



DACS12AAA002

DHSS Organization Information Review Page

Check here if no Attorney

Name of Attorney for Agency Andrea I. Bazer, Esq.
Attorney Telephone 732-683-8640
Attorney Email Andrea.Bazer@co.monmouth.nj.us
Address 1 Hall of Records, Room 236
Address 2 One East Main Street
City Freehold **State** New Jersey **Zip** 07728

Name of Principal Agency Contact Thomas F. Pivinski
Title of Principal Agency Contact Executive Director, Aging
Principal Agency Telephone 732-431-7450
Principal Agency E-mail Thomas.Pivinski@co.monmouth.nj.us
Address 1 21 Main & Court Center
Address 2 PO Box 1255
City Freehold **State** New Jersey **Zip** 07728-1255

Name of Principal Program Contact Thomas F. Pivinski
Title of Principal Program Contact Executive Director
Principal Program Telephone 732-431-7450
Principal Program E-mail Thomas.Pivinski@co.monmouth.nj.us
Address 1 21 Main & Court Center
Address 2 PO Box 1255
City Freehold **State** New Jersey **Zip** 07728-1255

Name of Principal Fiscal Contact Patricia Johnson
Title of Principal Fiscal Contact Senior Accountant
Principal Fiscal Telephone 732-431-7450
Principal Fiscal E-mail pjohnson@co.monmouth.nj.us
Address 1 21 Main & Court Center
Address 2 PO Box 1255
City Freehold **State** New Jersey **Zip** 07728-1255

Agency Fiscal Year End (mm/dd) 12/31

Does the Agency Meet the following Licensure Requirements?

Facility N/A
Services N/A
Personnel N/A

Is a copy of the license attached?

Agency Accounting System Accrual Basis

Affirmative Action Plan Yes

Selected Type of Agency: County

By checking this box, you certify that the information listed above is accurate to the best of your knowledge.

Monmouth County

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ADDITIONAL PROJECT TYPE SELECTION

- Supplemental Home Delivered Meals (SHDM) - 19
- Disaster Relief Funding - 44
- Chronic Disease Self Management (CDSM)-AoA - 42
- Non APC Funds - 25
- Title VII - 33
- Other 1
- Other 2
- Other 3
- Other 4
- Other 5
- Other 6
- Other 7



Application Summary

Will any member of the Board of Directors/Trustees receive any direct or indirect personal or monetary gain from the funding of this grant? Yes No

Name of Member(s) (separate with commas):

Does any member of the Board of Directors/Trustees serve on any board, council commission, committee or Task Force which has regulatory or advising influence on the funding program? Yes No

Name of Board, Council, etc.

Select Preferred Payment Plan Advance Payment

Name of Grantee: Monmouth County

Organization Address

Monmouth County

Hall of Records One East Main Street PO Box 1256

Freehold, NJ 07728-1256

Phone: (732) 431-7391

Fax: (732) 409-4824

Email Address:

Federal Tax Identification Number: 216000881

Vendor Number: 216000881-00

Vendor Unit: **Monmouth County**

Vendor Unit Address One East Main Street, PO Box 1256

Certificate of Need Project Pending Not Required

Is political subdivision covered by NJ Civil Service Merit System? Yes No

If grant is awarded, will funds be used to replace other funds which would be available in absence of award? Yes No

Name of NJDHSS Program Manager Regarding Application: Tina Zsenak

Type of Request

- New
- Renewal of Grant #: 11-1388-AAA-C-2
- Modification to Grant #:

Budget Period (Month/Day/Year) - This is the period of time for which a grant is to be funded.

From: 1/1/2012 Through: 12/31/2012

Project Period (Month/Day/Year) - This the period of time expected to complete the project.

From: 1/1/2012 Through: 12/31/2012



Project Location

Statewide Project

County to Filter by:

Municipalities:

Monmouth County

Aberdeen Township
Allenhurst Borough
Allentown Borough
Asbury Park City
Atlantic Highlands Borough
Avon-By-The-Sea Borough
Belmar Borough
Bradley Beach Borough
Brielle Borough
Colts Neck Township
Deal Borough
Eatontown Borough
Englishtown Borough
Fair Haven Borough
Farmingdale Borough
Freehold Borough
Freehold Township
Hazlet Township
Highlands Borough

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lsbServiceAreaMunicipalities continued

Holmdel Township
Howell Township
Interlaken Borough
Keansburg Borough
Keyport Borough
Lake Como Borough
Little Silver Borough
Loch Arbour Village
Long Branch City
Manalapan Township
Manasquan Borough
Marlboro Township
Matawan Borough
Middletown Township
Millstone Township
Monmouth Beach Borough
Neptune City
Neptune Township
Ocean Township
Ocean Township
Oceanport Borough
Red Bank Borough
Roosevelt Borough
Rumson Borough
Sea Bright Borough
Sea Girt Borough
Shrewsbury Borough
Shrewsbury Township
Spring Lake Borough
Spring Lake Heights Borough
Tinton Falls Borough
Union Beach Borough
Upper Freehold Township

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lsbServiceAreaMunicipalities continued

Wall Township

West Long Branch Borough



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AAA ADVISORY COUNCIL

Name	Affiliation	Gender	Ethnicity	Race	Age	Select all That Apply			
	Veteran, Volunteer, Elected Official, Person with Disability, Other Agency, etc.					General Public	Family Caregiver	Service Provider	Represents Business Community
Carol Abaya	Volunteer; Sandwich Generation	F	Not Hispanic or Latino	White (Alone)-Non-Hispanic	60 and over				
Marie Bayerle	Seniors of Raintree; St. Roberts Seniors	F	Not Hispanic or Latino	White (Alone)-Non-Hispanic	60 and over				
Isaiah Cooper	Volunteer Keyport Food Pantry; Veteran	M	Not Hispanic or Latino	Black or African American (Alone)	60 and over				
Phoebe Dichner	Volunteer; Marlboro Jewish Center	F	Not Hispanic or Latino	White (Alone)-Non-Hispanic	60 and over				
Edward Eastman	Attorney; Councilman	M	Not Hispanic or Latino	White (Alone)-Non-Hispanic	Under 60				
Joyce Grant	Volunteer; Chair CFOP; Cochair OPC;	F	Not Hispanic or Latino	White (Alone)-Non-Hispanic	60 and over				
Ron Griffiths	Volunteer; Rep-Freehold Sr	M	Not Hispanic or Latino	White (Alone)-Non-Hispanic	60 and over				
James Henry	Attorney, Community Emergency Response	M	Not Hispanic or Latino	White (Alone)-Non-Hispanic	60 and over				
Jean Hering	Raintre Senior Group	F	Not Hispanic or Latino	White (Alone)-Non-Hispanic	60 and over				
Rose Marie Kakol	Middletown Senior Center	F	Not Hispanic or Latino	White (Alone)-Non-Hispanic	60 and over				



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AAA ADVISORY COUNCIL

Name	Affiliation	Gender	Ethnicity	Race	Age	Select all That Apply			
	Veteran, Volunteer, Elected Official, Person with Disability, Other Agency, etc.					General Public	Family Caregiver	Service Provider	Represents Business Community
Sarah Larsen	Keyport Senior Center	F	Not Hispanic or Latino	White (Alone)-Non-Hispanic	60 and over				
Dorsey Latza	Member of NJEA	F	Not Hispanic or Latino	White (Alone)-Non-Hispanic	60 and over				
Helen Montano	Volunteer; NARFE	F	Not Hispanic or Latino	White (Alone)-Non-Hispanic	60 and over				
Susan O'Brien	Fair Haven Planning Board	F	Not Hispanic or Latino	White (Alone)-Non-Hispanic	60 and over				
Louis Parisi	VFW	M	Not Hispanic or Latino	White (Alone)-Non-Hispanic	60 and over				
Amy Quinn	Volunteer; Attorney; Community Health Law	F	Not Hispanic or Latino	White (Alone)-Non-Hispanic	Under 60				
Sharon Stark	Volunteer; Mon. Univ. School of Nursing	F	Not Hispanic or Latino	White (Alone)-Non-Hispanic	60 and over				
Jud Thorne	Keyport Senior Center	M	Not Hispanic or Latino	White (Alone)-Non-Hispanic	60 and over				
Bessie Wade	Volunteer; AARP; Brookdale Scholarship	F	Not Hispanic or Latino	Black or African American (Alone)	60 and over				
Milton Ziment	MC Cancer Coalition; JCC Home Meals	M	Not Hispanic or Latino	White (Alone)-Non-Hispanic	60 and over				



AAA ADVISORY COUNCIL

Name	Affiliation	Gender	Ethnicity	Race	Age	Select all That Apply			
	Veteran, Volunteer, Elected Official, Person with Disability, Other Agency, etc.					General Public	Family Caregiver	Service Provider	Represents Business Community
Vincent D'Elia	Family & Children's Service	M	Not Hispanic or Latino	White (Alone)-Non-Hispanic	60 and over				
Kathleen Lodato	Monmouth County Transportation (SCAT)	F	Not Hispanic or Latino	White (Alone)-Non-Hispanic	Under 60				
Joseph Marmora	Interfaith Neighbors	M	Not Hispanic or Latino	White (Alone)-Non-Hispanic	60 and over				
Susan Moleon	Monmouth County Disabilities	F	Not Hispanic or Latino	White (Alone)-Non-Hispanic	Under 60				
Patrice Nugent	Middletown Senior Center	F	Not Hispanic or Latino	White (Alone)-Non-Hispanic	Under 60				
Thomas Pivinski	Monmouth County Office on Aging	M	Not Hispanic or Latino	White (Alone)-Non-Hispanic	60 and over				
Sandi Silber	Interfaith Neighbors	F	Not Hispanic or Latino	White (Alone)-Non-Hispanic	60 and over				
John Wanat	SCAN	M	Not Hispanic or Latino	White (Alone)-Non-Hispanic	60 and over				
Carol Zur	Howell Senior Center	F	Not Hispanic or Latino	White (Alone)-Non-Hispanic	Under 60				



Advisory Council - Advocacy

Enter Description of AAA Activities Below:

The AAA has broadened its communication with elected officials via meetings, letter writing, telephone calls and emails, in particular with Congress persons Weinberg and Pallone.

The AAA continues to research grassroots (Love, Inc.) as well as health care agencies (Monmouth County Cancer Coalition) to promote a stronger sense of coalition to develop a proactive and cooperative network.

The AAA has deepened its involvement with the Office of Disabilities by staying informed of policy and social trends that affect all people with disabilities. It has also attended disability oriented trainings to further the impact the AAA can have on this community.

A special appointed member of the Council is also a County Veteran Service Officer (CVSO). She informs the Council of all activities involving veterans and particularly of benefits and pensions to which they are entitled.



Advisory Council - Advocacy Continued

Enter Description of Advisory Council Activities Below:

The Advocacy and Legislation Committee includes eight persons, two of whom bring significant legal and federal government experience which enables the committee to address current and future needs of seniors and disabled persons. The Chair of this committee is also the Chair of the Advisory Council.

Every Advisory Council member has assumed the responsibility of visiting contracted provider agencies to become more aware of the accomplishments, challenges and needs those agencies experience in order to bring that information to elected county officials for their awareness and support.



Advisory Council - Advocacy Continued

Enter Description of the joint AAA/Advisory Council Activities Below:

The AAA/AC has explored new legislations and has also pursued previous legislations available to seniors and persons with disabilities. In response to the proposed State budget changes, their prioritization has been health (P.A.A.D.), housing, transportation, and taxes. They have been involved with the Regional AAA's and statewide AAA's during the recent budgetary concerns as they would affect seniors and persons with disabilities.



