifting/carrying 20–50 pounds, occasionally; visual acuity, speech and hearing; hand and eye coordination and manual dexterity necessary to operate a computer, monitor, keyboard, printer, fax machine, copier, adding machine, typewriter and basic office equipment. Subject to standing, walking, sitting, repetitive motion, lifting, carrying, crouching/crawling, vision to monitor, pushing, stooping/kneeling to perform the essential functions. Subject to stressful environment and client and customer contact for extended periods of time. Subject to contact with communicable diseases, radiation, hazardous waste, human fecal matter and foul odors.

WWC: 7720

EEO Function: 01

EEO Category: 02

FLSA Code: E

EMPG STAFF JOB DESCRIPTION

Jurisdiction Name	Travis County
Staff Member Name	Stacy Moore-Guajardo
Position Title	Assistant Emergency Management Coordinator
Description Prepared By	Travis County Human Resources
Date Prepared	

JOB DESCRIPTION

Current Job Description Attached

See Below

A. Provide a general description of the duties performed by this staff member.

B. If this staff member performs both emergency management duties and other duties, identify the specific emergency management duties performed.

**Travis County Human Resources Management Department
Job Description DRAFT**

**Job Title: 9 Emergency Mgmt
Coord Asst**

Job Code: 22238

Pay Grade: 22

Effective Date: 09/16/04

SUMMARY OF FUNCTION:

Serves as Assistant Emergency Management Coordinator for Travis County.

DISTINGUISHING CHARACTERISTICS:

This is in a Public Safety/Emergency Management series of job classifications. This classification supervises the emergency management program. This classification is distinguished by the incumbent's focus on the emergency management program being coordinated, rather than having responsibility for the entire work unit. This classification requires a flexible work schedule to meet the needs of the department. This classification requires a flexible work schedule during a state of emergency.

EXAMPLES OF WORK PERFORMED:

- | | Essential (E)
or Non-
Essential (N) |
|--|---|
| • Maintains Travis County emergency management operations plan. Manages inventory of homeland security grant equipment. Maintains records. | E |
| • Assists in annual budget preparation. Prepares administrative reports. Oversees grants and grant reporting requirements. Researches and makes recommendations for future grant opportunities. | E |
| • Serves as a liaison; works with other agencies in developing operational plans for emergencies. Attends various meetings with local, state, and federal agencies. | E |
| • Responds to Emergency Operations Center when notified of emergency conditions. | E |
| • Attends training programs, including required and optional courses. Provides emergency management training to departments and other agencies. Represents county at various meetings with other agencies. | E |
| • Performs other job-related duties as assigned. | N |

QUALIFICATION REQUIREMENTS:

Education and experience equivalent to:

Bachelor's degree in Emergency Management, Public Administration, Industrial Safety, Business Management, Planning or a directly related field AND four (4) years of increasingly responsible experience in the emergency management, strategic planning, research, project management, policy research, and program development.

Preferred:

Completion of Professional Development Series Course from FEMA.
Knowledge of Hazardous materials operations.
Knowledge of Homeland Security Equipment Grant Program.

License:

Possession of a valid Texas Driver's License.

KNOWLEDGE, SKILLS, AND ABILITIES:

Knowledge of:

- Public administration and governmental agencies.
- Legislative process.
- Principles of emergency management administration.
- Policies, practices, procedures and terminology.
- Federal, State, Local, and County applicable laws, rules and regulations, codes, and guidelines.
- State and Federal regulatory or administrative requirements and practices.
- Budgetary and fiscal process.
- Online computer searching, and internet.
- Computer equipment to include word processing, windows, spreadsheets and databases.
- Business letter writing, grammar and punctuation and report preparation.

**Travis County Human Resources Management Department
Job Description DRAFT**

**Job Title: 9 Emergency Mgmt
Coord Asst**

Job Code: 22238

Pay Grade: 22

Effective Date: 09/16/04

KNOWLEDGE, SKILLS, AND ABILITIES: (Cont.)

Skill In:

- Researching and analyzing emergency management related issues.
- Meeting emergencies.
- Research, analysis, compiling, preparing and presenting technical data/information and reports.
- Explaining complicated technical problems in simple non-technical language.
- Problem solving and decision-making.
- Public speaking and content delivery.
- Conflict resolution and community relations.
- Both verbal and written communication.

Ability to:

- Communicate effectively.
- Function calmly, effectively, and decisively in emergency situations.
- Reason and make judgments and decisions.
- Manage time well and perform multiple tasks, and organize diverse activities.
- Perform in a stressful environment, while maintaining a professional manner.
- Work on a wide variety of tasks simultaneously and produce timely and tangible results.
- Utilize online resources.
- Prioritize needs, develop and implement plans of action.
- Work as a team member within a diverse organization.
- Research, compile, analyze, interpret and prepare a variety of memorandums or reports.
- Establish and maintain effective working relationships with county staff and officials, representatives of outside agencies, other county staff and officials, news media, private business people and the general public.

PHYSICAL/ENVIRONMENTAL FACTORS:

Physical requirements include lifting/carrying 20–50 pounds, occasionally; visual acuity, speech and hearing; hand and eye coordination and manual dexterity necessary to operate a computer, monitor, keyboard, printer, fax machine, copier, adding machine, typewriter and basic office equipment. Subject to standing, walking, sitting, repetitive motion, lifting, carrying, crouching/crawling, vision to monitor, pushing, stooping/kneeling to perform the essential functions. Subject to stressful environment and client and customer contact for extended periods of time. Subject to contact with communicable diseases, radiation, hazardous waste, human fecal matter and foul odors.

WWC: 7720

EEO Function: 01

EEO Category: 02

FLSA Code: E

EMPG STAFF JOB DESCRIPTION

Jurisdiction Name	Travis County
Staff Member Name	
Position Title	Emergency Planner
Description Prepared By	Travis County Human Resources
Date Prepared	

JOB DESCRIPTION

Current Job Description Attached

See Below

A. Provide a general description of the duties performed by this staff member.

B. If this staff member performs both emergency management duties and other duties, identify the specific emergency management duties performed.

**Travis County Human Resources Management Department
Job Description DRAFT**

**Job Title: Planner/Mgmt/Research
Spec Sr**

Job Code: 18496

Pay Grade: 18

Effective Date: 10/01/09

MINIMUM REQUIREMENTS:

Education and Experience:

Bachelor's degree in Public Policy/Administration, Government, Criminal Justice, Sociology, Business Administration or a directly related field AND five (5) years increasingly responsible experience with research, database management, statistical analysis, policy and procedure, administrative, management, and budgetary analysis or systems analysis;

OR,

Master's degree in Public Policy/Administration, Government, Criminal Justice, Sociology, Business Administration or a directly related field AND three (3) years increasingly responsible experience with research, database management, statistical analysis, policy and procedure, administrative or management, and budgetary analysis or systems analysis;

OR,

Any combination of education and experience that has been achieved and is equivalent to the stated education and experience and required knowledge, skills, and abilities sufficient to successfully perform the duties and responsibilities of this job.

Licenses, Registrations, Certifications, or Special Requirements:

None required.

Knowledge, Skills, and Abilities:

Knowledge of:

- Public Administration and governmental agencies.
- Legislative process.
- Principles and techniques of the project discipline.
- Modern research methods, data collection and analysis.
- Forecasting techniques.
- Administrative and related business principles.
- Principles and techniques used in conducting management studies.
- Computer equipment to include word processing, spreadsheets, databases, statistical packages, presentation/graphics and related software applications.
- Business letter writing, grammar and punctuation, and report preparation.

Skill in:

- Statistical analysis and policy research.
- Analyzing and evaluating data.
- Setting up systems for conducting analyses and compiling reports.
- Coordinating the development of and making presentations.
- Coordinating work of others.
- Conducting interviews and group meetings.
- Both verbal and written communication.

Ability to:

- Apply knowledge to data, policy, and process analyses.
- Compile data and to write clear and comprehensive reports.
- Maintenance of appropriate records.
- Establish and maintain effective working relationships with departmental clientele, representatives of outside agencies, other County employees and officials, and the general public.

WORK ENVIRONMENT AND PHYSICAL DEMANDS:

Physical requirements include lifting/carrying up to 5-20 pounds occasionally, visual acuity, speech and hearing, hand and eye coordination and manual dexterity necessary to operate a computer, monitor, keyboard, printer, fax machine, copier, adding machine, typewriter and basic office equipment. Subject to sitting, client/customer contact, standing, walking, vision to monitor, repetitive motion, stooping/kneeling, squatting, bending, reaching, occasional indoor/outdoor activities carrying and lifting of moderately heavy equipment, boxes, etc. to perform the essential functions.

WWC: 8810

EEO Function: 01

EEO Category: 02

FLSA Code: E

This job description is intended to be generic in nature. It is not necessarily an exhaustive list of all duties and responsibilities. Duties and responsibilities and overtime eligibility may vary based on the specific tasks assigned to the position.

**Travis County Human Resources Management Department
Job Description DRAFT**

**Job Title: Planner/Mgmt/Research
Spec Sr**

Job Code: 18496

Pay Grade: 18

Effective Date: 10/01/09

JOB SUMMARY:

Conducts highly advanced level critical, professional and specialized research projects and policy analysis, such as complex surveys, statistical analyses, and other quantitative and qualitative analyses. Compiles and manages data, uses statistical methods and evaluation tools, systems and procedures, and performs data quality assurance tests. Analyzes business, financial or operating management and/or administrative policies, operations, processes and issues. Modifies and adapts standard procedures to meet the needs of the project. Assists in the analysis, development and integration of new or revised policies and procedures. Prepares complex written reports/presents results of analyses. May serve as project leader.

DISTINGUISHING CHARACTERISTICS:

This is the fourth in a series of four planner/management/research-related job classifications within the Planner/Management/Research job family. This classification is distinguished from the Planner/Mgmt/Research Spec in that Sr incumbents typically specialize in research projects at an advanced level, contribute to efficient methods and original ideas, and plan, design and write research proposals.

DUTIES AND RESPONSIBILITIES:

- Conducts highly advanced level of critical, professional and specialized research projects. Plans and designs intermediate level projects and implements approved proposals. Researches and develops cost analysis on new or alternative services. Modifies and adapts standard procedures to meet the needs of the project. Establishes priorities and recommends schedules, timetable and budgetary costs.
- Performs complex statistical analyses which includes selecting appropriate research design methods, techniques and procedures, compiling and cleaning data, and data manipulation and analysis. Develops research strategy, evaluates validity and reliability of data using statistical methods. Utilizes software and/or appropriate Structured Query Language to perform the analyses.
- Develops complex research and evaluation tools. Assists in data collection. Determines benchmark indicators and best procedures, methods, and guidelines for analyses and processes. Conducts advanced complex surveys and performs quantitative and qualitative analyses on responses. Performs on-line data searches using Internet and accesses data from various sources.
- Performs complex database management, and general trend, forecast and statistical analyses. Performs data quality assurance tests. Provides input and maintains research databases and tracking and reporting systems.
- Reviews research progress and reports results. Prepares and produces written summaries, documents, and statistical and other reports to include conclusions and recommendations. Coordinates the development of and makes complex presentations of analysis results.
- Gathers and organizes information on problems or procedures. Documents existing processes and systems and recommends revised systems. Interviews subjects to analyze policies, work procedures and operational methods. Solves highly advanced complex problems or issues regarding management or administrative issues or systems.
- Makes complex recommendations regarding research, policy, planning issues, operations, related budget issues and efficient methods, plans and designs. Assists in the analysis, development and integration of new or revised policies and procedures.
- Attends meetings, serves on collaborative task forces and working groups, and provides support to collaborative planning efforts, data and statistical information collection efforts, and process development and evaluation. Acts as liaison with various working groups, offices and governmental agencies.
- Performs legislative research. Stays abreast of the effects of legislative changes and the impact.
- Uses and may modify management information systems.
- May serve as project leader.
- Performs other job-related duties as assigned.

U.S. Department of Homeland Security
SUMMARY SHEET FOR ASSURANCES AND CERTIFICATIONS

O.M.B. No. 3067-0206
Expires February 28, 2007

FOR
FY 13

CA FOR (Name of Applicant)
Travis County

This summary sheet includes Assurances and Certifications that must be read, signed, and submitted as a part of the Application for Federal Assistance.

An applicant must check each item that they are certifying to:

- Part I FEMA Form 20-16A, Assurances-Nonconstruction Programs
- Part II FEMA Form 20-16B, Assurances-Construction Programs
- Part III FEMA Form 20-16C, Certifications Regarding Lobbying; Debarment, Suspension, and Other Responsibility Matters; and Drug-Free Workplace Requirements
- Part IV SF LLL, Disclosure of Lobbying Activities (If applicable)

As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with the identified attached assurances and certifications.

Samuel T. Biscoe

Typed Name of Authorized Representative

Travis County Judge

Title

Signature of Authorized Representative

Date Signed

NOTE: By signing the certification regarding debarment, suspension, and other responsibility matters for primary covered transaction, the applicant agrees that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by FEMA entering into this transaction.

The applicant further agrees by submitting this application that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction," provided by the FEMA Regional Office entering into this covered transaction, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions. (Refer to 44 CFR Part 17.)

Paperwork Burden Disclosure Notice

"Public reporting burden for this form is estimated to average 1.7 hours per response. Burden means the time, effort and financial resources expended by persons to generate, maintain, retain, disclose, or to provide information to us. You may send comments regarding the burden estimate or any aspect of the form, including suggestions for reducing the burden to: Information Collections Management, Federal Emergency Management Agency, 500 C Street, SW, Washington, DC 20472, Paperwork Reduction Project (3067-0206). You are not required to respond to this collection of information unless a valid OMB control number appears in the upper right corner of this form. Please do not send your completed form to the above address.

**U.S. DEPARTMENT OF HOMELAND SECURITY
ASSURANCES-NON-CONSTRUCTION PROGRAMS**

Note: Certain of these assurances may not be applicable to your project or program. If you have any questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. Section 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration) 5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. Sections 1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. Section 794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. Sections 6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) Sections 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. 290-dd-3 and 290-ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Acts of 1968 (42 U.S.C. Section 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. Will comply, or has already complied, with the requirements of Title II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or Federally assisted programs. These requirements apply to all interest in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply with provisions of the Hatch Act (5 U.S.C. Sections 1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. Sections 276a to 276a-7), the Copeland Act (40 U.S.C. Section 276c and 18 U.S.C. Sections 874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. Sections 327-333), regarding labor standards for federally assisted construction subagreements.
10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.

11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. Section 1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. Section 7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended, (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended, (P.L. 93-205).

12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. Section 1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.

13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. 470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. 469a-1 et seq.).

14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.

15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. 2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.

16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. Section 4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.

17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.

18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.

19. It will comply with the minimum wage and maximum hours provisions of the Federal Fair Labor Standards Act (29 U.S.C. 201), as they apply to employees of institutions of higher education, hospitals, and other non-profit organizations.

**U.S. DEPARTMENT OF HOMELAND SECURITY
ASSURANCES-CONSTRUCTION PROGRAMS**

NOTE: Certain of these assurances may not be applicable to your project or program. If you have any questions, please contact the awarding agency. Further, certain Federal assistance awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

- 1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application.**
- 2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the assistance; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.**
- 3. Will not dispose of, modify the use of, or change the terms of the real property title, or other interest in the site and facilities without permission and instructions from the awarding agency. Will record the Federal interest in the title of real property in accordance with awarding agency directives and will include a covenant in the title of real property acquired in whole or in part with Federal assistance funds to assure nondiscrimination during the useful life of the project.**
- 4. Will comply with the requirements of the assistance awarding agency with regard to the drafting, review and approval of construction plans and specifications.**
- 5. Will provide and maintain competent and adequate engineering supervision at the construction site to ensure that the complete work conforms with the approved plans and specifications and will furnish progress reports and such other information as may be required by the assistance awarding agency or state.**
- 6. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.**
- 7. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.**
- 8. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. Sections 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).**
- 9. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. Sections 4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.**
- 10. Will comply with all Federal statutes relating to non-discrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. Sections 1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. Section 794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. Sections 6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to non-discrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to non-discrimination on the basis of alcohol abuse or alcoholism; (g) Sections 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. 290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Acts of 1968 (42 U.S.C. Section 3601 et seq.), as amended, relating to non-discrimination in the sale, rental or financing of housing; (i) any other non-discrimination provision in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other non-discrimination statute(s) which may apply to the application.**
- 11. Will comply, or has already complied, with the requirements of Title II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or Federally assisted programs. These requirements apply to all interest in real property acquired for project purposes regardless of Federal participation in purchase.**
- 12. Will comply with provisions of the Hatch Act (5 U.S.C. Sections 1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.**

13. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. Sections 276a to 276a-7), the Copeland Act (40 U.S.C. Section 276c and 18 U.S.C. Section 874), the Contract Work Hours and Safety Standards Act (40 U.S.C. Sections 327-333) regarding labor standards for federally assisted construction subagreements.

