

2026-27 Track 2 Development Base GRANT APPLICATION

Organization: Fort Bend County Environmental Health
Grant ID: R-202601-07509
Status: Draft

Amount Requested: \$17,500.00
Start Date: April 1, 2026
End Date: March 31, 2027

APPLICATION FORM INSTRUCTIONS

When the form is not already open for edits, select EDIT at the top of the form to open for editing.

Form does not autosave. Select Save at the bottom after completing each section. To continue working, select Edit at the top of the form to continue editing.

When you are finished, select Save, and then Submit at the bottom of the form.

ORGANIZATIONAL INFORMATION

Organization: Fort Bend County Environmental Health
Regulatory Jurisdiction: Local

Select and Confirm Primary Contact

Using the two fields above, select and confirm the Project Point of Contact name, which is pulled from your organizational record.

Project Point of Contact (PPOC)

The PPOC is the person in your organization who should be contacted regarding questions about your application. Please confirm your PPOC twice in the fields above.

Name: Michael Schaffer
Email: michael.schaffer@fortbendcountytx.gov
Phone: 713-299-9402

Authorizing Official Verification

The Authorizing Official is the person in your organization who provides supervisory oversight for this grant opportunity (often an organization's Financial or Grants Management Official). Below is the Authorizing Official contact information we have on record for your organization. Please verify below whether this information is current and correct.

Authorizing Official (AO): KP George
AO Title: County Judge
AO Phone: 281-341-8608
AO Email Address: FBC.Judge@fbctx.gov

The information displayed above is current and correct for both the Project Point of Contact and the Authorizing Official.

Yes / No: Yes

Respond to the question below to see if you are eligible to apply for the Track 2 Development Base Grant.

Does your jurisdiction have a current Self-Assessment of All Nine Standards (SA9) and a completed Comprehensive Strategic Improvement Plan (CSIP)? A current SA9 is one submitted to FDA and dated February 12, 2021 or later.

Yes / No: Yes

Congratulations! Based on your answer to the eligibility question, you are eligible to apply for a Track 2 Development Base Grant.

TRACK 2 DEVELOPMENT BASE GRANT APPLICATION

History of NEHA-FDA RFFM Grants

Have you been awarded any previous grants through the NEHA-FDA Retail Flexible Funding Model (RFFM) grant program, which began with CY22 awards?

Yes / No: Yes

Please briefly describe your past history with the RFFM grant program (number of grants, type of grants, impact on your retail food program, use of funding for larger awards, etc.)

We received a base grant for 2023, for \$12,500.00 from January 1, 2023 through December 31, 2023. Funds were used for 2 to attend the Self-Assessment and Verification Audit Workshop (SA VA Workshop) as well as a contractor to help with SA9, CSIP, and foundation activities to help prepare for Standards qualifications.

We received a Track 2 grant for 2025, for \$18,500 from April 1, 2025 through March 31, 2026. Funds were used to meet Standards 1, 2, and 8, which we successfully met, and to partially meet Standards, 3, 4, 5, 6, and 7.

Explain how your past history with the RFFM grant program will impact your proposed work to conform with the Retail Program Standards (RPS). If you have had any canceled or incomplete grants in the past, be sure to explain why you will be able to complete the work proposed in your current application.

The impact of the grant received in 2023 gave us the ability to understand the Standards and what is required to achieve them. It enabled use to complete the CSIP so as to guide us in the future years towards the successful accomplishment of obtaining those standards. Taking the foundation that was built will enabled us to utilize the 2025 grant dollars to successfully complete 3 of the program standards, partially meet other standards, and continue to build knowledge through the training opportunities.

Required Outcome for a Track 2 Base Grant

Work on Standards 1-8

Plans for Each Standard (Standards 1-8)

As part of your one-year project, you are required to make progress toward one or more of Standards 1-8 and can request a fixed amount of \$5,000 for this work.

Instructions

Please designate the end goal for each Standard you will be working toward or plan to achieve, as follows:

- 1. For Standards you will not work on during the one-year project period, leave the selection blank.
2. For Standards in which you plan to achieve some but not all elements during the one-year project period, select Partially Achieve Standard.
3. For Standards you plan to meet, audit, or both by the end of the one-year project period, select Meet Standard, Complete Audit (Standard Met in Prior Year), or Meet and Audit Standard.
4. For Standards you have already met and audited, with Form 3958 approved by your FDA Specialist, and that you plan to maintain during the one-year project period, select Maintain (Standard Met in Prior Year).

