

*Aging Office of Western Nebraska*

*Area Plan*

*July 1, 2016 through June 30, 2019*

*Annual Budget*

*July 1, 2016 through June 30, 2017*

*Grantor:*

*State Unit on Aging*

*Division of Medicaid & Long-Term Care*

*Department of Health & Human Services*

*P.O. Box 95026*

*Lincoln, NE 68509*

AREA AGENCY ON AGING: Aging Office of Western Nebraska

Application to operate a service project for older Nebraskans under the Older Americans Act, as reauthorized and amended for the period beginning July 1, 2016 and ending June 30, 2017 in planning and service area.

AND

Annual application for support for the period beginning July 1, 2016 and ending June 30, 2017

The applicant agrees to comply with all federal state and local rules, regulations and policies as outlined in the Older Americans Act, as amended; the Nebraska Community Aging Services Act, the Nebraska Care Management Act, the Local Long-Term Care Ombudsman Program; policies and/or regulations established by the HHS-State Unit of Aging and all other applicable rules, regulations, assurances and ordinances. This includes assurances included in this document.

GRANTEE:	CHAIRMAN of the Area Agency on Aging (or comparable official authorized to sign this document):
Name: <u>Aging Office of Western Nebraska</u>	Name: <u>Sherry Blahah</u>
Address: <u>1517 Broadway Suite 122</u>	Address: <u>2015 Country Club Dr</u>
City: <u>Scottsbluff</u> , NE Zip <u>69361</u>	City: <u>Gering</u> , NE Zip <u>69341</u>
Phone: <u>308-635-0851</u>	Phone: <u>308-436-2544</u>
Executive Officer: <u>Cheryl R. Brunz</u>	

APPLICATION FOR FUNDS 7/1/2016 through 6/30/2017

III-B - Supportive Services -(Lines 17a, 17b, 18a & 18b)	<u>\$237,670.00</u>
III-C(1) - Congregate Meals (Lines 17a, 17b, 18a & 18b)	<u>\$413,982.00</u>
III-C(2) - Home-Delivered Meals(Lines 17a, 17b, 18a & 18b)	<u>\$250,086.00</u>
III-D - Disease Prevention & Health Promotion (Lines 17a, 17b, 18a & 18b)	<u>\$17,200.00</u>
III-E - Family Caregivers Support Program (Lines 17a, 17b, 18a & 18b)	<u>\$97,654.00</u>
VII-Ombudsman & Elder Abuse(Lines 17a, 17b, 18a & 18b)	<u>\$0.00</u>
Other Programs (Line 18a)	<u>\$0.00</u>
CASA Only, including Care Management and Senior Companion (Lines 17a, 17b, 18a, 18c)	<u>\$265,157.00</u>
SUBTOTAL	<u>\$1,281,749.00</u>
Area Agency on Aging Composite Match (Lines 14a-15b)	<u>\$210,752.00</u>
Area Agency on Aging Composite Non-Match(Lines 10-12)	<u>\$1,746,564.00</u>
Area Agency on Aging Composite Gross Cost (Line 9)	<u>\$3,239,065.00</u>

Signed:

Cheryl R. Brunz

Director  
Aging Office of Western Nebraska

Sherry Blahah

Sherry Blahah  
Aging Office of Western Nebraska

1. This review was made at the Advisory Committee meeting on March 7, 2016.
2. The Advisory Committee for the Aging Office of Western Nebraska, has reviewed the Area Plan Application for this Area Agency on Aging and has the following attached comments.

Attach other comments on separate pages(s) as needed.

The Advisory Council of the Aging Office of Western Nebraska met on March 7, 2016 reviewed, discussed and unanimously approved the submission of this FY 17 Annual Plan of Operation. Throughout FY 16, the Advisory Council has been providing input in regards to the services provided by the AOWN. The Advisory Council feels that this plan maintains the same level of service delivery for the elderly of the Panhandle of Nebraska as funding will allow. We as members of the Advisory Council continue to be concerned about funding reductions which are based on population from the 2010 census data using the existing Intra-State funding formula. We are hopeful that other funding factors can be implemented in the formula beyond just being based on population including the size PSA-L area. The Advisory Council would further like to commend the staff of the AOWN for their continued commitment in serving the elderly citizens of the Panhandle of Nebraska despite the handicap of funding problems.

3. Specify groups and/or agencies which have been involved in the development of this plan.

Attach additional page(s) as needed.

11 County Governments, City Governments, Senior Center Organizations, Phillips Life Line, Sidney Regional Medical Center, Banner County School, Lewellen Tiger Den, Panhandle Partnership, Inter-agency, Nebraska Department of Insurance, Department of Health and Human Services.

AOWN Advisory Committee recommends that the DHHS State Unit on Aging approve the FY 2017-19 Area Plan.

YES       NO

Signed: Gordon W. Smith - Chair  
[name, title Advisory Chair]

Date: 3-7-16

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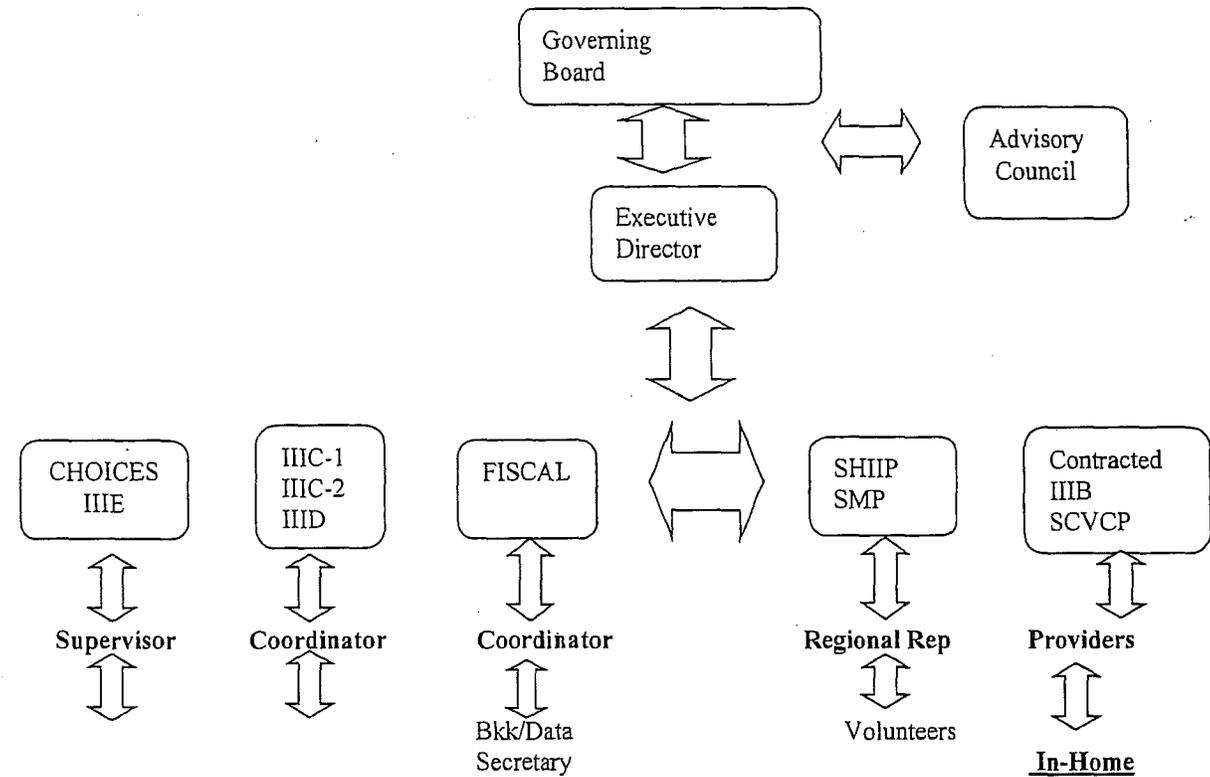
## AOWN Staff Listing with FTE

POSITION	NAME	OFFICE/SITE LOCATION	FTE
<b>ADMINISTRATIVE</b>			
Director	Cheryl Brunz	Scottsbluff	1.00
Fiscal/Coordinator	Nolene Lattin	Scottsbluff	1.00
Bkk/Data Processor	Roseanne Loseke	Scottsbluff	1.00
Secretary	Susan Schawe	Scottsbluff	1.00
<b>CHOICES</b>			
CHOICES Supervisor	Carol Sinner	Scottsbluff	1.00
Service Coordinator	Kathy Wayman	Scottsbluff	0.30
Service Coordinator/ Case Manager	Tena Cline	Scottsbluff	1.00
Service Coordinator	Roylene Jenkins	Scottsbluff	0.50
Service Coordinator/ Case Manager	Susan Block	Lodgepole	1.00
Service Coordinator/ Case Manager	Rebecca Martinez	Alliance	1.00
Service Coordinator/ Case Manager	Alynn Risseeuw	Chadron	1.00
Service Coordinator/ Case Manager	Steve Trickler	Scottsbluff	1.00
Service Coordinator/ Case Manager	Ann Jamison	Chadron	1.00
Service Coordinator/ Case Manager	Michael Hashman	Sidney	1.00
Resource Development/ Case Management Worker	Hesper Gentry	Sidney	1.00
Resource Development/ Case Management Worker	Lori Danner	Hemingford	1.00
Resource Development/Case Management Worker/Senior Companion Project Director	Lisa Blanton	Scottsbluff	1.00
Resource Development/ Case Management Worker/ SHIP Regional Rep	Caryn Long	Scottsbluff	1.00
ADRC Options Counselor		Scottsbluff	1.00
<b>PROGRAMS</b>			
Programs Coordinator	Mary Smith	Scottsbluff	1.00
<b>NUTRITION</b>			
Site Manager	Sharon Woods	Alliance	0.63
Cook	Roxanne Whitlock	Alliance	0.88
Aide	Olivia Ensign	Alliance	0.56
Aide	Jan Standage	Alliance	0.56
Delivery	Angela Woods	Alliance	0.25

POSITION	NAME	OFFICE/SITE LOCATION	FTE
Site Manager	Shirley Logsdon	Bayard	0.50
Cook	Theresa Cary	Bayard	0.50
Aide/Delivery	Marlene Teppert	Bayard	0.25
Site Manager	Sharon Myers	Bridgeport	0.38
Delivery	Catrina Hernandez	Bridgeport	0.13
Cook	Catrina Hernandez	Bridgeport	0.50
Aide	Sharon Myers	Bridgeport	0.13
Site Manager	Sheila Motz	Chadron	0.75
Cook	Carol Malone	Chadron	0.88
Aide	Jody Larsen	Chadron	0.50
Site Manager	Cindy Wilber	Chappell	0.38
Cook	Charlee Frerichs	Chappell	0.63
Aide	Cindy Wilber	Chappell	0.38
Site Manager	Karen Serres	Crawford	0.38
Cook	Darlene Serres	Crawford	0.50
Aide	Lori Harrison	Crawford	0.25
Site Manager	Eva Ramirez	Gering	0.81
Cook	Rodney Bear	Gering	0.81
Aide	Jennifer Hernandez	Gering	0.81
Delivery	Jerry Cline	Gering	0.44
Site Manager	Betty Lorenze	Gordon	0.63
Cook	Janet Sasse	Gordon	0.75
Aide	Shirley Stangle	Gordon	0.38
Delivery		Gordon	0.25
Site Manager	Katie Reece	Harrison	0.50
Aide	Katie Reece	Harrison	0.13
Cook	Stefani Starkey	Harrison	0.50
Delivery	Stefani Starkey	Harrison	0.13
Site Manager	Peggy Tlustos	Hay Springs	0.38
Aide	Peggy Tlustos	Hay Springs	0.25
Delivery	Rosalie Ross	Hay Springs	0.50
Site Manager	Linda Luce	Hemingford	0.38
Cook	Henry Kampbell	Hemingford	0.50
Aide	Henry Kampbell	Hemingford	0.13
Aide	Linda Luce	Hemingford	0.13
Site Manager	Eileen Rowlee	Kimball	0.50
Cook	Teresa Lockwood	Kimball	0.88
Aide	Eileen Rowlee	Kimball	0.31
Delivery	Connie Huerter	Kimball	0.25
Site Manager	Shirley Smith	Mitchell	0.63
Cook	Carrie Mowry	Mitchell	0.63
Aide	Phyllis Duncan	Mitchell	0.25
Delivery	Phyllis Duncan	Mitchell	0.13
Site Manager	Shirley Swenson	Morrill	0.50
Cook	Dorothy Joy	Morrill	0.31
Cook	Janet Kaus	Morrill	0.31
Delivery	Jim Swenson	Morrill	0.13

POSITION	NAME	OFFICE/SITE LOCATION	FTE
Delivery	Nancy Wohl	Morrill	0.13
Aide	Nancy Wohl	Morrill	0.13
Site Manager	Pam Fornander	Oshkosh	0.13
Cook	Pam Fornander	Oshkosh	0.50
Aide	Tammy Harris	Oshkosh	0.50
Delivery	Tammy Harris	Oshkosh	0.13
Site Manager	Dorothy Nyffler	Rushville	0.38
Site Manager	Joyce Sones	Rushville	0.25
Cook	Wanda Owen	Rushville	0.69
Aide	Tresa Grover	Rushville	0.44
Site Manager	Karen Heth	Scottsbluff	0.94
Cook	Connie Smith	Scottsbluff	0.94
Aide	Lenore Hutchinson	Scottsbluff	0.50
Aide		Scottsbluff	0.50
Delivery	Bob Waddell	Scottsbluff	0.38
Delivery	Rich Heidingsfelder	Scottsbluff	0.38
Site Manager	Judith Schawfer	Sidney	0.69
Cook	Lana Speers	Sidney	0.81
Aide	Iva Wilson	Sidney	0.69

# FY '17 AOWN ORGANIZATIONAL CHART



Serv. Coord.  
 Serv. Coord.  
 Serv. Coord.  
 Serv. Coord.  
 Serv. Coord.  
 Serv. Coord.  
 PTServ. Coord.  
 RDServ.Coord.  
 RDServ.Coord.  
 RD Serv Coord.  
 RD

**SITES**  
 Alliance: SM, C, A, A, D  
 Bayard: SM, C, A  
 Bridgeport: SMC, A, D  
 Chadron: SM, C, A  
 Chappell: SM, C, A  
 Crawford: SM, C, A  
 Gering: SM, C, A, D  
 Gordon: SM, C, A, D  
 Harrison: SM, C  
 Hay Springs: SM, D  
 Hemingford: SM, C, A  
 Kimball: SM, C, D  
 Mitchell: SM, C, A  
 Morrill: SM, C, C, D  
 Oshkosh: SM, C, A, D  
 Rushville: SM, C, C  
 Scottsbluff: SM, C, C, A, A, D, D  
 Sidney: SM, C, A

**In-Home**  
 City of Alliance  
 City of Kimball  
 Scotts Bluff Co.  
 Morrill Co.

**SCVSCP**  
 Chappell Senior Center  
 Kimball Senior Center  
 Oshkosh Senior Center  
 Dalton Senior Center  
 Crawford Senior Center  
 Hay Springs Senior Center  
 Tiger Den of Lewellen

**Legal**  
 Nebraska Legal Aid

**Contracted IIE**  
 Sidney Regional Medical Center  
 Philips Lifeline  
**Contracted IIC-1, IIC-2**  
 Banner County School  
 Tiger Den of Lewellen  
 City of Crawford Handybus HD  
 Senior Services Inc. Handybus HD  
 Deuel Co. Handybus HD

## GOVERNING BOARD

### BANNER COUNTY

Robert Post  
4073 HWY 71  
Gering NE 69341  
308-436-3797

### BOX BUTTE COUNTY

Doug Hashman  
1550 CR 63  
Alliance NE 69301  
**308-762-6905**  
[dhashman@bbc.net](mailto:dhashman@bbc.net)

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Phil Sanders  
P O Box 159  
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### DAWES COUNTY

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12427 Highways 2/71  
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**308-665-1305**  
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### DEUEL COUNTY

William "Bill" Klingman  
16124 Rd 14  
Chappell NE 69129  
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**308-623-1781**

## Aging Office of Western Nebraska

### Conflict of Interest Policy

#### Purpose:

The purpose of this policy is to protect the Aging Office of Western Nebraska's interest when contemplating entering into a transaction or arrangement that might benefit the private interest of an employee, officer or Governing Board member of the Agency or might result in a possible excess benefit transaction. This policy is intended to supplement but not replace any applicable state and federal laws governing conflict of interest applicable to political subdivisions, governments, nonprofit and charitable organizations.

#### Definitions:

1. Interested Person: any employee, officer, Governing Board member or member of a committee with Governing Board delegated powers who has a direct or indirect financial interest as defined below.
2. Financial Interest: A person has a financial interest if the person has, directly or indirectly, through business, investment or family:
  - a. An ownership or investment interest in any entity with which the Aging Office of Western Nebraska has a transaction or arrangement.
  - b. A compensation arrangement with the Aging Office of Western Nebraska or with any entity or individual with which the Aging Office of Western Nebraska has a transaction or arrangement, or
  - c. A potential ownership or investment interest in or compensation arrangement with, any entity or individual with which the Aging Office of Western Nebraska is negotiating a transaction or arrangement.

Compensation includes direct or indirect remuneration as well as gift or favors that are not insubstantial.

#### Duty to disclose:

In connection with any actual or possible conflict of interest, an interested person must disclose the existence of the financial interest and be given the opportunity to disclose all material facts to the Executive Director in the case of employees and the Governing Board in the case of a fellow board member or Executive Director considering the proposed transaction or arrangement.

#### Violations of the Conflict of Interest Policy

- a. If the Governing Board (in the case of a fellow board member or the Executive Director) or the Executive Director (in the case of an employee) has reasonable cause to believe a member or employee has failed to disclose actual or possible conflicts of interest, it shall inform the member of the basis for such belief and afford the member or employee an opportunity to explain the alleged failure to disclose.

- b. If, after hearing the member's or employee's response and after making further investigation as warranted by the circumstances, the Governing Board (in the case of a fellow board member or the Executive Director) or Executive Director (in the case of an employee) determines the member or employee has failed to disclose an actual or possible conflict of interest, appropriate disciplinary and corrective action shall be taken.

Compensation & Conflict

- a. A voting member of the Governing Board who receives compensation, directly or indirectly, from the Agency for services is precluded from voting on matters pertaining to that member's compensation.
- b. A voting member of any committee whose jurisdiction includes compensation matters and who receives compensation, directly or indirectly, from the Agency for services is precluded from voting on matters pertaining to that member's compensation.
- c. No voting member of the Governing Board or any committee whose jurisdiction includes compensation matters and who receives compensation, directly or indirectly, from the Agency, either individually or collectively, is prohibited from providing information to any committee regarding compensation.

Periodic Reviews

To ensure the Agency operates in a manner consistent with the statutes under which it was created, does not engage in activities that could jeopardize its status, periodic reviews may be conducted. The periodic reviews should, at a minimum, include the following subjects:

- a. Whether compensation arrangements and benefits are reasonable, including the monthly review of the bills by the Executive Director.
- b. Whether partnerships, joint ventures and arrangements with management organizations conform to the Agency's written policies, are properly recorded, reflect reasonable investment or payments for goods and services, further charitable purposes and do not result in inurement, impermissible private benefit or in an excess benefit transaction.

Use of Outside Experts

When conducting the periodic reviews, the Agency may, but need not, use outside advisors. If outside experts are used, their use shall not relieve the Governing Board of its responsibility for ensuring periodic reviews are conducted.

Reviewed and Approved:

\_\_\_\_\_

Date

3/12/15

  
Governing Board Chairman

Aging Office of Western Nebraska

Conflict of Interest Annual Statement

The standard of behavior at the Aging Office of Western Nebraska is that all employees, officers and Governing Board members scrupulously avoid any conflict of interest between the interest of the Aging Office of Western Nebraska on one hand, and personal, professional and business interest on the other. This includes avoiding actual conflicts of interest as well as perceptions of conflicts of interest.

I understand that the purposes of this policy are as adopted by the Governing Board and incorporated herein. These Policies are designed to protect the integrity of the Aging Office of Western Nebraska's decision making process, to enable our constituencies to have confidence in our integrity and to protect the integrity and reputation of employees, officers and Governing Board members.

In the course of meetings or employment activities, I will disclose any interests in a transaction or decision where I (including my business or other nonprofit affiliation), my family and/or significant other, employer or close associates will receive a benefit or gain. After disclosure, I understand that I will be asked to leave the room for discussion and will not be permitted to vote on the question.

I understand that this policy is meant to be a supplement to good judgment, and I will respect its spirit as well as its wording.

---

Employee, Officer or Governing Board member

---

Date

## **ADVISORY COUNCIL**

### **BANNER COUNTY**

Sharon Sandberg  
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H 308-436-4725  
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**308-487-3527**

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garyoltmann@charter.net

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### **SCOTTS BLUFF COUNTY**

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**308-635-3329**

### **DAWES COUNTY**

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Crawford NE 69339  
**308-665-2245**

### **SHERIDAN COUNTY**

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Hay Springs NE 69347  
**308-638-7322**

### **DEUEL COUNTY**

Fauneil Johnson  
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Chappell NE 69129  
**308-874-2965**

### **SIOUX COUNTY**

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Harrison NE 69346  
**308-668-2542**

### **GARDEN COUNTY**

Lucille Cooper  
7059 Rd 151  
Lisco NE 69148  
**308-772-3947**

Section A.3. Administrative

Only submit these documents if they have changed since the Area Plan FY16, or 5-Year Plan submissions:

- a. Governing Board and Advisory Board by-laws
- b. Conflict of Interest Statement / Declaration for Board Members
- c. Advisory members, Staff, and volunteers
- d. A sample Senior Center disaster plan
- e. Disaster Plan for the Area Agency on Aging
- f. Sample contract/s used with services not directly provided by employees and volunteers of the agency.

Section A. 3.	Document Title	Most Recent Submission	No Change / Included
A.3.a.1.	Governing Board by-laws	FY' 16 budget	
A.3.a.2.	Advisory Board by-laws	FY '16 Budget	
A.3.b.1.	Conflict of Interest Statement	FY '17 Budget (Included)	
A.3.b.2.	Declaration for Board Members	FY' 16 BUdget	
A.3.c.1.	Advisory members list	FY' 17 Budget (included)	
A.3.c.2.	Staff list	FY' 17 Budget (included)	
A.3.c.3.	Volunteers list		
A.3.d.	Sample Senior Center disaster plan	FY' 16 Budget	
A.3.e.	Disaster Plan for the Area Agency on Aging	FY' 16 Budget	
A.3.f.	Sample contract	FY' 16 Budget	

## AGING OFFICE OF WESTERN NEBRASKA

The Aging Office of Western Nebraska (AOWN) maintains the ongoing mission of developing, coordinating and administering a plan for the delivery of a comprehensive and coordinated system of services for older persons in the Panhandle of Nebraska.

Re-established in 1981, the AOWN is located geographically and is responsible for aging services in the Planning and Service Area L of the State of Nebraska. PSA-L is composed of the eleven (11) counties consisting of Banner, Box Butte, Cheyenne, Dawes, Deuel, Garden, Kimball, Morrill, Scotts Bluff, Sheridan, and Sioux. All eleven counties of PSA-L are signatory to the AOWN via an Inter-Local Agreement. The Governance of the agency is composed of an elected county commissioner from each signatory county. The advisory Council to the AOWN is an elder representative from each signatory county appointed by their respective county.

The Aging Office of Western Nebraska maintains the ongoing mission of developing, coordinating and administering a plan for the delivery of a comprehensive and coordinated system of services for older persons in the Panhandle of Nebraska.

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		PSA-L	county	% 60+ of	%60+ of	county	% 75+ of	county	county	county
		TOTAL	60+	county	panhand.	75+	county	60+	% 60+	% 65+
		POP.	pop.	total pop.	60+ pop.	tot.pop.	60+ pop.	minority	minority	poverty
BANNER		690	189	0.27	0.01	62	0.33	2	0.01	0.11
BOX BUTTE		11,308	2,427	0.21	0.12	931	0.38	125	0.05	0.11
CHEYENNE		9,998	2,158	0.22	0.10	873	0.40	63	0.03	0.07
DAWES		9,182	1,968	0.21	0.10	755	0.38	61	0.03	0.10
DEUEL		1,941	589	0.30	0.03	231	0.39	15	0.03	0.06
GARDEN		2,057	686	0.33	0.03	281	0.41	10	0.01	0.09
KIMBALL		3,821	1,095	0.29	0.05	419	0.38	27	0.02	0.06
MORRILL		5,042	1,281	0.25	0.06	493	0.38	89	0.07	0.10
SCOTTS BLUFF		36,970	8,338	0.23	0.40	3,251	0.39	894	0.11	0.09
SHERIDAN		5,469	1,588	0.29	0.08	679	0.43	61	0.04	0.08
SIOUX		1,311	364	0.28	0.02	136	0.37	12	0.03	0.08
TOTAL		87,789	20,683	0.24		8,111	0.39	1359	0.07	
NEBRASKA		1,711,263								

## SERVICES

Currently Title III and other funded services that are available either directly or by contract by the AOWN are inclusive of: Congregate nutrition, Home Delivered nutrition, Nutrition Education, In-Home Handyman/Chore, In-Home Handyman/Homemaker, Outreach, Legal Assistance, Durable Medical Equipment, Information & Assistance, Supportive Services, Self-Directed Care, Telephone Re-assurance, Health Promotion/Disease Prevention, Health Clinic, Access Assistance, Counseling, Respite, Volunteer Ombudsman, Senior Center Senior Companion Programs, Care Management, Senior Medicare Patrol, Senior Care Options, Senior Health Insurance Information Program, Medicaid Waiver. Much of the service provision by the AOWN is direct service provision due to the fact of the sparsity of available contractors in rural Nebraska.

- Congregate Nutrition is available throughout PSA-L at twenty (20) locations. Eighteen of the service locations are a direct service provision of the AOWN. One location is contractual with a public school, and one with a senior center. A contractual agreement is maintained with the Office of Human Development for congregate meal provision to the developmentally disabled elderly. All congregate nutrition services are available five (5) days per week, Monday – Friday for the noon meal and meets 1/3 RDA.
- Home Delivered Nutrition is available throughout PSA-L from nineteen (19) service locations. Additional small communities of Lyman, Melbeta, and Minatare, also receive home delivered meals from these locations. Communities which have a Meals On Wheels program and are able to maintain with demand are not duplicated by the AOWN's Home Delivered Meals program. Home Delivered Nutrition service is a direct service provision of the AOWN. All Home Delivered Nutrition is available five (5) days per week, Monday – Friday and meets 1/3 RDA.
- Nutrition Education is provided at each the AOWN's nutrition service locations throughout PSA-L. Educational presentations on various Nutrition issues are conducted twice during a fiscal year. All handout materials from the presentations are disseminated to home bound elderly through the Home Delivered Meals program. Nutrition Education is also a vital educational program presented at the annual Spring Wellness Festival.
- In-Home Handyman/Chore and Homemaker services are available in four (4) counties/city of PSA-L, Box Butte County, City of Kimball, Morrill County, and Scotts Bluff County. This service is provided by reimbursement contracts with units of local government, who in turn employ independent providers for the actual service delivery. The primary focus of the service is snow removal, yard work, and housekeeper assistance.
- Self Directed Care is available in the counties which do not have a structured Handyman/Chore program. Eligible clients are issued Vouchers to secure needed in-home services. The AOWN provides payment to the providers once satisfactory approval is granted by the client.
- Legal Assistance is provided by Nebraska Legal Aid through a contract maintained by the Nebraska Association of Area Agencies on Aging and Nebraska Legal Aid. Contractually Nebraska Legal Aid responds to a Legal Hotline for the elderly which results in Case Work hours provided to the elderly.
- Durable Medical Equipment is loaned out directly to the elderly by the AOWN. These are items which are not covered by Medicare/Medicaid. The elderly have access to the equipment for as long as necessary.
- Information & Assistance is a direct service provision of the AOWN. For individuals who do not need full Case Management assistance, information is provided on resources which are available and then follow up is provided to assure access. This service is provided by all AOWN service locations along with the Central Office staff.

- General Information, although not recognized by Taxonomy, is a service provision which a live person answering all phone calls providing the needed unbiased information that is requested and provides general information on resources and the Aging Network. It is provided by community presentations, workshops, health fairs, brochures, etc. It is not necessary to provide follow up for this information.
- Telephone Re-assurance is directly provided by the AOWN. It provides for a daily phone call to isolated and home bound elderly to assure that they are safe. It also serves as a daily reminder to take medications or other activities.
- Outreach is a direct service provision of the AOWN provided by all staff and service providers. This is intervening with individuals by the AOWN for the purpose of identifying potential clients and their caregivers and encouraging their use of existing services.
- Health Promotion is provided directly throughout PSA-L. The workshop presentations are conducted by trained volunteers. The workshop that we hold will be approved thru the SUA for the most up to date workshops.
- Health Clinic is monthly blood pressure screenings provided by trained professional personnel at the AOWN's service locations. If further counseling is needed, the participant is directed to follow up with their physicians.
- Individual Counseling is provided by the AOWN in the provision of a monthly support group for caregivers. Different topics affecting caregivers are discussed each month but most important is the time for interaction between caregivers to share concerns.
- Respite service is a financial assistance program which allows for emergency response systems to be placed into the homes of elderly which can not afford to have one. The AOWN contracts with the emergency response providers, Philips Lifeline and Sidney Regional Medical Center, to install and maintain the response systems for elderly who are receiving Case Management assistance from the AOWN. The AOWN pays the monthly rental fee and requests a contribution from the client based on an established sliding fee scale. All other financial means of payment are investigated prior to the AOWN providing payment. This program allows for the caregivers to be away from their charges for a short period of time, knowing that the system will respond if something happens.
- Access Assistance is provided directly by the AOWN in assisting caregivers to identify and access appropriate resources available to them in caring for their loved ones.
- Volunteer Ombudsman is a contractual agreement between the AOWN and the State Unit on Aging which trains volunteer advocates who serve as volunteer ombudsmen in long term care facilities. This program provides for the assurance of resident rights for those residing in the facilities.

Not funded under the Older Americans Act, the AOWN provides other services for the elderly of PSA-L.

