SECTION I

SUPPLEMENTAL DOCUMENTATION

(K) protection from elder abuse, neglect, and exploitation; and

(L) any other service as determined by such agency.

(c) Each State, in approving area agency on aging plans under this section, shall waive the requirement described in paragraph (2) of subsection (a) for any category of services described in such paragraph if the area agency on aging demonstrates to the State agency that services being furnished for such category in the area are sufficient to meet the need for such services in such area and had conducted a timely public hearing upon request.

(d)(1) Subject to regulations prescribed by the Assistant Secretary, an area agency on aging designated under section 305(a)(2)(A) or, in areas of a State where no such agency has been designated, the State agency, may enter into agreement with agencies administering programs under the Rehabilitation Act of 1973, and titles XIX and XX of the Social Security Act for the purpose of developing and implementing plans for meeting the common need for transportation services of individuals receiving benefits under such Acts and older individuals participating in programs authorized by this title.

(2) In accordance with an agreement entered into under paragraph (1), funds appropriated under this title may be used to purchase transportation services for older individuals and may be pooled with funds made available for the provision of transportation services under the Rehabilitation Act of 1973, and titles XIX and XX of the Social Security Act.

(e) An area agency on aging may not require any provider of legal assistance under this title to reveal any information that is protected by the attorney-client privilege.

(f)(1) If the head of a State agency finds that an area agency on aging has failed to comply with Federal or State laws, including the area plan requirements of this section, regulations, or policies, the State may withhold a portion of the funds to the area agency on aging available under this title.

(2)(A) The head of a State agency shall not make a final determination withholding funds under paragraph (1) without first affording the area agency on aging due process in accordance with procedures established by the State agency.

(B) At a minimum, such procedures shall include procedures for—

(i) providing notice of an action to withhold funds;

(ii) providing documentation of the need for such action; and

(iii) at the request of the area agency on aging, conducting a public hearing concerning the action. (3)(A) If a State agency withholds the funds, the State agency may use the funds withheld to directly administer programs under this title in the planning and service area served by the area agency on aging for a period not to exceed 180 days, except as provided in subparagraph (B).

(B) If the State agency determines that the area agency on aging has not taken corrective action, or if the State agency does not approve the corrective action, during the 180-day period described in subparagraph (A), the State agency may extend the period for not more than 90 days.

PEL Initials 3-21-19 Date

(16) provide, to the extent feasible, for the furnishing of services under this Act, consistent with self-directed care; and

(17) include information detailing how the area agency on aging will coordinate activities, and develop long-range emergency preparedness plans, with local and State emergency response agencies, relief organizations, local and State governments, and any other institutions that have responsibility for disaster relief service delivery.

(b)(1) An area agency on aging may include in the area plan an assessment of how prepared the area agency on aging and service providers in the planning and service area are for any anticipated change in the number of older individuals during the 10-year period following the fiscal year for which the plan is submitted.

(2) Such assessment may include—

(A) the projected change in the number of older individuals in the planning and service area;

(B) an analysis of how such change may affect such individuals, including individuals with low incomes, individuals with greatest economic need, minority older individuals, older individuals residing in rural areas, and older individuals with limited English proficiency;

(C) an analysis of how the programs, policies, and services provided by such area agency can be improved, and how resource levels can be adjusted to meet the needs of the changing population of older individuals in the planning and service area; and

(D) an analysis of how the change in the number of individuals age 85 and older in the planning and service area is expected to affect the need for supportive services.

(3) An area agency on aging, in cooperation with government officials, State agencies, tribal organizations, or local entities, may make recommendations to government officials in the planning and service area and the State, on actions determined by the area agency to build the capacity in the planning and service area to meet the needs of older individuals for—

(A) health and human services;

(B) land use;

(C) housing;

(D) transportation;

(E) public safety;

(F) workforce and economic development;

(G) recreation;

(H) education;

(I) civic engagement;

(J) emergency preparedness;

(B) 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

(C) 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; and

(12) provide that the area agency on aging will establish procedures for coordination of services with entities conducting other Federal or federally assisted programs for older individuals at the local level, with particular emphasis on entities conducting programs described in section 203(b) within the planning and service area.

(13) provide assurances that the area agency on aging will—

(A) maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships;

(B) disclose to the Assistant Secretary and the State agency—

(i) the identity of each nongovernmental entity with which such agency has a contract or commercial relationship relating to providing any service to older individuals; and

(ii) the nature of such contract or such relationship;

(C) 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 contract or such relationship;

(D) 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 contract or such relationship; and

(E) 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;

(14) 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;

(15) provide assurances that funds received under this title will be used—

(A) to provide benefits and services to older individuals, giving priority to older individuals identified in paragraph (4)(A)(i); and

(B) in compliance with the assurances specified in paragraph (13) and the limitations specified in section 212;

behavioral changes intended to reduce the risk of injury, disease, and disability among older individuals; and

(D) providing for the availability and distribution (through public education campaigns, Aging and Disability Resource Centers, the area agency on aging itself, and other appropriate means) of information relating to—

(i) the need to plan in advance for long-term care; and

(ii) the full range of available public and private long-term care (including integrated long-term care) programs, options, service providers, and resources;

(8) provide that case management services provided under this title through the area agency on aging will—

(A) not duplicate case management services provided through other Federal and State programs;

(B) be coordinated with services described in subparagraph (A); and

(C) be provided by a public agency or a nonprofit private agency that—

(i) gives each older individual seeking services under this title a list of agencies that provide similar services within the jurisdiction of the area agency on aging;

(ii) gives 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;

(iii) has case managers acting as agents for the individuals receiving the services and not as promoters for the agency providing such services; or

(iv) is located in a rural area and obtains a waiver of the requirements described in clauses (i) through (iii);

(9) provide assurances that the area agency on aging, in carrying out the State Long-Term Care Ombudsman program under section 307(a)(9), 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;

(10) provide a grievance procedure for older individuals who are dissatisfied with or denied services under this title;

(11) provide information and assurances concerning services to older individuals who are Native Americans (referred to in this paragraph as "older Native Americans"), including—

(A) information concerning whether there is a significant population of older Native Americans in the planning and service area and 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;

(i) entities conducting programs that receive assistance under this Act within the planning and service area served by the agency; and

(ii) entities conducting other Federal programs for older individuals at the local level, with particular emphasis on entities conducting programs described in section 203(b), within the area;

(F) in coordination with the State agency and with the State agency responsible for mental and behavioral health services, increase public awareness of mental health disorders, remove barriers to diagnosis and treatment, and coordinate mental and behavioral health services (including mental health screenings) provided with funds expended by the area agency on aging with mental and behavioral health services provided by community health centers and by other public agencies and nonprofit private organizations;

(G) if there is a significant population of older individuals who are Indians in the planning and service area of the area agency on aging, the area agency on aging shall conduct outreach activities to identify such individuals in such area and shall inform such individuals of the availability of assistance under this Act; and

(H) in coordination with the State agency and with the State agency responsible for elder abuse prevention services, increase public awareness of elder abuse, neglect, and exploitation, and remove barriers to education, prevention, investigation, and treatment of elder abuse, neglect, and exploitation, as appropriate;

(7) provide that the area agency on aging shall, consistent with this section, facilitate the area-wide development and implementation of a comprehensive, coordinated system for providing long-term care in home and community-based settings, in a manner responsive to the needs and preferences of older individuals and their family caregivers, by—

(A) collaborating, coordinating activities, and consulting with other local public and private agencies and organizations responsible for administering programs, benefits, and services related to providing long-term care;

(B) conducting analyses and making recommendations with respect to strategies for modifying the local system of long-term care to better—

(i) respond to the needs and preferences of older individuals and family caregivers;

(ii) facilitate the provision, by service providers, of long-term care in home and community-based settings; and

(iii) target services to older individuals at risk for institutional placement, to permit such individuals to remain in home and community-based settings;

(C) implementing, through the agency or service providers, evidence-based programs to assist older individuals and their family caregivers in learning about and making

(6) provide that the area agency on aging will—

(A) take into account in connection with matters of general policy arising in the development and administration of the area plan, the views of recipients of services under such plan;

(B) serve as the advocate and focal point for older individuals within the community by (in cooperation with agencies, organizations, and individuals participating in activities under the plan) monitoring, evaluating, and commenting upon all policies, programs, hearings, levies, and community actions which will affect older individuals;

(C)(i) where possible, enter into arrangements with organizations providing day care services for children, assistance to older individuals caring for relatives who are children, and respite for families, so as to provide opportunities for older individuals to aid or assist on a voluntary basis in the delivery of such services to children, adults, and families;

(ii) if possible regarding the provision of services under this title, enter into arrangements and coordinate with organizations that have a proven record of providing services to older individuals, that—

(I) were officially designated as community action agencies or community action programs under section 210 of the Economic Opportunity Act of 1964 (42 U.S.C. 2790) for fiscal year 1981, and did not lose the designation as a result of failure to comply with such Act; or

(II) came into existence during fiscal year 1982 as direct successors in interest to such community action agencies or community action programs; and that meet the requirements under section 676B of the Community Services Block Grant Act; and

(iii) make use of trained volunteers in providing direct services delivered to older individuals and individuals with disabilities needing such services and, if possible, work in coordination with organizations that have experience in providing training, placement, and stipends for volunteers or participants (such as organizations carrying out Federal service programs administered by the Corporation for National and Community Service), in community service settings;

(D) establish an advisory council consisting of older individuals (including minority individuals and older individuals residing in rural areas) who are participants or who are eligible to participate in programs assisted under this Act, family caregivers of such individuals, representatives of older individuals, service providers, representatives of the business community, local elected officials, providers of veterans' health care (if appropriate), and the general public, to advise continuously the area agency on aging on all matters relating to the development of the area plan, the administration of the plan and operations conducted under the plan;

(E) establish effective and efficient procedures for coordination of—

(I) identify the number of low-income minority older individuals in the planning and service area;

(II) describe the methods used to satisfy the service needs of such minority older individuals; and

(III) provide information on the extent to which the area agency on aging met the objectives described in clause (i);

(B) provide assurances that the area agency on aging will use outreach efforts that will—

(i) identify individuals eligible for assistance under this Act, with special emphasis on—

(I) older individuals residing in rural areas;

(II) older individuals with greatest economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas);

(III) older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas);

(IV) older individuals with severe disabilities;

(V) older individuals with limited English proficiency;

(VI) older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and

(VII) older individuals at risk for institutional placement; and

(ii) inform the older individuals referred to in subclauses (I) through (VI) of clause (i), and the caretakers of such individuals, of the availability of such assistance; and

(C) contain an assurance that the area agency on aging will ensure 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;

(5) provide assurances that the area agency on aging 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;

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);

(B) 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

(C) legal assistance; and assurances that 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;

(3)(A) designate, where feasible, a focal point for comprehensive service delivery in each community, giving special consideration to designating multipurpose senior centers (including multipurpose senior centers operated by organizations referred to in paragraph (6)(C)) as such focal point; and

(B) specify, in grants, contracts, and agreements implementing the plan, the identity of each focal point so designated;

(4)(A)(i)(I) provide assurances that the area agency on aging 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

(II) include proposed methods to achieve the objectives described in items (aa) and (bb) of subclause (I);

(ii) provide assurances that the area agency on aging will include in each agreement made with a provider of any service under this title, a requirement that such provider will—

(I) 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;

(II) 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

(III) 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; and

(iii) with respect to the fiscal year preceding the fiscal year for which such plan is prepared—

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.

Assurances required by the Older Americans Act of 1965, as reauthorized in 2016

The Area Agency on Aging agrees that it shall:

Sec. 306, AREA PLANS

SEC. 306. (a) Each area agency on aging designated under section 305(a)(2)(A) shall, in order to be approved by the State agency, prepare and develop an area plan for a planning and service area for a two-, three-, or four-year period determined by the State agency, with such annual adjustments as may be necessary. Each such plan shall be based upon a uniform format for area plans within the State prepared in accordance with section 307(a)(1). Each such plan shall—

(1) provide, through a comprehensive and coordinated system, for supportive services, nutrition services, and, where appropriate, for the establishment, maintenance, modernization, or construction of multipurpose senior centers (including a plan to use the skills and services of older individuals in paid and unpaid work, including multigenerational and older individual to older individual work), within the planning and service area covered by the plan, including determining the extent of need for supportive services, nutrition services, and multipurpose senior centers in such area (taking into consideration, among other things, the number of older individuals with low incomes residing in such area, the number of older individuals who have greatest economic need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas) residing in such area, the number of older individuals who have greatest social need (with particular attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas) residing in such area, 10 and the number of older individuals who are Indians residing in such area, and the efforts of voluntary organizations in the community), evaluating the effectiveness of the use of resources in meeting such need, and entering into agreements with providers of supportive services, nutrition services, or multipurpose senior centers in such area, for the provision of such services or centers to meet such need;

(2) 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—

(A) services associated with access to services (transportation, health services (including mental and behavioral health services), outreach, information and assistance (which may include information and assistance to consumers on availability of services under

RSL Initials 3-21-19 Date
March 2019

EMERGENCY RESPONSE SERVICE PAYMENT AGREEMENT

This agreement is entered into by and between the **Aging Office of Western Nebraska (AOWN)** and the **Lifeline Systems Company (Provider)** of an Emergency Response System.

It is mutually agreed that frail older individuals can be provided a safer home plan of care if an Emergency Response System is at their disposal if in the case of an emergency situation help needs to be summoned. It is further understood that for some individuals, it may create a financial hardship in paying the monthly fee.

Therefore, it is mutually agreed that the **AOWN** will pay the **Provider** the monthly service fee for the continuance of an emergency response system as administered by the **Provider** for frail elderly who meet the following criteria:

- 60 + years of age or older.
- Home bound with a physical, medical, or mental disability or limitation.
- A current Case Management client of the **AOWN** or referred to the **AOWN** for consideration of Long Term Case Management services.
- Lack of financial means to pay for the monthly fee, including family members.
- Ineligible to receive other financial assistance.

In consideration, the **AOWN** will reimburse the **Provider** $29.00, per month for each person determined eligible by the **AOWN'S** long term case management program for the standard in-home communicator. The **AOWN** will reimburse the **Provider** $39.00 per month for each person determined eligible by the **AOWN's** long term care management program for the Standard in-home Auto Alert. At the end of each month, the **Provider** shall submit to the **AOWN** a listing of authorized recipients who received emergency response service during the preceding month. The **AOWN** is only responsible for reimbursement for the actual time the response system is being used by the recipient. Payment will be made within ten working days from the date of the **AOWN** receiving the listing.

The term of this agreement will commence on July 1, 2018 and will conclude on June 30, 2019.

The reimbursement rate established for the term of this agreement is set for the term of the agreement and will not be amended.

The **AOWN** does not assume responsibility for installation fees or the cost of equipment replacement.

This agreement may be terminated by either party for failure of either party to meet or satisfy any provision of this agreement. This agreement may also be terminated by mutual consent of both parties. It is further understood that this agreement is subject to the **AOWN** receiving adequate funding to support the provision of this agreement.

Signed this 4th day of April 2018.

Dawn Fitzgerald
Lifeline Systems Company

Cheryl R. Bruntz
Director
Aging Office of Western Nebraska

AGING OFFICE OF WESTERN NEBRASKA
1517 Broadway, Suite 122
Scottsbluff, Nebraska 69361
Phone (308) 635-0851

Aging Office of Western Nebraska

Notification of Subaward and Acceptance of Grant Award

Subrecipient: City of Kimball Handyman

Subrecipient unique identifier: ID#-12900

Federal Funds for FY 18: $9,991.00

Federal award project description: Supportive Services-accounts for Federal and State grant activity related to the Special Programs for Aging, Title III Part B, Grants for Supportive Services and Senior Centers. Activity includes services to provide long-term care in home and community-based settings, such as homemaker, chore and access services.

HHS awarding agency- State Unit on Aging/Aging Office of Western Nebraska

CFDA Number and Name: CFDA # 93.044 -Grants for Supportive Services and Senior Centers

CB

AGING OFFICE OF WESTERN NEBRASKA

NOTIFICATION OF GRANT AWARD and ACCEPTANCE OF GRANT AWARD

PROJECT		**PROJECT YEAR OF THIS GRANT**	
NAME:	City of Kimball Handyman	**BEGINNING:**	7/1/2016
	4342 Link 53 E.		
ADDRESS:		**ENDING:**	6/30/2017
	Kimball, NE		
ZIP:	69145		
TELEPHONE:	308-235-3482		
TYPE OF GRANT ACTION:		**GRANTEE:**	
	NEW	**NAME:**	City of Kimball
X	**CONTINUATION**		223 S. Chestnut
	REVISION	**ADDRESS:**	
			Kimball, NE
		ZIP:	69145
		TELEPHONE:	308-235-3639

APPROVED BUDGETED COSTS & REVENUES

1. PERSONNEL:	7,200.00	**10. OTHER:**	0
2. TRAVEL:	-	**11a. TITLE XX:**	-
3. SUPPLIES:	112.70	**11b. USDA:**	0
4. EQUIPMENT:	0	**12a. CONTRIBUTIONS:**	0
5. BLDG. SPACE:	2400	**12b. TOTAL NON MATCH:**	-
6. UTILITIES:	410.00	**13. ACTUAL COST:**	15,701.00
7. OTHER	4,843.30	**14. LOCAL PUBLIC:**	0
8. INSURANCE	735	**14b. IN KIND BLDG. SPACE:**	2400
		15. IN KIND PERSONNEL:	0
9. GROSS COSTS:	**15,701.00**	**16a.CLIENT CONTRIBUTIONS:**	1,811.00
		16b. TOTAL MATCH:	4,211.00
		17. CASA	1499
		18a. FEDERAL AOWN	**9,991.00**

Unless revised, the amounts on line 17 & 18a. Constitutes the total amount of AOWN participation in the approved costs.

AOWN AUTHORIZING OFFICAL

NAME: Cheryl R. Brunz
TITLE: Director
SIGNATURE: Cheryl R Brunz
DATE: 6/30/17

Nebraska Department of Health and Human Services

Contract/Subaward Information	
Order Number: 12900	CFDA Number: 93.044
Prepared By: Cheryl R. Brunz	Date: 5/18/17

Determination of Subrecipient and Contractor

(a) A subrecipient is a state or local government, college, university or non-profit organization that expends federal awards received from a pass-through entity to carry out a federal program. Generally, a primary recipient makes a subaward to provide public health assistance or achieve a public purpose authorized by a federal law.

(b) A contractor is a dealer, distributor, merchant or other seller providing goods and services that are necessary for conducting a federal program. Generally, a primary recipient uses a procurement contract when the recipient buys goods or services for its own benefits or use.

Sub-recipient Checklist		
• Determines who is eligible to receive what federal finance assistance?	☑ Yes	☐ No
• Has its performance measured against whether the objectives of the federal program are met?	☑ Yes	☐ No
• Has responsibility for programmatic decision making?	☐ Yes	☑ No
• Has responsibility for adherence to compliance requirements applicable to the federal program?	☐ Yes	☑ No
• Uses the federal funds to carry out a program of the entity as compared to providing goods or services for a program of the pass-through entity?	☑ Yes	☐ No
• Subject to Single Audit under 2 CFR 200?	☑ Yes	☐ No

Contractor Checklist		
• Provides goods or services within normal business operations?	☑ Yes	☐ No
• Provides similar goods or services to many different purchasers?	☑ Yes	☐ No
• Operates in a competitive environment?	☐ Yes	☑ No
• Provides goods or services that are ancillary to the operation of the federal program?	☐ Yes	☑ No
• Is not subject to the compliance requirements of the federal program?	☑ Yes	☐ No

Use of judgment

In making the determination of whether a subrecipient or contractor relationship exists, the substance of the relationship is more important than the form of the agreement. It is not expected that all of the characteristics will be present, and judgment should be used in determining whether an entity is a subrecipient or contractor. In some cases, it may be difficult to determine whether the relationship with the entity is that of a subrecipient or of a contractor. The federal cognizant agency for audit, the oversight agency for audit, or the federal awarding agency may be of assistance in making those determinations.

Determination	
Subrecipient/Contractor Name: Kimball County Handyman	Order Number: 12900
Signature: Cheryl R. Brunz	Date of Signature: 5/18/17

Subrecipient vs. Contractor checklist
2/2015

Pre-Award Risk Assessment

Subrecipient: City of Kimball
Program: Kimball Handyman
Grant: III B
Preparer: Cheryl R. Brunz
Date: 5/18/17

A Pre-Award risk assessment is required under 2 CFR 200.331(b) for any subawards made by DHHS. The assessment is to be kept in the program records and available upon request. Please answer all questions about this subrecipient and put an 'X' in the box that best fits. If the program is subawarding dollars to this organization for the first time, other programs should help answer these questions based on their experience with this organization. The Internal Audit staff is available to answer questions related to the risk assessment process. Their contact information can be found on the DHHS intranet.

Yes answers indicate a higher risk for this subrecipient.

Overall Assessment				
Question	Yes	No	N/A	Comments
Is the entity new to operating or managing state or federal funds?		✓		
Is this program new for the entity?		✓		
Is DHHS a new provider of funds of this entity?		✓		
Has there been high turnover of their employees?		✓		
Are the staff assigned to the program inexperienced with the program?		✓		
Has the entity been untimely in the submission of:				
a. Applications		✓		
b. Amendments		✓		
c. Fiscal reporting		✓		

d. Draw downs		✓		
e. Budget revisions		✓		
Has the entity been untimely in responding to questions from program?		✓		
Is the program unusually complex (funding, program, matching requirements, etc.)?		✓		
Does the entity lack effective procedures and internal controls?		✓		
Has the entity been disbarred or suspended?		✓		
Are there external risks associated with this entity related to:				
a. Economic Conditions		✓		
b. Political Conditions		✓		
c. Regulatory Changes		✓		
d. Unreliable Information		✓		

Monitoring Assessment				
Questions	**Yes**	**No**	**N/A**	**Comments**
Has it been more than 3 years since the entity has had a site-visit?		✓		
Has it been over a year since the entity had a desk audit?		✓		
Were there any findings or concerns based on-site reviews or desk audits of the entity?		✓		
Has it been more than one year since audited financial statements have been received from the entity?		✓		
Has the entity been untimely in submitted audited financial statements?		✓		
Is the entity not required to have an A-133 (Single Audit) done?	✓			

If audited as a major program, have there been findings?	✓			Separation of duties
Did the organization have overall findings?		✓		
Were there items to discuss/resolve with the entity?		✓		
Has the entity been listed as a Required Increase Monitoring Subrecipient?		✓		
Does the entity have trouble meeting its cash needs?		✓		

Grant/Expenditure Assessment				
Questions	Yes	No	N/A	Comments
Is the grant large in terms of percentage of overall funding for the entity?		✓		
Is there concern of the entity's ability to meet grant requirements?		✓		
Have there been variations between expenditures and the budget?		✓		
Has there been inadequate supporting documentation of expenditures provided?		✓		
Has the entity been untimely in the drawdown of funds?		✓		

Other risk assessment factors not addressed above:

Based on the results of this risk assessment, will a subaward be made to this entity? yes

The Internal Audit staff should be consulted about any questions about the risk assessment process or in situations of a high risk assessment.

DETAILED PLAN OF OPERATION

GRANTEE: City of Kimball

PROJECT TITLE: City of Kimball Handyman Project

FISCAL YEAR: 2017/2018

AGING OFFICE OF WESTERN NEBRASKA
1517 BROADWAY SUITE 122
SCOTTSBLUFF, NE 69361
308-635-0851
1-800-682-5140

REV.01/2009

GRANTEE:

LEGAL NAME: City of Kimball

FEDERAL INDENTIFICATION NUMBER: 476006250

ADDRESS: 223 South Chestnut Street
Kimball, NE 69145

TELEPHONE NUMBER: 308-235-3639

EXECUTIVE OFFICER'S NAME AND TITLE: Keith Prunty, Mayor

PROJECT TITLE:

LEGAL NAME: City of Kimball Handyman Project

ADDRESS: 4342 Link 53 E
Kimball NE 69145

TELEPHONE NUMBER: 308-235 3482

PERSON RESPONSIBLE FOR THE DAILY OPERATION OF THE PROJECT: Wendy Baker

ADDRESS: 4342 Link 53 E
Kimball NE 69145

TELEPHONE NUMBER: 308-235-3482

NAME OF PAYEE FOR THE ISSUANCE OF REIMBURSEMENT FOR COSTS, IF DIFFERENT THAN GRANTEE:

ADDRESS:

TELEPHONE NUMBER:

BUDGET FOR JULY 1, 2017 through JUNE 30, 2018

Cost Categories:

1.)	Personnel	$ 7200.00
2.)	Travel General Liability Insurance	735.00
3.)	Printing & Supplies	112.70
4.)	Equipment	
5.)	Building Space	2400.00
6.)	Communications & Utilities	410.00
7.)	Other (contracted providers)	4843.30
8.)	Internal Services	
9.)	Total Gross Cost	15,701.00

Revenue Categories:

Non-Matching

10.)	Other	
11.)	Title XIX & XX	
12.)	Contributions	
12a.)	Total Non-Matching	
13.)	Actual Cost	15,701.00

Matching

14a.)	Local Public (County Cash)	
14b.)	Local Public Other (In-Kind Building)	2400.00
15.)	Local Public Other (In-Kind Personnel)	
16.)	Client Contributions	1811.00
16a.)	Total Matching	4211.00
17.)	CASA (State)	1499.00
18.)	Federal (AOWN)	9991.00
18a.)	Special Award	
19.)	Percent Match (16a. divided by 13.)	27%

SERVICES

Projected Units of services to be provided during
the application period, July 1, 2017 through June 30, 2018

HOMEMAKER/HOUSEKEEPER (Hours):	180	35%	Provider Rate: 9.35
CHORE (Hours):	338	65%	Provider Rate: 9.35
TOTAL UNITS OF SERVICE:	518		
TOTAL COST PER UNIT OF SERVICE: (Budget line 9. divided by total units)	30.31		

ITEMIZED BUDGET NARRATIVE

COST:

1.)	**Personnel Cash:** (itemize positions)		12 month cost
	Director		7200.00
	Personnel In-Kind: (itemize positions)		
	Total Personnel Cost:		7200.00
2.)	General Liability Insurance		735.00
	Total General Liability Insurance		735.00
3.)	**Printing & Supplies:**		
	Printing expense:	59.70	
	Office Supplies:	33.00	
	Other Supplies:	20.00	
	Total Printing & Supplies:		112.70
4.)	**Equipment:**		
	Capital Expenditures exceeding $100 in value:		NA

ITEMIZED BUDGET NARRATIVE (CONT.)

5.)	**Building Space Cash:**			12 month cost
	Square footage & rate:			
	Building Space In-Kind:			
	Square footage & rate:			2400.00
	Total Building Space:			2400.00
6.)	**Communications & Utilities:**			
	Telephone:	324.00		
	Utilities:			
	Postage:	86.00		
	Total Communications & Utilities:			410.00
7.)	**Other:**			
	Independent Contractor Expense:	Projected Units: 518	Rate: 9.35	
	Homemaker/Housekeeper:	180		
	Chore:	338		
	Total Other:			4843.30
8.)	**Internal Services**			
9.)	**TOTAL GROSS COST:**			15701.00

ITEMIZED BUDGET NARRATIVE (CONT.)

REVENUE:

Non-Matching:

10.) **Other:**
Itemize other sources:

Total Other: _____

11.) **Title XIX & XX**

Title XIX (Medicaid):

Title XX (Block Grant):

Total Title XIX & XX: _____

12.) **Contributions:**

Itemize contributions from other sources:

Total non-matching contributions: _____

13.) **ACTUAL COST:**
Line 9 minus Line 10, 11, 12. 15,701.00

ITEMIZED BUDGET NARRATIVE (CONT.)

REVENUE:
Matching:

14a.) **Local Public:**
County revenue:

Total Local Public: _____

14b.) **Local Public Other:**
In-Kind Building Space: 2400.00

Total Local Public Other: 2400.00

15.) **Local Public Other:**
In-Kind Personnel:

Total Local Public Other: _____

16.) **Client Contributions:**
Please enclose a copy of your current sliding fee scale:

Total Client Contributions: 1811.00

17.) **CASA** (State funding from the AOWN) 1499.00

18.) **Federal** (Reservation amount from the AOWN) 9991.00

18a.) **Special Award** (Special Federal funding from the AOWN) _____

CONTRACTOR SERVICE NARRATIVE

A). Provide a description of the communities which the project will serve during this application period.

All of Kimball County is in the service area. This includes the cities of Kimball, Dix, and Bushnell.

B). Provide a brief description of the outreach efforts which will be made by the contractor in reaching the elder population to inform them of the service availability with special attention to the social and economic need individuals.

Posters providing information about the Kimball Handyman Project are placed at many locations. They include Kimball Health Services, Bemis Drug, gas stations, banks, Kimball City Office, Kimball Senior Friendship Center, County Courthouse, Veterans Office, VFW, restaurants, County Extension Office, and Park Terrace. The Kimball County Shuttle driver and coordinator as well as the director of the food pantry will be provided with information about the program.

FY '16/17 SLIDING CONTRIBUTION SCALE
100%

MONTHLY INCOME	PERCENT REQUESTED CONTRIBUTION
ONE-PERSON HOUSEHOLD	
Under $11,880	10%
$11,881 – 12,880	20%
$12,881 – 13,880	30%
$13,881 – 14,880	40%
$14,881 – 15,880	50%
$15,881 – 16,880	60%
$16,881 – 17,880	70%
$17,881 – 18,880	80%
$18,881 – 19,880	90%
$19,881 – and above	100%
TWO-PERSON HOUSEHOLD	
Under – $16,020	10%
$16,021 – 17,020	20%
$17,021 – 18,020	30%
$18,021 – 19,020	40%
$19,021 – 20,020	50%
$20,021 – 21,020	60%
$21,021 – 22,020	70%
$22,021– 23,020	80%
$23,021- 24,020	90%
$24,021– and above	100%

Sliding Contribution Scale for households with more than two persons will be available from the AOWN.
2016 Poverty Guidelines US Department of Health and Human Services.

City of Alliance/Senior Center/RSVP
Employee
Emergency Action Plan

I. Purpose

This Emergency Action Plan has been developed in accordance with Occupational Safety and Health Administration (OSHA) regulations 29 CFR 1910.38. The purpose of this plan is to ensure the protection of all employees in an emergency situation from serious injury, property loss, or loss of life in the event of a major disaster. The personal safety of each employee is and always will be the primary importance to the City of Alliance. In the event of an emergency, this plan describes the responsibilities and action to be taken to protect lives. Each employee shall receive a copy of the Emergency Action Plan provided at the time of hire. A copy will also be available at each City owned facility.

