



Programs and Services for Senior Adults in Cleveland County

August 30, 2013

Carol Coles
Social and Voluntary Services Commission
City of Norman
201 West Gray
Norman, OK 73069

Dear Carol,

Please find attached the Social and Voluntary Services Commission/SVSC Funding Request for Aging Services, Inc. We look forward to presenting this request to the Commission and hope that the Commission will find the request worthwhile and will help Aging Services Inc./ASI be positioned to assist Norman's senior adults who are in need of direct assistance. ASI has been the recipient of SVSC funding on numerous occasions over the past 20 plus years.

During FY2013 (7/1/12-6/30/13) ASI assisted 44 City of Norman senior adult residents and disbursed a total of \$3,188.48 in direct assistance to area senior adults. The most frequently received requests this year were for assistance with utility bills which represents 66% of the funds distributed through the ASI Special Assistance Program. The amount distributed this past year is down from the previous year largely due to the mild winter of 2012/2013.

Last year ASI also requested assistance for the Stock Our Shelves/SOS Emergency Food Pantry. Over the course of FY2013, ASI distributed 54 pantry packs to City of Norman senior adult residents. With an average value of \$25 per pantry pack, this represents a total of \$1,350 worth of food products provided to senior adults in need.

During FY13, funding from the Older Americans Act/Title III grant has continued and this same funding has been awarded for FY14. During FY13, ASI applied for and was awarded grant funding for an Older Americans Act Respite Voucher Program. The program will allow ASI to issue Vouchers to cover the cost of respite care for full-time live in care givers and grandparents raising grandchildren. This grant has now been

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extended for two years as of 07/01/13. ASI was awarded funding from the United Way of Norman to allow for two additional housekeepers to help provide this service throughout Cleveland County. ASI is receiving CDBG funding from the City of Moore to help with the home delivered meal program in the Moore area and from the City of Norman to help with meals at our Rose Rock Villa meal site. ASI is continuing efforts to fund raise with the ASI Gingerbread House Competition event that is held in December in conjunction with Christmas in Old Town in Moore each year.

ASI wants to continue to be in a position to be able to assist senior adults when they have needs that are unmet and beyond their financial ability to cover. In the past, the support of the Social and Volunteer Services Commission grant has helped ASI in meeting these unmet needs for the senior adult residents of the City of Norman. Funding from the Older Americans Act Grant for Title III programs and services cannot be utilized to assist senior adults for these purposes. **ASI is requesting support from the Social and Volunteer Services Commission in the amount of \$5,000 for FY2014.** Thank you for your consideration of this request.

Sincerely,

A handwritten signature in black ink, appearing to read 'Kathleen Wilson', with a stylized, flowing script.

Kathleen Wilson
ASI Executive Director

**SOCIAL & VOLUNTARY SERVICES COMMISSION
FUNDING REQUEST**

LEGAL NAME OF AGENCY: Aging Services Inc.
MAILING ADDRESS: 1179 East Main Street
APPLICATION COMPLETED BY: Kathleen Wilson, ASI Exec. Director
TELEPHONE NUMBER: (405) 321-3200
EMAIL ADDRESS: k_wilson1221@yahoo.com

AMOUNT OF FUNDING REQUEST: \$5,000

IN WHAT YEAR WAS YOUR AGENCY INCORPORATED: 1988

ARE YOU ASSOCIATED WITH A NATIONAL ORGANIZATION: No

NUMBER OF VOLUNTEERS: 200 to 225 individuals

HOW MANY HOURS DO VOLUNTEERS DONATE:
Approximately 19,750 hours annually

HOW MUCH MONEY DO VOLUNTEERS SAVE THE AGENCY:
\$143,188 (at minimum wage rate of \$7.25)

HAS YOUR AGENCY APPLIED FOR SVSC FUNDS BEFORE: Yes

The Cleveland County Council on Aging (CCCOA) applied for SVSC funds in years between 1991 and 1996 to fund their Special Assistance Program. In 1996 CCCOA became inactive and turned the Special Assistance Program over to ASI. Since 1996, ASI has continued to apply for SVSC funding but not every year.

Year	<u>1991</u>	Amount	<u>\$5,000</u>	Purpose	<u>Special Assistance Program Funds</u>
Year	<u>1992</u>	Amount	<u>\$5,000</u>	Purpose	<u>Special Assistance Program Funds</u>
Year	<u>1993</u>	Amount	<u>\$5,000</u>	Purpose	<u>Special Assistance Program Funds</u>

Year <u>1994</u>	Amount <u>\$5,000</u>	Purpose <u>Special Assistance Program Funds</u>
Year <u>1995</u>	Amount <u>\$5,000</u>	Purpose <u>Special Assistance Program Funds</u>
Year <u>1996</u>	Amount <u>\$3,400</u>	Purpose <u>Special Assistance Program Funds</u>
Year <u>1997</u>	Amount <u>\$2,000</u>	Purpose <u>Special Assistance Program Funds</u>
Year <u>1998</u>	ASI did not apply for funding that year	
Year <u>1999</u>	Amount <u>\$1,100</u>	Purpose <u>Special Assistance Program Funds</u>
Year <u>2000</u>	Amount <u>\$4,550</u>	Purpose <u>Special Assistance Program Funds</u>
Year <u>2001</u>	Amount <u>\$3,000</u>	Purpose <u>Special Assistance Program Funds</u>
Year <u>2002</u>	Amount <u>\$2,500</u>	Purpose <u>Special Assistance Program Funds</u>
Year <u>2003</u>	Amount <u>\$1,500</u>	Purpose <u>Special Assistance Program Funds</u>
Year <u>2004</u>	ASI did not apply for funding that year	
Year <u>2005</u>	ASI did not apply for funding that year	
Year <u>2006</u>	ASI did not apply for funding that year	
Year <u>2007</u>	Amount <u>\$3,000</u>	Purpose <u>Special Assistance Program Funds</u>
Year <u>2008</u>	Amount <u>\$3,000</u>	Purpose <u>Special Assistance Program Funds</u>
Year <u>2009</u>	Amount <u>\$3,000</u>	Purpose <u>Special Assistance Program Funds, Food Pantry and DME Lending Closet</u>
Year <u>2010</u>	Amount <u>\$3,000</u>	Purpose: <u>Special Assistance Program Funds and Food Pantry</u>
Year <u>2011</u>	Amount <u>\$3,000</u>	Purpose: <u>Special Assistance Program Funds and Food Pantry</u>
Year <u>2012</u>	Amount <u>\$4,000</u>	Purpose: <u>Special Assistance Program Funds and Food Pantry</u>

FINANCIAL INFORMATION FROM THE LAST FISCAL YEAR:

Percent of the budget which is spent on fund-raising:	<u>0%</u>
Percent of your budget spent on programs:	<u>89%</u>
Percent of your budget spent on administrative expenses:	<u>11%</u>

PERCENTAGE OF ORGANIZATIONAL FUNDING:

Religious Organizations	<u>0%</u>	
Civic Clubs	<u>0%</u>	
Corporate Donors	<u>0%</u>	
Endowment/Interest Income	<u>0%</u>	
Fees for services/products	<u>4%</u>	(Contract Meals)
Government Grants	<u>47%</u>	
Government Contracts	<u>36%</u>	
Individual Donors	<u>0%</u>	
Private Foundations	<u>0%</u>	
Special Events (based on net earnings)	<u>0%</u>	
United Way	<u>.01%</u>	
Other	<u>12.99%</u>	(Participant Donations, Civic clubs, Special Events, Interest)

OVERALL MISSION OF AGENCY

The mission of Aging Services Inc. (ASI) is to enhance the lives and dignity of Cleveland County senior adults by providing programs, services and referrals that assist and promote healthy independent living. ASI has been working to help senior adults in Cleveland County for 35 years. ASI is a private, nonprofit organization, incorporated in 1988.

Clients served by ASI are senior adults aged 60 years or older. It is estimated that 12,300 individuals/12% of the population in Norman are in this group and that at least 30% of the senior adults are living at or below the poverty level. ASI offers the following services and programs in the Norman area:

Transportation – Transportation is available on ASI's *Kiwanis Kruiser*, a wheelchair lift equipped van. Rides are available on a demand-response basis, Monday through Friday from 8:15am until 4:00pm in the greater Norman area only.

Congregate Meal Sites – Two of the five congregate meal sites operated by ASI are located in the Norman area, the Norman Senior Center at 329 South Peters and Rose Rock Villa at 700 North Berry. At these sites as well as the other three sites across Cleveland County, a lunch meal is provided to senior adults as well as an opportunity for socialization and participation in educational programs.

Home Delivered Meals – ASI delivers meals on a Monday through Friday basis to homebound senior adults living in Cleveland County. ASI refers requests in the Norman area to the Meals on Wheels program to avoid duplication of services.

Housekeeping Services – Housekeeping assistance is offered to frail senior adults with health limitations.

Outreach – Outreach workers conduct home visits to provide information on ASI, assess needs and make referrals to programs both within ASI and in the community.

Respite Voucher Program – This NEW program allows ASI to issue vouchers for respite care to full-time live in care givers caring for either seniors adult or individuals with Alzheimer's/dementia or grandparents raising grandchildren.

Advantage Case Management – ASI administers a Case Management program for qualified individuals on Oklahoma's Medicaid Waiver Program/Advantage Program. This program allows an individual to remain living at home while receiving assistance from a combination of formal and informal services.

DME (Durable Medical Equipment) Lending Closet - This program provides clients with the loan of DME when the need arises.

Summer Fan Program – This program provides clients with a large box fan to help with the summer heat. It is sponsored by O.G.&E.

SOS Food Pantry – Emergency food pantry supplies for senior adults in need.

Special Assistance Program – This program provides direct assistance to senior adults. The programs allows ASI to award up to \$100 one time per year to benefit senior adults who have a documented need for items that are not covered by insurance or other programs in our service area.