- Senior Center Volunteer Senior Companion Program is provided by contracts between the AOWN and seven Senior Centers in the Panhandle, Chappell, Crawford Dalton, Kimball, Lewellen, Mitchell and Oshkosh. The program allows the senior centers to utilize volunteers from their organization to be matched and assist home bound frail elderly with activities such as companionship, advocacy, shopping, escort, or other services which the person may be in need of.
- SHIP, Senior Health Insurance Information Program is a contractual agreement between the AOWN and the Nebraska Department of Insurance for the provision of counseling

and information for seniors needing assistance with Medicare and Medicaid insurance issues. The AOWN currently has thirty (30) trained volunteers providing this service.

- Care Management is a direct service provision of the AOWN. This program allows for individual interaction with elderly in arranging community-based service alternatives to institutional care. The program consists of intake and screening, assessment, care planning, care plan implementation, and ongoing follow up. Client choice is always maintained.
- Senior Care Options is the screening of Medicaid individuals who are requesting nursing home placement and Medicaid to pay for their care. The screening determines that their level of care meets nursing home level of care and that placement is appropriate. The client is also given, if appropriate and safe, information on community-based service options which could be implemented to provide care in a less restrictive alternative.
- Aged Medicaid Waiver Case Management is a direct service provision of the AOWN which manages community-based service resources put into place to support Medicaid eligible, nursing home level of care, elderly who have chosen not to enter a 24 hour care long term care facility.
- Senior Medicare Patrol program offers screening health care bills or Medicare Summary Notices for possible errors, or overt fraud and abuse of Medicare and Medicaid programs. Information about how to protect yourself, report and respond to health care scams and assistance with contacting your doctor or other health care provider to discuss billing problems. SMP empowers seniors to prevent Healthcare Fraud.

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## SECTION B:

### PLANNING PROCESS

- The Aging Office of Western Nebraska employs a planning process which is a result of ongoing daily input received from service participants, monthly Advisory Council and Governing Board meetings, analysis of surveys, inter-agency coordination and planning, and the continual monitoring of existing service delivery. Local governance and direct service administration affords the agency the ability to identify and address local service needs and service deficits throughout the PSA-L as funding will allow. Formal plan development by the AOWN is initiated by the conduction of a public hearing compliant with the Older American Act, (306) (b) & (307) (a) (8) (a). The public hearing solicits public comment/proposals from interested entities for the provision of providing delivery of the Title III services which are directly administered by the AOWN. Following input, the AOWN develops a coordinated and comprehensive plan of operation for PSA-L as funding permits with continual direction from the Advisory Council and Governing Board of the agency. Final review and adoption of the plan of operation is conducted by the Advisory Council and Governing Board prior to submission to the Nebraska State Unit on Aging. Both the Advisory Council and Governing Board review and approve any amendments to the plan which modifies funding or service provision.
- The rural nature of the Panhandle of Nebraska with its limited populations in communities, makes targeting services to specific population groups such as low income individuals with economic or social needs unrealistic. Service availability is well publicized and known in the communities. Written material on services and any service specific activity is translated into Spanish to address the predominant minority population in PSA-L. The AOWN CHOICES program is specifically targeted at older individuals with self-care limitations and toward individuals who are at risk of institutional placement. This particular program is available throughout PSA-L and its service provision also translated into Spanish. The AOWN maintains a web site, [www.aown.org](http://www.aown.org), which fully describes the services of the AOWN throughout the Panhandle of Nebraska.
- The AOWN continues to collaborate with the Alzheimer's Association through FAD (Friends of Alzheimers Dementia). Currently the AOWN is working collectively toward the establishment of a local Alzheimer's Chapter in coordination with several area organizations and service providers. This arrangement will hopefully lead to more local facilitation and coordination of services for victims with Alzheimer's and related disorders. They are currently sponsoring a caregiver support group for primary care givers that currently care for a spouse that has been diagnosed with Alzheimers. They also provide local Respite dollars. We are also in negotiations with FAD to help our dementia/Alzheimers caregivers through our Respite program.
- Priorities for service determination are in response to local identification. Elder service participants, service providers, senior organizations, advisory councils, and governing boards all provide input and direction in establishing priorities. Certain funding sources are directive in their utilization which in some cases does not allow much flexibility in meeting local determined priorities. As a primary direct service organization, the AOWN's Advisory & Governing Board will determine any priority shifts in resource allocation be it increases or decreases. Current service utilization is reviewed and

monitored monthly by the Governance of the agency which is reflective in the planning process.

- The Aging Office of Western Nebraska does extensive collaboration with other organizations which have a direct influence on the older population of PSA-L. AOWN staff serves or represents the agency on numerous boards and committees. Panhandle Partnership for Health and Human Services, Lifespan Respite, Wellness Festival, Senior Companion, Foster Grandparents, Widowed Persons, and SW-WRAP (Southwest Wyoming Recovery Access Programs). The majority of these organizations are regional in their coverage, which is inclusive of all of PSA-L. The Panhandle Partnership is made up of over fifty different entities within the Panhandle of Nebraska, including the Aging Office of Western Nebraska. This allows for extensive collaboration with other service agencies even if there is not a direct collation with aging, but does address the entire lifespan.
- The Aging Office of Western Nebraska currently provides health promotion/disease prevention services in the form of educational presentations, blood pressure screenings ,Stepping On and Powerful Tools for Caregivers. These services are structured to enhance the knowledge of the elderly participants of their medical circumstances and healthier living practices.
- The Aging Office of Western Nebraska, through a contractual agreement with the Nebraska Department of Insurance, serves as a Regional Program for the SHIIP(Senior Health Insurance Information Program). It is with this small amount of appropriation that the AOWN is able to provide coordination and counseling for the Medicare Modernization Act. Currently forty one (41) trained volunteers are available throughout the PSA-L providing assistance to the elderly in making enrollment decisions. Recruitment and training of volunteers is an ongoing process. Cooperative relationships are maintained with the Social Security Administration, the Nebraska Health and Human Services, area pharmacists, and other human service entities in addressing Medicare issues.
- In anticipation of the demographic changes in the elder population in the Panhandle of Nebraska, the Aging Office of Western Nebraska will continue to advocate for funding increases, County, State and Federal, to address the needs of the increasing elder citizens of PSA-L. Pending is the Baby Boomer generation, which will necessitate changing the current structure of service delivery to not only address the changing needs but to be prepared for the influx in numbers of seniors. Communities will need to be prepared and educated to the increased elder citizenship and the demands placed on the infrastructure of communities. Home and community based services will be in high demand not only as the preference of the elder population but as a necessity in controlling taxes and Medicaid expense. But the reality is, that without an adequate funding investment by the State and Federal Government, services will be limited or curtailed to meet the future needs of the older population. Locally the AOWN will work with independently, privately owned business to partner with for grants and donations.
- Transportation service is and has been identified as a service priority for the seniors within PSA-L. Currently the public transportation availability is limited and is not providing access to demand. Evening and weekend service of the handybus program is a major deficit in meeting the needs of the elders. Transportation assistance between communities in rural Nebraska is an issue in meeting the medical needs of seniors needing to attend a regional hospital or see limited medical providers. Again, the transportation assistance is limited on the availability of adequate funding to meet demand. The AOWN does provide coordination of transportation assistance as a by product of other service provisions. The provision of the AOWN's nutrition programs

provides access to the senior/nutrition locations, the AOWN contracts with handybus providers for the delivery of meals to home bound elderly, and the AOWN's CHOICES program assists case management clientele in securing appropriate transportation assistance in addressing the needs of this specific population.

- The Aging Office of Western Nebraska will continue to be directly participatory in the training and development of Veterans directed care services as programs evolve in the State of Nebraska. SW-WRAP & AOWN have partnered to offer outreach, advocacy and case management services to veterans and their families. The AOWN in collaborative groups works closely with the VA (Veterans Administration)- SW-WRAP and Veterans Advocacy group (Vet Set), SWAP (Service Women Access Program), and local Panhandle Veterans Service officers (VSO's). The Veterans Stand Down is another collaborative event where the different agencies of the Panhandle get together and help Veterans of all ages.
- Implemented for FY' 12, Self Directed Care provides for the utilization of Vouchers by clients to secure needed in-home assistance by approved providers of the client's choice. The AOWN serves as a broker agent between the client and the provider in the issuance of the voucher to the client to purchase the service and then reimburses the provider upon satisfactory approval by the client of the work completed. The client has complete control of the selection of provider, supervision of the work being done, and approval for payment.
- The Aging Office of Western Nebraska currently serves around 100 Native Americans thru out our PSA-L. The Native American population that we serve are offered and receive services and referrals from our office.
- Through the CHOICES program, the AOWN remains participatory in the Money Follows the Person. Being responsive to LTC (Long Term Care) resident desires, the AOWN assesses the applicability of a residents return to less restrictive living arrangements with the assistance of Home and Community Based services. Options are explored and discussed with the resident and family to identify the most appropriate plan of care.
- A partnership with the Public Health department has developed a Special Needs Registry. The Panhandle Special Needs Registry enrollment agreement we enter the clients demographic information into Panhandle Public Health system so that in the event of a local or Panhandle wide natural disaster everyone will be contacted or accounted for.
- The Aging Office of Western Nebraska is a member of the Panhandle Partnership for Health and Human Services with more than 40 organizations involved. The mission is to build collaboration among agencies, networks and the broader community to find innovative solutions to improve the quality of life of people and communities in the Panhandle. Regional collaborations add resources, improve quality and return on investment, enhance the rural workforce and sustain change, provide prevention services, and provide leadership in innovative change as a benefit to the partnership.
- Spring Wellness Festival has been held annually for 19 years designed to help seniors 60 and over meet the challenges of growing older. Wellness includes not only physical health, but also intellectual, emotional and social well-being. The benefits of wellness are important at any age, but become more dramatic as we age. This program was developed with the hope that the individuals will acquire information to add life to their years rather than just years to their life.
- Collaborative effort with Panhandle Independent Living Services to provide durable medical equipment to the community, information about services available, health fair, and general resources for the aged and disabled.

- The Aging Office of Western Nebraska and League of Human Dignity work closely together to transfer clients from one agency to another as they transfer from adult to aged adults.
- Together with several of the colleges in our PSA-L we provide practicum experiences for students for human service, social work. We also talk with nursing and CNA(Certified Nursing Assistant) classes regarding provider opportunities and knowledge about the geriatric population with the AOWN services that are offered.

**GOAL # 1 for July 1, 2015-June 30, 2020**

**Advocate to ensure the interests of people with disabilities, older adults, and their families are reflected in the design and implementation of public policies and programs.**

**OBJECTIVE:**

**To advocate the interests of the people of the PSA-L with the different services available to people with Alzheimer's, dementia, and related disorders, disabilities, families and older adults.**

**STRATEGIES:**

- 1) **CHOICES:** Aged Medicaid Waiver Case Management, Senior Care Options, Case Management. To advocate to the public what assistance is available through programs thru the PSA-L.
- 2) **ADRC:** To enhance the existing infrastructure by creating single points of entry at the local level, to increase consumer access to information and services for long-term care and supports in a comprehensive, flexible and cost effective manner. The AOWN is part of the pilot project with South Central Nebraska Area Agency on Aging.
- 3) **Legal:** Provide legal assistance through Legal Aid of Nebraska attorneys and through the Legal Aid Hotline.
- 4) **Information and Assistance:** To provide information and follow up to assist older individuals, families gain access to needed services within their community.
- 5) **Access Assistance:** To help caregivers with information on resources and services within their communities to assist in caring for their charges.
- 6) **Family Caregiver Counseling:** Support groups to allow for peer interaction, helping in making decisions and solving problems.
- 7) **Outreach:** Identify potential new clients and encourage their use of existing services and benefits.
- 8) **SHIP:** Provide counseling on Medicare Part D insurance options and inform the population on Medicare/Medicaid.
- 9) **Panhandle Partnership:** Continued partnering with other agencies thru PSA-L to offer programs, services and information.
- 10) **Application Assistance:** Assist people with navigating AccessNebraska, helping with low income subsidy for Part D and any other low income applications.
- 11) **Respite:** Assist families with temporary, substitute, support for a brief period of relief or rest for caregivers.

**PERFORMANCE MEASURES WILL BE TRACKED BY NAMIS OR ITS REPLACEMENT: (SEE COMPOSITE FOR BASELINE NUMBERS)**

- 1) Number of active caseloads for the CHOICES program. This program will increase by an estimated 2% in the next 3 years.
- 2) Number of referrals made to non-aged service provider agencies. There will be an increase of referrals made due to the ADRC estimated 5% in the next 3 years.
- 3) The number of Option Counseling sessions to aged individuals. This program will maintain numbers
- 4) Number of phone calls made to Legal Aid hotline. This program will maintain its numbers.

- 5) The number of units of service for I&A, Access Assistance, Caregiver Counseling, and Outreach. This program will increase its number by approximately 2% in the next 3 years.
- 6) Number of persons seeking information through web page and Facebook account. These numbers will increase as the younger generation wants to use social media for contacts with an estimated 3% in the next 3 years.
- 7) The amount of contacts for Medicare/Medicaid insurance counseling. This number will maintain for the next 3 years.
- 8) The number of public speaking engagements that the AOWN staff perform. This number will increase by 1% in the next 3 years.
- 9) Number of applications completed or helped with for DHHS. This number will maintain its numbers.

**GOAL # 2 for July 1, 2015- June 30, 2020**

**Protect and enhance the rights; and prevent the abuse, neglect, and exploitation of older adults and people with disabilities.**

**OBJECTIVE:**

**Protect the older adults, people with disabilities and patients with Alzheimer's, dementia and related disorders from abuse neglect and exploitation**

**STRATEGIES:**

1. **Care Management:** Provide Care Management assistance in implementing appropriate home and community based services. This program will help prevent the abuse, neglect and exploitation of the older adults by having a Care manager working closely with the person.
2. **Ombudsman:** Help the State Unit on Aging facilitate trained volunteer Ombudsmen to service as advocates in long-term care facilities to help resolve the number of complaints and decrease complaint referrals.
3. **Legal Assistance:** Maintain the contractual agreement with Nebraska Legal Aid which allows for immediate access by the elderly to legal counsel and advise via the Elder Access Phone Line.
4. **Senior Medicare Patrol:** Provide education on the identification and prevention of Medicare/Medicaid abuse and neglect with the SHIP/SMP programs.
5. **Medicaid Waiver:** Coordinating individual care for nursing home level of care, individuals to support in-home independence. With a Case manager authorizing in home services to help protect the person, with chore, housekeeping, life line, etc these services will help protect from exploitation.
6. **Protective Services:** Provide protective services information concerning individuals other different age groups.
7. **APS-Working with APS** in the resolution of situations which infringe on the elders rights.

**PERFORMANCE MEASURES WILL BE TRACKED BY NAMIS OR ITS REPLACEMENT: (SEE COMPOSITE FOR BASELINE NUMBERS)**

1. Number of active caseloads with Care management and the Medicaid Waiver programs. These programs will increase by an estimated 2%in the next 3 years
2. Number of resident contacts by volunteer advocates in long-term care facilities. This program will maintain numbers.
3. Number of case work hours of legal assistance. This program will maintain its numbers.
4. The number of various types of cases being referred to for legal assistance. This program will maintain its numbers.
5. Number of contacts that the volunteers giving education on abuse, neglect and exploitation are giving. This will maintain its numbers.
6. Number of Medicaid Waiver caseloads with the Waiver program. This program will increase by an estimated 2% in the next 3 years.
7. The number of APS & CPS referrals will increase by an estimated 1% in the next 3 years.

**GOAL # 3 for July 1, 2015-June 30, 2020**

**Work with older adults and people with disabilities as they fully engage and participate in their communities, make informed decisions, and exercise self-determination and control about their independence, well-being, and health.**

**OBJECTIVE:**

**Promote and facilitate evidenced based programs and provide outreach and counseling to disabled individuals and older adults, patients with Alzheimer's, dementia, and related disorders. To offer all individuals of the Aging Office of Western Nebraska's PSA-L a network of available services.**

**STRATEGIES:**

1. **Nutrition Education:** Educational sessions at each nutrition location, presentations at the Springs Wellness Festival, and nutrition education prior to the Farmers Market coupon distribution.
2. **Information and Assistance:** To provide information and follow up to assist disabled and older individuals and families to identify and gain access to needed services.
3. **Health Clinic:** Conduct blood pressure screenings at each of the Nutrition/Senior Center locations.
4. **Health Promotion/Disease Prevention:** Demonstrated through evaluation in Evidence based workshops that are offered to the public by the AOWN.
5. **SHIP:** Provide counseling on Medicare insurance options and benefits of the Medicare/Medicaid. To help with the low income subsidy applications for Part D
6. **ADRC:** To enhance the existing infrastructure by creating single points of entry at the local level, to increase consumer access to information and services for long-term care and supports in a comprehensive, flexible and cost effective manner.
7. **Application Assistance:** Assist people with navigating AccessNebraska, helping with low income subsidy for Part D and any other low income applications.
8. **Respite:** Assist families with temporary, substitute, support for a brief period of relief or rest for caregivers.

**PERFORMANCE MEASURES WILL BE TRACKED BY NAMIS OR ITS' REPLACEMENT: (SEE COMPOSITE FOR BASELINE NUMBERS)**

1. The number of Participants receiving education will maintain its numbers.
2. Number of screenings done will remain the same or maintained.
3. The number of Evidence-based health education programs will increase by 2% over the next 3 years.
4. The number of contacts for Medicare/Medicaid insurance counseling. This number will maintain for the next 3 years.
5. The number of applications completed and or helped with for DHHS will maintain its numbers.

**GOAL # 4 for July 1, 2015- June 30, 2020**

**Enable people with disabilities and older adults to live in the community through the availability of and access to, high-quality long-term services and supports, including supports for families and caregivers.**

**OBJECTIVE:**

**To offer people of the Panhandle of Nebraska the different services that are available for the disabled individuals and older adults. Also advise families and caregivers where to go to get help with accessing home and community based services and support.**

**STRATEGIES:**

1. **CHOICES:** Medicaid Waiver Case Management, Senior Care Options, Case Management. The AOWN will provide the continuity of care as people transition through the long term services. To aid the at risk individuals in identifying sources of assistance. Continued cooperation with the Assisted Living facilities.
2. **Homemaker/Chore/Self Directed Care/Durable Medical Equipment :** To offer homemaker and chore services with the help of Handyman and the Self Directed Care program to enable clients the availability of and access to services and support and durable medical equipment if needed.
3. **Senior center volunteer senior companion program:** Educating the volunteers of the SCVSCP as to where to go to get help and advice for community based services and support for the aged and disabled population. The SCVSCP volunteers will help aged and disabled individuals by volunteering services to help the person by advocating for them, shopping, transportation etc.
4. **Outreach:** Continue to identify potential new clients and encourage them to use our existing services and programs.
5. **Information and Assistance:** To provide information and follow up to assist individuals, and families gain access to needed services and resources within their communities.
6. **Family Caregiver Counseling:** Helping in making decisions and solving problems that may arise with caregivers thru support groups.
7. **Access Assistance:** To help caregivers with information on resources and services within their communities to assist in caring for the charges.
8. **Supportive services:** Maintain a directory of available private and public resources that can be used for disabled or aged population.
9. **SHIP:** Provide counseling on Medicare insurance options and benefits of Medicare and Medicare Part D.
10. **Legal:** Provide legal assistance through Legal Aid of Nebraska and the Legal Aid telephone resource.
11. **ADRC:** To enhance the existing infrastructure by creating single points of entry at the local level, to increase consumer access to information and services for long-term care and supports in a comprehensive, flexible and cost effective manner.
12. **Options Counseling:** A service that assists eligible individuals in need of long-term care and their families to make informed choices.
13. **Application Assistance:** Assist people with navigating AccessNebraska, helping with low income subsidy for Part D and any other low income applications.
14. **Congregate Meals:** Meals provided to a qualified individual in a group setting, where social interaction is a benefit from the program.
15. **Home Delivered Meals:** A meal provided to a qualified individual in their place of residence, after completing the Criteria for Homed Delivered Meals paper.

16. **Respite:** Assist families with temporary, substitute, support for a brief period of relief or rest for caregivers.

**PERFORMANCE MEASURES WILL BE TRACKED BY NAMIS OR ITS REPLACEMENT: (SEE COMPOSITE FOR BASELINE NUMBERS)**

1. Increase caseloads in under-served areas of PSA-L BY 1% in the next 3 years.
2. Review cost per/unit of in-home services will maintain its numbers for the next 3 years.
3. Reduce Medicaid and non-Medicaid clients in Long-Term care facilities by 1%.
4. Number of volunteers helping number of clients will maintain in the next 3 years.
5. Units of service for I&A, Access Assistance, Caregiver Counseling and Outreach will increase its numbers by 2%for the next three years.
6. Tracking the number of clients, families or caregivers that are using out website, asking and receiving information, assistance and resources to help make informed decisions in our I & A program with the help of NAMIS will increase by 3% in the next 3 years.
7. The number of contacts for Medicare/Medicaid insurance counseling will maintains its numbers for this program.
8. The number of phone calls made to Legal Aid hotline. This program will maintain its numbers.
9. Using measurable outcomes to allow eligible individuals to live as independently as possible will maintain its numbers.
10. The number of applications completed and/or helped with for DHHS will maintain its numbers.
11. Number of volunteers and persons served through the Senior Companion program will maintain for the next 3 years.
12. The number of congregate and home delivered meal participants that are being served or have a meal delivered to. These programs will increase by 3% in the next 3 years.

**CRITERIA FOR HOME-DELIVERED MEALS  
AGING OFFICE OF WESTERN NEBRASKA**

NUTRITION SITE \_\_\_\_\_ DATE \_\_\_\_\_

NAME: \_\_\_\_\_ Date of Birth \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_ Phone Number \_\_\_\_\_

	YES	NO
1. The individual is home bound; does not leave his/her home under normal circumstances.	_____	_____
2. The individual is physically or emotionally unable to obtain food or prepare full meals.	_____	_____
3. There is no adult living in the same building or area able or willing to prepare all meals.	_____	_____
4. The person is unable to participate in the congregate nutrition program because of physical or emotional problems.	_____	_____
5. The individual is able to feed him/herself.	_____	_____
6. All special dietary needs can be met by the meals available, i.e., the meals available would not jeopardize the health of the individual. If a person is on a very restrictive diet, the program may not be able to provide such a diet.	_____	_____
7. The individual agrees to be home when meals are delivered, or to contact the program when absence is unavoidable.	_____	_____
8. This Case is to be reviewed annually for need	_____	_____

COMMENTS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

YEARLY RE-ASSESSMENT	
Date Approved	Initials
_____	_____
_____	_____
_____	_____

\_\_\_\_\_  
SITE MANAGER

## **GOAL # 5 for July 1, 2015-June 30, 2020**

**Implement management and workforce practices that support the integrity and efficient operations of programs serving people with disabilities and older adults and ensure stewardship of taxpayers' dollars.**

### **OBJECTIVE:**

**Prevent or postpone nursing home placement by providing consumer education and counseling to both the older individual and family members in identifying and coordinating appropriate Home and Community Based services which will address the disabled individual and the older persons long-term care needs. Providing the right level of care at the right time.**

### **STRATEGIES:**

1. **CHOICES:** Medicaid Waiver Case Management, Senior Care Options, Case Management. Provide for the continuity of care as individuals transition through the long-term care continuum of services.
2. **Self Directed Care/Durable Medical Equipment:** To offer homemaker and chore services with the help of Handyman and the Voucher program to enable clients the availability of and access to services and support and durable medical equipment if needed.
3. **Medicaid Waiver:** Coordinating individual care for nursing home level of care, and individuals to support in-home independence.
4. **Senior Center Volunteer Senior Companion Program:** To match volunteers with frail elderly homebound people to aid in keeping them in their homes safely.
5. **ADRC:** To enhance the existing infrastructure by creating unmet needs, INA, and at the local level an Options Counselor to increase consumer access to information and services for long-term care and supports in a comprehensive, flexible and cost effective manner.
6. **Veterans:** To provide veterans with Home and Community based services.
7. **Information and Assistance:** To provide information and follow up to assist older individuals, families gain access to needed services within their community.
8. **Access Assistance:** To help caregivers with information on resources and services within their communities to assist in caring for their charges.
9. **Family Caregiver Counseling:** Support groups to allow for peer interaction, helping in making decisions and solving problems.
10. **Outreach:** Identify potential new clients and encourage their use of existing services and benefits.
11. **SHIP:** Provide counseling on Medicare/Medicaid insurance options and benefits.
12. **Application Assistance:** Assist people with navigating AccessNebraska, helping with low income subsidy for Part D and any other low income applications.
13. **Congregate Meals:** Meals provided to a qualified individual in a group setting, where social interaction is a benefit from the program.
14. **Home Delivered Meals:** A meal provided to a qualified individual in their place of residence, after completing the Criteria for Home Delivered Meals paper.
15. **Respite:** Assist families with temporary, substitute, support for a brief period of relief or rest for caregivers.

**PERFORMANCE MEASURES WILL BE TRACKED BY NAMIS SOR IT'S  
REPLACEMENT: (SEE COMPOSITE FOR BASELINE NUMBERS)**

1. Number of active caseloads for the CHOICES program. This program will increase by an estimated 2% in the next 3 years.
2. Review cost per/unit of in-home services will maintain over the next 3 years.
3. Reduced Medicaid and non-Medicaid residents in Long-Term Care facilities by 1% in the next 3 years.
4. Number of Medicaid cost being reimbursed to Long-Term Care facilities will maintain in the next 3 years.
5. Review care plan cost vs. LTC facility cost
6. Number of volunteers helping number of clients will maintain over the 3 years.
7. Referrals made to non-aged service providing agencies will increase by 5% in the next 3 years due to the ADRC.
8. Case load of Veterans receiving Home and Community based Service will maintain over the next 3 years.
9. The number of Option Counseling sessions to individuals will maintain over the course of 3 years.
10. Units of service for I&A, Access Assistance, Caregiver Counseling, and Outreach will increase its numbers by an estimated 2% over the next 3 years.
11. The number of contacts for Medicare/Medicaid insurance counseling will maintain over the next 3 years.
12. Applications completed and/or helped with for DHHS will maintain for the next 3 years.
13. Number of congregate and home delivered meals that are being served or delivered to participants will increase by 3% in the next 3 years.

## **Aging Office of Western Nebraska Disaster Plan**

### **I. INTRODUCTION**

#### **A. Purpose**

The Aging Office of Western Nebraska (Agency) has a legislative mandate to advocate on behalf of older persons who reside within PSA-L. As such, the Agency works in cooperation with federal, state, county, municipal, voluntary and other non-profit programs to provide for the needs of older disaster victims.

### **II. POLICIES**

#### **A.**

The Agency has a memorandum of understanding with the American Red Cross (ARC) that provides a broad framework of cooperation in rendering assistance and services to older victims of disasters. The Agency also has a cooperative working relationship with FEMA and works in partnership with the Office of Emergency Preparedness to assure that service needs of older persons are met in times of disaster.

#### **B.**

Section 310 of the 1992 Amendments to the Older Americans Act provides that the Assistant Secretary for Aging may provide reimbursement to any state, upon application, for funds to be made available to Agencies on Aging for delivery of support services during a major disaster declared by the President. This action is taken according to the Disaster Relief and Emergency Assistance Act. The Agency, in the event of a disaster will contact the State Unit on Aging to request needed funds.

### **III. SITUATION AND ASSUMPTIONS**

#### **A. Conditions**

Given the variety of threats, the Agency and service providers are dedicated to safeguarding people and property through emergency preparedness, training and a coordinated response to emergencies/disasters.

#### **B. Planning Assumptions**

1. The Agency and service providers are required to have emergency/disaster plans and expedite the delivery of services when an emergency/disaster occurs. The Agency will work with federal/state/municipal/voluntary organizations to meet the needs of older adults affected by an emergency/disaster.
2. The disaster assistance efforts of the Agency and service providers will complement the existing relief efforts provided by federal/state/municipal/voluntary organizations. The Agency and service providers will enter into coordination agreements and working relationships with emergency service disaster agencies, voluntary relief (i.e. Red Cross, Salvation Army) and local community-based organizations. The Agency

and service providers' disaster plans will be activated by the Agency upon notification by the Agency and/or local emergency management officials. Activation of disaster plans requires an assessment of the need to mobilize the Agency and/or service provider resources and personnel. This will be done in coordination with state/local emergency management agencies and/or FEMA during Presidential declared Disasters. This assessment will determine the type of action necessary to serve the needs of disaster victims, particularly older persons.

#### IV. CONCEPT OF OPERATIONS

##### A. General

In this section of the disaster operations plan, the actual functions and activities of the Agency is described to effectively respond to emergency/disaster situations affecting older persons. When an emergency/disaster is reported, the response process that the Agency will follow is outlined below.

##### B. Organization

1. The primary responsibility to respond to current and impending emergencies/disasters is the Agency's designated Disaster Assistance Coordinator (hereafter call Coordinator). The Agency Coordinator is the Executive Director or his/her designee. The Coordinator will take the lead in determining; managing and coordinating emergency/disaster related activities. If the Coordinator cannot be reached to respond to an emergency/disaster situation, the Agency has identified a succession of alternates that can be contacted to ensure that a prompt response takes place.
2. The Coordinator can be contacted at the Agency office during normal working hours. If he/she is not in the office, then the alternates should be contacted in the order identified. During non-working hours, the Coordinator and/or alternates may be reached at his/her home.
3. In the event an emergency/disaster destroys the Agency's office and/or its communication system, the Coordinator and/or alternates can be reached at home. Depending on the disaster situation, the Agency may operate out of an alternative location and the location and telephone numbers will be provided to the public. The coordinator will work with all organizations and available resources to provide assistance to older individuals in need.
4. Emergency/disaster response operations will differ in depending on whether the emergency/disaster is a Governor proclaimed State of Emergency and/or a Presidentially declared Disaster. The Coordinator will work whatever level (State/Federal) to meet the needs of older persons.
5. When a Presidential Declaration of a Major Disaster has been made, federal assistance will become available to support state operations. The Coordinator will

take action to mobilize services through the Agency to provide assistance to older persons. The Coordinator will conduct the following activities:

- a. Telephone calls will be made to the State Unit on Aging to assure appropriate assistance is being provided, sufficient resources are available and to respond to any problems/questions that may arise. The Coordinator will ask the Agency staff to keep records of services delivered and compile projections of funding that will be needed. In addition, the Agency staff will be asked by the Coordinator to monitor the emergency/disaster situation and report on circumstances as they change. Depending on the magnitude of the emergency/disaster and the number of older people involved, contacts may be made hourly, daily and/or weekly. Site visits to the emergency/disaster areas will be made upon request and as needed to assess the emergency/disaster situation.
  - b. The Coordinator will regularly communicate and update Agency staff activities to the State Unit on Aging, service providers, and all other organizations involved in relief efforts.
6. The Coordinator will conduct the following activities:
- a. Complete an application for federal funds through the State Unit on Aging as soon as possible so the AAA can be reimbursed for services delivered.
7. If a federally declared Disaster is of catastrophic proportion, the Agency staff and the Coordinator will:
- a. Visit the emergency/disaster area to meet with local officials to evaluate the impact on older persons and the need for additional resources.
  - b. Develop service task orders and apply for funding from FEMA and AoA.
  - c. Resolve issues; access needed materials/supplies and advocate/mediate for additional services and resources.
  - d. Participate in disaster recovery operations with FEMA, state agencies and voluntary emergency/disaster relief organizations.
  - e. Keep the State Unit on Aging apprised about the emergency/disaster situation and the Agency's activities in the delivery of services.
  - f. Develop and implement methods for funding reimbursement, program and financial reporting and accurately document service delivery.
  - g. Provide assistance with issues that arise in their daily delivery of services to older disaster victims.