EXECUTIVE SUMMARY OF THE AAA

Include Mission Statement of the AAA:

The mission of the Monmouth County Division on Aging, Disabilities and Veterans Services is to promote, secure, and maintain the emotional, physical and spiritual independence of the seniors and disabled members of Monmouth County. This is accomplished

- through the establishment of ongoing achievable goals that will meet the needs of older adults and their caregivers;
- by providing information and referral services and short-term case management for people with disabilities;
- by promoting and advancing the cause of independent living for seniors and people with disabilities;
- by creating partnerships between public and private organizations; and,
- by ensuring the sacred respect due to all living and deceased veterans and their survivors.



EXECUTIVE SUMMARY OF THE AAA - Continued

Include Executive Summary of the AAA:

The guiding principle of the Monmouth County Office on Aging is the expansion of its presence, service and connection with the seniors and persons with disabilities within the County.

The Office on Aging has initiated the Silent Senior Project which utilizes the help of all County residents in locating seniors of Monmouth County who live alone, have little or no family, belong to no senior groups, and who invariably have little or no contact with outsiders. Members of the three Office on Aging Councils (Advisory, Coordinators, and Municipal) are working independently and collaboratively to ascertain who these residents are and have become spokespersons for the Office on Aging to those residents who are in most need of their assistance.

The Freeholder Liaison to the Office on Aging, Amy Mallet, has accompanied the Executive Director to the Senior Centers in the County promoting the Silent Senior Program. The County Office of Public Information has issued a Press Release regarding the Silent Senior Program and the local newspaper, the Asbury Park Press, has done an in depth interview with the Executive Director and the Freeholder Liaison for ongoing coverage of the Silent Senior Project.

The Silent Senior Project is also being accomplished through detailed and careful accumulation of information provided by houses of worship and other helping organizations that discover the whereabouts of those most underserved residents who are elderly and/or disabled as well as their caregivers.

The Office on Aging's I&A personnel and the new Outreach Coordinator receive and handle each Silent Senior referral within 24-36 hours. The Outreach Coordinator has made extensive contacts with hospitals, doctors offices and individuals.

The Advisory Council's regular membership is currently 24 with 10 Special Members appointed by the Board of Freeholders. Each member of the Advisory Council has been actively participating in visitations to contracted provider sites in order to

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varExecutive continued

broaden their understanding of the nature and services they provide and to become more fluent in their ability to communicate that to seniors and persons with disabilities.

An additional responsibility taken on by Advisory Council members is becoming liaisons to grantees and other partners of the Office on Aging. These liaisons maintain a regular contact with these agencies and report to the general body on a monthly basis.

The Municipal Coordinating Council has grown in the past year due to soliciting membership via the Mayors and/or City managers of each municipality. The Office on Aging has partnered with its Freeholder liaison to make direct contact with mayors encouraging them to appoint representatives from their municipalities. The Executive Director has also written letters requesting municipal representatives to mayors, city managers and to City Clerks who often have the ear of governmental persons.

The Office on Aging's commitment to using electronic outreach continues to offer opportunities to reach the senior and disabled populations of Monmouth County. Formal and informal caregivers have become the primary focus of electronic communication. Emails and Facebook have created up-to-date and constant social interactive tools with which to address the concerns of caregivers throughout the County. At the present time electronic outreach reaches County health facilities, senior centers, offices of emergency management in every municipality, senior residences, Human Services Advisory Council members, Senior Medicare Patrol Advisory Board members, houses of worship, non-funded geriatric facilities, hospital discharge personnel, and many more.

Access to services for seniors, persons with disabilities and caregivers is the Office on Aging's most important task and is achieved by generating and disseminating information through a coordinated system of well-trained workers, screening and referral by our Information and Assistance Specialists.

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varExecutive continued

Care Management stresses the need to enable as many seniors as possible to remain in the community. In 2011, our Care Management department continued to aid increasing numbers of seniors at risk of institutionalization to remain in their own homes.

The Office on Disabilities serves the entire persons with disabilities population of Monmouth County with 70% of calls received from people under the age of 60, physically disabled, and living in the community. Based on present statistics, it is estimated that by the end of 2011 the OOD will exceed 1,000 calls.

A new County Veteran Service Office was established in November 2010. Two certified CVSO's represent veterans and promote their eligibility for benefits from the V.A. This service addresses the rise in numbers of our aging veterans as well as those younger ones returning home with significant emotional and physical disabilities. It also increases the County's non-taxable income in the millions of dollars. The CVSO has received over 1500 contacts from veterans in 10 months.

In collaboration with the Monmouth County Sheriff's Office and the TRIAD Association, the OOA has revived the "Gold Star Program" and Triad University. The "Project Lifesaver" program utilizes tracking bracelets to locate wandering seniors with Alzheimer's and other dementias.

The OOA in collaboration with the County OEM has disseminated over 4000 Register Ready applications to persons with special needs who would need evacuation in times of disaster. This outreach proved extremely helpful for the evacuation of residents during Hurricane Irene in August 2011.

As a Board Member of the Senior Medicare Patrol (SMP) of New Jersey, the Office on Aging's Director will continue to expand the office's ability to protect seniors from fraud, waste and abuse in Medicare and Medicaid related concerns.

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varExecutive continued

The Office on Aging replaced its health discount card with Coast2CoastRx which is available to all residents of Monmouth County. It provides discounts for prescriptions, vision, dental, auditory, diabetic, dental, pet meds, and lab/imagery tests. While not an insurance program, it provides savings for the uninsured and under insured particularly. It also provides bi-lingual literature and 24/7 telephone assistance for clients and pharmacies with a web site availability of translation of 48 languages.

The Senior Citizen Month of May was celebrated by the County Freeholders with the awarding of a Proclamation honoring the Office on Aging. We are proud each year to celebrate senior citizens and their contributions to society through our county Senior Citizens Juried Art Show.



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PUBLIC HEARING

Date/ Time	Location	# Attendees						Survey of Needs			Outreach to Target Population				Upload a Copy of the public newspaper advertisement
		Total #	Public	AAA Staff	Service Providers	Special Guests, i.e. Freeholders	Advisory Council	Attendees were Provided with the Following (Check all that apply)			Announcement method(s)	Public Hearing was conducted in these languages	Bilingual Services were available	Transportation was Available upon request	
								Agenda	Needs Assessment	Survey					
6/15/2011 2:00:00 PM	Monmouth County Agricultural Building Conference Room, 4000 Kozloski Road, Freehold, NJ 07728	92	48	5	27	1	11	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Asbury Park Press; Newark Star Ledger; Notice in MC Hall of Records; OOA Sr Newsline; Sr. Centers	English	No	Yes	231631-PublicHearingPre ssNotices.pdf
		0						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
		0						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
		0						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
		0						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					



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Target Population - Targeting Goals

TARGET POPULATION		A	B	C	D	E
		If Available, enter census data for 2010		Estimate, based on average historical level of service		
		Actual # County Population 60+	Actual % County Population 60+	Estimated # County Population 60+ AAA will serve in the current Area Plan Contract Grant Year	Estimated % County Population 60+ AAA will serve in the current Area Plan Contract Grant Year	Estimated % County Population 60+ AAA will serve in the Next Area Plan Contract Grant Year
N A P I S	ETHNICITY	123809		41305		
	Hispanic or Latino	4172	3	1253	30	31
	Non-Hispanic or Latino	119637	97	40052	33	34
	RACE OR ETHNICITY	123809		41305		
	White (Alone) Non-Hispanic	106765	86	34722	33	30
	White (Alone) - Hispanic	3154	3	1172	37	1
	American Indian or Alaskan Native (Alone)	154	0	46	30	0
	Asian (Alone)	4445	4	690	16	6
	Black (Alone) or African-American (Alone)	7734	6	4444	57	4
	Native Hawaiian or Other Pacific Islander	17	0	4	24	0
	Persons: 2 or more races	810	1	45	6	0
	Other Ethnic Group(s):	730	1	182	25	0
	TOTAL COUNTY POPULATION 60+	123809		41305		

FUNCTIONAL ABILITY				66067		
STATE	Frail			24762	20	22
	Vulnerable			41305	33	35



NEEDS AND OBJECTIVES OF PROJECTS

Assessment of Need(s) - List the need(s) which illustrate the reason for the project.

1. Access to services:

- 1: Transportation
- 2: Assisted transportation
- 3: Information and assistance
- 4: Outreach
- 5: Silent Senior Program
- 6: Providing bi-lingual presence

2. Assisting the frail elderly to remain in their own homes:

- 1: Care management
- 2: Certified home health aide
- 3: Home delivered meals
- 4: Residential maintenance
- 5: Housekeeping
- 6: Money management (bill paying service)

3. Caregiver support services:

- 1: Respite care/adult day care
- 2 Care management and counseling
- 3: Information and Assistance
- 4: Wander Safety system
- 5: Caregiver Support Group
- 6: Grandparent Respite

4. Promotion of senior health and fitness:

- 1: Physical health screenings
- 2. Evidence-based Chronic Disease Self-Management programs
- 3: Health education/medication management
- 4. Physical Fitness activities
- 5: Nutrition education and counseling

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Comments1 continued

5. Senior safety:
 - 1: TRIAD
 - 2: Education
 - 2: Emergency preparedness
 - 3: Wander Safety system



NEEDS AND OBJECTIVES OF PROJECTS CONTINUED

Objective(s) of Project - List objectives that are specific, measurable, realistic, and attainable to meet the goals of this application.

In order to meet all objectives the Monmouth County Office on Aging will provide, directly or through sub-contracts with various local non-profits, services, units and un-duplicated client counts as specifically defined in the "Service Code and Taxonomy Service Name" sections of the attached IPSs.



PROGRESS SUMMARY - ACCOMPLISHMENTS AND REVISED PRIORITIES

This section is the AAA's update on the progress made from the current Area Plan Contract grant year.

Each of the OAA/SUA are addressed as instructed.

Priority Type:

TITLE III E CAREGIVERS

Priority Description:

The Office on Aging's Caregiver Specialist has actively focused on the wellbeing of caregivers in Monmouth County. Her efforts have resulted in three ongoing Caregiver Support Groups, an active and growing Outreach network, Caregiver Vendor Fairs, short-term case management, and close collaboration with the newly hired Outreach Coordinator.

The Caregiver Respite Day of November, 2010 was hugely successful with 125 attendees and is planned again for 2011. Caregivers of seniors 60 and older will be invited, encouraged and supported with practical, personal and educational resources to assist them in their care giving responsibilities. Inspirational speakers and small group leaders will facilitate a variety of smaller sessions covering several different topic. Vendors assisting caregivers will be in attendance. Breakfast and lunch will be provided to all attendees. Participants enjoyed a day of laughter ,education and resource acquisition to help them provide care to the senior in their life.

The National Family Caregiver Support Program has proven to be a valuable resource to caregivers in Monmouth County. Due to increased outreach efforts, the numbers of caregivers receiving assistance has grown significantly since the program's inception in 2009. Services offered cover the spectrum from information and referral, education, benefits screenings, home visits, brief counseling and support groups to case management.



PROGRESS SUMMARY - ACCOMPLISHMENTS AND REVISED PRIORITIES

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Priority Type:

TRANSPORTATION

Priority Description:

A new Assisted Transportation Program provided by one of Monmouth County's grantees was initiated and has begun to grow revealing an increased need for such a service among the frailest 60+ seniors and persons with disabilities. There have been considerable requests from the under 60 population especially among the disabled, but they have not been able to be served through this program.

This program has become a model for the County and will be promoted in RFP's for the 2013-2015 funding cycle.



PROGRESS SUMMARY - ACCOMPLISHMENTS AND REVISED PRIORITIES

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Priority Type:

NUTRITION

Priority Description:

Nutrition continues to be a major project for the Office on Aging. The two nutrition providers have been especially impacted by the rising cost of food; however, the exceptionally high cost of fuel has proven to become a severe drain on their ability to maintain home delivered meals. There are no waiting lists at the moment despite the fact that the number of home delivered meals escalated which is a testament to the fiscal responsibility being manifested by both food nutrition providers.