14. Will comply with the flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.

15. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. Section 1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. Section 7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended, (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended, (P.L. 93-205).

16. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. Section 1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.

17. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. 470), EO 11593 (identification and preservation of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. 469a-1 et seq.).

18. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.

19. Will comply with all applicable requirements of all other Federal laws, Executive Orders, regulations and policies governing this program.

20. It will comply with the minimum wage and maximum hours provisions of the Federal Fair Labor Standards Act (29 U.S.C. 201), as they apply to employees of institutions of higher education, hospitals, and other non-profit organizations.

21. It will obtain approval by the appropriate Federal agency of the final working drawings and specifications before the project is advertised or placed on the market for bidding; that it will construct the project, or cause it to be constructed, to final completion in accordance with the application and approved plans and specifications; that it will submit to the appropriate Federal agency for prior approval changes that alter the cost of the project, use of space, or functional layout, that it will not enter into a construction contract(s) for the project or undertake other activities until the conditions of the construction grant program(s) have been met.

22. It will operate and maintain the facility in accordance with the minimum standards as may be required or prescribed by the applicable Federal, State, and local agencies for the maintenance and operation of such facilities.

23. It will require the facility to be designed to comply with the "American Standard Specifications for Making Buildings and Facilities Accessible to, and Usable by, the Physically Handicapped," Number A117. - 1961, as modified (41 CFR 101-17.703). The applicant will be responsible for conducting inspections to ensure compliance with these specifications by the contractor.

24. If any real property or structure thereon is provided or improved with the aid of Federal financial assistance extended to the applicant, this assurance shall obligate the applicant, or in the case of any transfer of such property, any transfer, for the period during which the real property or structure is used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits.

25. In making subgrants with nonprofit institutions under this Comprehensive Cooperative Agreement, it agrees that such grants will be subject to OMB Circular A-122, "Cost Principles for Non-profit Organizations" included in Vol. 49, Federal Register, pages 18260 through 18277 (April 27, 1984).

**U.S. DEPARTMENT OF HOMELAND SECURITY
CERTIFICATIONS REGARDING LOBBYING; DEBARMENT, SUSPENSION AND
OTHER RESPONSIBILITY MATTERS; AND DRUG-FREE WORKPLACE REQUIREMENTS**

Applicants should refer to the regulations cited below to determine the certification to which they are required to attest. Applicants should also review the instructions for certification included in the regulations before completing this form. Signature on this form provides for compliance with certification requirements under 44 CFR Part 18, "New Restrictions on Lobbying; and 28 CFR Part 17, "Government-wide Debarment and suspension (Nonprocurement) and Government-wide Requirements for Drug-Free Workplace (Grants)." The certifications shall be treated as a material representation of fact upon which reliance will be placed when the Federal Emergency Management Agency (FEMA) determines to award the covered transaction, grant, or cooperative agreement.

1. LOBBYING

A. As required by section 1352, Title 31 of the U.S. Code, and implemented at 44 CFR Part 18, for persons entering into a grant or cooperative agreement over \$100,000, as defined at 44 CFR Part 18, the applicant certifies that:

(a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of congress, or an employee of a Member of Congress in connection with the making of any Federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal grant or cooperative agreement;

(b) If any other funds than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or an employee of Congress, or employee of a member of Congress in connection with this Federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form LLL, "Disclosure of Lobbying Activities," in accordance with its instructions;

(c) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subgrants, contracts under grants and cooperative agreements, and subcontract(s) and that all subrecipients shall certify and disclose accordingly.

Standard Form LLL, "Disclosure of Lobbying Activities" attached. (This form must be attached to certification if nonappropriated funds are to be used to influence activities.)

**2. DEBARMENT, SUSPENSION, AND OTHER
RESPONSIBILITY MATTERS
(DIRECT RECIPIENT)**

As required by Executive Order 12549, Debarment and Suspension, and implemented at 44 CFR Part 67, for prospective participants in primary covered transactions, as defined at 44 CFR Part 17, Section 17.510-A. The applicant certifies that it and its principals:

(a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State or Federal court, or voluntarily excluded from covered transactions by any Federal department or agency;

(b) Have not within a three-year period preceding this application been convicted of or had a civilian judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or perform a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

(c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and

(d) Have not within a three-year period preceding this application had one or more public transactions (Federal, State, or local) terminated for cause or default; and

B. Where the applicant is unable to certify to any of the statements in this certification, he or she shall attached an explanation to this application.

**3. DRUG-FREE WORKPLACE
(GRANTEES OTHER THAN INDIVIDUALS)**

As required by the Drug-Free Workplace Act of 1988, and implemented at 44 CFR Part 17, Subpart F, for grantees, as defined at 44 CFR Part 17, Sections 17.615 and 17.620:

A. The applicant certifies that it will continue to provide a drug-free workplace by:

(a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;

(b) Establishing an on-going drug free awareness program to inform employees about:

- (1) The dangers of drug abuse in the workplace;
- (2) The grantee's policy of maintaining a drug-free workplace;
- (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
- (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

(c) Making it a requirement that each employee to be engaged in the performance of the grant to be given a copy of the statement required by paragraph (a);

(d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will:

(1) Abide by the terms of the statement; and

(2) Notify the employee in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction.

(e) Notifying the agency, in writing, within 10 calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to the applicable FEMA awarding office, i.e., regional office or FEMA office.

(f) Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted:

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency.

(g) Making a good faith effort to continue to maintain a drug free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

8. the grantees may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

Place of Performance (Street address, City, County, State, Zip code)

CTECC

5010 Old Manor Road

Austin, Texas 78723

Check if there are workplaces on file that are not identified here.

Section 17.630 of the regulations provide that a grantee that is a State may elect to make one certification in each Federal fiscal year. A copy of which should be included with each application for FEMA funding. States and State agencies may elect to use a Statewide certification.

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

(See reverse for public burden disclosure)

Approved by OMB

0348-0048

1. Type of Federal Action: <input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	2. Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. Initial award <input type="checkbox"/> c. post-award	3. Report Type: <input type="checkbox"/> a. Initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____
4. Name and Address of Reporting Entity: <input type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known : Congressional District, if known :	5. If Reporting Entity in No. 4 is Subawardee, Enter Name and Address of Prime: Congressional District, if known :	
6. Federal Department/Agency:	7. Federal Program Name/Description: CFDA Number, if applicable : _____	
8. Federal Action Number, if known :	9. Award Amount, if known : \$ _____	
10. a. Name and Address of Lobbying Registrant <i>(if individual, last name, first name, MI):</i>	b. Individuals Performing Services <i>(including address if different from No. 10a)</i> <i>(last name, first name, MI):</i>	
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature: _____ Print Name: _____ Title: _____ Telephone No.: _____ Date: _____	
Federal Use Only:	Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)	

Vendor Direct Deposit / Advance Payment Notification Authorization

This form may be used by vendors or individual recipients
 - to receive payments from the state of Texas by direct deposit
 - to change or cancel existing direct deposit information

For Comptroller's Use Only

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For State Agency Use

Advance Payment Notification
 International Payments Verification
 Interagency Transfer

Transaction Type

SECTION 1	<input checked="" type="checkbox"/> New setup (Sections 2, 3, 4 and 5 - Section 6 is optional)	<input type="checkbox"/> Change account type (Sections 2, 3, 4 and 5 - Section 6 is optional)
	<input type="checkbox"/> Change financial institution (Sections 2, 3, 4 and 5 - Section 6 is optional)	<input type="checkbox"/> Cancellation (Sections 2 and 4 - Sections 7 and 8 for state agency use)
	<input type="checkbox"/> Change account number (Sections 2, 3, 4 and 5 - Section 6 is optional)	

Payee Identification

SECTION 2	Social Security Number (SSN) or Employer Identification Number (EIN) <u>7,4,6,0,0,0,1,9,2</u>		Mail code (if not known, leave blank.)	
	Payee name (Business/Individual) Travis County		Phone number (512) 854-9365 ext.	
	Mailing address PO Box 1748	City Austin	State TX	ZIP code 78767

Financial Institution (Completion by financial institution is recommended.)

SECTION 3	Financial institution name JP Morgan Chase Bank		City Austin		State TX	
	Routing transit number (9 digits) <u>1,1,1,0-0,0,6,1-4</u>		Customer account number (maximum 17 characters) <u>1,8,2,1,8,8,6,5,9,3</u>		Type of account <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings	
	Financial representative name (optional)			Title (optional)		
	Financial representative signature (optional)			Phone number (optional) (512) 479-2029 ext.		Date (optional)

Authorization for Setup, Changes or Cancellation (required)

SECTION 4	I authorize the Texas Comptroller of Public Accounts to deposit my payments from the state of Texas to my financial institution electronically. I understand that the Texas Comptroller of Public Accounts will reverse any payments made to my account in error.		
	I further understand that the Texas Comptroller of Public Accounts will comply at all times with the National Automated Clearing House Association's rules. (For further information on these rules, please contact your financial institution.)		
	Authorized signature <i>Dolores Ortega Carter</i>	Printed name Dolores Ortega Carter, Co. Treasurer	Date 8-2-13

International Payments Verification (required)

SECTION 5	Will these payments be forwarded to a financial institution outside the United States?..... <input type="checkbox"/> YES <input type="checkbox"/> NO

Authorization for Advance Payment Notification Setup (optional)

SECTION 6	I authorize the Texas Comptroller of Public Accounts to send an email notification one business day prior to the payment posting to my account.	
	Contact name (Please print)	Contact phone number () ext.
	Email address	

Cancellation by Agency (for state agency use)

SECTION 7	Reason	Date

Authorized Signature (for state agency use)

SECTION 8	Signature <i>Dolores Ortega Carter</i>	Date
	Phone number () ext.	Agency number
	Agency name	
	Comments	

Please return your completed form to:

TRAVEL POLICY CERTIFICATION

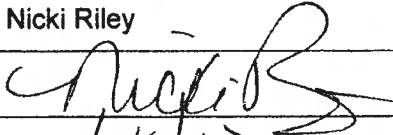
Jurisdiction Name:	Travis County
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Check one of the two blocks below

This jurisdiction has no qualifying travel regulations. EMPG participants requesting reimbursement for travel expenditures will do so in accordance with State of Texas travel regulations and reimbursement rates as published by the Texas Comptroller of Public Accounts. State travel regulations are available at <https://fmx.cpa.state.tx.us/fmx/travel/texttravel/index.php>

OR

This jurisdiction has its own qualifying travel policy, a copy of which is attached. EMPG participants requesting reimbursement for travel expenditures will do so in accordance with that policy.

Name of Grant Financial Officer (Printed or Typed)	Nicki Riley
Original Signature of Grant Financial Officer	
Date Signed	1/18/13

APPENDIX 3 TRAVEL

Travis County pays vendors and/or reimburses employees and officials who travel for County business ("Travelers"). The Court must approve travel expenditures for non-County employees or volunteers, for professional development, **prior to the actual travel** unless the office or department has a policy that the Court has previously approved and it is on file with the County Auditor's Office.

The County's travel policy documented in Appendix 3 of the County's Budget Rules ("Policy"), ensures the County meets the IRS requirements for an *accountable plan*. According to Internal Revenue Code ("Code") sections 62(a)(2) and 62(c), reimbursements that meet established tests for an *accountable plan*, are not subject to employment taxes (federal income tax withholding, social security and Medicare). To comply with the Code, travel must

- (1) have a business connection and the expense must be reasonable, and
- (2) be reasonably accounted for within 60 days.

In addition, all excess reimbursements must be repaid within 120 days after the travel is completed.

All travel reimbursement requests must be submitted to the Auditor's Office within 30 days of travel completion. Reimbursement requests submitted after 60 days fail to comply with the rules governing an *accountable plan*; thus, the reimbursement is subject to employment taxes.

Travelers, not the County Auditor's Office, are responsible for complying with IRS regulations to maintain the tax free status of their reimbursements. If the requirements are not met, the Traveler's reimbursement will be approximately 40% less and the Department's charge will be 20% more to pay taxes.

The following travel expenditure principles cannot cover every travel variation. Securing travel arrangements at the lowest cost may result in a loss of flexibility if emergencies arise. Booking policies of a specific travel industry vendor may require an exception to standard county travel procedures. The County Auditor interprets, audits and approves travel expenses and reimbursements to facilitate the timely conduct of county business due to the current climate of rapidly changing travel industry requirements.

The County Auditor makes travel payment decisions in accordance with the following principles (rules)

Principle #1: Comply with Travis County Travel Guidelines ("Guidelines").
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The Guidelines maintained by the County Auditor located on the County intranet, Travis Central under the Resources page provide detailed instructions on how to submit a travel encumbrance request, how to submit travel reimbursement request, the necessary supporting documentation that must accompany the travel request and travel

reimbursement request, the reimbursement rates for various travel categories, and submission deadlines.

Principle #2: Do not file reimbursement requests that exceed the County's travel allowances.

The Policy and the Guidelines outline the reimbursement rates for various travel categories. In general, the following are established Travis County travel allowances:

- **Mileage for private vehicle** – the IRS standard rate in place at the time of travel, currently \$0.555 per mile for employees and \$0.14 per mile for volunteers. **Note:** Only one employee/volunteer may claim mileage reimbursement when sharing a ride/traveling in the same vehicle.
- **Grant reimbursed mileage for private vehicle** – The individual grant's specified rate.
- **Meals** – The IRS standard Texas per diem rate is currently \$46 a day. The office or department has the discretion to approve partial-day, per diem reimbursement. The County uses the United States General Services Administration (GSA) domestic per diem rates, which will vary with the location of the travel destination. Offices and departments have the ability to establish a lower rate than the GSA rates; however, enforcement of the lower rate will reside with the office or department. Reimbursement for actual meal expenses, with receipts, is \$60 a day plus 15% gratuity.

Note: Elected and appointed officials may establish travel policies for their own offices or departments and may reimburse at a rate less than the County rate. Such variations from the Policy may result in tax consequences to the Traveler.

Principle #3: Incur and submit only business-related expenses.

The County reimburses business-related travel expenses only. Travelers may not seek a travel expense reimbursement that the Traveler knows, or reasonably should know, is not eligible for reimbursement. Items that are not eligible for reimbursement include, but are not limited to:

- Extracurricular activities such as golf, tennis, entertainment, movies, tours, sport events, or non-business events along with any related costs for such extracurricular activities,
- First class travel,
- Hotel mini-bar items such as candy, drinks, snacks, etc.,
- Alcoholic beverages (including those that are part of a meal),
- Fines or penalties for violation of the law such as parking tickets, speeding tickets, etc.,
- Family/Spouse/Travel Companion expenses of any kind – spouses/guests traveling with County employees are responsible for paying their own individual expenses,

- Mileage for County owned vehicles,
- Transportation expenses for entertainment that is not business-related,
- Any personal expenses incurred before, during, or after official County business,
- Any Complimentary expenses defined as an expense paid for, or provided by, an organization or entity outside the County, by virtue of the Traveler's business activities or employment,
- Food and/or beverages provided at meetings, training for County Staff, retreats or training provided on County property. This does not apply if the expense is grant allowable.
- Meals and Lodging when the Traveler was not required to be out of the County (Metropolitan Statistical Area (MSA)) overnight. An exception to this would be meals that are included in the conference registration fee. Banquets or other awards ceremonies that do not meet these conditions do not qualify as reimbursable. The MSA encompasses Bastrop, Caldwell, Hays, Travis, and Williamson Counties.

