

GRANT SUMMARY SHEET

Grant Name: Health Promotion Services 21-22 Amend. 1

Department: HEALTH DEPARTMENT

Grantor: U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

**Pass-Through Grantor
(If applicable):** TENN. DEPT. OF HEALTH

Total Award this Action: \$400,000.00

Cash Match \$0.00

Department Contact: Brad Thompson
340-0407

Status: AMENDMENT

Program Description:

Promote 10 year Healthy People 2020 goals to the residents of Davidson County through the use of health promotion activities and education programs. Amendment 1 extends the end date from 6/30/22 to 6/30/24 and adds an additional \$400,000.00 to the previous total of \$318,500.00 for a new grand total of \$718,500.00

Plan for continuation of services upon grant expiration:

The services would be discontinued.

B.A. Initials 

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	Fax
HEALTH DEPARTMENT	038	Brad Thompson				340-0407	
Grant Name:	Health Promotion Services 21-22 Amend. 1						
Grantor:	U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES				Other:		
Grant Period From:	07/01/20	(applications only) Anticipated Application Date:					
Grant Period To:	06/30/24	(applications only) Application Deadline:					
Funding Type:	FED PASS THRU	Multi-Department Grant		<input type="checkbox"/> If yes, list below.			
Pass-Thru:	TENN. DEPT. OF HEALTH	Outside Consultant Project:		<input type="checkbox"/>			
Award Type:	FORMULA	Total Award:	\$400,000.00				
Status:	AMENDMENT	Metro Cash Match:	\$0.00				
Metro Category:	Est. Prior.	Metro In-Kind Match:	\$0.00				
CFDA #	93.991	Is Council approval required?	<input checked="" type="checkbox"/>				
Project Description:	Applic. Submitted Electronically? <input type="checkbox"/>						
Promote 10 year Healthy People 2020 goals to the residents of Davidson County through the use of health promotion activities and education programs. Amendment 1 extends the end date from 6/30/22 to 6/30/24 and adds an additional \$400,000.00 to the previous total of \$318,500.00 for a new grant total of \$718,500.00							
Plan for continuation of service after expiration of grant/Budgetary Impact:							
The services would be discontinued.							
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:	1.35		Actual number of positions added:	0.00			
Departmental Indirect Cost Rate	22.91%		Indirect Cost of Grant to Metro:	\$164,598.29			
*Indirect Costs allowed? <input checked="" type="radio"/> Yes <input type="radio"/> No	% Allow.	7.93%	Ind. Cost Requested from Grantor:	\$57,000.00 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	\$159,300.00			\$0.00		\$0.00	\$159,300.00	\$36,493.40	\$9,500.00
Yr 2	FY22	\$186,400.00			\$0.00		\$0.00	\$186,400.00	\$42,701.63	\$15,400.00
Yr 3	FY23	\$186,400.00			\$0.00		\$0.00	\$186,400.00	\$42,701.63	\$15,900.00
Yr 4	FY24	\$186,400.00			\$0.00		\$0.00	\$186,400.00	\$42,701.63	\$16,200.00
Yr 5	FY									
Total		\$718,500.00	\$0.00	\$0.00	\$0.00		\$0.00	\$718,500.00	\$164,598.29	\$57,000.00
Date Awarded:				11/29/21	Tot. Awarded:	\$400,000.00	Contract#:	34360-50321-1		
(or) Date Denied:					Reason:					
(or) Date Withdrawn:					Reason:					

Contact: trinity.weathersby@nashville.gov
vaughn.wilson@nashville.gov

TW



GRANT AMENDMENT

Agency Tracking # 34360-50321	Edison ID 65715	Contract # GG21-65715	Amendment # 1		
Contractor Legal Entity Name Metropolitan Government of Nashville and Davidson County			Edison Vendor ID 4		
Amendment Purpose & Effect(s): Extend term and add funds					
Amendment Changes Contract End Date: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		End Date: 6/30/2024			
TOTAL Contract Amount INCREASE or DECREASE per this Amendment (zero if N/A):			+ \$400,000		
Funding —					
FY	State	Federal	Interdepartmental	Other	TOTAL Contract Amount
2021		\$159,300			\$159,300
2022		\$186,400			\$186,400
2023		\$186,400			\$186,400
2024		\$186,400			\$186,400
TOTAL:		\$718,500			\$718,500
<p>Budget Officer Confirmation: 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;"><i>Cric Bucholz</i></p>			<p><i>CPO USE</i></p>		
Speed Chart (optional) HL00006839		Account Code (optional) 71301000			