The largest nutrition provider meets with the Executive Director and the Director of Finance to discuss cost saving strategies on a quarterly basis.

An Outreach van which is no longer used by the OoA was donated to one of the nutrition providers to assist in delivering home bound meals.

The New Jersey Senior Farmers' Market Nutrition Program (SFMNP) provides locally grown fresh fruits, vegetables and herbs to approximately 39,000 senior citizens in New Jersey. In 2010 Monmouth County Office on Aging distributed vouchers to 1242 persons, and in 2011 will be distributing 1500 vouchers throughout the county. The eligibility determination and distribution is handled in partnership with agencies around the county as well as at the Office on Aging. The number of vouchers given to the county increases each year.



PROGRESS SUMMARY - ACCOMPLISHMENTS AND REVISED PRIORITIES

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Priority Type:

EVIDENCE BASED HEALTH

Priority Description:

The Chronic Disease Self Management Program is administered by the VNA of Central Jersey with funds from Monmouth County Office on Aging and a state grant. The program has grown since its inception with collaboration with the Office on Aging. Schedules are shared and referrals are made to the sessions through our I&A specialists and care managers. An additional evidence based program, "A Matter of Balance" is administered by the Monmouth County Department of Public Health with collaboration from the Office on Aging as well. The Assistant Executive Director participates on the County Health Improvement Planning committee where the various health programs existing in the county are discussed and evaluated.



PROGRESS SUMMARY - ACCOMPLISHMENTS AND REVISED PRIORITIES

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Each of the OAA/SUA are addressed as instructed.

Priority Type:

COMMUNITY PARTNERSHIPS

Priority Description:

Due to the increasing number of seniors in Monmouth County and the growing population of persons with disabilities, the Office on Aging has begun a close relation with the County Office of Emergency Management. Two Advisory Council members are maintaining close contact with all OEM personnel in all municipalities making sure that "Register Ready" applications are available and disseminated to the most vulnerable citizens in the event of a disaster. Over 4000 applications have been distributed through senior center visitations and the Outreach Coordinator at the OoA.

Through a partnership with the Monmouth County Cancer Coalition, the early detection of cancer among all people, especially among seniors and persons with disabilities, continues to grow through involvement in Oral Cancer screenings, and Skin Screening programs such as "Choose Your Cover." Palliative Care programs have been provided and enlarged to reach a maximum number of residents within Monmouth County. The Office on Aging continues to provide vital information regarding cancer to all its staff and providers, professional and volunteer personnel via the electronic database and live presentations.

The County Office of Public Information has taken on several new OoA projects and created handsome and professional literature for widespread promulgation. Included are a compact Pocket Guide of Services for Seniors and Persons with Disabilities, Caregiver Program tri-folds, TRIAD Project Gold Star information, etc.

Collaboration with private non-profit and for profit community health facilities is promoting an interactive relationship that promotes the presence of the Office on Aging to seniors and persons with disabilities who might otherwise not be familiar with its services.

Advisory Council representatives attend regional and statewide meetings pertaining to senior issues (transportation, P.A.A.D., Medicare, Medicaid, Advisory Council Summit) and participate in ethnically specific events such as the N.J. Black Issues

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varProgressSummary5 continued

Leadership Conference.

The Silent Senior Program is a County wide Community Partnership. All residents of the County have been asked to contact the OoA to notify them of anyone living in their area of the County who may be living alone and has no apparent contact with outside groups but who may be in need of services provided by the OoA.



PROGRESS SUMMARY - ACCOMPLISHMENTS AND REVISED PRIORITIES

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Priority Type:

SAMS

Priority Description:

Monmouth County went "live" with SAMS on Wednesday, August 11, 2010, following two formal week long trainings provided by the State Training Academy and numerous in-house trainings for Office on Aging staff and service providers. A "point person" was designated within the Office on Aging to facilitate the introduction of SAMS and to be the official liaison with DACS and Harmony. This person has been invaluable in guiding Power Users with training and dealing with this user unfriendly and unintuitive system.



PROGRESS SUMMARY - ACCOMPLISHMENTS AND REVISED PRIORITIES

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Priority Type:

EMERGENCY PREPAREDNESS

Priority Description:

In response to the ongoing heat wave of the summer of 2010 and to insure the safety of seniors and persons with disabilities, the Office on Aging collaborated with the Monmouth County Department of Emergency Management, the Monmouth County Sheriff's Office, the Office on Disabilities, and the Monmouth County Health Department and developed an emergency preparedness plan for seniors and the disabled community. Several "Cooling Spots" were established for those persons who were unable to cope with the heat. This emergency preparedness plan will continue to remain in effect and will be utilized in all future County emergency situations.

In 2011 the OOA and the County OEM established a closer and more practical relationship. Two members of the Advisory Council have become liaisons to the OEM. They are contacting all the local municipal OEM offices and updating information about staffing and emergency procedures. They are also organizing the ordering and distribution of "Register Ready" forms throughout the County.

The Director and the Freeholder Liaison have undertaken to speak at all of the County's senior centers and other agencies to explain the importance of Register Ready and to distribute applications as well as the three ways to register for the emergency evacuation program (paper application, online registration or 211 telephone connection).



PROGRESS SUMMARY - ACCOMPLISHMENTS AND REVISED PRIORITIES

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Priority Type:

MENTAL HEALTH

Priority Description:

Continued collaboration with the Monmouth County Director of Mental Health and Addiction Services has developed a closer relationship with the Office on Aging in terms of public awareness, reduction of screening barriers and the development of diagnostic and treatment assistance procedures.



PROGRESS SUMMARY - ACCOMPLISHMENTS AND REVISED PRIORITIES

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Each of the OAA/SUA are addressed as instructed.

Priority Type:

FISCAL ACCOUNTABILITY

Priority Description:

The Executive Director and the Finance Director of the Office on Aging and Disabilities have established a hierarchy of meetings to assure fiscal accountability with Monmouth County and with DACS.

The two directors meet weekly to discuss, evaluate and analyze the current fiscal situation.

The two directors meet monthly with the entire managerial staff to alert them to the status of the fiscal scene and to assist them with their management of funds.

The two directors meet quarterly with their providers to assist them with the appropriate management of their grants to assure their fiscal accountability.



PROGRESS SUMMARY - ACCOMPLISHMENTS AND REVISED PRIORITIES

This section is the AAA's update on the progress made from the current Area Plan Contract grant year.

Each of the OAA/SUA are addressed as instructed.

Priority Type:

LONGTERM PLANNING

Priority Description:

Ongoing meetings with the managerial staff continue to provide and assure a clarity of purpose and direction of the Office on Aging and Disabilities. Meetings are held biweekly and during a yearly retreat.

Joint Sessions of the Office on Aging's Advisory Council, Municipal Coordinators and Coordinating Council continue to educate seniors in order to assist them with discussing senior trends with their respective constituents.

The OOA has taken specific steps toward establishing an ADRC in Monmouth County by the end of 2011. Partners have been organized and DACS will speak with the County Freeholders and associated personnel. This new dimension of the OOA will allow service to the under 60 population pertaining to I&A and Benefits Screening. It will also enhance referrals via private pay program in the event of a client's ineligibility for the usual Older Americans Act services.

A yearly retreat for the entire Office on Aging and Disabilities staff provides long term morale assistance and job satisfaction.

**PROGRESS SUMMARY - ACCOMPLISHMENTS AND REVISED PRIORITIES**

This section is the AAA's update on the progress made from the current Area Plan Contract grant year.

Each of the OAA/SUA are addressed as instructed.

Priority Type:

Outreach

Priority Description:

In 2011 the Office on Aging hired a Supervisor, Senior Citizen Outreach and Referral Program. Her job duties are to raise awareness of and promote the services of the Office on Aging and its funded providers to the senior citizens of Monmouth County including the frail, impoverished and vulnerable. She accomplishes this through presentations to senior groups, distribution of literature at health fairs, doctors' offices, hospitals, clinics and other venues populated by seniors. Her job duties also include short term care management to seniors who are referred to the Office on Aging through local police departments via Triad or through the new Silent Senior initiative. These seniors are often needy, isolated and not aware of county services.

In collaboration with Rutgers University, a bi-lingual graduate student has been contracted to intern in the Outreach Program for two semesters (2011-2012). The Outreach Supervisor is credentialed to supervise the intern and will direct her programmatic involvement with particular emphasis on reaching the Latino population of the County.

The bilingual outreach also participates in local community Latino festivals which helps in addressing the non documented population. Information and Assistance is made available through literature and setting up appointments for further needs assessment.

In 2011 we again hired a temporary worker, Lynn Goldstone, to assist seniors with Medicare Part D plan enrollments, changes or updates. Lynn has been working with the Office on Aging for six open enrollment periods for Medicare Part D. She will be employed at the Office on Aging during the entire Open Enrollment period, October 15th through December 7th 2011.

The compact "Pocket Guide of Services for Seniors and Persons with Disabilities" and the Monmouth County's Guide to Resources for Older Adults continue to be widely

DACS12AAA002

varProgressSummary1 continued

distributed throughout the county via mail and the Outreach Supervisor.



METHOD(S) AND EVALUATION OF PROJECT

Method(s) - List the method(s) to be used to attain objectives described above and estimated completion date.

Methods

CAREGIVERS:

The Caregiver Specialist authors a column entitled "Caregiver Corner" in a quarterly newsletter publication "Newsline" which reaches over 8000 subscribers over the age of 60. The articles written are of particular interest to caregivers.

An annual caregiver retreat day will be hosted in November. Past years have attracted over 125 caregivers who seek information, education, and access to resources that would help them in the difficult work of caregiving for another.

The Caregiver Specialist will kickoff a Monmouth County Caregiver Coalition in January. Invitees include over 25 service providers that run the gamut from hospitals to home health agencies to transportation providers and caregivers themselves. The intent of this group is to focus solely on identifying the unmet needs of family caregivers and devising new ways for agencies to partner and fill those gaps.

TRANSPORTATION:

Director is a member of the transportation advisory council and attends their meetings regularly.

AAA Director and Director of Finance meet quarterly with the director of SCAT, our transportation provider, to review units and discuss any issues.

DACS12AAA002

Comments1 continued

In an effort to enhance services, the AAA Director and Director of Finance will be working with the director of our assisted transportation program to submit proposals for funding opportunities other than Older Americans Act funds.

The AAA and the Director of Transportation will develop a pamphlet describing transportation services and how to access them .These will be distributed to seniors and the disabled along with their home delivered meals.

NUTRITION:

The agency's largest nutrition provider meets with the Executive Director and the Director of Finance to discuss cost saving strategies on a quarterly basis.

A worker from the office will continue to attend quarterly nutritionists/nutrition directors meeting so that the office can keep current with nutrition issues.

An outreach van which is no longer used by AAA was donated to one of the nutrition providers to assist in delivering home bound meals.

The NJ Senior Farmers Market Nutrition Program continues to be a resource for seniors to purchase locally grown fruits and vegetables. In 2012 we will again let seniors know how to receive vouchers through articles in our newsletter, the local Spanish newspaper and senior center newsletters.

EVIDENCE BASED HEALTH:

The Matter of Balance initiative is implemented by the Monmouth County Health Department. Schedules are shared and referrals are made by our Information & Assistance and Care Management personnel.

DACS12AAA002

Comments1 continued

The Chronic Disease program is administered by the Visiting Nurse Association of Central NJ with Title 3D funds. Referrals are made by Information & Assistance and Care Management personnel.

The Assistant Executive Director is a member of the County Health Improvement Planning Committee.

COMMUNITY PARTNERSHIPS:

AAA continues to expand their partnerships with both non-profit and for profit agencies. For example:

AAA attends NJ Partners meetings.

Executive Director is on the board of Senior Medicare Patrol.

AAA continues their close working relationship with the Cancer Coalition and has an advisory council member on their board.