SPECIFIC PROJECT FOR WHICH FUNDING IS BEING REQUESTED

For FY2014, SVSC funding of \$5,000 is requested for the ASI Special Assistance Program and the Stock Our Shelves/SOS Emergency Food Pantry.

The Special Assistance Program will directly assist approximately 40-45 senior adults with unmet needs who are living within the Norman city limits. The program will help senior adults with a bona fide need and no ability to pay from personal funds. Over this past year, we have continued to see assistance with utility bills as the most frequently requested assistance. We have helped 25 Norman residents pay a total of \$2,160.20 towards their utility bills. Our seniors asked for this much assistance in spite of the fact that we experienced a very mild winter and summer this time around. The second most requested assistance is help with eye exams and glasses. We helped 7 Norman residents with eye exams and glasses for a total expenditure of \$570.00. An additional 12 Norman residents were helped with a variety of miscellaneous expenses for a total of \$92.28. A grand total of \$3,188.48 was spent through our Special Assistance Program to aide 44 Norman residents.

Some needs addressed by the program are addressed by other agencies such as the Salvation Army for utility assistance or Health for Friends for dental assistance. But, funding for these programs is limited and not always available.

The need for special assistance is identified in two ways. Usually the need is identified by an ASI Outreach Worker who is calling on a senior adult to determine their eligibility for services/programs or by other ASI employees who have occasion to be aware of senior adults who need assistance. Other times, a senior adult will contact the ASI office and request assistance. In all cases, an outreach worker will visit the home of the senior and conduct an assessment of their physical/environmental needs and their financial situation.

If the assessment verifies the individual can't afford to pay for the need or item from their own financial resources, the Outreach Worker will complete a Special Assistance Request. The Special Assistance Fund can assist the individual up to \$100 one time each calendar year. For couples, the assistance is a maximum of \$200. ASI has negotiated a below market rate with providers in the area to give ASI the ability to make the funds go further. Payment is made directly to the provider, not to the individual awarded the funds.

When the senior adult has some financial means ASI asks the senior to cover a portion of the expense or may simply allow the senior to use the ASI negotiated rate and cover the expense entirely from their own finances.

The ASI Executive Director and the ASI Case Management Supervisor

review each request on a case-by-case basis. The review includes discussion of the request; review of the financial assessment; and when the individual was last helped by the program. Copies of the Assessment Forms and Special Assistance Request Forms are attached.

The ASI SOS (Stock Our Shelves) Emergency Food Pantry was developed because our outreach workers and case managers frequently encountered senior adults that had virtually no food in their homes. We used to purchase our food for the pantry from the Regional Food Bank until they changed their rules and we were no longer able to comply with their rules. Saint Mark's Parish and Norman Moose Lodge have been helping to stock the pantry over the past year, but the need exceeds the donations received and extra support is needed for the pantry. Last year ASI distributed 54 pantry packs in the Norman area at an estimated value of \$25.00 per pantry pack. ASI spent \$349.68 to purchase food items for the pantry. Outreach workers and case managers carry pantry packs in their vehicles so that food can be provided immediately. The ability to leave a pantry pack helps the senior on an immediate basis and allows ASI time to look into other ways to help the senior meet their needs. Protein rich items such as tuna fish, peanut butter, and canned meats are primarily purchased to stock the pantry. ASI is working to get approximately 30 of our most frequent users of the food pantry switched over to a program operated by the Regional Food Bank. This program would provide them with a bag of shelf stable grocery items each month. At this time, the program is serving as many seniors as the budget will allow so until the Food Bank is able to increase their budget for this program, we will not be able to switch these 30 clients over to the Food Bank program.

The ASI Durable Medical Equipment/DME Lending Closet was awarded \$500 several years ago from a SVSC grant. ASI has found that there are very little costs associated with operating the lending closet and is therefore not requesting any further assistance from the SVSC for this program at this time.

All SVSC funding for our Special Assistance Program and our SOS Emergency Food Pantry is used exclusively for direct assistance to senior adults. There are no administrative overhead or other expenses included in the grant request or the grant budget.

FINANCIAL INFORMATION

Internal evaluation includes audits conducted annually of the OAA Title III program and every 2-3 years by the OK-DHS for the Advantage Case Management Program. There is separation of duties, per the auditor, for all financial dealings for the size of the ASI program's staff. All checks must be accompanied with documentation, approved by the Executive Director and require two signatures if over \$500. All Title III records are maintained for 5 years, as required. All Advantage records are maintained for 7 years, as required.

require two signatures if over \$500. All Title III records are maintained for 5 years, as required. All Advantage records are maintained for 7 years, as required. Program evaluations, policies and procedures adhere to (1) Areawide Aging Agency, (2) Older Americans Act – Title III, (3) DHS Aging Services Division-State of Oklahoma and (4) the Advantage Medicaid Waiver Program. There is a daily, weekly, monthly, quarterly, and annual tracking process in all areas of our funded programs and annual assessments, reviews and/or audits.

The Special Assistance Program Funds are maintained in a separate checking account. All checks require two signatures and no checks are written until the Special Assistance Request Form has been signed and the expenditure is approved and authorized. ASI keeps these funds in a separate account to allow for fast action as in many cases the Special Assistance Request is made on an emergency basis and action needs to be taken quickly.

The ASI Operating budget for FY13 changed after the SVSC grant was submitted. In October of 2012, ASI applied for and was awarded a new grant from the Areawide Aging Agency. The new grant is for funding to provide for the distribution of respite care vouchers to full-time, live in caregivers and to grandparents who are raising grandchildren. The vouchers can be used by the caregiver or grandparent to hire a respite care provider of their choice to care for their loved ones while the caregiver/grandparent is able to take a break from care giving responsibilities. The grant was for a total of \$244,434 which was intended to be for an entire year (7-1-12 through 6-30-13). The grant was not awarded until the middle of October and it took time for ASI to develop the forms and methodology needed to operate the new grant. ASI only spent \$90,186 of the Respite Voucher Program grant funds during FY13. In April of 2013, ASI was again awarded the Respite Voucher Program grant for a two year period from July 1, 2013 through June 30, 2015. There was an increase in the Title III grant for FY14 of \$4,355 and for the FY14 Respite Voucher Program grant was increased by \$4,676. However, in the month of August of 2013, ASI was informed that our FY14 budgets from the Title III program and the Respite Voucher program would receive sequestration cuts of \$18,889. For FY14, the CDBG grant funds from the City of Norman have been decreased by approximately 50%. Funding from the United Way of Norman for FY14 increased from \$16,000 per year to \$25,000 per year. ASI continues efforts to raise additional funds from our annual Gingerbread House Competition event held in Moore each year. After factoring in all these changes, **the percent of change from the actual year end FY13 revenues to the Projected FY14 budgeted revenues (less the sequestration cuts) is +9%.**

Required Attachments to this application:

Narrative describing Overall Mission of Agency

Narrative describing Specific Project for which Funding is being requested

Financial Information as previously outlined

Budget summary and projected budget

Copy of most recent Audit

Copy of IRS tax exempt status letter or your application for tax exempt status

List of current board members including names and professions

List of current staff members and their position titles

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08/27/13
Accrual Basis

Aging Services, Inc.
Profit & Loss
July 2012 through June 2013

	Jul '12 - Jun 13
Ordinary Income/Expense	
Income	
4 · Contributed support	
4010 · Participant Contributions	122,805.42
4230 · Local Grants	37,877.00
4330 · Local Donations	13,648.02
Total 4 · Contributed support	174,330.44
5 · Earned revenues	
5010 · AAA Grants	
5010.1 · AAA - USDA	60,138.00
5010 · AAA Grants - Other	642,352.92
Total 5010 · AAA Grants	702,490.92
5020 · Medicaid	
5030 · ADV Meals	268,658.64
5040 · ADV Case Management	277,332.00
Total 5020 · Medicaid	545,990.64
5150 · Revenues	
5180 · Sales to other programs	53,508.95
5210 · Misc. Income	1,118.00
5310 · Interest Income	255.29
5315 · Dividends	353.40
Total 5150 · Revenues	55,235.64
Total 5 · Earned revenues	1,303,717.20
Total Income	1,478,047.64
Gross Profit	1,478,047.64
Expense	
4000 · Reconciliation Discrepancies	0.13
7200 · Salaries & related expenses	
7220.1 · FT Salaries	415,662.16
7220.2 · PT Salaries	215,926.23
7220.3 · Bonus	31,127.00
7230 · Retirement	35,463.83
7240 · Benefits expense	
7240.1 · Health Insurance	64,532.97
7240.2 · RC125 Admin	628.00
7240.3 · Unemployment Expenses	-270.41
7240.4 · Workers Compensation	9,168.00
7240.5 · 125 Employee Expenses	16,905.41
7240 · Benefits expense - Other	1,531.18
Total 7240 · Benefits expense	92,495.15
7250 · Payroll taxes	52,125.90
Total 7200 · Salaries & related expenses	842,800.27
7500 · Other Professional Expenses	
7500.4 · Professional Fees	1,585.00
7510 · 990 Tax Return	500.00
7520 · Audit Expense	7,000.00
Total 7500 · Other Professional Expenses	9,085.00