II. General Program Management

A. Responsibility

It is the responsibility of management to protect employees. The Safety Committee is responsible for this program and has authority to make necessary decisions to ensure the success of this plan. Questions regarding this plan should be directed to the Safety Committee.

B. Types of Emergencies

This plan attempts to consider all potential natural or manmade emergencies that could disrupt the workplace. These emergency reporting and evacuation procedures cover the following types of emergencies: medical and fire emergencies, extended power outages, chemical spill, radiological and biological accidents, civil disturbances, bomb threats, explosions, robbery, active shooter scenario, workplace violence and severe weather/natural disasters.

C. Plan Review and Update

The Emergency Action Plan will be reviewed annually by the Safety Committee and updated whenever new equipment, facility construction, or personnel changes might affect the plan's procedures.

III. Methods of Compliance

A. Reporting Emergencies Procedures

The quicker and more efficient emergencies are reported, the greater the chance for saving lives and property. The following is the procedure for reporting an emergency in the City. Each Department Head is responsible for posting emergency phone numbers near telephones, on employee notice boards or other conspicuous locations where telephones may be used as means of reporting emergencies [29 CFR 1910.165 (a)(4)].

The following procedures shall be used.

1) **Call 911.**
2) Notify immediate supervisor and/or Department Head.
3) Notify City Manager.

If it is safe to do so, any employee aware of an emergency situation should also alert, signal and warn

Alliance

others of the harm. This may include verbal communications, sirens, phone calls or body movements.

Employees may also become aware of an emergency by a Department Head or Supervisor, commercial, radio or television broadcast, social media, electronic message, phone call or emergency personnel. Department Heads are responsible for notifying all employees using whatever means possible.

When appropriate, the City Manager's office is responsible for initiating emergency procedures. Any situation (e.g. wastebasket fire) an employee was able to contain, the employee shall notify the supervisor immediately. Department Head will notify the City Manager's office of the situation when it's safe to do so. The City Manager and/or Department Head may require that the appropriate authorities respond or conduct an inspection.

B. Protective Actions for Life Safety

When there is a hazard within a building such as a fire or chemical spill, occupants within the building should be evacuated or relocated to safety. Other incidents such as a bomb threat or receipt of a suspicious package may also require evacuation. If a tornado warning is broadcast, everyone should be moved to the strongest part of the building and away from exterior glass. If a transportation accident on a nearby highway results in the release of a chemical cloud, the fire department may warn to "shelter- in-place." To protect employees from an act of violence, adopt a survival mindset.

Protective actions for life safety include: Evacuation, Sheltering, Shelter-In-Place and Lockdown.

This emergency plan instructs these protective actions when applicable. In the event a location and/or pathway is not safe, make all attempts to locate a safe means of exit or location for cover.

C. Emergency Evacuation Procedures

An emergency evacuation route will be kept clear at all times. The City has designated safe areas for employees to report to in the case of an emergency. Severe storm procedures refers to a thunderstorm or tornado and is also intended to be a "shelter in" location. Fire procedures include any evacuation from the building. Whenever the Emergency Warning Sirens are activated, all employees shall take appropriate action.

1. Patrons/Customers

Emergency escape procedures apply to all customers, patrons, and any non-city employee in a City facility. If it is safe to do so, the closest City employee to the non-city individual should assist and/or provide direction for evacuation. If a patron refuses to leave the premises or take shelter, the responsible individual shall notify the appropriate authorities immediately after verifying all other employees/patrons have evacuated.

2. Disabled Workers

The Department Head, Supervisor or responsible individual is responsible for assisting disabled workers and non-employees in evacuating or take cover procedures.

3. Re-Entry

Once a building is evacuated, no one is to re-enter the building for any reason. Rescue personnel are excluded from this rule. When the Fire Department or other responsible agency has notified the City Manager the building is safe for re-entry, then, and only then, will personnel return to their workstations. See Appendix A for Emergency Evacuation Procedures and Assembly Areas by Department.

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D. Critical Operations Procedures

Some operations in the City, in which control in an emergency situation is critical to the safety of employees, require special procedures for proper control (e.g. monitoring electricity, water supplies, or other essential operations). In some cases, these people are responsible for critical operations until their evacuation is necessary.

Note: If at any time during an emergency situation the employee's safety is at risk, the critical operation procedures are to be abandoned and the employees are to proceed to a safe area. Only render first aid based on your level of training. See Appendix B for Critical Operations by Department.

E. Employee Accounting Procedures

The Department Head, Supervisor or responsible individual will be responsible for accounting for employees after an emergency. The Department Head is responsible for maintaining a list of names and phone numbers of all employees for which they are responsible.

These procedures are designed to account for all employees, determine if an employee needs assistance in evacuating, and to determine their possible location. The responsible person shall contact the appropriate authorities regarding any unaccounted for persons or other critical factors affecting the situation. The most senior employee is assumed to be the responsible individual in the absence of a Department Head or Supervisor. See Appendix C for Designated Responsible Person and Alternate by Department.

F. Training and Recordkeeping

The Department Head is responsible for training all employees covered under this program. Employees will be trained under the following circumstances:

1. At the time of initial assignment and annually thereafter,
2. When an employee's responsibilities change under this program, and
3. Upon the request of the employee.

Training topics should address the following:

1. Individual roles and responsibilities.
2. Threats, hazards, and protective actions.
3. Notification, warning, and communications procedures.
4. Emergency response procedures.
5. Evacuation, shelter, and accountability procedures.
6. Location and use of common emergency equipment.
7. Emergency shut down procedures.

The Department Head is responsible for training staff of the proper evacuation procedures, inspections or closed rooms, alternate escape routes, employees that may need additional assistance, and hazardous areas to avoid during evacuation procedures.

The Safety Committee is also responsible for making training available for personnel in the use of fire extinguishers and first aid/CPR. Employee Safety Training records shall be filed in employee personnel files.

Drills should be conducted often, at a minimum annually, to ensure employees are prepared. After each drill, management and employees should evaluate the effectiveness of the drill; identify strengths and weaknesses of the plan and work to improve it.

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IV. Emergency Procedures

A. Medical Emergency

Call 911 for all medical emergencies involving employees, customers, patrons and any non-city individuals.

- Provide the nature and location of the medical emergency (address, building, room number) and your name and phone number from which you are calling.
- DO NOT move the victim unless in a life threatening situation.
- Remain with the victim, if possible.
- Only render first aid based on your level of training.
- If personnel are trained in First Aid are not available, at a minimum, attempt to provide the following assistance:
  - Stop the bleeding with firm pressure on the wounds (note: avoid contact with blood or other bodily fluids).
  - Clear the air passages using the Heimlich maneuver in case of choking.
- In case of rendering assistance to individuals exposed to hazardous materials, consult the Safety Data Sheet (SDS) and wear the appropriate personal protective equipment.

B. Fire Emergency

When fire is discovered,

- Activate the nearest fire alarm.
  - If a fire alarm is not available, notify your Supervisor and co-workers about the fire emergency by the following means: voice communication, phone or any means available.
- Notify the Fire Department by **calling 911.**
- NEVER ignore the alarm – do not assume it is false – do not assume it is a test.

Fight the fire:

- ONLY if the Fire Department has been notified.
- The fire is small and is not spreading to other areas.
- Escaping the area is possible by backing up to the nearest exit.
- The fire extinguisher is in working condition and you are trained to use it.

Upon being notified about the fire emergency:

- Occupants must leave the building using the safest escape routes.
- DO NOT use elevators.
- ONLY take your belongings if they are nearby.
- Assemble in the designated areas (see appendix A).
- Remain outside until the designated official announces that it is safe to reenter.

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The Responsible Individual (Highest Ranking Personnel):

- Must coordinate an orderly evacuation of personnel and customers,
- Perform an accurate head count of personnel reported to the designated area, and
- Determine if a safe rescue method exists to locate missing personnel and communicate that to the Designated Official.
- They should also provide the Fire Department personnel with the necessary information about the facility and assist all physically challenged employees in emergency evacuation.

C. Extended Power Outages

In case of a power failure in a City facility that lasts 15 minutes, all non-employees may be asked to leave the premises until power has been restored depending on the circumstances. If the outage continues, non-essential employees may be sent home at the discretion of the City Manager.

Response:

- **Contact 911** to report the power outage.
- Determine if the entire building or only a portion is affected?
- Attempt to increase natural light by opening window shades or other similar actions.
- Cease activities or operations that involve potentially hazardous conditions.
- Take precautionary measures to power down electrical equipment and appliances in the event that power restoration would surge causing damage to electronics and effecting sensitive equipment.
- Keep an alternate source of light to facilitate safe exit in the event of a power outage on your person or in your immediate work area. Do not use open flame devises for supplementary lighting.
- If instructed by the Department Head, facilities with freezing temperatures should turn off and drain lines in the event of a long-term power loss.
- Upon restoration of heat and power, electronic equipment should be brought up to ambient temperatures before energizing to prevent condensate from forming on circuitry. The Department Head will ensure fire and potable water piping be checked for leaks from freeze damage after the heat has been restored to the facility and water turned backon.

D. Chemical, Radiological and Biological Spills or Accidents

Due to the risks of working with chemicals, employees must take special precautions. The Department Head shall inform their employees of all chemicals they may handle, where the Safety Data Sheets (SDS) are filed; and how to properly contain and/or clean a chemical spill. A SDS sheet must be on file for each chemical and the safety instructions are listed on the SDS sheets.

Response:

- Employees shall **contact 911** to report any major chemical spill.
- Notify your Department Head or Supervisor immediately.
- If toxic fumes are present, secure the area (with caution tape or cones) to present other personnel from entering.

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- Someone familiar with the situation should meet emergency response personnel outside the building.
- If injuries or suspected exposure to the materials, inform emergency response personnel that medical assistance is needed.
- DO NOT re-enter the area until instructed by emergency response personnel.
- If an employee is uncertain of the hazards involved or untrained – DO NOT attempt to clean the spill. If able, contain the spill with available equipment (e.g. pads, booms, absorbent powder, etc.).
- If able, attend to injured

personnel. Exposure:

If you are exposed to the chemical/hazardous material:

- **Call 911** and report your exposure.
- Make use of the nearest emergency shower and/or eyewash if available.
- Cover your mouth and nose with layers of cloth (handkerchief, towel, etc.),
- Move as far away from the source of contamination as possible.
- Wash with soap and water.
- Remove contaminated clothing as soon as possible.

Declared Disaster:

If the Emergency Management Agency declares a chemical spill within or near the City of Alliance, the employees shall follow the procedures set by the Emergency Management Agency. If the procedures are to "stay in the building," the following steps should be taken:

a. Close all windows and doors.
b. Turn off all air conditioning and heating units.
c. Stay in the facility – DO NOT go outdoors until proper authorities have cleared the warning.
d. Listen to the radio for information and updates.

E. Civil Disturbance

Civil disturbances can include riots, threatening individuals, crimes in progress, or events that become significantly disruptive to the city. If you become aware of a civil disturbance that is disruptive to operations, call 911 and provide the following information:

- The name of the group, if known.
- The exact location.
- The size of the group.
- Weapons involved.

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- What is the group doing?
    - Damaging property
    - Making threats
    - Holding signs
- Do they have shouting/chanting amplification devices?

Avoid the area of the disturbance. Avoid provoking or obstructing demonstrators.

General Safety Guidance:

- Remain calm.
- Follow directions of authorities.
- Do not become a spectator.
- Avoid windows and doors.
- Do not argue or enter into the debate with demonstrators.
- Do not commit or become involved in any crimes.
- Remove yourself from the area.

F. Bomb Threat

Keep in mind the main aim of most bomb threats is to cause panic and to disrupt the operation of a business or event, before any evacuation order is issued it should be well thought out. If it is made, it should impart urgency without causing a panic. A bomb threat could come in on any of the many telephones of the City. Therefore, it is very important that all employees be aware of what action should be taken.

The persons receiving the call should keep the caller on the telephone as long as possible. After the call, the employee shall **call 911** to report the bomb threat or alert other individuals to do so. Do not panic! The Police Department will respond and handle the situation when notified.

The receiver of the call should get as much information as possible:

1. Where is the bomb?
2. What time is it set to go off?
3. What kind of bomb is it?
4. What kind of package or box is it in?
5. Why did you set the bomb?
6. What is your name?
7. Where do you live?
8. How old are you?
9. If building is occupied, inform caller that detonation could cause injury or death.

Try to get as much information as possible. While talking with the caller listen for any background notices such as: music, people talking, cars or trucks, airplanes, children or babies, machine noises and/or typing. Once the call is complete, immediately complete the checklist (appendix) while the information is fresh in your mind. Also, did the caller appear familiar with the building? If you are able, write out the conversation in its entirety.

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When police arrive they will take command of the situation. In the case of a bomb threat, where no specific evidence exists of an explosive device, a police will coordinate a search. Persons familiar with the premises should be present during the search to identify suspicious looking items. Evacuation of the premises will be at the discretion of the adult person responsible for the premises. Should the order be given to evacuate the building, the evacuation plan will be the same as for "fires." Notification of the bomb threat shall be reported to the City Manager's Office as soon as possible.

Remember:

- **Call 911.**
- Remain calm.
- If someone calls you with a bomb threat, get as much information as possible.
- If threat is by written note, DO NOT handle the document.
- If threat was sent electronically, DO NOT clear or delete message.
- DO NOT use two-way radios or cell phones within 100 feet of building– radio signals have the potential to detonate a bomb.
- DO NOT activate the fire alarm.
- DO NOT touch or move a suspicious package.
- Evacuate the building.
- Employees contact your supervisor as soon as possible.
- Follow directions of the emergency response personnel.

Actual Bomb Device:

1. Police will take immediate command of the area.
2. A safety zone will be established around the immediate area and employees will be directed to that location.
3. An orderly evacuation of the building will be conducted.

A Bomb Threat/Robbery Form is attached for employee use.

G. Explosion

If an explosion occurs in your area:

- Remain calm.
- **Call 911.**
- If the odor of natural gas is present, evacuate immediately.
- Beware of damaged areas and the potential for falling objects.
- Open doors carefully.
- DO NOT use elevators.
- DO NOT move seriously injured persons unless danger is immediate.
- DO NOT enter any building that is deemed or looks unsafe.
- DO NOT place yourself in harm's way. If it is safe to do so, help people who are injured or trapped.
- Avoid electrical equipment.
- DO NOT use phones, matches, or lighters.
- Follow instructions given by emergency response personnel.

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H. Robbery

When an individual enters any City facility to steal anything, employees need to exercise extreme caution and good judgment.

1. Cooperate with any suspect.
2. Never attempt to overpower a suspect.
3. Never attempt to follow a fleeing suspect.
4. Once the suspect leaves the building an employee should summon police immediately.
5. Employees should not touch anything.
6. Employees should write down every detail about the suspect (form attached).
7. Employees should attempt to observe and retain as much of the incident as possible, i.e. suspect description, clothing, accent, physical characteristics, vehicle description.

I. Active-Shooter Situation

Profile of an Active Shooter

An Active Shooter is an individual actively engaged in killing or attempting to kill people in a confined and populated area; in most cases, active shooters use firearm(s) and there is no pattern or method to their selection of victims. Active shooter situations are unpredictable and evolve rather quickly. Typically, the immediate deployment of law enforcement is required to stop the shooting and mitigate harm to victims. Because active shooter situations are often over before law enforcement arrives on scene, individuals must be prepared both mentally and physically to deal with an active shooter situation.

How to Respond When an Active Shooter is in your Vicinity

Adopt a survival mindset: Mentally and emotionally prepare to confront a life threatening risk. Quickly determine the most reasonable way to protect your own life. Remember that customers and clients are likely to follow the lead of employees and managers during an active shooter situation.

1. Evacuate (Run)

If there is an accessible escape path, attempt to evacuate the premises. Be sure to have an escape route and plan in mind. Evacuate regardless of whether others agree to follow and leave your belongings behind. Help others escape, if possible. Prevent individuals from entering an area where the active shooter may be. Keep your hands visible and follow the instructions of any police officers. Do not attempt to move wounded people. Call 911 when you are safe.

2. Hide Out (Hide)

If evacuation is not possible, find a place to hide where the active shooter is like likely to find you. Your hiding place should be out of the active shooter's view and provide protection if shots are fired in your direction (i.e. an office with a closed and locked door) Try not to trap yourself or restrict your options for movement. To prevent an active shooter from entering your hiding place, lock the door and blockade the door with heavy furniture.

If the active shooter is nearby, lock the door and silence your cell phone. Turn off any noise and remain quiet. Hide behind large items (i.e. cabinets, desks). If evacuation and hiding out are not possible, remain calm and dial 911, if possible, to alert police to the active shooter's location. If you cannot speak, leave the line open and allow the dispatcher to listen.

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3. Take Action Against the Active Shooter (Fight)

As a last resort, and only when your life is in imminent danger, attempt to disrupt and/or incapacitate the active shooter by acting as aggressively as possible against the shooter. Suggestions include throwing items, improvising weapons and yelling. Commit to your actions.

How to Respond When Law Enforcement Arrives

Law enforcement's purpose is to stop the active shooter as soon as possible. Officers will proceed directly to the area in which the last shots were hard. Officers will arrive in teams and may wear regular patrol uniforms, tactical gear or plan clothes. They will be armed and use whatever means possible to control the situation. They will shout commands and may push individual to the ground for their safety.

Remain calm and follow instructions. Put down any items in your hands, immediately raise your hands and spread your fingers. Keep your hands visible at all times and avoid making quick movements towards officers. Do not point, yell or scream. Do not ask officers for help or direction when evacuating, just proceed in the direction from which officers are entering the premises.

The first officers to arrive on the scene will not stop to help injured persons. Expect rescue teams comprised of additional officers and emergency medical personnel to follow the initial officers. These rescue teams will treat and remove any injured persons. They may also call upon able-bodies individuals to assist in removing the wounded from the premises.

Information to Provide Law Enforcement or 911 Operator

Once you have reached a safe location or an assembly point, you will likely be held in that area by law enforcement until the situation is under control, and all witnesses have been identified and questioned. Do not leave until law enforcement authorities have instructed you to do so.

If you are able, provide the location of the active shooter, the number of shooters (if more than one), physical description of shooter(s), the number and type of weapons held by the shooter(s) and the number of potential victims.

I. Workplace Violence

Workplace violence can be any act of violence, against persons or property, threats, intimidation, harassment, or other inappropriate, disruptive behavior that causes fear for personal safety at the work site. Workplace violence can affect or involve employees, visitors, contractors, and other non-City employees.

A number of different actions in the work environment can trigger or cause workplace violence (i.e., anger over disciplinary actions or the loss of a job, resistance by a customer to regulatory actions, a member of the public that disagrees with City policy or practices, etc.). It may even be the result of non-work-related situations such as domestic violence, "road rage," or hate incidents or crime (e.g., violence of intolerance and bigotry, intended to hurt and intimidate someone because of their race, ethnicity, national origin, religion, sexual orientation, or disability). Workplace violence can be inflicted by an abusive employee, a manager, supervisor, co-worker, customer, family member, or even a stranger. Whatever the cause or whoever the perpetrator, workplace violence is not to be accepted or tolerated.

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Response:

Contact 911.

- Take all threats seriously.
- Do not confront individuals who are a threat.
- Utilize escape or shelter in procedures, if necessary.

Additional Consideration:

- Be responsible for questioning and/or reporting strangers to supervisors.
- Be aware of any threats, physical or verbal, and/or any disruptive behavior of any individual and report such to supervisors.
- Be familiar with polices for dealing with workplace threats and emergencies.
- Be familiar with the resources of the Employee Assistance Program.

J. Severe Weather and Natural Disasters

Tornado

When a warning is issued by sirens or other means, seek inside shelter. Consider the following: small interior rooms on the lowest floor and without windows; hallways on the lower floor away from doors and windows; and rooms constructed with reinforced concrete, brick, or block with no windows.

Stay away from outside walls and windows. Use arms to protect head and neck. Remain sheltered until the tornado threat is announced to be over. After the tornado has passed, the Department Head and/or Supervisor should restore calm and check for injuries.

Earthquakes

In the event of an earthquake, employees shall take immediate cover. Recommended places include: under a desk, table or other heavy furniture; under a doorway without windows; if outdoors – avoid possible falling debris such as brick, glass, tree branches, etc.

Following an earthquake, the appropriate authorities (Emergency Management, Fire Department, and Police Department) will instruct the public of the appropriate procedures to follow. Take special precautions because there may be structural damage and gas leaks within a building, and broken power, water, sewer, or gas lines outdoors.

Flood

If indoors, be ready to evacuate as directed following evacuation routes in Appendix A. If outdoors, climb to high ground and stay there. Avoid walking or driving through flood water. If car stalls, abandon it immediately and climb to a higher ground.

Blizzard

If indoors, stay calm and wait for instructions. Stay indoors! If there is no heat, close off unneeded rooms or areas, stuff towels or ragas in cracks under doors and cover windows at night. Eat and drink food if available. Food provides the body with energy and heat. Fluids prevent dehydration. Wear layers of loose-fitting, light-weight, warm clothes, if available. If outdoors, find a dry shelter and cover all exposed body parts. If shelter is not available, prepare a lean-to, windbreak, or snow cave for protection from the wind. Build a fire for heat and to attract attention. Place rocks around the fire to absorb and reflect heat. Do not eat snow. It will lower your body temperature. Melt it first.

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If you are stranded in your car, stay in your vehicle. Run the motor about ten minutes for each hour. Open the windows a little for fresh air to avoid carbon monoxide poisoning. Make sure the exhaust pipe is not blocked. Make yourself visible to rescuers by turning on your dome light at night when running the engine, tie a colored cloth around your antenna or door and raise the hood after the snow stops falling. Try to exercise to keep blood circulating and to keep warm.

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Appendix A – Emergency Shelter Locations

Airport Terminal

Men's & women's restrooms and the boiler room.

Airport Maintenance & ARFF

ARFF storage room & restrooms.
Break room and restroom in the maintenance building.

Skyview Club House

Men's & women's locker rooms in the pro shop area.

Knight Museum

Ground level theatre room, near entrance.
Lower level hallway and meeting room via the stairs or elevator.

Swimming Pool & Pool House

Men's and women's changing rooms and staff areas.

Sallows Museum

Basement via stairs.
Center of the ground floor rooms for the elderly and handicapped.

Public Works

Interior conference room and men's & women's restrooms. Restrooms in the garage/shop area.

Cemetery Maintenance Building

Restroom.

Municipal Building

Basement areas via Administration main lobby, Finance/Utilities, Human Resource and Community Development area stairs.
First floor stage area.
Second floor east fan rooms and office lobby area at top of the stairs.

COA Library

Basement area via the elevator or stairs near the west entrance. Main floor men's and women's restrooms.

Parks Garage

Office, restrooms and service pit areas.

Streets Garage

Restroom areas.

Animal Shelter

All interior areas.

Fire Hall First Floor

Men's and women's restrooms.

Senior Center

Hall, office and storage areas near the kitchen.
Hall and office areas near the Director's office.

Alliance

Appendix B – Critical Operations

Department/Area	Title/Position	Comments	Contact
Fire	Fire Chief	Emergencies relating to Fire, EMS, chemical spills and rescue	911
Police	Police Chief	Emergencies relating to police protection and prevention	911
Water and Sewer	Department Head	The Water/Sewer System Emergency Plan will be used for any emergency	On Call
Streets	Department Head	The Street System Emergency Plan will be used for any emergency	On Call
Electric	Department Head	The Electric System Emergency Plan will be used for any emergency	On Call
Gas	Black Hills Energy	All emergencies involving gas shall be referred to the 24 hour emergency phone number 1-800-694-8989	1-800-694-8989
Emergency Management	Region 23 Emergency Mgmt.	All emergencies above and beyond this plan shall be directed to the Emergency Management Director.	308-432-2251

Alliance

Appendix C – Designated Responsible Person and Alternative

Department/Area	Responsible Person	Alternative
Administration	City Manager	City Clerk
Airport	Airport Manager	Airport Maintenance
Animal Shelter	Animal Control Officer	Police Chief
Finance & Utility Office	Finance Director	Account Clerk II
Fire Station	Fire Chief	Asst. Fire Chief
Knight Museum	CLS Director	Museum Director
Landfill	Landfill Supervisor	Public Works Director
Library	Library Director	Library Clerk
Police Department	Police Chief	Police Lieutenant
Parks Department	Parks Foreman	CLS Director
Public Works Facility	Public Works Director	Electrical Superintendent
Sallows Military Museum	Museum Director	CLS Director
Senior Center	RSVP Director	CLS Director
Skyview Golf Course	Golf Pro	Golf Course Maintenance
Streets Garage	Street Foreman	Public Works Director
Swimming Pool	Pool Manager	CLS Director

Alliance

Appendix D – Bomb Threat/Robbery Form

- Instructions: Be calm and courteous.
- Listen, do not interrupt caller.

1. Name Of Operator:
2. Time:
3. Date:
4. Callers Identity:
   Male / Female / Adult / Juvenile
5. Origin Of Call:
   Local / Long Distance / Booth / Internal
6. Specifics About Bomb:

1. Keep Caller Talking If Caller Is Agreeable To Further Conversation?
2. Ask Questions Like: When Will Bomb Go Off?
   What Is Your Present Location?
   Location of Bomb?
   What Is Your Name And Address?
   What Kind of Bomb?
   How Do You Know So Much About The Bomb?
3. Did Caller Appear Familiar With Plant Or Building By His/her Description Of Bomb Location?
4. After Call Is Taken, Notify At Once the Police Department.

Exact wording of threat:

How many bombs?

Where is bomb located?

When will bomb explode?

What does bomb look like?

What kind of bomb is it?

What will cause it to explode?

How can you be contacted?

Caller's voice sounded...
Male/Female/Adult/Juvenile
Accent/Disguised/Calm/Angry/Threatening
Incoherent/Soft/Loud Other Characteristics

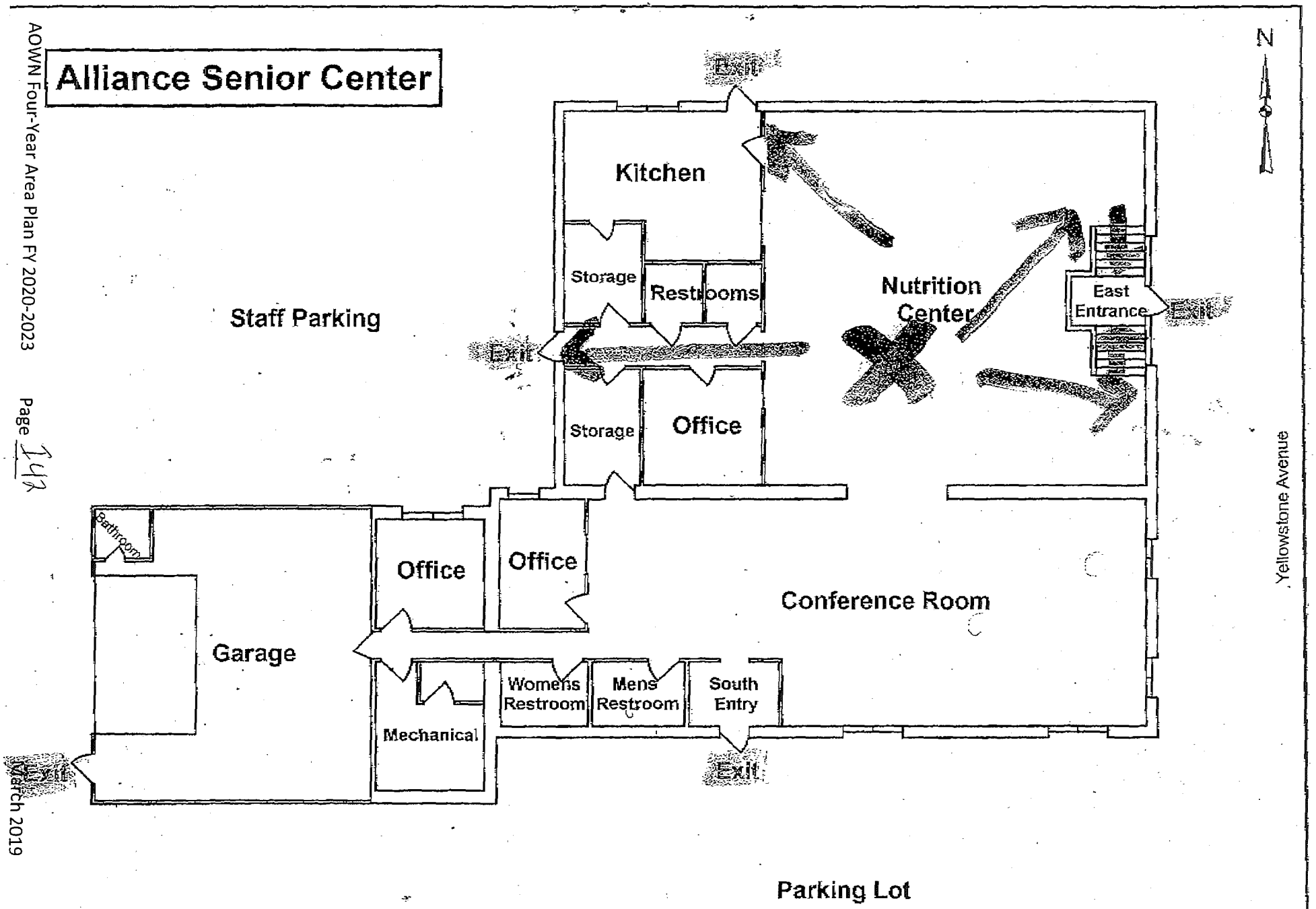
Who did it sound like?

Sounds in the background were...

Quiet/Voices/Music/House noise

Vehicle(s) Aircraft/Street noise/Office/Machinery
Factory/Machinery/Other _____

Alliance Senior Center



EMERGENCY PHONE NUMBERS

HOSPITAL: 762-6660

AMBULANCE: 911

FIRE DEPARTMENT: 762-2151/911

POLICE: 911/762-4955

HAZARDOUS MATERIALS: 911

POISON CONTROL: 1-800-955-9119

SAFETYLINE CONSULTATNTS*SAFETY & HEALTH CONSULATION SERVICE*1714 2ND AVE., SCOTTSBLUFF, NE 69361*308-632-1921

Alliance

04/05/2013 04:59 3085861966

NUTRITION SITE/SENIOR CENTER: Bayard 2007

IN THE EVENT OF A FIRE

TELEPHONE NUMBER OF FIRE DEPARTMENT: 9-1-1

PROCEDURE:

1. **Calmly and orderly clear the Building of all individuals.**
   (a) Site Manager will be responsible for assisting individuals out of the Building per the Evacuation Plan.