Executive Director attends monthly Human Service Advisory meeting.

AAA is working closely with the Monmouth County Sheriff's Department on the following initiatives: Triad University, Project Goldstar, Senior Safe Driving and Project Lifesaver.

AAA Executive Director is a member of the County Housing Advisory Board.

SAMS:

Local SAMS Administrator participates in monthly Administrators "GoToMeeting".

AAA County SAMS Trainer works with SAMS users to become proficient with the SAMS "Next Generation "

As per PM 2011-27-1-2, the AAA will track/report Information and Assistance

DACS12AAA002

Comments1 continued

(I&A) data for consumers under and over age 60.

EMERGENCY PREPAREDNESS:

AAA has partnered with the Emergency Management Office and assigned two advisory council members to serve as liaisons. They have ongoing contact with municipal OEM offices and distribute Register Ready forms throughout the county.

AAA Director and Freeholder liaison speak at local agencies about OEM and Register Ready.

OEM and AAA have begun meeting to discuss process improvements to the Emergency Management process after a year of multiple states of emergency.

MENTAL HEALTH:

AAA Executive Director partners with Mental Health & Addictions liaison to create greater public awareness and access to treatment assistance for individuals 60+.

FISCAL ACCOUNTABILITY:

The Executive Director and the Finance Director of the Office on Aging and Disabilities have established a hierarchy of meetings to assure fiscal accountability with Monmouth County and with DACS.

The two directors meet weekly to discuss, evaluate, and analyze the current fiscal situation.

The two directors meet monthly with the entire managerial staff to alert them to

DACS12AAA002

Comments1 continued

the fiscal status and to assist them with their management of funds.

The two directors meet quarterly with their providers to assist them with the appropriate management of their grants to assure their fiscal accountability.

LONG TERM PLANNING:

ADRC - The AAA has a working group whose focus is preparing the agency for transition to the ADRC model.

Transition Care - AAA is working with the Department of Health liaison and pursuing the CMS transition care grant.

AAA has also encouraged one of its grantees to pursue CMS grant

AAA has joined a committee of 18 providers to pursue CMS Innovations grant.

OUTREACH:

The Outreach Worker works with Information & Assistance personnel and responds to Silent Senior and Triad calls.

The Outreach Worker promotes the programs and services of the Office on Aging throughout the county targeting the frail, impoverished, and vulnerable population.

The Outreach Worker partners with other health and social service agencies to present varied educational panel discussions to senior groups

AAA has developed a new outreach mechanism entitled "Silent Senior". This initiative solicits the participation of all county residents to help identify

DACS12AAA002

Comments1 continued

isolated and silent seniors who might benefit from our help.

OTHER

The County has contracted with Coast to Coast Rx to provide prescription discount cards as well as other discount programs for hearing, vision, diabetes, and other benefits. This card is particularly helpful to the uninsured or underinsured.



METHOD(S) AND EVALUATION OF PROJECT CONTINUED

Evaluation - Describe how the project is to be self-evaluated.

The Monmouth County Office on Aging will meet/comply with all required evaluation/data collection requirements as established by the Department of Health and Senior Services, Division of Aging and Communiyt Services.

AAA requires all funded services to do a customer satisfaction survey yearly and send results to the office by Nov 1st. These results are reviewed by the Executive Director, the Planning Dept and Fiscal.

AAA reviews I&A results on a quarterly basis monitoring types and number of calls to identify trends and service gaps.

AAA holds their Public Hearing in June where customers and service providers are afforded the opportunity to obtain information and provide comment on the services provided to Monmouth County senior citizens and their caregivers. Information gathered during the public hearing provides data and insight to the Office on Aging on those issues most in need of attention and funding.

In addition to the state required programmatic and fiscal monitoring, the Executive Director, Programmatic and Fiscal staffs meet after each quarter to review client, unit and spending levels of each service. All discrepancies are addressed with grantees.

Monmouth County

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TITLE III B ASSURANCES

1. The Area Agency's **Current Area Contract Grant Year TOTAL Title III B Allocation from the current year APC Advanced Planning Document**, prior to transfers. *(Do not include Administrative Expenditures)*

Enter Total \$644,434

Column 2.A. = **Estimated year end Title III B funds the AAA will spend from the current grant year on the delivery of priority services** (Access, In-Home and Legal services)

Column 2.B. = **Estimated % of current Area Plan Grant Year Title III B dollars the AAA will spend by the current year end total on the delivery of Priority Services: Access, In-Home and Legal services.**

Service Category	2.A. Estimated actual Current Year-End Total Title III B Expenditures	2.B. Estimated % of actual Current Year-End Total Title III B Expenditures
Access	\$394,448	61.21% of Total Title III B funds
In-Home	\$90,621	14.06% of Total Title III B funds
Legal	\$39,480	6.13% of Total Title III B funds
Total:	\$524,549	

Monmouth County

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Multiple-year contracts - **did not carry out RFP/BID process** subsequent to submittal of 2010-2012 APC. (No need to complete chart or questions 2-4 that follow)

AAA implanted an RFP/BID process subsequent to submittal of 2010-2012 APC. The completed chart below summarizes AAA's efforts to inform potential service providers that 2011 Older Americans Act & other APC funds were available:

NOTIFICATION OF FUND AVAILABILITY

Newspaper (Upload scanned copy of actual as below)	Dates		# Providers and How RFP Package Obtained			Technical Assistance Information Meeting						Proposal Submissions				
						Provider Attendees										
	Notice Published	Proposal Deadline	Total	Mail	In-Person AAA or County Office	Date/Time	Location	Total #	# New Providers	# Minority: If known	# New Minority: If known	Total #	# New Providers	# Minority: If known	# New Minority: If known	# Information Meeting Attendees
			0													
			0													
			0													
			0													
			0													



NEW PROVIDER, A MINORITY PROVIDER, AND/OR A NEW SERVICE

Complete the table provided to indicate a **New Service Provider, a New or Existing Minority Service Provider, and/or a New Service** that was not included in the current Area Plan Contract.

Write "N/A" if it is not applicable. Please check here if no new Providers/Services.

Service Provider	Check if Appropriate		Taxonomy Service And Taxonomy Service Code	Check if New Taxonomy Service	Budgeted Funds	
	New Provider	New or Minority Provider			Budgeted Funds Title III B, C, D, E Only	Total ALL Budgeted Funds (Including Title III)
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
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	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		



NEW PROVIDER, A MINORITY PROVIDER, AND/OR A NEW SERVICE - Continued

Service Provider	Check if Appropriate		Taxonomy Service And Taxonomy Service Code	Check if New Taxonomy Service	Budgeted Funds	
	New Provider	New or Minority Provider			Budgeted Funds Title III B, C, D, E Only	Total ALL Budgeted Funds (Including Title III)
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		

Minority Provider:

A not for profit organization whose controlling board is comprised of at least 50% minority individuals, or a business concern that is at least 51 percent owned by one or more individuals who are either an African American, Hispanic origin, American Indian/Native Alaskan/Native Hawaiian, Asian American/Pacific Islander minority, or a publicly owned business having at least 51 percent of its stock owned by one or more minority individuals and having its management and daily business controlled by one or more minority individuals.

Monmouth County

DACS12AAA002

NAPIS REQUIREMENTS**Profile of Community Focal Points and Seniors Centers**

Question		Current Area Plan Contract grant year	Next Area Plan Contract grant year
		IF Current Area Plan Contract grant year COLUMN DIFFERS FROM Next Area Plan Contract grant year COLUMN, EXPLAIN BELOW***	
1.	Total number of Focal Points designated under OAA § 306 (a)(3)(A) (42 U.S.C.A. § 3026 (a) (3) (A)) in operation in the past year.	16	19
2.	Of the total number of Focal Points in number 1 above, provide the number that were senior centers.	9	13
3.	Total number of Senior Centers currently operating in your county.	13	13
4.	Total number of Senior Centers in number 3 above receiving funds pursuant to the Older Americans Act of 1965, as amended (42 U.S.C.A. §§ 3001 et seq., as amended).	9	9



DACS12AAA002

NAPIS REQUIREMENTS - Continued

1. Difference 2010 compared with 2011:

Increase in numbers is a result of State's (Stephanie Katz) revised definition of focal points.

2. Difference 2010 compared with 2011:

Increase in numbers is a result of State's (Stephanie Katz) revised definition of focal points.

3. Difference 2010 compared with 2011:

N/A

4. Difference 2010 compared with 2011:

N/A

NAPIS REQUIREMENTS - STAFFING PROFILE

AAA Personnel Categories	# Of ◆ FTEs	# Of Minority FTEs	# Of FTEs Paid with OAA Funds
Agency Executive/Management Staff	5.00	0.00	0.50
Other Paid Professional Staff by Functional Responsibility (See definitions below)			
A. Planning	0.00	0.00	0.00
B. Development	1.00	0.00	1.00
C. Administration	2.50	0.00	2.50
D. Service Delivery	0.50	0.00	0.00
E. Access/Care Coordination	17.00	1.00	5.00
F. Other	0.00	0.00	0.00
Clerical/Support Staff	5.00	1.00	2.00
Volunteers	0.00	0.00	0.00
Total AAA Staff	31.00	2.00	11.00

*FUNCTIONAL RESPONSIBILITIES: (CORRESPONDS TO ORGANIZATIONAL CHART)

- (A) Planning - Includes Needs Assessment, Plan Development, Budgeting/Resource Analysis, Service Inventories, Standards Development And Policy Analysis.
- (B) Development - Includes Public Education, Resource Development, Training And Education, Research And Development, And Legislative Activities.
- (C) Administration - Includes Bidding, Contract Negotiation, Reporting, Reimbursement, Accounting, Auditing, Monitoring And Quality Assurance.
- (D) Service Delivery - Includes Those Activities Associated With The Direct Provision Of A Service, Which Meets The Needs Of An Individual Older Person And/Or Caregiver.
- (E) Access/Care Coordination - Includes Outreach, Screening, Assessment, Care Management, And I & R.

◆ FTE= Full time equivalent

Integrated Program Summary

New Revised Delete

		From: 1/1/2012	To: 12/31/2012
Calendar Year 2012	County Monmouth County	Program # 001	
Program Name Long Branch Senior Center		Provider Name Long Branch, City of	
Provider Address 85 Second Avenue		Minority Provider <input type="checkbox"/> Yes <input type="checkbox"/> No	
City Long Branch	State New Jersey	Zip 07740	
Telephone 732-571-6542		Director Pat Scinto-Krosnicki	
Fax 732-483-1755		Focal Point <input type="checkbox"/> ADRC Partner	Type Initials ADRC
Provider Federal Tax ID Number (##-#####) 226000806		Focal Point	FP
Provider DUNS Number (##-###-####) 08-198-1193		<input type="checkbox"/> Go Access Point	GO
		<input type="checkbox"/> Check here if not a Focal Point	
Is this Program held at additional sites?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			

Budget by Line Item

Name of Allocated Fund and Code: Title III B - Supportive Services - 02

Line Item	Cash	In-Kind	Total
Personnel	\$211,500		\$211,500
Consultant & Contract			\$0
Travel	\$360		\$360
Food			\$0
Building Space			\$0
Print & Office Supplies	\$2,300		\$2,300
Equipment			\$0
Other	\$19,825		\$19,825
Indirect Cost			\$0
Total Budgeted Cost	\$233,985	\$0	\$233,985

Budget by Funding Source

Name of Allocated Fund		
Title III B - Supportive Services - 02		\$10,500
Additional Funds:	State Match	
	State COLA	\$2,000
	Local Public	\$221,385
	Local Private	
	NSIP	
Income:	Other	
	Participant	\$100
Total:		\$233,985

Service Code and Taxonomy Service Name	Service Units	Unduplicated Clients	Service Budget	Service Rate
101 - Information and Assistance - contact	2,400	900	\$40,000	\$16.67
102 - Benefits Screening - 1/2 hour	200	90	\$28,000	\$140.00
106 - Transportation - 1 one-way trip (location	1,750	100	\$20,000	\$11.43
210 - Telephone Reassurance - call	4,000	40	\$17,000	\$4.25
326 - Physical Health - contact	375	160	\$13,485	\$35.96
330 - Physical Activity - session per	3,698	300	\$35,500	\$9.60
331 - Education - session per participant	3,500	300	\$30,000	\$8.57
333 - Socialization/Recreation - session per	7,500	425	\$50,000	\$6.67
				\$0
				\$0
Total:			\$233,985	

Name of AAA Director Certifying The Above Information

Thomas F. Pivinski

By checking this box, you certify that the information listed above is accurate to the best of your knowledge.