## V. ORGANIZATIONAL ROLES AND RESPONSIBILITIES

### A. Agency and Service Providers will:

1. Provide notification to applicable offices of all local emergencies/disasters. This notification will be made by telephone and by e-mail as indicated on the Disaster Checklist form (attached)
2. Receive notification of an emergency/disaster or impending emergency/disaster with instructions from local emergency management agency.
3. Be responsible for activating their disaster plan, providing advocacy and outreach services, and following up and monitoring services with guidance from applicable agencies.
4. Notify the service providers to contact project directors with instructions. They will carry out their assigned duties, including the mobilization of local volunteers, to provide individualized services.

## VI. IMPORTANT CONTACTS

1. Nebraska State Unit on Aging  
402-471-2307  
1-800-942-7830  
dhhs.aging@nebraska.gov
2. American Red Cross – Scottsbluff Office  
308-635-2114
3. Nebraska Emergency Management Agency  
402-471-7421

# AGING OFFICE OF WESTERN NEBRASKA

## STAFF TELEPHONE DIRECTORY

### SCOTTSBLUFF

### HOME PHONE

Cheryl Brunz, Director-----308-765-9523  
Nolene Lattin, Fiscal coordinator-----308-586-2772  
Roseanne Loseke, Bookkeeper-----308-641-2917  
Susan Schawe, Receptionist-----308-631-9276  
Mary Smith, Programs Coordinator-----308-631-3302  
Carol Sinner, CHOICES Supervisor-----308-635-9813  
Tena Cline, Case Manager-----308-436-5295  
Steve Trickler, Case Manager-----308-641-4846  
Caryn Long, SHIIP Coordinator/RD-----308-247-3463  
Lisa Blanton, RD/Caregiver support-----308-225-2244  
Kathy Wayman, Service Coordinator-----308-635-1884  
Roylene Jenkins, Service Coordinator-----308-623-0178

### CHADRON

Alynn Risseeuw, Case Manager-----308-430-8402  
Ann Jamison, Case Manager-----308-432-4252

### HEMINGFORD

Lori Dannar, Resource Developer-----308-760-1302

### ALLIANCE

Rebecca Martinez, Case Manager-----308-760-4637

### SIDNEY

Mike Hashman, Case Manager-----308-254-5358  
Hesper Gentry, Resource Developer-----308-249-4420

### LODGEPOLE

Susan Block, Case Manager-----308-483-5621

## AGING OFFICE OF WESTERN NEBRASKA

### NUTRITION SITE MANAGER TELEPHONE DIRECTORY

#### ALLIANCE

#### HOME PHONE

Sharon Woods-----308-760-7249

#### BAYARD

Shirley Logsdon-----308-586-1177

#### BRIDGEPORT

Sharon Myers-----308-641-3464

#### CHADRON

Sheila Motz-----308-430-1847

#### CHAPPELL

Cindy Wilber-----308-874-2468

#### CRAWFORD

Karen Serres-----308-665-2013

#### GERING

Eva Ramirez-----308-672-3695

#### GORDON

Betty Lorenez-----308-430-3172

#### HARRISON

Katie Reece-----308-668-9497

#### HAY SPRINGS

Peggy Tlustos-----308-430-4981

#### HEMINGFORD

Linda Luce-----308-760-6400

**KIMBALL**

Eileen Rowley-----308-235-5981

**MITCHELL**

Shirley Smith-----308-623-1077

**MORRILL**

Shirley Swenson-----308-925-1034

**OSHKOSH**

Pam Fornander-----308-772-4310

**RUSHVILLE**

Dorothy Nyffler-----308-327-2192

**SIDNEY**

Judith Scheafer-----520-307-1909

**SCOTTSBLUFF**

Karen Heth-----308-641-9331

Taxonomy	Service Name	Units of Service				Change (%) (yellow indicates a new narrative is required for that service)
		07/01/15 - 12/31/15 (Actual)	01/01/16 - 06/30/16 (Projected)	07/01/15 - 06/30/16 (Combined)	07/01/16 - 06/30/17 (Projected)	
1.	Personal Care (Hour)					0.00%
2.	Homemaker (Hour)	1,287	1,800	3,087	3,264	5.75%
3.	Chore (Hour)	2,152	4,000	6,152	6,290	2.25%
4.	Home Delivered Meals (Meal)	40,981	40,900	81,881	83,725	2.25%
	<i>Eligible Home Delivered Meals</i>	<i>28,876</i>	<i>28,800</i>	<i>57,676</i>	<i>59,000</i>	<i>2.30%</i>
5.	Case Management - IIIB (Hour)					0.00%
6.	Care Management - CASA (Hour)	1,867	1,867	3,734	3,800	1.77%
7.	Congregate Meals (Meal)	48,763	48,700	97,463	102,027	4.68%
	<i>Eligible Congregate Meals</i>	<i>44,393</i>	<i>44,500</i>	<i>88,893</i>	<i>92,000</i>	<i>3.50%</i>
8.	Nutrition Counseling (Session per Participant)					0.00%
9.	Assisted Transportation (1-way Trip)					0.00%
10.	Transportation (1-way Trip)					0.00%
11.	Legal Assistance (Hour)	184	184	368	390	5.98%
12.	Nutrition Education (Session per Participant)	381	381	762	780	2.36%
13.	Information & Assistance (Contact)	8,132	1,662	9,794	9,900	1.08%
14.	Outreach (Contact)	197	197	394	400	1.52%
15.	Health Education (Contact)					0.00%
16.	Emergency Response System (Client-Month)					0.00%
17.	Information Services - IIIB (Activity)					0.00%
18.	Financial Counseling (Contact)					0.00%
19.	Health Clinic (Contact)	844	844	1,688	1,700	0.71%
20.	Reserved					0.00%
21.	Health Promotion/Disease Prevention (Contact)	-	185	185	200	8.11%
22.	Durable Medical Equipment (Contact)	10	5	15	15	0.00%
24.	Self-Directed Care (1.Placement)	1,271	1,271	2,542	2,550	0.32%
26.	Respite-Home (Hour)					0.00%
27.	Ombudsman					0.00%
28.	Reserved					0.00%
29.	Volunteerism (Hour)	8,269	8,269	16,538	16,550	0.07%
30.	Volunteerism/Stipend (Hour)					0.00%
31.	Reserved					0.00%
32.	Reserved					0.00%
33.	Reserved					0.00%
34.	Reserved					0.00%
35.	Supportive Services (Hour)	17,995	17,995	35,990	36,000	0.03%
36.	Reserved					0.00%
37.	III-E Information Services (Activity)					0.00%
38.	III-E Access Assistance (Contact)	2,210	2,210	4,420	4,450	0.68%
39.	III-E Counseling (Session per Participant)	257	257	514	525	2.14%
40.	III-E Respite Care (Hour)	425	425	850	850	0.00%
41.	III-E Supplemental Services (Activity)					0.00%
42.	III-E Self-Directed Care (Placement)					0.00%

State program that requires a more comprehensive assessment of an older person. It is similar to Case Management, but requires a uniform assessment form, covering areas like support information, health, housing information, assistive devices, cognitive and mental health assessments, legal/financial assistance, nutrition, ADL, and IADL assessments. It is done in a one-on-one setting. This should be entered as a Registered Service in NAMIS.

**Detailed description of how service is provided:** Please include whether service is contracted/sub-granted to other agencies/service providers or provided directly by employees of the Area Agency on Aging. Include information for services that will differ and or remain constant.

**Case management is a direct service provision of the CHOICES program. This service is available in all counties of our PSA-L. Units of services are inclusive of Assessment, Care Plan development, coordination, follow up and travel. Care management coordinates with the other aspects of the CHOICES services which allows for a seamless transition of care as the individual level of care intensifies.**

**Explanation of increase/decrease of service units:** Based upon the Service Unit Composite Page, if the service units increased or decreased by 10% or more, please provide a detailed explanation for the increase or decrease. This should include the areas (counties, cities, and senior centers) that are anticipating the increase/decrease and reasons explaining why.

A program to promote better health by providing accurate and culturally sensitive nutrition, physical fitness, or health (as it relates to nutrition) information and instruction to participants and caregivers in a group or individual setting overseen by a dietitian or individual with comparable expertise. It can be done in a one-on-one setting or in a group setting. This should be entered as group utilization in NAMIS.

**Detailed description of how service is provided:** Please include whether service is contracted/sub-granted to other agencies/service providers or provided directly by employees of the Area Agency on Aging. Include information for services that will differ and or remain constant.

**Nutrition education will consist of the AOWN's Program Coordinator providing specific Nutrition related educational presentations at all the Nutrition sites throughout the PSA-L. Annually the topics will change for the presentations, but will be educational nutrition topics.**

**The education will be further complemented by vegetable nutrition education at the SFMNP coupon distribution and then by Nutrition specific workshops at the Annual Spring Wellness festival held in April.**

**At the Spring Wellness festival we have a Registered Dietician that does a class on diabetes for nutritional education.**

**Explanation of increase/decrease of service units:** Based upon the Service Unit Composite Page, if the service units increased or decreased by 10% or more, please provide a detailed explanation for the increase or decrease. This should include the areas (counties, cities, and senior centers) that are anticipating the increase/decrease and reasons explaining why.

Assistance such as heavy housework, yard work or sidewalk maintenance for a person. Heavy housework would be activities such as cleaning when the furniture is moved, "spring cleaning" needed because client has not been able to maintain routine cleaning, and washing windows. Yard work would be activities such as mowing, raking, trimming and carrying out garbage. Sidewalk maintenance would be activities such as snow removal, spreading ice melt, repairing cracks, etc. Chore also includes minor repairs and maintenance such as painting, minor plumbing, banister placement, changing furnace filters, etc. These services do not require a trained service specialist. It is done in a one-on-one setting. This should be entered as a Registered Service in NAMIS.

**Detailed description of how service is provided:** Please include whether service is contracted/sub-granted to other agencies/service providers or provided directly by employees of the Area Agency on Aging. Include information for services that will differ and or remain constant.

**Chore services will be provided by reimbursement grants to four entities of local government in Box Butte, Kimball (city), Morrill and Scotts Bluff counties. Program administration will be provided directly by the county/city or by a contracted senior organization. Independent providers are utilized for the actual service provision. These are the only communities that will receive services thru Chore; the other communities/counties will receive services thru Self Directed Care.**

**Explanation of increase/decrease of service units:** Based upon the Service Unit Composite Page, if the service units increased or decreased by 10% or more, please provide a detailed explanation for the increase or decrease. This should include the areas (counties, cities, and senior centers) that are anticipating the increase/decrease and reasons explaining why.

Assistance such as preparing meals, shopping for personal items, managing money, using the telephone, or doing light housework for a person. It is done in a one-on-one setting. This should be entered as a Registered Service in NAMIS.

**Detailed description of how service is provided:** Please include whether service is contracted/sub-granted to other agencies/service providers or provided directly by employees of the Area Agency on Aging. Include information for services that will differ and or remain constant.

**Homemaker services will be provided by reimbursement grants to the four Handyman entities of local government. Program Administration will be provided directly by the county/city or by a contracted Senior organization. Independent providers are utilized for the actual service provision. The counties that will receive services thru Homemaker are Box Butte, Kimball, Morrill, and Scotts Bluff. The other counties will receive services thru Self Directed Care.**

**Explanation of increase/decrease of service units:** Based upon the Service Unit Composite Page, if the service units increased or decreased by 10% or more, please provide a detailed explanation for the increase or decrease. This should include the areas (counties, cities, and senior centers) that are anticipating the increase/decrease and reasons explaining why.

A meal provided to a qualified individual in a congregate or group setting. The meal as served meets all of the requirements of the Older Americans Act and State/Local laws. Meals provided to individuals through means-tested programs such as Medicaid Waiver and Title XX meals, or other state-funded programs are **excluded** from the NSIP meals. It is done in a group setting. This should be entered as a Registered Service in NAMIS.

**Detailed description of how service is provided:** Please include whether service is contracted/sub-granted to other agencies/service providers or provided directly by employees of the Area Agency on Aging. Include information for services that will differ and or remain constant.

**Congregate meal service will be primarily a direct service provision of the AOWN. Noon meal service will be available at twenty (20) nutrition locations. Eighteen (18) by direct administration, two ((2) by NSIP agreement with a Public school (Banner county Public School) during the school term and a Senior community center (Lewellen Tiger Den). All locations will provide service five (5) days per week.**

**Explanation of increase/decrease of service units:** Based upon the Service Unit Composite Page, if the service units increased or decreased by 10% or more, please provide a detailed explanation for the increase or decrease. This should include the areas (counties, cities, and senior centers) that are anticipating the increase/decrease and reasons explaining why.

A meal provided to a qualified individual in his/her place of residence. The meal is served in a program administered by SUAs and/or AAAs and meets all of the requirements of the Older Americans Act and State/Local laws. Meals provided to individuals through programs such as Medicaid waiver, Title XX, or state-funded programs are **excluded** from the NSIP meals. It is done in a one-on-one setting. This should be entered as a Registered Service in NAMIS. For caregivers that receive Home Delivered Meals, see the Caregiver – Supplemental Services listing on how to document.

**Detailed description of how service is provided:** Please include whether service is contracted/sub-granted to other agencies/service providers or provided directly by employees of the Area Agency on Aging. Include information for services that will differ and or remain constant.

**Home delivered meals service will be primarily a direct service provision of the AOWN. Noon meal delivery will be available from 19 nutrition locations. Home delivery will also extend into the small communities of Henry, Lyman, Minatare, Melbeta, and Lewellen. All service locations will provide five (5) days a week.**

**Explanation of increase/decrease of service units:** Based upon the Service Unit Composite Page, if the service units increased or decreased by 10% or more, please provide a detailed explanation for the increase or decrease. This should include the areas (counties, cities, and senior centers) that are anticipating the increase/decrease and reasons explaining why.

The provision of goods to an individual at no cost or at a reduced cost which will directly support the health and independence of the individual with an assessed need.

Goods are adaptive devices or assistive technology to be used by an individual. This should be entered as group utilization in NAMIS.

**Detailed description of how service is provided:** Please include whether service is contracted/sub-granted to other agencies/service providers or provided directly by employees of the Area Agency on Aging. Include information for services that will differ and or remain constant.

**Durable Medical equipment is administrated by the AOWN staff and entails the loaning of durable equipment to elders and caregivers. These are items which are not covered by Medicare/Medicaid and can be used by the individuals for as long as needed. The AOWN receives donations of durable medical equipment once a loved one does not use the equipment any longer.**

**Explanation of increase/decrease of service units:** Based upon the Service Unit Composite Page, if the service units increased or decreased by 10% or more, please provide a detailed explanation for the increase or decrease. This should include the areas (counties, cities, and senior centers) that are anticipating the increase/decrease and reasons explaining why.

Services provided by licensed health care professionals that are designed to identify, prevent or treat a physical or mental health problem. Service must include individualized health intervention provided by a health professional (example: blood pressure, hearing screening, foot clinic, cholesterol screening.) It is done in a one-on-one setting. This should be entered as a group utilization in NAMIS.

**Detailed description of how service is provided:** Please include whether service is contracted/sub-granted to other agencies/service providers or provided directly by employees of the Area Agency on Aging. Include information for services that will differ and or remain constant.

**The AOWN will have blood pressures taken of clients at the nutrition sites by a volunteer nurse. The anticipated projected number of units will be 1700 participants annually at all locations.**

**Explanation of increase/decrease of service units:** Based upon the Service Unit Composite Page, if the service units increased or decreased by 10% or more, please provide a detailed explanation for the increase or decrease. This should include the areas (counties, cities, and senior centers) that are anticipating the increase/decrease and reasons explaining why.

As of July 1, 2016, all programs using the Title IIID funds will have to meet these criteria:

- Demonstrated through evaluation to be effective for improving the health and wellbeing or reducing disease, disability, and/or injury among older adults; and
- Proven effective with older adult population, using experimental or quasi-experimental design\*; and
- Research results published in a peer review journal; and
- Fully translated\*\* in one or more community site(s); and Includes developed dissemination products that are available to the public.

\* Experimental designs use random assignment and a control group. Quasi-experimental designs do not use random assignment.

\*\* For purposes of the Title III-D definitions, being "fully translated in one or more community sites" means that the evidence-based program in question has been carried out at the community level (with fidelity to the published research) at least once before. Sites should only consider programs that have been shown to be effective within a real world community setting.

It is done in a group setting. This should be entered as a group utilization in NAMIS.

**Detailed description of how service is provided:** Please include whether service is contracted/sub-granted to other agencies/service providers or provided directly by employees of the Area Agency on Aging. Include information for services that will differ and or remain constant.

**"Powerful Tools for Caregivers" will be our Health promotion/disease prevention topic. The program will be offered throughout the PSA-L. The Aging Office of Western Nebraska will continue to offer "Stepping On" as a health promotion/disease prevention class.**

**Explanation of increase/decrease of service units:** Based upon the Service Unit Composite Page, if the service units increased or decreased by 10% or more, please provide a detailed explanation for the increase or decrease. This should include the areas (counties, cities, and senior centers) that are anticipating the increase/decrease and reasons explaining why.

A service that assists caregivers in obtaining access to the services and resources that are available within their communities. To the maximum extent practicable, it ensures that the individuals receive the services needed by establishing adequate follow-up procedures.

NOTE: Information and assistance to caregivers is an access service, i.e., a service that:

- provides individuals with information on services available within the communities;
- links individuals to the services and opportunities that are available within the communities;
- to the maximum extent practicable, establishes adequate follow-up procedures.

Internet web site "hits" are to be counted only if information is requested and supplied. This service includes information and assistance for caregivers as well as Case Management services for caregivers. It is done in a one-on-one setting. This should be entered as group utilization in NAMIS.

**Detailed description of how service is provided:** Please include whether service is contracted/sub-granted to other agencies/service providers or provided directly by employees of the Area Agency on Aging. Include information for services that will differ and or remain constant.

**Access Assistance services are provided by the AOWN's CHOICES Resource Development and service Coordinator staff in providing assistance to family caregivers in the identification and securement of appropriate resources to assist in the care of family members.**

**Explanation of increase/decrease of service units:** Based upon the Service Unit Composite Page, if the service units increased or decreased by 10% or more, please provide a detailed explanation for the increase or decrease. This should include the areas (counties, cities, and senior centers) that are anticipating the increase/decrease and reasons explaining why.

Counseling to caregivers to assist them in making decisions and solving problems relating to their caregiver roles. This includes counseling to individuals, support groups, and caregiver training (of individual caregivers and families.)

The unit of service remains 1 Session per Participant. It can be done in a one-on-one setting or in a group setting. This should be entered as group utilization in NAMIS.

**Detailed description of how service is provided:** Please include whether service is contracted/sub-granted to other agencies/service providers or provided directly by employees of the Area Agency on Aging. Include information for services that will differ and or remain constant.

**AOWN RD staff counsel family caregivers on a daily basis with their needs. The family caregivers will come in needing assistance making decisions to help with their loved one they care for. We will continue to offer monthly Family Caregiver support groups.**

**Explanation of increase/decrease of service units:** Based upon the Service Unit Composite Page, if the service units increased or decreased by 10% or more, please provide a detailed explanation for the increase or decrease. This should include the areas (counties, cities, and senior centers) that are anticipating the increase/decrease and reasons explaining why.

Services which offer temporary, substitute supports or living arrangements for care recipients in order to provide a brief period of relief or rest for caregivers. Care Recipient must be unable to perform at least 2 ADLs without substantial human assistance or has a cognitive or other mental impairment.

Respite Care includes:

- In-home respite (personal care, homemaker, and other in-home respite)
- Respite provided by attendance of the care recipient at a senior center or other on-residential program
- Institutional respite provided by placing the care recipient in an institutional setting such as a nursing home for a short period of time as a respite service to the caregiver for Grandparents caring for children (i.e., summer camps)

It is done in a one-on-one setting. This should be entered as a Registered Service in NAMIS.

**Detailed description of how service is provided:** Please include whether service is contracted/sub-granted to other agencies/service providers or provided directly by employees of the Area Agency on Aging. Include information for services that will differ and or remain constant.

**Respite services will be the continuance of the AOWN's contractual agreements with Phillips Lifeline and Sidney Regional Medical Center for the provision of the Emergency Response Systems. The AOWN provides a subsidy payment for frail elderly who are enrolled in the AOWN's Care Management program who do not have financial means of paying for the system themselves or by family members. The emergency response system provides reassurance assistance to the caregiver in maintaining the frail older person at home by knowing that someone will respond if an emergency occurs while the caregiver is away.**

**Explanation of increase/decrease of service units:** Based upon the Service Unit Composite Page, if the service units increased or decreased by 10% or more, please provide a detailed explanation for the increase or decrease. This should include the areas (counties, cities, and senior centers) that are anticipating the increase/decrease and reasons explaining why.

A service that:

- Provides individuals with information on services available within the communities.
- Links individuals to the services and opportunities that are available within the communities.
- To the maximum extent practicable, establishes adequate follow-up procedures.

Internet web site "hits" are to be counted only if information is requested and supplied.

This would include any SHIP and Medicare Part D activities. It is done in a one-on-one setting. This should be entered as group utilization in NAMIS.

Note: that this service specifies adequate follow-up procedures. These could include that following instructions from a Client for "no follow-up" is deemed adequate follow-up by the agency.

**Information & assistance services are provided by all AOWN staff, SHIP volunteers and services providers in all of our counties. Incorporated in the I & A is the Medicare Part D insurance counseling program.**

**Detailed description of how service is provided:** Please include whether service is contracted/sub-granted to other agencies/service providers or provided directly by employees of the Area Agency on Aging. Include information for services that will differ and or remain constant.

**Explanation of increase/decrease of service units:** Based upon the Service Unit Composite Page, if the service units increased or decreased by 10% or more, please provide a detailed explanation for the increase or decrease. This should include the areas (counties, cities, and senior centers) that are anticipating the increase/decrease and reasons explaining why.

Includes cases (investigation and resolution of complaints that are made by and on behalf of residents of nursing homes and assisted living facilities); Information and Consultations to Individuals; Consultations to Facility/Providers; Work with Resident Councils; Work with Family councils; Training given to Facility Staff  
(data taken from Ombudsman report.)

**Detailed description of how service is provided:** Please include whether service is contracted/sub-granted to other agencies/service providers or provided directly by employees of the Area Agency on Aging. Include information for services that will differ and or remain constant.

**Although the AOWN no longer contracts for the Ombudsman program from the State Unit on Aging, the AOWN continues to provide a small amount of financial assistance to the program to support the Volunteer Advocates. We will assist with volunteer appreciation with the help of our Ombudsman in our area. The AOWN also provides office space for the Ombudsman program as in-kind.**

**Explanation of increase/decrease of service units:** Based upon the Service Unit Composite Page, if the service units increased or decreased by 10% or more, please provide a detailed explanation for the increase or decrease. This should include the areas (counties, cities, and senior centers) that are anticipating the increase/decrease and reasons explaining why.

Intervention with individuals initiated by an agency or organization for the purpose of identifying potential clients (or their caregivers) and encouraging their use of existing services and benefits.

NOTE: The service units for information and assistance and for outreach are individual, one-on-one contacts between a service provider and an elderly client or caregiver. An activity that involves contact with multiple current or potential clients or caregivers (e.g., publications, publicity campaigns, and other mass media activities) should not be counted as a unit of service. Such services might be termed Information Services and reported on the Information Services III-B or III-E category. It is done in a one-on-one setting. This should be entered as group utilization in NAMIS.

**Detailed description of how service is provided:** Please include whether service is contracted/sub-granted to other agencies/service providers or provided directly by employees of the Area Agency on Aging. Include information for services that will differ and or remain constant.

**Community education is provided thru presentations, health fairs, spring wellness festival, stand downs(Health fair for Veterans) and informational booths that the AOWN participates in. Outreach is provided by AOWN staff and services providers.**

**Explanation of increase/decrease of service units:** Based upon the Service Unit Composite Page, if the service units increased or decreased by 10% or more, please provide a detailed explanation for the increase or decrease. This should include the areas (counties, cities, and senior centers) that are anticipating the increase/decrease and reasons explaining why.

This was previously called Cash and Counseling. An approach to providing services (including programs, benefits, supports, and technology) under this Act intended to assist an individual with activities of daily living, in which

- Such services (including the amount, duration, scope, provider, and location of such services) are planned, budgeted, and purchased under the direction and control of such individual;
- Such individual is provided with such information and assistance as are necessary and appropriate to enable such individual to make informed decisions about the individual's care options;
- The needs, capabilities, and preferences of such individual with respect to such services, and such individual's ability to direct and control the individual's receipt of such services, are assessed by the area agency on aging (or other agency designed by the area agency on aging involved);
- Based on the assessment made, the area on aging (or other agency designated by the area agency on aging) develops together with such individual and the individual's family, caregiver, or legal representative—
  - a plan of services for such individual that specifies which services such individual will be responsible for directing;
  - a determination of the role of family members (and others whose participation is sought by such individual) in providing services under such plan; and
  - a budget for such services; and
- The area agency on aging or State agency provides for oversight of such individual's self-directed receipt of services, including steps to ensure the quality of services provided and the appropriate use of funds under this Act. From Section 102(46) of the Older Americans Act of 1965, as amended.

This covers the range of services provided or paid for through allowance, vouchers, or cash which provided to the client so that the client can obtain the supportive services which are needed. Note that the definition does not require reporting of service units, but does require reporting of the unduplicated number of persons served. It is done in a one-on-one setting. This should be entered as a Registered Service in NAMIS.

**Detailed description of how service is provided:** Please include whether service is contracted/sub-granted to other agencies/service providers or provided directly by employees of the Area Agency on Aging. Include information for services that will differ and or remain constant.

**Self Directed care is provided in the PSA-L but is primarily targeted in the counties that do not have structured Handyman/Chore program. In-home assistance in the form of Housekeeping/Chore is provided by the issuance of a voucher at an agreed upon rate and total amount of units to eligible individuals to secure the need service. The AOWN provides assurance to the provider of payment for services but only upon satisfactory approval of completion by the client. After completion of the service the client receives a request for contribution based on the total amount of cost of the service received.**

**Explanation of increase/decrease of service units:** Based upon the Service Unit Composite Page, if the service units increased or decreased by 10% or more, please provide a detailed explanation for the increase or decrease. This should include the areas (counties, cities, and senior centers) that are anticipating the increase/decrease and reasons explaining why.

Provision of a broad spectrum of services; including but not limited to health, socialization, educational opportunities, recreation, general information, interpretation / translation for the older person. This should be entered as group utilization in NAMIS.

Note: The unit reflects the hours of operation at multipurpose senior centers.

A multipurpose senior center is a community facility for the organization and provision of a broad spectrum of services, which shall include provision of health (including mental health), social, nutritional, and educational services and the provision of facilities for recreational activities for older individuals.

**Detailed description of how service is provided:** Please include whether service is contracted/sub-granted to other agencies/service providers or provided directly by employees of the Area Agency on Aging. Include information for services that will differ and or remain constant.

**Supportive services is inclusive of Senior Center/ Nutrition site hours of operation and telephone reassurance. Daily reassurance calls are made to home bound elderly by both the AOWN central office and the nutrition site managers. Senior Center hours of operation is the availability of AOWN staff during the course of the conduction of the nutrition program at all locations which provides the elderly, caregivers and the general public access to assistance and information on all services.**

**Explanation of increase/decrease of service units:** Based upon the Service Unit Composite Page, if the service units increased or decreased by 10% or more, please provide a detailed explanation for the increase or decrease. This should include the areas (counties, cities, and senior centers) that are anticipating the increase/decrease and reasons explaining why.

An uncompensated individual who provides services or support on behalf of older individuals. State Senior Companion program participants should be documented under this NAMIS service. It is done in a one-on-one setting. This should be entered as group utilization in NAMIS

**Detailed description of how service is provided:** Please include whether service is contracted/sub-granted to other agencies/service providers or provided directly by employees of the Area Agency on Aging. Include information for services that will differ and or remain constant.

The Senior Companion program at the AOWN uses volunteers to run the program. At this time we do not have any stipend volunteers. The volunteers help the frail elderly person in the community with a number of items up to and including: opening and reading their mail, driving them to Dr. appointments, or any other appointment, grocery shopping, advocacy, etc. The volunteering is done on a one-on-one setting. The communities that are involved in the Senior Companion Program are: Chappell Senior Center (Deuel county), Dalton Senior Center (Cheyenne county), Dawes County Senior Center (Dawes county), Hay Springs Senior Center (Sheridan county), Lewellen Tiger Den (Garden county), and Oshkosh Senior Center (Garden county). The Aging Office of Western Nebraska has and pays for the appropriate liability insurance that is for owned, non-owned, or hired vehicles used in the Senior companion program.

**Explanation of increase/decrease of service units:** Based upon the Service Unit Composite Page, if the service units increased or decreased by 10% or more, please provide a detailed explanation for the increase or decrease. This should include the areas (counties, cities, and senior centers) that are anticipating the increase/decrease and reasons explaining why.

**Legal advice, counseling and representation by an attorney or other person acting under the supervision of an attorney. Community education presentations made by an attorney are to be counted as Legal Assistance (for example, a presentation on legal issues made to a group of people should be counted as one unit of service). It can be done in a one-on-one setting or in a group setting. This should be entered as group utilization in NAMIS**

**Detailed description of how service is provided:** Please include whether service is contracted/sub-granted to other agencies/service providers or provided directly by employees of the Area Agency on Aging. Include information for services that will differ and or remain constant.