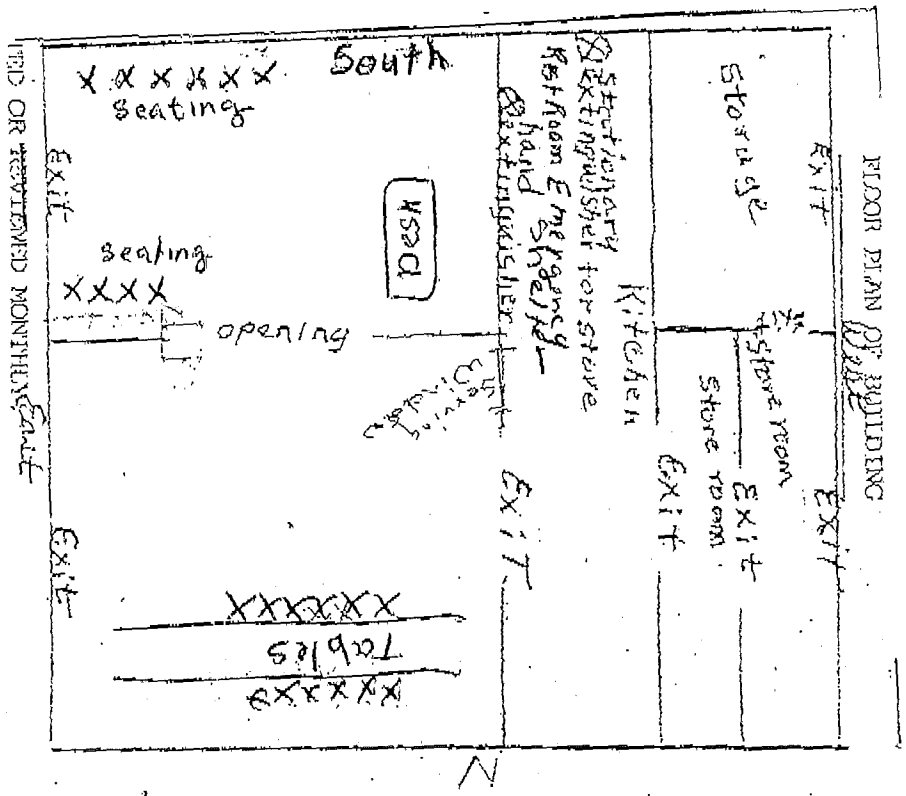
2. **Notify the Fire Department. Dial 9-1-1**
   (a) Site Manager or assigned staff will be responsible.
   (1) Identify location of fire.
   (2) Describe briefly the nature of the fire.

3. **Do not re-enter the building until clearance has been given by the Fire Department.**

4. **Notify the Aging Office of Western Nebraska in Scottsbluff.**

Evacuation Plan:

Identify:
1. Exits (Ex)
2. Flow of Evacuation:
   a. Primary (Red)
   b. Secondary (Blue)
3. Location of Fire Extinguishers (F/E).



11-04-05

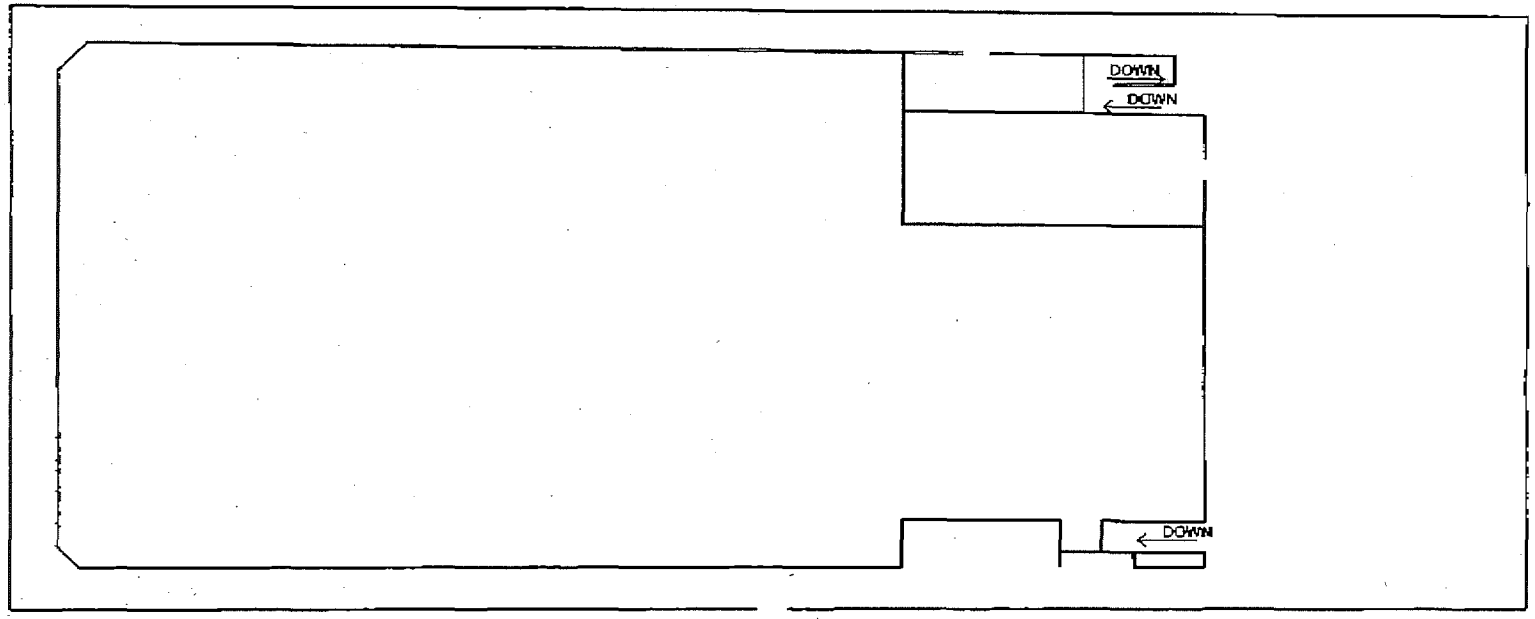
EMERGENCY PLAN

Fire Protection/Safety

A. Remain Calm. Do not panic.
B. Immediately evacuate the premises in case of a fire or suspected fire, then call 911.
C. Do not use open flame devices during or after a disaster.
D. Never go back inside a burning or damaged building until an all clear has been given.
E. Stay clear of all fallen electrical wires.
F. Do not run in smoke-filled rooms.
G. Keep low when going through smoke.
H. Evacuation drills will be reviewed twice a year with participants.

Tornado/Severe Weather

A. Remain Calm. Do not panic.
B. Move to hallway or inside wall of an interior room.
C. Store all glass and other breakable objects.
D. Turn hallway lights on.
E. Close all drapes.
F. Know the tornado/high wind procedures.
G. Do not enter damaged portions of the building until all clear is given or otherwise instructed.
H. Monitor weather bulletins.
I. Follow all instructions issued.
J. Tornado Shelter drills will be reviewed each spring with participants.



Upper Level

Prairie Winds Community Center

Bridgeport

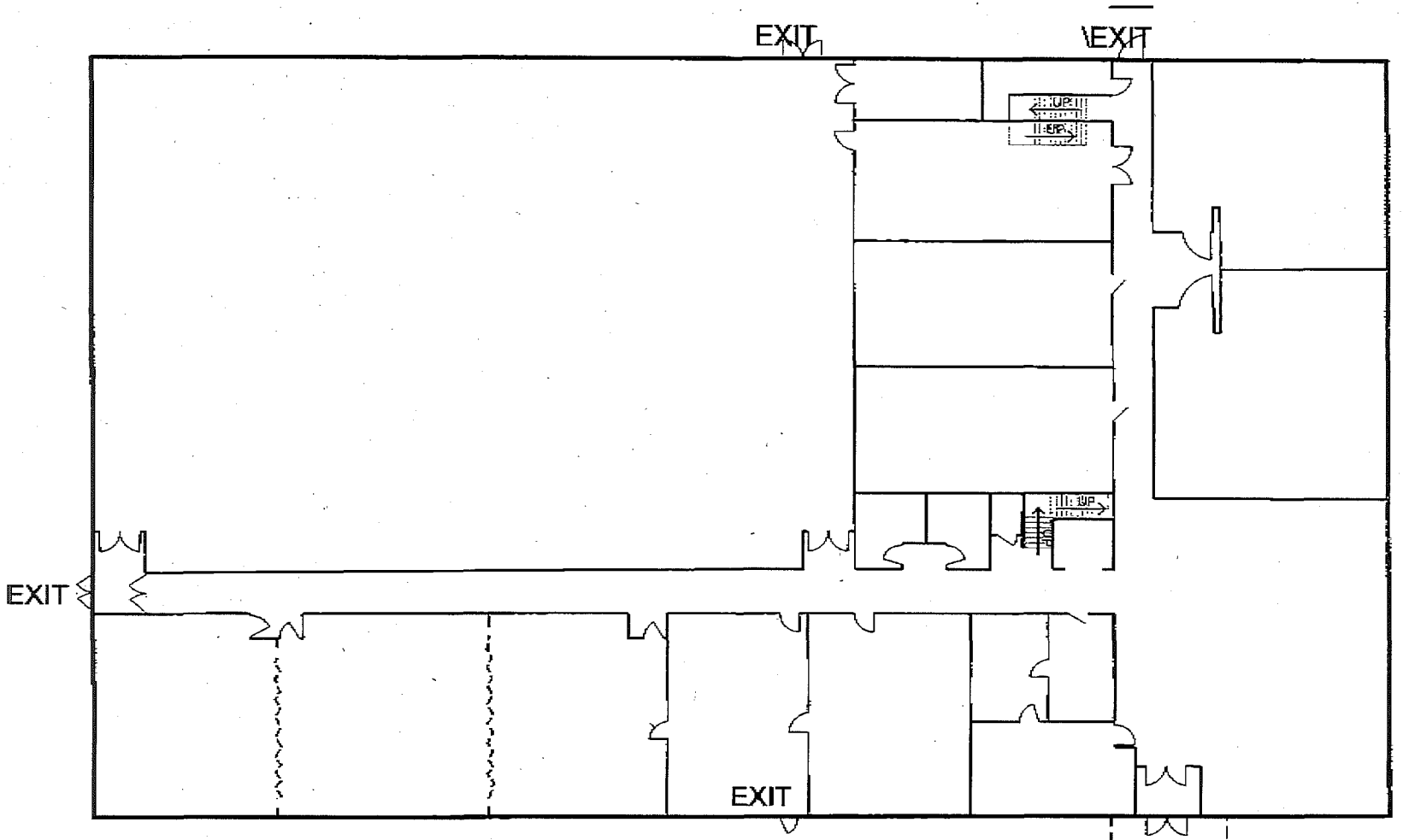
0 20 Feet

MCS FAMILY OF COMPANIES

Engineering Civil & Environmental Consulting Group

Date 3/6/2019

Document Path: P:\TESS\Local\Esri\NE\County\Macoupin\City\Bridgeport\Plans\PWCC Community Center\PWCC Community Center Building Plans\Bridgeport Upper Level.mxd



EMERGENCY EVACUATION PLAN

Ground Level

Prairie Winds Community Center

Bridgeport

0 20 Feet

MCS FAMILY OF COMPANIES
Engineering First | Environmental Consulting Group

Date: JULY2018 Document Path: P:\GIS\LocalCity\WRI\County\Wor\BiOlly\Bridgeport\Projects\PWCC Community Center\PWCC Community Center Building\Probyjlan Ca\4ca\ (ground floor).mxd

March 2019

NUTRITION SITE/SENIOR CENTER: Chadron

IN THE EVENT OF A TORNADO

I. When a Tornado warning is sounded:

(A) Site Manager will assist individuals to the designated shelter location in the Building.

(B) If the Nutrition Site/Senior Center does not have a designated shelter area, individuals will be assisted to the nearest location which does have a shelter.

(C) Everyone will remain in the shelter area until an All-Clear is sounded.

(D) Notify the Aging Office of Western Nebraska in Scottsbluff.

DESIGNATED SHELTER AREA IN BUILDING

Rest rooms and north storage room and furnace room across from storage room

Kitchen storage area

DESIGNATED SHELTER AREA at Nearest Location, if not in Nutrition Site/ Senior Center:

None

IN THE EVENT OF A FIRE

TELEPHONE NUMBER OF FIRE DEPARTMENT: _____

PROCEDURE:

1. Calmly and orderly clear the Building of all individuals.

   (a) Site Manager will be responsible for assisting individuals out of the Building per the Evacuation Plan.

2. Notify Fire Department.

   (a) Site Manager or assigned staff will be responsible.

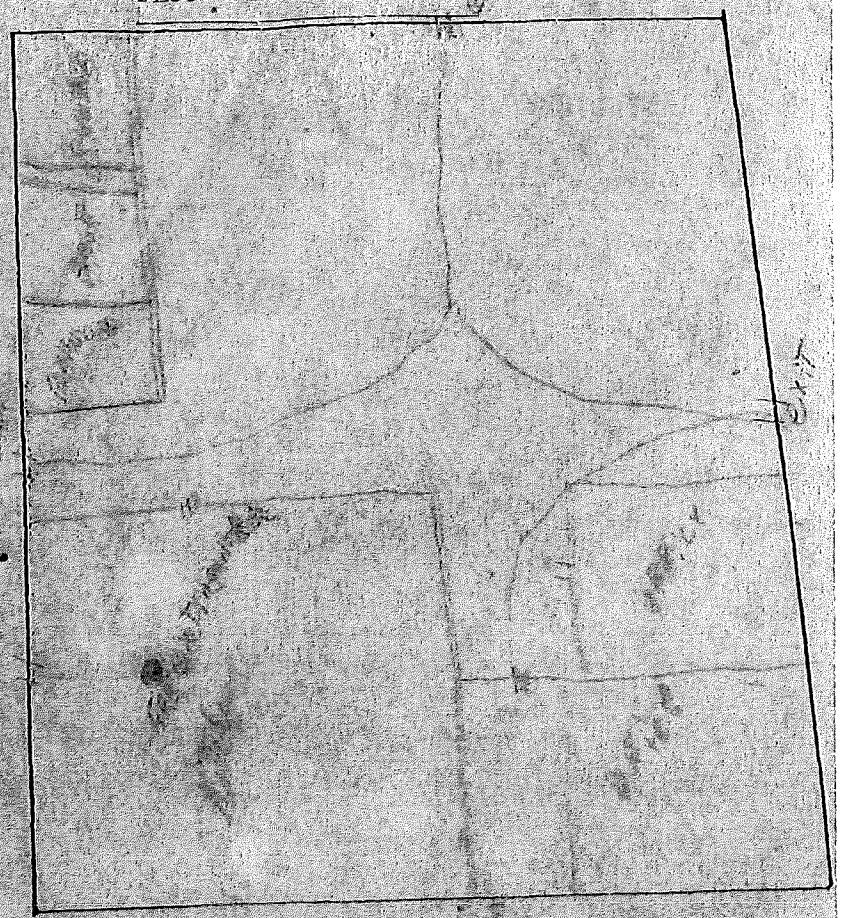
   (b) (1) Identify Location of fire.

   (2) Describe briefly the nature of fire.

3. Do not re-enter the Building until clearance has been given by Fire Department.

4. Notify the Aging Office of Western Nebraska in Scottsbluff.

FLOOR PLAN OF BUILDING



EVACUATION PLAN:

Identify:

1. Exits.
2. Flow of Evacuation:
   1. Primary (Red).
   2. Secondary (Blue).
3. Location of Fire Extinguishers.

FIRE DRILLS WILL BE CONDUCTED AND REVIEWED MONTHLY.

EMERGENCY PLAN

Fire Protection/Safety

A. Remain Calm. Do not panic.
B. Immediately evacuate the premises in case of a fire or suspected fire, then call 911.
C. Do not use open flame devices during or after a disaster.
D. Never go back inside a burning or damaged building until an all clear has been given.
E. Stay clear of all fallen electrical wires.
F. Do not run in smoke-filled rooms.
G. Keep low when going through smoke.
H. Evacuation drills will be reviewed twice a year with participants.

Tornado/Severe Weather

A. Remain Calm. Do not panic.
B. Move to hallway or inside wall of an interior room.
C. Store all glass and other breakable objects.
D. Turn hallway lights on.
E. Close all drapes.
F. Know the tornado/high wind procedures.
G. Do not enter damaged portions of the building until all clear is given or otherwise instructed.
H. Monitor weather bulletins.
I. Follow all instructions issued.
J. Tornado Shelter drills will be reviewed each spring with participants.

NUTRITION SITE/SENIOR CENTER: Chappell Dick

IN THE EVENT OF A FIRE

TELEPHONE NUMBER OF FIRE DEPARTMENT: 874-1220

PROCEDURE:

1. Calmly and orderly clear the Building of all individuals.

   (a) Site Manager will be responsible for assisting individuals out of the Building per the Evacuation Plan.

2. Notify Fire Department.

   (a) Site Manager or assigned staff will be responsible.

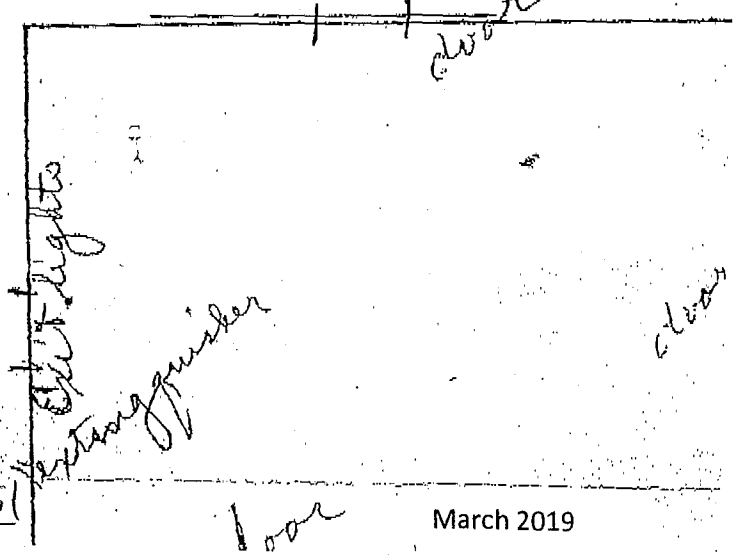
   (b) (1) Identify Location of fire.

   (2) Describe briefly the nature of fire.

3. Do not re-enter the Building until clearance has been given by Fire Department.

4. Notify the Aging Office of Western Nebraska in Scottsbluff.

FLOOR PLAN OF BUILDING



EVACUATION PLAN:

Identify:

1. Exits.
2. Flow of Evacuation:
   1. Primary (Red).
   2. Secondary (Blue).
3. Location of Fire.

TELEPHONE NUMBER OF FIRE DEPARTMENT: 544-122

PROCEDURE:

1. Calmly and orderly clear the Building of all individua

   (a) Site Manager will be responsible for assisting individuals out of the Building per the Evacuation Plan.

2. Notify Fire Department.

   (a) Site Manager or assigned staff will be responsible.

   (b) (1) Identify Location of fire.

   (2) Describe briefly the nature of fire.

3. Do not re-enter the Building until clearance has been given by Fire Department.

4. Notify the Aging Office of Western Nebraska in Scottsbluff.

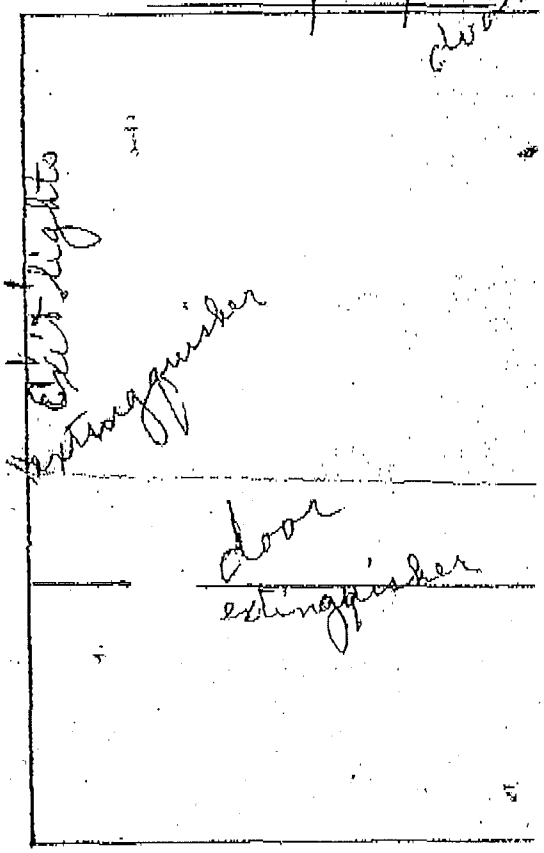
FLOOR PLAN OF BUILDING

EVACUATION PLAN:

Identify:

1. Exits.
2. Flow of Evacuation:
   1. Primary (Red).
   2. Secondary (Blue).
3. ~~Location of Fire~~ Extinguishers.

We checked these.



FIRE DRILLS WILL BE CONDUCTED OR REVIEWED MONTHLY.

EMERGENCY PLAN

Fire Protection/Safety

A. Remain Calm. Do not panic.
B. Immediately evacuate the premises in case of a fire or suspected fire, then call 911.
C. Do not use open flame devices during or after a disaster.
D. Never go back inside a burning or damaged building until an all clear has been given.
E. Stay clear of all fallen electrical wires.
F. Do not run in smoke-filled rooms.
G. Keep low when going through smoke.
H. Evacuation drills will be reviewed twice a year with participants.

Tornado/Severe Weather

A. Remain Calm. Do not panic.
B. Move to hallway or inside wall of an interior room.
C. Store all glass and other breakable objects.
D. Turn hallway lights on.
E. Close all drapes.
F. Know the tornado/high wind procedures.
G. Do not enter damaged portions of the building until all clear is given or otherwise instructed.
H. Monitor weather bulletins.
I. Follow all instructions issued.
J. Tornado Shelter drills will be reviewed each spring with participants.

Crawford

IN THE EVENT OF A FIRE

TELEPHONE NUMBER OF FIRE DEPARTMENT: 911

PROCEDURE:

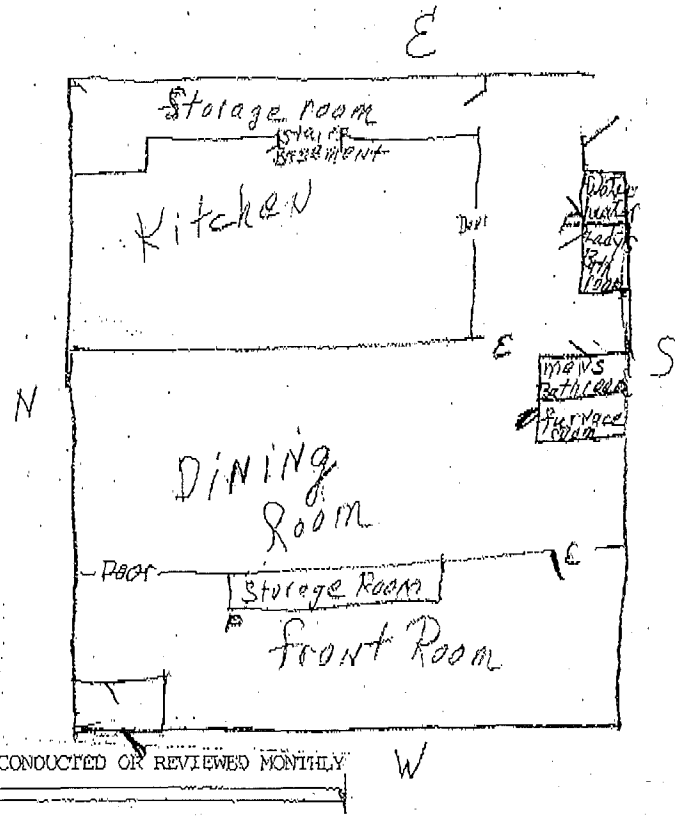
1. Calmly and orderly clear the Building of all individuals.
   (a) Site Manager will be responsible for assisting individuals out of the Building per the Evacuation Plan.
2. Notify Fire Department.
   (a) Site Manager or assigned staff will be responsible.
   (b) (1) Identify location of fire.
   (2) Describe briefly the nature of fire.
3. Do not re-enter the Building until clearance has been given by Fire Department.
4. Notify the Aging Office of Western Nebraska in Scottsbluff.

EVACUATION PLAN:

Identify:

1. Exits.
2. Flow of Evacuation:
   1. Primary (Red).
   2. Secondary (Blue).
3. Location of Fire Extinguishers.

(E - exits
F - Fire extinguishers)



FIRE DRILLS WILL BE CONDUCTED OR REVIEWED MONTHLY

IN THE EVENT OF A TORNADO

I. When a Tornado warning is sounded:

(A) Site Manager will assist individuals to the designated shelter location in the Building.

(B) If the Nutrition Site/Senior Center does not have a designated shelter area, individuals will be assisted to the nearest location which does have a shelter.

(C) Everyone will remain in the shelter area until an All-Clear is sou[illegible]

(D) Notify the Agin[illegible] f Western Nebraska in Scottsbluff.

DESIGN[illegible] HELTER AREA IN BUILDING

All handicapped people will take shelter in shelte[illegible] areas in bathroom[illegible]

Fire Chief says hallway & bathrooms would be best for us at this time this is Block Building.

DESIGNATED SHELTER AREA at Nearest Location, if not in Nutrition Site/ Senior Center:

Basement in Cafeteria/Kitchen 57th across the street.

Tornado evacuation drill will be conducted or discussed month March 2019

I. When a Tornado warning is sounded:

(A) Site Manager will assist individuals to the designated shelter location in the Building.

(B) If the Nutrition Site/Senior Center does not have a designated shelter area, individuals will be assisted to the nearest location which does have a shelter.

(C) Everyone will remain in the shelter area until an All-Clear is sou[illegible]

(D) Notify the Agin[illegible] Western Nebraska in Scottsbluff.

DESIGN[illegible] HELTER AREA IN BUILDING

All handicapped people will take shelter in shelte[illegible] areas in bathrooms,

Fire Chief says hallway & bathrooms would be best for us at since this is Block Building.

DESIGNATED SHELTER AREA at Nearest Location, if not in Nutrition Site/ Senior Center:

Basement in Cafe Cafe/furniture Store Across the street.

Tornado evacuation drill will be conducted or discussed monthly during Tornado season.

Mike Higgin[illegible] OK

EMERGENCY PLAN

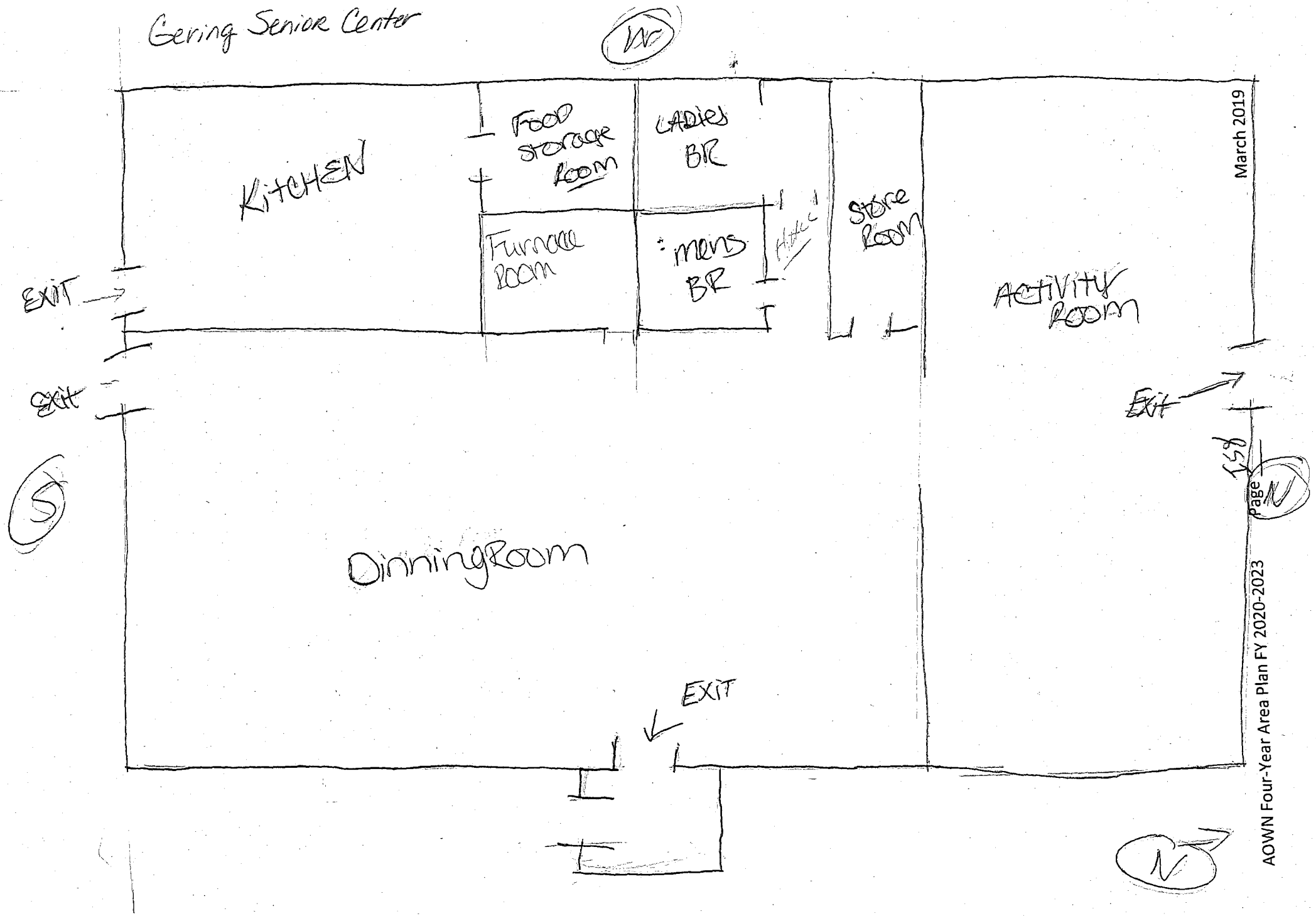
Fire Protection/Safety

A. Remain Calm. Do not panic.
B. Immediately evacuate the premises in case of a fire or suspected fire, then call 911.
C. Do not use open flame devices during or after a disaster.
D. Never go back inside a burning or damaged building until an all clear has been given.
E. Stay clear of all fallen electrical wires.
F. Do not run in smoke-filled rooms.
G. Keep low when going through smoke.
H. Evacuation drills will be reviewed twice a year with participants.

