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## GRANT SUMMARY SHEET

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**Grant Name:** Safe Baby Court 22-24 Amendment 1

**Department:** JUVENILE COURT

**Grantor:** Tennessee Department of Health & Substance Abuse Services

**Pass-Through Grantor  
(If applicable):**

**Total Award this Action:** \$100,000.00

**Cash Match Amount** \$0.00

**Department Contact:** Nicole Whitlock  
8802368

**Status:** AMENDMENT

**Program Description:**

The Safe Baby Court will work with families of children zero (0) to three (3) years of age to reduce the incident of child abuse, neglect, and endangerment to minimize the effects of childhood trauma on small children and provide family stability to participants in the program. Amendment 1 adds additional funding of \$100,000.00 for a new total of \$600,000.00 and extends the end date from 12/31/2024 to 06/30/2025.

**Plan for continuation of services upon grant expiration:**

Services would be discontinued.

### Grants Tracking Form

Part One

<b>Pre-Application</b> <input type="radio"/>		<b>Application</b> <input type="radio"/>		<b>Award Acceptance</b> <input type="radio"/>		<b>Contract Amendment</b> <input checked="" type="radio"/>	
Department	Dept. No.	Contact			Phone	Fax	
JUVENILE COURT	026	Nicole Whitlock			8802368		
<b>Grant Name:</b>		Safe Baby Court 22-24 Amendment 1					
<b>Grantor:</b>		Tennessee Department of Health & Substance Abuse Services			<b>Other:</b>		
<b>Grant Period From:</b>		07/01/22	(applications only) <b>Anticipated Application Date:</b>				
<b>Grant Period To:</b>		06/30/25	(applications only) <b>Application Deadline:</b>				
<b>Funding Type:</b>		STATE	<b>Multi-Department Grant</b>		<input type="checkbox"/> <b>→ If yes, list below.</b>		
<b>Pass-Thru:</b>			<b>Outside Consultant Project:</b>		<input type="checkbox"/>		
<b>Award Type:</b>		COMPETITIVE	<b>Total Award:</b>		\$100,000.00		
<b>Status:</b>		AMENDMENT	<b>Metro Cash Match:</b>		\$0.00		
<b>Metro Category:</b>		Est. Prior.	<b>Metro In-Kind Match:</b>		\$0.00		
<b>CFDA #</b>		N/A	<b>Is Council approval required?</b>		<input type="checkbox"/>		
<b>Project Description:</b>		The Safe Baby Court will work with families of children zero (0) to three (3) years of age to reduce the incident of child abuse, neglect, and endangerment to minimize the effects of childhood trauma on small children and provide family stability to participants in the program. <b>Amendment 1 adds additional funding of \$100,000.00 for a new total of \$600,000.00 and extends the end date from 12/31/2024 to 06/30/2025.</b>					
<b>Plan for continuation of service after expiration of grant/Budgetary Impact:</b>							
Services would be discontinued.							
<b>How is Match Determined?</b>							
<b>Fixed Amount of \$</b>		N/A	<b>or</b>		<b>% of Grant</b>		
<b>Explanation for "Other" means of determining match:</b>							
<b>For this Metro FY, how much of the required local Metro cash match:</b>							
<b>Is already in department budget?</b>		N/A	<b>Fund</b>		<b>Business Unit</b>		
<b>Is not budgeted?</b>			<b>Proposed Source of Match:</b>				
<b>(Indicate Match Amount &amp; Source for Remaining Grant Years in Budget Below)</b>							
<b>Other:</b>							
<b>Number of FTEs the grant will fund:</b>		1.20	<b>Actual number of positions added:</b>		0.00		
<b>Departmental Indirect Cost Rate</b>		23.63%	<b>Indirect Cost of Grant to Metro:</b>		\$141,780.00		
<b>*Indirect Costs allowed?</b> <input checked="" type="radio"/> Yes <input type="radio"/> No		<b>% Allow.</b> 9.09%	<b>Ind. Cost Requested from Grantor:</b>		\$54,544.00 <b>in budget</b>		
<b>*(If "No", please attach documentation from the grantor that indirect costs are not allowable. See Instructions)</b>							
<b>Draw down allowable?</b> <input type="checkbox"/>							
<b>Metro or Community-based Partners:</b>							