NOTE: Your plans for Standard 9 (an optional outcome) will be entered below in the section titled "Optional Outcome for a Track 2 Base Grant: Work on Standard 9."

Standard 1 - Regulatory Foundation:**Standard 2 - Trained Regulatory Staff:**

Standard 3 - Inspection Program Based on HACCP Principles: Meet and Audit Standard

Standard 4 - Uniform Inspection Program: Partially Achieve Standard

Standard 5 - Foodborne Illness and Food Defense Preparedness and Response: Partially Achieve Standard

Standard 6 - Compliance and Enforcement: Meet and Audit Standard

Standard 7 - Industry and Community Relations: Meet and Audit Standard

Standard 8 - Program Support and Resources:**Standard 9 Optional Add-On**

[Work Toward Meeting or Maintaining Standard 9](#)

As part of your one-year project, do you intend to work toward meeting or maintaining Standard 9, which allows you to add an additional fixed amount of either \$5,000 or \$10,000 to your annual project budget (depending on the Risk Factor Study approach you use)?

For more information on working to meet or maintain Standard 9, visit the following webpage on the NEHA-FDA RFFM Grant Program site: <http://www.neha.org/retail-grants-standard-9>

Yes / No: Yes

Standard 9 Status

Have you already Met and Audited Standard 9 for your current 5-year Self-Assessment period (with Audit passed and paperwork submitted to and approved by FDA)?

Yes / No: No

Risk Factor Study Approach

Which Risk Factor Study approach will you use (or are you using) to meet, audit, and maintain Standard 9?

Level 1 - Risk Factor Study / File Study Approach

Applicants who plan to use a Level 1 Risk Factor Study approach may request a Fixed Award of \$5,000 as part of this application.

Applicants who plan to use a Level 2 (FDA) Risk Factor Study approach may request a Fixed Award of \$10,000 as part of this application.

A **Level 1 Risk Factor Study**, the "**File Study**" approach, uses routine inspection data from inspections that have already been completed to retroactively assess the occurrence of risk factors.

A **Level 2 FDA Risk Factor Study**, the "**Data Collection**" approach, estimates the occurrence of risk factors during observational visits at randomly selected retail food establishments. A "Data Collection" visit has, as its sole focus, observation of food safety behaviors tied to risk factors and is completed separately from the regulatory inspection.

A **third approach that is also considered a Level 2 FDA Risk Factor Study**, the "**Hybrid**" approach, combines elements of the first two approaches by combining risk factor data collection with a routine inspection. It is suggested that the data collection occur after the routine inspection has been performed.

For detailed descriptions of each approach, use the following link to download FDA's Retail Food Risk Factor Study Guidance: <https://www.fda.gov/media/177280/download?attachment>

Standard 9 Objectives

Please select all of the Standard 9 objectives you plan to achieve during your proposed project period, keeping in mind that all of these steps are normally completed as part of a multi-year cycle (often a 5-year cycle).

Applicants who choose to work on Standard 9 may request a fixed award of \$5,000 or \$10,000 (depending on your selected Risk Factor Study approach) for completion of any/all of the annual Standard 9 objectives selected. Be sure to read the current year Application Guidance for additional information.

Analyze risk factor data, Complete data analysis report and determine interventions needed, Meet and Audit Standard 9

Standard 9 – Program Assessment

Please select the level of Standard 9 achievement you plan to attain by the end of your one-year project (Standard 9 Annual Goal).

Meet and Audit Standard

Updated SA9 Optional Add-On

[Updated Self-Assessment of All 9 Standards \(SA9\)](#)

Self-Assessment Date

What was the date of your most recent Self-Assessment of All 9 Standards?

SA9 Date: 12/15/2023

Updated Self-Assessment of All 9 Standards (SA9)

The RFFM grant program rules allow you to request funding to update your SA9 once every five years. If your current SA9 is dated between February 13, 2021 and March 31, 2022, you may request a Fixed Award of \$3,000 to update your SA9.

Your funded SA9 update must be completed, with paperwork submitted to your FDA Retail Food Specialist (which sets the update date), after it hits the 4-year mark but before it hits the 5-year mark.

EXAMPLE:

1. Your most recent SA9 is dated April 15, 2022.
2. It reaches the 4-year mark on April 15, 2026 (update required within one year).
3. Select "**Yes**" below to confirm an updated SA9 will be completed during your one-year project period, and be sure to add \$3,000 to your project budget.
4. If awarded, be sure to complete the updated SA9 during your one-year project period, but before it hits the 5-year mark.
5. For this example, completed SA9 paperwork should be submitted to your FDA Retail Food Specialist after April 15, 2026 (when it hits the 4-year mark) but before March 31, 2027 (the end of the one-year project period).