Tornado/Severe Weather

A. Remain Calm. Do not panic.
B. Move to hallway or inside wall of an interior room.
C. Store all glass and other breakable objects.
D. Turn hallway lights on.
E. Close all drapes.
F. Know the tornado/high wind procedures.
G. Do not enter damaged portions of the building until all clear is given or otherwise instructed.
H. Monitor weather bulletins.
I. Follow all instructions issued.
J. Tornado Shelter drills will be reviewed each spring with participants.

Gering Senior Center



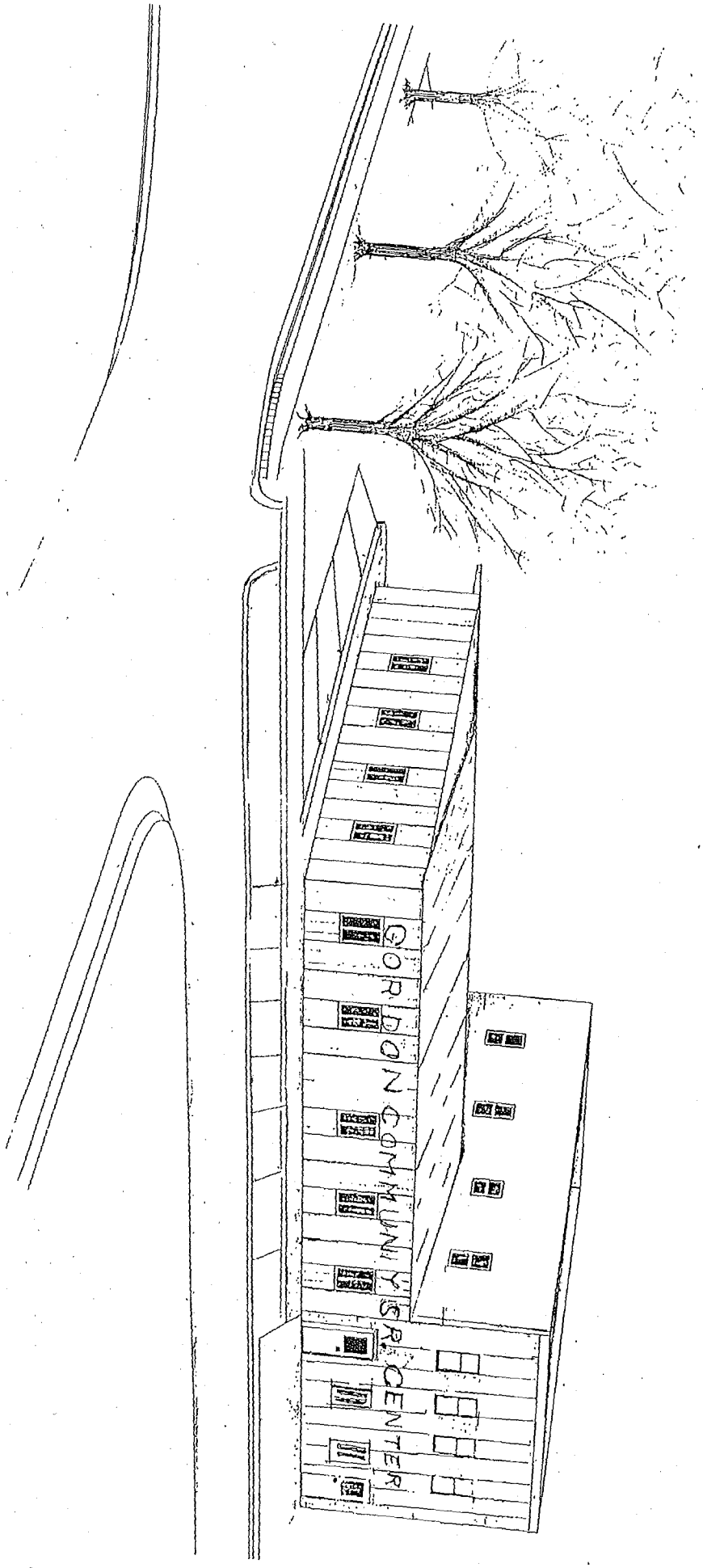
EMERGENCY PLAN

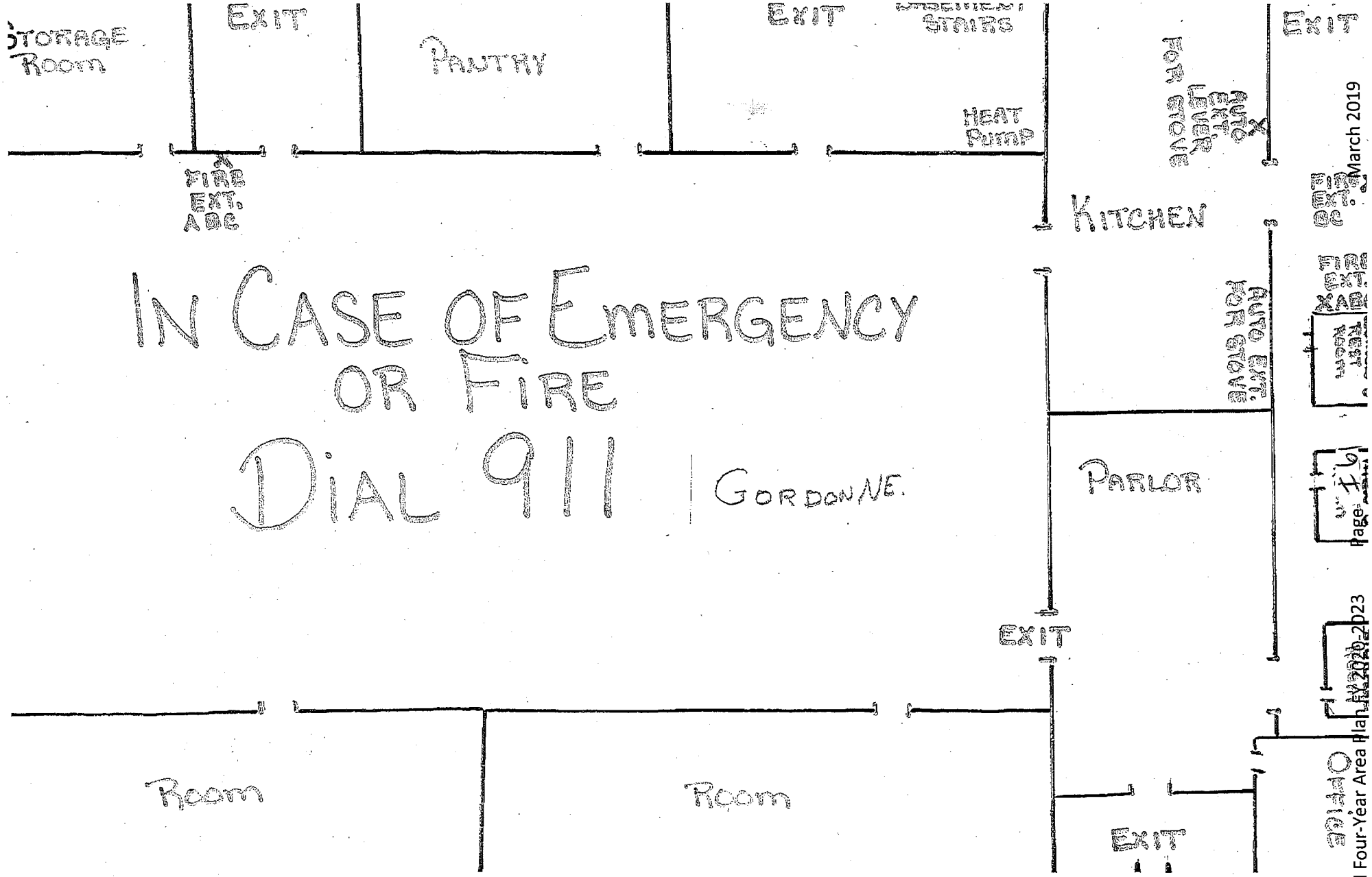
Fire Protection/Safety

A. Remain Calm. Do not panic.
B. Immediately evacuate the premises in case of a fire or suspected fire, then call 911.
C. Do not use open flame devices during or after a disaster.
D. Never go back inside a burning or damaged building until an all clear has been given.
E. Stay clear of all fallen electrical wires.
F. Do not run in smoke-filled rooms.
G. Keep low when going through smoke.
H. Evacuation drills will be reviewed twice a year with participants.

Tornado/Severe Weather

A. Remain Calm. Do not panic.
B. Move to hallway or inside wall of an interior room.
C. Store all glass and other breakable objects.
D. Turn hallway lights on.
E. Close all drapes.
F. Know the tornado/high wind procedures.
G. Do not enter damaged portions of the building until all clear is given or otherwise instructed.
H. Monitor weather bulletins.
I. Follow all instructions issued.
J. Tornado Shelter drills will be reviewed each spring with participants.


GORDON COMMUNITY SERVICES CENTER


STORAGE ROOM
EXIT
PANTRY
EXIT
STAIRS
HEAT PUMP
EXIT
FIRE EXT. ABC
KITCHEN
PARLOR
EXIT
EXIT
Room
Room
IN CASE OF EMERGENCY OR FIRE
DIAL 911
GORDON NE.

EMERGENCY PLAN

Fire Protection/Safety

A. Remain Calm. Do not panic.
B. Immediately evacuate the premises in case of a fire or suspected fire, then call 911.
C. Do not use open flame devices during or after a disaster.
D. Never go back inside a burning or damaged building until an all clear has been given.
E. Stay clear of all fallen electrical wires.
F. Do not run in smoke-filled rooms.
G. Keep low when going through smoke.
H. Evacuation drills will be reviewed twice a year with participants.

Tornado/Severe Weather

A. Remain Calm. Do not panic.
B. Move to hallway or inside wall of an interior room.
C. Store all glass and other breakable objects.
D. Turn hallway lights on.
E. Close all drapes.
F. Know the tornado/high wind procedures.
G. Do not enter damaged portions of the building until all clear is given or otherwise instructed.
H. Monitor weather bulletins.
I. Follow all instructions issued.
J. Tornado Shelter drills will be reviewed each spring with participants.

NUTRITION SITE/SENIOR CENTER: Harrison

IN THE EVENT OF A TORNADO

I. When a Tornado warning is sounded:

(A) Site Manager will assist individuals to the designated shelter location in the Building. Mens Restroom

(B) If the Nutrition Site/Senior Center does not have a designated shelter area, individuals will be assisted to the nearest location which does have a shelter. Courthouse basement

(C) Everyone will remain in the shelter area until an All-Clear is sounded.

(D) Notify the Aging Office of Western Nebraska in Scottsbluff.

DESIGNATED SHELTER AREA IN BUILDING

[illegible]

DESIGNATED SHELTER AREA at Nearest [illegible]on, if not in Nutrition Site/ Senior Center:

NUTRITION SITE/SENIOR CENTER: Harrison

IN THE EVENT OF A FIRE

TELEPHONE NUMBER OF FIRE DEPARTMENT: 911

PROCEDURE:

1. Calmly and orderly clear the Building of all individuals.

   (a) Site Manager will be responsible for assisting individuals out of the Building per the Evacuation Plan.

2. Notify Fire Department.

   (a) Site Manager or assigned staff will be responsible.

   (b) (1) Identify Location of fire.

   (2) Describe briefly the nature of fire.

3. Do not re-enter the Building until clearance has been given by Fire Department.

4. Notify the Aging Office of Western Nebraska in Scottsbluff.

FLOOR PLAN OF BUILDING

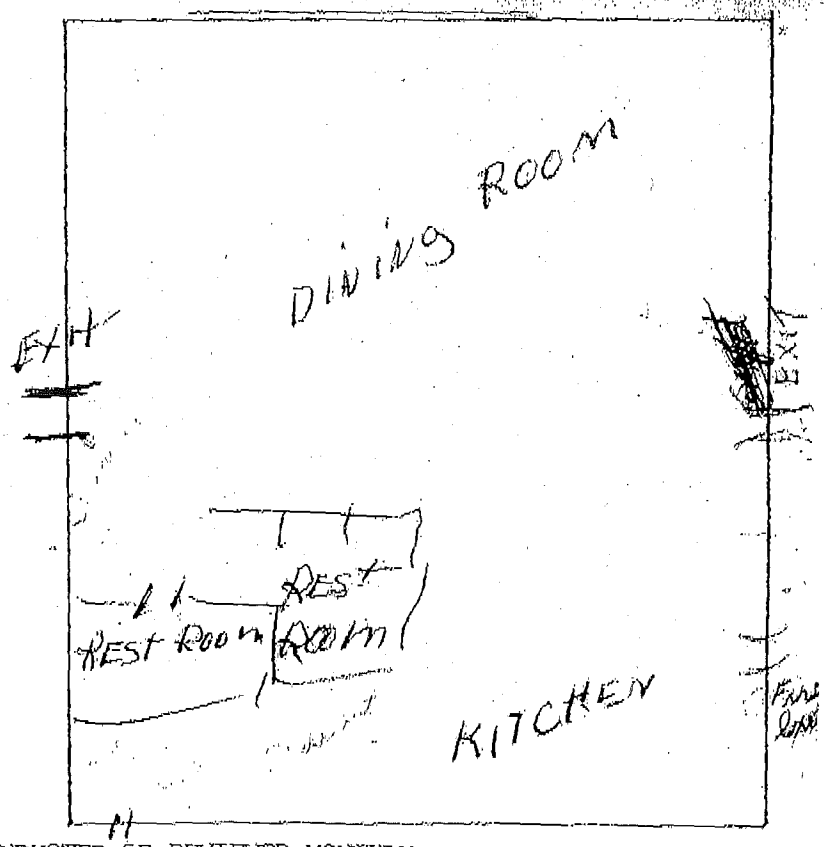
Harrison

FLOOR PLAN OF BUILDING

EVACUATION PLAN:

Identify:

1. Exits.
2. Flow of Evacuation:
   1. Primary (Red).
   2. Secondary (Blue).
3. Location of Fire Extinguishers.



FIRE DRILLS WILL BE CONDUCTED OR REVIEWED MONTHLY.

Harrison 2019

FIRE

REMAIN CALM-EVALUATE THE SITUATION-TAKE ACTION

- . Move people in an orderly manner according to established exit routes, East Dining Room Door,
- Clear rooms, close doors and windows. Accompany people to designated area.
- Site manager should take roll call, staff account for people and staff.
- An ALL CLEAR signal will be given indicating when it is safe to return.

HOSTILE INTRUDER/SHOOTING ON SITE

REMAIN CALM-EVALUATE THE SITUATION-TAKE ACTION

- Proceed immediately to The Mens Restroom
- Lock doors, close curtains, turn off lights.
- Direct people to DROP, COVER, and HOLD until the situation is resolved.
- All staff not responsible for people should take cover in the immediate area where working, if safe.
- Remain calm, stay indoors until ALL CLEAR signal is given, regardless how long it takes.
- Turn down any radios/cell phones.

DRIVE-BY SHOOTING

REMAIN CALM-EVALUATE THE SITUATION-TAKE ACTION

In the event that a drive-by shooting occurs on or adjacent to the site, these procedures should be followed:

- If Inside a secure the room, and DROP, COVER, and HOLD until the danger has passed.
- In an open area- move people to a safe area, rooms or any cover possible.
- Initiate DROP and COVER if it is not possible to safely reach an enclosed area until the emergency is over.

Note: Drive-by shootings usually happen very quickly. Try to get as much information as possible without putting yourself in danger.

Harrison 2019

TORNADO/SEVERE WEATHER

REMAIN CALM-EVALUATE THE SITUATION-TAKE ACTION

Inside buildings: Designated location Is the mens Restroom
Implement DROP, COVER, and HOLD, all people should immediately turn away from glass areas and place themselves under tables, or desks. Move away from large panes of glass and out from under heavy, suspended light fixtures. When the tornado/severe weather is over, evacuate the building if necessary, ~~to the primary rally point~~. Advise people not to touch electrical wires and avoid using matches and lighters until the area is declared safe.

Outside:
The safest place is in the open, away from any potential falling objects (i.e., trees, power lines, buildings). Stay in the open until the tornado is over or until further directions are given.
Check all utilities, shutting off gas water and electrical systems if leaks are occurring.
Do not re-enter any damaged buildings until they have been declared safe.

BLIZZARD WARNING

REMAIN CALM-EVALUATE THE SITUATION-TAKE ACTION

Contact all congregate and home delivery employee on the calling list. Contact local radio stations and AOWN to inform them of the closure of the Sunshine Center for the day due to weather. All calls will be placed by 8 a.m. the day of closing.

FLOODING

REMAIN CALM-EVALUATE THE SITUATION-TAKE ACTION

Contact emergency services and evacuate the building moving to higher ground if possible to do so safely.

NUTRITION SITE/SENIOR CENTER: Hay Springs

IN THE EVENT OF A FIRE

TELEPHONE NUMBER OF FIRE DEPARTMENT: 9-1-1

PROCEDURE:

1. **Calmly and orderly clear the Building of all individuals.**
   (a) Site Manager will be responsible for assisting individuals out of the Building per the Evacuation Plan.

2. **Notify the Fire Department. Dial 9-1-1**
   (a) Site Manager or assigned staff will be responsible.
   (1) Identify location of fire.
   (2) Describe briefly the nature of the fire.

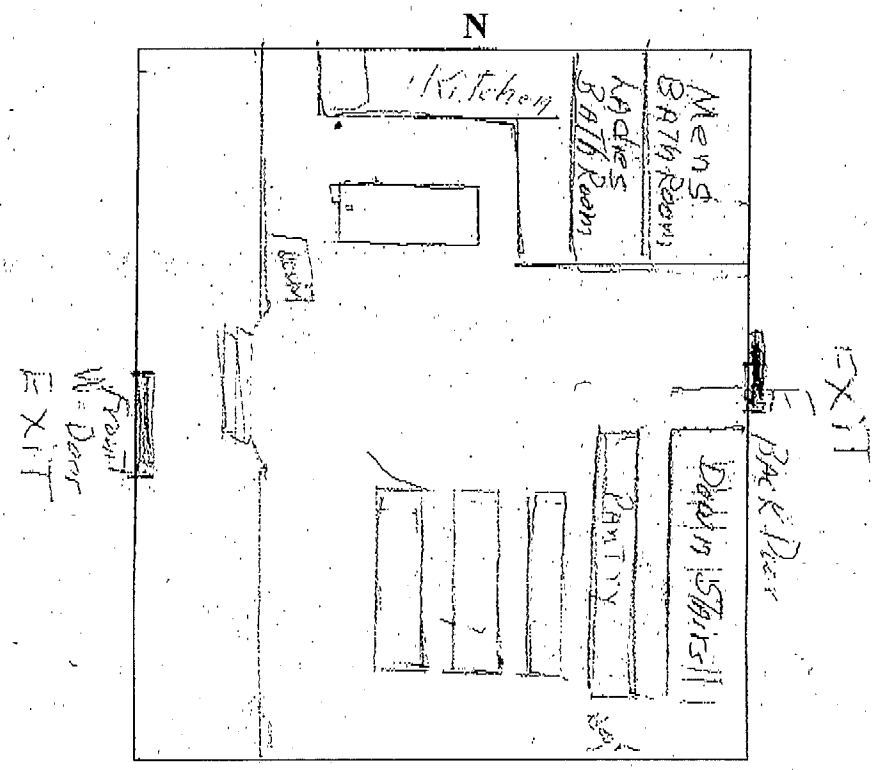
3. **Do not re-enter the building until clearance has been given by the Fire Department.**

4. **Notify the Aging Office of Western Nebraska in Scottsbluff.**

Evacuation Plan:

Identify:
1. Exits (Ex)
2. Flow of Evacuation:
   a. Primary (Red)
   b. Secondary (Blue)
3. Location of Fire Extinguishers (F/E).

FLOOR PLAN OF BUILDING



11-04-05

Hay Springs

EMERGENCY PLAN

Fire Protection/Safety

A. Remain Calm. Do not panic.
B. Immediately evacuate the premises in case of a fire or suspected fire, then call 911.
C. Do not use open flame devices during or after a disaster.
D. Never go back inside a burning or damaged building until an all clear has been given.
E. Stay clear of all fallen electrical wires.
F. Do not run in smoke-filled rooms.
G. Keep low when going through smoke.
H. Evacuation drills will be reviewed twice a year with participants.

Tornado/Severe Weather

A. Remain Calm. Do not panic.
B. Move to hallway or inside wall of an interior room.
C. Store all glass and other breakable objects.
D. Turn hallway lights on.
E. Close all drapes.
F. Know the tornado/high wind procedures.
G. Do not enter damaged portions of the building until all clear is given or otherwise instructed.
H. Monitor weather bulletins.
I. Follow all instructions issued.
J. Tornado Shelter drills will be reviewed each spring with participants.

NUTRITION SITE/SENIOR CENTER: Hemingford

IN THE EVENT OF A FIRE

TELEPHONE NUMBER OF FIRE DEPARTMENT: 9-1-1

PROCEDURE:

1. **Calmly and orderly clear the Building of all individuals.**
   (a) Site Manager will be responsible for assisting individuals out of the Building per the Evacuation Plan.

2. **Notify the Fire Department. Dial 9-1-1**
   (a) Site Manager or assigned staff will be responsible.
   (1) Identify location of fire.
   (2) Describe briefly the nature of the fire.

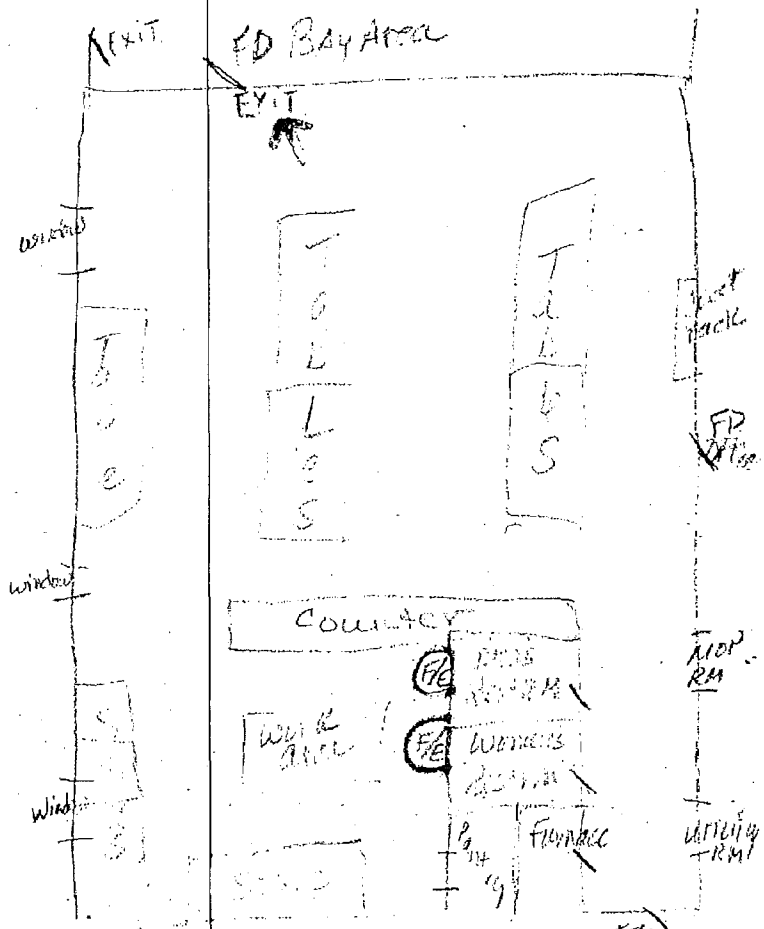
3. **Do not re-enter the building until clearance has been given by the Fire Department.**

4. **Notify the Aging Office of Western Nebraska in Scottsbluff.**

Evacuation Plan:

Identify:

1. Exits (Ex) (yellow)
2. Flow of Evacuation:
   a. Primary (Red)
   b. Secondary (Blue)
3. Location of Fire Extinguishers (F/E). (green)



11-04-05

Hemingford VFD 3084875780 p.2

Hamingford

EMERGENCY PLAN

Fire Protection/Safety

A. Remain Calm. Do not panic.
B. Immediately evacuate the premises in case of a fire or suspected fire, then call 911.
C. Do not use open flame devices during or after a disaster.
D. Never go back inside a burning or damaged building until an all clear has been given.
E. Stay clear of all fallen electrical wires.
F. Do not run in smoke-filled rooms.
G. Keep low when going through smoke.
H. Evacuation drills will be reviewed twice a year with participants.

Tornado/Severe Weather

A. Remain Calm. Do not panic.
B. Move to hallway or inside wall of an interior room.
C. Store all glass and other breakable objects.
D. Turn hallway lights on.
E. Close all drapes.
F. Know the tornado/high wind procedures.
G. Do not enter damaged portions of the building until all clear is given or otherwise instructed.
H. Monitor weather bulletins.
I. Follow all instructions issued.
J. Tornado Shelter drills will be reviewed each spring with participants.

Hemingford VFD 3084875780 p.1

NUTRITION SITE/SENIOR CENTER: Kimball

IN THE EVENT OF A FIRE

TELEPHONE NUMBER OF FIRE DEPARTMENT: 9-1-1

PROCEDURE:

1. **Calmly and orderly clear the Building of all individuals.**
   (a) Site Manager will be responsible for assisting individuals out of the Building per the Evacuation Plan.

2. **Notify the Fire Department. Dial 9-1-1**
   (a) Site Manager or assigned staff will be responsible.
   (1) Identify location of fire.
   (2) Describe briefly the nature of the fire.

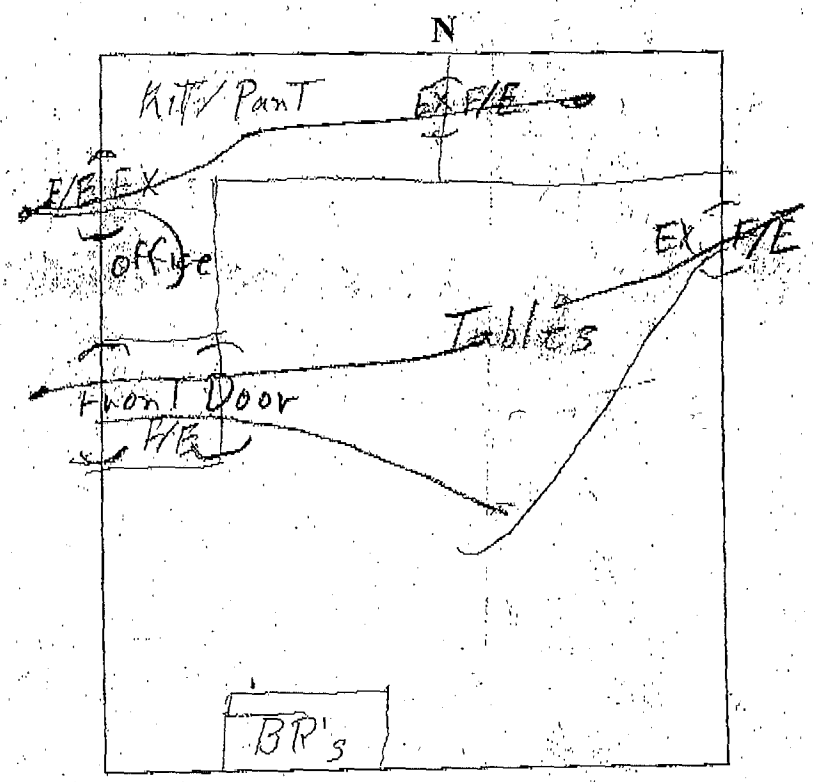
3. **Do not re-enter the building until clearance has been given by the Fire Department.**

4. **Notify the Aging Office of Western Nebraska in Scottsbluff.**

Evacuation Plan:

Identify:
1. Exits (Ex)
2. Flow of Evacuation:
   a. Primary (Red)
   b. Secondary (Blue)
3. Location of Fire Extinguishers (F/E).

FLOOR PLAN OF BUILDING



11-04-05

EMERGENCY EVACUATION POLICY

The Aging Office of Western Nebraska (AOWN) is fully committed to the safety of all staff and participants as they attended 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 plans 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 inactions of a participant to abide by the established emergency procedure. The participant or staff shall assume all risks of liability for his or her failure to abide by the emergency procedures as established by the AOWN.

EMERGENCY PLAN

Fire Protection/Safety

A. Remain Calm. Do not panic.
B. Immediately evacuate the premises in case of a fire or suspected fire, then call 911.
C. Do not use open flame devices during or after a disaster.
D. Never go back inside a burning or damaged building until an all clear has been given.
E. Stay clear of all fallen electrical wires.
F. Do not run in smoke-filled rooms.
G. Keep low when going through smoke.
H. Evacuation drills will be reviewed twice a year with participants.

Tornado/Severe Weather

A. Remain Calm. Do not panic.
B. Move to hallway or inside wall of an interior room.
C. Store all glass and other breakable objects.
D. Turn hallway lights on.
E. Close all drapes.
F. Know the tornado/high wind procedures.
G. Do not enter damaged portions of the building until all clear is given or otherwise instructed.
H. Monitor weather bulletins.
I. Follow all instructions issued.
J. Tornado Shelter drills will be reviewed each spring with participants.

IN THE EVENT OF A FIRE

ELEPHONE NUMBER OF FIRE DEPARTMENT: 9-1-1

OCEDURE: Mitchell

1. **Calmly and orderly clear the Building of all individuals.**
   (a) Site Manager will be responsible for assisting individuals out of the Building per the Evacuation Plan.

2. **Notify the Fire Department. Dial 9-1-1**
   (a) Site Manager or assigned staff will be responsible.
   (1) Identify location of fire.
   (2) Describe briefly the nature of the fire.