**Legal Assistance throughout the Panhandle will be provided by the AOWN's continued participation in the NE4A's contractual agreement with the Nebraska Legal Aid's Elder Access Line. Case work hours are provided by Nebraska Legal Aid to the elder residents according to the priority standards established by Nebraska Legal Aid. Referrals for legal assistance are made to the Elder Access Line. The AOWN will continue to provide outreach and information on the availability of the Elder Access Line. The local attorney also visits the Senior Centers annually doing a presentation and answers any questions that arise at that time.**

**We will host a legal clinic in conjunction with Nebraska law school to help elder individuals with power of attorney, simple will etc, at least once in the FFY17-19.**

**Explanation of increase/decrease of service units:** Based upon the Service Unit Composite Page, if the service units increased or decreased by 10% or more, please provide a detailed explanation for the increase or decrease. This should include the areas (counties, cities, and senior centers) that are anticipating the increase/decrease and reasons explaining why.

Narrative Addendum – FY 2017 - 2019

SERVICE: LEGAL SERVICES

1. Does your Agency have a contract with a private attorney/entity to provide Title III B legal services?

Yes

If Yes, explain the service model used.

AOWN is a participating AAA in the NE 4A contract with Legal Aid of Nebraska for the Elder Access Telephone line.

No

If No, please describe how legal assistance including legal advice, counseling and representation by an attorney is provided by your Agency.

2. List specific activities planned to market the statewide Elder Access Line (EAL) in your PSA (check all that apply):

Disseminate EAL brochures

Presentation(s) on legal issues

Newsletter article(s) on Elder Access Line

Outreach with community partners serving rural, minority, immigrants, etc.

Coordinate referrals and issues resolution with other Title III B provider(s)

Other, describe \_\_\_\_\_

3. Describe your outreach efforts to serve targeted population in your PSA.

Brochures, health fairs, public speaking engagements, inter-agency meeting. At each Senior Citizen Center we will have the local Legal Aid attorney present on local issues.

4. List the top five (5) Priority Issues in your PSA.

Senior housing, Medicare/Medicaid, advanced directives, consumer concerns, and contracts.

5. Describe any challenges or setbacks experienced in implementing the Statewide Legal Services Standards including serving target populations, addressing priority legal issues, coordinating services with the Elder Access Line and other legal resources or integrating legal services in your aging network.

Everything is coordinated with Legal Aid of Nebraska

6. List three strategies related to enhancing Legal Services planned for FY 2017 - 2019. Examples may include developing new partnerships and working agreements with other organizations such as consumer protection agency, EEOC, APS, etc., expanding the continuum of services to meet system gaps and remove barriers to access and; providing education and training to professionals, volunteers and older persons on elder rights and specific laws.

1 Distribution of Legal service information at the AOWN nutrition Senior Center and the Home Delivered meal participants

2. Speak with Legal Aid –Scottsbluff office- if they will speak during the meal at the Senior centers thru out the PSA-L.

3. Provide Elder Access line information at health fairs, Spring Wellness festival and community speaking engagements.

7. A Statewide annual report is issued annually. Please comment on how the annual report is distributed and used by your agency.

Comments:

AOWN has had good success with the reporting system with the Statewide Uniform Reporting System.

[Taxonomy Definition]

**Detailed description of how service is provided:** Please include whether service is contracted/sub-granted to other agencies/service providers or provided directly by employees of the Area Agency on Aging. Include information for services that will differ and or remain constant.

**The Pilot program of the ADRC will be provided by the Aging Office of Western Nebraska with one employee running the program who will be directly under the CHOICES Supervisor and the Executive Director. The program will be an Options Counselor position who will direct/help the client find the services they need. The Options Counselor will directly work with the Panhandle Partnership, the League of Human Dignity and PILS.**

**Explanation of increase/decrease of service units:** Based upon the Service Unit Composite Page, if the service units increased or decreased by 10% or more, please provide a detailed explanation for the increase or decrease. This should include the areas (counties, cities, and senior centers) that are anticipating the increase/decrease and reasons explaining why.

**SENIOR COMPANION VOLUNTEER PROGRAM FY 2017 RESERVATION TABLE  
July 1, 2016 to June 30, 2017**

	<b>AOWN</b>	<b>BRAAA</b>	<b>NEIGHBOR- TO-NEIGHBOR</b>	<b>MID NE CAP</b>	<b>SR. CITIZEN INDUSTRIES</b>
Personnel	\$4373				
Travel	\$500				
Printing & Supplies	\$600				
Equipment					
Building Space					
Communication & Utilities	\$500				
Other	\$1856				
Contractual Services	\$24997				
In-Kind Match	7826				
<b>RESERVATION</b>	<b>\$25,000</b>	<b>\$25,000</b>	<b>\$25,000</b>	<b>\$25,000</b>	<b>\$25,000</b>
<b>TOTAL</b>	<b>\$32826</b>				

**SENIOR COMPANION VOLUNTEER PROGRAM  
BUDGET NARRATIVE**

**Category: Personnel**

Central Office, Lisa Blanton, Project Director, oversees this program. A percent of her salary, FICA, retirement, dental insurance, life and long term disability insurance are included in Personnel.

**Category: Travel**

Lisa will travel to each of the SCVSCP sites at least 2 times a year to do appreciation and annual reviews. She will also travel as needed for training.

**Category: Printing and Supplies**

Printing of the forms that we must use. Paper and supplies that are needed for the volunteer program

**Category: Equipment**

**Category: Building Space**

**Category: Communications & Utilities**

Postage for us to send monthly remittance back and forth from each of the 7 locations. Also to mail the new volunteer packets to the sites.

**Category: Other**

Car insurance for the volunteers, the volunteer liability insurance and the normal insurance are under the this. We also have the physicals of the volunteers that we pay for .

Total grant funds requested:     \$25,000    

Match amount:     \$7,826

NEBRASKA SENIOR COMPANION PROGRAM APPLICATION FOR FUNDING

Applicant	Aging Office of Western Nebraska		
Address	1517 Broadway Suite 122		
City	Scottsbluff	NE	Zip Code 69361
Contact Person	Lisa Blanton		

**Budget**

	Grant	Local Cash	Local In-Kind
Administration	\$32,826	\$0	\$0
Personnel	\$4,373		
Travel	\$500		
Print & Supply	\$ 600.00		
Equipment	\$ -		
Building space	\$ -		
Comm & Utilities	\$ 500.00		
Other (list & breakout)	\$ 26,853.00		
Volunteer Costs	\$ -	\$ -	\$ -
Stipends			
Travel			
Meals			
Physical Exams			
Other (list & breakout)			
<b>Total Cost</b>	<b>\$ 32,826.00</b>	<b>\$ 7,826.00</b>	<b>\$ -</b>

Please attach a Budget Justification describing the costs in each category.

Service Area	PSA-L	
	Stipend	Non-Stipend
Number of Volunteers by End of Year 1	75	
Number of Volunteers by End of Year 2	N/A	N/A
Individuals Served by End of Year 1	500	
Individuals Served by End of Year 2	N/A	
Special Emphasis (optional)		

SENIOR COMPANION PROGRAM ANNUAL PLAN & BUDGET

The Nebraska State Unit on Aging is requesting an Annual Plan & Budget for the Senior Companion Program for FY 2017. The Annual Plan should include the following information:

1. Designated project director who is directly responsible to the sponsor for the management of the project; Lisa Blanton is our designated project director.
2. List the Units of Service Composite:

	Volunteerism	Volunteerism/Stipend
07/01/15 – 12/31/15 (Actual)	60	
01/01/16 – 06/30/16 (Projected)	3	
07/01/15 – 06/30/16 (Combined)	63	
07/01/16 – 06/30/17 (Projected)	65	

3. How recruitment, assignment, supervision, and support of the senior companions is provided. What efforts are being made to recruit and assign persons from minority groups, handicapped, and hard-to-reach individuals; The Coordinator for each location know most people in the community and if they need help the coordinator calls on the hard-to-reach person. Small communities in rural Nebraska do not even have minority in their community. If they did they would not treat them any differently. The aged handicapped individuals in those communities are some of the first people to receive the services.
4. What financial and in-kind support is provided to fulfill the project's local share commitment; We are using \$7826 County funds to support this program.
5. How the senior companions are provided with not less than the minimum accident, personal liability, and excess auto liability insurance; We the AOWN provide and purchase all of the above mentioned insurance for this program.
6. What types of appropriate recognition of the senior companions and their activities is provided; We will recognize the volunteers with a small party at each location and a small token of our appreciation.
7. Provide personnel practices and service policies for senior companions, including grievance and appeal procedures for both volunteers and project staff; See attached
8. Provide information on how project records are maintained in accordance with generally accepted accounting principles and provide for accurate and timely preparation and submission of reports required by the State Unit on Aging; Reports are sent to the AOWN on a monthly basis, with both month and year to date expenses and funding shown. This allows the AOWN to compile the reports and forward the information to the SUA. All reports are kept for 5 years at Central office.
9. How necessary training is provided prior to the start of service and quarterly training thereafter; The Coordinator will train the volunteers by sitting them down and explaining what is needed by the person served. They will meet the person that needs the help and the volunteer and the person served will work out any details. Quarterly training will be done by the Project Director with Aged Pages being sent to the coordinator quarterly.

10. Arrangement of direct benefits (insurance, meals, physical examinations, recognition, stipends and transportation); The direct benefits that are offered for this program are paid directly by the AOWN.
11. Provide assurance that appropriate liability insurance is maintained for owned, non-owned, or hired vehicles used in the project;
12. What is the realistic transportation plan for the project based on the lowest cost transportation modes; The volunteer uses their own personal vehicle to provide transportation to the person served to where they need to go and the volunteer does not want to be reimbursed for anything i.e. gas, time etc. The volunteer actually does it for free.
13. How is an annual appraisal of the volunteers' performance and annual review of volunteers' income eligibility conducted? The AOWN does not have any stipend volunteers even though we continually ask if any volunteer wants the stipend which they don't. The AOWN Project Director will travel to each location and do an annual review of each program and the performance evaluations are being completed by the Coordinator annually.

A Service Narrative(s), Budget Form and Budget Narrative must be submitted along with this annual plan.

<b>CONTRACTORS PROVIDING ANY SERVICE TO OLDER INDIVIDUALS</b>					
<b>Contractor, list consecutively</b>	<b>Service Number</b>	<b>Total Cost of Contract</b>	<b>Minority Contractor Y/N</b>	<b>Non-Gov. Entity Contractor Y/N</b>	<b>Provided Service Paid with any OAA Funds Y/N</b>
Tiger Den	7, 4	\$4735	N	N	Y
Banner County School	7	\$367	N	N	Y
Chappell Handibus	4	\$1448	N	Y	Y
Box Butte county Handibus	4	\$624	N	Y	Y
City of Crawford Handibus	4	\$1034	N	N	Y
Box Butte County Handyman	2	\$23123	N	N	Y
Box Butte county Handyman	3	\$34683	N	N	Y
Kimball Handyman	2	\$5477	N	N	Y
Kimball Handyman	3	\$10174	N	N	Y
Morrill County Handyman	2	\$5872	N	N	Y
Morrill County Handyman	3	\$23488	N	N	Y
Scotts Bluff County Handyman	2	\$43326	N	N	Y
Scotts Bluff County Handyman	3	\$67766	N	N	Y
Chappell SCVSCP	SCVSCP	\$3571	N	N	N
Oshkosh SCVSCP	SCVSCP	\$3571	N	N	N
Kimball SCVSCP	SCVSCP	\$3571	N	N	N
Dalton SCVSCP	SCVSCP	\$3571	N	N	N
Lewellen SCVSCP	SCVSCP	\$3571	N	N	N
Hay Springs SCVSCP	SCVSCP	\$3571	N	N	N
Dawes County SCVSCP	SCVSCP	\$3571	N	N	N
NE4A/NLA	11	\$4000	N	N	Y
Self Directed Care Providers	24	\$31500	N	Y	Y
Lifeline, Phillips, & SRMC	26	\$30540	N	Y	Y

**FUND TRANSFER**

**In this Application and Plan the following transfers of funds between funding categories are included. This represents changes to the reservation table.**

- Title III-B to Title III-C(1)	.....	\$	-
- Title III-B to Title III-C(2)	.....	\$	-
- Title III-C(1) to Title III-B	.....	\$	-
- Title III-C(1) to Title III-C(2)	.....	\$	-
- Title III-C(2) to Title III-C(1)	.....	\$	-
- Title III-C(2) to Title III-B	.....	\$	-

Aging Office of Western Nebraska

Fund Transfer

Annual Plan FY 2015-16

**COMMENTS:**

**FUND TRANSFER**

In this Application and Plan the following transfers of funds between funding categories are included. This represents changes to the reservation table.

- Title III-B to Title III-C(1)	.....	\$	-
- Title III-B to Title III-C(2)	.....	\$	-
- Title III-C(1) to Title III-B	.....	\$	-
- Title III-C(1) to Title III-C(2)	.....	\$	-
- Title III-C(2) to Title III-C(1)	.....	\$	-
- Title III-C(2) to Title III-B	.....	\$	-

Aging Office of Western Nebraska

Annual Plan FY 2015-16

**COMMENTS:**

**NOTE: ONLY THE ABOVE MENTIONED FUNDS CAN BE TRANSFERRED.**

**APPROVAL OF THE AREA PLAN FOR FISCAL YEAR 2016.  
INCLUDES APPROVAL OF THIS REQUEST.**

FY 2017 BUDGET - GRAND TOTAL									
	TITLE III-B & CASA	TITLE III-C(1) & CASA	TITLE III-C(2) & CASA	TITLE III-D & CASA	TITLE III E & CASA	CASA Only	Other Programs (not funded by SUA)	Title VII	TOTAL
<b>COST CATEGORIES</b>									
1. Personnel	121335	549343	448164	15250	55619	174914	708710		2073335
2. Travel	8052	28353	38817	3670	2673	15149	38539		135253
3. Print & Supp.	6483	10059	25796	2533	692	1592	22659		69814
4. Equipment	500	1031	669						2200
5. Build Space	16463	39498	32027	866	5130	8172	26596		128752
6. Comm. & Utilit.	6435	40179	31246	242	926	8739	24793		112560
7. Other	127514	24377	15182	2239	6859	9868	49543		235582
8a. Raw Food		186522	166218						352740
8b. Contractual	35500	5102	638		30540	57049			128829
<b>9. GROSS COST</b>	<b>322282</b>	<b>884464</b>	<b>758757</b>	<b>24800</b>	<b>102439</b>	<b>275483</b>	<b>870840</b>		<b>3239065</b>
<b>NON-MATCHING</b>									
10. Other Funding							118165		118165
11a. Title XX/Medicaid	4039	16337	161595				752675		934646
11b. NSIP		69285	38160						107446
12a. Income Cont./Fees	55807	296131	231870		2500				586307
<b>12b. TOTAL NON-MATCH</b>	<b>59846</b>	<b>381753</b>	<b>431625</b>		<b>2500</b>		<b>870840</b>		<b>1746564</b>
<b>13. ACTUAL COST</b>	<b>262436</b>	<b>502711</b>	<b>327132</b>	<b>24800</b>	<b>99939</b>	<b>275483</b>			<b>1492501</b>
<b>MATCH</b>									
14a. Local Public (Cash)	12319	5837	6999	3600	2285	10326			41366
14b. Local Public (In-Kind)	10600	36833	29695						77128
15a. Local Other (In-Kind)	1847	46059	40352	4000					92258
15b. Local Other-Cash									
<b>16a. TOTAL LOCAL MATCH</b>	<b>24766</b>	<b>88729</b>	<b>77046</b>	<b>7600</b>	<b>2285</b>	<b>10326</b>			<b>210752</b>
<b>16b Cost Less Match</b>	<b>237670</b>	<b>413982</b>	<b>250086</b>	<b>17200</b>	<b>97654</b>	<b>265157</b>			<b>1281749</b>
<b>FUNDING</b>									
17a. CASA	45729	162685	155577	7688		44753			416432
17b. CASA (Used as Match)					25667				25667
18a. Reservation	191941	251297	94509	9512	71987	25000			644246
18b. Special Award									
18c. Care Management						195404			195404
<b>18d TOTAL SUA COST</b>	<b>237670</b>	<b>413982</b>	<b>250086</b>	<b>17200</b>	<b>97654</b>	<b>265157</b>			<b>1281749</b>

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FY 2017 BUDGET - Title III-B and CASA

[Taxonomy #, Service, Unit Measure]	ACCESS SERVICES						
	5. Case Management III-B (1 hour)	9. Assist Transport (1 way trip)	10. Transportation (1 way trip)	13. Info & Assist (1 contact)	14. Outreach (1 contact)	18. Financial Counseling 1 contact)	Access Services Sub Total
<b>COST CATEGORIES</b>							
1. Personnel				\$17,151	\$4,111		\$21,262
2. Travel				\$697	\$472		\$1,169
3. Print & Supp.				\$950	\$711		\$1,661
4. Equipment				\$0	\$0		\$0
5. Build Space				\$1,731	\$800		\$2,531
6. Comm. & Utilit.				\$1,112	\$646		\$1,758
7. Other				\$2,179	\$931		\$3,110
8a. Raw Food				\$0	\$0		\$0
8b. Contractual				\$0	\$0		\$0
<b>9. GROSS COST</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$23,820</b>	<b>\$7,671</b>	<b>\$0</b>	<b>\$31,491</b>
<b>NON-MATCHING</b>							
10. Other Funding				\$0	\$0		\$0
11a. Title XX/Medicaid				\$0	\$0		\$0
11b. NSIP				\$0	\$0		\$0
12a. Income Cont./Fees				\$0	\$0		\$0
<b>12b. TOTAL NON-MATCH</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>13. ACTUAL COST</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$23,820</b>	<b>\$7,671</b>	<b>\$0</b>	<b>\$31,491</b>
<b>MATCH</b>							
14a. Local Public (Cash)				\$0	\$0		\$0
14b. Local Public (In-Kind)				\$0	\$0		\$0
15a. Local Other (In-Kind)				\$0	\$0		\$0
15b. Local Other-Cash				\$0	\$0		\$0
<b>16a. TOTAL LOCAL MATCH</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>16b. Cost Less Match</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$23,820</b>	<b>\$7,671</b>	<b>\$0</b>	<b>\$31,491</b>
<b>FUNDING</b>							
17a. CASA							\$0
17b. CASA (Used as Match)							\$0
18a. Reservation				\$23,820	\$7,671		\$31,491
18b. Special Award							\$0
18c. Care Management							\$0
<b>18d. TOTAL SUA COST</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$23,820</b>	<b>\$7,671</b>	<b>\$0</b>	<b>\$31,491</b>

Projected Units		0	0	9900	400	0
Gross Cost Per Unit (9)	#DIV/0!	#DIV/0!	#DIV/0!	\$ 2.41	\$ 19.18	#DIV/0!
Match Per Unit (16b)	#DIV/0!	#DIV/0!	#DIV/0!	\$	\$	#DIV/0!
Total SUA Per Unit (18d)	#DIV/0!	#DIV/0!	#DIV/0!	\$ 2.41	\$ 19.18	#DIV/0!

03/01/2016

FY 2017 BUDGET - Title III-B :

[Taxonomy #, Service, Unit Measure]	IN-HOME SERVICES						In-Home Services Sub Total
	1. Personal Care (1 hour)	2. Homemaker (1 hour)	3. Chore (1 hour)	16. Emer Resp Sys (Client Month)	22. Dur Med Equip (1 contact)	26. Respite-Home 1 hour)	
<b>COST CATEGORIES</b>							
1. Personnel		\$33,556	\$56,300		\$0		\$89,856
2. Travel		\$80	\$320		\$0		\$400
3. Print & Supp.		\$897	\$1,599		\$0		\$2,496
4. Equipment		\$0	\$0		\$500		\$500
5. Build Space		\$2,644	\$4,356		\$0		\$7,000
6. Comm. & Utilit.		\$1,048	\$1,872		\$0		\$2,920
7. Other		\$39,573	\$71,664		\$0		\$111,237
8a. Raw Food		\$0	\$0		\$0		\$0
8b. Contractual		\$0	\$0		\$0		\$0
<b>9. GROSS COST</b>	<b>\$0</b>	<b>\$77,798</b>	<b>\$136,111</b>	<b>\$0</b>	<b>\$500</b>	<b>\$0</b>	<b>\$214,409</b>
<b>NON-MATCHING</b>							
10. Other Funding		\$0	\$0		\$0		\$0
11a. Title XX/Medicaid		\$1,580	\$2,459		\$0		\$4,039
11b. NSIP		\$0	\$0		\$0		\$0
12a. Income Cont./Fees		\$19,337	\$34,970		\$0		\$54,307
<b>12b. TOTAL NON-MATCH</b>	<b>\$0</b>	<b>\$20,917</b>	<b>\$37,429</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$58,346</b>
<b>13. ACTUAL COST</b>	<b>\$0</b>	<b>\$56,881</b>	<b>\$98,682</b>	<b>\$0</b>	<b>\$500</b>	<b>\$0</b>	<b>\$156,063</b>
<b>MATCH</b>							
14a. Local Public (Cash)		\$3,488	\$5,231		\$0		\$8,719
14b. Local Public (In-Kind)		\$2,644	\$4,356		\$0		\$7,000
15a. Local Other (In-Kind)		\$739	\$1,108		\$0		\$1,847
15b. Local Other-Cash		\$0	\$0		\$0		\$0
<b>16a. TOTAL LOCAL MATCH</b>	<b>\$0</b>	<b>\$6,871</b>	<b>\$10,695</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$17,566</b>
<b>16b. Cost Less Match</b>	<b>\$0</b>	<b>\$50,010</b>	<b>\$87,987</b>	<b>\$0</b>	<b>\$500</b>	<b>\$0</b>	<b>\$138,497</b>
<b>FUNDING</b>							
17a. CASA		\$6,522	\$11,478				\$18,000
17b. CASA (Used as Match)		\$0	\$0				\$0
18a. Reservation		\$43,488	\$76,509		\$500		\$120,497
18b. Special Award		\$0	\$0				\$0
18c. Care Management		\$0	\$0				\$0
<b>18d. TOTAL SUA COST</b>	<b>\$0</b>	<b>\$50,010</b>	<b>\$87,987</b>	<b>\$0</b>	<b>\$500</b>	<b>\$0</b>	<b>\$138,497</b>

Projected Units	0	3264	6290	0	15	0
Gross Cost Per Unit (9)	#DIV/0!	\$23.84	\$21.64	#DIV/0!	\$33.33	#DIV/0!
Match Per Unit (16b)	#DIV/0!	\$2.11	\$1.70	#DIV/0!		#DIV/0!
Total SUA Per Unit (18d)	#DIV/0!	\$15.32	\$13.99	#DIV/0!	\$33.33	#DIV/0!

03/01/2016

FY 2017 BUDGET - Title III-B :

[Taxonomy #, Service, Unit Measure]	Legal	Supportive	Self-Directed	Volunteer			Admin	TOTAL
	11. Legal Assistance (1 hour)	35. Supportive Services (1 hour)	24. Self Directed Care (1 placement)	27. Ombudsman (1 activity)	29. Volunteerism (1 hour)	30. Volunteerism/ Stipend (1 hour)	Area Plan Admin	
<b>COST CATEGORIES</b>								
1. Personnel	\$0	\$1,271	\$739	\$0			\$8,207	\$121,335
2. Travel	\$0	\$0	\$1,838	\$100			\$4,545	\$8,052
3. Print & Supp.	\$0	\$0	\$878	\$800			\$648	\$6,483
4. Equipment	\$0	\$0	\$0	\$0			\$0	\$500
5. Build Space	\$0	\$2,199	\$1,133	\$3,600			\$0	\$16,463
6. Comm. & Utilit.	\$0	\$482	\$1,275	\$0			\$0	\$6,435
7. Other	\$5,000	\$891	\$6,334	\$0			\$942	\$127,514
8a. Raw Food	\$0	\$0	\$0	\$0			\$0	\$0
8b. Contractual	\$4,000	\$0	\$31,500	\$0			\$0	\$35,500
<b>9. GROSS COST</b>	<b>\$9,000</b>	<b>\$4,843</b>	<b>\$43,697</b>	<b>\$4,500</b>	<b>\$0</b>	<b>\$0</b>	<b>\$14,342</b>	<b>\$322,282</b>
<b>NON-MATCHING</b>								
10. Other Funding	\$0	\$0	\$0	\$0			\$0	\$0
11a. Title XX/Medicaid	\$0	\$0	\$0	\$0			\$0	\$4,039
11b. NSIP	\$0	\$0	\$0	\$0			\$0	\$0
12a. Income Cont./Fees	\$0	\$0	\$1,500	\$0			\$0	\$55,807
<b>12b. TOTAL NON-MATCH</b>	<b>\$0</b>	<b>\$0</b>	<b>\$1,500</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$59,846</b>
<b>13. ACTUAL COST</b>	<b>\$9,000</b>	<b>\$4,843</b>	<b>\$42,197</b>	<b>\$4,500</b>	<b>\$0</b>	<b>\$0</b>	<b>\$14,342</b>	<b>\$262,436</b>
<b>MATCH</b>								
14a. Local Public (Cash)	\$0	\$0	\$0	\$0			\$3,600	\$12,319
14b. Local Public (In-Kind)	\$0	\$0	\$0	\$3,600			\$0	\$10,600
15a. Local Other (In-Kind)	\$0	\$0	\$0	\$0			\$0	\$1,847
15b. Local Other-Cash	\$0	\$0	\$0	\$0			\$0	\$0
<b>16a. TOTAL LOCAL MATCH</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$3,600</b>	<b>\$0</b>	<b>\$0</b>	<b>\$3,600</b>	<b>\$24,766</b>
<b>16b. Cost Less Match</b>	<b>\$9,000</b>	<b>\$4,843</b>	<b>\$42,197</b>	<b>\$900</b>	<b>\$0</b>	<b>\$0</b>	<b>\$10,742</b>	<b>\$237,670</b>
<b>FUNDING</b>								
17a. CASA	\$5,000		\$22,729					\$45,729
17b. CASA (Used as Match)								\$0
18a. Reservation	\$4,000	\$4,843	\$19,468	\$900			\$10,742	\$191,941
18b. Special Award								\$0
18c. Care Management								\$0
<b>18d. TOTAL SUA COST</b>	<b>\$9,000</b>	<b>\$4,843</b>	<b>\$42,197</b>	<b>\$900</b>	<b>\$0</b>	<b>\$0</b>	<b>\$10,742</b>	<b>\$237,670</b>

Projected Units	390	36000	2550	0	0	0	0
Gross Cost Per Unit (9)	\$ 23.08	\$ 0.13	\$ 17.14	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Match Per Unit (16b)	\$ -	\$ -	\$ -	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Total SUA Per Unit (18d)	\$ 23.08	\$ 0.13	\$ 16.55	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

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FY 2017 BUDGET - Congregate Meals Title III-C(1) and CASA

[Taxonomy #, Service, Unit Measure]	7. Congregate Meals (1 meal)	8. Nutrition Counseling (1 session / participant)	12. Nutrition Education (1 session / participant)							Area Plan Admin	TOTAL
<b>COST CATEGORIES</b>											
1. Personnel	\$537,771		\$0							\$11,572	\$549,343
2. Travel	\$23,950		\$0							\$4,403	\$28,353
3. Print & Supp.	\$9,445		\$0							\$614	\$10,059
4. Equipment	\$1,031		\$0							\$0	\$1,031
5. Build Space	\$39,498		\$0							\$0	\$39,498
6. Comm. & Utilit.	\$40,179		\$0							\$0	\$40,179
7. Other	\$20,338		\$3,000							\$1,039	\$24,377
8a. Raw Food	\$186,522		\$0							\$0	\$186,522
8b. Contractual	\$5,102		\$0							\$0	\$5,102
<b>9. GROSS COST</b>	<b>\$863,836</b>	<b>\$0</b>	<b>\$3,000</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$17,628</b>	<b>\$884,464</b>
<b>NON-MATCHING</b>											
10. Other Funding	\$0		\$0							\$0	\$0
11a. Title XX/Medicaid	\$16,337		\$0							\$0	\$16,337
11b. NSIP	\$69,285		\$0							\$0	\$69,285
12a. Income Cont./Fees	\$296,131		\$0							\$0	\$296,131
<b>12b. TOTAL NON-MATCH</b>	<b>\$381,753</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$381,753</b>
<b>13. ACTUAL COST</b>	<b>\$482,083</b>	<b>\$0</b>	<b>\$3,000</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$17,628</b>	<b>\$502,711</b>
<b>MATCH</b>											
14a. Local Public (Cash)	\$1,430		\$0							\$4,407	\$5,837
14b. Local Public (In-Kind)	\$36,833		\$0							\$0	\$36,833
15a. Local Other (In-Kind)	\$46,059		\$0							\$0	\$46,059
15b. Local Other-Cash	\$0		\$0							\$0	\$0
<b>16a. TOTAL LOCAL MATCH</b>	<b>\$84,322</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$4,407</b>	<b>\$88,729</b>
<b>16b. Cost Less Match</b>	<b>\$397,761</b>	<b>\$0</b>	<b>\$3,000</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$13,221</b>	<b>\$413,982</b>
<b>FUNDING</b>											
17a. CASA	\$162,685										\$162,685
17b. CASA (Used as Match)											\$0
18a. Reservation	\$235,076		\$3,000							\$13,221	\$251,297
18b. Special Award											\$0
18c. Care Management											\$0
<b>18d. TOTAL SUA COST</b>	<b>\$397,761</b>	<b>\$0</b>	<b>\$3,000</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$13,221</b>	<b>\$413,982</b>

Projected Units	102,027.00	-	780.00	-	-	-	-	-	-	-
Gross Cost Per Unit (9)	\$ 8.47	#DIV/0!	\$ 3.85	#DIV/0!						
Match Per Unit (16b)	\$ 0.83	#DIV/0!	\$ -	#DIV/0!						
Total SUA Per Unit (18d)	\$ 3.90	#DIV/0!	\$ 3.85	#DIV/0!						