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08/27/13
Accrual Basis

Aging Services, Inc.
Profit & Loss
July 2012 through June 2013

	Jul '12 - Jun 13
8100 · Administrative Expenses	
8105 · Chargeback	44.00
8110 · Supplies/ Bank SC	9,370.89
8130 · Telephone & telecommunications	4,850.89
8130.1 · Cell Phones	591.33
8140 · Postage, shipping, delivery	1,792.67
8160 · Equip rental & maintenance	2,465.65
8170 · Printing & copying	2,761.72
8520 · Insurance/office/misc	1,829.90
8530 · Membership dues - organization	273.25
8560 · Outside computer services	1,442.00
8570 · Employment Ads	2,343.37
8610 · Directors and Officers Insur	1,263.00
8620 · Site Liability Insurance	1,366.00
Total 8100 · Administrative Expenses	30,394.67
8200 · Occupancy expenses	
8210 · Rent, Utilities	31,949.11
8240 · Pest Control	704.00
Total 8200 · Occupancy expenses	32,653.11
8300 · Travel & meetings expenses	
8310 · Travel - Admin Staff	987.66
8310.01 · Travel - Outreach	7,479.50
8310.02 · Travel - Casemanagement	8,438.05
8310.03 · Travel - Site Managers	948.65
8310.04 · Travel-Housekeeper	5,847.50
8310.2 · Home Delivery Mileage	23,683.66
Total 8300 · Travel & meetings expenses	47,385.02
8400 · Client Services	
8120 · Vehicle Operations Expense	12,935.48
8225 · Site Supplies	1,574.69
8230 · Kitchen Supplies	21,237.76
8410 · Senior Support Services	
8412 · Utility Assistance	3,237.14
8413 · Eye Exam and Glasses	790.00
8414 · DME	200.00
8416 · Fall Party	1,308.50
8418 · Misc Expense	444.81
8419 · Client Christmas Gifts	113.63
8420 · Food Pantry	412.22
8421 · Prescription Drugs	14.54
8423 · Rental Assistance	200.00
8424 · Gingerbread Fundraiser	470.31
8425 · Medical Expenses	75.00
8427 · Misc Client Expense	34.80
8529 · Blizzard Bags	2,818.24
Total 8410 · Senior Support Services	10,119.19
8450 · Dietitian	8,112.00
8460 · Food Costs	
8460.01 · ADV Food Cost	20,385.73
8460.04 · HS Food Cost	3,926.24
8460.05 · Title III Food Cost	124,054.80
8460.06 · AF Food Cost	2,095.95
8460.07 · Full Circle	4,973.84
Total 8460 · Food Costs	155,436.56
8465 · Emergency Meals	1,621.00
8470 · Frozen Meals	151,674.20
8490 · USDA Costs	73,605.56
Total 8400 · Client Services	436,316.44

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08/27/13
Accrual Basis

Aging Services, Inc.
Profit & Loss
July 2012 through June 2013

	Jul '12 - Jun 13
8401 - Respite Care	50,022.00
Total Expense	1,448,656.64
Net Ordinary Income	29,391.00
Net Income	29,391.00

Aging Services, Inc. Balance Sheet As of June 30, 2013

	<u>Jun 30, 13</u>
ASSETS	
Current Assets	
Checking/Savings	
1010 · FF - Operating	70,916.70
1015 · Arvest	18,061.12
1020 · First Fidelity Payroll	-38,758.59
Total Checking/Savings	<u>50,219.23</u>
Accounts Receivable	
1110 · Accounts receivable	195,470.51
Total Accounts Receivable	<u>195,470.51</u>
Other Current Assets	
1111 · Allowance for Doubtful Accounts	-14,943.93
1330 · Prepaid Rent	1,689.17
1331 · Prepaid Insurance	7,541.72
Total Other Current Assets	<u>-5,713.04</u>
Total Current Assets	<u>239,976.70</u>
Fixed Assets	
1640 · Furniture, fixtures, & equip	199,994.90
1650 · Vehicles	127,033.31
1745 · Accum deprec- furn,fix,equip	-272,910.35
Total Fixed Assets	<u>54,117.86</u>
Other Assets	
1800 · Investment - Stock	14,831.40
Total Other Assets	<u>14,831.40</u>
TOTAL ASSETS	<u><u>308,925.96</u></u>
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
2010 · Accounts payable	100.00
Total Accounts Payable	<u>100.00</u>
Other Current Liabilities	
2100 · Payroll Liabilities	19,161.64
2110 · Accrued Compensated Absences	20,026.13
Total Other Current Liabilities	<u>39,187.77</u>
Total Current Liabilities	<u>39,287.77</u>
Total Liabilities	<u>39,287.77</u>
Equity	
3000 · Unrestricted net assets	23,942.75
3010 · Unrestrict (retained earnings)	216,304.44
Net Income	29,391.00
Total Equity	<u>269,638.19</u>
TOTAL LIABILITIES & EQUITY	<u><u>308,925.96</u></u>

FY14 ASI Budget/July 13 to June 14 ORIGINAL	TITLE III	ADVANTAGE CM	CONTRACT MEALS	RESPITE GRANT	INTEREST/MISC.	TOTAL PROGRAM
REVENUES						
SUPPORT						
Title III						
B	123,011					123,011
C-1	237,343					237,343
C-2	170,327					170,327
NSIP	65,410					65,410
D	0					0
E	15,545			243,900		259,445
Total Title III	611,636			243,900		855,536
						0
Total Respite Grant						
United Way Housekeeping Grant	25,000					25,000
Local Grants/ CDBG/City of Moore/Norman	10,500					10,500
Total Grants						
Donations						
Participant Contributions	120,506			3,835		124,341
Other Donations				1,375		1,375
Total Donations						
TOTAL SUPPORT	156,006			5,210		161,216
CONTRACTS						
Contract sales to others						
Among Friends			11,157			11,157
Caregiver Solutions			0			0
HeadStart Meals			20,228			20,228
Advantage Meals	0		266,702			266,702
Advantage Case Management		277,332.00				277,332
Full Circle			25,724			25,724
Total Contracts	0	277332	323811			601,143
Other Revenues						
Interest						0
Miscellaneous						0
Total Other Revenues	0	0				0
TOTAL REVENUES	767,642	277,332	323,811	249,110		1,617,895

FY14 ASI Budget/July 13 to June 14 ORIGINAL	TITLE III	ADVANTAGE CM	CONTRACT MEALS	RESPITE GRANT	INTEREST/MISC.	TOTAL PROGRAM
EXPENSES						
Salaries & Benefit Expenses						
Administrative-Salary	74213	68889	29840	26139		199,081
Administrative-Benefits	31118	18141	10366	7840		67,465
CaseManagers-Salary		114278				114,278
Casemanagers-Benefits		33273				33,273
CaseCord-Salary		22557				22,557
CaseCord-Benefits		5875				5,875
Kitchen Supervisor-Salary	23710		4516			28,226
Kitchen Supervisor-Benefits	11083		1614			12,697
Kitchen-Cook/Cook Aide-Salary	50537		14394			64,931
Kitchen-Cook/Cook Aide-Benefits	25518		5342			30860
Food Carriers-Salary	19797		18289			38,086
Food Carriers-Benefits	6067		4201			10,268
Housekeepers-Salary	65892					65,892
Housekeepers-Benefits	18216					18,216
Outreach-Salary	35284				17638	52,922
Outreach-Benefits	12093				9008	21,101
Site Managers-Salary	38218		8098			46,316
Site Managers-Benefits	8754		1265			10,019
Site Aides-Salary	21012		3297			24,309
Site Aides-Benefits	4183		631			4,814
Kiwanis Kruiser Driver-Salary	15683					15,683
Kiwanis Kruiser Driver-Benefits	6376					6,376
Dietician Workers Comp	109					109
						0
						0
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						0
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Total Salaries & Benefits	467863	263013	101853	60625		893354

FY14 ASI Budget/July 13 to June 14 ORIGINAL	TITLE III	ADVANTAGE CM	CONTRACT MEALS	RESPITE GRANT	INTEREST/MISC.	TOTAL PROGRAM
Other Professional Expenses (List all items in budget category)						
Dietician Contract	8008					8,008
Postage	1242	800	198	2520		4,760
Telephone	4189	900	844	188		6,121
Office Supplies	3547	1600	700	1527		7,374
Printing & Xerox	2112	900	288	2280		5,580
Computer Service	480	900		480		1,860
Audit/990 Tax Return	5854	2000	1088	1415		10,357
Cell Phones	600	0	0			600
Employment Advertising	1640		240			1,880
Membership Dues	1000					1,000
Bus Insurance/Maintenance-KK Van	2414					2,414
Van Insurance/Maintenance-Nutr Vans	7355		1721			9,076
Van Expense/Gas & Oil	6720		1600			8,320
Kitchen/Site Repairs	4355		811			5,166
Pest Control-Kitchen	544		104			648
Respite Vouchers				176700		176,700
Insurance-Office/D&O	1140	300	160			1,600
Miscellaneous Other						0
Site Liability Insurance	655					655
Occupancy Expenses						
Rent/Utilities	16961	8448	2820	1200		29,429
Travel & Meeting						
Project Director	1630					1,630
Assistant Director/Accountant	254					254
Social Service Supervisor	922					922
Outreach	6360			9510		15,870
Housekeepers	8267					8,267
Cook Supervisor	127					127
Site Managers	1426		260			1,686
Home Delivery Mileage	18449		4466			22,915
CaseManagers		8400				8,400

FY14 ASI Budget/July 13 to June 14 ORIGINAL	TITLE III	ADVANTAGE CM	CONTRACT MEALS	RESPITE GRANT	INTEREST/MISC.	TOTAL PROGRAM
Client Services						
Food Costs	171939		164627			336,566
Congregate Meal Supplies	9400		0			9,400
Home Delivered Meal Supplies	15731		0			15,731
Other Meal Supplies	6782		5504			12,286
Meal Cost Computation	630		120			750
AF Meal Supplies			490			490
HeadStart Meal Supplies			778			778
Full Circle Meal Supplies	0		1061			1,061
Equipment: LapTop	0		0		600	600
	0					0
Total Other Professsional Expenses	310733	24248	187880	196420		719,281
TOTAL EXPENSES	778596	287261	289733	257045		1612635
Net +/-	-10,954	-9,929	34,078	-7,935		5,260

Aging Services, Inc.