Integrated Program Summary

New Revised Delete

		From: 1/1/2012	To: 12/31/2012
Calendar Year 2012	County Monmouth County	Program # 002	
Program Name ASBURY PARK SENIOR CENTER		Provider Name Asbury Park, City of	
Provider Address One Municipal Plaza		Minority Provider <input type="checkbox"/> Yes <input type="checkbox"/> No	
City ASBURY PARK	State New Jersey	Zip 07712	
Telephone 732-775-2100		Director Anthony J. Nuccio	
Fax 732-502-5199		Focal Point <input type="checkbox"/> ADRC Partner	Type Initials ADRC
Provider Federal Tax ID Number (##-##### , #####) 216000035		<input type="checkbox"/> Focal Point	FP
Provider DUNS Number (##-###-####) 04-987-3235		<input type="checkbox"/> Go Access Point	GO
		<input type="checkbox"/> Check here if not a Focal Point	
Is this Program held at additional sites?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			

Budget by Line Item

Name of Allocated Fund and Code: Title III B - Supportive Services - 02

Line Item	Cash	In-Kind	Total
Personnel	\$77,783		\$77,783
Consultant & Contract			\$0
Travel			\$0
Food			\$0
Building Space	\$19,083		\$19,083
Print & Office Supplies	\$500		\$500
Equipment			\$0
Other	\$4,650		\$4,650
Indirect Cost			\$0
Total Budgeted Cost	\$102,016	\$0	\$102,016

Budget by Funding Source

Name of Allocated Fund		
Title III B - Supportive Services - 02		\$13,660
Additional Funds:	State Match	
	State COLA	\$2,000
	Local Public	\$86,256
	Local Private	
	NSIP	
Income:	Other	
	Participant	\$100
Total:		\$102,016

Service Code and Taxonomy Service Name	Service Units	Unduplicated Clients	Service Budget	Service Rate
101 - Information and Assistance - contact	800	150	\$28,643	\$35.80
106 - Transportation - 1 one-way trip (location	870	60	\$50,458	\$58.00
326 - Physical Health - contact	150	40	\$6,560	\$43.73
330 - Physical Activity - session per	600	10	\$2,514	\$4.19
331 - Education - session per participant	240	50	\$4,395	\$18.31
333 - Socialization/Recreation - session per	900	150	\$9,446	\$10.50
				\$0
				\$0
				\$0
				\$0
Total:			\$102,016	

Name of AAA Director Certifying The Above Information

THOMAS F. PIVINSKI

By checking this box, you certify that the information listed above is accurate to the best of your knowledge.

Integrated Program Summary

New Revised Delete

		From: 1/1/2012	To: 12/31/2012
Calendar Year 2012	County Monmouth County	Program # 011	
Program Name HOWELL SENIOR CENTER		Provider Name Howell, Township of	
Provider Address PO BOX 580, PREVENTORIUM ROAD		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City HOWELL	State New Jersey	Zip 07731	
Telephone 732-938-4500		Director CAROL ZUR	
Fax 732-919-7240		Focal Point <input type="checkbox"/> ADRC Partner	Type Initials ADRC
Provider Federal Tax ID Number (##-#####) 216000749		<input type="checkbox"/> Focal Point	FP
Provider DUNS Number (##-###-####) 04-814-9157		<input type="checkbox"/> Go Access Point	GO
		<input type="checkbox"/> Check here if not a Focal Point	
Is this Program held at additional sites?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			

Budget by Line Item

Name of Allocated Fund and Code: Title III B - Supportive Services - 02

Line Item	Cash	In-Kind	Total
Personnel	\$279,428		\$279,428
Consultant & Contract			\$0
Travel			\$0
Food			\$0
Building Space			\$0
Print & Office Supplies			\$0
Equipment			\$0
Other	\$4,100		\$4,100
Indirect Cost			\$0
Total Budgeted Cost	\$283,528	\$0	\$283,528

Budget by Funding Source

Name of Allocated Fund		
Title III B - Supportive Services - 02		\$11,750
Additional Funds:	State Match	
	State COLA	\$2,000
	Local Public	\$269,678
	Local Private	
	NSIP	
Income:	Other	
	Participant	\$100
Total:		\$283,528

Service Code and Taxonomy Service Name	Service Units	Unduplicated Clients	Service Budget	Service Rate
101 - Information and Assistance - contact	2,000	850	\$59,663	\$29.83
102 - Benefits Screening - 1/2 hour	425	100	\$47,668	\$112.16
106 - Transportation - 1 one-way trip (location	12,195	220	\$72,742	\$5.96
326 - Physical Health - contact	165	55	\$25,667	\$155.56
330 - Physical Activity - session per	500	110	\$20,901	\$41.80
331 - Education - session per participant	1,600	200	\$14,958	\$9.35
333 - Socialization/Recreation - session per	10,000	430	\$41,929	\$4.19
				\$0
				\$0
				\$0
Total:			\$283,528	

Name of AAA Director Certifying The Above Information

THOMAS F. PIVINSKI

By checking this box, you certify that the information listed above is accurate to the best of your knowledge.

Integrated Program Summary

New Revised Delete

		From: 1/1/2012	To: 12/31/2012
Calendar Year 2012	County Monmouth County	Program # 012	
Program Name RED BANK SENIOR CENTER		Provider Name Red Bank, Borough of	
Provider Address 80 SHREWSBURY AVENUE		Minority Provider <input type="checkbox"/> Yes No	
City RED BANK	State New Jersey	Zip 07701	
Telephone 732-747-5204		Director JACQUELIN REYNOLDS	
Fax 732-747-3003		Focal Point <input type="checkbox"/> ADRC Partner	Type Initials ADRC
Provider Federal Tax ID Number (##-#####) 216001051		<input type="checkbox"/> Focal Point	FP
Provider DUNS Number (##-###-####) 08-403-7464		<input type="checkbox"/> Go Access Point	GO
		<input type="checkbox"/> Check here if not a Focal Point	
Is this Program held at additional sites?		<input type="checkbox"/> Yes No	
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			

Budget by Line Item

Name of Allocated Fund and Code: Title III B - Supportive Services - 02

Line Item	Cash	In-Kind	Total
Personnel	\$196,752		\$196,752
Consultant & Contract			\$0
Travel			\$0
Food			\$0
Building Space	\$17,000		\$17,000
Print & Office Supplies	\$2,500		\$2,500
Equipment			\$0
Other	\$9,300		\$9,300
Indirect Cost			\$0
Total Budgeted Cost	\$225,552	\$0	\$225,552

Budget by Funding Source

Name of Allocated Fund		
Title III B - Supportive Services - 02		\$14,656
Additional Funds:	State Match	
	State COLA	\$2,000
	Local Public	\$208,846
	Local Private	
	NSIP	
Income:	Other	
	Participant	\$50
Total:		\$225,552

Service Code and Taxonomy Service Name	Service Units	Unduplicated Clients	Service Budget	Service Rate
101 - Information and Assistance - contact	1,200	200	\$61,323	\$51.10
106 - Transportation - 1 one-way trip (location	6,911	100	\$55,102	\$7.97
326 - Physical Health - contact	800	65	\$19,190	\$23.99
330 - Physical Activity - session per	720	65	\$14,390	\$19.99
331 - Education - session per participant	3,000	130	\$14,937	\$4.98
333 - Socialization/Recreation - session per	6,000	240	\$60,610	\$10.10
				\$0
				\$0
				\$0
				\$0
Total:			\$225,552	

Name of AAA Director Certifying The Above Information

THOMAS F. PIVINSKI

By checking this box, you certify that the information listed above is accurate to the best of your knowledge.

Integrated Program Summary

New Revised Delete

		From: 1/1/2012	To: 12/31/2012
Calendar Year 2012	County Monmouth County	Program # 013	
Program Name NEPTUNE SENIOR CENTER		Provider Name Neptune, Township of	
Provider Address 1607 CORLIES AVENUE		Minority Provider <input type="checkbox"/> Yes No	
City Neptune	State New Jersey	Zip 07753	
Telephone 732-988-8855		Director ROSEMARY GRAY	
Fax 732-988-6626		Focal Point <input type="checkbox"/> ADRC Partner	Type Initials ADRC
Provider Federal Tax ID Number (##-##### , #####) 216000916		<input type="checkbox"/> Focal Point	FP
Provider DUNS Number (##-###-####) 04-955-0817		<input type="checkbox"/> Go Access Point	GO
		<input type="checkbox"/> Check here if not a Focal Point	
Is this Program held at additional sites?		<input type="checkbox"/> Yes No	
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			

Budget by Line Item

Name of Allocated Fund and Code: Title III B - Supportive Services - 02

Line Item	Cash	In-Kind	Total
Personnel	\$200,500		\$200,500
Consultant & Contract			\$0
Travel			\$0
Food			\$0
Building Space			\$0
Print & Office Supplies			\$0
Equipment			\$0
Other	\$500		\$500
Indirect Cost			\$0
Total Budgeted Cost	\$201,000	\$0	\$201,000

Budget by Funding Source

Name of Allocated Fund		
Title III B - Supportive Services - 02		\$10,500
Additional Funds:	State Match	
	State COLA	\$2,000
	Local Public	\$188,000
	Local Private	
	NSIP	
Income:	Other	
	Participant	\$500
Total:		\$201,000

Service Code and Taxonomy Service Name	Service Units	Unduplicated Clients	Service Budget	Service Rate
101 - Information and Assistance - contact	2,125	1200	\$48,000	\$22.59
102 - Benefits Screening - 1/2 hour	1,100	550	\$36,000	\$32.73
106 - Transportation - 1 one-way trip (location	3,547	165	\$46,500	\$13.11
210 - Telephone Reassurance - call	4,700	35	\$17,000	\$3.62
326 - Physical Health - contact	650	200	\$22,000	\$33.85
330 - Physical Activity - session per	5,000	275	\$31,500	\$6.30
				\$0
				\$0
				\$0
				\$0
Total:			\$201,000	

Name of AAA Director Certifying The Above Information

THOMS F. PIVINSKI

By checking this box, you certify that the information listed above is accurate to the best of your knowledge.