CHECK (this should be -0-)                      \$0                      \$0                      \$0                      \$0                      \$0                      \$0                      \$0                      \$0                      (\$0)

FY 2017 BUDGET - Home-Delivered Meals Title III-C(2) and CASA										
[Taxonomy #, Service, Unit Measure]	4. Home Delivered Meals (1 meal)								Area Plan Admin	TOTAL
<b>COST CATEGORIES</b>										
1. Personnel	\$440,673								\$7,491	\$448,164
2. Travel	\$36,075								\$2,742	\$38,817
3. Print & Supp.	\$25,438								\$358	\$25,796
4. Equipment	\$669								\$0	\$669
5. Build Space	\$32,027								\$0	\$32,027
6. Comm. & Utilit.	\$31,246								\$0	\$31,246
7. Other	\$14,240								\$942	\$15,182
8a. Raw Food	\$166,218								\$0	\$166,218
8b. Contractual	\$638								\$0	\$638
<b>9. GROSS COST</b>	<b>\$747,223</b>	<b>\$0</b>	$0	$0	$0	$0	$0	$0	<b>\$11,533</b>	<b>\$758,757</b>
<b>NON-MATCHING</b>										
10. Other Funding	\$0								\$0	\$0
11a. Title XX/Medicaid	\$161,595								\$0	\$161,595
11b. NSIP	\$38,160								\$0	\$38,160
12a. Income Cont./Fees	\$231,870								\$0	\$231,870
<b>12b. TOTAL NON-MATCH</b>	<b>\$431,625</b>	<b>\$0</b>	$0	$0	$0	$0	$0	$0	$0	<b>\$431,625</b>
<b>13. ACTUAL COST</b>	<b>\$315,598</b>	<b>\$0</b>	$0	$0	$0	$0	$0	$0	<b>\$11,533</b>	<b>\$327,132</b>
<b>MATCH</b>										
14a. Local Public (Cash)	\$4,116								\$2,883	\$6,999
14b. Local Public (In-Kind)	\$29,695								\$0	\$29,695
15a. Local Other (In-Kind)	\$40,352								\$0	\$40,352
15b. Local Other-Cash	\$0								\$0	\$0
<b>16a. TOTAL LOCAL MATCH</b>	<b>\$74,163</b>	<b>\$0</b>	$0	$0	$0	$0	$0	$0	<b>\$2,883</b>	<b>\$77,046</b>
<b>16b. Cost Less Match</b>	<b>\$241,435</b>	<b>\$0</b>	$0	$0	$0	$0	$0	$0	<b>\$8,650</b>	<b>\$250,086</b>
<b>FUNDING</b>										
17a. CASA	\$155,576									\$155,576
17b. CASA (Used as Match)										\$0
18a. Reservation	\$85,859								\$8,650	\$94,509
18b. Special Award										\$0
18c. Care Management										\$0
<b>18d. TOTAL SUA COST</b>	<b>\$241,435</b>	<b>\$0</b>	<b>\$8,650</b>	<b>\$250,086</b>						

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Projected Units	83,725.00	-	-	-	-	-	-	-	-
Gross Cost Per Unit (9)	\$ 8.92	#DIV/0!							
Match Per Unit (16b)	\$ 0.89	#DIV/0!							
Total SUA Per Unit (18d)	\$ 2.88	#DIV/0!							

CHECK (this should be -0-)                      \$0                      \$0                      \$0                      \$0                      \$0                      \$0                      \$0                      \$0

FY 2017 BUDGET - Title III-D								
[Taxonomy #, Service, Unit Measure]	15. Health Ed (1 contact)	19. Health Clinic (1 contact)	21. Health Promotion / Disease Prevention (1					TOTAL
<b>COST CATEGORIES</b>								
1. Personnel		\$4,000	\$11,250					\$15,250
2. Travel		\$0	\$3,670					\$3,670
3. Print & Supp.		\$200	\$2,333					\$2,533
4. Equipment		\$0	\$0					\$0
5. Build Space		\$0	\$866					\$866
6. Comm. & Utilit.		\$0	\$242					\$242
7. Other		\$0	\$2,239					\$2,239
8a. Raw Food		\$0	\$0					\$0
8b. Contractual		\$0	\$0					\$0
<b>9. GROSS COST</b>	<b>\$0</b>	<b>\$4,200</b>	<b>\$20,600</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$24,800</b>
<b>NON-MATCHING</b>								
10. Other Funding		\$0	\$0					\$0
11a. Title XX/Medicaid		\$0	\$0					\$0
11b. NSIP		\$0	\$0					\$0
12a. Income Cont./Fees		\$0	\$0					\$0
<b>12b. TOTAL NON-MATCH</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>13. ACTUAL COST</b>	<b>\$0</b>	<b>\$4,200</b>	<b>\$20,600</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$24,800</b>
<b>MATCH</b>								
14a. Local Public (Cash)		\$0	\$3,600					\$3,600
14b. Local Public (In-Kind)		\$0	\$0					\$0
15a. Local Other (In-Kind)		\$4,000	\$0					\$4,000
15b. Local Other-Cash		\$0	\$0					\$0
<b>16a. TOTAL LOCAL MATCH</b>	<b>\$0</b>	<b>\$4,000</b>	<b>\$3,600</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$7,600</b>
<b>16b. Cost Less Match</b>	<b>\$0</b>	<b>\$200</b>	<b>\$17,000</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$17,200</b>
<b>FUNDING</b>								
17a. CASA		\$200	\$7,488					\$7,688
17b. CASA (Used as Match)								\$0
18a. Reservation			\$9,512					\$9,512
18b. Special Award								\$0
18c. Care Management								\$0
<b>18d. TOTAL SUA COST</b>	<b>\$0</b>	<b>\$200</b>	<b>\$17,000</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$17,200</b>

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Projected Units	-	1,700.00	200.00	-	-	-	-
Gross Cost Per Unit (9)	#DIV/0!	\$ 2.47	\$ 103.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Match Per Unit (16b)	#DIV/0!	\$ 2.35	\$ 18.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Total SUA Per Unit (18d)	#DIV/0!	\$ 0.12	\$ 85.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

FY 2017 BUDGET - Social Services Title III-E and CASA

(Taxonomy #, Service, Unit Measure)	37. III-E Information Services (1 activity)	38. III-E Access Assistance (1 contact)	39. III-E Counseling (1 session per participant)	40. III-E Respite Care (1 hour)	41. III-E Supplemental Services (1 activity)	42. III-E Self Directed Care (1 placement)			Area Plan Admin	TOTAL
<b>COST CATEGORIES</b>										
1. Personnel		\$34,445	\$548	\$14,348					\$6,278	\$55,619
2. Travel		\$546	\$136	\$557					\$1,434	\$2,673
3. Print & Supp.		\$102	\$88	\$102					\$400	\$692
4. Equipment		\$0	\$0	\$0					\$0	\$0
5. Build Space		\$2,000	\$1,130	\$2,000					\$0	\$5,130
6. Comm. & Utilit.		\$310	\$306	\$310					\$0	\$926
7. Other		\$2,221	\$1,969	\$2,219					\$450	\$6,859
8a. Raw Food		\$0	\$0	\$0					\$0	\$0
8b. Contractual		\$0	\$0	\$30,540					\$0	\$30,540
<b>9. GROSS COST</b>	<b>\$0</b>	<b>\$39,624</b>	<b>\$4,177</b>	<b>\$50,076</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$8,562</b>	<b>\$102,439</b>
<b>NON-MATCHING</b>										
10. Other Funding		\$0	\$0	\$0					\$0	\$0
11a. Title XX/Medicaid		\$0	\$0	\$0					\$0	\$0
11b. NSIP		\$0	\$0	\$0					\$0	\$0
12a. Income Cont./Fees		\$0	\$0	\$2,500					\$0	\$2,500
<b>12b. TOTAL NON-MATCH</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$2,500</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$2,500</b>
<b>13. ACTUAL COST</b>	<b>\$0</b>	<b>\$39,624</b>	<b>\$4,177</b>	<b>\$47,576</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$8,562</b>	<b>\$99,939</b>
<b>MATCH</b>										
14a. Local Public (Cash)		\$143	\$1	\$0					\$2,141	\$2,285
14b. Local Public (In-Kind)		\$0	\$0	\$0					\$0	\$0
15a. Local Other (In-Kind)		\$0	\$0	\$0					\$0	\$0
15b. Local Other-Cash		\$0	\$0	\$0					\$0	\$0
<b>16a. TOTAL LOCAL MATCH</b>	<b>\$0</b>	<b>\$143</b>	<b>\$1</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$2,141</b>	<b>\$2,285</b>
<b>16b. Cost Less Match</b>	<b>\$0</b>	<b>\$39,481</b>	<b>\$4,176</b>	<b>\$47,576</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$6,421</b>	<b>\$97,654</b>
<b>FUNDING</b>										
17a. CASA				\$0						\$0
17b. CASA (Used as Match)				\$25,667						\$25,667
18a. Reservation		\$39,481	\$4,176	\$21,909					\$6,421	\$71,987
18b. Special Award									\$0	\$0
18c. Care Management									\$0	\$0
<b>18d. TOTAL SUA COST</b>	<b>\$0</b>	<b>\$39,481</b>	<b>\$4,176</b>	<b>\$47,576</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$6,421</b>	<b>\$97,654</b>
19. Amount of Federal Funds Lines 18a. & 18b. expended for services to grandparents & relative caregivers										\$0

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Projected Units	-	4,450.00	- 525.00	- 850.00	-	-	-	-	-
Gross Cost Per Unit (9)	#DIV/0!	\$ 8.90	\$ 7.96	\$ 58.91	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Match Per Unit (16b)	#DIV/0!	\$ 0.03	\$ 0.00	\$ -	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Total SUA Per Unit (18d)	#DIV/0!	\$ 8.87	\$ 7.95	\$ 55.97	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

FY 2017 BUDGET - CASA Only

[Taxonomy #, Service, Unit Measure]	6. Care Management - CASA (1 hour)	STATE SENIOR COMPANION									Area Plan Admin	TOTAL
<b>COST CATEGORIES</b>												
1. Personnel	\$170,541	\$4,373										\$174,914
2. Travel	\$14,649	\$500										\$15,149
3. Print & Supp.	\$992	\$600										\$1,592
4. Equipment	\$0	\$0										\$0
5. Build Space	\$8,172	\$0										\$8,172
6. Comm. & Utilit.	\$8,239	\$500										\$8,739
7. Other	\$8,012	\$1,856										\$9,868
8a. Raw Food	\$0	\$0										\$0
8b. Contractual	\$32,052	\$24,997										\$57,049
<b>9. GROSS COST</b>	<b>\$242,657</b>	<b>\$32,826</b>	$0	$0	$0	$0	$0	$0	$0	$0	<b>\$0</b>	<b>\$275,483</b>
<b>NON-MATCHING</b>												
10. Other Funding	\$0	\$0										\$0
11a. Title XX/Medicaid	\$0	\$0										\$0
11b. NSIP	\$0	\$0										\$0
12a. Income Cont./Fees	\$0	\$0										\$0
<b>12b. TOTAL NON-MATCH</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>13. ACTUAL COST</b>	<b>\$242,657</b>	<b>\$32,826</b>	$0	$0	$0	$0	$0	$0	$0	$0	<b>\$0</b>	<b>\$275,483</b>
<b>MATCH</b>												
14a. Local Public (Cash)	\$2,500	\$7,826										\$10,326
14b. Local Public (In-Kind)	\$0	\$0										\$0
15a. Local Other (In-Kind)	\$0	\$0										\$0
15b. Local Other-Cash	\$0	\$0										\$0
<b>16a. TOTAL LOCAL MATCH</b>	<b>\$2,500</b>	<b>\$7,826</b>	<b>\$0</b>	$0	$0	$0	$0	$0	$0	$0	$0	<b>\$10,326</b>
<b>16b. Cost Less Match</b>	<b>\$240,157</b>	<b>\$25,000</b>	<b>\$0</b>	$0	$0	$0	$0	$0	$0	$0	$0	<b>\$265,157</b>
<b>FUNDING</b>												
17a. CASA	\$44,753											\$44,753
17b. CASA (Used as Match)												\$0
18a. SUA Grants	\$0	\$25,000										\$25,000
18b. Special Award												\$0
18c. Care Management	\$195,404											\$195,404
<b>18d. TOTAL SUA COST</b>	<b>\$240,157</b>	<b>\$25,000</b>	<b>\$0</b>	$0	$0	$0	$0	$0	$0	$0	$0	<b>\$265,157</b>

Sen. Comp. units are reported under volunteerism/stipend in NAMIS

Projected Units	3,800.00	16,550.00	-	-	-	-	-	-	-	-
Gross Cost Per Unit (9)	\$ 63.86	\$ 1.98	#DIV/0!							
Match Per Unit (16b)	\$ 0.66	\$ 0.47	#DIV/0!							
Total SUA Per Unit (18d)	\$ 63.20	\$ 1.51	#DIV/0!							

FY 2017 BUDGET - Other Programs (not funded by SUA)										
	SCO	MW	SHIP	SMP	ADRC					TOTAL
<b>COST CATEGORIES</b>										
1. Personnel	\$15,148	\$612,868	\$19,056	\$5,317	\$56,321					\$708,710
2. Travel	\$3,093	\$24,970	\$6,000	\$876	\$3,600					\$38,539
3. Print & Supp.	\$97	\$5,777	\$1,000	\$14,485	\$1,300					\$22,659
4. Equipment	\$0	\$0	\$0	\$0						\$0
5. Build Space	\$2,332	\$18,332	\$666	\$1,666	\$3,600					\$26,596
6. Comm. & Utilit.	\$485	\$22,606	\$622	\$0	\$1,080					\$24,793
7. Other	\$3,205	\$43,762	\$720	\$656	\$1,200					\$49,543
8a. Raw Food	\$0	\$0	\$0	\$0						\$0
8b. Contractual	\$0	\$0	\$0	\$0						\$0
<b>9. GROSS COST</b>	<b>\$24,360</b>	<b>\$728,315</b>	<b>\$28,064</b>	<b>\$23,000</b>	<b>\$67,101</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$870,840</b>
<b>NON-MATCHING</b>										
10. Other Funding	\$0	\$0	\$28,064	\$23,000	\$67,101					\$118,165
11a. Title XX/Medicaid	\$24,359	\$728,316	\$0	\$0						\$752,675
11b. NSIP	\$0	\$0	\$0	\$0						\$0
12a. Income Cont./Fees	\$0	\$0	\$0	\$0						\$0
<b>12b. TOTAL NON-MATCH</b>	<b>\$24,359</b>	<b>\$728,316</b>	<b>\$28,064</b>	<b>\$23,000</b>	<b>\$67,101</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$870,840</b>
<b>13. ACTUAL COST</b>	<b>\$0</b>	<b>(\$1)</b>	<b>\$0</b>	<b>(\$0)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>MATCH</b>										
14a. Local Public (Cash)	\$0	\$0	\$0	\$0						\$0
14b. Local Public (In-Kind)	\$0	\$0	\$0	\$0						\$0
15a. Local Other (In-Kind)	\$0	\$0	\$0	\$0						\$0
15b. Local Other-Cash	\$0	\$0	\$0	\$0						\$0
<b>16a. TOTAL LOCAL MATCH</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>16b. Cost Less Match</b>	<b>\$0</b>	<b>(\$1)</b>	<b>\$0</b>	<b>(\$0)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>FUNDING</b>										
17a. CASA										\$0
17b. CASA (Used as Match)										\$0
18a. Reservation										\$0
18b. Special Award										\$0
18c. Care Management										\$0
<b>18d. TOTAL SUA COST</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

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Projected Units	-	-	-	-	-	-	-	-	-	-
Gross Cost Per Unit (9)	#DIV/0!									
Match Per Unit (16b)	#DIV/0!									
Total SUA Per Unit (18d)	#DIV/0!									

## FY 2017 AREA PLAN ADMINISTRATION NARRATIVE

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\$10,742 III-B Budgeted Amount

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\$13,221 III-C(1) Budgeted Amount

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\$8,650 III-C(2) Budgeted Amount

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\$6,421 III-E Budgeted Amount

**Description of area plan administration:**

This is the amount of Federal Reservation for the cost of administration of the area plan and the evaluation of the activities carried out under the area plan. Also, the cost of development of comprehensive systems for supportive services, family caregiver services, development and operation of senior centers and the delivery of legal services.

AAA	County	City	Center Name	Address	Zip	Phone	Days / Hours Site Manager/Center Director	E-Mail	Congregate Meals	Home Delivered Meals	Bilingual staff?
		Harrlaburg	Banner County School	P.O. Box 5	69345	308-436-5262	M-F 8:00-1:00 Sharon Lease		Yes		No
Aging Office of Nebraska	Western	Box Butte	Alliance	City of Alliance	212 Yellowstone	69301 (308) 762-8774	M-F 7:00-2:00 Sharon Woods Shawna Brown		Yes	Yes	No
Aging Office of Nebraska	Western	Box Butte	Hemingford	Hemingford Nutrition Site City Fire Hall	517 Niobrara	69348 (308) 487-5550	M-F 7:30-2:00 Linda Luce		Yes	Yes	No
Aging Office of Nebraska	Western	Cheyenne	Sidney	Cheyenne Co. Community Center AOWN Nutrition Program	627 Toledo Street	69182 (308) 254-3845	M-F 7:30-2:00 Judith Schaefer Mike Namuth		Yes	Yes	No
Aging Office of Nebraska	Western	Dawes	Chadron	Senior Citizens Comm. Center	251 Pine Street	69337 (308) 432-2734	M-F 7:00-1:00 Shella Motz Shella Motz		Yes	Yes	No
Aging Office of Nebraska	Western	Dawes	Crawford	Dawes County Senior Center	404 2nd Street	69339 (308) 665-1515	M-F 8:00-2:00 Karen Seres		Yes	Yes	No
Aging Office of Nebraska	Western	Deuel	Chappell	Chappell Senior Center, American Legion Hall	245 Matlock	69129 (308) 432-2734	M-F 7:00-2:00 Cindy Wilber		Yes	Yes	No
		Garden	Lewellen	Lewellen Tiger Den	504 West Hwy 26	69147 308-778-0102	M-F 7:00-2:00 Gamet Storer		Yes	Yes	No
Aging Office of Nebraska	Western	Garden	Oshkosh	Oshkosh Senior Center	303 Main Street	69154 (308) 772-3400	M-F 6:00-1:00 Pam Formander		Yes	Yes	No
Aging Office of Nebraska	Western	Kimball	Kimball	Friendship Senior Center	107 South Oak	69145 (308) 235-4505	M-F 7:00-1:00 Eileen Rowley		Yes	Yes	No
Aging Office of Nebraska	Western	Morrill	Bayard	Bayard Senior Center	511 Main	69334 (308) 588-1968	M-F 7:00-2:00 Shirley Logsdon		Yes	Yes	No
Aging Office of Nebraska	Western	Morrill	Bridgeport	Bridgeport Senior Center, Prairie Winds Comm. Center	424 N. Main	69336 (308) 262-1868	M-F 7:00-2:00 Sharon Myers Kelly Riggs		Yes	Yes	No
Aging Office of Nebraska	Western	Scotts Bluff	Gering	Gering Senior Center	2005 Depot	69341 (308) 436-3233	M-F 7:00-2:00 Eva Ramirez		Yes	Yes	Yes
Aging Office of Nebraska	Western	Scotts Bluff	Mitchell	Mitchell Senior Center	1257 Center Ave	69357 (308) 623-1145	M-F 7:30-2:00 Shirley Smith Shirley Smith		Yes	Yes	No
Aging Office of Nebraska	Western	Scotts Bluff	Morrill	Morrill Manor	343 West Charles Street	69358 (308) 247-3323	M-F 8:00-2:00 Shirley Swenson		Yes	Yes	No
Aging Office of Nebraska	Western	Scotts Bluff	Scottsbluff	Scottsbluff Senior Center	1502 21st Ave.	69361 (308) 635-0263	M-F 7:00-1:00 Karen Heth		Yes	Yes	No
Aging Office of Nebraska	Western	Sheridan	Gordon	Gordon Senior Center	113 E 3rd	69343 (308) 282-2939	M-F 8:00-2:00 Betty Lorenz		Yes	Yes	No
Aging Office of Nebraska	Western	Sheridan	Rushville	Rushville Senior Center	210 South Main St	69360 (308) 327-2061	M-F 7:30-1:30 Dorothy Nyffler		Yes	Yes	No
Aging Office of Nebraska	Western	Sheridan	Hay Springs	Hay Springs Senior Center	125 N Main Street	69437 (308) 638-4534	M-F 8:00-2:00 Peggy Tlustos		No	Yes	No
Aging Office of Nebraska	Western	Sioux	Harrison	Sunshine Senior Center	Highway 20	69346 (308) 668-2261	M-F 8:00-2:00 Katie Reece		Yes	Yes	No

AAA	County	City	Center Name	Other Services Provided
		Harrisburg	Banner County School	
Aging Office of Nebraska	Western	Box Butte	Alliance	City of Alliance Home Maker, Chore, Nutrition Education, Health Clinic, Information and Assistance, Health Promotion, Durable Medical Equipment, Supportive Services, Long-Term Care Ombudsman
Aging Office of Nebraska	Western	Box Butte	Hemingford	Hemingford Nutrition Site, City Fire Hall Home Maker, Chore, Nutrition Education, Health Clinic, Information and Assistance, Health Promotion, Durable Medical Equipment, Supportive Services, Long-Term Care Ombudsman
Aging Office of Nebraska	Western	Cheyenne	Sidney	Cheyenne Co. Community Center AOWN Nutrition Program Case Management, Nutrition Education, Health Clinic, Information and Assistance, Health Promotion, Self Directed Care, Durable Medical Equipment, Supportive Services, Long-Term Care Ombudsman
Aging Office of Nebraska	Western	Dawes	Chadron	Senior Citizens Comm. Center Case Management, Nutrition Education, Health Clinic, Information and Assistance, Health Promotion, Self Directed Care, Durable Medical Equipment, Supportive Services, Long-Term Care Ombudsman
Aging Office of Nebraska	Western	Dawes	Crawford	Dawes County Senior Center Case Management, Nutrition Education, Health Clinic, Information and Assistance, Health Promotion, Self Directed Care, Durable Medical Equipment, Supportive Services, Long-Term Care Ombudsman
Aging Office of Nebraska	Western	Deuel	Chappell	Chappell Senior Center, American Legion Hall Nutrition Education, Health Clinic, Information and Assistance, Health Promotion, Self Directed Care, Durable Medical Equipment, Supportive Services, Long-Term Care Ombudsman
		Garden	Lewellen	Lewellen Tiger Den
Aging Office of Nebraska	Western	Garden	Oshkosh	Oshkosh Senior Center Case Management, Nutrition Education, Health Clinic, Information and Assistance, Health Promotion, Self Directed Care, Durable Medical Equipment, Supportive Services, Long-Term Care Ombudsman
Aging Office of Nebraska	Western	Kimball	Kimball	Friendship Senior Center Home Maker, Chore, Case Management, Nutrition Education, Health Clinic, Information and Assistance, Health Promotion, Durable Medical Equipment, Supportive Services, Long-Term Care Ombudsman
Aging Office of Nebraska	Western	Morrill	Bayard	Bayard Senior Center Home Maker, Chore, Case Management, Nutrition Education, Health Clinic, Information and Assistance, Health Promotion, Durable Medical Equipment, Supportive Services, Long-Term Care Ombudsman
Aging Office of Nebraska	Western	Morrill	Bridgeport	Bridgeport Senior Center, Prairie Winds Comm. Center Home Maker, Chore, Case Management, Nutrition Education, Health Clinic, Information and Assistance, Health Promotion, Durable Medical Equipment, Supportive Services, Long-Term Care Ombudsman
Aging Office of Nebraska	Western	Scotts Bluff	Gering	Gering Senior Center Home Maker, Chore, Case Management, Nutrition Education, Health Clinic, Information and Assistance, Health Promotion, Durable Medical Equipment, Supportive Services, Long-Term Care Ombudsman
Aging Office of Nebraska	Western	Scotts Bluff	Mitchell	Mitchell Senior Center Home Maker, Chore, Case Management, Nutrition Education, Health Clinic, Information and Assistance, Health Promotion, Durable Medical Equipment, Supportive Services, Long-Term Care Ombudsman
Aging Office of Nebraska	Western	Scotts Bluff	Morrill	Morrill Manor Home Maker, Chore, Case Management, Nutrition Education, Health Clinic, Information and Assistance, Health Promotion, Durable Medical Equipment, Supportive Services, Long-Term Care Ombudsman
Aging Office of Nebraska	Western	Scotts Bluff	Scottsbluff	Scottsbluff Senior Center Home Maker, Chore, Case Management, Nutrition Education, Health Clinic, Information and Assistance, Health Promotion, Durable Medical Equipment, Supportive Services, Long-Term Care Ombudsman
Aging Office of Nebraska	Western	Sheridan	Gordon	Gordon Senior Center Case Management, Nutrition Education, Health Clinic, Information and Assistance, Health Promotion, Durable Medical Equipment, Supportive Services, Long-Term Care Ombudsman
Aging Office of Nebraska	Western	Sheridan	Rushville	Rushville Senior Center Case Management, Nutrition Education, Health Clinic, Information and Assistance, Health Promotion, Self Directed Care, Durable Medical Equipment, Supportive Services, Long-Term Care Ombudsman
Aging Office of Nebraska	Western	Sheridan	Hay Springs	Hay Springs Senior Center Case Management, Nutrition Education, Health Clinic, Information and Assistance, Health Promotion, Self Directed Care, Durable Medical Equipment, Supportive Services, Long-Term Care Ombudsman
Aging Office of Nebraska	Western	Sioux	Harrison	Sunshine Senior Center Case Management, Nutrition Education, Health Clinic, Information and Assistance, Health Promotion, Self Directed Care, Durable Medical Equipment, Supportive Services, Long-Term Care Ombudsman

**AGING OFFICE OF WESTERN NEBRASKA  
PANDEMIC DISASTER PLAN**

**I. INTRODUCTION**

**A. Purpose**

A pandemic is a global disease outbreak. A flu pandemic occurs when a new influenza virus emerges for which people have little or no immunity and for which there is no vaccine. The disease spreads easily person-to-person, causes serious illness, and can sweep across the country and around the world in a very short time.

The Aging Office of Western Nebraska maintains active participation with local pandemic preparedness coordinating committees, Scotts Bluff County Health Department, Panhandle Public Health District, Regional Medical Response System, in planning and coordinating procedures for a pandemic outbreak. Response to a pandemic event will require the full resources and capabilities of all public, private, and governmental entities.

In the event of a Pandemic Flu Emergency, the Aging Office of Western Nebraska (AOWN) will respond by following the protocol as indicated below. This plan is applicable to all of the AOWN's programs and services.

**B. Responsible Parties**

The individuals responsible for initiating the protocols are indicated below and shall serve in the order named unless directed otherwise by the Executive Director or Governing Board of the AOWN.

1. Executive Director
2. Choices Supervisor
3. Resource Development Specialist
4. Fiscal Coordinator
5. Programs Coordinator
6. Other individuals as appointed

The responsible individual, as indicated above, will ensure that the AOWN services and programs will continue uninterrupted to the extent possible. All AOWN staff will work under the direction and authority of the person responsible of initiating the protocol. All staff will be expected to work together to assist other staff in an effort to continue programs and the operation of the AOWN as efficiently as possible.

**C. Communication**

The AOWN will maintain open communication with all staff utilizing the employee contact list to ensure all staff can be reached if needed. This list will be available to all staff and updated as necessary. Employees will be responsible for communicating with the AOWN if they become ill and will not be able to maintain their regular work schedule. Listings of clientele and providers will be maintained and available to authorized staff in the event of a Pandemic.

#### **D. SERVICES**

**CHOICES:** The Aged Medicaid Waiver, Case Management, and the Senior Care Options will be administered as directed by guidance from the Nebraska Health and Human Services. The Choices Supervisor, or the designee, will be responsible for maintaining contact with all of the Case Coordinators. In the event that a Case Coordinator is absent as a result of a Pandemic, remaining Case Coordinators will be responsible for making phone calls and visits necessary to maintain contact with clients for the absent Case Coordinators case load. A master list of clients, with applicable contact information, is maintained by the AOWN which documents all clients by Case Coordinator. The Choices program will continue to operate under the rules and regulations as determined by State of Nebraska Health and Human Services and the Federal Administration on Aging.

**SENIOR NUTRITION:** In the event of a Pandemic Flu outbreak, the AOWN Program Coordinator will contact and maintain communication with all of the AOWN nutrition locations and local health officials. The AOWN will comply with the guidance from local health officials in the determination that a congregate meal location will continue to be available or closed to prevent contamination in a congregate gathering. Subject to staff availability, home delivered nutrition will be available to the extent advised by health officials. The AOWN nutrition site managers at each of the AOWN's nutrition locations will maintain a listing of all elder meal participants and will be in continual contact with them.

**IN-HOME SUPPORTIVE SERVICES:** The Executive Director will maintain contact and communication with the contracted providers of the AOWN for the provision of in-home care. Subject to the direction of local health officials and the Nebraska Health and Human Services, in-home assistance will continue with available providers.

#### **E. EMPLOYEE SICK LEAVE**

In the event of a Pandemic Flu outbreak, all AOWN employees will follow the established approved personnel policies for sick leave and paid time off.

#### **F. ASSESSMENT & SURVEILLANCE**

Surveillance and assessment of the local status of the influenza virus is an effective way to quickly detect outbreaks and facilitate early interventions. Coordinated established partnerships will ensure an efficient and effective reporting infrastructure. AOWN's direct service providers at the community levels will provide life sustaining supports and information regarding conditions and situations at the community level.

#### **G. COORDINATION AND PUBLIC INFORMATION**

In the event of a Pandemic Flu outbreak, the AOWN will work cooperatively with other organizations in providing services. Direction and guidance will be obtained for local Health Departments, State of Nebraska Health and Human Services, Federal Administration on Aging, and other State and local officials as deemed appropriate. The AOWN will disseminate public information to the elder population as available. All activities of the AOWN's Pandemic Flu Plan will be in coordination and cooperation with the Scotts Bluff County and Panhandle Public Health Districts established Pandemic Flu Plans.

## H. IMPORTANT CONTACT NUMBERS

Scotts Bluff County Health Department  
308-436-6636

Nebraska State Unit on Aging  
1-800-942-7830

Panhandle Health District  
308-487-3600

Nebraska Department of Health  
402-471-2937

This Pandemic Flu Plan will require a coordinated strategy to prepare for and respond to an influenza pandemic. This plan is a living document which will be periodically reviewed and updated consistent with current epidemiologic knowledge on pandemic influenza and the changing public health infrastructure. All Aging Office of Western Nebraska staff and contracted providers will receive orientation to this plan and updated training as the plan is modified or changed.