Financial Statements

And

Auditor's Report

For the Year Ended

June 30, 2012

LP

LARRY PACE & CO., PC

Certified Public Accountants

1225 W. Main, Suite 124

Norman, Oklahoma 73069

405.321.3026

Aging Services, Inc.
Norman, Oklahoma
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June 30, 2012

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Certified Public Accountants
1225 W. Main, Suite 124
Norman, Oklahoma 73069
405. 321.3026

INDEPENDENT AUDITOR'S REPORT

To the Board of Directors
Aging Services, Inc.
Norman, Oklahoma 73071

We have audited the accompanying statement of financial position of Aging Services, Inc. as of June 30, 2012 and the related statements of activities and changes in net assets, functional expenses and cash flows for the year then ended. These financial statements are the responsibility of the Aging Service's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Aging Services, Inc. as of June 30, 2012, and the changes in its net assets and its cash flows for the year then ended in conformity with accounting principles generally accepted in the United States of America.

In accordance with *Government Auditing Standards*, we have also issued our report dated January 25, 2013, on our consideration of Aging Service's internal control over financial reporting and our tests of its compliance with certain provisions of laws, regulations, contract, and grant agreements, and other matters. The purpose of that report is to describe the scope of testing of internal control over financial reporting and compliance and the results of that testing and not to provide an opinion on the internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* and should be considered in assessing the results of audit.

Our audit was conducted for the purpose of forming an opinion on the basic financial statements of Aging Services, Inc. taken as a whole. The accompanying schedules of federal and state awards is presented for purposes of additional analysis as requested by the state funding agency, and is not a required part of the basic financial statements. Such information has been subjected to the auditing procedures applied in the audit of the basis financial statements and, in our opinion, is fairly stated, in all material respects, in relation to the basic financial statements taken as a whole.

Larry Pace & Co., PC

Norman, Oklahoma
January 25, 2013

Aging Services, Inc.
Statement of Financial Position
June 30, 2012

Assets:

Current Assets

Cash and cash equivalents	\$ 73,484
Accounts receivable, net of \$14,944 allowance	109,535
Prepaid expenses	<u>9,231</u>
Total current assets	<u>192,250</u>

Property and equipment

Furniture and equipment	199,348
Autos	<u>127,033</u>
	326,381
Less: Accumulated depreciation	<u>(272,910)</u>
Net property and equipment	<u>53,471</u>

Other Assets

Investments - Stock	<u>14,951</u>
---------------------	---------------

Total assets	<u><u>\$ 260,672</u></u>
---------------------	---------------------------------

Liabilities and Net Assets:

Current liabilities

Accounts payable	\$ 37
Accrued Compensated Absences	20,026
Payroll liabilities	<u>382</u>
Total current liabilities	<u>20,445</u>

Net Assets

Unrestricted net assets	234,202
Temporarily restricted net assets	<u>6,025</u>
Total net assets	<u>240,227</u>

Total liabilities and net assets	<u><u>\$ 260,672</u></u>
---	---------------------------------

See accompanying notes to financial statements.

Aging Services, Inc.
Statement of Activities and Changes in Net Assets
For the Year Ended June 30, 2012

	<u>Unrestricted</u>	<u>Temporarily Restricted</u>	<u>Total</u>
<u>Revenues:</u>			
Support:			
Federal grants	\$ 388,222	\$ -	\$ 388,222
USDA Cash in lieu	65,239	-	65,239
Community Development Block Grant	19,328	-	19,328
Total Federal funding	472,789	-	472,789
State grants	154,432	-	154,432
Participant/Local contributions	112,579	27,979	140,558
In-Kind donations	5,668	-	5,668
Local grants	5,100	-	5,100
Fundraisers	-	2,524	2,524
Net assets released from restrictions	30,510	(30,510)	-
Total Support	781,078	(7)	781,071
Contracts:			
Contract sales to other programs	64,602	-	64,602
AdVantage case management	272,619	-	272,619
AdVantage home bound meals	249,065	-	249,065
Total Contracts	586,286	-	586,286
Other revenues:			
Unrealized gain/loss on investments	(2,388)	-	(2,388)
Interest & dividends	809	7	816
Miscellaneous	616	-	616
Total Other revenues	(963)	7	(956)
Total Revenues	1,366,401	-	1,366,401
Operating Expenses:			
Program expenses	1,283,914	-	1,283,914
Management and general	83,159	-	83,159
Depreciation	22,428	-	22,428
Total Operating Expenses	1,389,501	-	1,389,501
Change in net assets	(23,100)	-	(23,100)
Net assets at beginning of year	257,302	6,025	263,327
Net assets at end of year	<u>\$ 234,202</u>	<u>\$ 6,025</u>	<u>\$ 240,227</u>

See accompanying notes to financial statements.

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Aging Services, Inc.
Statement of Functional Expenses
For the Year Ended June 30, 2012

	Program Services				Program Total
	Title III	Case Management	AdVantage Meals	Other	
Salaries	\$ 301,405	\$ 210,163	\$ 87,878	\$ -	\$ 599,446
Payroll taxes	24,353	16,288	6,947	-	47,588
Employee benefits	53,142	31,969	14,860	-	99,971
Salaries and related expenses	378,900	258,420	109,685	-	747,005
Bad debt expense	-	10,044	15,383	-	25,427
Capital expenditures	635	570	-	-	1,205
Computer services	572	163	195	-	930
Delivery costs	18,156	-	4,985	-	23,141
Depreciation	18,686	1,774	-	-	20,460
Dietitian	8,479	-	-	-	8,479
Dues & Subscriptions	-	-	85	-	85
Equipment rental/maint	4,981	-	767	-	5,748
Food costs	197,508	-	145,713	-	343,221
Insurance	2,444	642	(2)	-	3,084
Kitchen/site supplies	20,542	-	4,847	-	25,389
Personnel search	1,911	47	201	-	2,159
Postage/Shipping	491	821	107	-	1,419
Printing/Copying	14	54	10	-	78
Professional fees	4,562	2,000	1,542	-	8,104
Rent & Utilities	9,938	9,292	3,699	-	22,929
Senior Support Services	-	-	-	12,020	12,020
Supplies	3,236	1,949	2,606	-	7,791
Telephone/cell phones	2,608	3,593	945	-	7,146
Travel	14,933	8,994	72	-	23,999
Vehicle Expenses	7,824	-	7,936	-	15,760
Subtotal	696,420	298,363	298,776	12,020	1,305,579
Less: Capital Expenditures	635	570	-	-	1,205
Expenses - net of					
Capital Expenditures	695,785	297,793	298,776	12,020	1,304,374
Less: Depreciation	18,686	1,774	-	-	20,460
Total Operating Expenses	\$ 677,099	\$ 296,019	\$ 298,776	\$ 12,020	\$ 1,283,914

See accompanying notes to financial statements.

Aging Services, Inc.
Statement of Functional Expenses
For the Year Ended June 30, 2012

	<u>Program Total</u>	<u>General & Administration</u>	<u>Total</u>
Salaries	\$ 599,446	\$ 53,441	\$ 652,887
Payroll taxes	47,588	4,136	51,724
Employee benefits	99,971	11,999	111,970
Salaries and related expenses	747,005	69,576	816,581
Bad debt expense	25,427	-	25,427
Capital expenditures	1,205	4,693	5,898
Computer services	930	-	930
Delivery costs	23,141	-	23,141
Depreciation	20,460	1,968	22,428
Dietitian	8,479	-	8,479
Dues & subscriptions	85	155	240
Equipment rental/maint	5,748	-	5,748
Food costs	343,221	-	343,221
Insurance	3,084	951	4,035
Kitchen supplies	25,389	-	25,389
Personnel search	2,159	149	2,308
Postage/Shipping	1,419	-	1,419
Printing/Copying	78	30	108
Professional fees	8,104	1,521	9,625
Rent & Utilities	22,929	7,338	30,267
Senior support services	12,020	-	12,020
Supplies	7,791	105	7,896
Telephone/cell phones	7,146	2,314	9,460
Travel	23,999	1,020	25,019
Vehicle operations	15,760	-	15,760
Subtotal	1,305,579	89,820	1,395,399
Less: Capital Expenditures	1,205	4,693	5,898
Expenses - net of			
Capital Expenditures	1,304,374	85,127	1,389,501
Less: Depreciation	20,460	1,968	22,428
Total Operating Expenses	<u>\$ 1,283,914</u>	<u>\$ 83,159</u>	<u>\$ 1,367,073</u>

See accompanying notes to financial statements.

Aging Services, Inc.
Statement of Cash Flows
For the Year Ended June 30, 2012

Cash Flows from Operating Activities:	\$ (23,100)
Change in Net Assets	
Adjustments to reconcile net income (loss) to net cash provided (used) by operating activities	
Depreciation	22,428
Unrealized (gain)/loss on investments	2,388
(Increase) decrease in assets:	
Accounts receivable, net	91,015
Prepaid expenses	(306)
Increase (decrease) in liabilities:	
Accounts payable	(390)
Bank overdraft	(56,367)
Accrued Compensated Absences	760
Payroll liabilities	220
Net Cash Provided by Operating Activities	<u>36,648</u>
Cash Flows from Investing Activities:	
Purchase of equipment	<u>(5,898)</u>
Net Cash (Used) in Investing Activities	<u>(5,898)</u>
Net Increase in Cash	30,750
Cash, beginning of year	<u>42,734</u>
Cash, end of year	<u><u>\$ 73,484</u></u>
Supplemental Disclosure:	
Interest paid	<u><u>\$ -</u></u>
Income taxes paid	<u><u>\$ -</u></u>

See accompanying notes to financial statements.

Aging Services, Inc.
Notes to Financial Statements
For the Year Ended June 30, 2012

Note 1 - Summary of Significant Accounting Policies:

Nature of Activities

Aging Services, Inc. is a private nonprofit corporation, organized to assist and promote independent living for the elderly of Cleveland County and surrounding communities by providing various services and networking with other agencies for services. Aging Services, Inc. is funded by the Older Americans Act through a grant from Areawide Aging Agency, Inc. of Central Oklahoma. Federal and state funds are passed through the Oklahoma Department of Health and Human Services to provide the funding for grants and contracts to Aging Services, Inc.

Basis of Accounting

The financial statements of Aging Services have been prepared on the accrual basis of accounting and accordingly reflect all significant receivables, payables, and other liabilities.