Will you be completing an updated Self-Assessment of All 9 Standards (SA9), required once every five years, as part of your one-year project?

Yes / No: No

Mentee Optional Add-On

[Participation in the RPS Mentorship Program](#)

As part of your one-year project, would you like to apply to be a Mentee, which allows you to add an additional fixed amount of \$10,000 to your annual project budget?

If approved, you will be matched with a Mentor jurisdiction who can help with all aspects of your Track 2 Development Base Grant project and advise you on best practices for conforming with the Retail Program Standards.

Mentees will be expected to meet three specific deliverables to receive the full \$10,000 Fixed Award. Please see the current grant year Application Guidance for details.

Please note: If you would like to apply to be a Mentor for GY 2026-27 instead of applying to be a Mentee, select "No" in this section and submit a separate Mentorship / Mentor Optional Add-On application.

Yes / No: No

Training Optional Add-On
Support for Retail Food Safety Training

As part of your one-year project, would you like to request funding to attend in-person GY 2026-27 Retail Food Training Courses, Workshops, or Conferences?

Funding can be used to support attendance at events scheduled between April 1, 2026 and March 31, 2027. The Training Optional Add-On allows you to add an additional amount of up to \$7,500 to your annual project budget.

Yes / No: Yes

Requested Training Courses, Workshops, and Conferences

Please select all of the listed in-person Retail Food Training Courses, Workshops, or Conferences that will be part of your funding request. To select one or more courses, click on each one you would like to attend (you can move one or several courses at a time) and then use the arrow keys to move selected course(s) from the left box to the right box.

For each training option selected, use the fields that are exposed to provide information on all of the in-person Retail Food Training that will be part of your funding request of up to \$7,500. Additionally, be sure to add details in the Budget Worksheet and Justification section of this application.

Please be as specific as possible regarding your training plans, although we understand that specifics for some courses (including course names, locations and dates) may not yet be available, and that your 2026-27 training plans could change. Please provide the best estimates for your projected training plans at this time, however, adding "To Be Determined" or "TBD" in fields for which information cannot yet be confirmed. Updates will be allowable during the grant year if your grant is approved to include Training funds.

For the most up-to-date information regarding eligible Retail Food Training Courses, Workshops, or Conferences planned for the 2026-27 Grant Year, visit the following webpage on the NEHA-FDA RFFM Grant Program site: www.neha.org/retail-grants-training-options

Training Courses: AFDO Annual Educational Conference, NEHA Annual Educational Conference, NACCHO Annual Conference

AFDO AEC

AFDO AEC Location and Dates

Please enter the location and dates for the AFDO Annual Educational Conference that is included in your funding request.

Columbus, Ohio - June 4th thru June 9th

AFDO AEC # of Personnel

Please enter the total number of staff members who are part of your funding request for AFDO Annual Educational Conference attendance.

of Personnel: 1

AFDO AEC Personnel Names and Titles

Please enter the name and job title for each person who will be covered by your funding request for AFDO Annual Educational Conference attendance.

Michael Schaffer - Director, Environmental Health

NEHA AEC

NEHA AEC Location and Dates

Please enter the location and dates for the NEHA Annual Educational Conference that is included in your funding request.

Kansas City, KS - August 2nd thru August 6th

NEHA AEC # of Personnel

Please enter the total number of staff members who are part of your funding request for NEHA Annual Educational Conference attendance.

of Personnel: 1

NEHA AEC Personnel Names and Titles

Please enter the name and job title for each person who will be covered by your funding request for NEHA Annual Educational Conference attendance.

John Parrham - Environmental Health Inspections Program Manager

NACCHO Annual Conference

NACCHO AC Location and Dates

Please enter the location and dates for the NACCHO Annual Conference that is included in your funding request.

Louisville, KY - July 13th thru July 17th

NACCHO AC # of Personnel

Please enter the total number of staff members who are part of your funding request for NACCHO Annual Conference attendance.

of Personnel: 2

NACCHO AC Personnel Names and Titles

Please enter the name and job title for each person who will be covered by your funding request for NACCHO Annual Conference attendance.