Principle #4: Be prudent and make the most cost effective travel arrangements possible.

The Traveler should obtain the most cost effective rates for any travel expenses. This includes:

- booking non-refundable airfare that meets Traveler's itinerary,
- requesting conference/seminar group rates, or best available rate for accommodation,
- carpooling/sharing rides whenever possible,
- using public transportation in lieu of rental cars where feasible,
- ensuring that Texas sales tax is not incurred by explaining to vendor that Travis County is sales tax exempt. Note: Travis County's exemption applies only to Texas sales taxes, not hotel taxes. A sales tax exemption form may be obtained from the Purchasing Office,
- using cabs or obtaining a ride to Austin-Bergstrom International Airport instead of paying extended parking fees where feasible.

Principle #5: Obtain approval/encumber all travel requests before travel occurs.

Failure to obtain office or department approval may result in travel expenses being declared ineligible for reimbursement. Travel expenses should generally be incurred before they are eligible for reimbursement. Reimbursement of non-encumbered travel expenses requires approval by the office/department head and may also require Court approval.

Principle #6: Notify the County Auditor promptly of travel cancellations and recover any vendor advance payments.

The Traveler is financially liable and must ensure that the County is reimbursed for expenses paid in advance to vendors, such as for airfare and lodging. **The Traveler, not the County, is responsible for any associated costs with failing to cancel travel arrangements in a timely manner.** Exceptions are granted on an individual basis for such reasons as illness or emergency. A written explanation for the requested exception, signed by the County or district elected/appointed official or County Executive, is required along with the reimbursement request.

In situations where the County has made a vendor advance payment which results in a refund that has been paid to the Traveler or that is outstanding, the County Auditor deducts the refund amount from the Traveler's reimbursement request and retains the amount until the County receives the refund. Once proof of receipt has occurred, the County Auditor releases the remaining amount of the Traveler's reimbursement.

Principle #7: Submit appropriate documentation for advance payments to vendors.

Examples include, but are not limited to:

- **Registration** – A completed registration form with Traveler's name
- **Lodging** – a confirmed reservation from the facility showing the Traveler's name, daily rate, dates of stay, and the facility's name/address.
- **Airfare** – Invoice from Four Seasons travel (or other vendor that is willing to bill the County) or personal credit card.

Refer to the Guidelines for more details regarding advance payments.

Principle #8: Retain and submit all applicable receipts when submitting requests for reimbursement.

Examples of acceptable receipts include, but are not limited to:

- **Registration** – A confirmation of the paid registration or invoice from vendor.
- **Lodging** – a \$0 balance hotel invoice (shows that Traveler paid the entire bill and includes the Traveler's name, dates of stay, room rate, taxes, etc.)
- **Airfare** – Proof of payment for airline tickets.
- **Transportation** – Rental car agreement with proof of payment.

Principle #9: Seek additional Office or Department, Grant, and/or Court approval for special situations.

In addition to normal approvals, the office or department, the County Auditor's Grant Analyst and/or the Court must approve the following travel situations **before** travel is

requested and occurs. The situations, fully described in the Guidelines are summarized below:

Office or Department Approval

- Reimbursements for travel that was not encumbered **before** travel occurred.
- A Traveler who attends a meeting or conference that begins on a Monday or ends on a Friday makes travel arrangements outside the meeting/conference dates when net savings to the County can be documented.
- An employee combining vacation or personal leave with a business trip provided there is a net savings to the County. The County is not responsible for any costs (e.g., transportation, lodging, or meals) associated with the vacation/ personal days.
- Alternate travel arrangements (transportation mode, accommodations, or schedule) where the cost is less than the least expensive other alternative and has been documented are eligible for reimbursement.

County Auditor's Grant Analyst Approval

Certain Grants may limit the amount and type of reimbursable travel expenditures. Travelers and the County Auditor's Grant Analyst should verify that any proposed travel is in accordance with the grant agreement before travel begins.

Court Approval

- Reimbursements for travel that was not encumbered **before** travel occurred (Auditor's discretion to refer this to Court for approval dependent on circumstances)
- All International Travel as well as travel to Alaska and Hawaii. Travel to these locations relating to criminal extradition, investigations, prosecutions, or similar situations are exempted from this rule.
- All decisions for driving instead of flying where travel mileage exceeds 1,000 miles round-trip and Traveler does not accept standard reimbursement (round trip coach airfare cost in place at time of travel). **Note:** This includes all transportation expenses (lodging, meals, and mileage incurred as a result of driving rather than flying). Travel involving extradition of prisoners and/or juveniles is exempt from this requirement.
- Alternate travel arrangements (transportation mode, accommodations, or schedule) where the cost is less than the least expensive other alternative and has been documented and approved by the office or department are eligible for reimbursement. **Important:** The Court must approve all exceptions (i.e. where cost is greater than the least expensive other alternative and office or department approval has been obtained).
- Reimbursement of applicant travel expenses when recruiting nationally and if hired, moving expenditures and employment agency fees.

Principle #10: Adhere to travel-related reimbursements for special situations.

- **Mileage Reimbursement for Elected/Appointed Officials who are ineligible to use a County-owned vehicle routinely or as an assigned take-home vehicle:** The following officials can claim reimbursement for local mileage: County Attorney,

County Commissioners 1-4, County Judge, County Treasurer, Justices of the Peace 1-5, Tax Assessor-Collector, Purchasing Agent, and Medical Examiner. **Note: It is critical that mileage reimbursements comply with IRS timelines for submission. Should there be a delay in submission and the reimbursement becomes taxable income, it cannot be paid as it exceeds the compensation amount set by the Court (or authorizing Board) statutorily as part of the annual budget process.**

- **Parking Reimbursement – On Street Parking (Pay Station):** This request is allowed when the employee is parked for conducting county business (not to be confused as parking to work their daily work day). Reimbursement requires submission of the County Auditor Office's prescribed *Pay Station Parking Log* with receipts attached, filed within 30 days and no later than 60 days after the end of the month in which the parking expense was incurred.
- **Travel expense reimbursements for contractors, employment recruitment, and other non-County personnel:** These requests are reimbursed at actual expense (receipts required) at a rate not to exceed the rates outlined in the Policy. Any exceptions to the Policy must be presented to Commissioners Court for approval.
- **Vehicle Rental (International Travel):** These requests must include vehicle rental insurance offered by the rental agency which would include coverage for rental vehicle damage and third-party vehicle damage and bodily injury.
- **Travel Advances:** These requests are for expenses paid to employees in advance for Registration, Airfare, Lodging, and Meals, are paid at the County Auditor's discretion and require the following prior to travel: 1) an agreement signed by both the employee and their official/county executive/department head allowing the County Auditor to deduct the full advance from the employee's paycheck if the Travel Reimbursement Form (TRF) is not submitted within 15 days of the end of the trip; 2) An advance form signed by both the Employee and their official/county executive/department head.
- **Foods/Beverages for group emergency/public safety deployments:** These expenses are allowable for group (not individual or solo) deployments where command staff prohibit personnel from leaving deployment to ensure deployment is not compromised. Deployment must extend at least two hours past standard meal time or involve special situations that prohibit an employee leaving an assigned location for a meal break. Any disallowed expenditures are a pro-rata taxable benefit to assigned employees. Documentation must include certification of the need by command personnel, a list of the deployed employees, original receipts. **Note:** This principle does not prohibit/limit the purchase of water or military style Meals Ready to Eat (MREs) if command personnel determines they are necessary to ensure the deployed employee's health and safety. Any expenditure must be within the office's or department's existing budget.



TRAVIS COUNTY FY 13 GRANT SUMMARY SHEET

Check One:	Application Approval: <input checked="" type="checkbox"/>	Permission to Continue: <input type="checkbox"/>
	Contract Approval: <input type="checkbox"/>	Status Report: <input type="checkbox"/>
Check One:	Original: <input checked="" type="checkbox"/>	Amendment: <input type="checkbox"/>
Check One:	New Grant: <input type="checkbox"/>	Continuation Grant: <input checked="" type="checkbox"/>
Department/Division:	Sheriff's Office	
Contact Person/Title:	Karen Maxwell, Senior Planner	
Phone Number:	854-7508	

Grant Title:	TCSO Child Abuse Victim Services Personnel		
Grant Period:	From: <input type="text" value="9/1/2013"/>	To: <input type="text" value="8/31/2014"/>	
Fund Source:	Federal: <input checked="" type="checkbox"/>	State: <input type="checkbox"/>	Local: <input type="checkbox"/>
Grantor:	OOG, Criminal Justice Division		
Will County provide grant funds to a sub-recipient?	Yes: <input type="checkbox"/>	No: <input checked="" type="checkbox"/>	
Are the grant funds pass-through from another agency? If yes, list originating agency below.	Yes: <input checked="" type="checkbox"/>	No: <input type="checkbox"/>	
Originating Grantor:	OJP-DOJ-VA-Victims of Crime Act Formula Grant Program		

Budget Categories	Grant Funds	County Cost Share	Budgeted County Contribution #595010 (Cash Match)	In-Kind	TOTAL
Personnel:	\$ 23,092	\$ 0	\$ 34,639	\$ 0	\$ 57,731
Operating:	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Capital Equipment:	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Indirect Costs:	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Totals:	\$ 23,092	\$ 0	\$ 34,639	\$ 0	\$ 57,731
FTEs:	0.40	0.00	0.60	0.00	1.00

Permission to Continue Information					
Funding Source (Cost Center)	Personnel Cost	Operating Cost	Estimated Total	Filled FTE	PTC Expiration Date
	\$ 0	\$ 0	\$ 0	0.00	

Department	Review	Staff Initials	Comments
County Auditor	<input checked="" type="checkbox"/>	MN	
County Attorney	<input checked="" type="checkbox"/>	JC	

Performance Measures					
#	Measure	Actual FY 11 Measure	Projected FY 12 Measure	Projected FY 13 Measure	Projected FY 14 Measure
+ -	Applicable Departmental Measures				
1.	Crime Victims/Survivors Served	2801	3456	3598	4082
2.					
3.					
+ -	Measures for the Grant				
1.	Number of Child Abuse victims/survivors seeking service who are served	259	375	360	360
	Outcome Impact Description				
2.					
	Outcome Impact Description				
3.					
	Outcome Impact Description				

PBO Recommendation:

The Travis County Sheriff's Office is requesting approval to submit the annual application to the Office of the Governor, Criminal Justice Division, to continue the TCSO Child Abuse Victim Services Personnel Grant. The application is for the fourth year of the grant. The grant provides resources for a forty percent of full-time Victim Counselor for victims associated with child abuse. The cash match for the program will be met from the department's existing budget and no additional funds are required.

PBO recommends approval to continue the program.

1. Brief Narrative - Summary of Grant: What is the goal of the program? How does the grant fit into the current activities of the department? Is the grant starting a new program, or is it enhancing an existing one?

During FY10, the Travis County Sheriff's Office Child Abuse Unit investigated 476 cases. During that time, Victim Services personnel were only able to provide services to approximately 9% of the victims associated with these Child Abuse cases.

Implementation of this grant proposal in 2011 provided funding for one full-time Victim Counselor who is responsible for service provision to the victims associated with Child Abuse cases. Many of these cases involve multiple identified victims and considerable coordination between family members, community agencies and TCSO personnel. Services provided include crisis intervention, safety planning, assistance with crime victims compensation and protective order processes, emotional support, and referrals to community agencies. Based on the numbers of investigated child abuse cases, and an assumption that each case involves a minimum of two victims (although many cases may involve multiple victims), this dedicated position has been able to afford services to over 360 victims annually.

2. Departmental Resource Commitment: What are the long term County funding requirements of the grant?

None

3. County Commitment to the Grant: Is a county match required? If so, how does the department propose to fund the grant match? Please explain.

The Sheriff's Office will budget funds to cover a 60% match. The Victim Counselor will be added into the regular call rotation for victim services personnel and TCSO will pay for the call back salary and associated fringe expenses, plus paging service for this FTE.

4. Does the grant program have an indirect cost allocation, in accordance with the grant rules? If not, please explain why not.

N/A

5. County Commitment to the Program Upon Termination of the Grant: Will the program end upon termination of the grant funding: Yes or No? If No, what is the proposed funding mechanism: (1) Request additional funding or (2) Use departmental resources. If (2), provide details about what internal resources are to be provided and what other programs will be discontinued as a result.

There is no County commitment to funding if the grant is discontinued.

6. If this is a new program, please provide information why the County should expand into this area.

This is a continuation of the services provided by the Travis County Sheriff's Office Victim Services Unit with the initial grant application for Child Abuse Victim Services personnel in FY11.

7. Please explain how this program will affect your current operations. Please tie the performance measures for this program back to the critical performance measures for your department or office.

TCSO Victim Services personnel provide crisis intervention, education regarding the criminal justice system and its participants, assistance with safety planning, assistance with crime victim compensation applications, protective order processes, emotional support, coordination of case activity, transportation of victims, and referrals to community agencies in an effort to reduce the trauma for victims. Currently TCSO Victim Services personnel are on-call 24 hours per day, 365 days per year as a means of ensuring immediate crisis intervention. Approximately 700 on-call requests for Victim Services response are received each year.

TCSO investigates approximately 500 cases of Child Abuse annually; however, prior to grant funding received for FY11, there were no TCSO Victim Services personnel dedicated to providing services to victims associated with Child Abuse cases. This resulted in only about 9% of the Child Abuse victims receiving services in FY10. During FY12, TCSO was able to serve 375 victims/survivors of the child abuse cases investigated due to this grant funding supporting the Child Abuse Victim Services personnel.



JAMES N. SYLVESTER
Chief Deputy

GREG HAMILTON
TRAVIS COUNTY SHERIFF

P.O. Box 1748
Austin, Texas 78767
(512) 854-9770
www.tcsheriff.org

PHYLLIS CLAIR
Major - Law Enforcement

DARREN LONG
Major - Corrections

MARK SAWA
Major - Administration & Support

January 15, 2013

MEMORANDUM

To: The Travis County Commissioners Court
From: Karen Maxwell, Senior Planner *KM*
Subject: General Victim Assistance Grant Application Request
Office of the Governor, Criminal Justice Division

Attached is a grant application to the Office of the Governor, Criminal Justice Division as a part of the General Victim Assistance Direct Services solicitation for FY14 to provide a Victim Counselor focused on serving the victims of child abuse cases. For the past three years, you have supported our request to provide a victim services staff member dedicated solely to the provision of services to victims associated with Child Abuse cases with awarded grant funding. Continuation of this project will provide services including crisis intervention, safety planning, assistance with Crime Victim Compensation applications and Protective Order processes, emotional support, and referrals to community agencies to a total of 360 victims referred from the Child Abuse cases that TCSO investigates. Since its implementation in 2011, this project has demonstrated efficacy, and TCSO is continuing to assimilate this position by increasing our contribution to funding. Total project costs will be \$57,731, with TCSO providing 60% of that amount in match identified within our FY14 operating budget.

Child abuse in all forms—neglect, physical, emotional and sexual—can have far-reaching effects on children, producing a multitude of social issues. Because families are most ready to change their non-productive approaches to problem solving during a time of crisis, it is critical that services are offered to families in the early stages of escalating violence. Travis County Sheriff's Office Victim Services personnel respond to the needs of these victims through on-scene response at the request of sworn personnel.

We are requesting the Commissioners Court approve this grant application. Upon your approval, the grant application will proceed to CAPCOG for review and prioritization through the Criminal Justice Advisory Committee. If you have questions, please don't hesitate to contact me at 854-7508. Thank you each in advance for your attention to this matter and your continued commitment to serving victims in Travis County.