3. **Do not re-enter the building until clearance has been given by the Fire Department.**

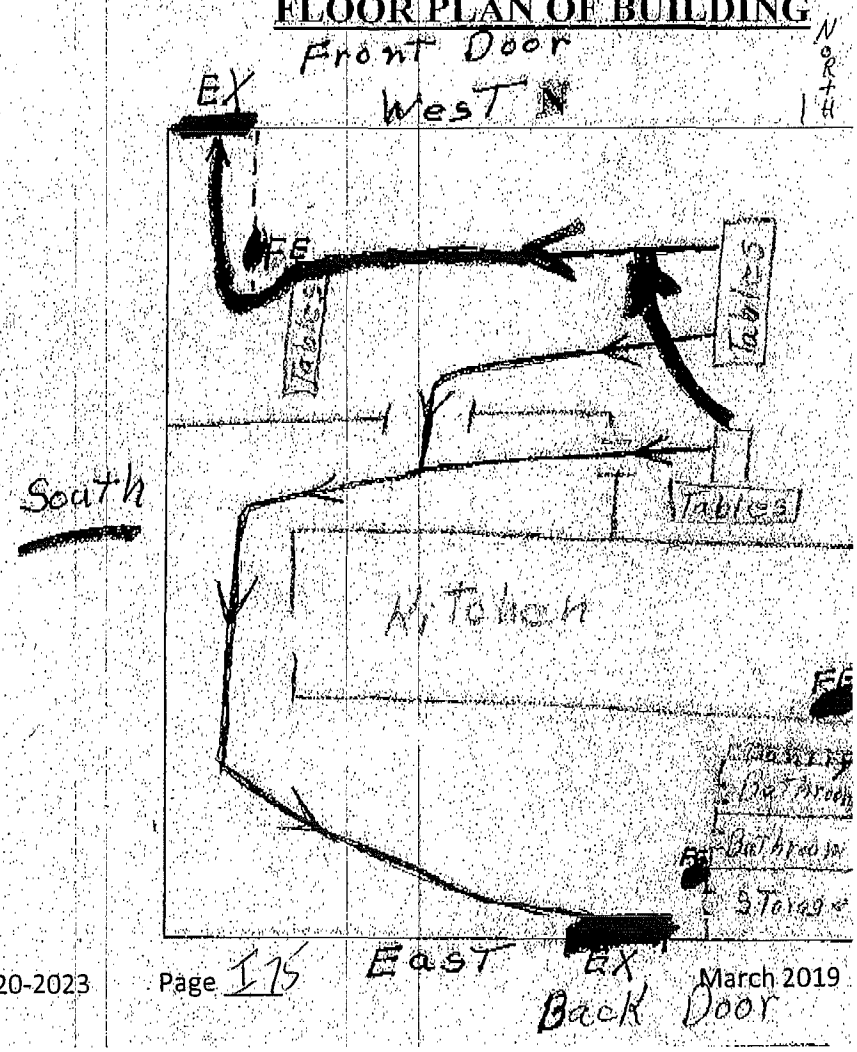
4. **Notify the Aging Office of Western Nebraska in Scottsbluff.**

acuation Plan:

ntify:
1. Exits (Ex)
2. Flow of Evacuation:
   a. Primary (Red)
   b. Secondary (Blue)
3. Location of Fire Extinguishers (F/E).

FE

FLOOR PLAN OF BUILDING



11-04-05

IN THE EVENT OF A TORNADO

Mitchell

I. When a Tornado warning is sounded:

(A) Site Manager will assist individuals to the designated shelter location in the Building.

(B) If the Nutrition Site/Senior Center does not have a designated shelter area, individuals will be assisted to the nearest location which does have a shelter.

(C) Everyone will remain in the shelter area until an All-Clear is sounded.

(D) Notify the Aging Office of Western Nebraska in Scottsbluff.

DESIGNATED SHELTER AREA IN BUILDING

In Bathrooms or under tables?

No designated shelter. Seniors will remain in the building, away from windows, against the wall or under tables.

DESIGNATED SHELTER AREA at Nearest Location, if not in Nutrition Site/ Senior Center:

_____

_____

Tornado evacuation drill will be conducted or discussed monthly during March 2019

EMERGENCY PLAN

Fire Protection/Safety

A. Remain Calm. Do not panic.
B. Immediately evacuate the premises in case of a fire or suspected fire, then call 911.
C. Do not use open flame devices during or after a disaster.
D. Never go back inside a burning or damaged building until an all clear has been given.
E. Stay clear of all fallen electrical wires.
F. Do not run in smoke-filled rooms.
G. Keep low when going through smoke.
H. Evacuation drills will be reviewed twice a year with participants.

Tornado/Severe Weather

A. Remain Calm. Do not panic.
B. Move to hallway or inside wall of an interior room.
C. Store all glass and other breakable objects.
D. Turn hallway lights on.
E. Close all drapes.
F. Know the tornado/high wind procedures.
G. Do not enter damaged portions of the building until all clear is given or otherwise instructed.
H. Monitor weather bulletins.
I. Follow all instructions issued.
J. Tornado Shelter drills will be reviewed each spring with participants.

NUTRITION SITE/SENIOR CENTER: MORRILL

IN THE EVENT OF A FIRE

TELEPHONE NUMBER OF FIRE DEPARTMENT: _____

PROCEDURE:

1. Calmly and orderly clear the Building of all individuals.
   (a) Site Manager will be responsible for assisting individuals out of the Building per the Evacuation Plan.
2. Notify Fire Department.
   (a) Site Manager or assigned staff will be responsible.
   (b) (1) Identify Location of fire.
   (2) Describe briefly the nature of fire.
3. Do not re-enter the Building until clearance has been given by Fire Department.
4. Notify the Aging Office of Western Nebraska in Scottsbluff.

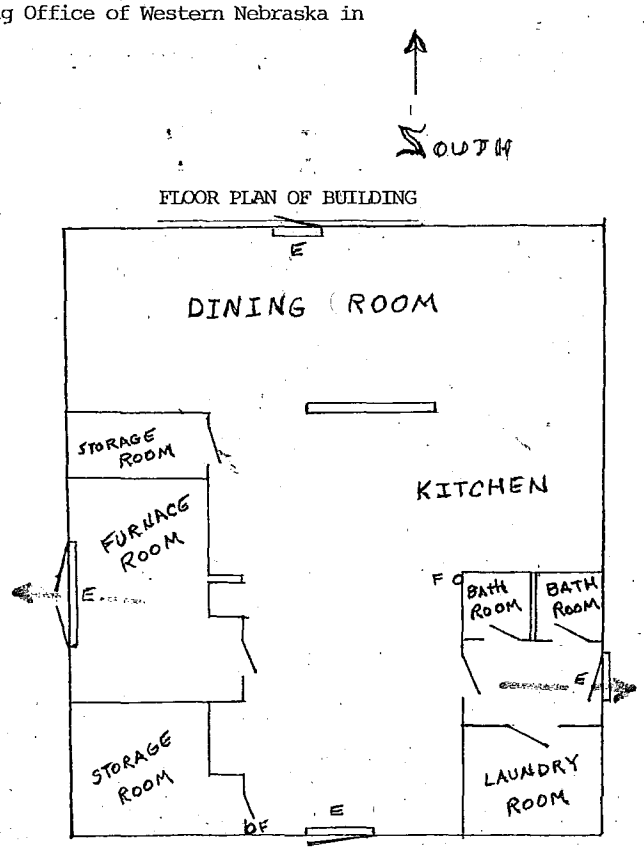
EVACUATION PLAN:

Identify:

1. Exits.
2. Flow of Evacuation:
   1. Primary (Red).
   2. Secondary (Blue).
3. Location of Fire Extinguishers.

(E - EXITS
F - Fire extinguishers)

FLOOR PLAN OF BUILDING



FIRE DRILLS WILL BE CONDUCTED OR REVIEWED MONTHLY.

NUTRITION SITE/SENIOR CENTER: MORRILL

IN THE EVENT OF A TORNADO

I. When a Tornado warning is sounded:

(A) Site Manager will assist individuals to the designated shelter location in the Building.

(B) If the Nutrition Site/Senior Center does not have a designated shelter area, individuals will be assisted to the nearest location which does have a shelter.

(C) Everyone will remain in the shelter area until an All-Clear is sounded.

(D) Notify the Aging Office of Western Nebraska in Scottsbluff.

DESIGNATED SHELTER AREA IN BUILDING

HAS NO designated shelter. Residents And visitors will remain in the building, AwAy from windows, Against the wAll or under tables.

DESIGNATED SHELTER AREA at Nearest Location, if not in Nutrition Site/ Senior Center:

Tornado evacuation drill will be conducted or discussed monthly during Tornado season.

Mownill Nutrition Site

EMERGENCY PLAN

Fire Protection/Safety

A. Remain Calm. Do not panic.
B. Immediately evacuate the premises in case of a fire or suspected fire, then call 911.
C. Do not use open flame devices during or after a disaster.
D. Never go back inside a burning or damaged building until an all clear has been given.
E. Stay clear of all fallen electrical wires.
F. Do not run in smoke-filled rooms.
G. Keep low when going through smoke.
H. Evacuation drills will be reviewed twice a year with participants.

Tornado/Severe Weather

A. Remain Calm. Do not panic.
B. Move to hallway or inside wall of an interior room.
C. Store all glass and other breakable objects.
D. Turn hallway lights on.
E. Close all drapes.
F. Know the tornado/high wind procedures.
G. Do not enter damaged portions of the building until all clear is given or otherwise instructed.
H. Monitor weather bulletins.
I. Follow all instructions issued.
J. Tornado Shelter drills will be reviewed each spring with participants.

Oshkosh Senior Center

EMERGENCY PLAN

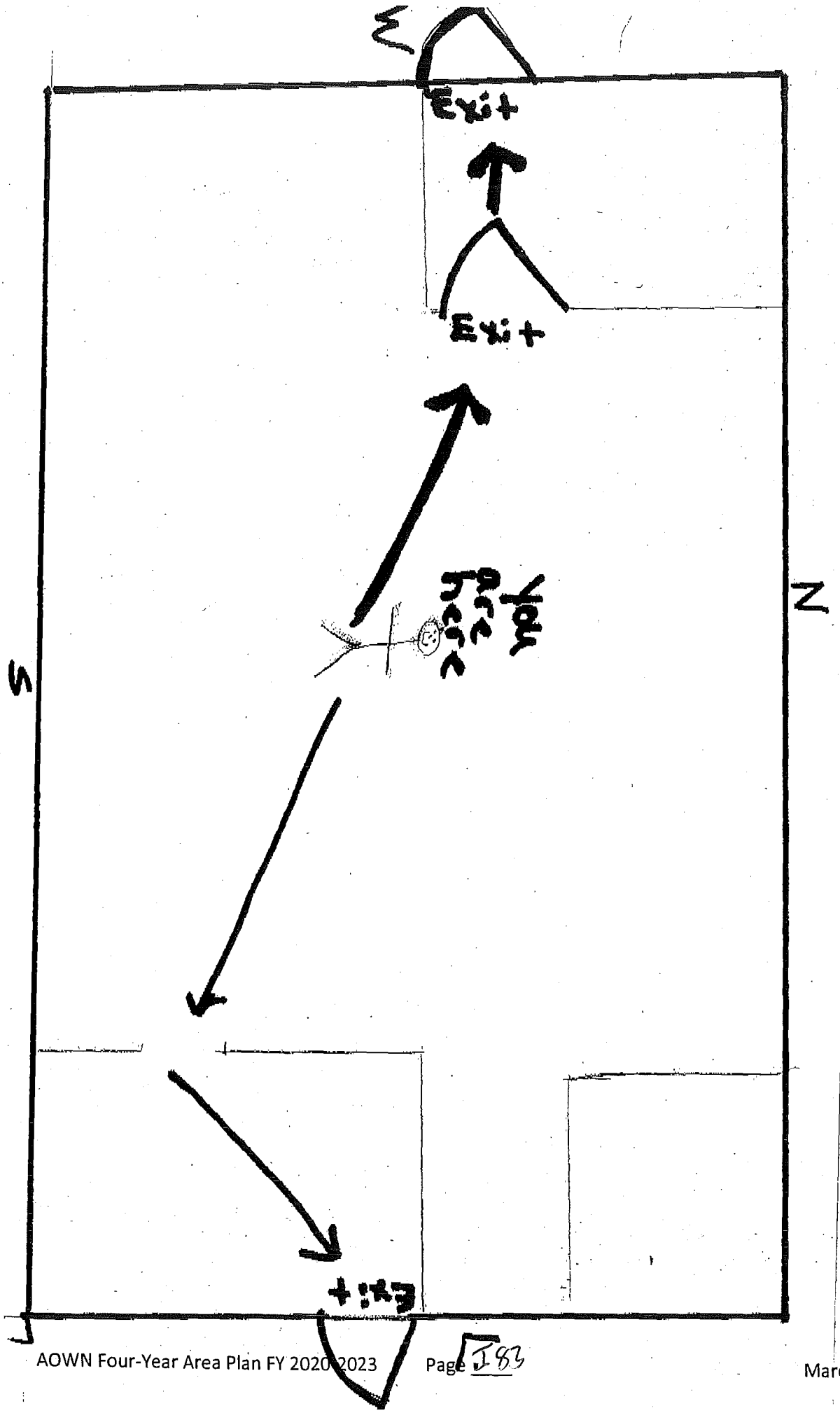
Fire Protection/Safety

A. Remain Calm. Do not panic.
B. Immediately evacuate the premises in case of a fire or suspected fire, then call 911.
C. Do not use open flame devices during or after a disaster.
D. Never go back inside a burning or damaged building until an all clear has been given.
E. Stay clear of all fallen electrical wires.
F. Do not run in smoke-filled rooms.
G. Keep low when going through smoke.
H. Evacuation drills will be reviewed twice a year with participants.

Tornado/Severe Weather

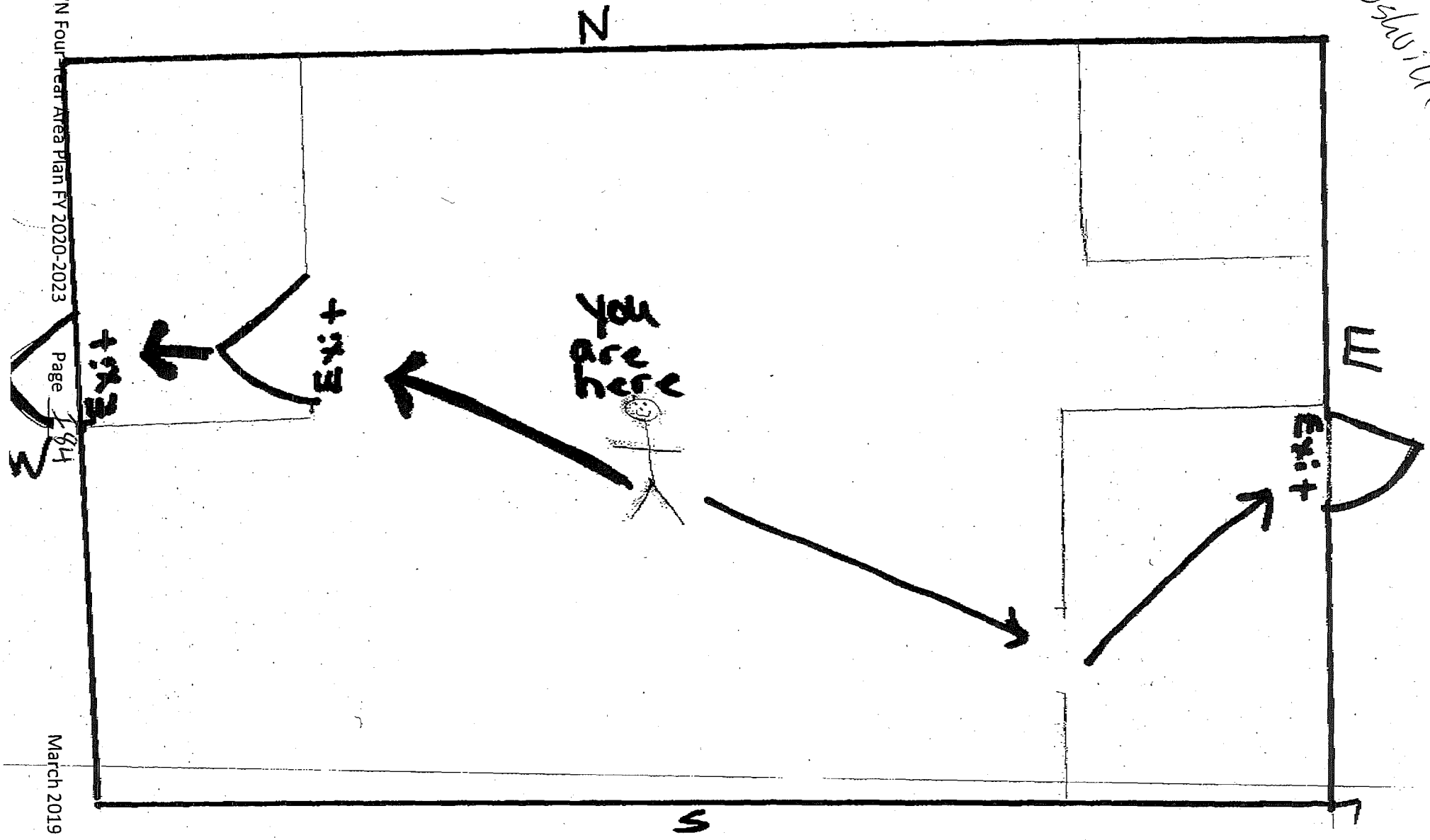
A. Remain Calm. Do not panic.
B. Move to hallway or inside wall of an interior room.
C. Store all glass and other breakable objects.
D. Turn hallway lights on.
E. Close all drapes.
F. Know the tornado/high wind procedures.
G. Do not enter damaged portions of the building until all clear is given or otherwise instructed.
H. Monitor weather bulletins.
I. Follow all instructions issued.
J. Tornado Shelter drills will be reviewed each spring with participants.

Evacuation Plan



Evacuation Plan

Rushville



Rushville Senior Center

IN THE EVENT OF A FIRE

TELEPHONE NUMBER OF FIRE DEPARTMENT: 911

PROCEDURE:

1. Calmly and orderly clear the Building of all individuals.

   (a) Site Manager will be responsible for assisting individuals out of the Building per the Evacuation Plan.

2. Notify Fire Department.

   (a) Site Manager or assigned staff will be responsible.

   (b) (1) Identify location of fire.

   (2) Describe briefly the nature of fire.

3. Do not re-enter the Building until clearance has been given by Fire Department.

4. Notify the Aging Office of Western Nebraska in Scottsbluff.

EMERGENCY PLAN

Fire Protection/Safety

A. Remain Calm. Do not panic.
B. Immediately evacuate the premises in case of a fire or suspected fire, then call 911.
C. Do not use open flame devices during or after a disaster.
D. Never go back inside a burning or damaged building until an all clear has been given.
E. Stay clear of all fallen electrical wires.
F. Do not run in smoke-filled rooms.
G. Keep low when going through smoke.
H. Evacuation drills will be reviewed twice a year with participants.

Tornado/Severe Weather

A. Remain Calm. Do not panic.
B. Move to hallway or inside wall of an interior room.
C. Store all glass and other breakable objects.
D. Turn hallway lights on.
E. Close all drapes.
F. Know the tornado/high wind procedures.
G. Do not enter damaged portions of the building until all clear is given or otherwise instructed.
H. Monitor weather bulletins.
I. Follow all instructions issued.
J. Tornado Shelter drills will be reviewed each spring with participants.

NUTRITION SITE/SENIOR CENTER: Scottsbluff

IN THE EVENT OF A FIRE

TELEPHONE NUMBER OF FIRE DEPARTMENT: 9-1-1

PROCEDURE:

1. **Calmly and orderly clear the Building of all individuals.**
   (a) Site Manager will be responsible for assisting individuals out of the Building per the Evacuation Plan.

2. **Notify the Fire Department. Dial 9-1-1**
   (a) Site Manager or assigned staff will be responsible.
   (1) Identify location of fire.
   (2) Describe briefly the nature of the fire.

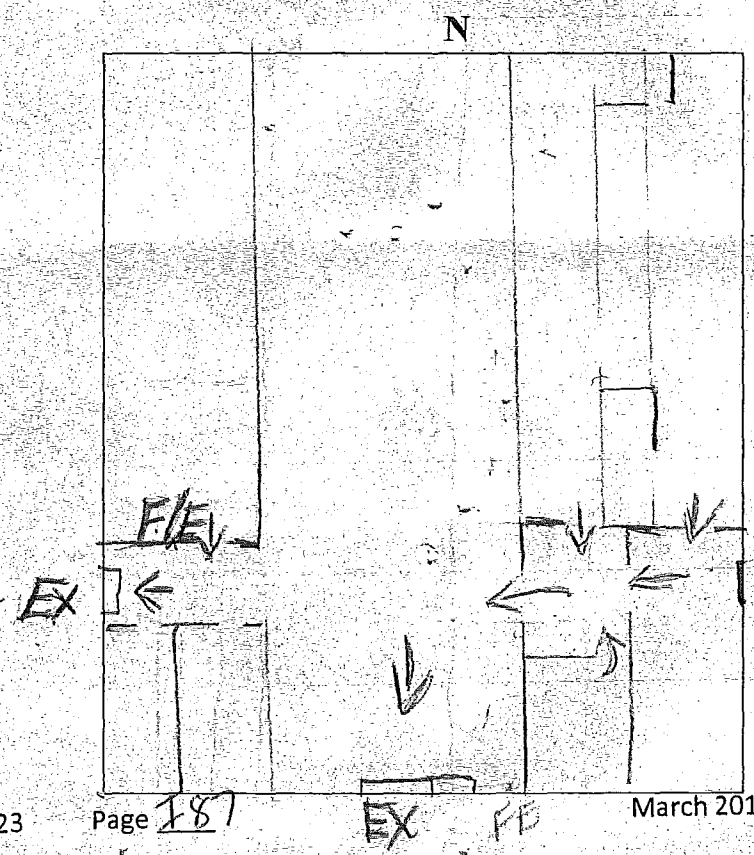
3. **Do not re-enter the building until clearance has been given by the Fire Department.**

4. **Notify the Aging Office of Western Nebraska in Scottsbluff.**

Evacuation Plan:

Identify:
1. Exits (Ex)
2. Flow of Evacuation:
   a. Primary (Red)
   b. Secondary (Blue)
3. Location of Fire Extinguishers (F/E).

FLOOR PLAN OF BUILDING



11-04-05

IN THE EVENT OF A FIRE

TELEPHONE NUMBER OF FIRE DEPARTMENT: 911

PROCEDURE:

1. Calmly and orderly clear the Building of all individuals.

   (a) Site Manager will be responsible for assisting individuals out of the Building per the Evacuation Plan.

2. Notify Fire Department.

   (a) Site Manager or assigned staff will be responsible.

   (b) (1) Identify location of fire.

   (2) Describe briefly the nature of fire.

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EMERGENCY PLAN

Fire Protection/Safety

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H. Evacuation drills will be reviewed twice a year with participants.

Tornado/Severe Weather

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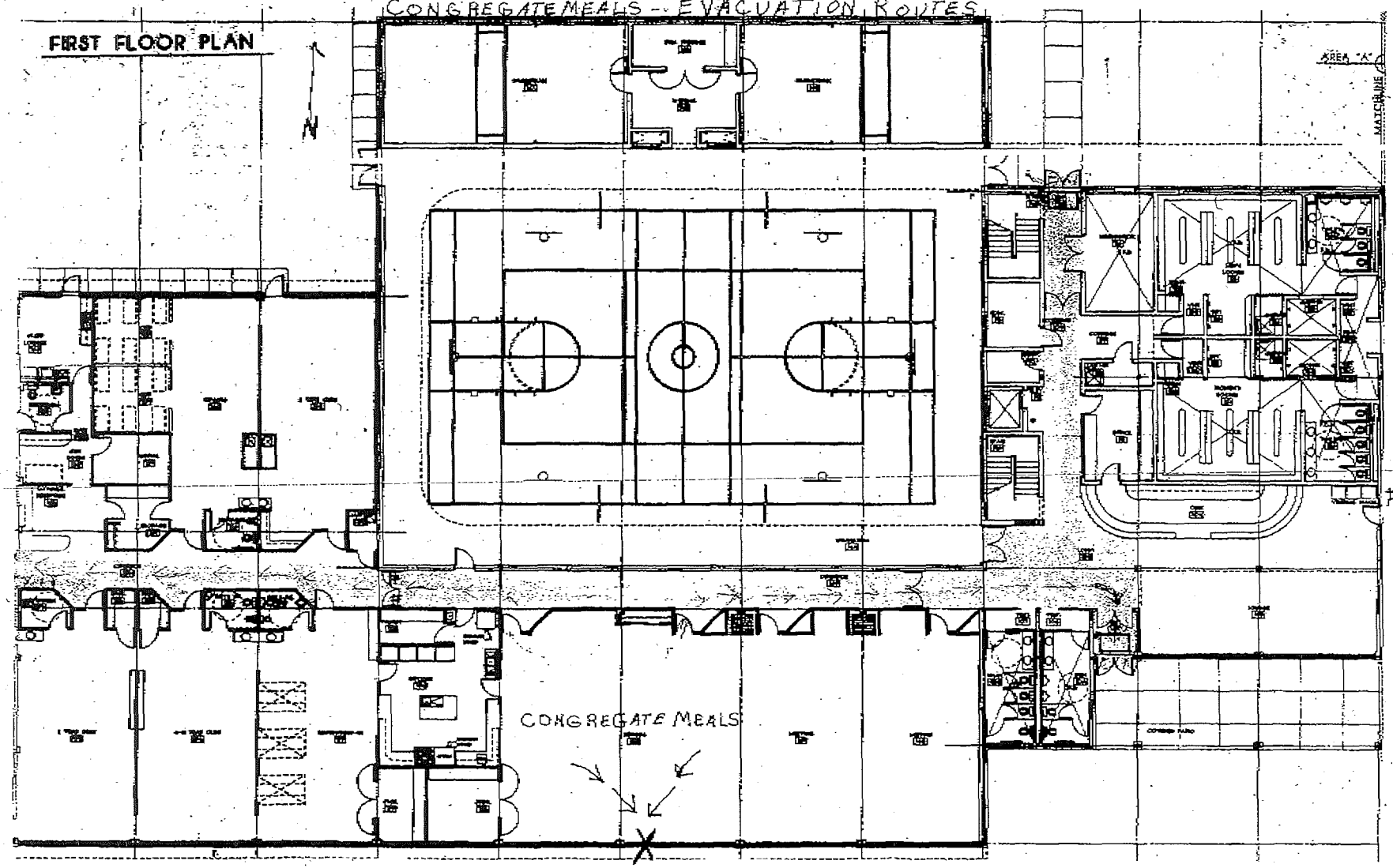
D. Turn hallway lights on.
E. Close all drapes.
F. Know the tornado/high wind procedures.
G. Do not enter damaged portions of the building until all clear is given or otherwise instructed.
H. Monitor weather bulletins.
I. Follow all instructions issued.
J. Tornado Shelter drills will be reviewed each spring with participants.

SIDNEY

CONGREGATE MEALS - EVACUATION ROUTES



LEGEND

→ ALTERNATE EVACUATION ROUTE

X - NOTE #1
BREAK LARG
WINDOW WITH
CHAIR AND
CLEAR GLAS
EXIT THROUGH
OPENING

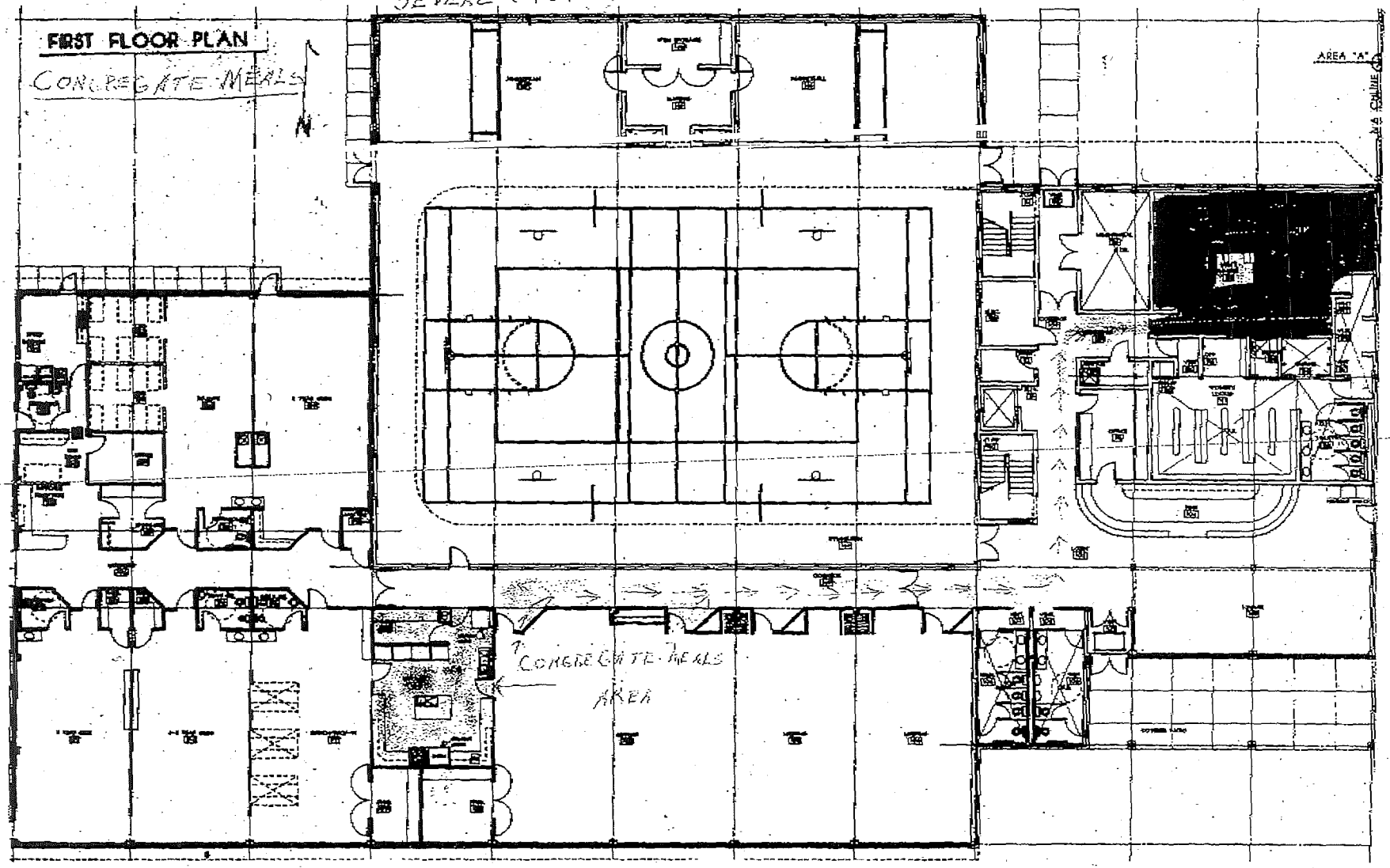
- NOTE #2
CONGREGATE
MEALS PERSON
WILL BE RESPON
IBLE FOR CLOS
WEST CORRIDO
DOORS AFTER
EVACUATION
IS COMPLETE

SEVERE STORM/TORNADO ACTION PLAN

SHELTER LEGEND

IMMEDIATE ACTION SHELTER

PREPARED ACTION SHELTER



EMERGENCY PLAN

Fire Protection/Safety

A. Remain Calm. Do not panic.
B. Immediately evacuate the premises in case of a fire or suspected fire, then call 911.
C. Do not use open flame devices during or after a disaster.
D. Never go back inside a burning or damaged building until an all clear has been given.
E. Stay clear of all fallen electrical wires.
F. Do not run in smoke-filled rooms.
G. Keep low when going through smoke.
H. Evacuation drills will be reviewed twice a year with participants.