**AMENDMENT ONE
OF GRANT CONTRACT GG2165715**

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 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 Attachment 1 is deleted in its entirety and replaced with the new Attachment 1, attached hereto.
2. The following is added as Grant Contract section A.9.:
 - A.9. No funds awarded under this Grant Contract shall be used for lobbying federal, state, or local officials.
3. Grant Contract Section B. is deleted in its entirety and replaced with the following:

B. TERM OF CONTRACT

- B.1. This Grant Contract shall be effective for the period beginning on July 1, 2020, ("Effective Date") and ending on June 30, 2024, ("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 one hundred-eighty (180) days 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.
4. 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 Eighteen Thousand Five Hundred Dollars (\$718,500.00) ("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.
 5. 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 ten (10) days following the last signature. All other terms and conditions of this Grant Contract not expressly amended herein shall remain in full force and effect.

IN WITNESS WHEREOF,

METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY

DocuSigned by:

 0460AC21E1CC408... _____
 Director
 Metro Public Health Department
 11/22/2021

 Date

DocuSigned by:

 BEBF0BBF14D14B0... _____
 Chair, Board of Health
 11/29/2021

 Date

APPROVED AS TO AVAILABILITY OF FUNDS:

DocuSigned by:

 929F712A674210... _____
 Director, Department of Finance
 12/13/2021

 Date

APPROVED AS TO RISK AND INSURANCE:

DocuSigned by:


 Director of Risk Management Services
 12/15/2021

 Date

APPROVED AS TO FORM AND LEGALITY:

DocuSigned by:


 Metropolitan Attorney
 12/14/2021

 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)	Metropolitan Government of Nashville & Davidson County
Subrecipient's DUNS number	078217668
Federal Award Identification Number (FAIN)	NB01OT009387
Federal award date	8/17/2021
CFDA number and name	93.991 Preventive Health and Health Services Block Grant
Grant contract's begin date	July 1, 2020
Grant contract's end date	June 30, 2024
Amount of federal funds obligated by this grant contract	\$718,500.00
Total amount of federal funds obligated to the subrecipient	
Total amount of the federal award to the pass-through entity (Grantor State Agency)	\$2,492,873.00
Name of federal awarding agency	Department of Health and Human Services Centers for Disease Control and Prevention
Name and contact information for the federal awarding official	Mr. Jon Messick Grants Management Officer yfa4@cdc.gov (770) 488-1005
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)	0

ATTACHMENT 2

GRANT BUDGET

(BUDGET PAGE 1)

METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY PUBLIC HEALTH				
APPLICABLE PERIOD: The grant budget line-item amounts below shall be applicable only to expense incurred during the period beginning July 1, 2020, and ending June 30, 2024. ROLLUP				
POLICY 03 Object Line-Item Reference	EXPENSE OBJECT LINE-ITEM CATEGORY ¹ (detail schedule(s) attached as applicable)	GRANT CONTRACT	GRANTEE PARTICIPATION	TOTAL PROJECT
1	Salaries ²	\$436,700.00	\$0.00	\$436,700.00
2	Benefits & Taxes	\$188,000.00	\$0.00	\$188,000.00
4, 15	Professional Fee/ Grant & Award ²	\$0.00	\$0.00	\$0.00
5	Supplies	\$25,800.00	\$0.00	\$25,800.00
6	Telephone	\$0.00	\$0.00	\$0.00
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	\$0.00	\$0.00	\$0.00
11, 12	Travel/ Conferences & Meetings ²	\$11,000.00	\$0.00	\$11,000.00
13	Interest ²	\$0.00	\$0.00	\$0.00
14	Insurance	\$0.00	\$0.00	\$0.00
16	Specific Assistance To Individuals ²	\$0.00	\$0.00	\$0.00
17	Depreciation ²	\$0.00	\$0.00	\$0.00
18	Other Non-Personnel ²	\$0.00	\$0.00	\$0.00
20	Capital Purchase ²	\$0.00	\$0.00	\$0.00
22	Indirect Cost (% and method)	\$57,000.00	\$0.00	\$57,000.00
24	In-Kind Expense	\$0.00	\$0.00	\$0.00
25	GRAND TOTAL	\$718,500.00	\$0.00	\$718,500.00

¹ 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/content/dam/tn/finance/ocjp/policy3.pdf>).