Cc: Matt Naper County Auditor's Office
Jim Connolly, County Attorney's Office
Travis Gatlin, PBO

**THE STATE OF TEXAS
COUNTY OF TRAVIS**

RESOLUTION

WHEREAS, the Travis County Commissioners' Court finds that it is in the best interest of the citizens of Travis County to seek additional resources in the form a grant from the Criminal Justice Division of the Office of the Governor to fund a project titled the Travis County Sheriff's Office Child Abuse Victim Services Personnel; and

WHEREAS, the Travis County Commissioners' Court has agreed to provide the minimum matching percentage for said project as required by the CJD grant application; and

WHEREAS, the Travis County Commissioners' Court has agreed that in the event of loss or misuse of the Criminal Justice Division funds, the Travis County Commissioners' Court assures that the funds will be returned to the Criminal Justice Division in full; and

WHEREAS, the Travis County Commissioners' Court designates the County Judge of Travis County as the authorized official with the power to apply for, accept, reject, alter or terminate said grant; and

NOW, THEREFORE, BE IT RESOLVED, that the Travis County Commissioners' Court approves submission of the grant application for the Travis County Sheriff's Office Child Abuse Victim Services Personnel project to the Office of the Governor, Criminal Justice Division.

RESOLVED this the ____ day of _____, 2013.

By: _____
Samuel T. Biscoe
Travis County Judge

Date: _____

Agency Name: Travis County
Grant/App: 2316604 **Start Date:** 9/1/2013 **End Date:** 8/31/2014

Project Title: TCSO Child Abuse Victim Services Personnel
Status: Application Pending Submission

Eligibility Information

Your organization's Texas Payee/Taxpayer ID Number: 17460001922000

Application Eligibility Certify:

Created on:1/14/2013 10:20:55 AM By:Karen Maxwell

Profile Information

Applicant Agency Name: Travis County
Project Title: TCSO Child Abuse Victim Services Personnel
Division or Unit to Administer the Project: Travis County Sheriff's Office
Address Line 1: PO Box 1748
City/State/Zip: Austin Texas 78767-1748

Start Date: 9/1/2013
End Date: 8/31/2014

Regional Council of Governments(COG) within the Project's Impact Area: Capital Area Council of Governments
Headquarter County: Travis
Counties within Project's Impact Area: Travis

Grant Officials:

Authorized Official

User Name: Samuel Biscoe
Email: sam.biscoe@co.travis.tx.us
Address 1: Post Office Box 1748
City: Austin, Texas 78767
Phone: 512-854-9555 Other Phone:
Fax: 512-854-9535
Title: The Honorable
Salutation: Judge

Project Director

User Name: Amy Durall
Email: amy.durall@co.travis.tx.us
Address 1: PO Box 1748
City: Austin, Texas 78767
Phone: 512-854-8492 Other Phone:
Fax: 512-854-8492

Financial Official

User Name: Nicki Riley
Email: nicki.riley@co.travis.tx.us
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City: Austin, Texas 78701
Phone: 512-854-9125 Other Phone:

Grant Writer

User Name: Karen Maxwell
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Address 1: PO Box 1748
City: Austin, Texas 78767
Phone: 512-854-7508 Other Phone:
Fax: 512-854-9772

Grant Vendor Information

Organization Type: County

Organization Option: applying to provide direct services to victims only

Applicant Agency's State Payee Identification Number (e.g., Federal Employer's Identification (FEI) Number or Vendor ID): 17460001922000

Data Universal Numbering System (DUNS): 030908842

Narrative Information

Primary Mission and Purpose

The purpose of this program is to provide services and assistance directly to victims of crime to speed their recovery and aid them through the criminal justice process. Services may include the following:

- responding to the emotional and physical needs of crime victims;
- assisting victims in stabilizing their lives after a victimization;
- assisting victims to understand and participate in the criminal justice system; and
- providing victims with safety and security.

Funding Levels

The anticipated funding levels for these programs are as follows:

- Minimum Award - \$5,000
- Maximum Award - None
- Grantees, other than Native American Tribes, must provide matching funds of at least twenty percent (20%) of total project expenditures. Native American Tribes may be required to provide a five percent (5%) match. This requirement may be met through either cash or in-kind contributions or a combination of both.

For more information regarding grantee match, please click on the **Budget** tab, and then click on the **Source of Match** tab in eGrants.

Note: If you voluntarily include matching funds that exceed the minimum match requirement, you will be held to that amount throughout the grant period.

Program Requirements

Preferences

Preference will be given to applicants that provide core services to victims and that promote comprehensive victim restoration while incorporating an emphasis on cultural competency in underserved populations. Applicants are also strongly encouraged to streamline administrative and reporting processes by consolidating grant requests whenever possible in lieu of submitting multiple applications.

Criminal History Reporting

Entities receiving funds from CJD must be located in a county that has an average of 90% or above on both adult and juvenile dispositions entered into the computerized criminal history database maintained by the Texas Department of Public (DPS) Safety as directed in the *Texas Code of Criminal Procedure, Chapter 60*. The disposition completeness percentage is defined as the percentage of arrest charges a county reports to DPS for which a disposition has been subsequently reported and entered into the computerized criminal history system.

Program Emphasis

Applicant agrees to implement comprehensive strategies that are sensitive to the concerns and safety of the victims and hold offenders accountable for their crimes. Applicants must indicate the percentage of their project that benefits Victim Services, Law Enforcement, Prosecution, Courts or other areas. Program emphasis decisions should be made based on the beneficiary of the funded activities. For example, a victim services coalition who provides training to police throughout the state would fall under the "law enforcement" category because the training is to benefit law enforcement.

Indicate the percentage (%) of your project that benefits:

<u>Victim Services</u> - any nonprofit, nongovernmental organization that assists victims.	0
<u>Law Enforcement</u> - any public agency charged with policing functions.	100
<u>Prosecution</u> - any public agency charged with direct responsibility for prosecuting criminal offenders.	0
<u>Court</u> - any civil or criminal court system.	0
<u>Other</u> - any initiative that indirectly affects victims (ex., developing protocols and procedures).	0

Culturally Competent Victim Restoration

Provide information in this section regarding how your organization is culturally competent when providing services to victims. Here are some guidelines to follow: Victim service providers must have the ability to blend cultural knowledge and sensitivity with victim restoration skills for a more effective and culturally appropriate recovery process. Cultural competency occurs when: (1) cultural knowledge, awareness and sensitivity are integrated into action and policy; (2) the service is relevant to the needs of the community and provided by trained staff, board members, and management; and (3) an advocate or organization recognizes each client is different with different needs, feelings, ideas and barriers.

Through established policies and procedures, Travis County Sheriff's Office Victim Services personnel ensure the provision of services to victims regardless of age, gender, race, religion, ethnicity, or sexual orientation. These staff members primarily serve the rural population residing within Travis County but outside of its municipalities, and are therefore also cognizant of additional obstacles such as limited access to services and transportation due to geographic location. TCSO Victim Services personnel use a pool of trained volunteers to assist with transportation and other service needs as appropriate to address such obstacles. Victim Services personnel utilize specialized training and skills to provide comprehensive services in a sensitive and compassionate manner to victims based upon identified needs. Each staff member completes an online training program focused on victim services cultural competencies, with specific modules on ethics, persons with disabilities, immigrants, elderly, teens, children 0-12, among other topics. Every other month staff present training topics at the volunteer meeting (2012 examples include presentations on the Fair Defense Project, culturally competent service within shelter settings, and services provided by Red Cross to impacted community members). A monthly newsletter is produced and includes topics of relevance for staff and volunteers, such as 2012 articles on the impact of social media on death notifications, the use of technology in stalking cases, sexual assault reporting options, why victims recant, and an overview of Crime Victim Compensation. Additionally, identified Victim Services personnel will be pursuing Cultural Awareness Certification that is offered through Texas Association Against Sexual Assault.

Victim Referral Process

Describe how victims are referred to your agency:

Victims are identified by TCSO Victim Services through requests for law enforcement response by community members. Victim Services personnel are available 24 hours/day, 7 days/week for on-scene response to victims at the request of sworn personnel. All victim-related cases are reviewed and subsequently assigned to Victim Services personnel for the provision of services to victims. Additionally, Victim Services contact information is posted on www.tcsosheriff.org to provide an avenue for self-generated access to services.

Services to Victims of Crime

Applicant agrees to provide services to victims of crime which include: responding to the emotional and physical needs of crime victims; assisting victims in stabilizing their lives after victimization; assisting victims to understand and participate in the criminal justice system; and providing victims with safety and security.

Effective Services

Applicant must demonstrate a record of providing effective services to crime victims. If the applicant cannot yet demonstrate a record of providing effective services, the applicant must demonstrate that at least 25 percent of its financial support comes from non-federal sources.

Volunteers

Applicant agrees to use volunteers to support either the project or agency-wide services, unless CJD determines that a compelling reason exists to waive this requirement.

Community Efforts

Applicant agrees to promote community efforts to aid crime victims. Applicants should promote, within the community, coordinated public and private efforts to aid crime victims. Coordination efforts qualify an organization to receive these funds, but are not activities that can be supported with these funds.

Crime Victims' Compensation

Applicant agrees to assist crime victims in applying for crime victims' compensation benefits.

Records

Applicant agrees to maintain daily time and attendance records specifying the time devoted to allowable victim services.

Civil Rights Information

Applicant agrees to maintain statutorily required civil rights statistics on victims served by race, national origin, sex, age, and disability of victims served, within the timeframe established by CJD. This requirement is waived when providing services, such as telephone counseling, where soliciting the information may be inappropriate or offensive to the crime victim.

Victims of Federal Crime

Applicant agrees to provide equal services to victims of federal crime. (Note: Victim of federal crime is a victim of an offense that violates a federal criminal statute or regulation; federal crimes also include crimes that occur in an area where the federal government has jurisdiction, such as Indian reservations, some national parks, some federal buildings, and military installations.)

No Charge

Applicant agrees to provide grant-funded services at no charge to victims of crime. Applicants are also prohibited from billing Crime Victims Compensation, private insurance, Medicaid, or Medicare for services provided using VOCA funds.

Confidentiality

Applicant agrees to maintain the confidentiality of client-counselor information and research data, as required by state and federal law.

Discrimination

Applicant agrees not to discriminate against victims because they disagree with the State's prosecution of the criminal case.

Forensic Medical Examination Payments

Health care facilities shall conduct a forensic medical examination of a victim of an alleged sexual assault if the victim arrived at the facility within 96 hours after the assault occurred and the victim consents to the examination. The victim is not required to

participate in the investigation or prosecution of an offense as a condition of receiving a forensic medical examination, nor pay for the forensic examination or the evidence collection kit. The evidence collection portion of the exam is to be paid by law enforcement per state law. Crime Victim Compensation funds may be used to pay for the medical portion of the exam unless the victim of sexual assault is required to seek reimbursement for the examination from their insurance carrier. If a health care facility does not provide diagnosis or treatment services for sexual assault victims, the facility is required to refer the victim to a facility that provides those services.

Protection Orders

Victims applying for a protective order or their attorney may not bear the costs associated with the filing of an order of protections.

Nondisclosure of Confidential or Private Information

Personally identifying information or individual information collected in connection with services requested, utilized, or denied may not be disclosed; or, reveal individual client information without informed, written, reasonably time-limited consent of the person about whom information is sought. If release of information is compelled by statutory or court mandate, reasonable attempts to provide notice to victims affected by the disclosure of information will be made and steps necessary will be taken to protect the privacy and safety of the persons affected by the release of information.

Civil Rights Liaison

A civil rights liaison who will serve as the grantee's civil rights point of contact and who will be responsible for ensuring that the grantee meets all applicable civil rights requirements must be designated. The designee will act as the grantee's liaison in civil rights matters with CJD and with the federal Office of Justice Programs.

Enter the Name of the Civil Rights Liaison: Human Resources Director Diane Poirot
Enter the Address for the Civil Rights Liaison: 700 Lavaca St., Suite 420 Austin, TX 78701
Enter the Phone Number for the Civil Rights Liaison [(999) 999-9999 x9999]: (512) 854-9165

Certification

Each applicant agency must certify to the specific criteria detailed above under **Program Requirements** to be eligible for General Victim Assistance - Direct Services Program Solicitations.

I certify to all of the above eligibility requirements.

Problem Statement:

Please provide a detailed account in the Problem Statement section of the existing issues your project will target.

Enter your problem statement:

The Travis County Sheriff's Office investigates approximately 500 cases of Child Abuse annually; however, prior to grant funding received for FY11, there were no TCSO Victim Services personnel dedicated to providing services to victims associated with Child Abuse cases. This resulted in only about 9% of the Child Abuse victims receiving services in FY10. With the implementation of this dedicated position, over 360 victims are receiving services annually.

Supporting Data:

Provide as much supporting data, to include baseline statistics and the sources of your data, which are pertinent to where the grant project is located and/or targeted. Do not use statewide data for a local problem or national data for a statewide problem.

Enter your supporting data:

TCSO Child Abuse Unit investigated 476 cases during FY10. During that same time period, approximately 9% of victims were afforded service provision by Victim Services personnel. In FY12, 479 child abuse cases were investigated by TCSO sworn personnel. Many of these investigated cases involved multiple identified victims and considerable coordination between family members, community agency representatives and TCSO personnel. Grant support of the Child Abuse victim services personnel allowed for 376 victims to receive services during FY12. Working with a pool of approximately 50 trained volunteers and 7 paid staff (including the current Child Abuse grant-funded FTE), the TCSO Victim Services Unit responded to approximately 700 on-call requests this year, responding 24 hours per day, 365 days per year as a means of ensuring immediate crisis intervention.

Community Plan:

For projects that have a local or regional impact target area, provide information regarding the community plan need(s) that your project will address.

Enter your community planning needs:

The FY2012-FY2015 Community Plan for Coordination of Criminal Justice and Related Activities was compiled between March-November, 2011, and was adopted by the Travis County Commissioners Court on November 29, 2011. TCSO participated in the multiple community planning meetings, and was represented on the community plan steering committee. This Child Abuse Victim Services Personnel project addresses Priority A within the Victim Services priorities to increase local capacity to respond to victims of crime, provide state mandated services to victims, and build organizational capacity to effectively serve the county population.

Goal Statement:

Provide a brief description of the overall goals and objectives for this project. Enter a description for the overall goals and objectives: This project would provide a dedicated resource to serve the victims of Child Abuse cases. Through this project, one full-time Victim Counselor would hold within their primary duties, the provision of services to victims associated with Child Abuse cases; an additional 360 victims would receive services from Victim Services personnel.

Cooperative Working Agreement (CWA):

When a grantee intends to carry out a grant project through cooperating or participating with one or more outside organizations, the grantee must obtain authorized approval signatures on the cooperative working agreement (CWA) from each participating organization. Grantees must maintain on file a signed copy of all cooperative working agreements, and they must submit to CJD a list of each participating organization and a description of the purpose of each CWA. Cooperative working agreements do not involve an exchange of funds.

For this project, provide the name of the participating organization(s) and a brief description of the purpose(s) for the CWA(s). You should only provide information here that this project's successful operation is contingent on for the named service or participation from the outside organization.

Note: A Sample CWA is available [here](#) for your convenience.

Enter your cooperating working agreement(s):

The Travis County Sheriff's Office is an active member of the Austin/Travis County Child Protection Team, working cooperatively under an interagency agreement to protect the children of our community by consolidating the community, investigative, legal and social services provided by the Travis County District Attorney's Office, Travis County Sheriff's Office, Austin Police Department, their respective Victim Services Divisions, the Center for Child Protection, Texas Department of Family and Protective Services, Dell Children's Medical Center into one collaborative effort.

Continuation Projects:

For continuation projects only, if your current or previous year's project is NOT on schedule in accomplishing the stated objectives, briefly describe the major obstacles preventing your organization from successfully reaching the project objectives as stated within your previous grant application. (Data may be calculated on a pro-rated basis depending on how long the current or previous year's project has been operating.)

Enter your current grant's progress:

Project Summary:

Briefly summarize the entire application, including the project's problem statement, supporting data, goal, target group, activities, and objectives. Be sure that the summary is easy to understand by a person not familiar with your project and that you are confident and comfortable with the information if it were to be released under a public information request.