Financial Statement Presentation

The Organization is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets.

Cash and Cash Equivalents

For purposes of the Statement of Cash Flows, Aging Services, Inc. considers all highly liquid investments with an initial maturity of three months or less to be cash equivalents. There were no cash equivalents as of June 30, 2012.

Investments

Investments in marketable securities are stated at fair value. Investment income and gains are reported as increases in unrestricted net assets in the reporting period in which the income and gains are recognized.

Use of Estimates

Management uses estimates and assumptions in preparing financial statements. Those estimates and assumptions affect the carrying amounts of assets and liabilities, the disclosure of contingent assets and liabilities, and the reported amounts of revenues and expenses. Actual results may differ from those estimates.

Aging Services, Inc.
Notes to Financial Statements
For the Year Ended June 30, 2012

Note 1 - Summary of Significant Accounting Policies (continued):

Contributions

All contributions are considered to be for unrestricted use unless specifically restricted by the donor. Amounts received that are designated for future periods or restricted by the donor for specific purposes are reported as temporarily or permanently restricted support that increases those net asset classes. When a temporary restriction expires, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restriction.

Income Tax Status

Aging Services, Inc. is exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code and, therefore has no provision for federal or state income taxes in the accompanying financial statements. In addition, the Organization qualifies for the charitable contribution deduction under Section 170(b)(1)(A) and has been classified as an organization other than a private foundation under Section 509(a)(2). There is no interest or penalties to the Internal Revenue Service included in these financial statements. The 2009, 2010, and 2011 tax years remain open and are subject to examination by the Internal Revenue Service and the State of Oklahoma.

Property and Equipment

Aging Services, Inc. follows the current practice of capitalizing all acquisitions of property and equipment in excess of \$300 and expenditures of repairs, maintenance, renewals and betterments that materially prolong the useful lives of assets. Such assets are recorded at cost or, if donated, at the approximate fair value at date of donation. Depreciation is provided over the estimated useful lives of the assets on a straight-line basis. Assets purchased with federal or state funds are subject to return or disposition in accordance with the direction of the funding agency should either party decide to discontinue their relationship.

Compensated Absences

Employees accrue annual leave at a rate of 20 hours per month for a full-time employee. Part-time employees accrue at a prorated basis computed on the number of hours worked. A maximum of 80 hours will be paid upon resignation or termination. Liability for accrued compensated absences at June 30, 2012 was \$20,026.

Aging Services, Inc.
Notes to Financial Statements
For the Years Ended June 30, 2012

Note 2 – Employee Benefit Plan:

Aging Services, Inc. offers an employee retirement benefit plan under Sec 408(k) of the Internal Revenue Code. For the year ended June 30, 2012 Aging Services, Inc. recorded an expense of \$28,690 related to retirement benefits.

Note 3 – Accounts Receivable/Allowance for Doubtful Accounts

Accounts receivable at June 30, 2012 included the following:

Advantage Meals	\$ 55,803
Advantage Case Management	27,459
Title III	37,067
Contract Meals	3,352
Community Development Block Grant	798
Total	124,479
Less: Allowance for Doubtful Accounts	14,944
Accounts Receivable, net	<u>\$ 109,535</u>

Accounts receivable are stated at the contract billing amount. Receivables represent services and meals that have been provided to eligible recipients that are billed to the area oversight agencies for federal and state funds. Management reviews the aging of accounts receivables throughout the year and reprocesses those that have been returned unpaid by the agencies. Write off of accounts occur once the accounts exceed ninety days and collections efforts are having no effect. Bad debt expense for the year ending June 30, 2012 was \$25,427.

Note 4 – Concentration

Aging Services, Inc. derives a majority of its revenue from service contracts and grants from federal and state agencies. Although not considered likely by management, a significant reduction in the level of revenue from these agencies could have a material effect on the Organization's ability to maintain their current level of programs and services.

Note 5 – Donated Facilities

Aging Services, Inc. uses various kitchen facilities in the surrounding area to provide congregate meals to the elderly and handicapped participants. These facilities are provided by government agencies, City of Norman, local community centers, and churches. Aging Services, Inc. has not attempted to determine the fair value for the use of such facilities, and as such, no amount has been reflected in the financial statements as fair value revenue and expense for their rental.

Aging Services, Inc.
Notes to Financial Statements
For the Year Ended June 30, 2012

Note 6 – In-Kind Contribution

The City of Norman provides assistance to Aging Services, Inc. in the form of gasoline fuel, repairs and maintenance for the transport vehicle used by Aging Services. During the year ending June 30, 2012 this contribution amounted to \$5,668 which is included as part of the in-kind contribution and as vehicle expense in the accompanying statement of activities and functional expenses.

Note 7 – Temporarily Restricted Net Assets

As of June 30, 2012 the funds representing temporarily restricted net assets are donations to be used for Senior Support Services.

Note 8 – Fair Value Measurement

Fair value of assets measured on a recurring basis at June 30, 2012 is as follows:

	Fair Value Measurements at Reporting Date Using	
	<u>Fair Value</u>	Quoted Prices in Active Markets for Identical Assets (Level 1)
Trading securities	\$ 14,951	\$ 14,951

Fair values for trading securities are determined by reference to quoted market prices and other relevant information generated by market transactions.

Note 9 – Functional Expenses

Aging Services, Inc. allocated its expense on a functional basis among its various programs and general and administrative support. Expenses that can be identified with a specific program or support function are allocated directly according to their natural expenditure classification. Other expenses that are common to several programs as well as administrative are allocated based on various relationships.

Aging Services, Inc.
Notes to Financial Statements
For the Years Ended June 30, 2012

Note 10 – Contingent Liabilities

Aging Services participates in a number of state and federally assisted programs. These programs are audited in accordance with Government Auditing Standards. Audits of prior years have not resulted in any significant disallowed costs; however, grantor agencies may provide for further examinations. Based on prior experience, management believes that further examination would not result in any significant disallowed costs.

Note 11 – Subsequent Events

Aging Services, Inc. has evaluated subsequent events through January 25, 2013, the date which the financial statements were available for issue.

SUPPLEMENTAL INFORMATION

Aging Services, Inc.
Schedule of Federal Awards
For the Year Ending June 30, 2012

<u>Federal Grantor/ Pass-Through Grantor/ Program Title</u>	<u>Federal CFDA Number</u>	<u>Award</u>	<u>Expenditures</u>
<u>U.S. Department of Human Services</u>			
<u>Passed through State of Oklahoma Department of Health and Human Services:</u>			
USDHS OAA, Title III Social Service/Transportation	93.044	\$ 94,382	\$ 94,382
USDHS OAA, Title III Congregate Meals	93.045	162,998	162,998
USDHS OAA, Title III Home Delivered Meals	93.045	110,236	110,236
USDHS OAA, Title III Health Promotion	93.043	1,856	1,856
USDHS OAA, Title III Caregiver	93.052	18,750	18,750
USDA NSIP Cash in Lieu of Commodities	93.053	65,239	65,239
		<u>453,461</u>	<u>453,461</u>
<u>U.S Department of Housing & Urban Development</u>			
<u>Passed through the City of Norman, Oklahoma</u>			
Community Development Block Grant	14.218	12,229	12,229
<u>Passed through the City of Moore, Oklahoma</u>			
Community Development Block Grant	14.218	7,099	7,099
		<u>19,328</u>	<u>19,328</u>
		<u>\$ 472,789</u>	<u>\$ 472,789</u>

Note 1 - Basis of Presentation

The accompanying schedule of federal awards includes the federal funding activity of Aging Services, Inc. and is presented on the accrual basis of accounting. The information in this schedule is presented in accordance with the requirements of Oklahoma Department of Human Services. Therefore, some amounts presented in this schedule may differ from amounts presented in, or used in the preparation of, the basic financial statements.

See accountant's report.

Aging Services, Inc.
Schedule of State Awards
For the Year Ending June 30, 2012

<u>State Agency</u>	<u>Award</u>	<u>Expenditures</u>
<u>Department of Human Services</u>		
<u>Passed through Areawide Aging Agency</u>		
Title III - B, Social Service/Transportation	\$ 16,656	\$ 16,656
Title III - C1, Congregate Meals	64,325	64,325
Title III - C2, Home Delivered Meals	66,874	66,874
Title III - D, Health Promotion	327	327
Title III - E, Caregivers Support	6,250	6,250
	<u>\$ 154,432</u>	<u>\$ 154,432</u>
 <u>Oklahoma Health Care Authority</u>		
AdVantage Case Management	\$ 272,619	\$ 272,619
AdVantage Home Delivered Meals	249,065	249,065
	<u>\$ 521,684</u>	<u>\$ 521,684</u>

Note 1 - Basis of Presentation

The accompanying schedule of state awards includes the state funding activity of Aging Services, Inc. and is presented on the accrual basis of accounting. The information in this schedule is presented in accordance with the requirements of Oklahoma Department of Human Services. Therefore, some amounts presented in this schedule may differ from amounts presented in, or used in the preparation of, the basic financial statements.

See accountant's report.

ADDITIONAL REPORTS

GOVERNMENT REPORTS

Certified Public Accountants
1225 W. Main, Suite 124
Norman, Oklahoma 73069
405. 321.3026

**INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER
FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS
BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED
IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS**

To the Board of Directors of
Aging Services, Inc.

We have audited the financial statements of Aging Services, Inc. (a nonprofit organization) as of and for the year ended June 30, 2012, and have issued our report thereon dated January 25, 2013. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in Government Auditing Standards, issued by the Comptroller General of the United States.

Internal Control over Financial Reporting

Management of Aging Services, Inc. is responsible for establishing and maintaining effective internal control over financial reporting. In planning and performing our audit, we considered Aging Services, Inc.'s internal control over financial reporting as a basis for designing our auditing procedures for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of Aging Services, Inc.'s internal control over financial reporting. Accordingly, we do not express an opinion on the effectiveness of the Organization's internal control over financial reporting.

