

Grant Title/Project Name:	Williamson County Veterans Treatment Court
Department:	County Court at Law #2
Requestor:	Brenda Staples
Contact Email:	Brenda.Staples@wilco.org
Contact Phone Number:	512-943-1568
Start Date:	7/1/2022
End Date:	6/30/2023
Please select request category:	Service
Describe the purpose of the grant in detail to include all requirements.	<p>The Texas Veterans Commission is providing funds specifically earmarked for Veterans Treatment Court support. The Williamson County Veterans Treatment Court will use the TVC funds to provide third party mental health services for court participants in need of individual or family therapy. All funds from this grant will be utilized to pay a licensed therapist for his/her time with clients and for clinical expertise in making treatment team decisions within the Court. It is anticipated we will be able to serve a minimum of 30 participants with these funds.</p> <p>In accordance with standard best practices, any third party vendor will be vetted and a service contract will be provided to the Comissioners Court for review and approval prior to initiating any services. The service provider will be required to provide weekly updates to the court, monthly billing, as well as participate in bi-monthly treatment court meetings.</p> <p>The TVC grant requires monthly performance reporting, quarterly reporting (both will be submitted by the Specialty Court Coordinator) and monthly financial reimbursement requests (which will be provided by the Auditors Office Grant Manager).</p>
Select the type of grant your department is applying for:	State
What is the amount of the grant?	\$30,000.00
Please provide a breakdown of the total cost above.	All funds will be used for the direct services of the participants in the Veterans Treatment Court. The majority of the funds will be used for individual therapeutic services for the Veteran (or his/her spouse) with a small portion reserved for administrative costs of the Vendor. Services will be provided by a third party, licensed therapist. Our goal is to provide approximately 30 Veterans with 10 (hour long) sessions each.
Is there a match requirement?	No
What is the source of the match?	
Does the grant cover the cost of the request 100%?	Yes
If not, how much is left unpaid?	
What is the plan to obtain grants/funds for the remaining amount?	
List other similar assets in the County and/or region and if they are available for use?	
How is this asset request different from any similar assets currently in the County and/or region?	
What types of events/purpose would this asset be used for that cannot be accomplished with a current County asset?	

How often do these events occur?	
Identify the number of personnel required to operate this asset and/or be available for the function where it is to be used? How much time is required of those personnel? What is the cost of the personnel?	
Where will the asset be stored?	
What is the useful life of the asset?	
Will a replacement be requested from general funds when useful life has been exhausted?	
Will other agencies be billed for the use of this asset (e.g. vendors paid, employee worked hours and paid, inventory costs etc.)?	
Does this asset require insurance coverage?	
If yes, what is the estimate of asset insurance coverage?	
Will this asset require on-going maintenance? Please describe the maintenance required along with an estimate for these costs.	
How will this asset be funded when the grant ends?	
What is the impact if the grant is not received?	
New Personnel position is:	
Where will this position office?	
Who will this position report to?	
What tasks will this position perform? Include the five primary functions and the percentage of time spent to be spent on each function.	
Will this position take over tasks from current County employee?	
If yes, please explain the impact to current employee.	
How will this position be funded when the grant ends?	
Does this position or a similar position currently exist within the department?	
If "yes" how many of these similar positions exist	
Describe any alternatives considered to achieve desired outcome in lieu of a position (i.e. equipment, software, technology or change in business practice).	
Describe how workload will be accomplished/re-allocated should grant not be approved.	
List other similar items in the County and/or region and if they available for use?	N/A
How is this item request different from any similar assets currently in the County and/or region?	N/A
What types of events/purpose would this item be used for that cannot be accomplished with a	N/A

current County asset?	
Identify the number of personnel required to operate this item and/or be available for the function where it is to be used?	N/A
Please explain how this item will create the need for more or less personnel (or mark n/a for no change)?	N/A
Where will the item be stored?	N/A
What is the useful life of the item?	N/A
Will other agencies be billed for the use of this item (e.g. vendors paid, employee worked hours and paid, inventory costs etc.)?	
Does this item require insurance coverage?	No
Will this item require any form of licensing?	No
Will this item require on-going maintenance? Please describe the maintenance required along with an estimate for these costs?	N/A
How will this item be funded when the grant ends?	Services will terminate at the end of the grant funding cycle.
What is the overall budgetary impact? (i.e. revenue generation, expense reduction, etc.)	There is no impact to the Williamson County budget.
Please identify any additional equipment needed/required (now or in the future) should the grant/asset is awarded.	none
What is the cost and frequency to maintain/update the additional equipment?	N/A
What is the impact of this grant application on other internal/county departments?	N/A
If yes, what is the estimate of that license fee?	
If yes, what is the estimate of insurance coverage?	
Will a replacement be requested from general funds when useful life has been exhausted? (OR)	No
If yes, how much is the match amount?	
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