

## GRANT SUMMARY SHEET

**Grant** Hi-Impact Area Substance Misuse Epidemic  
Response 20-21 Amend. 1

**Department:** HEALTH DEPARTMENT

**Grantor:** CENTER FOR DISEASE CONTROL AND PREVENTION

**Pass-Through  
Grantor** TENN. DEPT. OF HEALTH

**Total Award this** \$23,000.00

  

**Cash Match** \$0.00

  

**Department** Brad Thompson  
340-0407

  

**Status** AMENDMENT

**Program Description:**

A grant from Tennessee Department of Health is to build local capacity to improve public health response to the substance misuse epidemic in for the Middle, TN High-Impact Area (HIA). To use available data to identify populations at high-risk for adverse consequences from substance misuse and employ evidence-based interventions that are responsive to population needs. Amendment 1 adds an additional \$23,000.00 to the previous total of \$736,900.00 for a new grand total of 759,900.00 in hopes of increasing the programs impact. This action increases the budget of the sub-contractor, supplies and travel. No other terms were changed.

**Plan for continuation of services upon**

Services would be discontinued.

Grants Tracking Form

Part One

Pre-Application <input type="radio"/>		Application <input type="radio"/>		Award Acceptance <input type="radio"/>		Contract Amendment <input checked="" type="radio"/>	
Department		Dept. No.		Contact		Phone	
HEALTH DEPARTMENT		038		Brad Thompson		340-0407	
Grant Name:		Hi-Impact Area Substance Misuse Epidemic Response 20-21 Amend. 1					
Grantor:		CENTER FOR DISEASE CONTROL AND PREVENTION				Other:	
Grant Period From:		09/01/20		(applications only) Anticipated Application Date:			
Grant Period To:		08/31/21		(applications only) Application Deadline:			
Funding Type:		FED PASS THRU		Multi-Department Grant <input checked="" type="checkbox"/>		If yes, list below.	
Pass-Thru:		TENN. DEPT. OF HEALTH		Outside Consultant Project: <input type="checkbox"/>		Fire	
Award Type:		OTHER		Total Award:		\$23,000.00	
Status:		AMENDMENT		Metro Cash Match:		\$0.00	
Metro Category:		Est. Prior.		Metro In-Kind Match:		\$0.00	
CFDA #		93.136		Is Council approval required?		<input type="checkbox"/>	
Project Description:		<p>A grant from Tennessee Department of Health is to build local capacity to improve public health response to the substance misuse epidemic in for the Middle, TN High-Impact Area (HIA). To use available data to identify populations at high-risk for adverse consequences from substance misuse and employ evidence-based interventions that are responsive to population needs. <b>Amendment 1</b> adds an additional \$23,000.00 to the previous total of \$736,900.00 for a new grand total of 759,900.00 in hopes of increasing the programs impact. This action increases the budget of the sub-contractor, supplies and travel. No other terms were changed.</p>					
<p><b>Plan for continuation of service after expiration of grant/Budgetary Impact:</b> Services would be discontinued.</p>							
How is Match Determined?							
Fixed Amount of \$		or		% of Grant		Other: <input type="checkbox"/>	
Explanation for "Other" means of determining match:							
For this Metro FY, how much of the required local Metro cash match:							
Is already in department budget?				Fund		Business Unit	
Is not budgeted?				Proposed Source of Match:			
(Indicate Match Amount & Source for Remaining Grant Years in Budget Below)							
Other:							
Number of FTEs the grant will fund:		5.30		Actual number of positions added:		4.00	
Departmental Indirect Cost Rate		22.91%		Indirect Cost of Grant to Metro:		\$174,082.45	
*Indirect Costs allowed?		<input checked="" type="radio"/> Yes <input type="radio"/> No		% Allow.		22.91%	
				Ind. Cost Requested from Grantor:		\$100,500.00	
						in budget	
*(If "No", please attach documentation from the grantor that indirect costs are not allowable. See Instructions)							
Draw down allowable?		<input type="checkbox"/>					
Metro or Community-based Partners:							

Part Two

Grant Budget										
Budget Year	Metro Fiscal Year	Federal Grantor	State Grantor	Other Grantor	Local Match Cash	Match Source (Fund, BU)	Local Match In-Kind	Total Grant Each Year	Indirect Cost to Metro	Ind. Cost Neg. from Grantor
Yr 1	FY21	\$630,500.00						\$630,500.00	\$144,438.72	\$83,750.00
Yr 2	FY22	\$129,400.00						\$129,400.00	\$29,643.73	\$16,750.00
Yr 3	FY									
Yr 4	FY									
Yr 5	FY									
<b>Total</b>		\$759,900.00	\$0.00	\$0.00	\$0.00		\$0.00	\$759,900.00	\$174,082.45	\$100,500.00
Date Awarded:				03/12/21	Match Source (Fund, BU):		\$23,000.00	Contract#:		GG-21-68422-1
(or) Date Denied:										
(or) Date Withdrawn:										