## ***The Scotts Bluff County Special Needs Registry*** **Program Description**

**Introduction:** Hurricane Katrina raised serious national concern for the plight of persons in a disaster who are frail, health impaired, disabled, or medically fragile. The loss of life among these groups can be much higher than that of the general population. In New Orleans, fifteen percent (15%) of the population was age 65 or older. Seventy percent (70%) of the fatalities were over age 65. The tragedy launched a national effort to improve personal preparedness, local planning, and emergency response capabilities for vulnerable populations.

**Description:** The Special Needs Registry is a confidential list of the residents of Scotts Bluff County who will need more help or are likely to be disconnected from critically important support after a disaster. Enrollment is completely voluntary. The registry contains names, addresses, and health information regarding persons who are frail, health impaired, disabled, or medically fragile. In the event of a disaster, the internet database is unlocked. Emergency management officials and first responders are given access to information which will aid search and rescue and the provision emergency care.

**Purpose:** The Special Needs Registry's purpose is three-fold:

1. To aid and strongly encourage the persons who are most vulnerable in disasters to prepare in advance for a local emergency, as all residents should.
2. To aid emergency response agencies to anticipate and more fully plan for the needs of all residents.
3. To enable first responders to more quickly locate, assist, and connect victims with needed support and care.

**Funding:** The Scotts Bluff Special Needs Registry is made possible by Scotts Bluff County Health Department.

**Technologies:** The Special Needs Registry combines three cutting-edge technologies. The Registry utilizes the capabilities of the internet, the deployment of information via wireless communications, and the global positioning satellite system (GPS) that is used for worldwide navigation.

After a disaster, the Registry's database is distributed wirelessly to first responders. The locations of the homes of registered persons are pinpointed by GPS coordinates drawn from existing property tax records. Tornados have left featureless debris field that are devoid of recognizable streets and street signs. Now, first responders will be guided to the precise location of registered households by handheld GPS devices.

**Personal Preparedness:** It is critically important for all citizens to plan and prepare in advance for a local emergency. The Registry's Enrollment Kit includes detailed instructions to guide personal planning and the organization of emergency supplies.

**Community Preparedness:** Statistical reports from the Registry and GPS data will aid emergency planning. Planners will be furnished with a high-altitude view of the distribution of registered homes along with statistical reports regarding the frequency and nature of needs.

**You Should Register** if you or your loved one will require special care, attention, or additional

resources in the course of rescue, evacuation, and sheltering after a disaster. You should register if you:

**Indicators, you or your loved one:**

Rely on homemaking, personal care, or nursing visits to maintain your independence in your home or apartment.

Require life-sustaining equipment and uninterrupted electrical service.

Are medically fragile and will require special care and attention.

Have physical limitations that substantially impair mobility, strength, vision, hearing, or comprehension.

**You Should Not register** if you are fully able and usually healthy. The applicant does not reside in or is not a permanent residence in Scotts Bluff County. The applicant resides in a care facility that is protected by a disaster plan as required by State Law.

**Maintenance of Records:** To maintain highly accurate and up-to-date records, the Special Needs Registry requires registrants to update enrollment information every year or when a significant change occurs.

**All Hazards:** The Registry may be used by Scotts Bluff County Emergency Management in response to a variety of natural and man-made threats. Emergencies may include tornado, severe weather, flood, fire, power outage, toxic plume or spill, or blast threats.

**Limitations:** Registration does not guarantee that registered victims will get help first in a disaster. Search and rescue personnel must work needs as they are encountered. However, rescuers will know the exact location of registered persons and the nature of their need for additional assistance. Always call 911 in a personal emergency.

**Privacy of Personal Information:** Registration information is carefully secured and kept in the strictest confidence by Scotts Bluff County Emergency Management. Personal information will only be released on a need-to-know basis and in the event of a local emergency. Registry information will only be shared with emergency response and disaster recovery related agencies. These organizations include local law enforcement, fire, search and rescue personnel, emergency medical, health, allied human service agencies, and public utilities.

## PANHANDLE SPECIAL NEEDS REGISTRY

1. All Case Management and Waiver participants will be asked to participate. If they choose to participate, then they will be asked to complete the "PANHANDLE SPECIAL NEEDS REGISTRY ENROLLMENT AGREEMENT". The white copy will be returned to the Aging Office of Western Nebraska. The yellow copy is for the participant's records.
2. All participants must also complete the two-sided "PANHANDLE SPECIAL NEEDS REGISTRY INDIVIDUAL ENROLLMENT FORM". When this has been completed, it will be returned to the Aging Office of Western Nebraska.
3. Upon completion of both the "PANHANDLE SPECIAL NEEDS REGISTRY ENROLLMENT AGREEMENT" and the "PANHANDLE SPECIAL NEEDS REGISTRY INDIVIDUAL ENROLLMENT FORM" all participants will be given the "PANHANDLE SPECIAL NEEDS REGISTRY PRIVACY OF INFORMATION POLICY" for their records.
4. The Aging Office of Western Nebraska upon receipt of the "PANHANDLE SPECIAL NEEDS REGISTRY ENROLLMENT AGREEMENT" and "PANHANDLE SPECIAL NEEDS REGISTRY INDIVIDUAL ENROLLMENT FORM" will enter all information onto the Panhandle Health Department website (.....). The Aging Office of Western Nebraska will be listed on the website as the "Providing Organization".
5. After all information has been entered on to the Website, a copy of the "PANHANDLE SPECIAL NEEDS REGISTRY INDIVIDUAL ENROLLMENT FORM" will be filed under the participant's community (example: all Morrill participants will be filed under "Town of Morrill").
6. The original "PANHANDLE SPECIAL NEEDS REGISTRY ENROLLMENT AGREEMENT" and "PANHANDLE SPECIAL NEEDS REGISTRY INDIVIDUAL ENROLLMENT FORM" will be returned to the acting Case Manager or Service Coordinator to be included in the participant's Care Plan or Plan of Services and Support.
7. The "PANHANDLE SPECIAL NEEDS REGISTRY INDIVIDUAL ENROLLMENT FORM" will be updated annually at the time of re-assessment or when the participant's physical location (address) changes.
8. The participant's "PANHANDLE SPECIAL NEEDS REGISTRY INDIVIDUAL ENROLLMENT FORM" will be deleted from the website: 1) when they no longer wish to participate, 2) when they become permanent residents at a Long Term Care facility 3) when the participant moves from the Panhandle or 4) at the time of the participant's death.

**Panhandle Special Needs Registry**  
**Enrollment Agreement**

**Accurate Information and Expiration:** The information submitted on my Enrollment form is true and correct. I agree to keep my enrollment information up-to-date as changes occur. I understand that my enrollment in the Special Needs Registry will expire annually. I will receive an annual reminder to update my enrollment information and renew my enrollment.

**Privacy of Information:** The enrollment information submitted to the Special Needs Registry is protected and used in strict compliance with the Registry's Privacy of Information Policy. The attached policy describes how information is used, security measures, and your rights. Please carefully read the copy provided.

**Authorization to Release Information:** I have read, understand, and agree to the terms of the Privacy of Information Policy. I authorize Panhandle Special Needs Registry Emergency Management to use and release my enrollment information within the limitations and for the purposes described in the policy.

**Personal Preparedness:** I understand and agree that participation can not and does not guarantee that I will receive assistance in a local emergency. Disaster conditions are highly unpredictable. Always call 911 in an emergency. Everyone should plan and prepare to be self-sufficient for three to five days. Please carefully review and use the preparedness planning information provided.

**Release of Liability:** I hereby agree to the fullest extent permitted by law, to indemnify, defend, and Hold Harmless the Panhandle Public Health District and Scotts Bluff County Health Department, its officers, agents and employees from and against claims, damages, losses and expenses, including but not limited to attorney's fees, arising out of or resulting from performance of this Agreement, that results in any Claim for damage whatsoever, including without limitation, any bodily injury, sickness, disease, death, or any injury to or destruction of tangible or intangible property, including any loss of use resulting there from, and that are caused in whole or in part by the intentional or negligent act or omission related to the Panhandle Special Needs Registry.

**Term:** The term of this agreement shall be perpetual. I understand I may withdraw from the Special Needs Registry at any time and revoke all permissions granted by notifying the number below.

**Voluntary Agreement:** I hereby voluntarily agree to the terms herein and request to be enrolled in the Panhandle Special Needs Registry:

Registrant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Other signature, if the registrant is unable to sign: \_\_\_\_\_ Date: \_\_\_\_\_

I obtained verbal permission.  I have the legal authority, specify: \_\_\_\_\_ Initial \_\_\_\_\_

Print Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_

Mail to: Scotts Bluff County Health Department 1825 10<sup>th</sup> St, Gering, NE. 69341

Questions and Assistance: (308) 436-6636

Panhandle Special Needs Registry  
Individual Enrollment Form

I. Identifying Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Gender:  Male  Female Date of Birth (m\d\yr): \_\_\_\_ \ \_\_\_\_ \ \_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_ Unit #: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_ @ \_\_\_\_\_

II. Emergency Contacts

Primary Contact Name: \_\_\_\_\_

Relationship:  Family  Friend  Caregiver  Neighbor  Legal Guardian  
 Other or  Organization, specify: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_ @ \_\_\_\_\_

Secondary Contact Name: \_\_\_\_\_

Relationship:  Family  Friend  Caregiver  Neighbor  Legal Guardian  
 Other or  Organization, specify: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_ @ \_\_\_\_\_

III. Evacuation: If a local emergency requires you to leave your home, will you:

- go to friend or family member's home.  go to a community shelter.  
 need to go to a hospital or care facility.

Will you need transportation?  Yes  No

If yes, what type of transportation:  automobile  lift van  ambulance

III. Your Health and Circumstances:

Physician Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Please Check All that Apply, Check Marks mean Yes:

- Life-Sustaining Equipment Required
- Uninterrupted Electrical Service is Essential

Please check below the equipment that you use:

- Ventilator
- Respiratory  Diabetes
- Life Sustaining Medication
  - Cardiac  Blood Pressure
- Vision Impairment
  - Low Vision
  - Legally Blind
- Mobility Impairment
  - Walker  Wheelchair
  - Scooter  Immobile
- Speech Impairment
- Interpreter Required
  - Language: \_\_\_\_\_
- Mental or Behavioral Condition
- Supplemental oxygen
- Hearing Impairment
  - Hard of Hearing
  - Deaf
- Service Animal \_\_\_\_\_

Home Care Assistance

Monthly  Several days/week  Full time  Daily

Other: \_\_\_\_\_

IV. Describe Diagnosed Medical Conditions, Health Needs, or Needed Accommodations:

Submitted by (Name): \_\_\_\_\_

If not above Individual, check appropriate relationship:

- Relationship:  Family  Friend  Caregiver  Neighbor  Legal Guardian
- Other specify: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_ @ \_\_\_\_\_

Please return enrollment form to providing organization. You may also return by mailing to Scotts Bluff County Health Department 1825 10<sup>th</sup> Street, Gering, NE. 69341 If you have any questions, please call 308-436-6636

Office use only:

Providing Organization: \_\_\_\_\_

**Panhandle Special Needs Registry  
Privacy of Information Policy**

The Panhandle Special Needs Registry takes every precaution to protect the privacy of personal enrollment information in both written and electronic forms.

**Use of Information:** Enrollment information will only be used for the purposes of:

- \$ Advanced planning and preparedness for a local emergency.
- \$ Guiding search and rescue personnel to those who will urgently need care.
- \$ Providing appropriate medical treatment, care, and shelter.
- \$ Reuniting loved ones and care providers after the emergency.

Your name and the precise location of your residence will be shared in advance with law enforcement, fire, and search and rescue personnel to ready them to respond to an emergency.

When the Panhandle Emergency Management activates emergency operations, some or all of the enrollment information collected may be shared on a need to know basis with the organizations that will be actively responding to the emergency.

Those organizations include law enforcement, fire, search and rescue, emergency medical transportation, hospitals, health and human service agencies, and public utilities.

**Security of Personal Information:** The Panhandle Special Needs Registry does not sell, rent, or publish enrollment information. Enrollment information will not be revealed to any unaffiliated third parties for their independent use, except if required by law.

Personnel who are authorized to access enrollment information are specially trained and required to strictly adhere to procedures that protect the privacy of information.

Computer information is managed by data processing professionals and protected by all appropriate safeguards to secure the information system from any foreseeable threat to its security.

**Your Rights:** As an individual enrolled in the Special Needs Registry, you have the right to:

- \$ Examine your enrollment information to ensure it is accurate and up-to-date.
- \$ Be informed of any unauthorized violation of privacy.
- \$ Know of any changes in policy related to the privacy of your information
- \$ Withdraw from Special Needs Registry at any time and have all your enrollment information completely removed.

**If you have any questions regarding your privacy, please contact:**

Panhandle Public Health District  
Phone: (308) 262-2217

Scotts Bluff County Health Department  
Phone: (308) 436-6636

## SPECIAL NEEDS REGISTRY

### I. PURPOSE

Preparing for a disaster or serious local emergency is especially difficult and important for persons who are frail, homebound, disabled, or medically fragile.

### II. RESPONSE

The All Emergency Planning Committee, a consortium of local agencies composed of the Aging Office of Western Nebraska, Scotts Bluff County Health Department, Panhandle Public Health District, Regional West Medical Center and other Human Service Agencies have implemented the PANHANDLE SPECIAL NEEDS REGISTRY.

### III. INTENT

The Panhandle Special Needs Registry enables persons who will be more vulnerable in an emergency situation to voluntarily provide information to emergency response agencies. The result is better emergency planning and improved disaster services for persons who need additional care and consideration.

### IV. IMPLEMENTATION

The Aging Office of Western Nebraska provides vulnerable older persons the opportunity to enroll themselves in the Special Needs Registry conditioned on their knowledge and permission. They are instructed that registration does not guarantee that they will receive help first in a disaster but that the location of their residence and their need for additional assistance will be known by emergency response personnel.

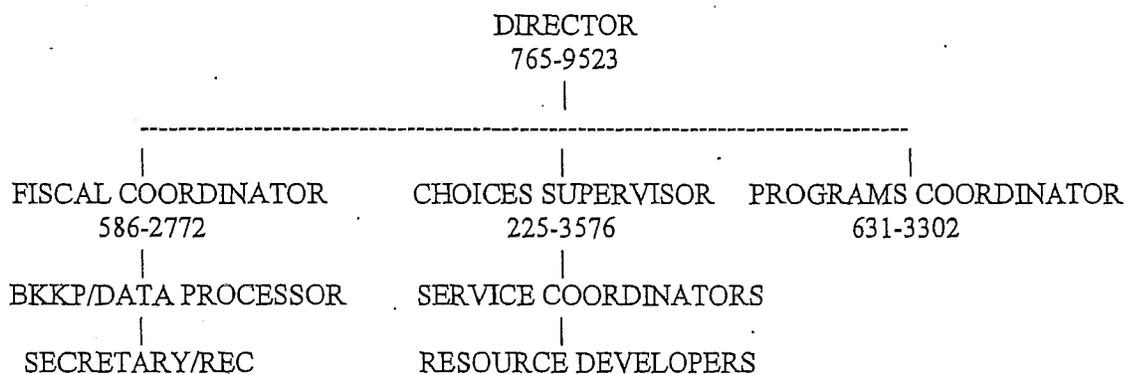
Aging Office of Western Nebraska Choices staff will assist individuals in the enrollment process and will maintain changes in registry concerning the enrolled individual. The Special Needs Registry compliments the Plan of Care enacted for the Choices clientele.

### V. PROCESS

Please review the following forms which are self explanatory for enrollment:

MEMO:  
DATE: 01/15/2015  
TO: AOWN STAFF  
FROM: CHERYL R. BRUNZ, DIRECTOR  
REF: OFFICE CLOSING PROCEDURE

In the event of a severe snowstorm, when it is deemed to dangerous for AOWN staff to travel to the office, the following telephone calling tree will be implemented. A rule of measure, which will be utilized in making the determination in closure of the office, will be the closure of the Scottsbluff/Gering Schools because of the severe weather.



Satellite offices, Chadron/Sidney, and at home Service Coordinators will use the rule of measure of their local public schools. All will notify the Director or Choices Supervisor of their closing. Nutrition sites will follow the established AOWN Nutrition Storm Days policy.

## NUTRITION STORM DAYS

In the event of inclement weather related conditions, i.e.: snow storm/blizzard, it is determined unadvisable for a nutrition site to be open for the safety of participants and staff, prior approval for closing will be obtained from the AOWN Programs Coordinator or Director.

Upon approval for closing, the Nutrition Site Manager will immediately notify the public of the closing. This will be by radio announcement or personal phone calls to the participants.

Each homebound client scheduled to receive a home delivered meal, will be contacted to assure his or her safety and well being.

Each Nutrition Site will be allowed up to two (2) approved paid snow days per year. Any closed serving days in excess of two (2) will be made up at the earliest available day or if not made up they will be a day without pay.

## EMERGENCY EVACUATION

The Aging Office of Western Nebraska is fully committed to the safety of all staff and participants as they attend the nutrition program or activities sponsored by the AOWN.

If in the event of an emergency situation, tornado, fire, or other dangerous events, which would necessitate the evacuation of the facility, all staff and participants are to follow the established evacuation plan as developed for each senior center/nutrition location. The nutrition site manager is responsible for the implementation of the evacuation plan when needed. The evacuation plan will be posted at each location and reviewed with staff and participants. All staff and participants are expected to comply with the evacuation plan as established. The AOWN can not assume responsibility for injury or death occasioned by the deliberate actions or inaction's of a participant to abide by the established emergency procedure. The participant or staff shall assume all risks of liability for his/her failure to abide by the emergency procedures as established by the AOWN.

In accordance with Section 307 (a) (8)(A) and 306 (b) of the Older Americans Act, the

Aging Office of Western Nebraska Requests delivery of the following services:

III E Family Care Giver Support	PSA-L
III B Supportive Services	PSA-L
III C-1 Congregate Nutrition (see attached)	PSA-L
III C-2 Home Delivered Nutrition (See attached)	PSA-L
III D Health Promotion	PSA-L

Justification/Reason for Request (must select one):

1. Assure an Adequate Supply of Services (Supporting documentation included)
2. Services Related to the Area Agency on Aging's Administrative Function (A written explanation included)
3. Provide Services of Comparable Quality More Economically (Supporting documentation included)
- 4 The waiver request is ongoing from year to year. A Request for Proposal was issued Date RFP published

Approval of the 2017-2019 Area Plan includes granting of the requested waiver.

#### DIRECT SERVICE PROVISION

Service Number	Area Agency on Aging	Max. Cost	Provide Service Paid by OAA Y/N
7.	Aging Office of Western Nebraska	\$934894	Y
4.	Aging Office of Western Nebraska	\$798447	Y
22.	Aging Office of Western Nebraska	\$500	Y
24.	Aging Office of Western Nebraska	\$50097	Y
19.	Aging Office of Western Nebraska	\$9200	Y
21.	Aging Office of Western Nebraska	\$25600	Y
39.	Aging Office of Western Nebraska	\$10000	Y

**AGING OFFICE OF WESTERN NEBRASKA**

1517 Broadway Suite 122  
Scottsbluff, Nebraska 69361  
Phone (308) 635-0851

January 7, 2016

Dear Editor:

Please find enclosed a Public Notice which I would like for you to publish two times, on or about the 19th and 26th of January, 2016. If your newspaper is only published weekly, please run the ad once.

Please provide us with an Affidavit of Publication for this ad.

Please submit the billing for this ad to:

Aging Office of Western Nebraska  
1517 Broadway Suite 122  
Scottsbluff, NE 69361

If you have any questions about this, please contact me.

Sincerely,



Cheryl Brunz, Director  
Aging Office of Western Nebraska

## PUBLIC NOTICE

The regular meeting of the Advisory Council of the Aging Office of Western Nebraska will be held under Nebraska's Open Meeting Laws on Monday, February 8, 2016 at 10:00 AM, in the Aging Office of Western Nebraska conference room, Suite 122, Bluffs Business Center, 1517 Broadway, Scottsbluff, NE. In conjunction with the regular meeting, beginning at 10:30 AM, a public hearing will be conducted. In compliance with the Older Americans Act, (307) (a) (8) (A) & (306) (b), public comment/proposals will be received concerning options in the community for providing delivery of III-C-1 congregate nutrition, III-C-2 home delivered nutrition, III-B supportive services, III-E family care giver support, and III-D health promotion services, all interested persons will be heard. These services are currently provided directly by the Aging Office of Western Nebraska to assure adequate supply, and to provide services related to the AOWN administrative functions. Written comment can be submitted to the Aging Office of Western Nebraska at the above address but must be received by February 5, 2016 to become part of the hearing process.

AGENDA OF MEETING  
AVAILABLE ON REQUEST

2t January 19, 20, 2016

Gering Courier  
P.O. Box 70  
Gering, NE 69341

Chappell Register  
P.O. Box 528  
Chappell, NE 69129

Chadron Record  
P.O. Box 1084  
Chadron, NE 69337

Bridgeport News Blade  
P.O. Box 400  
Bridgeport, NE 69336

Garden County News  
P.O. Box 290  
Oshkosh, NE 69154

Harrison Sun  
435 2<sup>nd</sup> Street  
Crawford, NE 69339

Bayard Transcript  
P. O. Box 626  
Bayard, NE 69334

Sheridan County Journal Star  
210 N Main Street  
Gordon, NE 69343

Alliance Times Herald  
114 E 4<sup>th</sup>  
Alliance, NE 69301

Crawford Clipper  
435 2<sup>nd</sup> Street  
Crawford, NE 69339

Western Nebraska Observer  
118 E 2<sup>nd</sup> St  
Kimball, Ne 69145

Star Herald  
P.O. Box 1709  
Scottsbluff, Ne 69361

Hemingford Ledger  
P.O. Box 7  
Hemingford, NE 69348

Sidney Sun-Telegraph  
P.O. Box 193  
Sidney, NE 69162

01/07/2016

**Public Notice**

The regular meeting of the **Advisory Council of the Aging Office of Western Nebraska** will be held under Nebraska's Open Meeting Laws on Monday, February 8, 2016 at 10:00 AM, in the Aging Office of Western Nebraska conference room, Suite 122, Bluffs Business Center, 1517 Broadway, Scottsbluff, NE. In conjunction with the regular meeting, beginning at 10:30 AM, a public hearing will be conducted. In compliance with the Older Americans Act, (307) (a) (8) (A) & (306) (b), public comment/proposals will be received concerning options in the community for providing delivery of IIC-1 congregate nutrition, IIC-2 home delivered nutrition, III-B supportive services, III-E family care giver support, and III-D health promotion services, all interested persons will be heard. These services are currently provided directly by the Aging Office of Western Nebraska to assure adequate supply, and to provide services related to the AOWN administrative functions. Written comment can be submitted to the Aging Office of Western Nebraska at the above address but must be received by February 5, 2016 to become part of the hearing process.

AGENDA OF MEETING  
AVAILABLE ON REQUEST

Pub: Jan. 21, 2016 55L

**AFFADAVIT OF PUBLICATION**

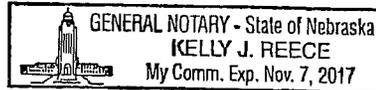
State Of Nebraska) s.s.  
County Of Garden)

Karen Westerbuhr, being first duly sworn, says that she is an employee of the GARDEN COUNTY NEWS, a legal newspaper under the laws of the State of Nebraska, published weekly in regular and entire issues of said newspaper for 1 weeks, commencing with the issue, dated, January 21, 2016 and ending with the issue dated, January 21, 2016

Karen Westerbuhr  
Signature

Subscribed and sworn before me this 21 day of January 2016

Kelly J. Reece  
Notary Public



Publication Fees \$ 25.30

Affidavit of Publication  
STATE OF NEBRASKA  
SS  
COUNTY OF MORRILL

Alisha Siebenthal, being first duly sworn, deposes and says that she is the editor of the Bayard Transcript, a legal newspaper, published at Bayard, Morrill County, Nebraska and of general circulation in said County and State, and that a notice copy of which is hereby attached, entitled:

Notice of meeting

was published in issue of every number of the paper (not a supplement) during the period of publication, for two consecutive week(s), the first insertion having been made January 24, 2016 and the last insertion on January 27, 2016.

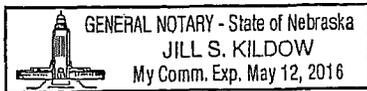
Number of lines/inches: 51

Publisher's Fee: 34.75

Alisha Siebenthal  
Signature

Subscribed in my presence and sworn to before me this 28<sup>th</sup> day of January, 2016

Jill S Kildow  
Notary



**NOTICE OF MEETING**  
The regular meeting of the Advisory Council of the

**NOTICE OF MEETING**  
The regular meeting of the Advisory Council of the Aging Office of Western Nebraska will be held under the Nebraska's Open Meeting Laws on Monday, February 8, 2016 at 10:00 a.m., in the Aging Office of Western Nebraska conference room, Suite 122, Bluffs Business Center, 1517 Broadway, Scotts-bluff, Nebraska. In conjunction with the regular meeting, beginning at 10:30 a.m., a public hearing will be conducted. In compliance with the Older Americans Act, (307) (a) (8) (A) & (305) (b), public comment/proposals will be received concerning options in the community for providing delivery of IIC-1 congregate nutrition, IIC-2 home delivered all interested persons will be heard. These services are currently provided directly by the Aging Office of Western Nebraska to assure adequate supply, and to provide services related to the AOWN administrative functions. Written com-

# Affidavit of Publication

BOX BUTTE COUNTY }  
STATE OF NEBRASKA } SS.

Tom Shaal, being first duly sworn, deposes and says that he is the Publisher of the Alliance Times-Herald, a legal newspaper, under the statutes of the State of Nebraska, published in Box Butte County; that said newspaper circulation in Box Butte County and that to his personal knowledge, the notice, a true copy of which is here to annexed, was published in said newspaper for 2 week on the following dates:

January 19 and 26, 2016

*Tom Shaal*  
\_\_\_\_\_

Subscribed in my presence and sworn to before me this

\_\_\_\_\_ 26 day of January, 2016

Fee \$ 32.12 \_\_\_\_\_ *Marilyn Harris*  
Notary Public

Federal I.D. Number 47-0368289

GENERAL NOTARY - State of Nebraska  
MARILYN HARRIS  
My Comm. Exp. January 11, 2016

GENERAL NOTARY - State of Nebraska  
MARILYN HARRIS  
My Comm. Exp. January 11, 2020

**NOTICE OF MEETING**  
The regular meeting of the Advisory Council of the Aging Office of the Aging Office of Western Nebraska will be held under Nebraska's Open Meeting Laws on Monday, February 8, 2016 at 10:00 A.M., in the Aging Office of Western Nebraska conference room, Suite 122, Bluffs Business Center, 1517 Broadway, Scottsbluff, NE. In conjunction with the regular meeting, beginning at 10:30 A.M., a public hearing will be conducted. In compliance with the Older Americans Act; (307) (a) (8) (A) & (306) (b), public comment/proposals will be received concerning options in the community for providing delivery of IIC-1 congregate nutrition, IIC-2 home delivered nutrition, III-B supportive services, III-E family care giver support, and III-D health promotion services, all interested persons will be heard. These services are currently provided directly by the Aging Office of Western Nebraska to assure adequate supply, and to provide services related to the AOWN administrative functions. Written comment can be submitted to the Aging Office of Western Nebraska at the above address but must be received by February 5, 2016 to become part of the hearing process. Agenda of meeting available on request.  
PUBLISH: January 19, and 26, 2016 ZNEZ

**PROOF OF PUBLICATION**

STATE OF NEBRASKA }  
COUNTY OF DEUEL } SS.

Amount \$ 10.40

Date Paid .....

I, Michael D. Talbott, hereby certify that I am publisher of The Chappell Register, a legal weekly newspaper, of general circulation, published in said Deuel County and State of Nebraska; and further certify that the notice, of which the one attached is a true copy, was published in the regular and entire issue of each number of the said The Chappell

Register for ..... consecutive issues, the first publication being

on the 21<sup>st</sup> day of Jan 2016

and the last publication being on the ..... day of

..... 20 .....

SUBSCRIBED in my presence and sworn to before me this 21<sup>st</sup> day of Jan 2016

Linda M. Walmsley  
NOTARY PUBLIC



**PUBLIC NOTICE**

The regular meeting of the Advisory Council of the Aging Office of Western Nebraska will be held under Nebraska's Open Meeting Laws on Monday, February 8, 2016, at 10:00 AM, in the Aging Office of Western Nebraska conference room, Suite 122, Bluffs Business Center, 1517 Broadway, Scottsbluff, NE. In conjunction with the regular meeting, beginning at 10:30 AM, a public hearing will be conducted. In compliance with the Older Americans Act, (307) (a) (8) (A) & (306) (b), public comment/ proposals will be received concerning options in the community for providing delivery of IIC-1 congregate nutrition, IIC-2 home delivered nutrition, III-B supportive services, III-E family care giver support, and III-D health promotion services, all interested persons will be heard. These services are currently provided directly by the Aging Office of Western Nebraska to assure adequate supply, and to provide services related to the AOWN administrative functions. Written comment can be submitted to the Aging Office of Western Nebraska at the above address but must be received by February 5, 2016 to become part of the hearing process. Agenda of meeting available on request. 46L  
Pub: January 21, 2016

ning at 10:30 AM, a pubic hearing will be conducted. In compliance with the Older Americans Act; (207) (a) (8) (A) & (306) (b), public comment/proposals will be received concerning options in the community for providing delivery of IIIC-1 congregate nutrition, IIIC-2 home delivered nutrition, III-B supportive services, III-E family care giver support, and III-D health promotion services, all interested persons will beheard. These services are currently provided directly by the Aging Office of Western Nebraska to assure adequate supply, and to provide services related to the AOWN administrative functions. Written comment can be submitted to the Aging Office of Western Nebraska at the above address but must be received by February 5, 2016 to become part of the hearing process.