A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct misstatements on a timely basis. A material weakness is a deficiency, or a combination of deficiencies, in internal control such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis.


Our consideration of internal control over financial reporting was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over financial reporting that might be deficiencies, significant deficiencies, or material weaknesses. We did not identify any deficiencies in internal control over financial reporting that we consider to be material weaknesses, as defined above.

Compliance and Other Matters

As part of obtaining reasonable assurance about whether Aging Services, Inc.'s financial statements are free of material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

We noted certain matters that we reported to management of Aging Services, Inc. in a separate letter dated January 25, 2013.

This report is intended solely for the information and use of management, and others within the entity, the Board of Directors, and federal and state awarding agencies and pass-through entities and is not intended to be and should not be used by anyone other than these specified parties.


Norman, Oklahoma
January 25, 2012



Department of the Treasury
Internal Revenue Service

P.O. Box 2508
Cincinnati OH 45201

In reply refer to: 0248667583
May 14, 2010 LTR 4168C EO
73-1326994 000000 00

00035357
BODC: TE

RECEIVED

MAY 18 2010

AGING SERVICES INC
1179 E MAIN ST
NORMAN OK 73071-5331



627137

Employer Identification Number: 73-1326994
Person to Contact: Ms Mosley
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your May 05, 2010, request for information regarding your tax-exempt status.

Our records indicate that your organization was recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in November 1988.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Beginning with the organization's sixth taxable year and all succeeding years, it must meet one of the public support tests under section 170(b)(1)(A)(vi) or section 509(a)(2) as reported on Schedule A of the Form 990. If your organization does not meet the public support test for two consecutive years, it is required to file Form 990-PF, Return of Private Foundation, for the second tax year that the organization failed to meet the support test and will be reclassified as a private foundation.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

0248667583
May 14, 2010 LTR 4168C E0
73-1326994 000000 00
00035358

AGING SERVICES INC
1179 E MAIN ST
NORMAN OK 73071-5331

Sincerely yours,

Michele M. Sullivan

Michele M. Sullivan, Oper. Mgr.
Accounts Management Operations I

AGING SERVICES INC.
BOARD OF DIRECTORS – As of 08/13/13

Doug Cubberley (President)

Attorney at Law

Sam Kerr (Past President)

Retired, Moore Norman Technology Center Administrator

Gala Hicks (President Elect)

Human Resources Director - City of Norman

Neil Vickers (Vice President)

Retired, Norman Police Department

Lisa Krieg (Secretary)

Planner - City of Norman

Ann Summers (Treasurer)

University of Oklahoma - Real Estate Operations

Donna Hoffman

Banker - First Fidelity Bank Moore, OK

Mary Hatley

Retired, City Clerk - City of Norman

Karroll Inman

Retired, Volunteer and Community Activist

Janie Milum

Retired, Moore Norman Technology Center Administrator

Bobbe Feher-Nist

Public Housing Manager - Norman Housing Authority

Kathy Langley (Non-voting member)

Planner - Areawide Aging Agency

ASI Employee List

	NAME	POSITION
1	Anderson, Doris	ADvantage Case Coordinator
2	Brown, Shannon	Housekeeper
3	Buchanan, Richard	Food Carrier - Little Axe
4	Burton, Cathy	KK Driver
5	Carroll, Darlene	Moore Site Manager
6	Carter, Deonna	Housekeeper
7	Carter, Renee	Sec/Transportation Cord.
8	Chesser, Shelia	E. L. Site Aide
9	Cogswell, Arnold	Food Carrier - Moore/Norman
10	Colby, Ricky	Head Cook
11	Conner, Ellen	Accountant/Asst. Director
12	Cook, Barbara	Floating SM/ Relief CA/Driver
13	Cooney, Beverly	Cook Aide - Kitchen
14	Cramer, Cindy	ADvantage Case Manager
15	Cunyngham, Marcie	E. L. Site Manager
16	Dillard, Barbara	Kitchen Supervisor/Cook
17	Eckel, Linda	Dietitian
18	Freeman, Rhonda	Noble Site Manager
19	Gaines, Robbie	Housekeeper
20	Geyer, Tina	Housekeeper
21	Gibson, Johnie	Cook Aide - Kitchen
22	Grotefend, Ernest	Rose Rock Site Manager
23	Henschel, George	Social Service Supervisor
24	Kating, Betty	Moore Site Aide
25	Mailo, Tracy	ADvantage Case Manager
26	McConahay, Pam	Norman Site Manager
27	McIntosh, Everett	Food Carrier
28	Morrow, Betty	Cook Aide - Kitchen
29	Mulkey, Terry	Respite Outreach Worker
30	Otto, Andrea	Housekeeper
31	Pennington, Cindy	Noble Site Aide
32	Porter, Dale	ADvantage Case Manager
33	Reid, Janet	Housekeeper
34	Scherman, Marian	Outreach Worker
35	Stone, Linda	Housekeeper
36	Strough, Robert	Outreach Worker
37	Vache', Jay	ADvantage Case Manager
38	Wilson, Kathleen	Executive Director
39	Woods, Kimberly	Food Carrier

Time interview began: _____

Time interview ended: _____

OKLAHOMA DEPARTMENT OF HUMAN SERVICES
Older Americans Act Assessment

1. ☐ Assessment 2. ☐ Reassessment

5. CLIENT ID _____

3. Date of initial contact _____

6. AIM entry date _____

4. Interview date _____

7. Initials of data entry staff _____

8. Source of referral to this agency:

Name: Last

First

Middle

Relationship to consumer

Work/Home Phone: _____ Cell Phone: _____ Email: _____

9. Identifying information:

Last

First

Middle

Age

DOB

Gender: ☐ M ☐ F

10. Contact information:

Address (street and mailing if different) City State Zip County

Home phone: _____ Cell phone: _____ Email: _____

11. Do you participate in another program like this? ☐ Yes ☐ No

If yes; where? (Such as a meal site or independent senior center) _____

If yes: what services are you currently receiving? _____

12. Directions to residence

13. Marital status: ☐ Single ☐ Married ☐ Widowed ☐ Divorced

14. Spouse information:

Name: Last

First

Middle

Age

DOB

Gender ☐ M ☐ FMay contact in case of an emergency: ☐ Yes ☐ No

Contact Information: _____

15. Reason for Removal/Closure: _____ Assessor: _____ Date _____

16. Emergency contact(s) outside the home and not in the same household

Name	Relationship	Address	Phone

17. Residence: ☐ Own ☐ Rent ☐ Lives Alone If not, specify with whom _____
 Number of persons who live in the home: _____

☐ Private residence ☐ Multiple dwelling (apartments) ☐ Other _____

18. Veteran ☐ Yes ☐ No 19. Spouse of veteran ☐ Yes ☐ No

20. Ethnicity: ☐ Hispanic or Latino ☐ Not Hispanic or Latino

21. Race: (check all that apply) ☐ Black or African American ☐ American Indian or Alaskan Native ☐ Asian ☐ White ☐ Native Hawaiian or other Pacific Islander ☐ Other _____

22. Language: ☐ Speaks English ☐ Understands English

☐ Speaks another language: _____ Needs an interpreter: ☐ Yes

23. Poverty Level: ☐ Above ☐ Below Estimated monthly income: _____
 (optional)

(Refer to annual poverty guidelines)

24. Are you currently diagnosed with a medical condition or illness? ☐ Yes ☐ No

25. If yes, is it a chronic (ongoing) condition? ☐ Yes ☐ No
 (Self-statement is sufficient)

26. Is it difficult to cover the cost of your medications each month? ☐ Yes ☐ No

27. During the last two weeks have you often been bothered by:
 a. Having little interest or pleasure in doing things? ☐ Yes ☐ No

b. Feeling down, sad, or hopeless? ☐ Yes ☐ No

28. Primary doctor: Name _____ Phone (in case of emergency): _____

29. Are you a grandparent raising a grandchild or grandchildren?
☐ Yes; number of grandchildren _____ ☐ No

30. Are you a primary caregiver? ☐ Yes ☐ No

Name of care receiver _____ Relationship _____

31. Do you have a Legal Guardian? ☐ Yes; Name: _____ ☐ No
32. Does someone act as your Power of Attorney?
☐ Yes; Name: _____ Phone _____ ☐ No
33. Is transportation available to you? ☐ Yes If yes: ☐ own car ☐ Bus ☐ Family
☐ other _____ ☐ No
34. Do you have difficulty using transportation due to a health condition or disability?
☐ Yes ☐ No
 If yes, explain briefly:

35. Suggested donations explained to consumer: ☐ Yes ☐ No

36. DETERMINE YOUR NUTRITIONAL HEALTH: The warning signs of poor nutritional health are often overlooked. Use this checklist to find out if you are at nutritional risk. Read the statements below. Circle the number in the yes column for those that apply to you. (Give Attachment B to client.) Yes

I have an illness or condition that made me change the kind and amount of food I eat	2	
<ul style="list-style-type: none"> What illness? How does this affect your diet or ability to eat? Do you have a food allergy or dietary restriction (such as low salt or reduced sugar intake)? 		*7Q1A1*
I eat fewer than two meals per day	3	
<ul style="list-style-type: none"> How many meals/day? How many snacks/day? If under two, what is the problem? 		*7Q2A1*
I eat few fruits, vegetables, or milk products	2	
<ul style="list-style-type: none"> How many fruits/week? Which ones? How many vegetables/week? Which ones? How many milk products/week? Which ones? 		*7Q3A1*
I have three or more drinks of beer, liquor, or wine almost every day	2	
<ul style="list-style-type: none"> Which ones? 		*7Q4A1*
I have tooth or mouth problems that make it hard for me to eat	2	
<ul style="list-style-type: none"> What type of problems? How do you modify your diet to accommodate this? 		*7Q5A1*
I don't always have enough money to buy the food I need	4	
<ul style="list-style-type: none"> How often do you feel you cannot afford groceries? What limits you? 		*7Q6A1*
I eat alone most of the time	1	
<ul style="list-style-type: none"> Do you prefer to eat alone? What about congregate settings? Eat fast food? Interested in cooking? Interested in shopping? 		*7Q7A1*

I take three or more different prescribed (Rx) or over-the-counter (OTC) drugs a day	1	
• Which one: OTC or Rx?		*7Q8A1*
• What are they used for?		
Without wanting to, I have lost or gained ten pounds in the last six months	2	
• Which one: Lost/gained		*7Q9A1*
• Do you know why this happened?		
I am not always physically able to shop, cook, and/or feed myself	2	
• Which one: Shop/feed/cook		*7Q10A1*
• Why?		
• Who provides the service for you?		