Integrated Program Summary

New Revised Delete

		From: 1/1/2012	To: 12/31/2012
Calendar Year 2012	County Monmouth County	Program # 014	
Program Name MIDDLETOWN SENIOR CENTER		Provider Name Middletown, Township of	
Provider Address CROYDEN HALL, 900 LEONARDVILLE RD		Minority Provider <input type="checkbox"/> Yes <input type="checkbox"/> No	
City MIDDLETOWN	State New Jersey	Zip 07748	
Telephone 732-615-2265		Director Patrice Nugent	
Fax 732-291-9889		Focal Point <input type="checkbox"/> ADRC Partner	Type Initials ADRC
Provider Federal Tax ID Number (##-#####) 216300871		<input type="checkbox"/> Focal Point	FP
Provider DUNS Number (##-###-####) 04-909-4121		<input type="checkbox"/> Go Access Point	GO
		<input type="checkbox"/> Check here if not a Focal Point	
Is this Program held at additional sites?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			

Budget by Line Item

Name of Allocated Fund and Code: Title III B - Supportive Services - 02

Line Item	Cash	In-Kind	Total
Personnel	\$116,500		\$116,500
Consultant & Contract			\$0
Travel			\$0
Food			\$0
Building Space		\$177,020	\$177,020
Print & Office Supplies			\$0
Equipment			\$0
Other			\$0
Indirect Cost			\$0
Total Budgeted Cost	\$116,500	\$177,020	\$293,520

Budget by Funding Source

Name of Allocated Fund		
Title III B - Supportive Services - 02		\$14,250
Additional Funds:	State Match	
	State COLA	\$2,000
	Local Public	\$277,170
	Local Private	
	NSIP	
Income:	Other	
	Participant	\$100
Total:		\$293,520

Service Code and Taxonomy Service Name	Service Units	Unduplicated Clients	Service Budget	Service Rate
101 - Information and Assistance - contact	4,250	850	\$99,561	\$23.43
102 - Benefits Screening - 1/2 hour	275	200	\$29,242	\$106.33
106 - Transportation - 1 one-way trip (location	4,796	115	\$64,724	\$13.50
209 - Friendly Visiting - visit	90	50	\$11,554	\$128.38
326 - Physical Health - contact	400	175	\$8,457	\$21.14
330 - Physical Activity - session per	2,448	100	\$15,643	\$6.39
331 - Education - session per participant	1,000	120	\$13,754	\$13.75
333 - Socialization/Recreation - session per	8,800	400	\$50,585	\$5.75
				\$0
				\$0
Total:			\$293,520	

Name of AAA Director Certifying The Above Information

THOMAS F. PIVINSKI

By checking this box, you certify that the information listed above is accurate to the best of your knowledge.

2/10/2012

Integrated Program Summary

New Revised Delete

		From: 1/1/2012	To: 12/31/2012
Calendar Year 2012	County Monmouth County	Program # 021	
Program Name INFORMATION AND ASSISTANCE		Provider Name AAA MONMOUTH	
Provider Address 21 MAIN & COURT CENTER PO Box 1255			
		Minority Provider	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
City FREEHOLD, NJ	State New Jersey	Zip 07728	
Telephone 732-431-7450		Director THOMAS F. PIVINSKI	
Fax 732-303-7649		Focal Point <input type="checkbox"/> ADRC Partner	Type Initials ADRC
Provider Federal Tax ID Number (##-#####) 216000881		<input type="checkbox"/> Focal Point	FP
Provider DUNS Number (##-###-####) 06-870-4485		<input type="checkbox"/> Go Access Point	GO
		<input type="checkbox"/> Check here if not a Focal Point	
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			

Budget by Line Item

Name of Allocated Fund and Code: Title III B - Supportive Services - 02

Line Item	Cash	In-Kind	Total
Personnel	\$151,632		\$151,632
Consultant & Contract	\$371		\$371
Travel	\$500		\$500
Food			\$0
Building Space			\$0
Print & Office Supplies	\$8,000		\$8,000
Equipment	\$0		\$0
Other	\$8,018		\$8,018
Indirect Cost		\$29,986	\$29,986
Total Budgeted Cost	\$168,521	\$29,986	\$198,507

Budget by Funding Source

Name of Allocated Fund		
Title III B - Supportive Services - 02		\$55,408
Additional Funds:	State Match	\$1,568
	State COLA	\$111,445
	Local Public	\$29,986
	Local Private	
	NSIP	
Income:	Other	
	Participant	\$100
Total:		\$198,507

Service Code and Taxonomy Service Name	Service Units	Unduplicated Clients	Service Budget	Service Rate
101 - Information and Assistance - contact	472	2750	\$114,069	\$241.67
102 - Benefits Screening - 1/2 hour	40	15	\$15,000	\$375.00
104 - Outreach - contact	50	40	\$20,598	\$411.96
105 - Care Management - 1/2 hour	50	30	\$21,386	\$427.72
110 - Public Awareness / Information - activity	100	10000	\$27,454	\$274.54
				\$0
				\$0
				\$0
				\$0
				\$0
Total:			\$198,507	

Name of AAA Director Certifying The Above Information

THOMAS F. PIVINSKI

By checking this box, you certify that the information listed above is accurate to the best of your knowledge.

Integrated Program Summary

New Revised Delete

		From: 1/1/2012	To: 12/31/2012
Calendar Year 2012	County Monmouth County	Program # 067	
Program Name KEYPORT SENIOR CENTER		Provider Name Keyport, Borough of	
Provider Address 110 SECOND STREET		Minority Provider <input type="checkbox"/> Yes No	
City KEYPORT	State New Jersey	Zip 07735	
Telephone 732-264-4916		Director WENDY TOOKER	
Fax 732-264-8552		Focal Point <input type="checkbox"/> ADRC Partner	Type Initials ADRC
Provider Federal Tax ID Number (##-##### , #####) 216000776		<input type="checkbox"/> Focal Point	FP
Provider DUNS Number (##-###-####) 08-564-1983		<input type="checkbox"/> Go Access Point	GO
		<input type="checkbox"/> Check here if not a Focal Point	
Is this Program held at additional sites?		<input type="checkbox"/> Yes No	
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			

Budget by Line Item

Name of Allocated Fund and Code: Title III B - Supportive Services - 02

Line Item	Cash	In-Kind	Total
Personnel	\$55,130		\$55,130
Consultant & Contract			\$0
Travel			\$0
Food			\$0
Building Space			\$0
Print & Office Supplies			\$0
Equipment			\$0
Other	\$13,630		\$13,630
Indirect Cost			\$0
Total Budgeted Cost	\$68,760	\$0	\$68,760

Budget by Funding Source

Name of Allocated Fund		
Title III B - Supportive Services - 02		\$14,250
Additional Funds:	State Match	
	State COLA	\$3,750
	Local Public	\$50,660
	Local Private	
	NSIP	
Income:	Other	
	Participant	\$100
Total:		\$68,760

Service Code and Taxonomy Service Name	Service Units	Unduplicated Clients	Service Budget	Service Rate
101 - Information and Assistance - contact	251	100	\$10,500	\$41.83
326 - Physical Health - contact	300	110	\$4,350	\$14.50
330 - Physical Activity - session per	4,000	200	\$23,310	\$5.83
331 - Education - session per participant	5,800	170	\$12,500	\$2.16
333 - Socialization/Recreation - session per	401	385	\$18,100	\$45.14
				\$0
				\$0
				\$0
				\$0
				\$0
Total:			\$68,760	

Name of AAA Director Certifying The Above Information

THOMAS F. PIVINSKI

By checking this box, you certify that the information listed above is accurate to the best of your knowledge.

Monmouth County

DACS12AAA002

SITES/LOCATIONS

Please use this form to list any applicable site locations in addition to your agency's primary address and verify all data is correct before clicking save.

Is this a new Site? Yes No

Type of Site (if applicable check all that apply):

Nutrition site:

Senior Center:

Focal Point:

Site Name Asbury Towers

Site Director Name John Maggi

Address 1

1701 Ocean Avenue

Address 2

City Asbury Park

State New Jersey

Zip 07712

Phone 732-774-4447

Email

Fax

Website

Monmouth County

DACS12AAA002

SITES/LOCATIONS

Please use this form to list any applicable site locations in addition to your agency's primary address and verify all data is correct before clicking save.

Is this a new Site? Yes No

Type of Site (if applicable check all that apply):

Nutrition site:

Senior Center:

Focal Point:

Site Name Bayshore Senior Center

Site Director Name Chrissy Davino

Address 1

100 Main Street

Address 2

City Keansburg

State New Jersey

Zip 07734

Phone 732-495-2454

Email

Fax

Website

Monmouth County

DACS12AAA002

SITES/LOCATIONS

Please use this form to list any applicable site locations in addition to your agency's primary address and verify all data is correct before clicking save.

Is this a new Site? Yes No

Type of Site (if applicable check all that apply):

Nutrition site:

Senior Center:

Focal Point:

Site Name Howell Senior Center

Site Director Name Marie Beres

Address 1

PO Box 580, Preventorium Road

Address 2

City Howell

State New Jersey

Zip 07731

Phone 732-938-4937

Email

Fax 732-919-7240

Website

Monmouth County

DACS12AAA002

SITES/LOCATIONS

Please use this form to list any applicable site locations in addition to your agency's primary address and verify all data is correct before clicking save.

Is this a new Site? Yes No

Type of Site (if applicable check all that apply):

Nutrition site:

Senior Center:

Focal Point:

Site Name Keyport Senior Center

Site Director Name Colleen Dorko

Address 1

110 Second Avenue

Address 2

City Keyport

State New Jersey

Zip 07735

Phone 732-888-4876

Email

Fax 732-264-8552

Website

Monmouth County

DACS12AAA002

SITES/LOCATIONS

Please use this form to list any applicable site locations in addition to your agency's primary address and verify all data is correct before clicking save.

Is this a new Site? Yes No

Type of Site (if applicable check all that apply):

Nutrition site:

Senior Center:

Focal Point:

Site Name Middletown Senior Center

Site Director Name Grace Yanick

Address 1

900 Leonardville Road

Address 2

City Middletown

State New Jersey

Zip 07737

Phone 732-291-0999

Email

Fax 732-782-8706

Website

Monmouth County

DACS12AAA002

SITES/LOCATIONS

Please use this form to list any applicable site locations in addition to your agency's primary address and verify all data is correct before clicking save.

Is this a new Site? Yes No

Type of Site (if applicable check all that apply):

Nutrition site:

Senior Center:

Focal Point:

Site Name Neptune Senior Center

Site Director Name Sharon Johnston

Address 1

1607 Corlies Avenue

Address 2

City Neptune

State New Jersey

Zip 07753

Phone 732-988-8855

Email

Fax 732-988-6626

Website

Monmouth County

DACS12AAA002

SITES/LOCATIONS

Please use this form to list any applicable site locations in addition to your agency's primary address and verify all data is correct before clicking save.

Is this a new Site? Yes No

Type of Site (if applicable check all that apply):

Nutrition site:

Senior Center:

Focal Point:

Site Name Red Bank Senior Center

Site Director Name Margaret McGinn

Address 1

80 Shrewsbury Avenue

Address 2

City Red Bank

State New Jersey

Zip 07701

Phone 732-747-5204

Email

Fax 732-747-3003

Website

Integrated Program Summary

New Revised Delete

		From: 1/1/2012	To: 12/31/2012
Calendar Year 2012	County Monmouth County	Program # 007	
Program Name Certified Home Health Aide		Provider Name Family & Children's Service, Inc. of Monmouth County	
Provider Address 191 Bath Ave			
Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
City LONG BRANCH	State New Jersey	Zip 07740	
Telephone 732-222-9111		Director Debbie Huisman	
Fax 732-531-8507		Focal Point <input type="checkbox"/> ADRC Partner	Type Initials ADRC
Provider Federal Tax ID Number (##-##### , #####) 210650674		Focal Point <input type="checkbox"/> Go Access Point	FP GO
Provider DUNS Number (##-###-####) 08-564-0829		<input type="checkbox"/> Check here if not a Focal Point	
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			

Budget by Line Item

Name of Allocated Fund and Code: Title III E - National Family Caregiver Support Program (NFCSP)

Line Item	Cash	In-Kind	Total
Personnel			\$0
Consultant & Contract	\$35,758		\$35,758
Travel			\$0
Food			\$0
Building Space			\$0
Print & Office Supplies			\$0
Equipment			\$0
Other			\$0
Indirect Cost			\$0
Total Budgeted Cost	\$35,758	\$0	\$35,758

Budget by Funding Source

Name of Allocated Fund		
Title III E - National Family Caregiver		\$17,505
Additional Funds:	State Match	\$18,135
	State COLA	
	Local Public	
	Local Private	
	NSIP	
Income:	Other	
	Participant	\$118
Total:		\$35,758

Service Code and Taxonomy Service Name	Service Units	Unduplicated Clients	Service Budget	Service Rate
713 - NFCSP Certified Home Health Aide - hour	1,310	16	\$24,642	\$18.81
721 - NFCSP Adult Day Services - Social - hour	1,235	6	\$11,116	\$9.00
				\$0
				\$0
				\$0
				\$0
				\$0
				\$0
				\$0
				\$0
				\$0
Total:			\$35,758	

Name of AAA Director Certifying The Above Information

THOMAS F. PIVINSKI

By checking this box, you certify that the information listed above is accurate to the best of your knowledge.