² Applicable detail follows this page if line-item is funded.

ATTACHMENT 2 (Continued)

GRANT BUDGET

(BUDGET PAGE 2)

METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY PUBLIC HEALTH				
APPLICABLE PERIOD: The grant budget line-item amounts below shall be applicable only to expense incurred during the period beginning July 1, 2020, and ending June 30, 2021. YEAR 1				
POLICY 03 Object Line-Item Reference	EXPENSE OBJECT LINE-ITEM CATEGORY ¹ (detail schedule(s) attached as applicable)	GRANT CONTRACT	GRANTEE PARTICIPATION	TOTAL PROJECT
1	Salaries ²	\$103,600.00	\$0.00	\$103,600.00
2	Benefits & Taxes	\$45,000.00	\$0.00	\$45,000.00
4, 15	Professional Fee/ Grant & Award ²	\$0.00	\$0.00	\$0.00
5	Supplies	\$1,200.00	\$0.00	\$1,200.00
6	Telephone	\$0.00	\$0.00	\$0.00
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	\$0.00	\$0.00	\$0.00
11, 12	Travel/ Conferences & Meetings ²	\$0.00	\$0.00	\$0.00
13	Interest ²	\$0.00	\$0.00	\$0.00
14	Insurance	\$0.00	\$0.00	\$0.00
16	Specific Assistance To Individuals ²	\$0.00	\$0.00	\$0.00
17	Depreciation ²	\$0.00	\$0.00	\$0.00
18	Other Non-Personnel ²	\$0.00	\$0.00	\$0.00
20	Capital Purchase ²	\$0.00	\$0.00	\$0.00
22	Indirect Cost (6.4% of Salaries/Benefits)	\$9,500.00	\$0.00	\$9,500.00
24	In-Kind Expense	\$0.00	\$0.00	\$0.00
25	GRAND TOTAL	\$159,300.00	\$0.00	\$159,300.00

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² Applicable detail follows this page if line-item is funded.

ATTACHMENT 2 (Continued)
GRANT BUDGET LINE-ITEM DETAIL
 (BUDGET PAGE 3)

YEAR 1

SALARIES								AMOUNT
Sierra Harris, Program Specialist	\$ 4,111.47	x	12	x	100%			\$49,337.64
Heather Snell, Program Specialist	\$ 4,521.44	x	12	x	100%			\$54,257.28
TOTAL ROUNDED								\$103,600.00

ATTACHMENT 2 (Continued)

GRANT BUDGET

(BUDGET PAGE 4)

METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY PUBLIC HEALTH				
APPLICABLE PERIOD: The grant budget line-item amounts below shall be applicable only to expense incurred during the period beginning July 1, 2021, and ending June 30, 2022. YEAR 2				
POLICY 03 Object Line-Item Reference	EXPENSE OBJECT LINE-ITEM CATEGORY ¹ (detail schedule(s) attached as applicable)	GRANT CONTRACT	GRANTEE PARTICIPATION	TOTAL PROJECT
1	Salaries ²	\$107,900.00	\$0.00	\$107,900.00
2	Benefits & Taxes	\$46,400.00	\$0.00	\$46,400.00
4, 15	Professional Fee/ Grant & Award ²	\$0.00	\$0.00	\$0.00
5	Supplies	\$11,700.00	\$0.00	\$11,700.00
6	Telephone	\$0.00	\$0.00	\$0.00
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	\$0.00	\$0.00	\$0.00
11, 12	Travel/ Conferences & Meetings ²	\$5,000.00	\$0.00	\$5,000.00
13	Interest ²	\$0.00	\$0.00	\$0.00
14	Insurance	\$0.00	\$0.00	\$0.00
16	Specific Assistance To Individuals ²	\$0.00	\$0.00	\$0.00
17	Depreciation ²	\$0.00	\$0.00	\$0.00
18	Other Non-Personnel ²	\$0.00	\$0.00	\$0.00
20	Capital Purchase ²	\$0.00	\$0.00	\$0.00
22	Indirect Cost (10% of Salaries/Benefits)	\$15,400.00	\$0.00	\$15,400.00
24	In-Kind Expense	\$0.00	\$0.00	\$0.00
25	GRAND TOTAL	\$186,400.00	\$0.00	\$186,400.00

¹ 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/content/dam/tn/finance/ocjp/policy3.pdf>).