Total nutritional score:

TOTAL SCORE

0-2 Good!

3-5..... You are at moderate nutritional risk. See what can be done to improve your eating habits and lifestyle. Your office on aging, senior nutrition program, senior center, or health department can help.

6 or more You are at high nutritional risk. You are encouraged to speak with your doctor. You are eligible to schedule a meeting with the registered dietitian. You can ask either your doctor or the registered dietitian for help to improve your nutritional health. Remember that warning signs suggest risk, but do not represent diagnosis of any kind. Recheck your nutritional health score in six months.

Consumer signature: _____ Assessor initials: _____

37. Eligibility requirements for congregate and home delivered meal program (check all that apply):

☐ 60 years of age

☐ Spouse of eligible meal participant

☐ Meal volunteer (If meal volunteer is younger than 60 years old, proceed to signature of participant)

☐ Person residing in household has disability & lives with participant who receives Title III home delivered meal services.

☐ Person residing in household has disability & lives with participant who receives Title III congregate meal services.

☐ Person residing in household has disability & lives in elder housing where nutrition site is located

In-home services determination:

Home-delivered meals, homemaker, personal care, chore, home repair, adult day care, and Older Americans Act Title III case management.

38. Is the assistance of another person required for the consumer to leave the home (homebound)?

☐ Yes

1Q9A2

☐ No

1Q9A1

If the answer is "No", proceed to signature page.

If answer is "Yes", continue with the following questions.

39. Activities of daily living (ADL) – Read each statement to the individual then check the box, in the appropriate column, indicating the consumer's response.

Would you say that you need assistance with:	No assistance (0)	Some assistance or supervision (2)	Can't do at all (3)	Comments
40. Dressing: Includes getting out clothes, putting them on, fastening them, and putting on shoes.	0 <input type="checkbox"/> *5Q3A1*	2 <input type="checkbox"/> *5Q3A2*	3 <input type="checkbox"/> *5Q3A3*	
41. Bathing: Includes running the water, getting in and out of shower or tub, taking bath or shower, and washing all parts of body, including hair.	0 <input type="checkbox"/> *5Q4A1*	2 <input type="checkbox"/> *5Q4A2*	3 <input type="checkbox"/> *5Q4A3*	
42. Eating: Includes eating, drinking from a cup, and cutting food.	0 <input type="checkbox"/> *5Q3A1*	2 <input type="checkbox"/> *5Q3A2*	3 <input type="checkbox"/> *5Q3A3*	
43. Transferring: Includes getting in and out of a bed or chair.	0 <input type="checkbox"/> *5Q3A1*	2 <input type="checkbox"/> *5Q3A2*	3 <input type="checkbox"/> *5Q3A3*	
44. Toileting: How well can you manage using the toilet? Using toilet independently includes adjusting clothing, getting to and on/off the toilet, and cleaning self if accidents occur. If person manages alone, count as no assistance. If reminders are needed to use the toilet count as some assistance or supervision	0 <input type="checkbox"/> *5Q3A1*	2 <input type="checkbox"/> *5Q3A2*	3 <input type="checkbox"/> *5Q3A3*	
45. Walking. Includes the ability to move around inside the home, walking, and stairs.	0 <input type="checkbox"/> *5Q3A1*	2 <input type="checkbox"/> *5Q3A2*	3 <input type="checkbox"/> *5Q3A3*	
46. ADLs:		Total score	Total score	Combined total score
47. ADLs impairment count: Count one impairment each time the assessor checked column 2 or 3.				

48. Instrumental activities of daily living (IADL) - Read each statement to the individual then check the box, in the appropriate column, indicating the consumer's response.

Would you say that you need assistance with:	No assistance (0)	Some assistance or supervision (2)	Can't do at all (3)	Comments
49. Transportation ability. Includes using local transportation or driving to places beyond walking distances.	0 <input type="checkbox"/> *5Q3A1*	2 <input type="checkbox"/> *5Q3A2*	3 <input type="checkbox"/> *5Q3A3*	
50. Preparing meals. Includes preparing meals for yourself, including sandwiches, cooked meals, and TV dinners.	0 <input type="checkbox"/> *5Q3A1*	2 <input type="checkbox"/> *5Q3A2*	3 <input type="checkbox"/> *5Q3A3*	
51. Light housekeeping. Includes dusting, vacuuming, sweeping, but does not include laundry.	0 <input type="checkbox"/> *5Q3A1*	2 <input type="checkbox"/> *5Q3A2*	3 <input type="checkbox"/> *5Q3A3*	
52. Shopping. Includes shopping for food and other things you need.	0 <input type="checkbox"/> *5Q3A1*	2 <input type="checkbox"/> *5Q3A2*	3 <input type="checkbox"/> *5Q3A3*	
53. Medication management. Includes taking your own medications, and keeping track of when and how much of each to take.	0 <input type="checkbox"/> *5Q3A1*	2 <input type="checkbox"/> *5Q3A2*	3 <input type="checkbox"/> *5Q3A3*	
54. Managing money. Includes handling your own money, keeping track of bills, and handling cash.	0 <input type="checkbox"/> *5Q3A1*	2 <input type="checkbox"/> *5Q3A2*	3 <input type="checkbox"/> *5Q3A3*	
55. Using telephone. Includes answering the telephone and making a telephone call.	0 <input type="checkbox"/> *5Q3A1*	2 <input type="checkbox"/> *5Q3A2*	3 <input type="checkbox"/> *5Q3A3*	
56. Chores. Includes heavy housework, yard work, sidewalk maintenance, and doing your own laundry.	0 <input type="checkbox"/> *5Q3A1*	2 <input type="checkbox"/> *5Q3A2*	3 <input type="checkbox"/> *5Q3A3*	
57. IADLs:		Total score	Total score	Combined total score
58. IADLs impairment count: Count one impairment each time the assessor checked column 2 or 3.				

Scoring matrix: Activities of daily living and instrumental activities of daily living

59. ADLs		ADLs total score
60. IADLs		IADLs total score
61. ADLs and IADLs:		Combined Score

Additional questions

62. Does the consumer live alone?		Yes- 1 point
63. Does the consumer have a chronic (ongoing) condition?		Yes - 1 point
64. Has the consumer been released from the hospital or long term care facility in last ten days?		Yes - 3 point
65. High nutritional health score of 6+ "DETERMINE YOUR NUTRITIONAL HEALTH"		Yes- 1 point
66. Consumer support. Does the consumer receive any assistance/services, formal or informal, in ADL or IADL areas? Yes ____ No ____		Support adequate - 0 points
		Support available, but inadequate - 3 points
		Support not available - 5 points
<i>Additional questions</i>		
		Total points
67. Total Score		Include combined score from ADLs and IADLs and total points from additional questions.

68. Risk category:

Check one. Low (0 - 9) ☐ Moderate (10 - 17) ☐ High (18+) ☐

69. ADL total impairment count ____ 70. IADL total impairment count ____

Signature Page

71. Consent release:

The Oklahoma Department of Human Services makes no distinction on the grounds of race, sex, religion, or national origin in the provision of services in accordance with the Civil Rights Act of 1964 and its amendments.

I understand that my signature below is also applicable to all addendums necessary to complete this assessment. I understand that my information will only be released to other service agencies for the purpose of assisting me in obtaining their services and benefits to which I may be eligible.

This grant of authority shall last to the next review.

Signature of individual or legal representative

Date

Signature of person providing information

Relationship to consumer

Date

Complete the following when consumer cannot read or write, is blind or for any reason signs by mark:

I have heard all information contained in this assessment read to the consumer. I have witnessed the signature or mark above.

Signature of witness

Date

Assessor name (print)

Assessor signature and title

Phone

Date

72. Attachment A completed:

☐ Yes

☐ No

73. Attachment B given to consumer:

☐ Yes

☐ No

74. Have you participated in the Senior Farmers' Market Nutrition Program?

☐ Yes

☐ No

75. Assessor Comments:

Note: Title III B Home Repair provision: The consumer must be the owner of the home to receive Title III home repair services. Home owner must approve all Title III home repairs prior to repairs being done. Have Home owner release form signed if required.

Attachment A

Name _____

Client ID _____

BRIEF description of individual's:

Current situation and support system

Special accommodations identified as needed

ACTIONS needed. List Title III services identified or requested

Transportation ☐

Caregiver Services ☐

Home delivered Meals ☐

Congregate Meals ☐

Outreach ☐

Other ☐ _____

Referrals to additional community resources identified as needed:

Was consumer provided the ADvantage phone number? ☐ Yes ☐ No
(The ADvantage phone number is 1-800-435-4711.)

Note: Consumers receiving an Older Americans Act (OAA) Assessment to apply for home-delivered meals (HDM) shall be advised about the ADvantage program and encouraged to contact ADvantage, if interested. The ADvantage phone number: 1-800-435-4711 will be provided to the consumer during the OAA intake. In the interim, while an ADvantage application is pending, an eligible consumer may receive Title III funded HDM. When a consumer is approved for the ADvantage program, Title III funding for HDM will be discontinued and ADvantage funding will begin. An ADvantage meal is not eligible for reimbursement by the Nutrition Services Incentive Program (NSIP).