Tornado/Severe Weather

A. Remain Calm. Do not panic.
B. Move to hallway or inside wall of an interior room.
C. Store all glass and other breakable objects.
D. Turn hallway lights on.
E. Close all drapes.
F. Know the tornado/high wind procedures.
G. Do not enter damaged portions of the building until all clear is given or otherwise instructed.
H. Monitor weather bulletins.
I. Follow all instructions issued.
J. Tornado Shelter drills will be reviewed each spring with participants.

Banner County

standard™ response protocol

Student Safety

A critical ingredient in the safe school recipe is the classroom response to an incident at school. Weather events, fire, accidents, intruders and other threats to student safety are scenarios that are planned and trained for by students, teachers, staff and administration.

SRP

Our school is expanding the safety program to include the Standard Response Protocol (SRP). The SRP is based on these four actions, Lockout, Lockdown, Evacuate and Shelter. In the event of an emergency, the action and appropriate direction will be called on the PA.

Lockout - "Secure the Perimeter"
Lockdown - "Locks, Lights, Out of Sight"
Evacuate - "To the Announced Location"
Shelter - "Using Announced Type and Method"

Training

Please take a moment to review these actions. Students and staff will be trained and the school will drill these actions over the course of the school year.

More information can be found at http://iloveuguys.org

Lockout

Secure the Perimeter

Lockout is called when there is a threat or hazard outside of the school building.

Students:
- Return to inside of building
- Do business as usual

Teachers
- Recover students and staff from outside building
- Increased situational awareness
- Do business as usual
- Take roll, account for students

Lockdown

Locks, Lights, Out of Sight

Lockdown is called when there is a threat or hazard inside the school building.

Students:
- Move away from sight
- Maintain silence

Teachers:
- Lock classroom door
- Lights out
- Move away from sight
- Maintain silence
- Wait for First Responders to open door
- Take roll, account for students

Evacuate

To the Announced Location

Evacuate is called to move students and staff from one location to another.

Students:
- Leave stuff behind
- Form a single file line
- Take the hands of person in front and behind
- Be prepared for alternatives during response.

Teachers:
- Grab roll sheet if possible
- Lead students to Evacuation Location
- Take roll, account for students

Shelter

Using the Announced Type and Method

Shelter is called when the need for personal protection is necessary.

Types:
- For Tornado
- For Bomb
- For Hazmat

Methods:
- Drop, Cover and Hold
- And Seal
- In Silence

Students:
- Use Appropriate Method

Teachers:
- Use Appropriate Method
- Take roll, account for students

i love u guys FOUNDATION

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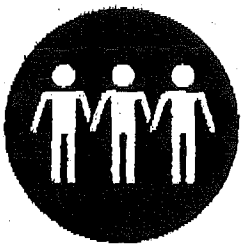
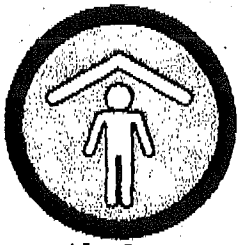
DRAFT SRP Handout for Students and Parents | Version 0.9.3 | 08/18/2009 | Revised: 10/06/2009 | http://iloveuguys.org

In an Emergency
When you hear it. Do it.

Lockout

Lockdown


Evacuate


Shelter

Lockout! Secure the Perimeter.

Students
Return inside
Business as usual

Teachers
Bring students into the building
Increase situational awareness
Take roll
Business as usual

Lockdown! Locks, Lights, Out of Sight.

Students
Move away from sight
Maintain silence

Teachers
Lock classroom door
Turn out the lights
Move away from sight
Maintain silence
Wait for responder to open door
Take roll

Evacuate! (Directions to Follow.)

Students
Leave your stuff behind
Form a line
Hand in hand

Teachers
Lead evacuation to location
Take roll
Notify if missing, extra or injured students

Shelter! (Directions to Follow.)

Students
Shelter types:
1. For tornado
2. For bomb
3. For hazmat

Shelter methods:
1. Drop, cover and hold
2. And seal
3. In silence

Teachers
Shelter type
Shelter method
Take roll

standard response protocol

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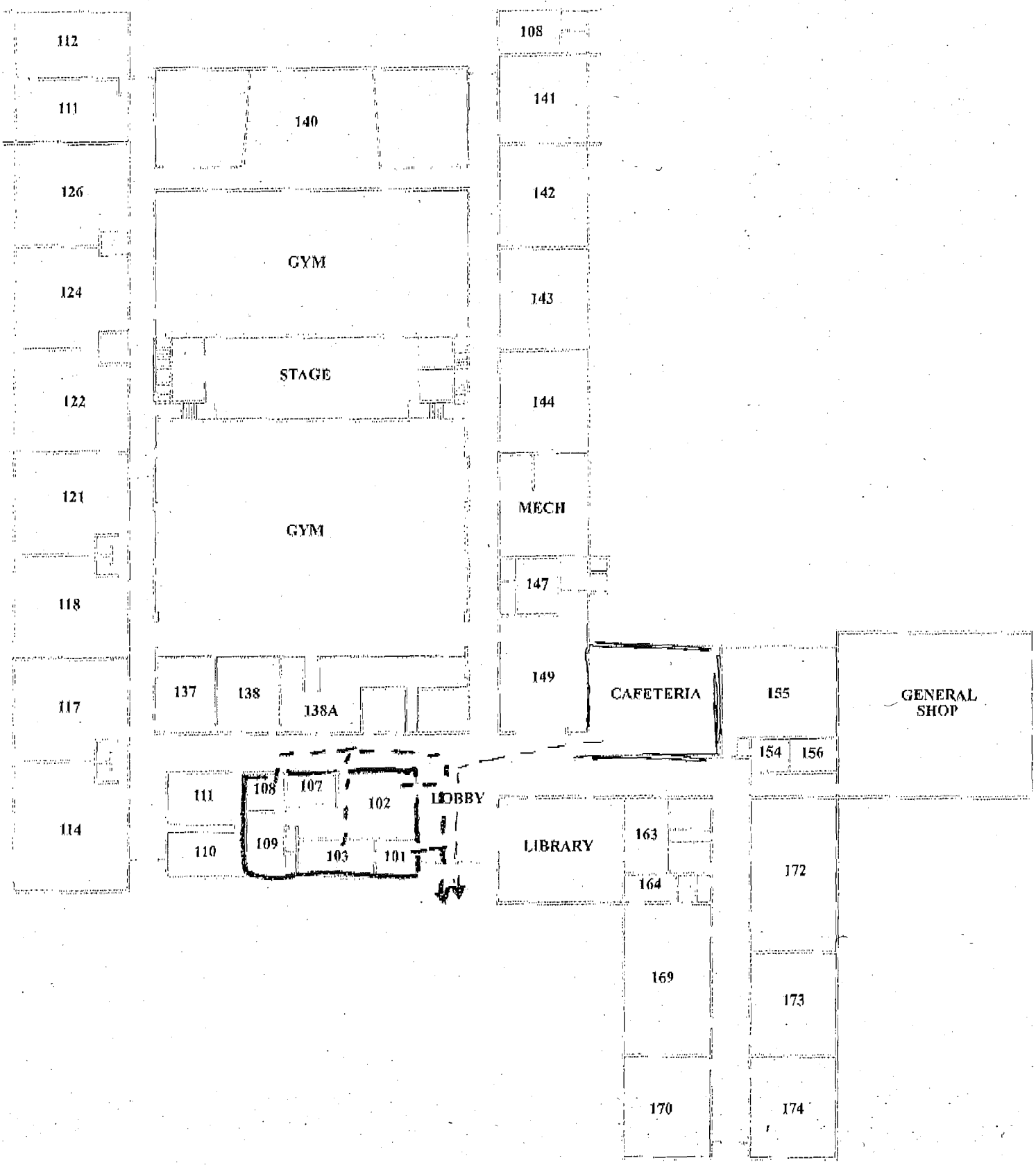
March 2019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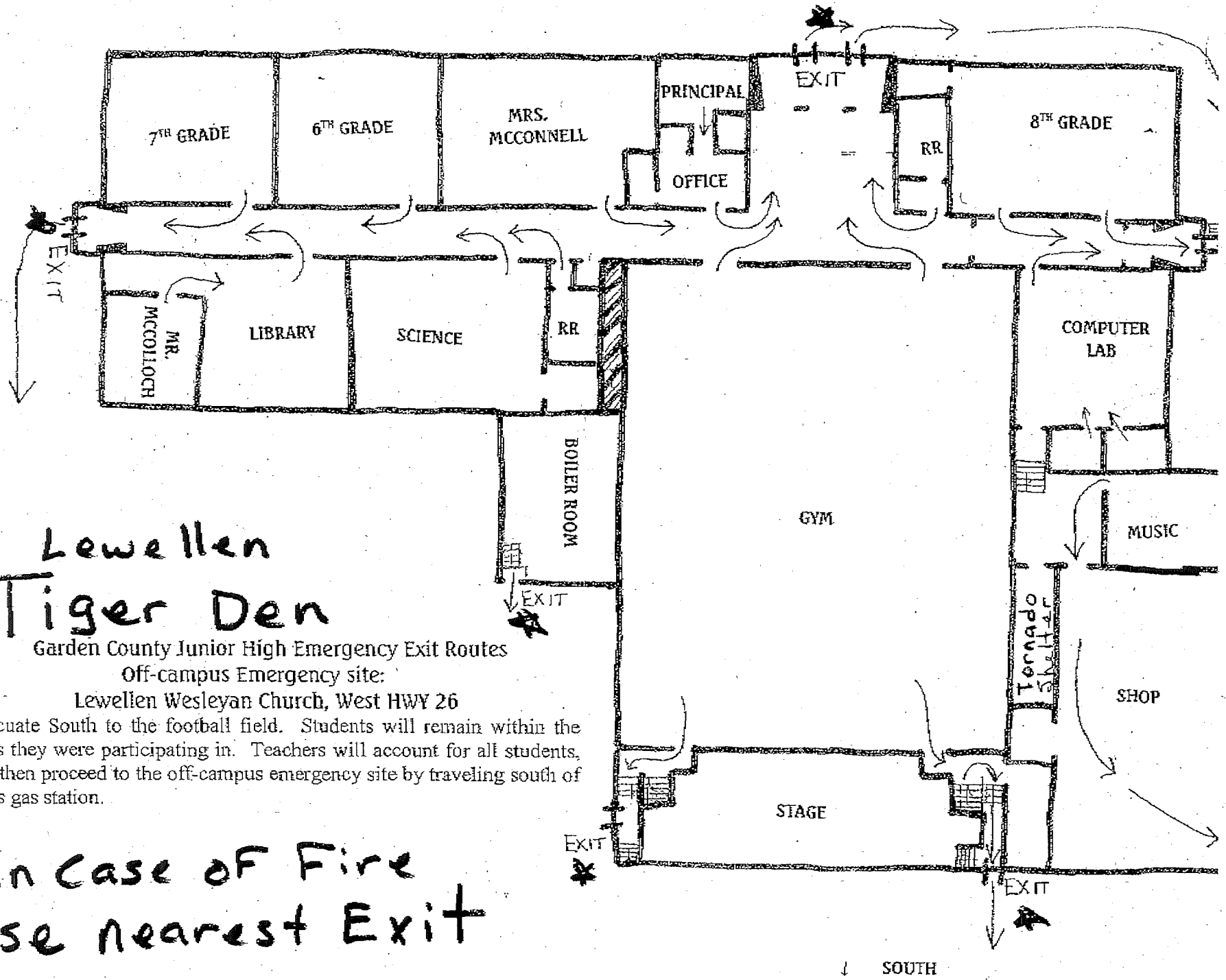
Lewellen Tiger Den

Garden County Junior High Emergency Exit Routes

Off-campus Emergency site:

Lewellen Wesleyan Church, West HWY 26

Evacuate South to the football field. Students will remain within the class they were participating in. Teachers will account for all students, and then proceed to the off-campus emergency site by traveling south of DP's gas station.



in Case of Fire use nearest Exit

EMERGENCY PLAN

Fire Protection/Safety

A. Remain Calm. Do not panic.
B. Immediately evacuate the premises in case of a fire or suspected fire, then call 911.
C. Do not use open flame devices during or after a disaster.
D. Never go back inside a burning or damaged building until an all clear has been given.
E. Stay clear of all fallen electrical wires.
F. Do not run in smoke-filled rooms.
G. Keep low when going through smoke.
H. Evacuation drills will be reviewed twice a year with participants.

Tornado/Severe Weather

A. Remain Calm. Do not panic.
B. Move to hallway or inside wall of an interior room.
C. Store all glass and other breakable objects.
D. Turn hallway lights on.
E. Close all drapes.
F. Know the tornado/high wind procedures.
G. Do not enter damaged portions of the building until all clear is given or otherwise instructed.
H. Monitor weather bulletins.
I. Follow all instructions issued.
J. Tornado Shelter drills will be reviewed each spring with participants.

IN THE EVENT OF A FIRE

TELEPHONE NUMBER OF FIRE DEPARTMENT: 911

PROCEDURE:

1. Calmly and orderly clear the Building of all individuals.

   (a) Site Manager will be responsible for assisting individuals out of the Building per the Evacuation Plan.

2. Notify Fire Department.

   (a) Site Manager or assigned staff will be responsible.

   (b) (1) Identify location of fire.

   (2) Describe briefly the nature of fire.

3. Do not re-enter the Building until clearance has been given by Fire Department.

4. Notify the Aging Office of Western Nebraska in Scottsbluff.

STANDARD LEGAL SERVICES PROVIDER CONTRACT

This contract by and between Aging Office of Western Nebraska (AOWN) and Legal Aid of Nebraska located at 209 S. 19th St. Omaha, NE 68102 (hereinafter referred to as "Contractor").

I. GENERAL TERMS

A. Provision of Service:

a. Legal Assistance – provision of legal advice/ counseling, brief service and representation by an attorney.
b. Legal Education – provision of education on issues of concern to older individuals.

B. Eligible individual/client: A person 60 years of age or older and in greatest economic or social need within the AOWN service area.

C. Service area: Sioux, Dawes, Sheridan, Box Butte, Scotts Bluff, Morrill, Garden, Banner, Kimball, Cheyenne, and Deuel Counties

D. Contract Dates: July 1, 2020 – June 30, 2021

E. Contract amount: The maximum dollar amount payable under this contract is $16,500 subject to actual expenses and availability.

AOWN and the Contractor therefore enter into the following:

II. SCOPE OF SERVICE

A. This contract provides for a legal assistance program (and includes legal education services).

B. Services will be delivered in the following designated counties:

Sioux, Dawes, Sheridan, Box Butte, Scotts Bluff, Morrill, Garden, Banner, Kimball, Cheyenne, and Deuel Counties

C. The Contractor will give priority to legal assistance related to income, health care, long-term care, nutrition, housing, utilities, protective services, defense of guardianship, abuse, and neglect and age discrimination. (As stated in the Older Americans Act).

D. The Contractor will give priority for legal assistance services to those older individuals who are: rural, in greatest economic or social need, severely disabled, limited in English proficiency, suffering from Alzheimer's disease or related disorders, at risk of institutionalization, at risk of homelessness or at risk of or under guardianship. (Older Americans Act target groups).

E. All legal services provided will be delivered in a manner which conforms to Legal Services Statewide Standards of the Nebraska Department of Health and Human Services, State Unit on Aging.

III. CONTRACTOR DUTIES

A. Provide clients in greatest social and economic need legal assistance, legal advice, counseling and representation, in the priority legal issue areas outlined in this contract.

B. Provide targeting and outreach to identify older individuals eligible for assistance under this contract with special emphasis on individuals who are: rural, in greatest economic or social need, severely disabled, limited in English proficiency, suffering from Alzheimer's disease or related disorders, at risk of institutionalization, at risk of homelessness or at risk of or under guardianship. The outreach will not only identify but will inform these older individuals and their caregivers of the availability of legal assistance under this contract.

C. Provide legal services in the following descending order of priority:

a. Protective Services, including but not limited to abuse, prevention, financial exploitation, defense of guardianship and conservatorship proceedings, durable powers of attorney, and nursing home rights.
b. Public benefits, including but not limited to social security, veterans benefits, food stamps, Medicaid (except spousal impoverishment), supplemental security income, and Medicare.
c. Housing and essential services, including but not limited to tenant rights, utilities, and public housing.
d. Health care, including patient rights, health care powers of attorney, and living wills.
e. Debt collection when there is a meritorious defense, when a repayment agreement is possible, or when assets are subject to attachment or garnishment.
f. Consumer fraud.
g. Spousal impoverishment.
h. Dissolution of marriage, where income is affected.
i. Wills.

D. Means testing shall not be used for providing services under this contract. Services shall not be denied to older individuals who do not contribute to the cost of the service.

E. Not subcontract any interest or obligation arising under this contract without written agreement of AOWN.

F. Demonstrate to AOWN the capacity to provide legal assistance in the principal language spoken by clients in areas where a significant number of clients do not speak English as their principal language.

G. Coordinate services with AOWN staff on programs including but not limited to Long Term Care Ombudsman, Senior Medicare Patrol, Caregiver, Nutrition and Medicaid Waiver in developing and utilizing a procedure for case acceptance and referrals.

H. Submit programmatic and fiscal reports to AOWN as per an established schedule including the quarterly and annual reports.

I. Provide community education services to include, speaking engagements, preparation of bulletins and inclusion of articles in the Contractor and AOWN newsletters.

J. Abide by the Code of Professional Responsibility adopted by the Supreme Court of Nebraska to regulate the practice of law.

K. Develop and follow a protocol for referral of fee generating cases by referring the client to the Nebraska State Bar, or the Omaha Bar Association.

L. Work with AOWN to develop a program policy on conflict of interest.

M. Obtain and keep in force a commercial general liability insurance as well as a professional liability insurance policy.

N. Attend at least one training annually relevant to the Title IIIB contract.

O. Work with AOWN to develop and utilize a method of surveying client satisfaction without breaching client confidentiality.

P. Work with AOWN to develop and utilize a plan for coordination of services with the Legal Services Corporation.

IV. AOWN Duties

A. Reimburse the Contractor for services provided under this contract.

B. Provide the Contractor with forms for reporting units of service and expenditures of services provided under this contract.

C. Ensure that the attorneys, paralegals and other non-lawyers involved in providing Title IIIB legal assistance under this contract can demonstrate their expertise in the priority issue areas necessary to provide effective administrative and judicial representation to older persons in social or economic need.

D. Work with the Contractor to assure that all paralegals/legal assistants who provide client services are supervised directly by an attorney, and that all paralegals/legal assistants adhere to the Code of Ethics and Professional Responsibility of the National Association of Legal Assistants, Inc.

E. Work with the Contractor to develop local program plans annually for reaching the target populations and addressing the priority issue areas.

F. Provide to the Contractor copies of written monitoring reports, monitoring checklists and onsite assessment reports pursuant to services under this contract.

G. AOWN shall not require the Contractor to reveal any information that is protected by attorney client privilege.

H. AOWN shall indemnify and hold harmless Contractor for claims arising by reason of any act or omission of AOWN under this contract.

V. TERMINATION OR SUSPENSION

A. This contract is contingent upon the availability of funds. In the event funds for this service are not available to AOWN, AOWN may terminate the contract by written notice of 60 working days and no further services or payment for services shall be rendered.

B. If either the Contractor or AOWN abandons, non-performs, or before completing, discontinues services; or if the commencement or timely completion of the service by either party is rendered improbably, infeasible or illegal, the other party may, by written notice of 30 days, terminate or suspend any or all of this obligation under this contract until such time as the events or conditions resulting in such suspension has ceased or been corrected.

C. Either party may terminate this contract by providing 60 days written notice of the termination to the other party.

IN WITNESS THEREOF, AOWN and Contractor, by and through their authorized officers, have duly executed this contract.

FOR Aging Office of Western Nebraska

Cheryl Brunz

Cheryl Brunz

6/16/2020

DATE

FOR Legal Aid of Nebraska

Milo Mumgaard

6/24/20

DATE

"dignity and enrichment of life for Senior Citizens"

AGING OFFICE OF WESTERN NEBRASKA

Bluffs Business Center
1517 Broadway, Suite 122
Scottsbluff, NE 69361

308-635-0851
(Scottsbluff)
1-800-682-5140
(Nebraska toll free)

A. O. W. N.

Case Management & Choices

Nutrition & Health

Nutrition Centers

Supportive Services

AGING OFFICE OF WESTERN NEBRASKA (AOWN)

The AOWN Area Agency on Aging is one of eight (8) designated in the State of Nebraska. It maintains the mission of providing a comprehensive and coordinated service delivery system to assist elderly citizens to remain safe and independent in their own home and community.

It is created as a unit of local government by a consortium of Counties of the Panhandle of Nebraska who are concerned for the well being of their older residents. The participating Counties are:

Banner	Kimball
Box Butte	Morrill
Cheyenne	Scotts Bluff
Dawes	Sheridan
Deuel	Sioux
Garden	

The AOWN is part of the State and National Aging Network designated to assist our elderly population.

Most services described in this brochure are of no cost to eligible participants, but a voluntary contribution is requested to help defer the total cost of their provision.

Eligibility for services is determined by age. A person must be 60 years of age or older to qualify, but other considerations may be given. Please contact the AOWN for determination.

The Service Area of the AOWN is composed of the eleven Counties of the Panhandle. This area covers 14,138 square miles or 18% of the area of the State of Nebraska. Within this eleven County area there are thirty-six villages/towns. Per the 2010 Census the total population of the Panhandle Counties as a composite is 87,789 or 5% of the total State population. The elderly population, 60 or older, of the Panhandle totals 20,683 citizens or 24% of the total population of the Panhandle.

	60+ Population
Banner County	189
Box Butte County	2,427
Cheyenne County	2,158
Dawes County	1,968
Deuel County	589
Garden County	686
Kimball County	1,095
Morrill County	1,281
Scotts Bluff County	8,338
Sheridan County	1,588
Sioux County	364
	20,683

If the following services do not address your specific need, please contact the AOWN. If you would like information on services available across the State of Nebraska, you may contact the Nebraska Health and Human Services, Division on Aging at 1-800-942-7830.

Department of Health & Human Services can be contacted at: 1-855-632-7633.

For Economic Assistance call: 1-800-383-4278.

For information on services throughout the United States, you can call the Eldercare Locator at 1-800-677-1116 or www.eldercare.gov

A. O. W. N.

Case Management & Choices

Nutrition & Health

Nutrition Centers

Supportive Services

LONG-TERM CASE MANAGEMENT (CMU)

The AOWN Case Management program is designed to provide identification, coordination, and facilitation of community services to assist elderly to remain in their own homes. This program receives its certification from the Nebraska Health and Human Services, Division on Aging.

Case Managers are Registered Nurses or Certified Social Workers. They conduct a complete assessment of each individual to identify needs, develop and recommend a plan of care, help arrange for appropriate community resources, and provide regular follow-up to assure satisfaction and to identify changing needs. This program does not provide skilled nursing services.

The CMU, by State statute, must determine the individual's ability to cost share in its provision. Each person's monthly income is applied to a sliding fee scale to assess their share. But no individual will be denied service due to their inability to pay.

The program is available to all older residents in the Panhandle of Nebraska. Referrals are received from any source. If you would like further information on this program, contact the CHOICES Supervisor at the AOWN.

MEDICAID WAIVER/ SENIOR CARE OPTIONS

The AOWN is committed to "helping older Nebraskans find the right care at the right time". For individuals who are considering admission to a nursing home, community based services may be an option so that they may continue to stay at home. Medicaid allows for persons who are aged 65 and older and meet certain eligibility criteria to have the choice of entering the facility or receiving assistance in the home or another alternative to the nursing home. This assistance should not be confused with Medicare benefits.

Criteria:

- Aged 65 or older.
- Medicaid eligible.
- Nursing Home level of care.
- Cost of care cannot exceed what Medicaid would pay for nursing facility care.

An AOWN Service Coordinator will work in conjunction with the Nebraska Health and Human Services in the eligibility determination. An assessment will be conducted to determine the appropriateness of this service arrangement, and the older person will have the final determination of care.

For further information, please contact the AOWN CHOICES Supervisor.

Case Management & Choices

Nutrition & Health

Nutrition Centers

Supportive Services

HEALTH PROMOTION

Promotion of good health and practices of wellness for the older population is accomplished by presentations, information and demonstrations by the AOWN. The AOWN is available to present to any organization or group, information on health practices and awareness for the elderly.

For further information please contact the AOWN Health Promotion Coordinator.

LONG TERM CARE OMBUDSMAN

The Nebraska Department on Aging is designated to serve as the Ombudsman provider in the State. This program is the advocate for the well being of residents who are residing in long term care facilities. The AOWN will assist in the referral to the Department of any complaint, concern or issue affecting a nursing home resident. You may call the AOWN or the Nebraska Department on Aging.

NUTRITION SERVICES

The AOWN administrates a noon meal program throughout the Panhandle of Nebraska. You may identify the closest location to you by reviewing the map which follows. Each meal is prepared to meet 1/3 of the daily recommended dietary needs of older adults. The suggested contribution for meals is solicited to help defray the cost of its provision.

To arrange for the Nutrition service please call the Site Manager at any of the locations listed. Advance notification is appreciated. All locations serve five days a week.

Congregate Meals: There are 20 Site locations throughout the Panhandle. The meal program is a great place to meet and socialize with your friends and participate in other activities.

Home Delivered Meals (HD): For the elderly, who are unable to attend the congregate meal program, arrangements can be made to have a meal brought to their home. This service is intended for individuals with physical incapacities which restrict them to being homebound.

For additional information on Nutrition Services, please call the Programs Coordinator at the AOWN.

SITE LOCATIONS

ALLIANCE
Alliance Senior Center
212 Yellowstone
Alliance, NE 69301
(308) 762-8774

BAYARD
Bayard Senior Center
511 Main
Bayard, NE 69334
(308) 586-1966

BRIDGEPORT
Prairie Winds Community Center
424 N. Main
Bridgeport, NE 69336
(308) 262-1868

CHADRON
Senior Citizens Community Center
251 Pine Street
Chadron, NE 69337
(308) 432-2734

CHAPPELL
Chappell Senior Center
245 Matlock
Chappell, NE 69129
(308) 874-2954

CRAWFORD
Dawes County Senior Center
404 2nd Street
Crawford, NE 69339
(308) 665-1515

GERING
Gering Multi-Purpose Senior
Citizens Center, Inc.
2005 Depot - P.O. Box 504
Gering, NE 69341
(308) 436-3233

GORDON
Gordon Senior Center
113 3rd St.
Gordon, NE 69343
(308) 282-2939

HARRISBURG
Banner County Public School
(during school term)
Harrisburg, NE 69345
(308) 436-5262

HARRISON
Sunshine Senior Center
Highway 20
Harrison, NE 69346
(308) 668-2261

HAY SPRINGS
Hay Springs Senior Center
125 N. Main
Hay Springs, NE 69347
(308) 638-4534

HEMINGFORD
Hemingford Nutrition Site
Fire Hall
517 Niobrara
Hemingford, NE 69348
(308) 487-5550

KIMBALL
Friendship Senior Center
107 South Oak
Kimball, NE 69145
(308) 235-4505

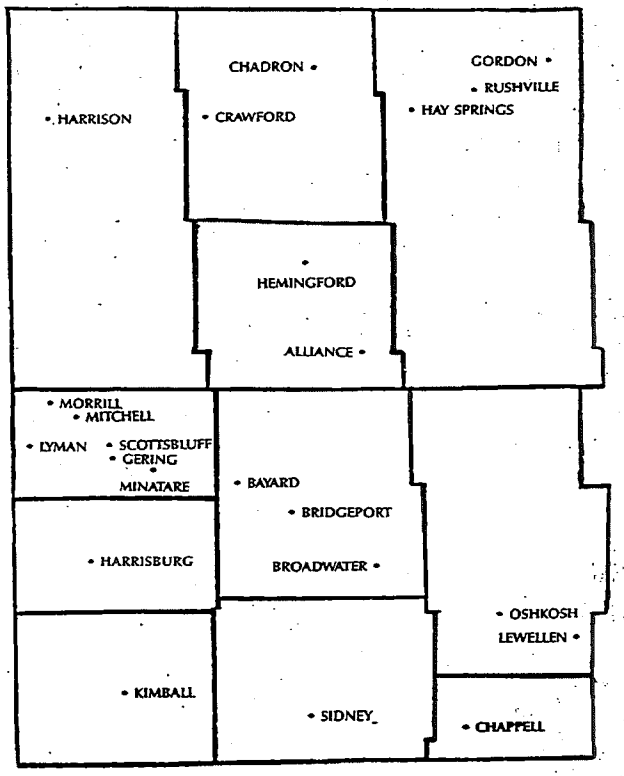
LEWELLEN
Tiger Den
504 W. 26 HWY
Lewellen, NE 69147
(308) 778-0102

LYMAN (HD only)
Lyman, NE 69352
(308) 247-3323

MINATARE (HD only)
Minatare, NE 69356
(308) 436-3233

HD - Home Delivered

SITE LOCATIONS



MITCHELL
Mitchell Senior Center
1257 Center Avenue
Mitchell, NE 69357
(308) 623-1145

MORRILL
Morrill Manor
Rt 1 Charles St.
Morrill, NE 69358
(308) 247-3323

OSHKOSH
Oshkosh Senior Center
303 Main St.
Oshkosh, NE 69154
(308) 772-3400

RUSHVILLE
Senior Center of Rushville
210 South Main
Rushville, NE 69360
(308) 327-2061

SCOTTSBLUFF
Scottsbluff Senior Center
1502 21st Ave.
Scottsbluff, NE 69361
(308) 635-0263

SIDNEY
Cheyenne County
Community Center
627 Toledo Street
Sidney, NE 69162
(308) 254-4835

SUPPORTIVE SERVICES

An array of other supportive services are also available from the AOWN either directly or by other providers contracted with the AOWN.