Michael Schaffer - Director, Environmental Health
John Parrham - Environmental Health Inspections Program Manager

Overall Project Information

Track 2 Development Base Grant Project Title: FBC Retail Standards Continuous Momentum

Project Summary

Please provide a brief description of your one-year Track 2 project, including all selected outcomes and add-ons, which could include:

1. **Required Outcome** - Work on Standards 1-8
2. **Optional Outcome** - Work to Meet or Maintain Standard 9
3. **Optional Outcome** - Updated Self-Assessment of All 9 Standards (SA9)
4. **Mentee Optional Add-On**
5. **Training Optional Add-On**

Fort Bend County Health and Human Services plans to (1) Maintain any standard met; (2) Achieve conformance with standards 3, 6, and 7 and (3) meet and audit standard 9; (4) Attend training.

Project Lead

Please provide the Name and Title of your overall Project Lead(s) for your proposed project. **DO NOT enter any additional information here - qualifications and roles will be entered below in the Project Team Qualifications field.**

Michael Schaffer - Director, Environmental Health

Project Support Team

Please provide the Names and Titles of additional members of your proposed project team. **DO NOT enter any additional information here - qualifications and roles will be entered below in the Project Team - Roles and Qualifications field.**

John Parrham - Environmental Health Inspections Program Manager

Project Team - Roles, Qualifications and Experience, and Contributions

For each project team member, please enter their name, a brief description of their specific project role, their qualifications and experience, and how they will contribute to the success of the project.

Be sure to include information for the Project Lead, Project Support Team members, key contractors, and any other project personnel necessary for project success.

Michael Schaffer -Division Manager for Environmental Health has over 16 years of experience working in Retail Food Establishment Program and managing the Environmental Health Department.

John Parrham - Environmental Health Inspections Program Manager has over 4 years of experience working in Retail Food Establishment Programs and supervises the Health Inspectors for Environmental Health.

Project Start Date:

Must be a date between April 1, 2026 and March 31, 2027.

Start Date: 4/1/2026

Project End Date

Must be a date between April 1, 2026 and March 31, 2027.

End Date: 3/31/2027

Project Implementation Plan (PIP)

Your Project Implementation Plan should take into account all of the selected outcomes and add-ons of your one-year project, which could include:

- 1. **Required Outcome** - Work on Standards 1-8
- 2. **Optional Outcome** - Work to Meet or Maintain Standard 9
- 3. **Optional Outcome** - Updated Self-Assessment of All 9 Standards (SA9)
- 4. **Mentee Optional Add-On**
- 5. **Training Optional Add-On**

Please Complete All Of The Following Project Implementation Plan (PIP) Fields

Action Steps / Tasks Required

Please use numbered Action Steps (Step 1, Step 2, Step 3, etc.) to summarize the milestones you will meet to complete all of the planned outcomes for your Track 2 Development Base Grant by the end of the project period.

- Step 1: Hire contractor to assist with document gathering
- Step 2: Work to collect and, if needed, implement requirements, meet Standard 3.
- Step 3: Work to collect and, if needed, implement requirements, meet Standard 6
- Step 4: Work to collect and, if needed, implement requirements, meet Standard 7
- Step 5: Send in Self-Assessment of Standards 3, 6, and 7 to FDA
- Step 6: Have Standards 3, 6, and 7 audited
- Step 7: Work to collect data for Standard 9
- Step 8: Send in Self-Assessment of Standards 9 to FDA
- Step 9: Send in Audit documentation to FDA to show completion
- Step 10: Have Standard 9 audited

Individual Lead(s) for Each Action Step

Please list the name(s) of the individual lead(s) who will be responsible for completing each of the Action Steps listed above, with the goal of ensuring completion of your project plan by the end of the project period.

Both Michael Schaffer and John Parrham will work with the contractor to supply all required documentation. As we work to show adherence for each standard, any areas that require additional implementation strategies, will be completed to show that the standard is met.

Retail Program Standards (RPS) Progress

Considering all of the Track 2 outcomes and add-ons selected for your one-year project:

- 1. Describe how you will measure progress in the RPS;
- 2. Describe how you will define measurable improvement in the RPS; and
- 3. Directly link your project plans with progress and improvement in the RPS.

Fort Bend County Health and Human Services will (1) Maintain any standard met; (2) Achieve conformance with standards 3, 6, and 7 and (3) meet and audit standard 9

Required Document - Comprehensive Strategic Improvement Plan (CSIP)

Comprehensive Strategic Improvement Plan (CSIP)

The CSIP is considered a multi-year planning document intended to serve as a resource tool for your jurisdiction, guiding your progress as you work to progressively conform to the Retail Program Standards. It must cover your plans for all nine Standards, even if much of that work is outside the scope of your grant application.