L546

Public Notice

The regular meeting of the Advisory Council of the Aging Office of Western Nebraska will be held under Nebraska's Open Meeting Laws on Monday, February 8, 2016 at 10:00 AM, in the Aging Office of Western Nebraska conference room, Suite 122, Bluffs Business Center, 1517 Broadwa, Scottsbluff, NE. In conjunction with the regular meeting, begin-

AGENDA OF MEETING AVAILABLE ON REQUEST. [Published In The Sidney Sun-Telegraph on January 19 & 26, 2016]

AFFIDAVIT OF PUBLICATIO

The undersigned, being duly sworn deposes and says that he is a Principal Clerk of the SIDNEY SUN-TELEGRAPH, a daily newspaper of general circulation in Cheyenne County, State of Nebraska, and that a notice entitled:

Public Notice of Meeting a true copy of which is hereto attached and made a part hereof, was published in said newspaper 2 consecutive week

the first publication having been made the 19 day of January 2016

and the last publication having been made the 26 day of January 2016

that said newspaper has been published daily in the English language at the City of Sidney, within said county and state, for more than fifty-two consecutive weeks, immediately prior to the first date of publication above, and everyday successively since that day, and during all said times has had and now has a bona fide circulation of more than 300 copies weekly and during all said time has been and now is printed in whole or in part in an office maintained by the Publishers at the said place of publication.

[Handwritten signature]

\*\*\*\*\*

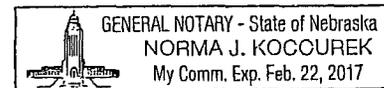
Subscribed in my presence and sworn to before me

this 20th day of January, 2016

[Handwritten signature] Notary Public

My commission expires 12/31/2017

(SEAL)



Publication fees \$ 32.22

date

**PROOF OF PUBLICATION**

**STATE OF NEBRASKA**

**}SS**

**COUNTY OF DAWES**

**PUBLIC NOTICE**

The regular meeting of the Advisory Council of the Aging Office of Western Nebraska will be held under Nebraska's Open Meeting Laws on Monday, February 8, 2016, at 10:00 a.m., in the Aging Office of Western Nebraska conference room, Suite 122, Bluffs Business Center, 1517 Broadway, Scottsbluff, NE, in conjunction with the regular meeting, beginning at 10:30 a.m., a public hearing will be conducted. In compliance with the Older Americans Act, (307) (a) (8) (A) & (306) (b), public comment/proposals will be received concerning options in the community for providing delivery of IIC-1 congregate nutrition, IIC-2 home delivered nutrition, III-B supportive services, III-E family care giver support, and III-D health promotion services, all interested persons will be heard. These services are currently provided directly by the Aging Office of Western Nebraska to assure adequate supply, and to provide services related to the AOWN administrative functions. Written comment can be submitted to the Aging Office of Western Nebraska at the above address but must be received by February 5, 2016, to become part of the hearing process.

AGENDA OF MEETING  
AVAILABLE ON REQUEST  
No. 463 ZNEZ

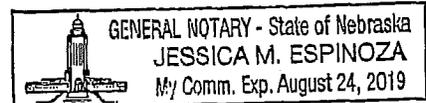
I, Diane Clark, publisher of the Crawford Clipper/Harrison Sun, being first duly sworn, on my oath, depose and say: That The Crawford Clipper/Harrison Sun is a weekly legal newspaper for the publication of legal and other official notices, printed and published at Crawford, in Dawes County, Nebraska, with general circulation in both Dawes and Sioux Counties, among others, in the English Language, and having a bona fide circulation of at least three hundred copies weekly, and which said the Crawford Clipper/Harrison Sun has been published within said county of Dawes for more than fifty-two successive weeks prior to the publication of the attached notice, and printed in an office maintained at Crawford, the place of publication, and that I have personal knowledge of the fact of the publication of said notice as hereafter specified:

That a legal notice, of which the annexed is a printed copy, cut from the said Crawford Clipper/Harrison Sun and to which reference is hereby made as part of this affidavit, was regularly published in said weekly newspaper once each week

for one successive week(s), the first of said weekly publications have been so made in said newspaper on the 20<sup>th</sup> day of January, 2016; and the last of said weekly publications having been made in said newspaper on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_; that the said notice was published in the regular and entire issue of every number of said newspaper during the period of time of publication; and that said notice was published in the newspaper, and not in the supplement.

Diane M Clark

Subscribed in my presence and sworn to before me this 20<sup>th</sup> day of January A.D., 2016.



Jessica M Espinoza  
Notary Public

Printer's Publication Fee \$ 1440

Paid by \_\_\_\_\_



**AFFIDAVIT OF PUBLICATION**

The Hemingford Ledger  
PO Box 7  
Hemingford, NE 69348

State of Nebraska  
County of Box Butte ) ss.

*Jennifer Harms*

I, \_\_\_\_\_ do solemnly swear that I am the Accounts Receivable Bookkeeper of the Hemingford Ledger, a legal newspaper of general circulation, published weekly at Hemingford, Box Butte County, Nebraska; that the notice hereto attached and which forms a part of this affidavit was Published in said paper I (one)

consecutive week (s) in the issues published, respectively January 21, 2016

\_\_\_\_\_ that said notice was published in the regular and entire issues and every number of the paper on the days mentioned, the same being the corresponding day of each week during the period of time of publication and that said notice was published in the newspaper proper and not in the supplement.

*Jennifer Harms*

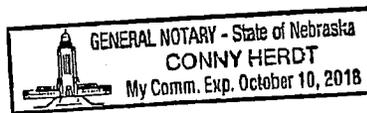
SUBSCRIBED in my presence and sworn to before me on Jan 20, 2016

*Conny Herdt*

Notary Public

The publication fees amount to \$ 18.00

**2AGING**



**NOTICE OF MEETING  
and PUBLIC HEARING  
Advisory Council of the  
Aging Office of Western  
Nebraska**

**February 8, 2016**

The regular meeting of the Advisory Council of the Aging Office of Western Nebraska will be held under Nebraska's Open Meeting Laws on Monday, February 8, 2016 at 10:00 AM, in the Aging Office of Western Nebraska conference room, Suite 122, Bluffs Business Center, 1517 Broadway, Scottsbluff, NE. In conjunction with the regular meeting, beginning at 10:30 AM, a public hearing will be conducted. In compliance with the Older Americans Act, (307) (a) (8) (A) & (306) (b), public comment/proposals will be received concerning options in the community for providing delivery of IIIC-1 congregate nutrition, IIIC-2 home delivered nutrition, III-B supportive services, III-E family care giver support, and III-D health promotion services. All interested persons will be heard. These services are currently provided directly by the Aging Office of Western Nebraska to assure adequate supply, and to provide services related to the AOWN administrative functions. Written comment can be submitted to the Aging Office of Western Nebraska at the above address but must be received by February 5, 2016 to become part of the hearing process.

**AGENDA OF MEETING AVAILABLE ON REQUEST.**

1P: January 21, 2016

**AFFIDAVIT OF PUBLICATION**

State of Nebraska, }  
Morrill County } §:

**PUBLIC NOTICE**

The regular meeting of the Advisory Council of the Aging Office of Western Nebraska will be held under Nebraska's Open Meeting Laws on Monday, February 8, 2016, at 10:00 AM, in the Aging Office of Western Nebraska conference room, Suite 122, Bluffs Business Center, 1517 Broadway, Scottsbluff, NE. In conjunction with the regular meeting, beginning at 10:30 AM, a public hearing will be conducted. In compliance with the Older Americans Act, (307) (a) (8) (A) & (306) (b), public comment/proposals will be received concerning options in the community for providing ( ) y of IIC-1 congregate nutrition, IIC-2 home delivered nutrition, III-B supportive services, III-E family care giver support, and III-D health promotion services, all interested persons will be heard. These services are currently provided directly by the Aging Office of Western Nebraska to assure adequate supply, and to provide services related to the AOWN administrative functions. Written comment can be submitted to the Aging Office of Western Nebraska at the above address but must be received by February 5, 2016 to become part of the hearing process. Agenda of meeting available on request.

J20

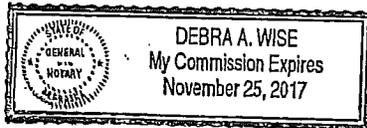
Beverly Erickson, being first duly sworn, deposes and says that she is the Secretary of the BRIDGEPORT NEWS-BLADE, a legal newspaper published at Bridgeport, Morrill County, Nebraska, and of general circulation in said county and state; and that a notice, a copy of which is hereunto attached, entitled Public Notice, Aging Office of Western Nebraska, was published in said paper, in the regular and entire issue of every number of the paper (not a supplement) during the period of publication, for One consecutive weeks, the first insertion having been made on January 20, 2016 and the last insertion made on January 20, 2016.

**Printer's Fee \$14.40**

Beverly Erickson

Subscribed in my presence and sworn to before me this 20th day of January, 2016.

Debra A. Wise



**AFFIDAVIT OF PUBLICATION**

Gering Courier  
PO Box 70  
Gering, NE 69341

State of Nebraska  
County of Scotts Bluff } ss.

I, Jennifer Harms do solemnly swear that I am the Accounts Receivable Bookkeeper of the Gering Courier, a legal newspaper of general circulation, published weekly at Gering, Scotts Bluff County, Nebraska; that the notice hereto attached and which forms a part of this affidavit was Published in said paper 1 (one) consecutive week (s) in the issues published, respectively January 21, 2016

that said notice was published in the regular and entire issues and every number of the paper on the days mentioned, the same being the corresponding day of each week during the period of time of publication and that said notice was published in the newspaper proper and not in the supplement.

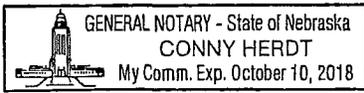
*Jennifer Harms*

SUBSCRIBED in my presence and sworn to before me on Jan. 21, 2016

*Conny Herdt*  
Notary Public

The publication fees amount to \$ 50.00

AGING - 53940649



**PUBLIC NOTICE**  
The regular meeting of the Advisory Council of the Aging Office of Western Nebraska will be held under Nebraska's Open Meeting laws on Monday, February 8, 2016 at 10:00 AM, in the Aging Office of Western Nebraska conference room, Suite 122, Bluffs Business Center, 1517 Broadway, Scottsbluff, NE. In conjunction with the regular meeting, beginning at 10:30 AM, a public hearing will be conducted. In compliance with the Older Americans Act, (307) (a) (6) (A) & (306) (b), public comment/proposals will be received concerning options in the community for providing delivery of IIC-1 congregate nutrition, IIC-2 home delivered nutrition, IIC-B supportive services, IIC-E family care giver support, and IIC-D health promotion services, all interested persons will be heard. These services are currently provided directly by the Aging Office of Western Nebraska to assure adequate supply, and to provide services related to, the AWON administrative functions. Written comment can be submitted to the Aging Office of Western Nebraska at the above address but must be received by February 6, 2016 to become part of the hearing process.

**AGENDA OF MEETING AVAILABLE ON REQUEST**  
Published in the Gering Courier  
Gering, Nebraska  
11. January 21, 2016

**PUBLIC NOTICE**

The regular meeting of the Advisory Council of the Aging Office of Western Nebraska will be held under Nebraska's Open Meeting Laws on Monday, February 8, 2016 at 10:00 AM, in the Aging Office of Western Nebraska conference room, Suite 122, Bluffs Business Center, 517 Broadway, Scottsbluff, NE. In conjunction with the regular meeting, beginning at 10:30 AM, a public hearing will be conducted. In compliance with the Older Americans Act, (307) (a) (8) (A) & (306) (b), public comment/proposals will be received concerning options in the community for providing delivery of IIIC-1 congregate nutrition, IIIC-2 home delivered nutrition, III-B supportive services, III-E family care giver support, and III-D health promotion services, all interested persons will be heard. These services are currently provided directly by the Aging Office of Western Nebraska to assure adequate supply, and to provide services related to the AOWN administrative functions. Written comment can be submitted to the Aging Office of Western Nebraska at the above address but must be received by February 5, 2016 to become part of the hearing process.

AGENDA OF MEETING  
AVAILABLE ON REQUEST  
#7723 January 21, 2016

**AFFIDAVIT OF PRINTER**

STATE OF NEBRASKA }  
}SS.  
COUNTY OF KIMBALL

I, Dawn Fossard, being duly sworn and under oath, say that I am an employee of Western Nebraska Observer, Company (a corporation), publishers of Western Nebraska Observer, an English Language weekly newspaper published in Kimball, Nebraska, with general circulation in both Kimball and Banner Counties, among others. I certify that said newspaper is a legal newspaper under the statutes of Nebraska, has a bona fide weekly circulation of at least 300, has been published at least 52 weeks prior to publication of this notice, that it holds a second class postage permit; and that to my personal knowledge, the attached clipping was printed in the regular and entire issue of the Western Nebraska Observer (and not in any supplement thereof) for one (1) week(s), beginning with the issue dated:

January 21, 2016  
and ending with the issue dated:

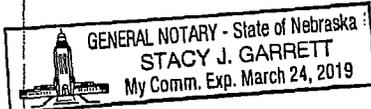
January 21, 2016  
Dawn Fossard

Signed  
Subscribed and sworn to before me this:

21<sup>st</sup> day of January, 2016

Stacy J. Garrett  
Notary Public

Printer's fees  
\$ 17.60



Western Nebraska Observer • 118 E. 2nd • Kimball, NE 69145 (308)235-3631

**PROOF OF PUBLICATION  
STATE OF NEBRASKA  
COUNTY OF DAWES**

I, Kerri Rempp, editor of the Chadron Record, being first duly sworn, on my oath, depose and say that the Chadron Record is a weekly legal newspaper for the publication of legal and other official notices, printed and published at Chadron, in Dawes County, Nebraska in the English language and having a bonafide circulation of at least three hundred copies weekly and which said Chadron Record has been published within said county of Dawes County for more than fifty-two successive weeks prior to the publication of the attached notice, and printed in an office maintained in Chadron, the place of publication, and that I have personal knowledge of the fact of the publication of said notice as hereafter specified.

That a legal notice of which the annexed is a printed copy, cut from the said Chadron Record and to which reference is hereby made as part of this affidavit was regularly published in said weekly newspaper once each week for 1 successive weeks, the first of said weekly publications having been so made in said newspaper on the 20 day of Jan, 2016; and the last of said weekly publications having been so made in said newspaper on the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_; that the said notice was published in the regular and entire issue of every number of said newspapers during the time of publication; and that said published in the newspaper, and not in the supplement.

Kerri Rempp

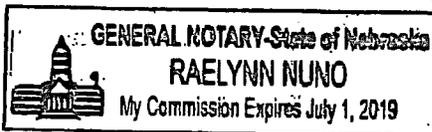
Subscribed in my presence and sworn to before me this

20 day of Jan, A.D., 2016.

Rae Lynn Nuno Notary Public

Printer's Fee \$ 16<sup>20</sup>

Paid by \_\_\_\_\_



748

**PUBLIC NOTICE**

The regular meeting of the Advisory Council of the Aging Office of Western Nebraska will be held under Nebraska's Open Meeting Laws on Monday, February 8, 2016 at 10:00 AM, in the Aging Office of Western Nebraska Conference room, Suite 122, Bluffs Business Center, 1517 Broadway, Scottsbluff, NE. In conjunction with the regular meeting, beginning at 10:30 AM, a public hearing will be conducted.

In compliance with the Older Americans Act, (307)(a)(8)(A) & (306)(b), public comment/proposals will be received concerning options in the community for providing delivery of III-C-1 congregate nutrition, III-C-2 home delivered nutrition, III-B supportive services, III-E family care giver support, and III-D health promotion services, all interested persons will be heard. These services are currently provided directly by the Aging Office of Western Nebraska to assure adequate supply, and to provide services related to AOWN administrative function. Written comment can be submitted to the Aging Office of Western Nebraska at the above address but must be received by February 5, 2016 to become part of the hearing process.

AGENDA OF MEETING  
AVAILABLE UPON REQUEST

Publish Jan. 20, 2016

**Affidavit of Publication**

State of Nebraska

County of Sheridan

Mark Gaschler, being, first duly sworn, on oath, says: That he/she is an employee of Sandhills Publishing, Inc., and that the **Sheridan County Journal Star** is, a weekly newspaper published once each week in Gordon, Sheridan County, Nebraska, and of general circulation in said county and state, and that the annexed notice/ad, Aging Office of Western Nebraska Public Notice February 8, 2016, was published in said paper for 1 successive week(s) to wit:

**January 20, 2016**

And that said Sheridan County Journal Star was a legal newspaper under the statutes of the State of Nebraska at the times and during the period that said notice was published. Fee **\$15.64**

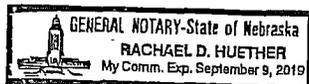
Signed: \_\_\_\_\_

*Mark Gaschler*

Subscribed and sworn to before me this 20th day of January, 2016.

*Rachael D. Huether*

Notary Public



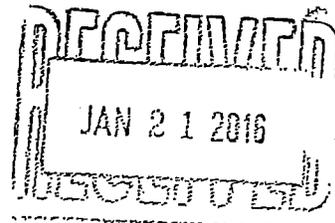
# Public Notice

Aging Office of Western Nebraska Meeting, February 8, 2016

The regular meeting of the Advisory Council of the Aging Office of Western Nebraska will be held under Nebraska's Open Meeting Act on Monday, February 8, 2016, at 10:00 a.m., in the Aging Office of Western Nebraska conference room, Suite 122, Bluffs Business Center, 1517 Broadway, Scottsbluff, NE. In conjunction with the regular meeting, beginning at 10:30 a.m., a public hearing will be conducted. In compliance with the Older American Act, (307)(a)(8)(A) & (306)(b), public comment/proposals will be received concerning options in the community for providing delivery of IIC-1 congregate nutrition, IIC-2 home delivered nutrition, III-B supportive services, III-E family care giver support, and III-D health promotion services, all interested persons will be heard. These services are currently provided directly by the Aging Office of Western Nebraska to assure adequate supply, and to provide services related to the AOWN administrative functions. Written comment can be submitted to the Aging Office of Western Nebraska at the above address but must be received by February 5, 2016, to become part of the hearing process.

Agenda of meeting available on request.

Published: January 20, 2016



**AFFIDAVIT OF PUBLICATION**

Star Herald  
PO Box 1709  
Scottsbluff, NE 69363

State of Nebraska  
County of Scotts Bluff ) ss.

I, Jennifer Harms do solemnly swear that I am the Accounts Receivable Bookkeeper of the Star-Herald, a legal newspaper of general circulation, published daily except Mondays, at Scottsbluff, Scotts Bluff County, Nebraska; that the notice hereto attached and which forms a part of this affidavit was Published in said paper 2 (two)

consecutive week (s) in the issues published, respectively January 19, 20, 2016

that said notice was published in the regular and entire issues and every number of the paper on the days mentioned, the same being the corresponding day of each week during the period of time of publication and that said notice was published in the newspaper proper and not in the supplement.

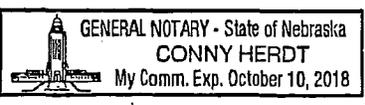
*Jennifer Harms*

SUBSCRIBED in my presence and sworn to before me on Jan 20, 2016

*Conny Herdt*  
Notary Public

The publication fees amount to \$ 34.37

AGNGOF - 53940392



**PUBLIC NOTICE**  
The regular meeting of the Advisory Council of the Aging Office of Western Nebraska will be held under Nebraska's Open Meeting Laws on Monday, February 8, 2016 at 10:00 AM, in the Aging Office of Western Nebraska conference room, Suite 122, Bluffs Business Center, 1517 Broadway, Scottsbluff, NE. In Conjunction with the regular meeting, beginning at 10:30 AM, a public hearing will be conducted. In compliance with the Older Americans Act, (307) (a) (9) (A) & (306) (b), public comment/proposals will be received concerning options in the community for providing delivery of IIIC-1 congregate nutrition, IIIC-2 home delivered nutrition, III-B supportive services, III-E family care giver support, and III-D health promotion services, all interested persons will be heard. These services are currently provided directly by the Aging Office of Western Nebraska to assure adequate supply, and to provide services related to the AWON administrative functions. Written comment can be submitted to the Aging Office of Western Nebraska at the above address but must be received by February 5, 2016 to become part of the hearing process.  
AGENDA OF MEETING AVAILABLE ON REQUEST  
Published in the Star-Herald, Scottsbluff, Nebraska  
21. January 19, 20, 2016

AGENDA

AGING OFFICE OF WESTERN NEBRASKA

1517 Broadway, Suite 122

Scottsbluff, NE 69361

Advisory Council Annual Meeting

Conference Room

Bluffs Business Center

**February 8, 2016– 10:00 AM**

\* \* \* \* 10:30 A.M. PUBLIC HEARING \* \* \* \*

- I. Call to Order  
THE MEETING OF THE ADVISORY COUNCIL OF THE AGING OFFICE OF WESTERN NEBRASKA HELD THIS 8th DAY OF FEBRUARY, 2016 AS PREVIOUSLY ADVERTIZED PUBLICLY IN THE STAR HERALD & PSA-L AREA NEWSPAPERS ON JANUARY 19th AND 20th IS NOW CALLED TO ORDER. THIS MEETING IS BEING HELD UNDER THE OPEN MEETING ACT.  
ROLL CALL.
- II. Welcome new members
- III. Approval of agenda.
- IV. Approval of minutes (January 2016)
- V. Announcements
  - a) Units of Service
- VI. Old Business
  - a) Budget fiscal year 17 suggestions and requests
  - b) Maximus
  - c) Approval of budget revision
  - d) CM recertification
- VII. New Business
  - a) \*\*\*\*Public hearing on direct service waiver request
  - b) Approval of new members
  - c) Election of officers
  - d) Approval of Direct Service Waiver
- VIII. Advisory Council Reports

MINUTES

AGING OFFICE OF WESTERN NEBRASKA  
1517 BROADWAY, SUITE 122  
SCOTTSBLUFF, NEBRASKA

ADVISORY COUNCIL ANNUAL MEETING  
PUBLIC HEARING FOR DIRECT SERVICE WAIVER

Bluffs Business Center  
Suite 122 Conference Room

February 8, 2016

\* \* \*

I. Call to Order (Roll Call).

Roll Call as follows:

Banner	Sharon Sandberg	Present
Box Butte	Gordon Smith	Present
Cheyenne	Charlotte Dorwart	Present
Dawes	June Winget	Present
Deuel	Fauneil Johnson	Excused
Garden	Lucille Cooper	Present
Kimball	Rosalee Lewellen	Present
Morrill	Judy Oltmann	Present
Scotts Bluff	Larry Heppner	Present
Sheridan	Leota (Odey) Ray	Excused
Sioux	Lona Thayer	Excused

As eight members answered roll call, quorum present and meeting officially in session.

Also present were Nolene Lattin, AOWN Fiscal Coordinator and Roseanne Loseke, AOWN Bookkeeper, acting as clerk.

VII. New Business

a) Public Hearing on Direct Service Waiver Request

At 10:30 A.M. Lucille Cooper made a motion to go into Public Hearing on Direct Service Waiver Request. Second by June Winget. ROLL CALL: AYES: Dawes, Banner, Garden, Morrill, Scotts Bluff, Kimball, Cheyenne Box Butte. NAYES: None. ABSENT: Sioux, Sheridan, Deuel. Motion carried.

Vice-Chairman Gordon Smith read the Public Notice:

The regular meeting of the Advisory Council of the Aging Office of Western Nebraska will be held under Nebraska's Open Meeting Laws on Monday, February 8, 2016 at 10:00 AM, in the Aging Office of Western Nebraska conference room, Suite 122, Bluffs Business Center, 1517 Broadway, Scottsbluff, NE. In conjunction with the regular meeting, beginning at 10:30 AM, a public hearing will be conducted. In compliance with the Older Americans act, (307)(a)(8) (A) & (306)(b), public comment/proposals will be received concerning options in the community for providing delivery of III-C-1 congregate nutrition, III-C-2 home delivered nutrition, III-B supportive services, III-E family care giver support and III-D health promotion services, all interested persons will be heard. These services are currently provided directly by the Aging Office of Western Nebraska to assure adequate supply, and to provide services related to the AOWN administrative functions. Written comment can be submitted to the Aging Office of Western Nebraska at the above address but must be received by February 5, 2016 to become part of the hearing process.

This Public Hearing is for 3 years.

No public was present and no comments were received.

At 10:35 AM, Judy Oltman made a motion to come out of the public hearing. Second by Rosalee Lewellen. ROLL CALL: AYES: Banner, Box Butte, Cheyenne, Dawes, Garden, Kimball, Morrill, Scotts Bluff. NAYES: None. ABSENT: Deuel, Sheridan, Sioux. Motion carried.

d) Approval of Direct Service Waiver

After discussion Charlotte Dorwart made a motion to recommend to the Governing Board to approve the Direct Service Waiver for 3 years. Seconded by Judy Oltmann. ROLL CALL: AYES: Cheyenne, Box Butte, Scotts Bluff, Dawes, Garden, Morrill, Banner, Kimball. NAYES: None. ABSENT: Deuel, Sheridan, Sioux. Motion carried.

**2016 AOWN NUTRITION SITES & MANAGERS  
DIRECT SERVICE**

Alliance Senior Center  
212 Yellowstone  
Alliance NE 69301  
Sharon Woods  
308-762-8774

Bayard Senior Center  
511 Main  
Bayard NE 69334  
Shirley Logsdon  
308-586-1966

Bridgeport Senior Center  
Prairie Winds Community Center  
424 N Main/P O Box 640  
Bridgeport NE 69336  
Sharon Myers  
308-262-1868

Senior Citizens Community Center  
251 Pine Street  
Chadron NE 69337  
Sheila Motz  
308-432-2734

Chappell Senior Center  
245 Matlock - P O Box 241  
Chappell NE 69129  
Cindy Wilber  
308-874-2954

Dawes County Senior Center  
404 2<sup>nd</sup> St  
Crawford NE 69339  
Karen Serres  
308-665-1515

Gering Senior Center  
2005 Depot  
Gering NE 69341  
Eva Rameriz  
308-436-3233

Sunshine Senior Center  
ATTN: Katie Reece  
420 White Rock Road  
Harrison NE 69346  
Katie Reece  
308-668-2261

Hay Springs Senior Center  
125 N Main  
Hay Springs NE 69347  
Peggy Tlustos  
308-638-4534

Hemingford Nutrition Site  
517 Niobrara - P O Box 713  
Hemingford NE 69348  
Linda Luce  
308-487-5550

Gordon Senior Center  
113 East 3<sup>rd</sup> - P O Box 24  
Gordon NE 69343  
Betty Lorenz  
308-282-2939

Friendship Senior Center  
107 S Oak  
Kimball NE 69145  
Eileen Rowlee  
308-235-4505

## INDIRECT SERVICE

Mitchell Senior Center  
1257 Center Ave  
Mitchell NE 69357  
Shirley Smith  
308-623-1145

Morrill Manor  
P O Box 235  
Morrill NE 69358  
Shirley Swenson  
308-247-3323

Oshkosh Senior Center  
303 Main Street – P O Box 95  
Oshkosh NE 69154  
Pam Fornander  
308-772-3400

Rushville Senior Center  
210 South Main Street – P O Box 545  
Rushville NE 69360  
Joyce Sones/Dorothy Nyffler  
308-327-2061

Scottsbluff Senior Center  
1502 21<sup>st</sup> Ave – P O Box 467  
Scottsbluff NE 69361  
Karen Heth  
308-635-0263

Cheyenne County Community Center  
627 Toledo St  
Sidney NE 69162  
Judith Schaefer  
308-254-4835

Banner County School  
Harrisburg NE 69345  
Sharon Lease, Secretary  
308-436-5262

Lewellen Tigers Den  
504 West Hwy 26  
Lewellen NE 69147  
Garnett Storer  
308-778-6670

## Services Related to the Aging Office Administrative Function

Services that fall into this category for the AOWN's administrative function is education & training for all staff, volunteers, and caregivers. Central office staff have minimum monthly training for in house staff, and nutrition staff is trained quarterly with updated information given monthly. Caregivers are given the opportunity to participate in "Powerful Tools For Caregivers" that is given by Central office staff. Volunteers are given the opportunity to participate in refreshing knowledge of different topics monthly.

Public information is for any organization or group that requests that we give a presentation. Included but not limited to Iris Society, Veterans group, Rotary, Lions, Elks, American Legion, Assisted livings, nursing homes, Daughters of the American Revolution, nutrition education at senior centers, education at the Spring Wellness Festival, Red Hat Society and church groups, etc.

General information is given as the AOWN has a live person answering all phone calls providing the needed unbiased information that is requested. Included but not limited to Social Security Information, Disability Information, DHHS application questions, DHHS guidelines, DHHS payment questions, DHHS questions on making contact rather than automated system, aging questions that the children have, Medicaid Waiver information, Medicaid information, nursing home placement information, Medicare supplement insurance questions, information on making contact with various support groups, etc.

All of our Advisory and Governing board meetings are conducted thru the open meetings law with publication notices printed monthly in the local newspapers. We print thousands of brochures for our agency annually that are given to the general public.

If the AOWN contracted out all services the lines of communication would be less effective and the general population would have to listen to an automated system. The population that we serve are very thankful that we have a live person answering the phone and that is why we are contacted by people for various questions about different agencies.

## CODE OF ETHICS FOR AOWN EMPLOYEES

1. Employees shall not hold financial interests that conflict with the performance of their official duties.
2. Employees shall not engage in financial transactions using non-public governmental information nor allow the improper use of such information to further any private interest.
3. Employees shall not, except as may be otherwise provided by regulation, solicit or accept any gift or other item of monetary value from any person or entity seeking official action from, doing business with, or conducting activities regulated by the employees' agency or department, or whose interests may be substantially affected by the performance or non-performance of the employees' duties.
4. Employees shall not use public office for private gain.
5. Employees shall act impartially and not give preferential treatment to any organization or individual.
6. Employees shall protect and preserve AOWN property and shall not use it for unauthorized activities.
7. Employees are expected to disclose waste, fraud and corruption to appropriate authorities.
8. Employees shall adhere to all laws and regulations including those that mandate equal opportunity and treatment, regardless of race, color, religion, sex including pregnancy, national origin, age (40 or older) disability, genetic information, military status, veterans preference, or any other prohibited basis of discrimination under applicable local, state, and federal law.

## Assurances

The Area Agency on Aging assures and certifies, with respect to this area plan that it will comply with all applicable federal and state regulations or laws as they relate to this application. It will also comply with all of the following pages of assurances and certifications. Signing of the signature page and initialing and dating each page of the assurances indicates acceptance of these assurances and certifications.