Handyman/Chore: In-Home assistance in the form of housekeeping & homemakers, yard mowing, snow removal, and minor repairs and renovation is available in limited areas of the Panhandle. Please call the AOWN for the available providers.

Information & Assistance: Extensive identification of community services is available. This service will put you in contact with a service provision to assist in your particular need.

ADRC: Aging and Disability Resource Center provides answers to people's questions about long term care and receive accurate, objective and community specific answers to those questions. Please contact the AOWN.

Other: Telephoning, friendly visitor, support group for Caregivers, educational presentations, and coordination with other service providers.

Durable Medical Equipment: The AOWN has a limited inventory of commodes, walkers, bath benches and other equipment items which can be loaned out at no charge.

Senior Companion Program: Individuals who are in need of a volunteer to help with errands, be an advocate or help you in the home. Please contact AOWN.

NEBRASKA AREA AGENCIES ON AGING

Aging Office of Western Nebraska
Bluffs Business Center
1517 Broadway, Suite 122
Scottsbluff, Nebraska 69361
(308) 635-0851
1-800-682-5140
Facsimile (308) 635-2321

Blue Rivers Area Agency on Aging
103 Eastside Blvd.
Beatrice, Nebraska 68310
(402) 223-1376
1-888-317-9417
Facsimile (402) 223-2143

Eastern Nebraska Office on Aging
4780 S. 131st St.
Omaha, Nebraska 68137
(402) 444-6444
1-888-554-2711
Facsimile (402) 444-6503

Aging Partners
1005 "O" Street
Lincoln, Nebraska 68508-3628
(402) 441-7070
1-800-247-0938
Facsimile (402) 441-7160

Midland Area Agency on Aging
2727 W. 2nd St., Suite 44D
Hastings, Nebraska 68901
(402) 463-4565
1-800-955-9714
Facsimile (402) 463-1069

Northeast Nebraska Area Agency on Aging
119 Norfolk Ave.
Norfolk, Nebraska 68701
(402) 370-3454
1-800-672-8368
Facsimile (402) 370-3279

South Central Nebraska Area Agency on Aging
4623 Second Avenue, Suite 4
Kearney, Nebraska 68847
(308) 234-1851
1-800-658-4320
Facsimile (308) 234-1853

West Central Nebraska Area Agency on Aging
115 North Vine
North Platte, Nebraska 69101
(308) 535-8195
1-800-662-2961
Facsimile (308) 535-8190

AGING OFFICE OF WESTERN NEBRASKA

1517 Broadway, Suite 122
Scottsbluff, NE 69361

Scottsbluff, 308-635-0851
Nebraska toll free 1-800-682-5140
FAX - 308-635-2321
www.aown.org

SERVICES AVAILABLE TO ALL PERSONS WITHOUT REGARD TO RACE, COLOR, HANDICAP, NATIONAL ORIGIN, SEX OR AGE.

Printed with funding provided by The Older Americans Act.

Printed On Recycled Paper

From the Director ~ Cheryl Brunz

Where did 2018 go? It seems like each year, month and even day keep flying by faster than I can keep up with. I remember that my parents always told us-don't wish your life away; one day it will fly by and you will wonder where it went. That day has come!!!

I hope everyone had a wonderful holiday season. Now we are embracing ourselves for the Nebraska winter months ahead. Here are some winter health tips to follow:

Raise your Vitamin D levels naturally (without pills or sunlight). The big secret is making healthy lifestyle changes. For example, if you lose just 5% or more of your body weight, your vitamin D blood levels will shoot up. Other ways to increase your Vitamin D naturally are to lower your cholesterol, exercise, and eat more fatty fish, such as wild salmon.

Protect your skin! Sunscreen is more important in the winter. There are two types of ultraviolet (UV) light from the sun that damage your skin; ultraviolet A (UVA) and ultraviolet B (UVB) light. UVB light penetrates the superficial layers of the skin and (Continued on page 6)

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Visit Our Website For More Information: www.aown.org

Sudoku No. 1

		6				5		7
	9			6	8			
7		8			5			4
		1	5		4	2	9	
	7			3				
3		9				7	1	
	5			4		8		9
	8	2	6					
				2	7	4		6

Sudoku No. 2

1		7	4	2			9	
4								2
	5		7			1		3
9				5			6	
	4		8		6		2	
3		5					1	
2				1	3			6
		3		9			7	
6					8	4		5

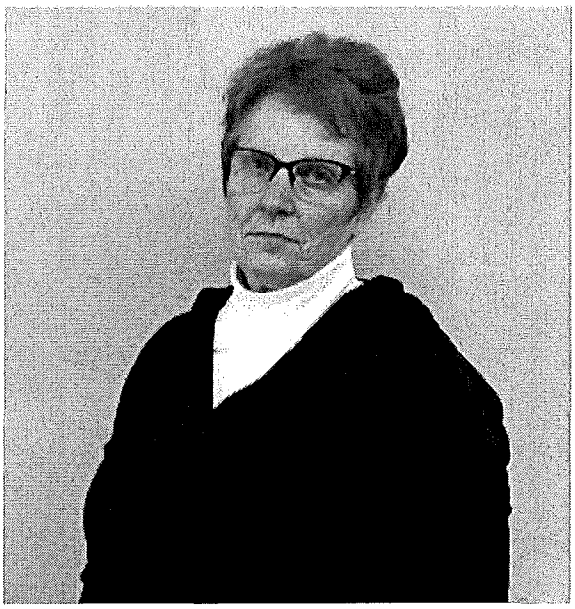
Senior Center Locations

Alliance
308-762-8774
Banner Co. Sch.
308-436-5262
Bayard
308-586-1966
Bridgeport
308-262-1868
Chadron
308-432-2734
Chappell
308-874-2954
Crawford
308-665-1515
Gering
308-436-3233
Gordon
308-282-2939
Harrison
308-668-2261
Hay Springs
308-638-4534
Hemingford
308-487-5550
Kimball
308-235-4505
Lewellen Tiger Den
308-778-0102
Mitchell
308-623-1145
Morrill
308-247-3323
Oshkosh
308-772-3400
Rushville
308-327-2061
Scottsbluff
308-635-0263
Sidney
308-254-4835

Handy-Bus Contacts

Box Butte Co.	308-762-3596
Cheyenne Co. Sidney	308-254-7070
Chadron	308-432-0520
Crawford	308-665-1256
Kimball Co.	308-235-0262
Panhandle Trails	308-761-8747
Scotts Bluff Co.	308-436-6688
Sheridan Co.	308-360-3504

Let me introduce you to the Bayard Senior Center/ Nutrition Site



Located just north of Historic Chimney Rock in the sleepy bedroom community of Bayard, Ne. you will find our growing Senior Center. Doors open at 8:00am to greet the morning coffee and cookie crowd. The senior exercise class comes in next kicking up their heels with flexing and stretching to fun exercise videos.

Around 11:00am the seniors start filtering in greeted by the smell of a nutritious meal. They will sit and fellowship, read the paper, do puzzles or just watch TV.

At 11:30 the dinner bell rings. The warm wholesome meal is served, and the room is soon filled with lunch time chatter. When finished the silverware and plates are returned to the kitchen and the cleanup begins.

As the seniors slip out the door one by one, full and satisfied after their lunch you will hear numerous " thank you or we'll see you all tomorrow".

We have a registered nurse that comes in to check blood pressures and also look at the wellbeing of our seniors. Legal aide comes by to visit about the challenges faced by seniors, and to give legal advice and answer questions they may have. (Continued on page 18)

FOOD SHORTAGE AMONG SENIOR CITIZENS GROWING AS POPULATION AGES

Senior Citizens are sometimes referred to as the "hidden hungry". As of 2017, 1 in 11 seniors face hunger every day, yet they are often forgotten. Many live alone plus face mobility issues that prevent them from accessing nutritious food they so desperately need Others would rather stay silent than ask for help.

Senior citizens are the fastest growing population in the United States facing food shortage. From 2001-2014, the number of seniors facing hunger doubled. There are more than 10 million older Americans who are unsure of where they will find their next meal.

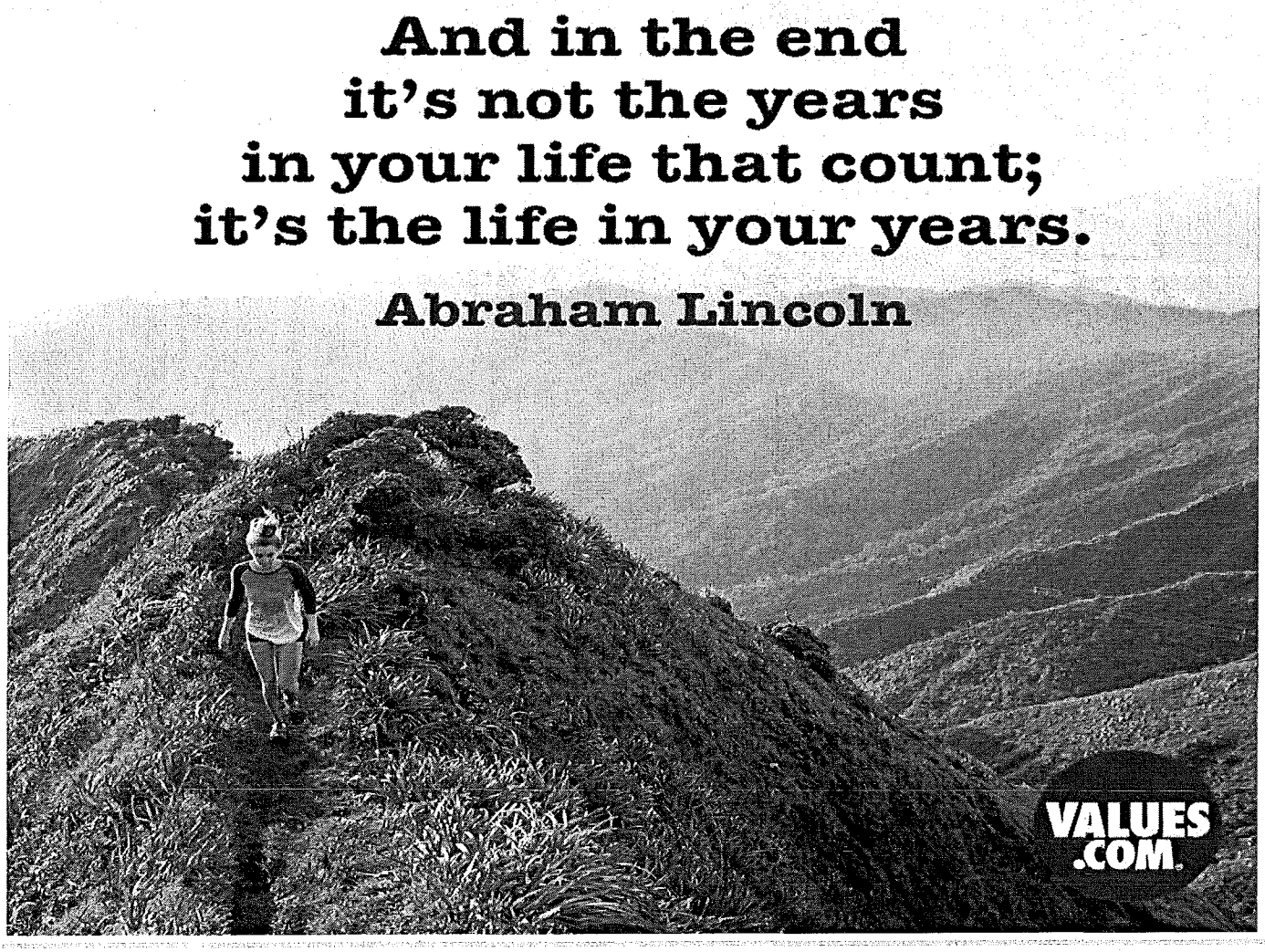
The problem is only expected to get worse as more than 10,000 baby boomers will reach age 65 every day for the next 2 decades. By 2050, the number of Americans age 65 and older is expected to double.

Although Americans are working longer, their income often is reduced or they become unemployed and with rising cost for housing and medical expenses this leaves millions of seniors at or below the poverty line. Because of their limited income, millions of seniors are forced to make difficult choices. (Continued on page 19)

Elder Access Line

Any Nebraskan aged 60 and older regardless of income, race or ethnicity is able to receive help with questions on topics like bankruptcy, homestead exemptions, bill collections, power of attorney, Medicare, Medicaid, grandparent rights and Section 8 housing. Legal Aid of Nebraska operates the Elder Access Line through a free telephone access line.

The statewide Elder Access Line is 1-800-527-7249



From the Director ~ Cheryl Brunz—Continued

causes skin to redden; it responsible for sunburn and can also lead to skin cancer over time. But UVB rays are at least blocked by window glass from the house and car and are less intense in the winter months. UVA light, on the other hand, penetrates top and deeper layers of skin, causing cell damage that can lead to cancer. UVA light is tough to avoid because it passes through windows and stays the same strength all year-keep up your sunscreen routine.

Get a flu shot- if only to be a good citizen. 36,000 people in the U.S. die from complications from the flu and 200,000 are hospitalized.

Take a class with a friend. Winter can be a tough time for many people. Humans are social animals that don't do well in isolation and the winter months can be very isolating for many people. Sign up for a Tai Chi class, cooking, sewing, or scrapbooking class for example.

Eat more plants- the ones that are sources of omega-3 fatty acids. One of the primary omega-3 fatty acids, called alpha-linolenic acid (ALA), is found in many plants and plant-based cooking oils, but flaxseed (powder or oil), chia seed, and walnuts are especially good sources of ALA. Recent research is suggesting omega-3s have anti-inflammatory effects, protect the skin and perhaps even have some impact on mental health.

Q: What's a pharmacist's favorite style of beer?

A: Pilsner.
-By Sam Benson Smith

Hidden Pictures Winners

Were you a Hidden Picture Winner in the last edition of our newsletter? These folks were!!

Mary Soper, Morrill; Thomas Meyer, Scottsbluff; Lois Kris, Crawford;
Judy Baxter, Gordon; Fredericka Sommerville, Chadron;
Wilma Gieser, Harrison; Julia Hropoff, Kimball;

January 2019 ~ What's for Lunch?

Monday	Tuesday	Wednesday	Thursday	Friday
	1 Closed	2 Goulash Vegetable Bread Milk Dessert	3 Sweet & Sour Chicken Vegetable Rice Bread Milk Dessert	4 Hot Beef Sandwich Vegetable Potato Juice Bread Milk Dessert
7 Ham & Beans Vegetable Bread Milk Dessert	8 Chicken Strips Potato Vegetable Juice Bread Milk Dessert	9 Liver & Onions or Alternate Potato Vegetable Bread Milk Dessert	10 Pork Cutlets Potato Vegetable Bread Milk Dessert	11 Creamed Chicken on Biscuit Vegetable Fruit Bread Milk Dessert
14 Chicken Salad Sandwich Soup Potato Bread Milk Dessert	15 Spaghetti w/ Meat Sauce Vegetable Juice Bread Milk Dessert	16 Smothered Pork Chop Rice Vegetable Bread Milk Dessert	17 Oven Fried Chicken Potato Vegetable Bread Milk Dessert	18 Salisbury Steak Potato Salad Bread Milk Dessert
21 Chicken Pot Pie w/ potato & Vegetables Fruited Jello Bread Milk Dessert	22 Rope Sausage Potato Vegetable Bread Milk Dessert	23 Meatloaf Potato Vegetable Bread Milk Dessert	24 Tuna Salad Sandwich Soup Vegetable Fruit Juice Bread Milk Dessert	25 Cooks Choice Bread Milk Dessert
28 Chili w/ meat And Beans Vegetable Salad Bread Milk Dessert	29 Lemon Pepper Fish Rice Vegetable Bread Milk Dessert	30 Chicken & Noodles on Potato Vegetable Bread Milk Dessert	21 Pork Roast Potato Vegetable Bread Milk Dessert	**Meals are subject to change**

ASSISTIVE TECHNOLOGY PARTNERSHIP

Since 1989, the Assistive Technology Partnership (ATP) has been helping Nebraskans go about their daily routines at home, school, work, and in the community.

There are a wide range of devices and modifications that can be beneficial for preventing falls, bathing, and operating a computer, however, finding the right solution can be overwhelming and out of reach due to cost.

Examples of tools and modifications include ramps/lifts/railings for home access, vehicle hand controls, tub seats and grab bars for bathing, magnification for reading, software and apps on the job, and communication aids for the hearing impaired.

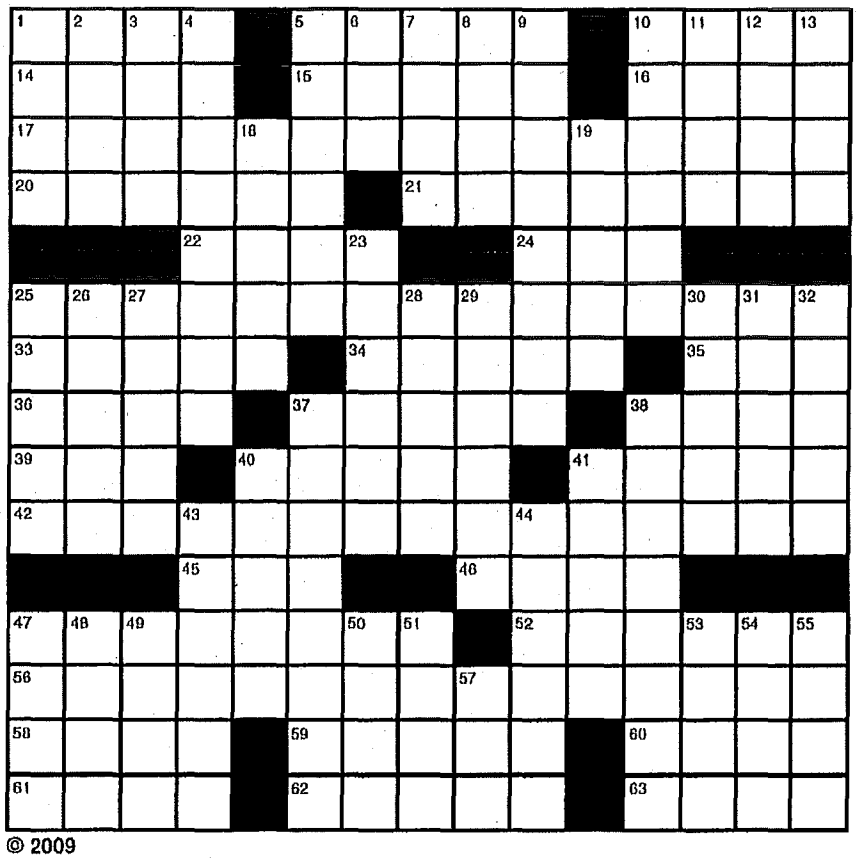
ATP can assist in a variety of ways:

Device demonstrations and short term loans to try equipment before purchase
Equipment reuse (accessing items someone else no longer needs)
Specialized equipment purchases for deaf/blind (iCan Connect)
Identify funding resources you may qualify for based on your age, disability, income, etc.

Visit our web site to learn more,
call (877) 713-4002, or email: atp@nebraska.gov
www.atp.nebraska.gov

Down the Drain

Robert Stockton



© 2009

ACROSS

1. Patron saint of lost causes
5. Political leader?
10. Recipe direction
14. "Movin' ___" ("The Jeffersons" theme song)
15. The Donald
16. Earned
17. FLUSH
20. Pooh-pooh
21. Reuben requirement
22. Laker forward Lamar
24. Time to buy a new calendar: abbr.
25. FLUSH
33. Put at stake
34. Vehicle for a rowed warrior?
35. Luke, to 18 down
36. Stopovers for the QE2
37. Shocking end to a police chase
38. "More info. on next page"
39. Cpl., for one
40. Is teary
41. Having wings
42. FLUSH
45. "___ Spock" -- 1995 Nimoy autobiography
46. Ages
47. Teary
52. Spay
56. FLUSH
58. Allot
59. Poi parties
60. Leprechaun's land
61. Turning point
62. Biological bristles
63. Lilliputian's lack

DOWN

1. Patron saint of soldiers (canonized in 1920)
2. Donald, to Huey, Dewey and Louie
3. Airport shops may be free from it
4. "Star Trek" had 79
5. Remain employed
6. Scrap
7. One who waves from the wings
8. "One choice is to...."
9. Chose
10. Sully
11. One involves Two Cities
12. Inspiration
13. AARP part
18. Anakin, eventually
19. In need of a loss
23. Winner of the 2008 Republican primary
25. Famous name in Dallas
26. Da Gama on the ocean
27. Alaskan white house
28. Loosened
29. Diaper shirt
30. In brine, e.g.
31. Game involving only three cards
32. Record
37. Shackles
38. Snaps and zippers
40. Kind of letter or mail
41. It'll take your breath away
43. Songs to wake you in the mourning
44. Reason for rust, perhaps
47. Tibetan teacher
48. What is Mr. Trebek's first name?
49. 2008 bailout recipient, in brief
50. In unison, musically (literally "by two")
51. One bar to reaching the bar: abbr.
53. She played Lois on TV
54. Shakespeare's era: abbr.
55. Baseball's Sandberg
57. Sine ___ non

This puzzle was created using CrossFire (http://beekeepersdabs.com/crossfire)

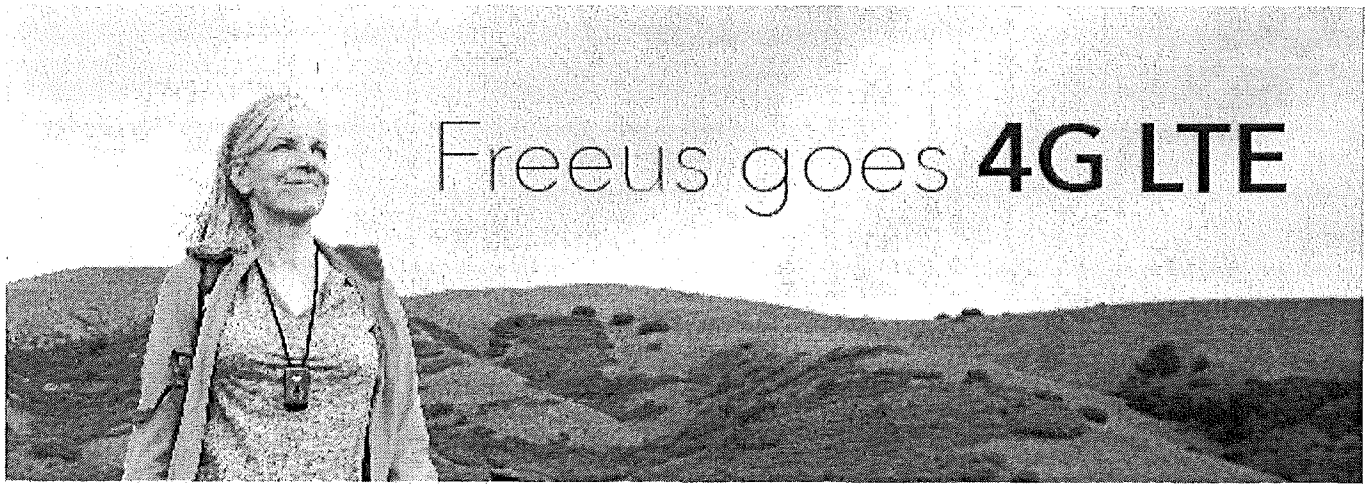
"Feed A Hungry Senior" Campaign 2018

The Aging Office of Western Nebraska is in charge of the senior nutrition programs in 18 senior centers across the Panhandle. Our goal is to give the seniors in each community a balanced, nutritious meal that meets 1/3 of the recommended daily allowance along with great socialization. We serve meals Monday thru Friday for lunch at each senior center and offer home delivered meals to people who qualify for home delivery. We are active in our campaign to STAMP OUT hunger for our

senior population! Many seniors today do not have the means to buy nutritious food to help them be healthy and able to stay in their own homes. We need to help our grandparents, parents, senior friends, and neighbors get a much needed hot, nutritious meal. **Go to our website at www.aown.org to donate today or you can also make a donation to: Aging Office of Western Nebraska, 1517 Broadway, Suite 122, Scottsbluff, NE 69361**

February 2019 ~ What's for Lunch?

Monday	Tuesday	Wednesday	Thursday	Friday
Meals are subject to change				1 Meat & Cheese Pizza Vegetable Bread Milk Dessert
4 Ham Salad Sandwich Pasta Vegetable Bread Milk Dessert	5 BBQ Chicken Potato Vegetable Bread Milk Dessert	6 Baked Fish Potato Vegetable Bread Milk Dessert	7 Egg Sausage Bake Potato Fruit Bread Milk Dessert	8 Hamburger w/ Works Potato Vegetable Juice Bread Milk Dessert
11 Cooks Choice Bread Milk Dessert	12 Lasagna Salad Juice Bread Milk Dessert	13 Cabbage Burgers Pasta Vegetable Bread Milk Dessert	14 Oven Fried Chicken Potato Vegetable Bread Milk Dessert	15 Meatloaf Potato Vegetable Bread Milk Dessert
18 Taco Salad w/ Meat Cheese Lettuce Tomatoes Beans, Rice Bread Milk Dessert	19 Chicken Strips Potato Vegetable Bread Milk Dessert	20 Pork Cutlet Potato Vegetable Bread Milk Dessert	21 Tuna Patties Pasta Vegetable Bread Milk Dessert	22 Hamburger Steak Potato Vegetable Bread Milk Dessert
25 Rope Sausage Potato Vegetable Salad Bread Milk Dessert	26 Chicken A La King Vegetable Bread Milk Dessert	27 Sloppy Joes Salad Beans Bread Milk Dessert	28 Baked Potato Bar w/ Chile, Cheese, Broccoli Sour Cream Salad Bread Milk Dessert	



Freeus introduces the reimagined Belle, designed for the Verizon 4G LTE network

This next generation of Belle works at home and away, offering the same beloved market-leading 30-day battery life that currently wows our dealers and customers.

It provides users with the same quick access to our expertly efficient and compassionate emergency care specialists at our UL-Listed, TMA Five Diamond Certified central station.

Specialists can speak with users with two-way voice, locate them with WiFi location services, and send emergency personnel or loved ones to assist, depending on need.

What's new with Belle?

for Verizon 4G LTE

Designed for use on Verizon 4G LTE

smallest Belle ever

Smaller than ever and 15% lighter than the previous Belle, plus it is rated IP67 for increased water-resistance

circular light

The new LED around the button lets users know when a call is in progress and when the pendant needs to be charged

battery status button

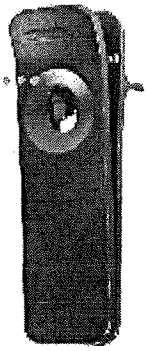
Press anytime for a real-time battery level update

updated cradle

Smaller and designed for easier charging

belt clip

Interchangeable with the new lanyard for easier wearing and carrying



freeus

AGING OFFICE OF WESTERN NEBRASKA
1517 BROADWAY, SUITE 122, SCOTTSBLUFF, NEBRASKA 69361
(308) 635-0851 or 1-800-682-5140

Meet Anne Marie Lee, Our new Choices Supervisor

Anne Marie grew up in Casper, Wyoming and eventually made her way to Gering, Nebraska following her passion in human services earning a bachelor's in psychology in 2012 at the University of Wyoming, and a master's in community counseling at Chadron State shortly thereafter.

Anne Marie is excited to continue her passion in human services as she strives to make a positive impact in all facets of someone's life. (Continued on page 16)

March 2019 ~ What's for Lunch?

Monday	Tuesday	Wednesday	Thursday	Friday
Meals are subject to change				1 Chicken & Noodles Potato Vegetable, Juice Bread Milk Dessert
4 Sausage Gravy Biscuit Eggs Potato Juice Bread Milk Dessert	5 Homemade Vegetable Bean Soup Salad Crackers Bread Milk Dessert	6 Tuna Salad Sandwich Potato Vegetable Juice Bread Milk Dessert	7 Cooks Choice Bread Milk Dessert	8 Baked Fish Potato Jello Bread Milk Dessert
11 Meatloaf Potato Vegetable Bread Milk Dessert	12 Smothered Pork Rice Vegetable Bread Milk Dessert	13 Oven Fried Chicken Potato Vegetable Juice Bread Milk Dessert	14 Beef & Cheese Enchilada Rice Beans Bread Milk Dessert	15 Salmon Loaf Potato Vegetable Bread Milk Dessert
18 Sloppy Joes Potato Salad Bread Milk Dessert	19 Homemade Sausage & Cheese Pizza Pasta Salad Bread Milk Dessert	20 Ham Potato Vegetable Bread Milk Dessert	21 Sweet & Sour Chicken Rice Vegetable Bread Milk Dessert	22 Fish Sandwich Soup Juice Bread Milk Dessert
25 Liver & Onions Or Alternate Potato Vegetable Bread Milk Dessert	26 Pork Roast Potato Vegetable Bread Milk Dessert	27 BBQ Chicken Potato Beans Bread Milk Dessert	28 Beef Goulash Vegetable Fruit Bread Milk Dessert	29 Tuna Noodle Casserole Vegetable Salad Bread Milk Dessert

Sudoku No. 1—Answer

1	3	6	4	9	2	5	8	7
5	9	4	7	6	8	1	3	2
7	2	8	3	1	5	9	6	4
8	6	1	5	7	4	2	9	3
2	7	5	9	3	1	6	4	8
3	4	9	2	8	6	7	1	5
6	5	7	1	4	3	8	2	9
4	8	2	6	5	9	3	7	1
9	1	3	8	2	7	4	5	6

Sudoku No. 2—Answer

1	3	7	4	2	5	6	9	8
4	9	6	3	8	1	7	5	2
8	5	2	7	6	9	1	4	3
9	2	8	1	5	7	3	6	4
7	4	1	8	3	6	5	2	9
3	6	5	9	4	2	8	1	7
2	7	4	5	1	3	9	8	6
5	8	3	6	9	4	2	7	1
6	1	9	2	7	8	4	3	5

Meet Anne Marie Lee, Our new Choices Supervisor **Continued**

Anne Marie is already showing her effectiveness as she is solution focused, offering genuine and innovative ideas with her bright outlook.