Enter your summary statement for this project:

Working with a pool of approximately 50 trained volunteers and 7 paid staff (including the Child Abuse grant-funded FTE), the TCSO Victim Services Unit responds to approximately 700 on-call requests each year, responding 24 hours per day, 365 days per year as a means of ensuring immediate crisis intervention. Through this project, one full-time Victim Counselor will be primarily responsible for service provision to the victims of Child Abuse cases TCSO investigates. Grant funding was awarded for this project to dedicate a Victim Services FTE solely to serve the victims of Child Abuse cases during FY11. If funded, this FY14 request will provide continued funding for this project; however, demonstrating our commitment to this project and our goal of sustainability, the TCSO is assuming an increase in responsibility for funding above and beyond the minimum match requirement (60% rather than the 20% minimum). Continuation of this project will provide services including crisis intervention, safety planning, assistance with Crime Victim Compensation applications and Protective Order processes, emotional support, and referrals to community agencies to a total of 360 victims.

Project Activities Information

Type of Crime Victim

Select the type(s) of crime victim this project targets and provide the percentage of time dedicated to serving each category of crime victim. You may select more than one type; however, the sum of the percentages may not exceed 100%.

Sexual Assault Percentage (%):	0
Domestic Abuse Percentage (%):	0
Child Abuse Percentage (%):	100
DUI / DWI Crashes Percentage (%):	0
Survivors of Homicide Percentage (%):	0
Assault Percentage (%):	0
Adults Molested as Children Percentage (%):	0
Elder Abuse Percentage (%):	0
Robbery Percentage (%):	0
Stalking Percentage (%):	0
Dating/Acquaintance Violence Percentage (%):	0
Human Trafficking Percentage (%):	0

Selected Project Activities:

ACTIVITY	PERCENTAGE:	DESCRIPTION
Crisis Services	100.00	This Victim Counselor will provide advocacy services in crisis intervention, emotional support, safety planning, assistance with CVC and Protective Order processes, case status, coordination of case activity, transportation and referrals to community agencies.

Geographic Area:
Travis County, Texas

Target Audience:
Primary and secondary victims of physical/sexual child abuse

Gender:
Both male and female

Ages:
All ages

Special Characteristics:
Travis County serves victims in outlying areas who may have obstacles to services and assistance.

Measures Information

Progress Reporting Requirements

Outcomes Reported to Texas A&M University, Public Policy Research Institute (PPRI):

In addition to the measures listed below, all programs will be required to report the number of victims/survivors who returned to the agency as a result of a new victimization either by the same perpetrator or a new perpetrator. Note: This does not include victims returning to your agency to continue their treatment. This measure will be used to measure the efficacy of the services provided in the restoration of the victim to full mental, physical, and emotional health.

Objective Output Measures

OUTPUT MEASURE	CURRENT DATA	TARGET LEVEL
Number of safety plans developed.	125	180
Number of victims seeking services who were not served.		
Number of victims / survivors seeking services who were served.	129	360
Number of survivors assisted with crime victim compensation applications.	88	180
Number of survivors provided with medical advocacy.		
Number of survivors receiving crisis counseling.	115	360
Number of survivors receiving information and / or referral (in person / by phone).	128	360
Number of survivors receiving advocacy for emergency services (e.g., legal assistance, shelter, law enforcement, etc.).		
Number of volunteers trained to provide direct assistance to victims / survivors.	52	52

Certification and Assurances

Each applicant must click on this link to review the standard [Certification and Assurances](#).

Resolution from Governing Body

Applications from local units of governments and other political subdivisions must include a [resolution](#) that contains the following:

1. Authorization by your governing body for the submission of the application to CJD that clearly identifies the name of the project for which funding is requested;
2. A commitment to provide all applicable matching funds;
3. A designation of the name and/or title of an authorized official who is given the authority to apply for, accept, reject, alter, or terminate a grant (Note: If a name is provided, you must update CJD should the official change during the grant period.); and
4. A written assurance that, in the event of loss or misuse of grant funds, the governing body will return all funds to CJD.

Upon approval from your agency's governing body, upload the [approved](#) resolution to eGrants by clicking on the **Upload Files** sub-tab located in the **Summary** tab.

Contract Compliance

Will CJD grant funds be used to support any contracts for professional services?

Select the Appropriate Response:

- Yes
 No

For applicant agencies that selected **Yes** above, describe how you will monitor the activities of the sub-contractor(s) for compliance with the contract provisions (including equipment purchases), deliverables, and all applicable statutes, rules, regulations, and guidelines governing this project.

Enter a description for monitoring contract compliance:

Lobbying

For applicant agencies requesting grant funds in excess of \$100,000, have any federally appropriated funds been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the awarding of any federal contract, the making of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant loan, or cooperative agreement?

Select the Appropriate Response:

- Yes
 No
 N/A

For applicant agencies that selected either **No** or **N/A** above, have any non-federal funds been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress in connection with this federal contract, loan, or cooperative agreement?

Select the Appropriate Response

- Yes
 No
 N/A

Fiscal Year

Provide the begin and end date for the applicant agency's fiscal year (e.g., 09/01/20xx to 08/31/20xx).

Enter the Begin Date [mm/dd/yyyy]: 10/1/2013
Enter the End Date [mm/dd/yyyy]: 9/30/2014

Sources of Financial Support

Each applicant must provide the amount of grant funds expended during the most recently completed fiscal year for the following sources:

Enter the amount (\$) of Federal Grant Funds: 26615667
Enter the amount (\$) of State Grant Funds: 4816158

Single Audit

Has the applicant agency expended federal grant funding of \$500,000 or more, or state grant funding of \$500,000 or more during the most recently completed fiscal year?

Select the Appropriate Response:

- Yes
 No

Note: Applicants who expend less than \$500,000 in federal grant funding or less than \$500,000 in state grant funding are exempt from the Single Audit Act and cannot charge audit costs to a CJD grant. However, CJD may require a limited scope audit as defined in OMB Circular A-133.

Applicant agencies that selected **Yes** above, provide the date of your organization's last annual single audit, performed by an independent auditor (in accordance with the Single Audit Act Amendments of 1996 and OMB Circular A-133).

Enter the date of your last annual single audit: 9/30/2011

Equal Employment Opportunity Plan (EEOP)

Type I Entity: Defined as an applicant that meets one or more of the following criteria:

- the applicant has less than 50 employees;
- the applicant is a non-profit organization;
- the applicant is a medical institution;
- the applicant is an Indian tribe;
- the applicant is an educational institution, or
- the applicant is receiving a single award of less than \$25,000.

Requirements for a Type I Entity:

- The applicant is not required to prepare an EEOP because it is a Type I Entity as defined above, pursuant to 28 CFR 42.302; and
- the applicant will comply with applicable federal civil rights laws that prohibit discrimination in employment and in the delivery of services.

Type II Entity: Defined as an applicant that meets the following criteria:

- the applicant has 50 or more employees, and
- the applicant is receiving a single award of \$25,000 or more, but less than \$500,000.

Requirements for a Type II Entity: Federal law requires a Type II Entity to formulate an EEOP and keep it on file.

- The applicant agency is required to formulate an EEOP in accordance with 28 CFR 42.301, et seq., subpart E;
- the EEOP is required to be formulated and signed into effect within the past two years by the proper authority;
- the EEOP is available for review by the public and employees or for review or audit by officials of CJD, CJD's designee, or the Office of Civil Rights, Office of Justice Programs, U.S. Department of Justice, as required by relevant laws and regulations;
- the applicant will comply with applicable federal civil rights laws that prohibit discrimination in employment and in the delivery of services; and
- the EEOP is required to be on file in the office of (enter the name and address where the EEOP is filed below):

Enter the name of the person responsible for the EEOP and the address of the office where the EEOP is filed:

Type III Entity: Defined as an applicant that is NOT a Type I or Type II Entity. Requirements for a Type III Entity: Federal law requires a Type III Entity to formulate an EEOP and submit it for approval to the Office for Civil Rights, Office of Justice Programs, U.S. Department of Justice.

- The EEOP is required to be formulated and signed into effect within the past two years by the proper authority;
- the EEOP has been submitted to the Office of Civil Rights (OCR), Office of Justice Programs, U.S. Department of Justice and has been approved by the OCR, or it will be submitted to the OCR for approval upon award of the grant, as required by relevant laws and regulations; and
- the applicant will comply with applicable federal civil rights laws that prohibit discrimination in employment and in the delivery of services.

Based on the definitions and requirements above, the applicant agency certifies to the following entity type:

Select the appropriate response:

- Type I Entity
 Type II Entity
 Type III Entity

Debarment

Each applicant agency will certify that it and its principals:

- Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State or Federal Court, or voluntarily excluded from participation in this transaction by any federal department or agency;
- Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property; or
- Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (federal, state, or local) with commission of any of the offenses enumerated in the above bullet; and have not within a three-year period preceding this application had one or more public transactions (federal, state, or local) terminated for cause or default.

Select the appropriate response:

- I Certify
 Unable to Certify

If you selected **Unable to Certify** above, please provide an explanation as to why the applicant agency cannot certify the statements.

Enter the debarment justification:

FFATA Certification

Certification of Recipient Highly Compensated Officers – The Federal Funding Accountability and Transparency Act (FFATA) requires Prime Recipients (CJD) to report the names and total compensation of each of the five most highly compensated officers (a.k.a. positions) of each sub recipient organization for the most recently completed fiscal year preceding the year in which the grant is awarded if the subrecipient answers **YES** to the **FIRST** statement but **NO** to the **SECOND** statement listed below.

In the sub recipient's preceding completed fiscal year, did the sub recipient receive: (1) 80 percent or more of its annual gross revenue from Federal contracts (and subcontracts), loans, grants (and subgrants) and cooperative agreements; AND (2) \$25,000,000 or more in annual gross revenue from Federal contracts (and subcontracts), loans, grants (and subgrants) and cooperative agreements?

Yes
 No

Does the public have access to information about the compensation of the senior executives through periodic reports filed under Section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or Section 6104 of the Internal Revenue Code of 1986?

Yes
 No

If you answered **YES** to the **FIRST** statement and **NO** to the **SECOND** statement, please provide the name and total compensation amount of each of the five most highly compensated officers (a.k.a. positions) within your agency for the current calendar year. If you answered **NO** to the first statement you are NOT required to provide the name and compensation amounts. NOTE: "Total compensation" means the complete pay package of each of the sub recipient's compensated officers, including all forms of money, benefits, services, and in-kind payments (see SEC Regulations: 17 CCR 229.402).

Position 1 - Name:
Position 1 - Total Compensation (\$): 0

Position 2 - Name:
Position 2 - Total Compensation (\$): 0

Position 3 - Name:
Position 3 - Total Compensation (\$): 0

Position 4 - Name:
Position 4 - Total Compensation (\$): 0

Position 5 - Name:
Position 5 - Total Compensation (\$): 0

Budget Details Information

Budget Information by Budget Line Item:

CATEGORY	SUB CATEGORY	DESCRIPTION	CJD	CASH MATCH	IN-KIND MATCH	GPI	TOTAL	UNIT/%
Personnel	Counselor and/or Therapist (non-licensed)	Victim Advocacy Counselor dedicated to providing services to Child Abuse victims (\$40,423 salary, plus \$17,308 fringe for FICA, health insurance, life insurance, retirement, workers comp, medicare).	\$23,092.00	\$34,639.00	\$0.00	\$0.00	\$57,731.00	100

Source of Match Information

Detail Source of Match/GPI:

DESCRIPTION	MATCH TYPE	AMOUNT
60 percent of salary, fringe of Child Abuse personnel paid with County general fund	Cash Match	\$34,639.00

Summary Source of Match/GPI:

Total Report	Cash Match	In Kind	GPI Federal Share	GPI State Share
\$34,639.00	\$34,639.00	\$0.00	\$0.00	\$0.00

Budget Summary Information

Budget Summary Information by Budget Category:

CATEGORY	CJD	CASH MATCH	IN-KIND MATCH	GPI	TOTAL
Personnel	\$23,092.00	\$34,639.00	\$0.00	\$0.00	\$57,731.00

Budget Grand Total Information:

CJD	CASH MATCH	IN-KIND MATCH	GPI	TOTAL
\$23,092.00	\$34,639.00	\$0.00	\$0.00	\$57,731.00

Condition Of Fundings Information

Condition of Funding / Project Requirement	Date Created	Date Met	Hold Funds	Hold Line Item Funds



TRAVIS COUNTY FY 13 GRANT SUMMARY SHEET

Check One:	Application Approval: <input type="checkbox"/>	Permission to Continue: <input type="checkbox"/>
	Contract Approval: <input checked="" type="checkbox"/>	Status Report: <input type="checkbox"/>
Check One:	Original: <input checked="" type="checkbox"/>	Amendment: <input type="checkbox"/>
Check One:	New Grant: <input type="checkbox"/>	Continuation Grant: <input checked="" type="checkbox"/>
Department/Division:	Travis County Sheriff's Office - Law Enforcement	
Contact Person/Title:	Julie Cullen - Planner	
Phone Number:	854-4669	

Grant Title:	Tx DOT Impaired Driving Mobilization		
Grant Period:	From: <input type="text" value="Mar 1, 2013"/>	To: <input type="text" value="Sep 30, 2013"/>	
Fund Source:	Federal: <input checked="" type="checkbox"/>	State: <input type="checkbox"/>	Local: <input type="checkbox"/>
Grantor:	Texas Department of Transportation (TxDOT)		
Will County provide grant funds to a sub-recipient?	Yes: <input type="checkbox"/>	No: <input checked="" type="checkbox"/>	
Are the grant funds pass-through from another agency? If yes, list originating agency below.	Yes: <input checked="" type="checkbox"/>	No: <input type="checkbox"/>	
Originating Grantor:	US Dept of Transportation		

Budget Categories	Grant Funds	County Cost Share	Budgeted County Contribution #595010 (Cash Match)	In-Kind	TOTAL
Personnel:	\$ 16,906	\$ 2,773	\$ 0	\$ 0	\$ 19,679
Operating:	\$ 0	\$ 2,911	\$ 0	\$ 0	\$ 2,911
Capital Equipment:	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Indirect Costs:	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Totals:	\$ 16,906	\$ 5,684	\$ 0	\$ 0	\$ 22,590
FTEs:	0.00	0.00	0.00	0.00	0.00

Permission to Continue Information					
Funding Source (Cost Center)	Personnel Cost	Operating Cost	Estimated Total	Filled FTE	PTC Expiration Date
	\$ 0	\$ 0	\$ 0	0.00	

Department	Review	Staff Initials	Comments
County Auditor	<input checked="" type="checkbox"/>	MN	
County Attorney	<input checked="" type="checkbox"/>	JC	

Performance Measures					
#	Measure	Actual FY 11 Measure	Projected FY 12 Measure	Projected FY 13 Measure	Projected FY 14 Measure
+ -	Applicable Departmental Measures				
1.	DWI Bookings		575	653	
2.					
3.					
+ -	Measures for the Grant				
1.		0	0	0	0
	Outcome Impact Description				
2.		0	0	0	0
	Outcome Impact Description				
3.					
	Outcome Impact Description				
4.					
	Outcome Impact Description				

PBO Recommendation:

The Travis County Sheriff's Office is requesting approval of a grant application with the Texas Department of Transportation to continue a program that will provides pass through federal funding for overtime resources for driving while intoxicated enforcement. The grant match is met through the existing budget. No additional funds are required by the grant.

PBO recommends approval.

1. Brief Narrative - Summary of Grant: What is the goal of the program? How does the grant fit into the current activities of the department? Is the grant starting a new program, or is it enhancing an existing one?

This project will increase TCSO efforts to conduct DWI enforcement targeted in Waves during holiday periods to increase DWI arrests and earned media activity as part of the state "Drink. Drive. Go to Jail" campaign and in conjunction with the national Impaired Driving Mobilization campaign.

2. Departmental Resource Commitment: What are the long term County funding requirements of the grant?

None.

3. County Commitment to the Grant: Is a county match required? If so, how does the department propose to fund the grant match? Please explain.

A 25% match is required. The match is comprised of vehicle usage, supervisory oversight, and public information and education costs. Vehicular cost were calculated using data from the previous two years. We have estimated that the County will incur an additional 3,780 miles on its patrol vehicles. Based on the grantor's vehicle mileage calculator the reimbursement rate is \$0.77, for a total of \$2,911. In addition, an estimated 54 hours of supervisory oversight and public information and education costs will be incurred by the County at a cost of \$2,773. The match will be met through the existing budget and no additional resources are required.

4. Does the grant program have an indirect cost allocation, in accordance with the grant rules? If not, please explain why not.