Contact: [trinity.weathersby@nashville.gov](mailto:trinity.weathersby@nashville.gov)  
[vaughn.wilson@nashville.gov](mailto:vaughn.wilson@nashville.gov)

GCP Rec'd  
03/17/21

GCP Approved  
03/17/21

VW



## GRANT AMENDMENT

<b>Agency Tracking #</b> 34301-31321	<b>Edison ID</b> 68422	<b>Contract #</b> GG-21-68422	<b>Amendment #</b> 1		
<b>Contractor Legal Entity Name</b> Metropolitan Government of Nashville and Davidson County			<b>Edison Vendor ID</b> 4		
<b>Amendment Purpose &amp; Effect(s)</b> To add additional funds to increase program impact					
<b>Amendment Changes Contract End Date:</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		<b>End Date:</b> August 31, 2021			
<b>TOTAL Contract Amount INCREASE or DECREASE per this Amendment</b> (zero if N/A):			<b>+ \$ 23,000.00</b>		
<b>Funding —</b>					
<b>FY</b>	<b>State</b>	<b>Federal</b>	<b>Interdepartmental</b>	<b>Other</b>	<b>TOTAL Contract Amount</b>
2021		\$630,500.00			\$630,500.00
2022		\$129,400.00			\$129,400.00
<b>TOTAL:</b>		<b>\$759,900.00</b>			<b>\$759,900.00</b>
<p><b>Budget Officer Confirmation:</b> There is a balance in the appropriation from which obligations hereunder are required to be paid that is not already encumbered to pay other obligations.</p> <p style="text-align: center; font-size: 1.2em;"><i>Eric Buchholz</i></p>				<p><i>CPO USE</i></p> <p style="font-size: 1.5em; font-weight: bold;">GG-21-68422-01</p>	
<b>Speed Chart</b> (optional) HL00018400		<b>Account Code</b> (optional) 71301000			

**AMENDMENT 1  
OF GRANT CONTRACT GG-21-68422**

This Grant Contract Amendment is made and entered by and between the State of Tennessee, Department of Health, hereinafter referred to as the "State" and Metropolitan Government of Nashville and Metropolitan Government of Nashville and Davidson County, hereinafter referred to as the "Grantee." It is mutually understood and agreed by and between said, undersigned contracting parties that the subject Grant Contract is hereby amended as follows:

1. Grant Contract section C.1. is deleted in its entirety and replaced with the following:
  - C.1. Maximum Liability. In no event shall the maximum liability of the State under this Grant Contract exceed Seven Hundred Fifty-Nine Thousand Nine Hundred Dollars (\$759,900.00) ("Maximum Liability"). The Grant Budget, attached and incorporated as Attachment 2 is the maximum amount due the Grantee under this Grant Contract. The Grant Budget line-items include, but are not limited to, all applicable taxes, fees, overhead, and all other direct and indirect costs incurred or to be incurred by the Grantee.
2. Grant Contract Attachment 1 is deleted in its entirety and replaced with the new attachment 1 attached hereto.
3. Grant Contract Attachment 2 is deleted in its entirety and replaced with the new attachment 2 attached hereto.

Required Approvals. The State is not bound by this Amendment until it is signed by the contract parties and approved by appropriate officials in accordance with applicable Tennessee laws and regulations (depending upon the specifics of this contract, said officials may include, but are not limited to, the Commissioner of Finance and Administration, the Commissioner of Human Resources, and the Comptroller of the Treasury).

Amendment Effective Date. The revisions set forth herein shall be effective once all required approvals are obtained. All other terms and conditions of this Grant Contract not expressly amended herein shall remain in full force and effect.

IN WITNESS WHEREOF, the parties have by their duly authorized representatives set their signatures.

**METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY**

DocuSigned by:  
  
 5EE04500A8D6402...  
 \_\_\_\_\_  
 Interim Administrative Director  
 Metro Public Health Department

3/12/2021  
 \_\_\_\_\_  
 Date

DocuSigned by:  
  
 7F979F48A86A4DF...  
 \_\_\_\_\_  
 Chair, Board of Health

3/12/2021  
 \_\_\_\_\_  
 Date

**APPROVED AS TO AVAILABILITY OF FUNDS:**

DocuSigned by:  
  
 6A4E216914E9...  
 \_\_\_\_\_  
 Director, Department of Finance

3/22/2021  
 \_\_\_\_\_  
 Date

APPROVED AS TO RISK AND INSURANCE:

DocuSigned by:

*Balogun Cobb*

Director of Risk Management Services

3/22/2021

Date

APPROVED AS TO FORM AND LEGALITY:

DocuSigned by:

*Niki Eke*

Metropolitan Attorney

3/22/2021

Date

Metropolitan Mayor

Date

ATTEST:

Metropolitan Clerk

Date

DEPARTMENT OF HEALTH:

Lisa Piercey, MD, MBA, FAAP  
Commissioner

Date

## ATTACHMENT 1

**Federal Award Identification Worksheet**

Subrecipient's name (must match registered name in DUNS)	Nashville & Davidson County, Metropolitan Government of
Subrecipient's DUNS number	078217668
Federal Award Identification Number (FAIN)	NU17CE924981-02-03
Federal award date	01/08/2021
CFDA number and name	93.136 Injury Prevention and Control Research and State and Community Based Programs
Grant contract's begin date	9/1/2020
Grant contract's end date	8/31/2021
Amount of federal funds obligated by this grant contract	\$759,900.00
Total amount of federal funds obligated to the subrecipient	
Total amount of the federal award to the pass-through entity (Grantor State Agency)	\$6,671,197.00
Name of federal awarding agency	Centers for Disease Control and Prevention (CDC)
Name and contact information for the federal awarding official	Mrs. Natasha Jones Telephone (770) 488-1649 Email: mgz2@cdc.gov
Is the federal award for research and development?	No
Indirect cost rate for the federal award (See 2 C.F.R. §200.331 for information on type of indirect cost rate)	15.13%

## ATTACHMENT 2

## GRANT BUDGET

(BUDGET PAGE 1)

Metropolitan Government of Nashville and Davidson County -HIA-Year 2				
APPLICABLE PERIOD: The grant budget line-item amounts below shall be applicable only to expense incurred during the period beginning September 1, 2020, and ending August 31, 2021.				
POLICY 03 Object Line-item Reference	EXPENSE OBJECT LINE-ITEM CATEGORY <sup>1</sup> (detail schedule(s) attached as applicable)	GRANT CONTRACT	GRANTEE PARTICIPATION	TOTAL PROJECT
1	Salaries <sup>2</sup>	\$303,800.00	\$0.00	\$303,800.00
2	Benefits & Taxes	\$135,100.00	\$0.00	\$135,100.00
4, 15	Professional Fee/ Grant & Award <sup>2</sup>	\$177,400.00	\$0.00	\$177,400.00
5	Supplies	\$28,000.00	\$0.00	\$28,000.00
6	Telephone	\$1,800.00	\$0.00	\$1,800.00
7	Postage & Shipping	\$0.00	\$0.00	\$0.00
8	Occupancy	\$0.00	\$0.00	\$0.00
9	Equipment Rental & Maintenance	\$0.00	\$0.00	\$0.00
10	Printing & Publications	\$5,000.00	\$0.00	\$5,000.00
11, 12	Travel/ Conferences & Meetings <sup>2</sup>	\$8,300.00	\$0.00	\$8,300.00
13	Interest <sup>2</sup>	\$0.00	\$0.00	\$0.00
14	Insurance	\$0.00	\$0.00	\$0.00
16	Specific Assistance To Individuals <sup>2</sup>	\$0.00	\$0.00	\$0.00
17	Depreciation <sup>2</sup>	\$0.00	\$0.00	\$0.00
18	Other Non-Personnel <sup>2</sup>	\$0.00	\$0.00	\$0.00
20	Capital Purchase <sup>2</sup>	\$0.00	\$0.00	\$0.00
22	Indirect Cost (22.91% and Method)	\$100,500.00	\$0.00	\$100,500.00
24	In-Kind Expense	\$0.00	\$0.00	\$0.00
25	<b>GRAND TOTAL</b>	\$759,900.00	\$0.00	\$759,900.00

<sup>1</sup> Each expense object line-item shall be defined by the Department of Finance and Administration Policy 03, Uniform Reporting Requirements and Cost Allocation Plans for Subrecipients of Federal and State Grant Monies, Appendix A. (posted on the Internet at: <https://www.tn.gov/assets/entities/finance/attachments/policy3.pdf>).

<sup>2</sup> Applicable detail follows this page if line-item is funded.

**ATTACHMENT 2 (continued)**  
**GRANT BUDGET LINE-ITEM DETAIL**  
(BUDGET PAGE 2)

<b>SALARIES</b>	<b>Monthly Salary</b>	<b># Months</b>	<b>% of FTE</b>	<b>AMOUNT</b>
Vacant, Program Coordinator	\$ 4,840.00	x 12.00	x 100%	\$58,080.00
Haley Hershey, Epidemiologist	\$ 5,960.24	x 11.25	x 100%	\$67,052.70
Madelynn Myers, Public Health Administrator	\$ 4,973.04	x 10.50	x 100%	\$52,216.92
Brigid Vingan, Program Specialist	\$ 4,110.36	x 11.50	x 100%	\$47,269.14
Vacant, Fire Captain	\$ 4,898.50	x 12.00	x 100%	\$58,782.00
Trevor Henderson, Public Health Administrator	\$ 5,666.72	x 12.00	x 30%	\$20,400.19
<b>TOTAL</b>				<b>\$303,800.00</b>

<b>PROFESSIONAL FEE/ GRANT &amp; AWARD</b>	<b>AMOUNT</b>
Mental Health Cooperative	\$177,400.00
<b>TOTAL</b>	<b>\$177,400.00</b>

<b>TRAVEL/CONFERENCES &amp; MEETINGS</b>	<b>AMOUNT</b>
Local travel	\$6,000.00
National RX Drug Abuse and Herion Summit	\$2,300.00
<b>TOTAL</b>	<b>\$8,300.00</b>