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	FY23		\$200,000.00					\$200,000.00	\$47,260.00	\$18,181.00
Yr 2	FY24		\$200,000.00					\$200,000.00	\$47,260.00	\$18,181.00
Yr 3	FY25		\$200,000.00					\$200,000.00	\$47,260.00	\$18,182.00
Yr 4	FY__									
Yr 5	FY__									
<b>Total</b>		<b>\$0.00</b>	<b>\$600,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>		<b>\$0.00</b>	<b>\$600,000.00</b>	<b>\$141,780.00</b>	<b>\$54,544.00</b>
<b>Date Awarded:</b>		10/22/24		<b>Tot. Awarded:</b>		\$100,000.00		<b>Contract#:</b> DGA 74161_2022-2023_009		
<b>(or) Date Denied:</b>				<b>Reason:</b>						
<b>(or) Date Withdrawn:</b>				<b>Reason:</b>						

Contact: [juanita.paulsen@nashville.gov](mailto:juanita.paulsen@nashville.gov)  
[vaughn.wilson@nashville.gov](mailto:vaughn.wilson@nashville.gov)

Rev. 5/13/13  
5939

GCP Received 10/22/2024

GCP Approved 10/23/2024





**AMENDMENT ONE  
OF GRANT CONTRACT DGA 74161\_2022-2023\_009**

This Grant Contract Amendment is made and entered by and between the State of Tennessee, Department of Mental Health and Substance Abuse Services, hereinafter referred to as the "State" 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. The current Z Grant Contract coversheet is deleted and replaced with the new Z Grant Contract Amendment coversheet (see previous page).
2. Grant Contract section B. Term of Grant Contract is deleted in its entirety and replaced with the following:
  - B.1. This Grant Contract shall be effective for the period beginning on July 1, 2022 ("Effective Date") and ending on June 30, 2025, ("Term"). The State shall have no obligation to the Grantee for fulfillment of the Scope outside the Term.
  - B.2. Term Extension. It is understood and agreed that the State may extend the Term an additional period of time, not to exceed twelve (12) months beyond the expiration date of this Grant Contract, under the same terms and conditions. In no event, however, shall the maximum Term, including all extensions or renewals, exceed a total of sixty (60) months.
3. Grant Contract section C.1. Maximum Liability 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 Six Hundred Thousand Dollars (\$600,000.00) ("Maximum Liability"). The Grant Budget, attached and incorporated as Attachment One [1] 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.
4. Grant Contract Attachment One (1) Year 3 (Grant Budget) is deleted in its entirety and replaced with new Attachment One (1) Year 3 (Grant Budget) 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.