In accordance with grant rules, projects totaling less than \$50,000 may waive the indirect costs.

5. County Commitment to the Program Upon Termination of the Grant: Will the program end upon termination of the grant funding: Yes or No? If No, what is the proposed funding mechanism: (1) Request additional funding or (2) Use departmental resources. If (2), provide details about what internal resources are to be provided and what other programs will be discontinued as a result.

N/A

6. If this is a new program, please provide information why the County should expand into this area.

The project enables law enforcement to provide for additional targeted patrols for DWI enforcement efforts with the funding coming from TxDOT.

7. Please explain how this program will affect your current operations. Please tie the performance measures for this program back to the critical performance measures for your department or office.

The program will enhance our current operations by providing additional officers on the streets to target these offenses as well as increasing our public education components with targeting of high-volume dates and events



JAMES N. SYLVESTER
Chief Deputy

GREG HAMILTON

TRAVIS COUNTY SHERIFF

P.O. Box 1748
Austin, Texas 78767
(512) 854-9770
www.tcssheriff.org

PHYLLIS CLAIR
Major - Law Enforcement

DARREN LONG
Major - Corrections

MARK SAWA
Major - Administration & Support

February 05, 2013

MEMORANDUM

TO: The Travis County Commissioners Court

FROM: Julie Cullen, Research & Planning

SUBJECT: Texas Department of Transportation Selective Traffic Enforcement Program
Impaired Driving Mobilization

Based on the National Highway Traffic Safety Administration's 2010 Traffic Safety Facts, Travis County remains fifth in the state in alcohol-related fatalities¹. According to the Texas Motor Vehicle Crash Statistics for 2011, there were a total of 24,201 alcohol related crashes in Texas, of which 5.77% of these crashes, or 1,398, happened within Travis County. Of these 1,398 crashes, there were 21 fatalities and 372 serious injuries². Even though these numbers have decreased from 2010, the Travis County Sheriff's Office (TCSO) was asked to continue its participation in the Impaired Driving Mobilization (IDM) program offered by Texas Department of Transportation (TxDOT). Over the past ten years, TCSO has participated in similar selective traffic enforcement program grants which have paid for overtime in order for officers to focus on drivers operating under the influence of alcohol.

We are asking for the Court's support and approval by accepting the offered funding under the TxDOT IDM program. This grant will provide \$16,906 for deputy overtime to target this particular offense. The required 25% match funding will be provided in the form of supervisory oversight and documentation for the program, public information and education efforts, as well as the costs associated with vehicle usage.

This program is intended to supplement local funding for targeted efforts to reduce accidents that are a product of these offenses. Historically, this grant provided funding which focused on major holidays. TCSO will target the following holiday waves for the increased enforcement:

- Spring Break - March
- Independence Day - July
- Labor Day - September

¹ NHTSA National Highway Traffic Safety Administration National Center for Statistics and Analysis, 2006-2010 Traffic Safety Facts for Travis County, Texas

² Texas Department of Transportation DUI (Alcohol) Crashes and Injuries by County, 2011

**THE STATE OF TEXAS
COUNTY OF TRAVIS**

RESOLUTION

WHEREAS, the Travis County Commissioners' Court finds that it is in the best interest of the citizens of Travis County to seek additional resources in the form of the Texas Department of Transportation Impaired Driving Mobilization STEP Wave grant funding to enhance existing patrol enforcement efforts targeting alcohol related offenses; and

WHEREAS, the Travis County Commissioners' Court has agreed to provide the minimum matching percentage for said project as required by the TXDOT grant application; and

WHEREAS, the Travis County Commissioners' Court has agreed that in the event of loss or misuse of the Texas Department of Transportation funds, the Travis County Commissioners' Court assures that the funds will be returned to the Texas Department of Transportation in full; and

WHEREAS, the Travis County Commissioners' Court designates the County Judge of Travis County as the authorized official with the power to apply for, accept, reject, alter or terminate said grant; and

NOW, THEREFORE, BE IT RESOLVED, that the Travis County Commissioners' Court approves submission of the grant application for the Texas Department of Transportation Selective Traffic Enforcement Program (STEP Wave).

RESOLVED this the ___ day of _____, 2013.

By:

Samuel T. Biscoe
Travis County Judge

Date:

Performance objectives for the overtime associated with this grant includes:

- Conduct focused DWI saturation patrols within high risk locations during times when alcohol-related crashes are most frequent. This may result in an additional 42 DWI arrests during the planned 270 hours of increased enforcement over the course of three waves.
- Providing public information during the target periods, and conduct pre and post earned media activities for each holiday period.
- Maintaining normal efforts in traffic and anti-DWI enforcement during the target periods.

Thus, these funds are provided to enhance our operations with a specialized goal of apprehending violators in our jurisdiction. These efforts are part of our ongoing objectives to reduce traffic accidents, injuries and fatalities that result from alcohol related behaviors.

Your authorization to accept this funding will assist in our targeted efforts to reduce accidents and deaths caused by drivers operating under the influence.

Please do not hesitate to call me at extension 44669 if you have any questions or comments.

Texas Traffic Safety eGrants

Fiscal Year 2013

Organization Name: Travis County Sheriff's Office

Legal Name: County of Travis

Payee Identification Number: 17460001922000

Project Title: STEP - Impaired Driving Mobilization

ID: 2013-Travis County SO-IDM-00025

Period: 10/01/2012 to 09/30/2013

County Served

Counties Selected: Travis County - Austin District

Political District Served

Selected Political Districts Served

- U.S. Congress** Congressional District 10
Congressional District 21
Congressional District 25
- Texas Senate** Texas Senate District 14
Texas Senate District 21
Texas Senate District 24
Texas Senate District 25
- Texas House** Texas House of Representatives District 46
Texas House of Representatives District 47
Texas House of Representatives District 48
Texas House of Representatives District 49
Texas House of Representatives District 50
Texas House of Representatives District 51

Goals and Strategies

Goal: To increase effective enforcement and adjudication of traffic safety-related laws to reduce fatal and serious injury crashes

Strategies: Increase enforcement of traffic safety-related laws.
Increase public education and information campaigns.

Goal: To reduce the number of DWI-related crashes, injuries, and fatalities

Strategy: Increase enforcement of DWI laws.

X I agree to the above goals and strategies.

Law Enforcement Objective/Performance Measure

1. Number and type citations/arrests to be issued under STEP	
a. Number of DWI arrests to be made during the Christmas/New Year's DWI Operation	0
b. Number of DWI arrests to be made during the Spring Break DWI Operation	10
c. Number of DWI arrests to be made during the Independence Day DWI Operation	14
d. Number of DWI arrests to be made during the Labor Day DWI Operation	14
2. Total Number of Enforcement Hours for Entire Grant Period	270
Step Indicator	2.53

Note:

Nothing in this agreement shall be interpreted as a requirement, formal or informal, that a peace officer issue a specified or predetermined number of citations in pursuance of the Subgrantee's obligations hereunder.

In addition to the STEP enforcement activities, the subgrantee must maintain baseline non-STEP funded citation and arrest activity due to the prohibition of supplanting.

PI&E Objective/Performance Measure

- 1. Complete administrative and general grant requirements
 - a. Number of Performance Reports to be submitted 3
 - b. Number of Requests for Reimbursement to be submitted 3
- 2. Support Grant efforts with a public information and education (PI&E) program
 - a. Conduct a minimum of one (1) presentation for each DWI operation period 3
 - b. Conduct a minimum of two (2) media exposures (e.g., news conferences, news releases, and interviews) for each DWI Operation period. 6
 - c. Conduct a minimum of one (1) community event (e.g., health fair, traffic safety booth) during the grant period 1
 - d. Produce the following number of public information and education materials if applicable. 0
 - e. Distribute the following number of public information and education materials if applicable. 0

General Information

Project Title STEP - Impaired Driving Mobilization

Project Description To conduct DWI enforcement Waves during holiday periods to increase DWI arrests and earned media activity as part of the statewide "Drink. Drive. Go To Jail" campaign and in conjunction with the national Impaired Driving Mobilization campaign

How many years has your organization received funding for this project?
This will be our second year.

County of Travis
STEP - Impaired Driving Mobilization

Budget Summary

Budget Category		TxDOT	Match	Total
Category I - Labor Costs				
(100)	Salaries	\$13,870.98	\$2,275.52	\$16,146.50
(200)	Fringe Benefits	\$3,035.32	\$497.94	\$3,533.26
	Category I Sub-Total	\$16,906.30	\$2,773.46	\$19,679.76
Category II - Other Direct Costs				
(300)	Travel	\$0	\$2,910.60	\$2,910.60
(400)	Equipment	\$0	\$0	\$0
(500)	Supplies	\$0	\$0	\$0
(600)	Contractual Services	\$0	\$0	\$0
(700)	Other Miscellaneous	\$0	\$0	\$0
	Category II Sub-Total	\$0	\$2,910.60	\$2,910.60
Total Direct Costs		\$16,906.30	\$5,684.06	\$22,590.36
Category III - Indirect Costs				
(800)	Indirect Cost Rate	\$0	\$0	\$0
Summary				
	Total Labor Costs	\$16,906.30	\$2,773.46	\$19,679.76
	Total Direct Costs	\$0	\$2,910.60	\$2,910.60
	Total Indirect Costs	\$0	\$0	\$0
Grand Total		\$16,906.30	\$5,684.06	\$22,590.36
	Fund Sources	74.84%	25.16%	

Operational Plan

X I agree to the following

Comments:

Site Description

Jurisdiction Wide

Conduct focussed DWI saturation patrols within high risk locations during times when alcohol-related crashes are most frequent Conduct a minimum of 4 nights of DWI enforcement during each holiday period Conduct pre and post earned media activities for each holiday period

Christmas/New Year's Wave

Pre-Media Campaign

December 18, 2012 - December 20, 2012

Enforcement Period

December 21, 2012- January 1, 2013

Post-Media Campaign

January 5, 2013 - January 7, 2013

Spring Break Wave

Pre-Media Campaign

March 5, 2013 - March 7, 2013

Enforcement Period

March 8, 2013 - March 17, 2013

Post-Media Campaign

March 21, 2013 - March 23, 2013

Independence Day Wave

Pre-Media

June 25, 2013 - June 27, 2013

County of Travis
STEP - Impaired Driving Mobilization

Campaign

Enforcement Period June 28, 2013 - July 7, 2013

Post-Media Campaign July 11, 2013 - July 13, 2013

Labor Day Crackdown

Pre-Media Campaign August 13, 2013 - August 15, 2013

Enforcement Period August 16, 2013 - September 2, 2013

Post-Media Campaign September 6, 2013 - September 8, 2013

Description of Activities

Pre-Media Efforts Before Enforcement Periods: Conduct local media events immediately before the enforcement effort to maximize the visibility of enforcement to the public. The media events tell the public when, where, how and why impaired driving laws are being enforced.

Enforcement Periods: Intensify enforcement through coordinated saturation patrols in an overtime STEP placing primary emphasis on increasing DWI arrests and reducing the number of alcohol related traffic crashes during peak holiday traffic.

Post-Media Efforts After Enforcement Periods: Conduct local media events to tell the public why impaired driving laws are important and the results of the mobilization.

County of Travis
STEP - Impaired Driving Mobilization

County of Travis
STEP - Impaired Driving Mobilization

2013-Travis County SO-IDM-
00025

Printed On: 1/16/2013

2013-Travis County SO-IDM-00025

Printed On:
1/16/2013



TRAVIS COUNTY FY 13 GRANT SUMMARY SHEET

Check One:	Application Approval: <input type="checkbox"/>	Permission to Continue: <input type="checkbox"/>
	Contract Approval: <input type="checkbox"/>	Status Report: <input checked="" type="checkbox"/>
Check One:	Original: <input type="checkbox"/>	Amendment: <input checked="" type="checkbox"/>
Check One:	New Grant: <input type="checkbox"/>	Continuation Grant: <input checked="" type="checkbox"/>
Department/Division:	Travis County Health and Human Services and Veterans Service	
Contact Person/Title:	John C. Bradshaw/ Contract Specialist	
Phone Number:	854-4277	

Grant Title:	Title IV-E Child Welfare Services		
Grant Period:	From: <input type="text" value="Oct 1, 2012"/>	To:	<input type="text" value="Sep 30, 2013"/>
Fund Source:	Federal: <input checked="" type="checkbox"/>	State: <input type="checkbox"/>	Local: <input type="checkbox"/>
Grantor:	Texas Dept. of Family and Protective Services		
Will County provide grant funds to a sub-recipient?	Yes: <input type="checkbox"/>	No: <input checked="" type="checkbox"/>	
Are the grant funds pass-through from another agency? If yes, list originating agency below.	Yes: <input checked="" type="checkbox"/>	No: <input type="checkbox"/>	
Originating Grantor:	Social Security Administration		

Budget Categories	Grant Funds	County Cost Share	Budgeted County Contribution #595010 (Cash Match)	In-Kind	TOTAL
Personnel:	\$ 6,721	\$ 30,562	\$ 0	\$ 0	\$ 37,283
Operating:	\$ 22,202	\$ 16,231	\$ 0	\$ 0	\$ 38,433
Capital Equipment:	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Indirect Costs:	\$ 7,565	\$ 34,397	\$ 0	\$ 0	\$ 41,962
Totals:	\$ 36,488	\$ 81,190	\$ 0	\$ 0	\$ 117,678
FTEs:	0.00	0.00	0.00	0.00	0.00

Permission to Continue Information					
Funding Source (Cost Center)	Personnel Cost	Operating Cost	Estimated Total	Filled FTE	PTC Expiration Date
	\$ 0	\$ 0	\$ 0	0.00	

Department	Review	Staff Initials	Comments
County Auditor	<input checked="" type="checkbox"/>	PL	
County Attorney	<input type="checkbox"/>		

Performance Measures					
#	Measure	Actual FY 11 Measure	Projected FY 12 Measure	Projected FY 13 Measure	Projected FY 14 Measure
+ -	Applicable Departmental Measures				
1.	Number of Child Protective Services petitions filed (Stats provided annually)	434	285	285	285
2.	Average number of children in conservatorship per month	840	800	800	800
3.	Number of new children entering care	627	625	625	625
+ -	Measures for the Grant				
1.	Number of Title IV- E eligible youth in foster care served by the contract	140	100	100	100
	Outcome Impact Description	This ensures that youth in foster care receive all necessary services			
2.					
	Outcome Impact Description				
3.					
	Outcome Impact Description				

PBO Recommendation:

Every year, HHS&VS is required to submit the Internal Control Structure Questionnaire in compliance with the Title IV-E Child Welfare Services grant contract. This questionnaire is related to the county's accounting practices and is reviewed closely by the County Auditor's Office. Attachments identified in the questionnaire total more than 370 pages therefore HHS&VS has agreed to provide them electronically to anyone requesting that information. (Please see the note attached to the end of this item. PBO concurs with this submission.

1. Brief Narrative - Summary of Grant: What is the goal of the program? How does the grant fit into the current activities of the department? Is the grant starting a new program, or is it enhancing an existing one?

The Texas Dept. of Family and Protective Services (DFPS) pools certain foster care expenditures made by Texas counties in order to receive federal reimbursement money for the state under Title IV-E of the Federal Social Security Act. The counties, in turn, receive a percentage of this money based on their expenditures for foster care. Travis County submits quarterly requests for reimbursement to DFPS. These funds enhance an existing program.

2. Departmental Resource Commitment: What are the long term County funding requirements of the grant?

The contract with DFPS requires Travis County to continue a Child Welfare Board; provide adequate funding for the care of any child in need of protective placement who is under the conservatorship of DFPS and not eligible for Title IV-E foster care or state-paid foster care and/or Medicaid; provide adequate funds for medical care not covered by Medicaid; and maintain total net child welfare expenditures at a sufficient level.

3. County Commitment to the Grant: Is a county match required? If so, how does the department propose to fund the grant match? Please explain.

The match is provided by the current budget for the Accountant Associate who puts together the Title IV-E billings. No additional county funds are required.

4. Does the grant program have an indirect cost allocation, in accordance with the grant rules? If not, please explain why not.

Yes.