² Applicable detail follows this page if line-item is funded.

ATTACHMENT 2 (Continued)
GRANT BUDGET LINE-ITEM DETAIL
 (BUDGET PAGE 5)

YEAR 2

SALARIES							AMOUNT
Name, Title	Monthly Salary		# of Months		% of time		
Sierra Harris, Program Specialist	\$ 3,988.80	x	3	x	100%		\$11,966.40
Vacant, Program Specialist	\$ 4,308.35	x	9	x	100%		\$38,775.15
Kiana Radney, Program Specialist	\$ 4,802.20	x	11	x	100%		\$52,824.20
Vacant, Program Specialist	\$ 4,308.35	x	1	x	100%		\$4,308.35
TOTAL ROUNDED							\$107,900.00

TRAVEL / CONFERENCES AND MEETINGS	AMOUNT
Out of town travel to annual NNPHI - New Orleans (2 x \$2,000.00)	\$4,000.00
Local Travel for staff	\$1,000.00
TOTAL	\$5,000.00

ATTACHMENT 2 (Continued)

GRANT BUDGET

(BUDGET PAGE 6)

METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY PUBLIC HEALTH				
APPLICABLE PERIOD: The grant budget line-item amounts below shall be applicable only to expense incurred during the period beginning July 1, 2022, and ending June 30, 2023. YEAR 3				
POLICY 03 Object Line-Item Reference	EXPENSE OBJECT LINE-ITEM CATEGORY ¹ (detail schedule(s) attached as applicable)	GRANT CONTRACT	GRANTEE PARTICIPATION	TOTAL PROJECT
1	Salaries ²	\$111,500.00	\$0.00	\$111,500.00
2	Benefits & Taxes	\$47,900.00	\$0.00	\$47,900.00
4, 15	Professional Fee/ Grant & Award ²	\$0.00	\$0.00	\$0.00
5	Supplies	\$8,100.00	\$0.00	\$8,100.00
6	Telephone	\$0.00	\$0.00	\$0.00
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	\$0.00	\$0.00	\$0.00
11, 12	Travel/ Conferences & Meetings ²	\$3,000.00	\$0.00	\$3,000.00
13	Interest ²	\$0.00	\$0.00	\$0.00
14	Insurance	\$0.00	\$0.00	\$0.00
16	Specific Assistance To Individuals ²	\$0.00	\$0.00	\$0.00
17	Depreciation ²	\$0.00	\$0.00	\$0.00
18	Other Non-Personnel ²	\$0.00	\$0.00	\$0.00
20	Capital Purchase ²	\$0.00	\$0.00	\$0.00
22	Indirect Cost (10% of Salaries/Benefits)	\$15,900.00	\$0.00	\$15,900.00
24	In-Kind Expense	\$0.00	\$0.00	\$0.00
25	GRAND TOTAL	\$186,400.00	\$0.00	\$186,400.00

¹ 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/content/dam/tn/finance/ocjp/policy3.pdf>).

² Applicable detail follows this page if line-item is funded.

ATTACHMENT 2 (Continued)
GRANT BUDGET LINE-ITEM DETAIL
 (BUDGET PAGE 7)

YEAR 3

SALARIES							AMOUNT
Name, Title	Monthly Salary		# of Months		% of time		
Vacant, Program Specialist	\$4,394.52	x	12	x	100.00%	+	\$52,734.24
Kiana Radney, Program Specialist	\$4,898.24	x	12	x	100.00%	+	\$58,778.88
ROUNDED TOTAL							\$111,500.00

TRAVEL / CONFERENCES & MEETINGS	AMOUNT
Local Travel, conference TBD	\$3,000.00
TOTAL	\$3,000.00

ATTACHMENT 2 (Continued)