DACS12AAA002

AGENCY BUDGET PLAN

Agency: Monmouth County

County: Monmouth County

Title III Funding:

Funding Sources	Title III Admin	Title III B	Title III C1	Title III C2	Title III D Health Promotion	Title III D Med Mgmt	Title III E	Funds Total	MOE Req.	NSIP Approved Carry Over	NSIP Excess Funds	NSIP Fund Balance
New funds		\$321,463	\$340,291	\$194,364	\$13,421	\$4,764	\$132,685	\$1,006,988				
Administrative	\$100,696	(\$37,309)	(\$30,694)	(\$19,453)			(\$13,240)	\$0				
Allocation Transfer		\$57,082	(\$50,524)	(\$6,558)				\$0				
New Allocation	\$100,696	\$341,236	\$259,073	\$168,353	\$13,421	\$4,764	\$119,445	\$1,006,988				
Prior Year Approved C/O		\$0	\$0	\$0	\$0	\$0	\$0	\$0				
Prior Year Excess Funds		\$0	\$0	\$0	\$0	\$0	\$0	\$0				
State Match		\$46,034	\$0	\$0	\$0	\$252	\$39,806	\$86,092				
Prior Year Approved State Match C/O		\$0	\$0	\$0	\$0	\$0	\$0	\$0				
Prior Year State Match Excess Funds		\$0	\$0	\$0	\$0	\$0	\$0	\$0				
Local Public	\$301,910	\$1,570,502	\$13,565	\$175,246			\$19,728	\$2,080,951				
Local Private		\$76,958	\$165,078	\$314,000	\$8,947	\$3,344		\$568,327	\$2,462,356			
Participant Income		\$4,925	\$93,192	\$138,900	\$250	\$100	\$668	\$238,035				
Income Other		\$88,557	\$100	\$8,527				\$97,184				
State COLA		\$145,529		\$10,099				\$155,628				
NSIP			\$9,542	\$53,954				\$63,496		\$0	\$0	\$0
Allocation Total	\$402,606	\$2,273,741	\$540,550	\$869,079	\$22,618	\$8,460	\$179,647	\$4,296,701				

Actual Contract Allocation (Entered by DACS)		\$321,463	\$340,291	\$194,364	\$13,421	\$4,764	\$132,685	\$1,006,988				
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Federal Fund Balance		\$0	\$0	\$0	\$0	\$0	\$0	\$0				
State Match Fund Balance		\$0	\$0	\$0	\$0	\$0	\$0	\$0				

Non Title III Funding:

Funding Sources	SHTP Admin	SHTP Program	SSBG Admin	SSBG Program	SWHDM Program	Supp Home Deliver Meals	Care Coord CHQA	APS Program	Medicaid Match	CDSM - AoA	Disaster Relief Funding	Non-APC	Title VII
New funds		\$36,200		\$368,377	\$30,429	\$0	\$11,907	\$124,755	\$27,741	\$0	\$0	\$0	\$0
Administrative Allocation Transfer			\$27,265	(\$27,265)									
New Allocation		\$36,200	\$27,265	\$341,112	\$30,429		\$11,907	\$124,755	\$27,741		\$0		
Prior Year Approved C/O									\$0	\$0	\$0	\$0	\$0
Prior Yr Excess Funds									\$0	\$0	\$0	\$0	\$0
State Match													
Prior Yr Approved State Match C/O													
Prior Yr State Match Excess Funds													
Local Public		\$17,799	\$5,530	\$153,076	\$32,952		\$2,421				\$0	\$60,880	
Local Private		\$1,500		\$51,330							\$0		
Income Client		\$500		\$32,500	\$1,694				\$69				
Income Other				\$50							\$0		
State COLA				\$10,000							\$0		
NSIP				\$7,424	\$2,516							\$2,981	
Allocation Total	\$0	\$55,999	\$32,795	\$595,492	\$67,591	\$0	\$14,328	\$124,755	\$27,810	\$0	\$0	\$63,861	\$0
Actual contract Allocation (Entered by DACS)		\$36,200		\$368,377	\$30,429	\$0	\$11,907	\$124,755	\$27,741	\$0	\$0	\$0	\$0
Federal Fund Balance									\$0	\$0	\$0	\$0	\$0

Funding Sources	Fund Totals	Contract Totals	Actual Allocation (Entered by DACS)
New funds	\$599,409	\$1,606,397	
Administrative	\$0	\$0	
Allocation Transfer	\$0	\$0	
New Allocation	\$599,409	\$1,606,397	
Prior Year Approved C/O	\$0	\$0	
Prior Yr Excess Funds	\$0	\$0	
State Match	\$0	\$86,092	\$86,092
Prior Yr Approved State Match C/O	\$0	\$0	
Prior Yr State Match Excess Funds	\$0	\$0	
Local Public	\$272,658	\$2,353,609	
Local Private	\$52,830	\$621,157	
Income Client	\$34,763	\$272,798	
Income Other	\$50	\$97,234	
State COLA	\$10,000	\$165,628	\$165,628
NSIP	\$12,921	\$76,417	\$76,417
Allocation Total	\$982,631	\$5,279,332	

Actual contract Allocation (Entered by DACS)	\$927,546	\$1,934,534
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Federal Fund Balance	\$0	\$0
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Total Funds From State:	\$1,934,534
Fund Balance:	\$0
Total New Funds:	\$1,934,534
Funds from Other Sources:	\$3,344,798
Total Funds Needed:	\$5,279,332



DACS12AAA002

SCHEDULE D - OFFICERS AND DIRECTORS LIST

List below the Name, Title, and Residence Address of all officers and board members of applicant.

Officer 1:

First Name: Robert
Last Name: Clifton
Title: Freeholder Director
Address 1: 237 Matawan Avenue
Address 2:
City: Matawan
State: New Jersey
Zip Code: 07747

Officer 2:

First Name: John
Last Name: Curley
Title: Freeholder Deputy Director
Address 1: 74 Berkshire Court
Address 2:
City: Red Bank
State: New Jersey
Zip Code: 07701

Officer 3:

First Name: Lillian
Last Name: Burry
Title: Freeholder
Address 1: 22 Woodland Drive
Address 2:
City: Colts Neck
State: New Jersey
Zip Code: 07722

Officer 4:

First Name: Amy
Last Name: Mallet
Title: Freeholder
Address 1: 11 Lewis Point Road
Address 2:
City: Fair Haven
State: New Jersey
Zip Code: 07704

Officer 5:

First Name: Thomas
Last Name: Arnone
Title: Freeholder
Address 1: 4 Oliver Drive
Address 2:
City: Neptune City
State: New Jersey
Zip Code: 07753



DACS12AAA002

SCHEDULE D - OFFICERS AND DIRECTORS LIST

List below the Name, Title, and Residence Address of all officers and board members of applicant.

Officer 1:

First Name: Thomas
Last Name: Pivinski
Title: Executive Director, Monmouth County Ofc. on Ag
Address 1: 1607 Emory Street
Address 2:
City: Asbury Park
State: New Jersey
Zip Code: 07712

Officer 2:

First Name: Ron
Last Name: Griffiths
Title: MC OOA Advisory Council Chairman
Address 1: 86 East Main Street
Address 2:
City: Freehold
State: New Jersey
Zip Code: 07728

Officer 3:

First Name:
Last Name:
Title:
Address 1:
Address 2:
City:
State: New Jersey
Zip Code:

Officer 4:

First Name:
Last Name:
Title:
Address 1:
Address 2:
City:
State: New Jersey
Zip Code:

Officer 5:

First Name:
Last Name:
Title:
Address 1:
Address 2:
City:
State: New Jersey
Zip Code:



DACS12AAA002

SCHEDULE G - CERTIFICATION REGARDING DEBARMENT AND SUSPENSION

In accordance to Federal Executive Order 12549, "Debarment and Suspension", the undersigned certifies, to the best of his or her knowledge that as an applicant, this agency or its key employees:

- a. are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transaction by any Federal Department or agency, or by the State of New Jersey;
- b. Have not within a 3-year period preceding this application been convicted of or had a civil judgement rendered against them for commission of fraud or a criminal offense, in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or Local) transaction or contact under a public transportation; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property.
- c. are not presently indicted or for otherwise criminally or civilly charged by a governmental entity (Federal, State, or Local) with commission of any offenses enumerated in paragraph b) of this certification; and
- d. have not within 3-year period preceding this application had one or more public transactions (Federal, State, or Local) terminated for cause or default.

The applicant agrees that by submitting this application, it will obtain from all its subgrantees a certification that includes without modification paragraphs (a), (b), (c), (d), of this certification in accordance with Federal Executive Order 12549.

By Checking this box you certify that the above information is correct to the best of your knowledge.

Name of Official certifying for Agency

Thomas Pivinski

Title

Executive Director



DACS12AAA002

SCHEDULE H - CERTIFICATION REGARDING LOBBYING

The undersigned certifies, to the best of his or her knowledge that:

- a. No grant funds awarded from State and/or Federal appropriations have been paid or will be paid, by or on behalf of the grantee, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any grant, the making of any loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any grant, loan, or cooperative agreement.
- b. If any funds other than State and/or Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this, grant, loan, or cooperative agreement, the grantee shall complete and submit the Standard Form-LLL, "Disclosure Form to Report Lobbying", in accordance with its instructions.
- c. The grantee shall require that the language of this compliance requirement (certification) be included in the award documents for all subawards at all tiers (including subcontracts, subgrants and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

The requirement (certification) is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

By Checking this box you certify that the above information is correct to the best of your knowledge.

Name of Official certifying for Agency

Thomas Pivinski

Title

Executive Director



SCHEDULE I - CERTIFICATION SHEET

- Yes N/A I certify that this agency will comply with the Terms and Conditions for Administration of Grants and the applicable Cost Principles.
- Yes N/A I have read the Certification Regarding Debarment and Suspension (Schedule G of the Application for Grant Funds) and certify to the best of my knowledge that as an applicant this agency and its key employees are in compliance with this requirement. I will also obtain such certification from all subgrantees in accordance with Federal Executive Order 12549. This form will be maintained on file in the agency's office.
- Yes N/A I have read the Certification Regarding Lobbying (Schedule H of the Application for Grant Funds) and, to the best of my knowledge, certify that this agency is in compliance. This form will be maintained on file in the agency's office.
- Yes N/A I have read the Certification Regarding Environmental Tobacco Smoke (Schedule K of the Application for Grant Funds) and have determined that the provisions of the pro-children Act of 1994 apply to this agency and to the best of my knowledge, certify that this agency is in compliance with the requirements of the Act and will not allow smoking within any portion of any indoor facility used for the provision of services for children as defined by the Act. This form will be maintained on file in the agency's office.
- Yes N/A I understand that my payments will depend on timely submission of all reports.
- Yes N/A I certify that the listing of the Officers and Directors and their addresses are correct and current. All changes in Officers and Directors, must updated and reported within 10 working days.
- Yes N/A I have completed and submitted the Agency Minority Profile (Schedule J of the Application for Grant Funds) at least one time during the past two years.
- Yes N/A The Statement of Local Governmental Public Health Partnership (Page 2 of the Application for Grant Funds) has been sent to the Local Governmental Public Health Partnership Chairperson (or Local Health Officer, if applicable) for signature on the date of our submission of the application to the New Jersey Department of Health and Senior Services.
- Yes N/A I certify that this agency is not delinquent on any Federal or State debt.
- Yes N/A As a non-profit corporation, I certify that this agency has 501(c)(3) status as required by the Internal Revenue Service and is registered as a charitable organization in accordance with N.J.S.A. 45:17A-18 et seq.
- Yes N/A I have read, understand, and will comply with the instructions received with the grant application package.