5. County Commitment to the Program Upon Discontinuation of Grant by Grantor: Will the program discontinue upon discontinuance of the grant funding: Yes or No? If No, what is the proposed funding mechanism: (1) Request additional funding or (2) Use departmental resources. If (2), provide details about what internal resources are to be provided and what other programs will be discontinued as a result.

No. The county would still have to spend money for foster care even if this reimbursement program were not available.

6. If this is a new program, please provide information why the County should expand into this area.

NA.

7. Please explain how this program will affect your current operations. Please tie the performance measures for this program back to the critical performance measures for your department or office.

The contract with DFPS will allow Travis County to recover some of the costs associated with providing foster care. The appropriate departmental output measures apply to this grant.

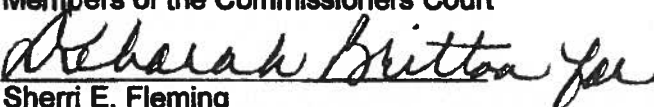


**TRAVIS COUNTY HEALTH and HUMAN SERVICES
and VETERANS SERVICE
502 E. Highland Mall Blvd.
P. O. Box 1748
Austin, Texas 78767**

**Sherri E. Fleming
County Executive
for TCHHSVS
(512) 854-4100
Fax (512) 279-1608**

DATE: January 16, 2013

TO: Members of the Commissioners Court

FROM: 
Sherri E. Fleming
County Executive for Travis County Health and Human Services
and Veterans Service

SUBJECT: Title IV-E Child Welfare Services Internal Control Structure
Questionnaire

Proposed Motion:

Consider and take appropriate action to approve the Internal Control Structure Questionnaire required as part of the FY'13 Title IV-E Child Welfare Services Contract with the Texas Department of Family and Protective Services.

Summary and Staff Recommendations:

The Title IV-E Child Welfare Services Contract is part of a mutually undertaken child welfare program by Travis County and the Texas Department of Family and Protective Services (DFPS). Travis County receives partial reimbursement for eligible expenditures related to children in foster care under the oversight of the Travis County Child Protective Services Board.

DFPS pools certain foster care expenditures made by Texas counties in order to receive federal reimbursement money under Title IV-E of the Federal Social Security Act. Title IV-E was established for the purpose of enabling each state to provide, in appropriate cases, foster care, adoption assistance and transitional independent living programs for children who otherwise would have been eligible for Aid to Families with

Dependent Children (AFDC) assistance as the program existed on July 16, 1996. The federal reimbursement rate determines the amount counties receive. This rate changes each fiscal year. The rate is currently 58.22%.

The Title IV-E contract automatically renews at the beginning of each fiscal year through 9/30/18. Travis County is required to complete the Internal Control Structure Questionnaire (ICSQ) each year.

TCHHSVS staff recommends approving the ICSQ.

Budgetary and Fiscal Impact:

Travis County Health and Human Services and Veterans Service (TCHHSVS) can receive up to \$36,488 in federal reimbursements during FY'13 depending on what it spends on Title IV-E eligible children. (This figure is based on an estimate of the amount of TCHHSVS staff time spent administering the Title IV-E program as well as the reimbursement for foster care maintenance expenditures and indirect costs.)

Issues and Opportunities:

This contract allows Travis County to be reimbursed for a portion of its expenditures for those children in foster care who are Title IV-E eligible.

Background:

Travis County has submitted claims for reimbursement under this contract since FY'99.

Cc: Andrea Colunga, Director, Office of Children's Services, TCHHSVS
Nicki Riley, Travis County Auditor
Patty Lennon, Financial Analyst, Travis County Auditor's Office
Mary Gerhardt, Assistant County Attorney
Leslie Browder, Executive Manager, Planning and Budget Office
Diana Ramirez, Analyst, Planning and Budget Office
Cyd Grimes, C.P.M., Travis County Purchasing Agent
Shannon Pleasant, Purchasing Agent Assistant, Travis County Purchasing Office

Internal Control Structure Questionnaire (ICSQ) for Title IV-E County ≥ \$25,000

Contractor Name: Travis County (CWS)- Title IV-E

Procurement Number: _____

Fiscal Year: 2013

Contract Number: 23940116

Please refer to instructions at end of this questionnaire.

SECTION I: FINANCIAL POSITION

(This section should be answered about your organization as a whole.)

1.	<p>Please indicate the accounting system in place (e.g., accrual, cash, or modified accrual).</p> <p><u>The County follows the statutory basis of accounting provided by the State in Chapter 2264, Texas Government Code, financial accounting and reporting. The county's system is set up in accordance with an accounting basis that complies with State financial laws and the State constitution and follows OMB A-87 & OMB A-133.</u></p>
2.	<p>Does your organization complete yearly financial statements (e.g., Balance Sheet, Income Statement, Cash Flow)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>If yes:</i></p> <p style="margin-left: 20px;"><i>a. Please list the name(s) of the person(s) responsible for preparing the annual financial statements:</i></p> <p style="margin-left: 20px;"><u>Nicki Riley, County Auditor</u></p> <p style="margin-left: 20px;"><i>b. Please attach copy of your most current statements and mark as</i> <i>ATTACHMENT# I-2</i></p> <p><i>If no, please provide any manual or automated information maintained regarding your current financial position and mark as</i> <i>ATTACHMENT #I-2.</i></p>
3.	<p>Are your accounting and financial system operations audited at regular intervals by an independent auditor (Certified Public Accountant)? Note that this is not referring to compliance monitoring performed by State Contract Managers. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>If yes:</i></p> <p style="margin-left: 20px;"><i>a. Attach an original, bound audit report and management letter (if applicable) as provided by the independent auditor. Mark as</i> <i>ATTACHMENT #I-3.</i></p> <p style="margin-left: 20px;"><i>b. Please indicate the frequency with which your accounting records are audited by an independent auditor.</i></p> <p style="margin-left: 20px;"><u>Yearly Audit – Atchley & Associates, LLP</u></p> <p style="margin-left: 20px;"><i>c. Please describe how independent audit results are shared with the governing body of your organization.</i></p> <p style="margin-left: 20px;"><u>A copy of the audited annual financial report is distributed to each member of the governing body. The annual report is officially received into the court's record through Commissioner's Court and also published on the County Auditor's website.</u></p>

Internal Control Structure Questionnaire (ICSQ) for Title IV-E County ≥ \$25,000

SECTION II: INTERNAL CONTROLS

II. A. GENERAL/ACCOUNTING CONTROLS

(This section should be answered about your organization as a whole. When a question mentions "contracts," it is referring to any contract or grant you administer with funding received through DFPS or any other state or federal agency.)

1.	Has the county submitted a cost allocation plan to DFPS for review? <i>If no, please attach a description of your allocation process and mark as ATTACHMENT #II-1.</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A																														
2.	Please attach a list of all of your contracts with state agencies, including DFPS. For each contract, include: state agency name, type of service provided, contract number, dollar amount, and payment method (e.g., cost reimbursement, fee for service). Mark as ATTACHMENT #II-2 .																															
3.	Does your organization maintain a separate ledger account for: a. Deposits for each source of funds?..... b. Disbursement of each source of funds?..... Please provide a copy of your chart of accounts, and a description of how your accounting system identifies contract revenues and expenditures separately, and mark as ATTACHMENT #II-3 .	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																														
4.	Are costs and expenditures under budgetary control for: a. Total contract budget? b. By budget category?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																														
5.	Do all purchases require approval from an authorized individual in the requesting department?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																														
6.	Indicate the name and title of individual(s) authorized to:																															
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 16.6%;">SIGN CHECKS OR AUTHORIZE PAYMENTS</th> <th style="width: 16.6%;">APPROVE PURCHASES <small>(INCLUDING ON-LINE AND CREDIT CARD)</small></th> <th style="width: 16.6%;">PREPARE PAYMENTS <small>(CHECKS AND ELECTRONIC FUND TRANSFERS)</small></th> <th style="width: 16.6%;">RECONCILE ACCOUNTS <small>(INTERNAL ACCOUNTS TO BANK RECORDS)</small></th> <th style="width: 16.6%;">CONTROL INVENTORY</th> <th style="width: 16.6%;">RECEIVE CASH</th> </tr> </thead> <tbody> <tr> <td>Nicki Riley</td> <td>Vicki Skinner</td> <td>Jason Niedwiedz</td> <td>Sandy Hendrix</td> <td>Bonnie Floyd</td> <td>Rhonda Ambrose</td> </tr> <tr> <td>County Auditor</td> <td>Director of Administration</td> <td>Financial Analyst</td> <td>Financial Analyst</td> <td>Assist. Purchasing/Commodities & Non-Prof. Services</td> <td>Senior Financial Analyst</td> </tr> <tr> <td>Dana Debeavoir</td> <td></td> <td>Mike Crawford</td> <td></td> <td></td> <td></td> </tr> <tr> <td>County Clerk</td> <td></td> <td>Sr. Financial Analyst</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			SIGN CHECKS OR AUTHORIZE PAYMENTS	APPROVE PURCHASES <small>(INCLUDING ON-LINE AND CREDIT CARD)</small>	PREPARE PAYMENTS <small>(CHECKS AND ELECTRONIC FUND TRANSFERS)</small>	RECONCILE ACCOUNTS <small>(INTERNAL ACCOUNTS TO BANK RECORDS)</small>	CONTROL INVENTORY	RECEIVE CASH	Nicki Riley	Vicki Skinner	Jason Niedwiedz	Sandy Hendrix	Bonnie Floyd	Rhonda Ambrose	County Auditor	Director of Administration	Financial Analyst	Financial Analyst	Assist. Purchasing/Commodities & Non-Prof. Services	Senior Financial Analyst	Dana Debeavoir		Mike Crawford				County Clerk		Sr. Financial Analyst			
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Dana Debeavoir		Mike Crawford																														
County Clerk		Sr. Financial Analyst																														
7.	Are all expenditures reconciled with your general ledger? If no, please explain.																															
		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																														

Internal Control Structure Questionnaire (ICSQ) for Title IV-E County ≥ \$25,000

8.	How often are bank accounts reconciled to internal check registers? <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other (please specify) _____	
9.	Is your accounting system automated? If no, please skip to Question #17.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
10.	Please describe how your accounting system is secured and/or protected (e.g. location, the use of passwords, access limits, checks and balances). <u>The accounting system is secured via passwords, which are changed every 90 days.</u>	
11.	<p>Please specify the name(s) and title(s) for the individuals with access to the accounting system to perform the following functions:</p> <p>Review Only: <u>All County Auditor's employees; security limits at employee levels.</u></p> <p>Record Transactions: <u>All County Auditor's employees; security limits at employee levels</u></p> <p>Update/Change:</p> <p><u>Disbursements: Patti Smith, Chief Assistant County Auditor; Mike Crawford, Senior Financial Analyst; Sandy Hendrix, Financial Analyst; Jason Niedzwiedz, Financial Analyst</u></p> <p><u>Financial Reporting / Journal Entries: The Financial Reporting group and Grants group have the capability to update and change journal entries. Depending on the transaction being performed, some transactions can be posted by the auditor and then reviewed (signed off) by the grants or financial reporting manger. Some transactions run by the grants group are posted automatically and then reviewed (signed off) by the grants financial manager.</u></p> <p><u>Grants: DeDe Bell, Financial Manager; Michelle Gable, Financial Analyst; Janice Cohoon, Financial Analyst; Matt Naper, Financial Analyst; Jessie Mars, Financial Analyst; Patty Lennon, Financial Analyst; Rhett Perry, Financial Analyst.</u></p> <p><u>Financial Reporting: Nicki Riley, County Auditor; Kathryn Madden, Financial Analyst; Hannah York, Financial Analyst; Sharon Martindale, Financial Analyst; Adrien Yust, Financial Analyst; James Rannefield, Financial Analyst; James Marlett, Financial Analyst; Cameran Van Noy, Financial Analyst.</u></p> <p>Delete: <u>Patti Smith, Chief Assistant County Auditor; Mike Crawford, Senior Financial Analyst; Hannah York, Senior Financial Analyst</u></p>	
12.	<p>Please explain the process (initiation, review, approval, etc.) for making updates, changes, deletions, and year end adjustments to the accounting system.</p> <p><u>Associate Auditors & Financial Analysts initiate the AP & Journal Entries, Financial Analysts review and audit, other Financial Analysts update and post those entries.</u></p>	
13.	Are there controls to provide reasonable assurance that transactions are not lost,	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Internal Control Structure Questionnaire (ICSQ) for Title IV-E County ≥ \$25,000

	duplicated, or added before and/or after data entry and editing?	
14.	Are there controls to provide reasonable assurance that transactions with errors are rejected from further processing (e.g., prevented from updating the files/database)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
15.	Is the data entered into the accounting system verified? <i>If yes, please specify whom (name and title) is/are responsible for verifying the data, and how the verification is done.</i> <u>Month End Reports, Patti Smith – Chief Assistant County Auditor, Mike Crawford – Senior Financial Analyst</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
16.	What, if any, additional internal controls and approvals are in place within the organization to ensure payments made are valid and authorized? <u>Items are required to be received in SAP, automated accounting system, prior to processing the payments.</u>	
17.	Are all checks pre-numbered and accounted for? If no, please explain. _____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
18.	a. Are all disbursements (excluding petty cash) made by check? If no, what other means does your organization use to make disbursements? <u>EFT / Direct Deposit</u> b. Is a check register (disbursement journal) used to record disbursements and maintain balances? If no, how are disbursements and balances tracked? _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
19.	Are all disbursements approved prior to payment? If no, please explain. _____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
20.	Is there any additional review or special approval required for payment transactions (check or electronic disbursement) that exceed a specific dollar amount? <i>If yes, please specify the dollar limit(s), name(s) and title(s) of responsible staff.</i> _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
21.	Does your organization have a system for tracking: a. Voided checks? b. Credit card transactions? c. Other electronic transactions?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

Internal Control Structure Questionnaire (ICSQ) for Title IV-E County ≥ \$25,000

	If no, please explain. <hr/>	
22.	If a check-signing machine is used, are the facsimile signature plates safeguarded? If no, please explain. <hr/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
23.	Are unused checks safeguarded and in the custody of a person who does not manually sign checks, control the use of facsimile signature plates or operate the facsimile signature machine? Please indicate name and title of person who has custody of unused checks. <u>Unused checks are stored at the Auditor's Office. The custody of the key to the unused check closet is with Jason Niedzwiedz, Financial Analyst and he has one of the two facsimile signature plates. The other facsimile signature plate is with the Treasurer's office, Senior Financial Analyst – Rhonda Ambrose.</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
24.	Are the following practices prohibited: a. The drafting of checks to "CASH"? b. The signing of blank checks?..... If no, please explain. <hr/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
25.	Are purchase orders/requisitions controlled in such a way that they can all be accounted for (e.g., by sequential pre-numbering, by entry in a register)? If yes, please attach an explanation of your purchase orders/requisition controls and mark as ATTACHMENT #II-25 .	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
26.	Are supporting documents (e.g., service authorizations, invoices, receipts, approvals, receiving reports, canceled checks) maintained with each disbursement and clearly referenced for easy location and retrieval? If yes, please attach an explanation and mark as ATTACHMENT #II-26 . The attachment should describe your process for maintaining supporting documentation, such as: <ul style="list-style-type: none"> • How supporting records are kept and filed (e.g., filed by check number, month of payment, etc.); • How documents are marked when paid to prevent duplication of claims, and • How authorizations are maintained internally. 	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
27.	Do supporting documents accompany checks for the check signer's signature?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
28.	Are invoices marked to identify allocation of payment?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
29.	Does your organization have procedures to identify costs and expenditures not allowable under federal and/or state regulations? If yes, please attach an explanation of your system for identifying unallowable	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Internal Control Structure Questionnaire (ICSQ) for Title IV-E County ≥ \$25,000