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### Assurances required by the Older Americans Act of 1965, as amended in 2006

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The Area Agency on Aging agrees that it shall:

Requirement: OAA 306(a)(2)

Assurance: Provide assurances that an adequate proportion, as required under Section 307(a)(2), of the amount allotted for Part B to the Planning and Service Area will be expended for the delivery of each of the following categories of services:

- services associated with access to services (transportation, health services (including mental health services) outreach, information and assistance (which may include information and assistance to consumers on availability of services under part B and how to receive benefits under and participate in publicly supported programs for which the consumer may be eligible), and case management services);
- in-home services, including supportive services for families of older individuals who are victims of Alzheimer's disease and related disorders with neurological and organic brain dysfunction; and
- legal assistance ; the Area Agency on Aging will report annually to the State agency in detail the amount of funds expended for each such category during the fiscal year most recently concluded.

Requirement: OAA 306(a)(4)(A)(i)

Assurance: Provide assurances that will (aa) set specific objectives, consistent with State policy, for providing services to older individuals with greatest economic need, older individuals with greatest social need, and older individuals at risk for institutional placement; (bb) include specific objectives for providing services to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas; and include proposed methods of carrying out the preference in the area plan.

Requirement: OAA 306(a)(4)(ii)

Assurance: Provide assurances that in each agreement made with a provider of any service under this title, a requirement that such provider:

- specify how the provider intends to satisfy the service needs of low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in the area served by the provider;
- to the maximum extent feasible, provide services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in accordance with their need for such services; and
- meet specific objectives established by the Area Agency on Aging, for providing services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas within the planning and service area.

Requirement: OAA 306(a)(4)(A)(iii)

Assurance: With respect to the fiscal year preceding the fiscal year for which such plan is prepared:

- identify the number of low-income minority older individuals in the planning and service area;
- describe the methods used to satisfy the service needs of such minority older individuals; and
- provide information on the extent to which the Area Agency on Aging met the objectives described in clause (a)(4)(A)(i).

Requirement: OAA 306(a)(4)(B)

Assurance: Provide assurances that outreach efforts will identify individuals eligible for assistance under this Act, with special emphasis on:

- older individuals residing in rural areas;
- older individuals with greatest economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas);
- older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas);
- older individuals with severe disabilities;
- older individuals with limited English proficiency;
- older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals);
- older individuals at risk for institutional placement; and inform the older individuals referred to in A. through F., and the caretakers of such individuals, of the availability of such assistance.

Requirement: OAA 306(a)(4)(C)

Assurance: Provide assurance that each activity undertaken by the agency, including planning, advocacy, and systems development, will include a focus on the needs of low-income minority older individuals and older individuals residing in rural areas.

Requirement: OAA 306(a)(5)

Assurance: Provide assurances that it will coordinate planning, identification, assessment of needs, and provision of services for older individuals with disabilities, with particular attention to individuals with severe disabilities, and individuals at risk for institutional placement, with agencies that develop or provide services for individuals with disabilities.

Requirement: OAA 306(a)(8)

Assurance: Provide that case management services provided under this act through the Area Agency on Aging will:

- not duplicate case management services provided through other Federal and State programs;
- be coordinated with services described in subparagraph A; and
- be provided by a public agency or a nonprofit private agency that:
  - gives each older individual seeking services under this act a list of agencies that provide similar services within the jurisdiction of the Area Agency on Aging;
  - give each individual described in clause (i) a statement specifying that the individual has a right to make an independent choice of service providers and documents receipt by such individual of such statement;

- o has case managers acting as agents for the individuals receiving the services and not as promoters for the agency providing such services; or
- o is located in a rural area and obtains a waiver of the requirements described in clauses (i) through (iii).

Requirement: OAA 306(a)(9)

Assurance: Provide assurances that in carrying out the State Long-Term Care Ombudsman Program under Section 307(a)(9), it will expend not less than the total amount of funds appropriated under this Act and expended by the agency in fiscal year 2000 in carrying out such a program under this title.

Requirement: OAA 306(a)(11)

Assurance: Provide information and assurances concerning services to older individuals who are Native Americans (referred to in this paragraph as "older Native Americans"), including:

- o information concerning whether there is a significant population of older Native Americans in the planning and service area, if so, an assurance that the area agency on aging will pursue activities, including outreach, to increase access of those older Native Americans to programs and benefits provided under this title;
- o an assurance that the Area Agency on Aging will, to the maximum extent practicable, coordinate the services the agency provides under this title with services provided under Title VI; and
- o an assurance that the Area Agency on Aging will make services under the area plan available, to the same extent as such services are available to older individuals within the planning and service area, to older Native Americans.

Requirement: OAA 306(a)(13)(A)

Assurance: Provide assurances that it will maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships.

Requirement: OAA 306(a)(13)(B)

Assurance: Provide assurances that it will disclose to the Assistant Secretary and the State agency:

- the identity of each non-governmental entity with which such agency has a contract or commercial relationship relating to providing any service to older individuals; and
- the nature of such contract or such relationship.

Requirement: OAA 306(a)(13)(C)

Assurance: Provide assurances that it will demonstrate that a loss or diminution in the quantity or quality of the services provided, or to be provided, under this title by such agency has not resulted and will not result from such contracts or such commercial relationships.

Requirement: OAA 306(a)(13)(D)

Assurance: Provide assurances that it will demonstrate that the quantity or quality of the services to be provided under this title by such agency will be enhanced as a result of such contracts or such relationships.

Requirement: OAA 306(a)(13)(E)

Assurance: Provide assurances that it will, on the request of the Assistant Secretary or the State, for the purpose of monitoring compliance with this Act (including conducting an audit), disclose all sources and expenditures of funds such agency receives or expends to provide services to older individuals.

Requirement: OAA 306(a)(14)

Assurance: Provide assurances that preference in receiving services under this title will not be given by the Area Agency on Aging to particular older individuals as a result of a contract or commercial relationship that is not carried out to implement this title.

Requirement: OAA 306(a)(15)

Assurance: Provide assurances that funds received under this act will be used;

- to provide benefits and services to older individuals, giving priority to older individuals identified in paragraph (4)(A)(i); and
- in compliance with the assurances specified in paragraph (13) and the limitations specified in section 212.

Older Americans Act

- The Nebraska Department of Health & Human Services - State Unit on Aging (SUA) assures through the area agencies on aging:

Requirement: OAA 305(c)(5)

- Assurance: In the case of a State specified in subsection (b)(5), the State agency and the Area Agency on Aging shall provide assurance, determined adequate by the State agency, that the area agency on aging will have the ability to develop an area plan and to carry out, directly or through contractual or other arrangements, a program in accordance with the plan within the planning and service area.

Requirement: OAA 307(a)(3)(B)(i)

- Assurance: The plan shall with respect to services for older individuals residing in rural areas; (i) provide assurances that the State agency will spend for each fiscal year, not less than the amount expended for such services for fiscal year 2000.

Requirement: OAA 307(a)(7)(B)

- Assurance:
  - (i) No individual (appointed or otherwise) involved in the designation of the State agency or Area Agency on Aging, or in the designation of the head of any subdivision of the State agency or of an Area Agency on Aging, is subject to a conflict of interest prohibited under this chapter;
  - (ii) No officer, employee, or other representative of the State agency or Area Agency on Aging is subject to a conflict of interest prohibited under this chapter; and
  - (iii) Mechanisms are in place to identify and remove conflicts of interest prohibited under this chapter.

Requirement: OAA 307(a)(11)

- Assurance: The area agencies on aging will:
  - (A) (i) enter into contracts with providers of legal assistance which can demonstrate the experience or capacity to deliver legal assistance;
  - (ii) include in any such contract provisions to assure that any recipient of funds under division will be subject to specific restrictions and regulations promulgated under the Legal Services Corporation Act (other than restrictions and regulations governing eligibility for legal assistance under such Act and governing membership of local governing boards) as determined appropriate by the Assistant Secretary; and

- (iii) attempt to involve the private bar in legal assistance activities authorized under this act, including groups within the private bar furnishing services to older individuals on a pro bono and reduced fee basis;
- (B) Assure that no legal assistance will be furnished unless the grantee administers a program designed to provide legal assistance to older individuals with social or economic need and has agreed, if the grantee is not a Legal Services Corporation project grantee, to coordinate its services with existing Legal Services Corporation projects in the planning and service area in order to concentrate the use of funds provided under this act on individuals with the greatest such need; and the Area Agency on Aging makes a finding, after assessment, pursuant to standards for service promulgated by the Assistant Secretary, that any grantee selected is the entity best able to provide the particular services.
- (D) To the extent practicable, that legal services furnished under the plan will be in addition to any legal services for older individuals being furnished with funds from sources other than this act and that reasonable efforts will be made to maintain existing levels of legal services for older individuals;
- (E) Area Agency on Aging will give priority to legal assistance related to income, health care, long-term care, nutrition, housing, utilities, protective services, defense of guardianship, abuse, neglect, and age discrimination.

## Requirement: OAA 307(a)(12)

- Assurance: Whenever the State desires to provide for a fiscal year for services for the prevention of abuse of older individuals:
- A). Any Area Agency on Aging carrying out such services will conduct a program consistent with relevant State law and coordinated with existing State adult protective service activities for:
  - (i) public education to identify and prevent abuse of older individuals;
  - (ii) receipt of reports of abuse of older individuals;
  - (iii) active participation of older individuals participating in programs under this act through outreach, conferences, and referral of such individuals to other social service agencies or sources of assistance where appropriate and consented to by the parties to be referred;
  - (iv) referral of complaints to law enforcement or public protective service agencies where appropriate.
- B). The State will not permit involuntary or coerced participation in the program of services described in this paragraph by alleged victims, abusers, or their households; and
- C). All information gathered in the course of receiving reports and making referrals shall remain confidential unless all parties to the complaint consent in writing to the release of such information, except that such information may be released to a law enforcement or public protective service agency.

## Requirement: OAA 307(a)(15)

- Assurance: If a substantial number of the older individuals residing in any planning and service area in the State are of limited English speaking ability, then the State will require the Area Agency on Aging for each such planning and service area:
- (A) to utilize, in the delivery of outreach services under section 3026(a)(2)(A) of this act, the services of workers who are fluent in the language spoken by a predominant number of such older individuals who are of limited English speaking ability; and

- (B) to designate an individual employed by the Area Agency on Aging, or available to such Area Agency on Aging on a full-time basis, whose responsibilities will include;
- (i) taking such action as may be appropriate to assure that counseling assistance is made available to such older individuals who are of limited English speaking ability in order to assist such older individuals in participating in programs and receiving assistance under this act; and
- (ii) providing guidance to individuals engaged in the delivery of supportive services under the area plan involved to enable such individuals to be aware of cultural sensitivities and to take into account effectively linguistic and cultural differences.

Requirement: OAA 307(a)(26)

- Assurance: Funds received under this act will not be used to pay any part of a cost (including an administrative cost) incurred by the State agency or an Area Agency on Aging to carry out a contract or commercial relationship that is not carried out to implement this act.

Requirement: OAA 307(a)(27)

- Assurance: Area Agency on Aging will provide, to the extent feasible, for the furnishing of services under this Act, consistent with self-directed care.

Requirement: OAA 304(b)(5)(d)(1)(A)

- Assurance: From any State or Area Agency on Aging's allotment, after the application of section 308(b) of this act, under this section for any fiscal year, such amount as the State agency determines, but not more than 10 percent thereof, shall be available for paying such percentage as the agency determines, but not more than 75 percent, of the cost of administration of area plans.

Requirement: OAA 304(b)(5)(d)(1)(D)

- Assurance: The remainder of such allotment shall be available to such State only for paying such percentage as the State agency determines, but not more than 85 percent of the cost of supportive services, senior centers, and nutrition services under this act provided in the State as part of a comprehensive and coordinated system in planning and service areas for which there is an area plan approved by the State agency.

Requirement: OAA 339 Nutrition

- Assurance: A State or Area Agency on Aging that establishes and operates a nutrition project under this chapter shall:
  - 1) solicit the advice of a dietitian or individual with comparable expertise in the planning of nutritional services, and
  - 2) ensure that the project -
    - (A) provides meals that -
      - (i) comply with the Dietary Guidelines for Americans, published by the Secretary and the Secretary of Agriculture,
      - (ii) provide to each participating older individual -
        - (I) a minimum of 33 1/3 percent of the daily recommended dietary allowances as established by the Food and Nutrition Board of the Institute of Medicine of the National Academy of Sciences, if the project provides one meal per day,
        - (II) a minimum of 66 2/3 percent of the allowances if the project provides two meals per day, and
        - (III) 100 percent of the allowances if the project provides three meals per day, and
        - (iii) to the maximum extent practicable, are adjusted to meet any special dietary needs of program participants,

- (B) provides flexibility to local nutrition providers in designing meals that are appealing to program participants,
- (C) encourages providers to enter into contracts that limit the amount of time meals must spend in transit before they are consumed,
- (D) where feasible, encourages arrangements with schools and other facilities serving meals to children in order to promote intergenerational meal programs,
- (E) provides that meals, other than in-home meals, are provided in settings in as close proximity to the majority of eligible older individuals' residences as feasible,
- (F) comply with applicable provisions of State or local laws regarding the safe and sanitary handling of food, equipment, and supplies used in the storage, preparation, service, and delivery of meals to an older individual,
- (G) ensures that meal providers carry out such project with the advice of dietitians (or individuals with comparable expertise), meal participants, and other individuals knowledgeable with regard to the needs of older individuals,
- (H) ensures that each participating Area Agency on Aging establishes procedures that allow nutrition project administrators the option to offer a meal, on the same basis as meals provided to participating older individuals, to individuals providing volunteer services during the meal hours, and to individuals with disabilities who reside at home with and accompany older individuals eligible under this act,
- (I) ensures that nutrition services will be available to older individuals and to their spouses, and may be made available to individuals with disabilities who are not older individuals but who reside in housing facilities occupied primarily by older individuals at which congregate nutrition services are provided, and
- (J) provide for nutrition screening and, where appropriate, for nutrition education and counseling.
- (K) encourages individuals who distribute nutrition services under subpart 2 to provide, to homebound older individuals, available medical information approved by health care professionals, such as informational brochures and information on how to get vaccines, including vaccines for influenza, pneumonia, and shingles, in the individuals' communities.

## Requirement: OAA 361

- Assurance: (a) The Assistant Secretary shall carry out a program for making grants to States under State plans approved under section 307 of this act to provide disease prevention and health promotion services and information at multipurpose senior centers, at congregate meal sites, through home delivered meals programs, or at other appropriate sites. In carrying out such program, the Assistant Secretary shall consult with the Directors of the Centers for Disease Control and Prevention and the National Institute on Aging.
- (b) The Assistant Secretary shall, to the extent possible, assure that services provided by other community organizations and agencies are used to carry out the provisions of this part.

## Requirement: OAA 362 Distribution to Area Agency on Aging

- Assurance: The State agency shall give priority, in carrying out this part, to areas of the State:
  - (1) which are medically underserved; and
  - (2) in which there are a large number of older individuals who have the greatest economic need for such services.

## Code of Federal Regulations - Title 45 - Public Welfare

## § 1321.5 Applicability of other regulations

Several other regulations apply to all activities under this part. These include but are not limited to:

- (a) 45 CFR part 16 - Procedures of the Departmental Grant Appeals Board;
- (b) 45 CFR part 74 - Administration of Grants, except subpart N;
- (c) 45 CFR part 80 - Nondiscrimination under Programs Receiving Federal Assistance through the Department of Health & Human Services: Effectuation of title VI of the Civil Rights Act of 1964;
- (d) 45 CFR part 81 - Practice and Procedures for Hearings Under Part 80 of this title;
- (e) 45 CFR part 84 - Nondiscrimination on the Basis of Handicap in Programs and Activities Receiving or Benefiting from Federal Financial Participation;
- (f) 45 CFR part 91 - Nondiscrimination on the Basis of Age in HHS Programs or Activities Receiving Federal Financial Assistance;
- (g) 45 CFR part 92 - Uniform Administrative Requirements for Grants Cooperative Agreements to State and Local Governments;
- (h) 45 CFR part 100 - Intergovernmental Review of Department of Health & Human Services Programs and Activities; and
- (i) 5 CFR part 900, subpart F, Standards for a Merit System of Personnel Administration.

## § 1321.17(f)(8) Content of State Plan

The State agency will require area agencies on aging to arrange for outreach at the community level that identifies individuals eligible for assistance under this Act and other programs, both public and private, and informs them of the availability of assistance. The outreach efforts shall place special emphasis on reaching older individuals with the greatest economic or social needs with particular attention to low income minority individuals, including outreach to identify older Indians in the planning and service area and inform such older Indians of the availability of assistance under the Act.

## § 1321.53 Mission of the Area Agency on Aging

(j) The Older Americans Act intends that the Area Agency on Aging shall be the leader relative to all aging issues on behalf of all older persons in the planning and service area. This means that the area agency shall proactively carry out, under the leadership and direction of the State agency, a wide range of functions related to advocacy, planning, coordination, inter-agency linkages, information sharing, brokering, monitoring and evaluation, designed to lead to the development or enhancement of comprehensive and coordinated community based systems in, or serving, each community in the planning and service area. These systems shall be designed to assist older persons in leading independent, meaningful and dignified lives in their own homes and communities as long as possible.

- (k) A comprehensive and coordinated community based system described in paragraph (a) of this section shall:
  - 1) Have a visible focal point of contact where anyone can go or call for help, information or referral on any aging issue;
  - 2) Provide a range of options;
  - 3) Assure that these options are readily accessible to all older persons; the independent, semi-dependent and totally dependent, no matter what their income;
  - 4) Include a commitment of public, private, voluntary and personal resources committed to supporting the system;
  - 5) Involve collaborative decision-making among public, private, voluntary, religious and fraternal organizations and older people in the community;
  - 6) Offer special help or targeted resources for the most vulnerable older persons, those in danger of losing their independence;

- 7) Provide effective referral from agency to agency to assure that information or assistance is received, no matter how or where contact is made in the community;
- 8) Evidence sufficient flexibility to respond with appropriate individualized assistance, especially for the vulnerable older person;
- 9) Have a unique character which is tailored to the specific nature of the community;
- 10) Be directed by leaders in the community who have the respect, capacity and authority necessary to convene all interested persons, assess needs, design solutions, track overall success, stimulate change and plan community responses for the present and for the future.

(c) The resources made available to the Area Agency on Aging under the Older Americans Act are to be used to finance those activities necessary to achieve elements of a community based system set forth in paragraph (b) of this section. For the purpose of assuring access to information and services for older persons, the Area Agency on Aging shall work with elected community officials in the planning and service area to designate one or more focal points on aging in each community, as appropriate. The area agency shall list designated focal points in the area plan. It shall be the responsibility of the area agency, with the approval of the State agency, to define "community" for the purposes of this section. Since the Older Americans Act defines focal point as a "facility" established to encourage the maximum collocation and coordination of services for older individuals, special consideration shall be given to developing and/or designating multi-purpose senior centers as community focal points on aging. The Area Agency on Aging shall assure that services financed under the Older Americans Act in, or on behalf of, the community will be either based at, linked to or coordinated with the focal points designated. The Area Agency on Aging shall assure access from the designated focal points to services financed under the Older Americans Act. The area agency on aging shall work with, or work to assure that community leadership works with, other applicable agencies and institutions in the community to achieve maximum collocation at, coordination with or access to other services and opportunities for the elderly from the designated community focal points. The area agency may not engage in any activity which is inconsistent with its statutory mission prescribed in the Act or policies prescribed by the State under § 1321.11.

§ 1321.61 Advocacy responsibilities of the Area Agency on Aging.

- (a) The area agency shall serve as the public advocate for the development or enhancement of comprehensive and coordinated community-based systems of services in each community throughout the planning and service area.
- (b) In carrying out this responsibility, the area agency shall:
  - (1) Monitor, evaluate, and, where appropriate, comment on all policies, programs, hearings, levies, and community actions which affect older persons
  - (2) Solicit comments from the public on the needs of older persons;
  - (3) Represent the interests of older persons to local level and executive branch officials, public and private agencies, or organizations;
  - (4) Consult with and support the State's Long-Term Care Ombudsman Program; and
  - (5) Undertake on a regular basis activities designed to facilitate the coordination of plans and activities with all other public and private organizations, including units of general purpose local government, with responsibilities affecting older persons in the planning and service area to promote new or expanded benefits and opportunities for older persons; and
- (c) Each Area Agency on Aging shall undertake a leadership role in assisting communities throughout the planning and service area to target resources from all appropriate sources to meet the needs of older persons with greatest economic or social need, with particular attention to low income minority individuals. Such activities may include location of services and specialization in the types of services most needed by these groups to meet this requirement. However, the area agency may not permit a grantee or contractor under this part to employ a means test for services funded under this part.

(d) No requirement in this section shall be deemed to supersede a prohibition contained in the Federal appropriation on the use of Federal funds to lobby the Congress; or the lobbying provision applicable to private non-profit agencies and organizations contained in OMB Circular A-122.

§ 1321.65(b) Responsibilities of service providers under area plans.

(b) Specify how the provider intends to satisfy the service needs of low income minority individuals in the area served, including attempting to provide services to low income minority individuals at least in proportion to the number of low income minority older persons in the population serviced by the provider.

§ 1321.69 Service priority for frail, homebound or isolated elderly.

(a) Persons age 60 or over who are frail, homebound by reason of illness or incapacitating disability, or otherwise isolated, shall be given priority in the delivery of services under this part.

(b) The spouse of the older person, regardless of age or condition, may receive a home-delivered meal if, according to criteria determined by the area agency, receipt of the meal is in the best interest of the homebound older person.

#### Code of Federal Regulations Title 29 Labor

§ 94.200 Requirements for Drug Free Workplace

There are two general requirements if you are a recipient other than an individual.

(a) First, you must make a good faith effort, on a continuing basis, to maintain a drug free workplace. You must agree to do so as a condition for receiving any award covered by this act. The specific measures that you must take in this regard are described in more detail in subsequent sections of this act. Briefly, those measures are to:

- (1) Publish a drug free workplace statement and establish a drug free awareness program for your employees; and
- (2) Take actions concerning employees who are convicted of violating drug statutes in the workplace.

(b) Second, you must identify all known workplaces under your Federal awards.

§ 29 U.S.C. 201 Fair Labor Standards Act

SUBJECT: Joint employment of home care workers in consumer-directed, Medicaid-funded programs by public entities under the Fair Labor Standards Act.

In the Final Rule, Application of the Fair Labor Standards Act to Domestic Service, 78 FR 60454 (Oct. 1, 2013),<sup>1</sup> the Department modified the "third party employment" regulation, 29 CFR 552.109, to prohibit third party employers of domestic service employees—i.e., employers other than the individuals receiving services or their families or households—from claiming the companionship services exemption from minimum wage and overtime or the live-in domestic service employee exemption from overtime. 78 FR at 60480-85.2

Private agencies, non-profit organizations, or public entities<sup>3</sup> may be third party joint employers of domestic service employees, and in particular home care workers, under the Fair Labor Standards Act (FLSA or "the Act"), 29 U.S.C. 201 et seq. Although the Final Rule did not change any of the longstanding case law or the Department's guidance about joint employment, the regulatory changes prohibiting third party employers from claiming the companionship services and live-in domestic service employee exemptions will require each public or private agency that administers or participates in a consumer-directed, Medicaid-funded home care program to evaluate whether it is an employer under the FLSA.

## The Lobbying Disclosure Act of 1995

109 Stat. 703-Public Law 104-65

## Sec. 18. Exempt Organizations.

An organization described in section 501(c)(4) of the Internal Revenue Code of 1986 which engages in lobbying activities shall not be eligible for the receipt of Federal funds constituting an award, grant, contract, loan, or any other form.

Disclosure of Lobbying Activities Form - LLL

To access the Disclosure of Lobbying Activities Form - LLL the web address is,  
[www.whitehouse.gov/omb/grants/sflll.pdf](http://www.whitehouse.gov/omb/grants/sflll.pdf).

## Assurances - Non-Construction Programs

Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

1. Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 CFR 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (PL 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age
7. Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (PL 92-255), as amended relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (PL 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee 3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental, or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.

8. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (PL 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
9. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
10. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally assisted construction sub agreements.
11. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (PL 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
12. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (PL 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (PL 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (PL 93-205).
13. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
14. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.)
15. Will comply with PL 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
16. Will comply with the Laboratory Animal Welfare Act of 1966 (PL 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
17. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
18. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
19. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.

## Nebraska Revised Statutes

## Section 81-8,240 Terms, Defined.

(1) Administrative agency shall mean any department, board, commission, or other governmental unit, any official, any employee of the State of Nebraska acting or purporting to act by reason of connection with the State of Nebraska, any corporation, partnership, business, firm, governmental entity, or person who is providing health and human services to individuals or service delivery, service coordination, or case management under contract with the State of Nebraska and who is subject to the jurisdiction of the office of Public Counsel as required by section 73-401, any regional behavioral health authority, any community-based behavioral health services provider that contracts with a regional behavioral health authority, and any county or municipal correctional or jail facility and employee thereof acting or purporting to act by reason of connection with the county or municipal correctional or jail facility; but shall not include (a) any court, (b) any member or employee of the Legislature or the Legislative Council, (c) the Governor or his or her personal staff, (d) any political subdivision or entity thereof except a county or municipal correctional or jail facility or a regional behavioral health authority, (e) any instrumentality formed pursuant to an interstate compact and answerable to more than one state, or (f) any entity of the federal government; and

(2) Administrative act shall include every action, rule, regulation, order, omission, decision, recommendation, practice, or procedure of an administrative agency.

## Section 81-8,254 Violations; Penalty; State Employee; Complaint; Effect.

A person who willfully obstructs or hinders the proper exercise of the Public Counsel's functions, or who willfully misleads or attempts to mislead the Public Counsel in his inquiries, shall be guilty of a Class II misdemeanor. No employee of the State of Nebraska, who files a complaint pursuant to sections 81-8,240 to 81-8,254, shall be subject to any penalties, sanctions, or restrictions in connection with his employment because of such complaint.

Section 81-2219 Area Agency on Aging; Chief Executive Officer and Staff; Qualifications; Personnel Policies. Each Area Agency on Aging governing unit shall establish minimum qualifications of education, training, and experience for its chief executive officer and written policies and procedures for the selection, appointment, and annual performance rating of its chief executive officer and staff.

## Section 81-2220 Area Agency on Aging; Duties

An Area Agency on Aging shall:

- (1) Monitor, evaluate, and comment on policies, programs, hearings, and community actions which affect older individuals;
- (2) Conduct public hearings, studies, and assessments on the needs of older individuals living in the planning and service area;
- (3) Represent the interests of older individuals to public officials and to public and private agencies or organizations;
- (4) Cooperate, coordinate, and plan with other agencies, organizations, or individuals to promote benefits and opportunities for older individuals consistent with the goals of the Nebraska Community Aging Services Act and the Older Americans Act, as now or hereafter amended;
- (5) Develop a one-year and a four-year area plan and budget for a comprehensive, coordinated program of community aging services needed by older individuals of the area and consistent with the requirements of the Nebraska Community Aging Services Act and the Older Americans Act, as now or hereafter amended;
- (6) Monitor and evaluate the activities of service providers to ensure that the services being provided comply with the terms of the grant or contract. When a provider is found to be in breach of the

terms of its grant or contract, the Area Agency on Aging shall enforce the terms of the grant or contract;

- (7) Comply with rules, regulations, and requirements of the department which have been developed in consultation with the area agencies on aging for client and fiscal information and provide to the department information necessary for federal and state reporting, program evaluation, program management, fiscal control, and research needs; and
- (8) Provide technical assistance to service providers as needed, prepare written monitoring reports, and provide written reports of onsite assessments of all service providers funded by the Area Agency on Aging according to the rules and regulations promulgated by the department.

#### Title 15 - Nebraska Department of Health & Human Services State Unit on Aging

##### Chapter 1 - Nebraska Community Aging Services Act

001.07U - Plan amendment. Amendments to the Area Plan and Budget must be approved by the State Unit on Aging prior to implementation. Implementation of an amendment without prior approval shall constitute non-compliance and may be cause for withdrawal of designation.

001.07U1 - Amendments to Area Plans and Budgets. Any request for approval of amendment must be accompanied by:

- 1) Reason for the requested change;
- 2) Proposed amended budget;
- 3) Proposed amended level of service or goals and objectives;
- 4) Any pages of the Annual Plan and Budget (and the Area Plan and Budget) that are altered as a result of the changes; and
- 5) Records of public hearings on any changes which are substantial or which adjust scope or direction.

##### Chapter 2 - Care Management Units

These rules and regulations implement Neb. Rev. Stat. Sec. 81-2229 - Sec. 81-2236, R.R.S. 1943 (the Act) which directs the establishment of a statewide system of Care Management Units through the Area Agencies on Aging.

##### Chapter 3 - Long-Term care Ombudsman Program

These rules and regulations implement Nebraska Revised Statutes Section 81-2237 to 81-2264, which directs the establishment of a statewide long-term care ombudsman program. Other authorities for the program are: (1) Older Americans Act of 1965, as amended, 42 U.S.C. 3001 et seq., specifically, 42 U.S.C. Sections 3058f-3058h; (2) 42 CFR Sections 483.10 through 483.13; and (3) The Nebraska Nursing Home Act, Rev. Statutes of Nebraska, Article 60, Section 71-6019.

##### Chapter 4 - Senior Companion Volunteer Program

These regulations govern the Senior Companion Volunteer Program. The regulations are authorized by and implement the Nebraska Senior Companion Volunteer Program Act, Neb. Rev. Stat. Sections 81-2273 to 81-2283, and Section 81-2210.

#### Code of Federal Regulations - Title 49 - Part 29 - Appendix A - Certification Regarding Debarment, Suspension, and Other Responsibility Matters - Primary Covered Transactions

(1) The Area Agency on Aging certifies to the best of its knowledge and belief, that it and its principals to the following:

- (a) Are not presently debarred, suspended, proposed for debarment declared ineligible, or voluntarily excluded from covered transactions by any federal department or agency;

(b) Have not within a three-year period preceding this proposal been convicted or had a civil judgment rendered against them for commission of fraud or criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of record, making false statements, or receiving stolen property.

(c) Are not presently indicated or otherwise criminally or civilly charged by a government entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and

(d) Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.

Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

OMB Circular A-129 - Appendix 3 - Certification of Non-Delinquency on Federal Debt

Assurance: Not delinquent on any Federal debt.

Each Attestation page requires an initial & date.

 Initials 3/14/16 Date  
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