Stop in at the Aging Office of Western Nebraska and say Hi!

I would love to meet each and every one of you.

The first person aged 60 and older to find the crown in the hidden picture and call our office to tell us where they are in the picture will receive one free meal at the Senior Center of your choosing.

Aging Office of Western Nebraska 308-635-0851

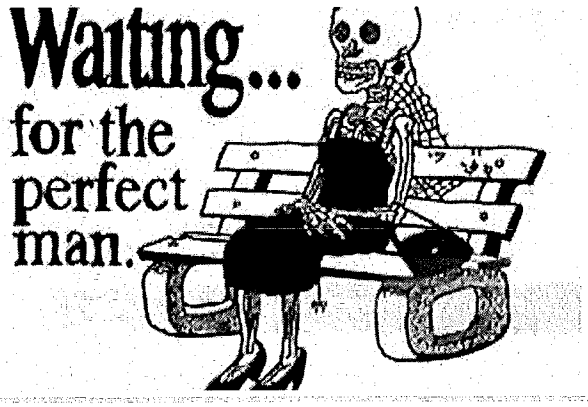
Bayard Senior Center Continued

In this last month the Senior Center Club hosted an appreciation soup supper honoring the city employees and our seniors. Serving more than 50 people, it was a fun night with more than enough pot luck soup and desserts for all. Other events in the planning sessions would be a Super Bowl Pot Luck and getting back to a regular senior night with movies, games, and finger food.

In these tough economic times, we have graciously reached out to the community asking them to help "Feed a Hungry Senior" by placing collection boxes around town. The number of seniors needing a hot meal and unable to pay is growing every day in the Panhandle. These seniors are having to choose between medications, gas bills or food.

We take great pride in making our Senior Center feel like home. A place that is warm and inviting where new and old friends can meet for fellowship and enjoy each day. So if you are ever in Bayard stop in and say hello and join us for a meal.

Submitted by Diana Hagel, Bayard Site Manager.



FOOD SHORTAGE AMONG SENIOR CITIZENS
Continued

According to Feeding America's research: 60% of older adult households have to choose between paying for food or utilities: 49% must choose between groceries and housing: and 63% are forced to make an impossible decision between food and medical care.

Seniors of course are at an increased risk for a variety of chronic health conditions. A nutritious, complete diet is critical for good health, so it's no surprise that food shortage is associated with an increase for conditions like diabetes, high blood pressure and asthma. Senior citizens who are food insecure are also 60% more likely to experience depression, 53% more likely to report a heart attack, and 40% more likely to develop congestive heart failure.

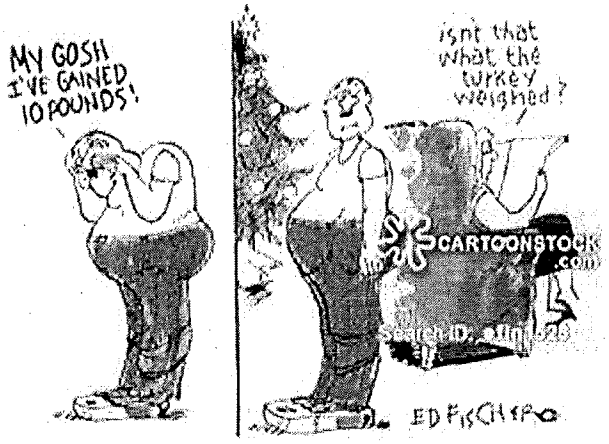
Clearly we need to do more to prevent older Americans from going to bed hungry. If you are wanting to help you can go to your local senior citizen center and make a donation to buy a hungry senior a nutritious meal or meals.

For more information or if you would like to help, please call Mary at the Aging Office of Western Nebraska at 308-635-0851.

amazonsmile

You shop. Amazon gives.

The Aging Office of Western Nebraska is now registered as a participating charity for AmazonSmile! If you already shop on Amazon (even if you don't yet!), this is a simple way to help fund our mission. Simply go to www.smile.amazon.com in your internet browser and choose Aging Office of Western Nebraska as your charity of choice. We will automatically receive a 5% donation of all eligible purchases. Thank you!



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

POSTAGE
INFO HERE

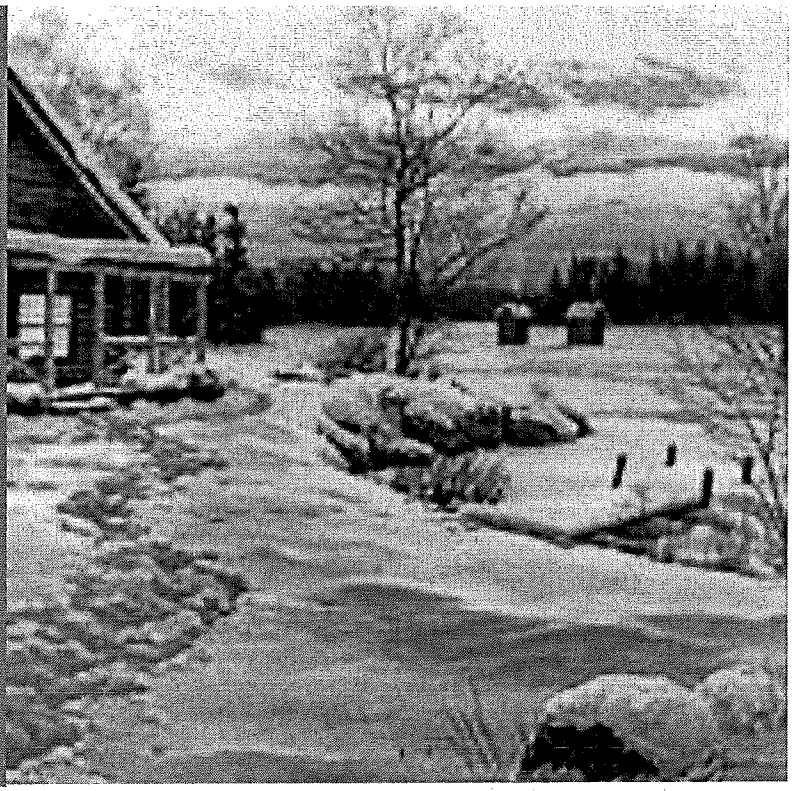
RETURN SERVICE REQUESTED

Aging Office of Western Nebraska Governing Board

Robert Post– Banner County
Doug Hashman – Box Butte County
Phil Sanders – Cheyenne County
Webb Johnson – Dawes County
William Klingman – Deuel County
TBA – Garden County
Larry Engstrom – Kimball County
Susanna Batterman – Morrill County
TBA – Scotts Bluff County
Loren Paul – Sheridan County
Hal Downer – Sioux County

Dates to Remember

New Year's Day Jan 1st
Martin Luther King Jr. Day Jan 21st
Ground Hog Day Feb 2nd
Valentines Day Feb 14th
Presidents Day Feb 18th
Daylight Savings time begins Mar 10th
St. Patricks Day Mar 17th
First Day of Spring March 20th
Nat. Vietnam War Vets Day Mar 29th



WE ARE ON THE WEB!
AOWN.org

How can I contact ADRC Nebraska?

- ✓ Visit the ADRC website: ADRCNebraska.org
- ✓ Call toll-free: 1-844-843-6364

When can I contact ADRC Nebraska?

- ✓ Online resources are available 24 hours a day/7 days a week.
- ✓ Calls are answered Monday - Friday from 8 a.m. to 5 p.m. excluding holidays.

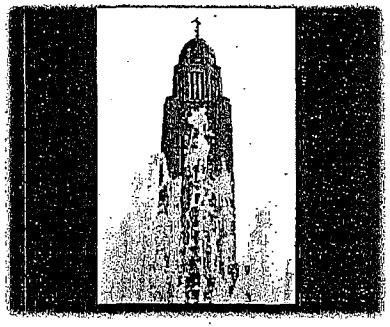
- ✓ **Beatrice:** Blue Rivers Area Agency on Aging
  - 402-223-1376
- ✓ **Hastings:** Midland Area Agency on Aging
  - 402-463-4565
- ✓ **Kearney:** South Central Nebraska Area Agency on Aging
  - 308-234-1851
- ✓ **Lincoln:** Aging Partners
  - 402-441-7070
- ✓ **Norfolk:** Northeast Nebraska Area Agency on Aging
  - 402-370-3454
- ✓ **Omaha:** Eastern Nebraska Office on Aging
  - 402-444-6536
- ✓ **Scottsbluff:** Aging Office of Western Nebraska
  - 308-635-0851

Aging & Disability Resource Centers

"Supporting Nebraskans by providing useful information, assistance and education on community services and long-term care options."

WHAT IS ADRC NEBRASKA?

The Aging and Disability Resource Center (ADRC) is a pilot program established by the Nebraska Legislature in 2015.



The ADRC assists Nebraskans in accessing services and supports such as:

- In-Home Assistance
- Medicare/Medicaid
- Housing
- Financial Assistance
- Transportation
- Behavioral Health Services
- Legal Services
- Medical Care
- Developmental Disability Services
- Assistive Technology

WHO CAN BENEFIT FROM THE ADRC?

The ADRC provides information, assistance, and education on community services and long-term care options for:

- ✓ **Seniors (age 60+);**
- ✓ **People with disabilities of all ages; and**
- ✓ **Family members, caregivers & advocates for the above**

WHAT DOES THE ADRC PROVIDE?

The ADRC maintains a public website with descriptions and contact information of resources, supports, and services of value to seniors, people with disabilities and family members, caregivers & advocates. The website is available to the public at:

ADRCNebraska.org

ADRC staff are available over the phone or through face-to-face meetings to assist eligible people and/or their representatives in making informed choices about the services and settings that best meet the person's needs.

Envejecimiento y discapacidad Centro de Recursos (ADRC)

¿Quién se beneficia del ADRC?

El ADRC proporciona información, asistencia y educación sobre servicios comunitarios y opciones de cuidado a largo plazo para:

- ✔ Personas con discapacidades de todas las edades.
- ✔ Miembros de la familia, cuidadores y defensores.
- ✔ Mayores de 60 años o más.

¿Cómo puedo contactar a ADRC Nebraska?

Visite el sitio web de ADRC:
ADRCNebraska.org

Llame gratis:
1-844-843-6364

Aging and Disability Resource Center
ADRC
Nebraska
Serving all Nebraskans

Aging and Disability Resource Center (ADRC)

Who benefits from the ADRC?

The ADRC provides information, assistance and education on community services and long-term care options for:

- ✔ People with disabilities of all ages.
- ✔ Family members, caregivers and advocates.
- ✔ Seniors age 60 and over.

How can I contact ADRC Nebraska?

Visit the ADRC website:
ADRCNebraska.org

Call toll-free:
1-844-843-6364

Aging and Disability Resource Center
ADRC
Nebraska
Serving all Nebraskans

Area Office of Western Neb.

Start Date	07/01/2019	Sub Services		NRA	
End Date	09/30/2019	Providers	--ALL--		
Client ID		Sub_Providers		Title XX	
Client Type	Regular	Case Manager		Medicaid	
SJ#		City	--ALL--	Medicare	
Age		County	--ALL--	Waiver	
Gender	--ALL--	State	--ALL--	USDA	
HHS	--ALL--	Lives With	--ALL--	PSA Code	
Status	--ALL--	Race	--ALL--	FIPS Code	
Area	--ALL--	ADL		Route	--ALL--
Services	--ALL--	IADL		Poverty	--ALL--

Date 04/01/2020

Summary Report

Area Office of Western Neb.

Undup. Clnt. cnt	
Total	1,622

NRA	
re	Count
0	142
1	279
2	286
3	150
4	164
5	91
6	100
7	56
8	56
9	30
10	19
11	22
12	19
13	8
14	9
15	4
16	8
17	1
19	1

Race	
American Indian or Alaska Native	16
Asian	7
Black or African American	5
Native Hawaiian orOther Pacific Islande	4
No Response	127
Persons Reporting 2 or More Races	1
Persons Reporting Some Other Race	56
White	1,406

Two or more Races	
American Indian or Alaska Native	1
White	1

Client Ethnicity	
Hispanic or Latino	68
No Response	236
Not Hispanic or Latino	1318

ADL Values	
Bathing	123
Dressing	76
Eating	39
Toileting	42
Transfer	76
Walking	271

Age	
<60	97
60 - 64	146
65 - 74	405
75-84	526
85 +	448

IADL Count	
Heavy Housework	549
Light Housework	231
Medication Management	102
Need a caregiver when away from ho	6
Need assistance to manage money	88
Need assistance with home maintena	7
Need assistance with housekeeping	7
Need assistance with Laundry	6
Need transportation assistance	191
Preparing Meals	215
Shopping	233
Use of Telephone	71

Live With	
Lives Alone	771
Lives in Group Setting	5
Lives with other Family/Fri	144
Lives with Spouse only	567
No Response	135

Gender	
Female	1,044
Male	517
No Response	61

Poverty	
No	836
No Response	425
Yes	361

TitleXX	
Yes	117

Waiver	
Yes	15

Nutritional Classification		
	Good	707
3-5	Moderate	405
6 and Above	High	333

Group Service	Total Units
ADRC Information & Referral	139.00
ADRC Options Counseling	11.25
Caregiver Information & Assist	1,637.00
HP/DP Non Evidence Based	377.00
Information & Assistance	593.00
Information Services - III B	2,926.00
Legal Assistance	185.86
Nutrition Education	196.00
Outreach	142.00
Senior Center Hours	6,836.00
Social Activities	3,187.25
Volunteerism	3,971.66

ServiceUsage

Service	TotalUnits	Clientcount
Care Management	926.00	139
Caregiver Training	27.50	32
Chore	1552.75	99
Congregate Meals	21487.00	936
Counseling - III E	1.50	3
Health Pro/Disease Prevention	282.00	38
Home Delivered Meals	15501.00	447
Homemaker	416.25	62
Material Distribution	19.00	12
Respite-Home	55.00	1
Self Directed Care	522.90	50
Supplemental Service - III E	279.00	95
Telephoning/Visiting	555.00	78

* Total units don't include units tracked as group services. Meals include USDA ineligible also.

Served Client Summary

AOWN
10/01/2019 and 02/29/2020
Report Run Date: 04/01/2020

State Service Type Summary

State Service Type	Total Units	Total Unduplicated Clients	Total Duplicated Clients
Care Management	1,304.00	133	621
Caregiver Assistance: Information & Assistance	2,200.00	0	0
Caregiver Information Services	20.00	0	0
Caregiver Respite	18.00	1	1
Caregiver Supplemental Services	464.00	96	458
Caregiver Training	3.75	6	6
Case Management	14.00	2	2
Chore	811.50	79	202
Congregate Meals	35,349.00	1,046	4,011
Counseling	20.00	23	44
Home Delivered Meals	27,455.00	582	1,926
Homemaker	1,339.09	93	324
HP/DP (Evidence-Based)	699.00	82	174
HP/DP (Non Evidence-Based)	670.00	202	462
Information & Assistance	906.00	28	31
Information & Referral	527.00	216	258
Information Services	5,179.00	0	0
Legal Assistance	226.30	0	0
Legal Outreach	6.00	0	0
Material Distribution	17.00	10	17

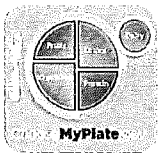
State Service Type Summary

State Service Type	Total Units	Total Unduplicated Clients	Total Duplicated Clients
Nutrition Education	122.00	0	0
Options Counseling	20.00	6	12
Outreach	32.00	1	1
Senior Center Hours	9,186.50	0	0
Senior Volunteer Program	4,269.41	0	0
Social Activities	8,411.00	0	0
Telephone & Visiting	190.50	41	121
Volunteer Program	2,437.90	0	0

USDA

United States Department of Agriculture

10 tips
Nutrition Education Series



MyPlate MyWins

Based on the **Dietary Guidelines for Americans**

Choose MyPlate

Use MyPlate to build your healthy eating style and maintain it for a lifetime. Choose foods and beverages from each MyPlate food group. Make sure your choices are limited in sodium, saturated fat, and added sugars. Start with small changes to make healthier choices you can enjoy.

1 Find your healthy eating style

Creating a healthy style means regularly eating a variety of foods to get the nutrients and calories you need. MyPlate's tips help you create your own healthy eating solutions—"MyWins."

2 Make half your plate fruits and vegetables

Eating colorful fruits and vegetables is important because they provide vitamins and minerals and most are low in calories.

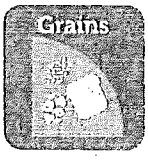
3 Focus on whole fruits

Choose whole fruits—fresh, frozen, dried, or canned in 100% juice. Enjoy fruit with meals, as snacks, or as a dessert.

4 Vary your veggies

Try adding fresh, frozen, or canned vegetables to salads, sides, and main dishes. Choose a variety of colorful vegetables prepared in healthful ways: steamed, sauteed, roasted, or raw.

5 Make half your grains whole grains



Look for whole grains listed first or second on the ingredients list—try oatmeal, popcorn, whole-grain bread, and brown rice. Limit grain-based desserts and snacks, such as cakes, cookies, and pastries.

6 Move to low-fat or fat-free milk or yogurt

Choose low-fat or fat-free milk, yogurt, and soy beverages (soymilk) to cut back on saturated fat. Replace sour cream, cream, and regular cheese with low-fat yogurt, milk, and cheese.

7 Vary your protein routine

Mix up your protein foods to include seafood, beans and peas, unsalted nuts and seeds, soy products, eggs, and lean meats and poultry. Try main dishes made with beans or seafood like tuna salad or bean chili.

8 Drink and eat beverages and food with less sodium, saturated fat, and added sugars

Use the Nutrition Facts label and ingredients list to limit items high in sodium, saturated fat, and added sugars. Choose vegetable oils instead of butter, and oil-based sauces and dips instead of ones with butter, cream, or cheese.

9 Drink water instead of sugary drinks

Water is calorie-free. Non-diet soda, energy or sports drinks, and other sugar-sweetened drinks contain a lot of calories from added sugars and have few nutrients.

10 Everything you eat and drink matters

The right mix of foods can help you be healthier now and into the future. Turn small changes into your "MyPlate, MyWins."

Center for Nutrition Policy and Promotion
USDA is an equal opportunity provider, employer, and lender.

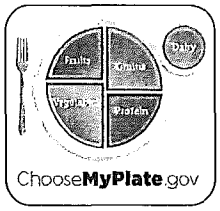
Go to **ChooseMyPlate.gov** for more information.

DG TipSheet No. 1
June 2011
Revised October 2016

USDA

10 tips
Nutrition Education Series

choosing healthy meals as you get older



10 healthy eating tips for people age 65+

Making healthy food choices is a smart thing to do—no matter how old you are! Your body changes through your 60s, 70s, 80s, and beyond. Food provides nutrients you need as you age. Use these tips to choose foods for better health at each stage of life.

1 drink plenty of liquids

With age, you may lose some of your sense of thirst. Drink water often. Low-fat or fat-free milk or 100% juice also helps you stay hydrated. Limit beverages that have lots of added sugars or salt. Learn which liquids are better choices.

2 make eating a social event

Meals are more enjoyable when you eat with others. Invite a friend to join you or take part in a potluck at least twice a week. A senior center or place of worship may offer meals that are shared with others. There are many ways to make mealtimes pleasing.

3 plan healthy meals

Find trusted nutrition information from ChooseMyPlate.gov and the National Institute on Aging. Get advice on what to eat, how much to eat, and which foods to choose, all based on the Dietary Guidelines for Americans. Find sensible, flexible ways to choose and prepare tasty meals so you can eat foods you need.

4 know how much to eat

Learn to recognize how much to eat so you can control portion size. MyPlate's SuperTracker shows amounts of food you need. When eating out, pack part of your meal to eat later. One restaurant dish might be enough for two meals or more.

5 vary your vegetables

Include a variety of different colored vegetables to brighten your plate. Most vegetables are a low-calorie source of nutrients. Vegetables are also a good source of fiber.

(over)

NIH National Institute on Aging

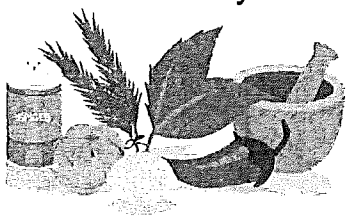
United States Department of Agriculture
Center for Nutrition Policy and Promotion
DG TipSheet No. 42
July 2015

6 eat for your teeth and gums

Many people find that their teeth and gums change as they age. People with dental problems sometimes find it hard to chew fruits, vegetables, or meats. Don't miss out on needed nutrients! Eating softer foods can help. Try cooked or canned foods like unsweetened fruit, low-sodium soups, or canned tuna.

7 use herbs and spices

Foods may seem to lose their flavor as you age. If favorite dishes taste different, it may not be the cook! Maybe your sense of smell, sense of taste, or both have changed. Medicines may also change how foods taste. Add flavor to your meals with herbs and spices.

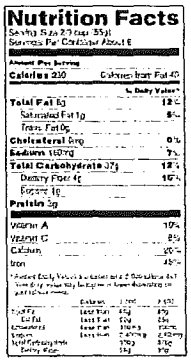


8 keep food safe

Don't take a chance with your health. A food-related illness can be life threatening for an older person. Throw out food that might not be safe. Avoid certain foods that are always risky for an older person, such as unpasteurized dairy foods. Other foods can be harmful to you when they are raw or undercooked, such as eggs, sprouts, fish, shellfish, meat, or poultry.

9 read the Nutrition Facts label

Make the right choices when buying food. Pay attention to important nutrients to know as well as calories, fats, sodium, and the rest of the Nutrition Facts label. Ask your doctor if there are ingredients and nutrients you might need to limit or to increase.



10 ask your doctor about vitamins or supplements

Food is the best way to get nutrients you need. Should you take vitamins or other pills or powders with herbs and minerals? These are called dietary supplements. Your doctor will know if you need them. More may not be better. Some can interfere with your medicines or affect your medical conditions.

Go to www.ChooseMyPlate.gov and
www.nia.nih.gov/health/topics/nutrition
for more information.

USDA is an equal opportunity provider and employer.

Nebraska Department of Health and Human Services

Contract/Subaward Information	
Order Number: 176000	CFDA Number: 93.044
Prepared By: Cheryl Brunz	Date: 12/30/2019

Determination of Subrecipient and Contractor

(a) A subrecipient is a state or local government, college, university or non-profit organization that expends federal awards received from a pass-through entity to carry out a federal program. Generally, a primary recipient makes a subaward to provide public health assistance or achieve a public purpose authorized by a federal law.

(b) A contractor is a dealer, distributor, merchant or other seller providing goods and services that are necessary for conducting a federal program. Generally, a primary recipient uses a procurement contract when the recipient buys goods or services for its own benefits or use.

Sub-recipient Checklist		
• Determines who is eligible to receive what federal finance assistance?	☐ Yes	☑ No
• Has its performance measured against whether the objectives of the federal program are met?	☐ Yes	☑ No
• Has responsibility for programmatic decision making?	☐ Yes	☑ No
• Has responsibility for adherence to compliance requirements applicable to the federal program?	☐ Yes	☑ No
• Uses the federal funds to carry out a program of the entity as compared to providing goods or services for a program of the pass-through entity?	☐ Yes	☑ No
• Subject to Single Audit under 2 CFR 200?	☑ Yes	☐ No

Contractor Checklist		
• Provides goods or services within normal business operations?	☑ Yes	☐ No
• Provides similar goods or services to many different purchasers?	☑ Yes	☐ No
• Operates in a competitive environment?	☑ Yes	☐ No
• Provides goods or services that are ancillary to the operation of the federal program?	☑ Yes	☐ No
• Is not subject to the compliance requirements of the federal program?	☑ Yes	☐ No

Use of judgment

In making the determination of whether a subrecipient or contractor relationship exists, the substance of the relationship is more important than the form of the agreement. It is not expected that all of the characteristics will be present, and judgment should be used in determining whether an entity is a subrecipient or contractor. In some cases, it may be difficult to determine whether the relationship with the entity is that of a subrecipient or of a contractor. The federal cognizant agency for audit, the oversight agency for audit, or the federal awarding agency may be of assistance in making those determinations.

Determination	
Subrecipient/Contractor Name: Tamarack Public Health Dept	Order Number: 176000
Signature: Cheryl Brunz	Date of Signature: 12/30/2019

Title IIID Health Promotion/Disease Prevention Program
PROVIDER CONTRACT

This contract by and between the Aging Office of Western Nebraska, located at 1517 Broadway Suite 122 ; Scottsbluff, NE 69361 (hereinafter referred to as "Agency") and Panhandle Public Health Department at 1930 E 20th Place; Scottsbluff, NE 69361(hereinafter referred to as "Contractor").

I. GENERAL TERMS

A. Provision of Service:

a. Title IIID Health Promotion/Disease Prevention evidence based programs that have demonstrated to be effective for improving the health and wellbeing or reducing disease, disability and/or injury among older adults; and
b. Proven effective with older adult population and
c. Research results published in a peer review journal and
d. Fully translated in one or more community sites and includes developed dissemination products that are available to the public.

B. Eligible individual/client: A person 60 years of age or older and in greatest economic or social need.

C. Service area: Planning and Service Area counties.

D. Term: Shall be for a period commencing January 1, 2020 and ending June 30, 2020.

E. Contract amount: The maximum dollar amount payable under this contract is $8,400 per fiscal year, subject to availability.

The Agency and the Contractor therefore enter into the following:

II. SCOPE OF SERVICE

A. This contract provides for three (3) or more separate Title IIID Health Promotion/Disease Prevention evidence based programs that have been approved by Agency.

B. Services will be delivered in one or more of the following designated counties: Banner, Box Butte, Cheyenne, Dawes, Deuel, Garden, Kimball, Morrill, Scotts Bluff, Sheridan, Sioux.

C. The Contractor will give priority for Title IIID Health Promotion/Disease Prevention services to those older individuals who are: rural, in greatest economic or social need, severely disabled, limited in English proficiency, suffering from Alzheimer's disease or

related disorders, at risk of institutionalization, at risk of homelessness or at risk of or under guardianship.

D. All Title IIID Health Promotion/Disease Prevention services provided will be delivered in a manner which conforms to the Standards of the Nebraska Department of Health and Human Services, State Unit on Aging.

E. The funding is available for direct costs of Title IIID Health Promotion/Disease Prevention programs that meet the highest definition of evidence based programs. The Agency shall ensure that the Contractors receiving Title IIID funds meet all of the required components of the federal definition of evidence based programs.

III. CONTRACTORS DUTIES

A. Provide clients in greatest social and economic need Title IIID Health Promotion/Disease Prevention services outlined in this contract.

B. Provide targeting and outreach to identify older individuals eligible to receive Title IIID Health Promotion/Disease Prevention services outlined in this contract with special emphasis on individuals who are: rural, in greatest economic or social need, severely disabled, limited in English proficiency, suffering from Alzheimer's disease or related disorders, at risk of institutionalization, at risk of homelessness or at risk of or under guardianship. The outreach will not only identify but will inform these older individuals and their caregivers of the availability of Title IIID Health Promotion/Disease Prevention under this contract.

C. Provide Title IIID Health Promotion/Disease Prevention services that are:

1. The highest definition of evidence-based

2. Three (3) or more separate evidence based program(s) approved by the Agency

3. Have six (6) or more registered for each evidence based class

4. Have participants complete demographic form provided by Agency and any other forms deemed necessary

5. Submit completed demographic forms (intake), sign in sheet and other forms deemed necessary to Agency

6. Promote and advertise the evidence based programs to encourage older adults to participate

D. Not subcontract any interest or obligation arising under this contract without written consent of the Agency.

E. Submit programmatic and financial reports to the Agency as per an established schedule. Financial reports, as required, must be submitted to the Agency office no later than 10:00 a.m. on the 6th day of a month.

F. Provide community education services to include, speaking engagements, preparation of bulletins and inclusion of articles in the Contractor and the Agency newsletters.

G. Provide certificate of insurance to the Agency.

IV. AAA Duties

A. Reimburse the Contractor for direct costs of services provided under this contract.

B. Provide the Contractor with forms for reporting units of service and expenditures of services provided under this contract.

C. Work with the Contractor to develop local program plans for reaching the target populations and addressing the priority issue areas.

D. Monitor the Title IIID Health Promotion/Disease Prevention activities to ensure that the terms and agreement of this contract are fulfilled.

E. The Agency shall indemnify and hold harmless Contractor for claims arising by reason of any act or omission of the Agency under this contract.

V. Terms of Payment

The Agency agrees to pay the Contractor, upon submission of a detailed billing, according to the following terms and conditions:

A. The AAA will pay the Contractor quarterly upon receipt and approval of monthly financial reports for direct costs of program provision for the period of January 1, 2020 through June 30, 2020.

B. All funds must be obligated before June 30, 2020. Payment is conditioned upon the Agency receiving funding to operate the Title IIID Health Promotion/Disease Prevention services. If funding is reduced or eliminated, the Agency will notify Contractor in a reasonable time period.

VI. Reimbursement of Expenses

The Agency shall not be liable for any expenses paid or incurred by Contractor unless otherwise agreed in writing.

VII. TERMINATION OR SUSPENSION

A. This contract is contingent upon the availability of funds. In the event funds for this service are not available to the Agency, the Agency may terminate the contract by written notice of 30 working days and no further services or payment for services shall be rendered.

B. If either the Contractor or the Agency abandons, non-performs, or before completing, discontinues services; or if the commencement or timely completion of the service by either party is rendered improbably, infeasible or illegal, the other party may, by written notice of 30 days, terminate or suspend any or all of this obligation under this contract until such time as the events or conditions resulting in such suspension has ceased or been corrected.

C. Either party may terminate this contract by providing 30 days written notice of the termination to the other party.

IN WITNESS THEREOF, the Agency and Contractor, by and through their authorized officers, have duly executed this contract.

Aging Office of Western Nebraska	FOR THE CONTRACTOR
Cheryl R. Bruenz	Kimberly A Engel
SIGNATURE	SIGNATURE
Cheryl R. Bruenz-Director	Kimberly A. Engel
NAME AND TITLE	NAME AND TITLE
12/30/2019	1/2/2020
DATE	DATE