GRANT BUDGET

(BUDGET PAGE 6)

METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY PUBLIC HEALTH				
APPLICABLE PERIOD: The grant budget line-item amounts below shall be applicable only to expense incurred during the period beginning July 1, 2023, and ending June 30, 2024. YEAR 4				
POLICY 03 Object Line-Item Reference	EXPENSE OBJECT LINE-ITEM CATEGORY ¹ (detail schedule(s) attached as applicable)	GRANT CONTRACT	GRANTEE PARTICIPATION	TOTAL PROJECT
1	Salaries ²	\$113,700.00	\$0.00	\$113,700.00
2	Benefits & Taxes	\$48,700.00	\$0.00	\$48,700.00
4, 15	Professional Fee/ Grant & Award ²	\$0.00	\$0.00	\$0.00
5	Supplies	\$4,800.00	\$0.00	\$4,800.00
6	Telephone	\$0.00	\$0.00	\$0.00
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	\$0.00	\$0.00	\$0.00
11, 12	Travel/ Conferences & Meetings ²	\$3,000.00	\$0.00	\$3,000.00
13	Interest ²	\$0.00	\$0.00	\$0.00
14	Insurance	\$0.00	\$0.00	\$0.00
16	Specific Assistance To Individuals ²	\$0.00	\$0.00	\$0.00
17	Depreciation ²	\$0.00	\$0.00	\$0.00
18	Other Non-Personnel ²	\$0.00	\$0.00	\$0.00
20	Capital Purchase ²	\$0.00	\$0.00	\$0.00
22	Indirect Cost (10% of Salaries/Benefits)	\$16,200.00	\$0.00	\$16,200.00
24	In-Kind Expense	\$0.00	\$0.00	\$0.00
25	GRAND TOTAL	\$186,400.00	\$0.00	\$186,400.00

¹ 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/content/dam/tn/finance/ocjp/policy3.pdf>).

² Applicable detail follows this page if line-item is funded.

ATTACHMENT 2 (Continued)
GRANT BUDGET LINE-ITEM DETAIL
 (BUDGET PAGE 9)

YEAR 4

SALARIES							AMOUNT
Name, Title	Monthly Salary		# of Months		% of time		
Vacant, Program Specialist	\$4,482.41	x	12	x	100.00%		\$53,788.92
Kiana Radney, Program Specialist	\$4,996.20	x	12	x	100.00%		\$59,954.46
ROUNDED TOTAL							\$113,700.00

TRAVEL / CONFERENCES & MEETINGS		AMOUNT
Local Travel, conference TBD		\$3,000.00
TOTAL		\$3,000.00

Resolution No. RS2020 - 185

A resolution accepting a grant from the State of Tennessee, Department of Health, to The Metropolitan Government of Nashville and Davidson County, acting by and through the Metropolitan Board of Health, to facilitate the planning, implementation, and evaluation of community-driven and evidence-based Health Promotion programs.

WHEREAS, the State of Tennessee, Department of Health, has awarded a grant in an amount not to exceed \$318,500.00 with no cash match required to The Metropolitan Government of Nashville and Davidson County, acting by and through the Metropolitan Board of Health, to facilitate the planning, implementation, and evaluation of community-driven and evidence-based Health Promotion programs; and,

WHEREAS, it is to the benefit of the citizens of The Metropolitan Government of Nashville and Davidson County that this grant be accepted.

NOW, THEREFORE BE IT RESOLVED BY THE COUNCIL OF THE METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY:

Section 1. That the grant by and between the State of Tennessee, Department of Health, in an amount not to exceed \$318,500.00 to The Metropolitan Government of Nashville and Davidson County, acting by and through the Metropolitan Board of Health, to facilitate the planning, implementation, and evaluation of community-driven and evidence-based Health Promotion programs, a copy of which grant is attached hereto and incorporated herein, is hereby approved.

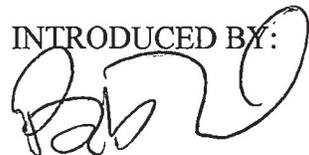
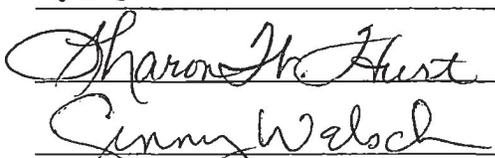
Section 2. That the amount of this grant is to be appropriated to the Metropolitan Department of Health based on the revenues estimated to be received and any match to be applied.