	<i>costs/expenditures and mark as ATTACHMENT #II-29</i>	
30.	<p>Does your organization have a contract file for each contract? <i>If yes, does each contract file contain:</i></p> <p>a. <i>The executed contract with all attachments?</i>.....</p> <p>b. <i>A copy of each contract amendment (as applicable)?</i>.....</p> <p>c. <i>Billing documents?</i>.....</p> <p>d. <i>Documentation of contract performance?</i>.....</p> <p>e. <i>Related correspondence?</i>.....</p> <p>f. <i>A copy of each subcontract agreement (as applicable)?</i>.....</p> <p>If no to any of the above, please explain. _____</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA</p>
31.	<p>Does your organization have a process to prevent unauthorized access to confidential information related to your contracts (for example, sensitive client information or records)?</p> <p><i>If yes, please attach a copy of your procedures for safeguarding contract information and mark as ATTACHMENT #II-31.</i></p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
II. B. PERSONNEL		
32.	<p>Does your organization have written personnel policies? If no, please explain. _____</p> <p>If yes, are personnel policies distributed to all employees?.....</p> <p>Do the personnel policies include:</p> <p>a. Hiring policies?</p> <p>b. Performance evaluations?.....</p> <p>c. Termination policies?.....</p> <p>d. Time and leave policies?</p> <p>e. Conflict of interest policies?.....</p> <p>f. Nepotism policies?</p> <p>g. Related-party policies?.....</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
33.	<p>Does your organization require individual time or activity sheets to be prepared at least monthly for personnel (part-time, full-time, and/or in-kind volunteers)? If no, please explain. _____</p> <p><i>If yes, please submit a blank time sheet and/or activity sheet and a copy of the related policy. Mark as ATTACHMENT II-33.</i></p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>

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34.	<p>Does your organization have on file an established rate of pay and withholding information for each employee?</p> <p>If no, please explain.</p> <hr/> <p><i>If yes, please submit a blank time sheet and/or activity sheet and a copy of the related policy. Mark as ATTACHMENT II-34.</i></p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
35.	<p>Does your organization have a written job description with a set salary level for each position?</p> <p>If no, please explain.</p> <hr/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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36.	Is the amount being paid to each employee based on documentation of actual hours worked?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
37.	a. Is your organization current with your payroll taxes? b. Does your organization pay payroll taxes directly? If no, please explain and indicate name of withholding agent. _____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

II. C. TRAVEL

38.	Are travel expenditures be substantiated by travel vouchers, travel logs or other supporting documentation? If no, please explain. _____ <i>If yes, please submit a copy of your travel policy, a blank travel voucher and a blank travel log. Mark as ATTACHMENT II-38.</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
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II. D. EQUIPMENT

39.	a. Please specify the level of capitalization (dollar amount) used by your organization. <u>\$5,000.00</u> b. Please provide your organization's definition of equipment: <u>Fixed & Tangible assets used for the benefit of the county for more than one year from date asset first rendered service.</u>	
40.	Does your organization conduct a physical inventory of capital equipment purchased with federal funds? If yes, how often? <u>Annually</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
41.	Has DFPS funds been used (in whole or in part) to purchase equipment or controlled assets (e.g., computers, furniture, cameras, camcorders, laser disc (DVD) players, TVs)? Note: Contractors should review the Comptroller's State Property Accounting User Manual at https://fmx.cpa.state.tx.us/fmx/spa/classcodes/control.php for the most current listing of controlled assets. Contractors must add these items classified as controlled assets to their inventory list based on the noted acquisition costs. If no, please skip to Section II.E. Subcontractors.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
42.	Are inventory records maintained that include: item description, serial number, funding source(s), acquisition cost, acquisition date and inventory number? <i>Please attach a blank inventory form and mark as ATTACHMENT #II-42</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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43.	Are all equipment items and controlled assets tagged for the purpose of internal tracking and inventory?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
44.	Does your organization have policies regarding the documentation required for equipment that has been disposed of? If yes, please attach a copy of your equipment disposal policy and mark as ATTACHMENT #II-44.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
II. E. SUBCONTRACTORS If your organization does not subcontract DFPS services, or does not intend to subcontract DFPS services, mark N/A <input checked="" type="checkbox"/> here and skip to Section II.F. Title IV-E Child Welfare Services Contract Information.		
45.	Please describe how your organization selects subcontractors. _____	
46.	If your organization has state contracts for \$100,000 or more, is a good faith effort made to subcontract with Historically Underutilized Businesses (HUBs)? If no, please explain. _____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
47.	Does your organization maintain a written subcontract agreement with each subcontractor? If no, please explain. _____ <i>If yes, does each subcontract agreement include:</i> a. All parties to the contract?..... b. A Statement/Scope of Work?..... c. When services are to be performed?..... d. Rates of pay?..... e. A measurable method of payment?..... f. A description of contract performance requirements?..... g. A requirement for and description of monitoring to be conducted?..... h. Reference or include all terms required by contract?..... i. A termination clause?..... If no for any of the above, please explain. _____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No
48.	Does your organization have procedures to monitor that subcontracted services are being delivered and subcontractors are being paid as required by contract(s)? If yes, please attach a copy of your subcontractor monitoring procedures and mark as ATTACHMENT #II-48.	<input type="checkbox"/> Yes <input type="checkbox"/> No

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SECTION II. F: TITLE IV-E CHILD WELFARE SERVICES CONTRACT INFORMATION

This section pertains only to any **County Title IV-E Child Welfare Services Contracts** with DFPS and *does not* pertain to any **Title IV-E County Legal Services Contract** with DFPS. For purposes of this Section, the terms **County** and **County Child Welfare Board** are synonymous.

49.	If administrative costs will be claimed, has the county submitted an administrative budget to DFPS for review and approval?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
50.	Does the County Child Welfare Board have a process that Caseworkers must follow in order to obtain assistance from the County Child Welfare Board for a Foster Child? If yes, is the above policy a written (published) policy? <i>If yes, please attach a description of the process or a copy of the written policy and mark as ATTACHMENT #II-50.</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
51.	Has/have the county Title IV-E contract(s) been audited by county internal or external auditors? If yes, please enter date of last audit. <u>County fiscal year 2011</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
52.	Do the region and the county conduct an annual review of the county Title IV-E contracts? If yes, please enter date of last review. <u>County fiscal year 2011</u> Note: An annual review of the contract is specified in the contract.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
53.	How does the Child Welfare Board pay for supplemental child-care expenses? <i>Please provide a description of the process used to pay supplemental child care expenses, including the name and/or position of responsible person/staff and mark as ATTACHMENT #II-53.</i>	
54.	What back-up documentation does the county maintain to support Title IV-E reimbursements? <i>Please provide a description of the required documentation and mark as ATTACHMENT #II-54.</i>	
55.	Who maintains the documentation within the county (e.g., Child Welfare Board, County Auditor)? Provide the name of the county Department or name and/or position of responsible person/staff. <u>Travis County Health and Human Services and Veterans Service</u> <u>Travis County Auditor's Office</u>	
56.	Who, within the county, signs the County Title IV-E Claims Voucher (Form 4116 – State of Texas Purchase Voucher Quarterly Billing)? Please provide the name and/or position of the responsible person/staff. <u>County Executive for Travis County Health and Human Services and Veterans Service</u>	
57.	How does the county ensure the County Title IV-E Claims Voucher is reconciled with the county's general ledger? <u>All valid Purchase Orders are logged on a spreadsheet and reviewed for proper payment against the General Ledger prior to the quarterly billing.</u>	
58.	Does the county have a process to ensure that all expenditures claimed are allowable?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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	<i>If yes, please attach a description of the process and mark as ATTACHMENT #II-58.</i>	
59.	Does the county have a process to ensure that all raised or donated funds used as certified match for the County Title IV-E Claims Voucher are unrestricted funds? <i>If yes, please attach a description of the process and mark as ATTACHMENT #II-59.</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
60.	How does the county know which children are IV-E eligible? Please provide a description of the process and the name and/or position of responsible person/staff and mark as ATTACHMENT #II-60.	

CERTIFICATION

Signed by an individual with documented authority as designated by the business entity.

I HEREBY CERTIFY, TO THE BEST OF MY KNOWLEDGE, THAT THE INFORMATION REPORTED
HEREIN IS TRUE, CORRECT, AND COMPLETE.

Signature

Date

Samuel T. Biscoe

Travis County Judge

Printed/Typed Name

Title

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ICSQ Instructions

Every business entity should have internal controls. Internal controls consist of the policies and procedures that a business entity develops and implements to ensure that assets (such as cash and equipment) are safeguarded, that expenditure transactions (such as purchases) are authorized, and that financial data are accurately recorded. Another way of saying this is that a system of internal controls helps to ensure that assets that belong to the business entity are used only for authorized business purposes.

A system of internal controls is not designed primarily to detect errors but rather to reduce the opportunity for errors or dishonesty to occur. In an effective system of internal controls, no one person should carry out all phases of a business transaction from beginning to end. For example, if one person were permitted to order supplies, receive the supplies, write a check to pay for the supplies, and record the transaction in the accounting records, then there would be no protection against either fraud or errors.

A system of internal controls frequently may be improved by physical safeguards (acting as compensatory controls). Computers help to improve the efficiency and accuracy of record keeping functions. Cash registers, safes, and pre-numbered business forms are very helpful in safeguarding cash and establishing responsibility for it. Any system of internal controls must be supervised with care if it is to function effectively.

The Internal Control Structure Questionnaire (ICSQ) consists of a series of questions related to the processes and procedures for handling cash receipts, cash disbursements, physical inventory, file maintenance, etc. Responses to the questions included in the ICSQ allow for an assessment of the effectiveness of the procedures described as compared to best practices and/or specific state and federal guidelines.

Instructions for Submitting the ICSQ

An up- to-date ICSQ is required to be submitted with each new proposal to contract with DFPS. ***Please use the ICSQ that appropriately reflects the entire contract amount for Title IV-E funds, not just the DFPS drawdown amount.***

No two-sided copies will be accepted. No pamphlets or books will be accepted (except for required financial reports and/or audits). Responses must be typed or printed. All attachments must be clearly numbered.

Instructions for Completing the ICSQ

The ICSQ has been divided into several sections, as follows:

SECTION I: FINANCIAL POSITION

This section requests background information about the organization, including the financial system used to maintain the accounting records, preparation of financial statements and the frequency with which financial information is audited.

SECTION II: INTERNAL CONTROLS

This section addresses Internal Controls as described below:

II. A. GENERAL/ ACCOUNTING CONTROLS

The general accounting section addresses file maintenance and the contractor's responsibility to meet contract terms and/or state/federal regulations.

Accounting controls assist with the safeguarding of assets (cash and fixed assets) and the reliability of financial records. The objective sought in the control of cash receipts is to ensure that all cash that is receivable by the business entity is collected and recorded without loss. The system of controlling cash payments should be designed to ensure that no unauthorized payments are made. Control is accomplished by division of responsibility to achieve independent verification of transactions without duplication of effort.

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Question 1:

Cost allocation ensures that costs are properly allocated to a specific funding source and that all costs are properly identified.

Cost allocation is required when a cost will benefit more than one contract or funding source. If cost allocation is necessary, contractors must use reasonable methods of allocating costs consistently. Any cost allocation method used should be a reasonable reflection of actual business operations.

Questions 5 - 6:

It is a good business practice to require authorized individuals to approve purchases or electronic transactions made on behalf of their department. Designating separate individuals to sign checks or authorize payments, approve purchases, prepare payments, reconcile internal accounts to the general ledger, control assets, and receive cash is also a good business practice. For smaller staffs, it may be necessary to identify compensating controls where adequate separation of duties is not possible.

Questions 7 - 8:

All costs that are reported and/or billed to a funding source should be reconciled with the general ledger (the book or file that contains all of the organization's accounts) as well as bank account transaction records.

Questions 9 - 16:

If the business entity's accounting system is automated, please complete questions 9 - 16 to provide detail as to who has access to the accounting system and how the system is protected.

Questions 17 - 25:

These are examples of internal controls that act as safeguards against unauthorized expenditures and/or check disbursement.

Questions 26 - 27:

It is a best practice to maintain supporting documents with each disbursement. Alternatively, supporting documents should be numbered, clearly referenced, and filed for easy retrieval.

Question 28:

If more than one funding source is to be used to reimburse a cost, then it is extremely important that the invoice documents how the cost is to be allocated.

Question 29:

Contractors should reference the applicable Texas Administrative Code (TAC) or Office of Management and Budget (OMB) Circulars to identify costs and expenditures that are not allowable.

Question 30:

An element of a good file maintenance process is having a systematic approach to filing the numerous contract documents that flow through a business entity. A systematic filing approach decreases the risk of lost documents, and provides a central place for documents that pertain to a specific contract.

Question 31:

An important protective measure to safeguard sensitive information is controlling physical access to the information or records related to your contracts. All contract information must be cared for with the appropriate level of physical and electronic security. Procedural safeguards ensure adequate controls against unauthorized access, fraudulent activity, disclosure, loss or damage, whether accidental or deliberate, as well as to ensure the availability, integrity, authenticity, and confidentiality of information. Procedural safeguards may include adequate separation of duties, limiting physical access (e.g., storing information in a safe or fireproof filing cabinet, locks on doors or filing cabinets, passwords) or computer-related controls dealing with access privilege.

II. B. PERSONNEL

Question 32:

Each business entity should have written personnel policies that are made available to all employees. The policies need to be consistently applied and should include all federally mandated policies related to human resource issues.

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Questions 33 - 37:

OMB Circular A-122, Attachment B, Paragraph 8, subparagraph "m" (revised May 2004) and OMB Circular A-87, Attachment B, Paragraph 8, subparagraph "h" (revised May 2004) address documentation necessary to support salaries and wages. These circulars further state that the allocation of direct service delivery staff salaries between programs and/or contracts must be documented.

II. D. EQUIPMENT

Questions 39 - 44:

Equipment is defined in 45 Code of Federal Regulations (CFR) Part 74.2 and the Office of Federal Financial Management, Office of Management and Budget (OMB) Circulars.

It is a federal requirement that a physical inventory be taken at least once every two years for equipment acquired with federal funds (including DFPS funds).

The disposition of all equipment purchased with federal funds must be made according to appropriate regulations and departmental policies, as per OMB Circular A-110, Section 34 (G). Equipment purchased using DFPS contract funds is subject to an equitable claim by the state (DFPS) at contract termination. No disposition should take place without prior notification to DFPS contract management.

II. E. SUBCONTRACTORS

This section must be completed if DFPS funds are or will be provided to subcontractors.

Question 45:

Subcontractor selection procedures should reflect a system in which the best subcontractor is fairly and objectively selected. Procedures should clearly identify the method of contractor selection utilized (e.g., competitive selection or bidding, negotiation with individual). (OMB Circular A-110, Sections 40-48.)

The subcontractor selection process should include established criteria to evaluate potential contractors, ranking method, and the consideration of past performance factors.

Question 46:

DFPS is committed to encouraging participation and increased opportunities for any minority and women-owned business that is certified as a Historically Underutilized Business (HUB). DFPS requires contractors who have contracts of \$100,000 or more to do the same.

A good faith effort requires that contractors maintain documentation in purchase and contract files of their efforts to utilize HUBs. When HUB bidders are not solicited or selected, documentation should clearly state the reason. Contractors who have contracts of \$100,000 or more may be required to have a HUB Subcontracting Plan that documents either:

- a) That contractor does not plan to subcontract any component of the DFPS contract, or
- b) That contractor does plan to subcontract and includes at minimum the contractor's written policy/procedures for subcontracting and contractor's methods for soliciting and selecting subcontractors. In this case, a HUB Subcontracting Form must be on file.

Question 48:

Subcontractor monitoring procedures should be sufficient to ensure that subcontractors consistently provide quality services by measuring performance against well-documented outcome expectations. The monitoring function should focus on the outcomes of services provided with an appropriate emphasis on contract monitoring in proportion to the amount/extent of the contracted services. Procedures should adequately describe who is responsible for monitoring, how often monitoring occurs, the monitoring process to include follow-up procedures when corrective action is required. It is also a good business practice to include an ongoing system for ensuring that funds are spent appropriately.

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II. F. TITLE IV-E CHILD WELFARE SERVICES CONTRACT INFORMATION

Questions 49 - 60:

This section captures county policy and procedures specific to any Title IV-E Child Welfare Services contract and is used in the determination of appropriate monitoring efforts.

Note: The attachments listed in the ICSQ come to more than 370 pages. Electronic versions of the attachments are available from John Bradshaw John.Bradshaw@co.travis.tx.us at 854-4277.