Name _____

Client ID _____

Referral Form and Release of Information

I authorize _____ to release information contained herein to the following:

Name of Agency

Provider Agency or Individual

Services

Client Initials / Date

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

☐ No referrals outside of agency given at this time

OPTIONS COUNSELING- Complete these 4 questions after the referrals have been agreed to by the individual. Place an appropriate check in either the () Yes or () No box for each question as needed.

Do you understand the information I have given you? ☐ Yes ☐ No
 If "no," refer to the Information Specialist at the Area Agency on Aging for options counseling; if "yes," ask next question

Do you need additional information? ☐ Yes ☐ No
 If "yes," refer to the Information Specialist at the Area Agency on Aging for options counseling; if "no," ask next question

Do you know what your next steps are? ☐ Yes ☐ No
 If "no," refer to the Information Specialist at the Area Agency on Aging for options counseling; if "yes," do not refer to options counseling

Would you like to discuss issues regarding options counseling? ☐ Yes ☐ No
 If "yes," refer to the Information Specialist at the Area Agency on Aging for options counseling

Assessor name (print)

Assessor signature and title

Phone

Date

RESPONSE

Follow-up date _____ contacted by _____ (initials) ☐ Phone ☐ In-Person

Addendum to Attachment A

AGING SERVICES INC.
NUTRITIONAL COUNSELING REFERRAL

Meal Site: _____ Congregate: _____ Homebound: _____

Date of Assessment: _____

Date of Referral: _____

Name of Participant: _____

Address: _____
Street City Zip

Telephone: _____

I have been informed that I have scored _____ on the nutrition assessment.

I would like to speak with the dietitian regarding my nutritional assessment.

Specific items to discuss:

YES: _____
Participant Signature Date

Signature of Dietitian to confirm consultation was conducted and date of consultation

I would NOT like to speak with the dietitian regarding my nutritional assessment.

NO: _____
Participant Signature Date

Assessor Signature Date of Refusal

Nutrition Counseling Procedures

All Congregate and Home Delivered Meals Participants will be assessed by Site Managers, other authorized staff members, or Outreach workers. The Nutrition Health segment of the assessment must always be completed.

When participants have a score of 6 (six) or more as a total on the Nutrition Health part of the assessment, an opportunity to meet with a registered dietitian should be offered to them for counseling. The Aging Services, Inc. *Nutritional Counseling Referral* form shall be used for this purpose.

Besides giving an opportunity for the participants to say they wish to have counseling, a section of this referral form allows the participants a say on what topics they would like covered in the counseling session. Whether or not the participants wish to have nutrition counseling, they will need to sign the form. The form will also be used to document instances when the participant chooses to not have the counseling for whatever reason.

Utilizing the Nutrition Counseling form is very important. It not only makes the participants aware that they have a problem, but offers solutions. So please make sure all the parts of the form that are applicable are filled out.

Following the completion of the Nutrition Counseling Referral form, make a copy for your records and then attach the original to the back of the assessment. If the client wishes counseling, please put a post-it note on the assessment alerting the Social Services Supervisor that there is a referral that needs to be acted on.

Also, if you have contacted a dietitian about the referral please write this on the referral and highlight it. The Social Services Supervisor will then place a copy of the referral in dietitian's office post box so that she is aware of it and, if necessary, will act on it.

After the dietitians have conducted the nutrition counseling, they will sign the form and return it to the Social Services Supervisor

Attachment B: Consumer copy

Name: _____ (Consumer copy)

DETERMINE YOUR NUTRITIONAL HEALTH: The warning signs of poor nutritional health are often overlooked. Use this checklist to find out if you are at nutritional risk. Read the statements below. Circle the number under the yes column for those that apply to you.

	Yes	
I have an illness or condition that made me change the kind and amount of food I eat	2	
I eat fewer than two meals per day	3	
I eat few fruits, vegetables, or milk products	2	
I have three or more drinks of beer, liquor, or wine almost every day	2	
I have tooth or mouth problems that make it hard for me to eat	2	
I don't always have enough money to buy the food I need	4	
I eat alone most of the time	1	*
I take three or more different prescribed (RX) or over-the-counter (OTC) drugs a day	1	
Without wanting to, I have lost or gained ten pounds in the last six months	2	
I am not always physically able to shop, cook, and/or feed myself	2	*

Total Score _____

Total nutritional score

0-2 Good!

3-5 You are at moderate nutritional risk. See what can be done to improve your eating habits and lifestyle. Your office on aging, senior nutrition program, senior citizens center, or health department can help.

6 or more You are at high nutritional risk. You are encouraged to speak with your doctor. You are eligible to schedule a meeting with the registered dietitian. You can ask either your doctor or the Registered Dietitian for help to improve your nutritional health. Recheck your nutritional score in six months.

Consumer signature _____ Assessor initials _____

Consumer Nutrition checklist - Remember that warning signs suggest risk, but do not represent diagnosis of any kind. Based on the warning signs described below:

Disease - Any disease, illness, or chronic condition that causes you to change the way you eat, or makes it hard for you to eat, puts your nutritional health at risk. Four out of five adults have chronic diseases that are affected by diet. Confusion or memory loss that keeps getting worse is estimated to affect one out of five or more of older adults. This can make it hard to remember what, when, or if you've eaten. Feeling sad or depressed, which happens to about one in eight older adults, can cause big changes in appetite, digestion, energy level, weight, and well-being.

Eating poorly - Eating too little and eating too much both lead to poor health. Eating the same foods day after day or not eating fruit, vegetables, and milk products daily will also cause poor nutritional health. One in five adults skips meals daily. Only 13% of adults eat the minimum amount of fruit and vegetables needed. One in four older adults drinks too much alcohol. Many health problems become worse if you drink more than one or two alcoholic beverages per day.

Tooth loss or mouth pain - A healthy mouth, teeth, and gums are needed to eat. Missing, loose, or rotten teeth, or dentures that don't fit well or cause mouth sores make it hard to eat.

Economic hardship - As many as 40% of older Americans have incomes of less than \$6,000 per year. Having less—or choosing to spend less—than \$25 to \$30 per week for food makes it very hard to get the foods you need to stay healthy.

Reduced social contact - One-third of all older people live alone. Being with people daily has a positive effect on morale, well-being, and eating.

Multiple medicines - Many older Americans must take medicines for health problems. Almost half of older Americans take multiple medicines daily. Growing old may change the way you respond to drugs. The more medicines you take, the greater the chance for side effects, such as increased or decreased appetite, change in taste, constipation, weakness, drowsiness, diarrhea, and nausea. Vitamins or minerals when taken in large doses act like drugs and can cause harm. Alert your doctor to everything you take.

Involuntary weight loss/gain - Losing or gaining weight when you are not trying to do so is an important warning sign that must not be ignored. Being overweight or underweight also increases your chance of poor health.

Needs assistance in self care - Most older people are able to eat, but one of every five has trouble walking, shopping, and buying and cooking food, as they get older.

Elder years above age 80 - Most older people lead full and productive lives. But as age increases, risk of frailty and health problems increases. Checking your nutritional health regularly makes good sense.

0-2..... Good!

3-5..... You are at moderate nutritional risk. See what can be done to improve your eating habits and lifestyle. Your office on aging, senior nutrition program, senior citizens center, or health department can help.

6 or more..... You are at high nutritional risk. You are encouraged to speak with your doctor. You are eligible to schedule a meeting with the registered dietitian. You can ask either your doctor or the registered dietitian for help to improve your nutritional health. Remember that warning signs suggest risk, but do not represent diagnosis of any kind. Recheck your nutrition score in six months. Total nutritional score: _____

Portions of these materials developed and distributed by the Nutrition Screening Initiative, a project of American Academy of Family Physicians, the

American Dietetic Association and National Council on Aging, Inc. located at 2626 Pennsylvania Avenue, NW; Suite 301 Washington, DC 20037. The Nutrition Screening Initiative is funded in part by a grant from Ross Laboratories, a division of Abbot Laboratories.

AGING SERVICES, INC.
Special Assistance Request Form

To: _____ From: _____

Type of Service Requested: _____

Date of Request: _____ Age: _____

Name: _____ Phone: _____

Address: _____
Street Address City Zip

Estimated Cost: _____

Reason For Referral: _____

Assessment Info: _____

List all previous financial help through any source (ASI, OEC, etc.):

DATE: _____	AMOUNT: _____	SOURCE: _____
DATE: _____	AMOUNT: _____	SOURCE: _____
DATE: _____	AMOUNT: _____	SOURCE: _____
DATE: _____	AMOUNT: _____	SOURCE: _____
DATE: _____	AMOUNT: _____	SOURCE: _____

APPROVED: _____ DATE: _____
Kathleen Wilson, ASI Director, or Jay Vache, ASI CM Supervisor

COMMENTS: _____

AGING SERVICES OF CLEVELAND COUNTY
SPECIAL ASSISTANCE FUND ASSISTANCE

Name _____ Request _____

INCOME

_____ Social Security
_____ Retirement Pension
_____ VA Pension
_____ Interest/Investment
_____ SSI
_____ Public Assistance
_____ Assistance from other
_____ Earnings from employment
_____ Other
Total _____

Veteran _____ Spouse _____ Neither _____

Number living on income _____

EXPENSES

Medical _____
Drugs _____
Dental _____
Utilities: _____
 Gas/propane _____
 Electric _____
 Water _____
 Telephone _____
 Cable/TV _____
Rent/House Pmt _____
Groceries/meals _____
Paper goods/supplies _____
Personal products _____
Insurance Premiums: _____
 Life _____
 House _____
 Car _____
 Supplemental _____
 Burial Policy _____
Car Payment _____
Gasoline _____
Credit Card Pmt _____
Loan Pmt _____
Contribution _____
Financial support _____
 To others(alimony, loan, etc) _____

TOTAL EXPENSES _____

BALANCE
INCOME/EXPENSES _____

Do you have difficulty paying your bills? _____ Yes _____ No

If yes, how often? _____ If yes, what do you do without? _____