Section 3. That this resolution shall take effect from and after its adoption, the welfare of The Metropolitan Government of Nashville and Davidson County requiring it.

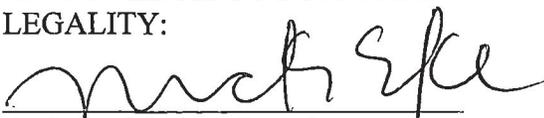
APPROVED AS TO AVAILABILITY OF FUNDS:

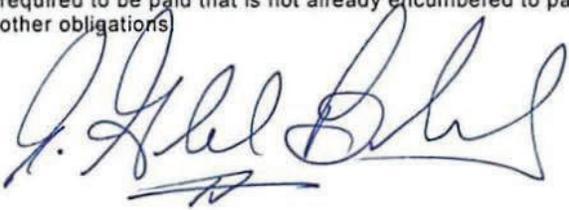

Kevin Crumbo,
Department of Finance

INTRODUCED BY:



Member(s) of Council

APPROVED AS TO FORM AND LEGALITY:


Assistant Metropolitan Attorney

 GOVERNMENTAL GRANT CONTRACT (cost reimbursement grant contract with a federal or Tennessee local governmental entity or their agents and instrumentalities)					
Begin Date July 1, 2020		End Date June 30, 2022		Agency Tracking # 34360-50321	
Edison ID 65715				Edison Vendor ID 4	
Grantee Legal Entity Name Metropolitan Government of Nashville and Davidson County				Edison Vendor ID 4	
Subrecipient or Contractor <input checked="" type="checkbox"/> Subrecipient <input type="checkbox"/> Contractor		CFDA # 93.991			
		Grantee's fiscal year end June 30			
Service Caption (one line only) Health Promotion Services					
Funding —					
FY	State	Federal	Interdepartmental	Other	TOTAL Grant Contract Amount
2021		\$159,300.00			\$159,300.00
2022		\$159,200.00			\$159,200.00
TOTAL:		\$318,500.00			\$318,500.00
Grantee Selection Process Summary					
<input type="checkbox"/> Competitive Selection					
<input checked="" type="checkbox"/> Non-competitive Selection		The Health Promotion Program contracts with the metropolitan health departments to provide Health Promotion services to the residents of the respective county. They are the only county based agency that can implement the program within the respective county.			
Budget Officer Confirmation: 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				<i>CPO USE - GG</i>	
				GG2165715	
Speed Chart (optional) HL00006839		Account Code (optional) 71301000			

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

METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY

Jammi Arvola
Interim Director, Metro Public Health Department

1/9/2020
Date

Alex Johnson
Chair, Board of Health

1/9/2020
Date

APPROVED AS TO AVAILABILITY OF FUNDS:

Ken Combs
Director, Department of Finance

01/09/2020
Date

APPROVED AS TO RISK AND INSURANCE:

TBCW
Director of Risk Management Services

1/14/20
Date

APPROVED AS TO FORM AND LEGALITY:

Metropolitan Attorney
Metropolitan Attorney

1/14/20
Date

FILED:

[Signature]
Metropolitan Clerk RS2020-185

2/5/20
Date

DEPARTMENT OF HEALTH:

Lisa Piercey MD
Lisa Piercey, MD, MBA, FAAP
Commissioner

2/24/2020
Date

ORIGINAL

2020 JAN 28 AM 10:48
FILED METROPOLITAN CLERK

METROPOLITAN COUNTY COUNCIL

Resolution No. RS2020-185

A resolution accepting a grant from the State of Tennessee, Department of Health, to The Metropolitan Government of Nashville and Davidson County, acting by and through the Metropolitan Board of Health, to facilitate the planning, implementation, and evaluation of community-driven and evidence-based Health Promotion programs.

Introduced FEB 04 2020

Amended _____

Adopted FEB 04 2020

Approved FEB 05 2020

By 
Metropolitan Mayor

Metro Council Office

JAN 22 2020
Time: 10:45 By: DB