**FOR THE PROVISION OF THE SAFE BABY COURTS (SBC) PROGRAM:**

**IN WITNESS WHEREOF,**

**METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY:**

*Sheila D. Calloway*

*Oct 22, 2024*

**GRANTEE SIGNATURE**

**DATE**

*Sheila D.J. Calloway, Davidson County Juvenile Court Judge*

**PRINTED NAME AND TITLE OF GRANTEE SIGNATORY (above)**

**DEPARTMENT OF MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES:**

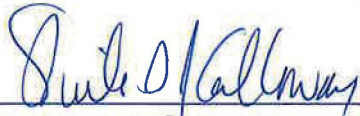
**MARIE WILLIAMS, COMMISSIONER**

**DATE**

**SIGNATURE PAGE  
FOR  
Safe Baby Court 22-24 Amend 1**

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

**METROPOLITAN GOVERNMENT OF  
NASHVILLE AND DAVIDSON COUNTY**

  
Sheila D.J. Calloway  
Juvenile Court Judge

Oct. 22, 2024  
Date

**APPROVED AS TO AVAILABILITY  
OF FUNDS:**

  
Director of Finance  
Department of Finance

10/30/2024 | 10:17 AM CDT  
Date

**APPROVED AS TO RISK AND INSURANCE:**

  
Director of Insurance

10/30/2024 | 3:17 PM CDT  
Date

**APPROVED AS TO FORM AND  
LEGALITY:**

  
Metropolitan Attorney

10/30/2024 | 3:12 PM CDT  
Date

\_\_\_\_\_  
Freddie O' Connell  
Metropolitan Mayor

\_\_\_\_\_  
Date

**ATTEST:**

\_\_\_\_\_  
Metropolitan Clerk

\_\_\_\_\_  
Date

<b>GRANT BUDGET SUMMARY</b>				
<b>Agency Name: Metropolitan Government of Davidson County</b>				
<b>Program Code Name: Safe Baby Courts 25</b>				
<b>The grant budget line-item amounts below shall be applicable only to expense incurred during the following</b>				
<b>Applicable Period: BEGIN 7/1/2024 END: 6/30/2025</b>				
<b>POLICY 03 Object Line-item Reference</b>	<b>EXPENSE OBJECT LINE-ITEM CATEGORY <sup>1</sup></b>	<b>GRANT CONTRACT</b>	<b>GRANTEE PARTICIPATION</b>	<b>TOTAL PROJECT</b>
1, 2	Salaries, Benefits & Taxes <sup>2</sup>	\$152,882.00	\$0.00	\$152,882.00
4, 15	Professional Fee, Grant & Award <sup>2</sup>	\$5,000.00	\$0.00	\$5,000.00
5, 6, 7, 8, 9, 10	Supplies, Telephone, Postage & Shipping, Occupancy, Equipment Rental & Maintenance, Printing & Publications <sup>2</sup>	\$5,000.00	\$0.00	\$5,000.00
11, 12	Travel, Conferences & Meetings <sup>2</sup>	\$2,000.00	\$0.00	\$2,000.00
13	Interest <sup>2</sup>	\$0.00	\$0.00	\$0.00
14	Insurance <sup>2</sup>	\$0.00	\$0.00	\$0.00
16	Specific Assistance To Individuals <sup>2</sup>	\$16,936.00	\$0.00	\$16,936.00
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 <sup>2</sup>	\$18,182.00	\$0.00	\$18,182.00
24	In-Kind Expense <sup>2</sup>	\$0.00	\$0.00	\$0.00
25	<b>GRAND TOTAL</b>	<b>\$200,000.00</b>	<b>\$0.00</b>	<b>\$200,000.00</b>

<sup>1</sup> Each expense object line-item is defined by the U.S. OMB's Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, Subpart E Cost Principles (posted on the Internet at: <https://www.ecfr.gov/current/title-2/subtitle-A/chapter-II/part-200/subpart-E>) and CPO Policy 2013-007 (posted online at <https://www.tn.gov/generalservices/procurement/central-procurement-office--cpo-/library-.html>).

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

**GRANT BUDGET LINE-ITEM DETAIL:**

Agency Name: Metropolitan  
Government of  
Davidson County  
Program Code Name: Safe Baby Courts 25  
Begin Date: 7/1/2024  
End Date: 6/30/2025

<b>SALARIES, BENEFITS &amp; TAXES</b>	<b>AMOUNT</b>
Salaries	\$104,693.00
Benefits and Taxes	\$48,189.00
<b>TOTAL</b>	<b>\$152,882.00</b>

<b>PROFESSIONAL FEE, GRANT &amp; AWARD</b>	<b>AMOUNT</b>
Professional Fees	\$5,000.00
<b>TOTAL</b>	<b>\$5,000.00</b>

<b>SUPPLIES (includes "Sensitive Minor Equipment"), TELEPHONE, POSTAGE &amp; SHIPPING, OCCUPANCY, EQUIPMENT RENTAL &amp; MAINTENANCE, PRINTING &amp; PUBLICATION</b>	<b>AMOUNT</b>
Supplies	\$4,000.00
Telephone	\$1,000.00
<b>TOTAL</b>	<b>\$5,000.00</b>

<b>TRAVEL, CONFERENCES &amp; MEETINGS</b>	<b>AMOUNT</b>
Local Travel	\$500.00
Training and Conferences Attended by Staff	\$1,000.00
Conferences and Training Provided by Agency	\$500.00
<b>TOTAL</b>	<b>\$2,000.00</b>

<b>SPECIFIC ASSISTANCE TO INDIVIDUALS</b>	<b>AMOUNT</b>
Specific Assistance to Individuals	\$16,936.00
<b>TOTAL</b>	<b>\$16,936.00</b>

<b>INDIRECT COST</b>	<b>AMOUNT</b>
Indirect Cost	\$18,182.00
<b>TOTAL</b>	<b>\$18,182.00</b>

**Certificate Of Completion**

Envelope Id: 48D4CACB8326442AAFAF45BED579A283	Status: Completed
Subject: Complete with DocuSign: Juvenile Ct. Safe Baby Court 22-24 Amend1 Ready.pdf	
Source Envelope:	
Document Pages: 9	Signatures: 6
Certificate Pages: 15	Initials: 1
AutoNav: Enabled	Envelope Originator:
Envelope Stamping: Enabled	Juanita Paulson
Time Zone: (UTC-06:00) Central Time (US & Canada)	730 2nd Ave. South 1st Floor
	Nashville, TN 37219
	Juanita.Paulsen@nashville.gov
	IP Address: 170.190.198.185


**Record Tracking**

Status: Original	Holder: Juanita Paulson	Location: DocuSign
10/29/2024 3:47:27 PM	Juanita.Paulsen@nashville.gov	
Security Appliance Status: Connected	Pool: StateLocal	
Storage Appliance Status: Connected	Pool: Metropolitan Government of Nashville and Davidson County	Location: DocuSign