For CSIP Instructions and reporting forms, visit the following webpage on the NEHA-FDA RFFM Grant Program site: <https://www.neha.org/retail-grants-csip>

Upload Instructions

Click the "+" sign below to attach a copy of your up-to-date Comprehensive Strategic Improvement Plan (CSIP). Be sure your CSIP covers your agency's long-term plans for work on all nine Standards.

Attachment of a CSIP is REQUIRED for submission of a Track 2 Development Base Grant application.

CSIP

 Fort Bend County FDA Retail Program Standards CSIP - 12-26-23 AS SUBMITTED.xlsx



GR - Comprehensive Strategic Improvement Plan (CSIP)
Added by Michael Schaffer at 3:15 PM on January 8, 2026

Budget Worksheet and Justification


A Budget Worksheet and a Budget Justification are only required for applicants who have selected the Training Optional Add-On. **If you have not selected the Training Optional Add-On, please skip down to the Requested Amount section.**

Budget Worksheet



Only for applicants who have selected the Training Optional Add-On: Use the section below to add a single Budget Worksheet with estimated costs covering all of your training requests.

Budget Worksheet Instructions


Follow the instructions below to complete a Budget Worksheet only if you have selected the Training Optional Add-On in this application. If dates and locations are not yet posted for any of your selected training(s), feel free to use estimates for your Budget Worksheet.


1. Click the  symbol to the right of the Budget Worksheet header to create a Budget Worksheet.
2. Enter a name for the Budget Worksheet (Example: Annual Training Request).
3. Enter a Start Date and an End Date.
4. Complete all lines needed to build your budget.
5. Click the **Save** button at the bottom right of the Budget Worksheet.
6. Click **Save** at the bottom of the application.




Once your Budget Worksheet has been added and saved:

- You can open and edit your Budget Worksheet by hitting the  icon.
- You can delete the Budget Worksheet by using the  sign.
- DO NOT CLICK the link under Budget Period--clicking this link will navigate away from the request. **If you are editing the form, your changes will be lost.**

Do Not Click Budget Period Link
Clicking the budget link will navigate away from the request form. If you are editing, your changes will be lost.

Create New Budget 

Edit Existing Budget 

Budget Period	Budget	Actual	Variance	
Year 1 Budget: 9/22/2021 to 9/9/2022	1,200	0	1,200	 
Total	1,200	0	1,200	Delete Budget 

Training Optional Add-On Budget Worksheet

No Training Optional Add-On Budget Worksheet have been added

Only required if the Training Optional Add-On is selected for this application.

One Budget Worksheet is required for applicants requesting Training funds.

Maximum requested amount is \$7,500 for Retail Food Training Courses, Workshops, or Conferences sheduled from April 1, 2026 through March 31, 2027.

Budget Justification

If you have added a Budget Worksheet to your application, please add sufficient detail to fully explain all costs and all cost assumptions. If dates and locations are not yet posted for your selected training, feel free to use estimates. **Budget Justification information is only required for those requesting Training Optional Add-On funding.**

Budget Justification (Only Needed If Training Funds Requested):

...

Requested Amount

Please enter the total Requested Amount for your one-year project period. Your Requested Amount should include:

- **\$5,000** for work on Standards 1-8 (Required, Fixed Award).
- If selected, **\$5,000** (File Study approach) or **\$10,000** (Data Collection OR Hybrid approach) for work on Standard 9 (Optional, Fixed Award).
- If selected, **\$3,000** to update your SA9 within 12 months of its expiration (Fixed Award).
- If selected, **\$10,000** to be a Mentee (Optional, Fixed Award).
- If selected, **up to \$7,500** for Training (Optional, Budget Worksheet Required).

Your Requested Amount must be between **\$5,000** (required base outcome) and **\$35,500** (if all options are selected at the maximum funding levels).

Requested Amount: \$17,500.00

Once you have entered your Requested Amount, select **Save** at the bottom of the form.

When you have checked all of your entries and are ready to submit your application, select **Submit** and follow the instructions on the screen. If there are any error messages when you try to submit, this is often an indication that one or more required fields have not been completed. Please review your application and make any corrections identified, and again hit **Save** and then **Submit**.

After you receive the message saying that your submission has been successful, refresh your browser and verify that your application has moved to the "Submitted Applications" section on the left menu. Note that it may take a minute or two for the site to reindex.