**Signer Events**

Signer Events	Signature	Timestamp
Amanda Brown		Sent: 10/29/2024 3:52:41 PM
Amanda.Brown@nashville.gov		Viewed: 10/30/2024 6:55:32 AM
Security Level: Email, Account Authentication (None)		Signed: 10/30/2024 6:55:43 AM
	Signature Adoption: Pre-selected Style	
	Using IP Address: 170.190.198.185	


**Electronic Record and Signature Disclosure:**  
 Accepted: 10/30/2024 6:55:32 AM  
 ID: ef06821d-4d26-41b4-b646-90e1bf6e42d6

Aaron Pratt		Sent: 10/30/2024 6:55:44 AM
Aaron.Pratt@nashville.gov		Viewed: 10/30/2024 7:43:27 AM
Security Level: Email, Account Authentication (None)		Signed: 10/30/2024 7:43:35 AM
	Signature Adoption: Pre-selected Style	
	Using IP Address: 170.190.198.185	

**Electronic Record and Signature Disclosure:**  
 Accepted: 10/30/2024 7:43:27 AM  
 ID: 99141b2e-0570-41ad-80da-a3f26f575c30

Kevin Crumbo/mjw		Sent: 10/30/2024 7:43:36 AM
MaryJo.Wiggins@nashville.gov		Viewed: 10/30/2024 10:14:03 AM
Security Level: Email, Account Authentication (None)		Signed: 10/30/2024 10:17:07 AM
	Signature Adoption: Pre-selected Style	
	Using IP Address: 170.190.198.100	

**Electronic Record and Signature Disclosure:**  
 Accepted: 10/30/2024 10:14:03 AM  
 ID: 2f080c81-9953-4be1-ae78-5864c618c266

Courtney Mohan		Sent: 10/30/2024 10:17:08 AM
Courtney.Mohan@nashville.gov		Viewed: 10/30/2024 2:34:46 PM
Security Level: Email, Account Authentication (None)		Signed: 10/30/2024 3:12:59 PM
	Signature Adoption: Pre-selected Style	
	Using IP Address: 174.219.128.237	
	Signed using mobile	



Signer Events	Signature	Timestamp
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**Electronic Record and Signature Disclosure:**  
Accepted: 10/30/2024 2:34:46 PM  
ID: 4ccd2a2a-6123-4909-a218-b9d6698e873e

Balogun Cobb  
balogun.cobb@nashville.gov  
Insurance Division Manager  
Security Level: Email, Account Authentication (None)

*Balogun Cobb*

Signature Adoption: Pre-selected Style  
Using IP Address: 166.194.154.20  
Signed using mobile

Sent: 10/30/2024 3:13:01 PM  
Viewed: 10/30/2024 3:17:05 PM  
Signed: 10/30/2024 3:17:23 PM

**Electronic Record and Signature Disclosure:**  
Accepted: 10/30/2024 3:17:05 PM  
ID: df3b1491-d721-4cb5-a693-72aedf0c282a

In Person Signer Events	Signature	Timestamp
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Editor Delivery Events	Status	Timestamp
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Agent Delivery Events	Status	Timestamp
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Intermediary Delivery Events	Status	Timestamp
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Certified Delivery Events	Status	Timestamp
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Carbon Copy Events	Status	Timestamp
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Danielle Godin  
Danielle.Godin@nashville.gov  
Security Level: Email, Account Authentication (None)

**COPIED**

Sent: 10/30/2024 3:17:27 PM  
Viewed: 10/31/2024 10:37:37 AM

**Electronic Record and Signature Disclosure:**  
Not Offered via DocuSign

Sally Palmer  
sally.palmer@nashville.gov  
Security Level: Email, Account Authentication (None)

**COPIED**

Sent: 10/30/2024 3:17:28 PM

**Electronic Record and Signature Disclosure:**  
Accepted: 10/31/2024 8:28:06 AM  
ID: 2fa8387e-c0d4-4458-a0ab-9f6751a3ce22

Witness Events	Signature	Timestamp
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Notary Events	Signature	Timestamp
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Envelope Summary Events	Status	Timestamps
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Envelope Sent	Hashed/Encrypted	10/29/2024 3:52:41 PM
Certified Delivered	Security Checked	10/30/2024 3:17:05 PM
Signing Complete	Security Checked	10/30/2024 3:17:23 PM
Completed	Security Checked	10/30/2024 3:17:28 PM

Payment Events	Status	Timestamps
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**Electronic Record and Signature Disclosure**