Name of Official certifying for Agency

Thomas Pivinski

Title

Executive Director



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SCHEDULE J - AGENCY MINORITY PROFILE

The Department's Office of Minority Health has defined "minorities" as the four major race/ethnic minority populations (African Americans, Latinos/Hispanic, Asian/Pacific Islanders and American Indians/Eskimos) as well as linguistic minority populations who are either non-English speaking or have limited English proficiency.

Complete this form if your agency is requesting funds from this Department for the first time or has not received funds in the last two (2) years from the Department.

1. Is this a **minority-managed** organization?

Yes No

a. If Yes, place a check in the applicable box(es).

- Black/African American
- Hispanic/Latino
- American Indian
- Asian/Pacific Islander
- White, Not of Hispanic Origin
- Other

2. Is this agency serving a large minority population?

Yes No

a. If Yes, place a check in the applicable box(es).

- Black/African American
- Hispanic/Latino
- American Indian
- Asian/Pacific Islander
- White, Not of Hispanic Origin
- Other

3. Indicate all of the languages in which services are being provided by this organization, by placing a check in each applicable box:

- English
- Spanish
- French
- Creole
- Other



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SCHEDULE K - CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE

Public Law 103-227, also known as the Pro-Children Act of 1994 (act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, early childhood development services, education or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or Local Governments, by Federal grants, contract loan or loan guarantee. The law also applies to children's services provided in indoor facilities that are constructed, operated, or maintained with such federal funds. The law does not apply to children's services provided in private residences; portions of facilities used for inpatient drug or alcohol treatment service providers whose sole source of applicable Federal funds is Medicare or Medicaid; or facilities where WIC coupons are redeemed. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1000 for each violation and/or the imposition of an administrative compliance order on the responsibility entity.

Name of Official certifying for Agency

Thomas Pivinski

Title

Executive Director



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REQUIRED ATTACHMENTS

NOTE: SAGE only allows a maximum of 4MB of files to be uploaded each time you click SAVE. It is advised to SAVE after each file you select to upload.

ORGANIZATIONAL CHART 235940-Monmouth2011AAAOrganizationChart.pdf

NJ CHARITIES REGISTRATION

PROOF OF NON PROFIT STATUS (501C3)

COPY OF INTEREST BEARING BANK ACCOUNT STATEMENT 235940-InvestorsSavingsBankStatement.pdf

PROOF OF INDIRECT RATE 235940-proofofindirectrate.pdf

PROGRAM INCOME STATEMENT 235940-ParticipantIncomePolicy.doc

AUDIT ENGAGEMENT LETTER 235940-Hulsart.pdf

STAFF RESUMES 235940-MonmouthCountyAAAResumes.pdf

SALARY RANGES 235940-OfficeonAgingSalaryRanges.doc

SALARY POLICY 235940-e-mreSalaryPolicy.pdf

TRAVEL POLICY 235940-travelpolicy.pdf

TELEPHONE POLICY 235940-MonmouthCountyTelephonePolicy.pdf

MAINTENANCE AGREEMENTS

LEASE OR MORTGAGE DOCUMENT

INSURANCE POLICY 235940-MonmouthCountyInsurancePolicy.pdf

COST ALLOCATION PLAN

ESTIMATES FOR EQUIPMENT

COMPUTER SECURITY POLICY 235940-HIPAA.pdf

LINKAGE AGREEMENTS

CONSULTANT AGREEMENTS



NJDHSS NOTICE OF GRANT AWARD

1. Date Issued 1/30/2012

3. Grant Award No.

a. DACS12AAA002

2. Supersedes Award Notice Dated

b. Amendment No. 0

c. Payee Reference DACS12AAA002

Format: (XXXXXXXXXXXXX)

4. Title of Grant Award Area Agencies on Aging (AAA), Area Plan Contract (APC) 2012

5. Grantee

Monmouth County

Hall of Records One East Main Street PO

Box 1256

Freehold, NJ 07728-1256

7. Budget Period (Month/Day/Year)

From: 1/1/2012 Through: 12/31/2012

8. Project Period (Month/Day/Year)

From: 1/1/2012 Through: 12/31/2012

6. Vendor ID No.

216000881-00

10. Funding Authorization Number(s)

93.043

93.044

93.045

93.053

93.667

46.08142

93.778

93.052

9. Approved Budget

a. Grant Funds Only

b. Total Project Costs including grant funds and all other financial participation

11. Source of Funds

a. Grant Award \$1,934,534

b. Non-State Share* \$3,344,798

Total Award \$5,279,332

12. Award Computation for Grant

a. Amount of Financial Assistance \$1,934,534

b. Less Unobligated Balance from Prior Budget Periods

c. Less Cumulative Prior Award(s) This Budget Period

d. **AMOUNT OF THIS ACTION \$1,934,534**

* Must meet all matching or cost Participation requirements. Subject to adjustment in accordance With DHSS policy.

13. This grant is subject to the terms and conditions incorporated either directly or by reference in the following:

- a. Attachment A - Additional Grant Provisions
- b. Attachment B - Approved Budget
- c. Attachment C - Program Specifications

The Grantee's Terms and Conditions for Administration of Grants is referenced in this grant. Acceptance of the grant terms and conditions is acknowledged by the grantee when funds are obtained from the grant payment system.

14. Remarks (Other Terms and Conditions Attached: Yes No)

Program Management Officer

Name: Tina Zsenak

Phone: 609 943 4037

Email: tina.zsenak@doh.state.nj.us

Grants Management Officer

Name: Anthony Garofalo

Phone: 609 943 3354

Email: anthony.garofalo@doh.state.

15. Approved by the New Jersey Department of Health and Senior Services Official, Walter C. Valora, Grant Approval Officer on 1/30/2012



NOGA ACCOUNT INFORMATION

<u>SPENDING PLAN NUMBER</u>	<u>ACCOUNT NUMBER(S)</u>						<u>AMOUNT(S)</u>
	FY - FUND	-AGCY-	ORG	- APU -	OBJ	- REPCAT	
12-91-AAA	12-100	- 046	- 4144	- 262	- 6110	- 12B	\$321,463
12-91-AAA	12-100	- 046	- 4144	- 061	- 6110	- 12C1	\$340,291
12-91-AAA	12-100	- 046	- 4144	- 061	- 6110	- 12C2	\$194,364
12-91-AAA	12-100	- 046	- 4144	- 265	- 6110	- 12D	\$18,185
12-91-AAA	12-100	- 046	- 4144	- 331	- 6110	- 12E	\$132,685
12-91-AAA	12-100	- 046	- 4144	- 228	- 6110	- STMO	\$86,092
12-91-AAA	12-100	- 046	- 4144	- 397	- 6110	-	\$26,477
12-91-AAA	12-491	- 046	- 4144	- 080	- 6110	-	\$30,429
12-91-AAA	12-491	- 046	- 4144	- 077	- 6110	-	\$36,200
12-91-AAA	12-100	- 046	- 4144	- 226	- 6110	-	\$39,158
						TOTAL:	\$1,225,344



NOGA ACCOUNT INFORMATION

<u>SPENDING PLAN NUMBER</u>	<u>ACCOUNT NUMBER(S)</u>						<u>AMOUNT (S)</u>
	FY - FUND	-AGCY-	ORG	- APU -	OBJ	- REPCAT	
12-91-AAA	12-100	- 046	- 4144	- 228	- 6110	-	\$62,100
12-91-AAA	12-491	- 046	- 4144	- 076	- 6110	-	\$8,927
12-91-AAA	12-100	- 046	- 4144	- 244	- 6110	- 5752	\$86,971
12-91-AAA	12-100	- 046	- 4144	- 248	- 6110	-	\$298,004
12-91-AAA	12-100	- 046	- 4144	- 227	- 6110	-	\$149,030
12-91-AAA	12-100	- 046	- 4144	- 371	- 6110	- MEDB	\$27,741
12-91-AAA	12-100	- 046	- 4144	- 049	- 6110	- 12IP	\$76,417
	-	-	-	-	-	-	
	-	-	-	-	-	-	
	-	-	-	-	-	-	
							TOTAL:
							\$709,190



ATTACHMENT A

I. The Terms and Conditions for Administration of Grants are hereby made a part of this award and contain the following requirements:

A. Administrative B. Compliance C. Audit

II. Budget Revision and Amendment

A. All budget revisions and amendments must be approved, in writing by the Grant Management Officer.

B. Refer to Subpart M of the Terms and Conditions for Administration of Grants for specific requirements when a Budget Revision or Modification is required.

III. Method of Payment

Cash payments will be provided to the Grantee based on:

On a scheduled advanced payment basis (see attached schedule of payments):

- Monthly Quarterly
- Cost reimbursement payments shall be made by the department on a Monthly basis upon submission of an expenditure report.
- Payments shall be made by the Department on a quarterly basis upon submission of a progress report. At the Department's discretion the final payment may be withheld pending receipt of final reports. This amount is not to exceed five (5) percent of the total grant amount.

IV. Financial and Performance Reporting

A. Interim expenditure reports shall be submitted on a Quarterly basis. These reports, certified by the Grantee's Chief Officer, Shall be submitted no later than ten (10) working days immediately following the end of the reporting period.

B. Performance reports shall be submitted on a Quarterly basis. These reports shall be submitted no later than 10 days working days after the end of each reporting period.

C. A final report shall be submitted by the grantee no later than 30 days after completion of the budget period or termination of the grant.

D All financial reports shall be prepared, in a manner consistent with the grantee's normal accounting records.

V. Other Grant Provisions

A. It is the Department understanding that the Grantee's fiscal year ends on 12/31 . Any change in the fiscal year must be reported immediately to the Department.

B. Grantee shall submit a copy of its audit report (single audit, program specific audit or financial audit) to the Department within nine months after the end of its fiscal year. The audit report shall be mailed to: New Jersey Department of Health and Senior Services, Grants Management and Review Program, PO Box 360, Trenton, NJ 08625-0360.

Failure to submit this report to the Department may result in termination or suspension of all grants to the grantee and the grantee may not be considered for any future funding. This requirement is in accordance with Subpart L of the Grantee's Terms and Conditions. Refer to this Subpart for exclusions from the single audit policy.

VI. Availability of Funds

A. The grantee recognizes and agrees that continuation of funding under a grant is expressly dependent upon the availability of funds to the Department appropriated by the State Legislature from State or federal revenue or such other funding sources as may be applicable. The Department shall not be held liable for any breach of this agreement, because of the absence of available funding appropriations.

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ATTACHMENT B-APPROVED OPERATING BUDGET

Agency: Monmouth County

County: Monmouth County

Title III Funding:

Funding Sources	Title III Admin	Title III B	Title III C1	Title III C2	Title III D Health Promotion	Title III D Med Mgmt	Title III E	Funds Total	MOE Req.	NSIP Approved Carry Over	NSIP Excess Funds	NSIP Fund Balance
New funds		\$321,463	\$340,291	\$194,364	\$13,421	\$4,764	\$132,685	\$1,006,988				
Administrative	\$100,696	(\$37,309)	(\$30,694)	(\$19,453)			(\$13,240)	\$0				
Allocation Transfer		\$57,082	(\$50,524)	(\$6,558)				\$0				
New Allocation	\$100,696	\$341,236	\$259,073	\$168,353	\$13,421	\$4,764	\$119,445	\$1,006,988				
Prior Year Approved C/O		\$0	\$0	\$0	\$0	\$0	\$0	\$0				
Prior Year Excess Funds		\$0	\$0	\$0	\$0	\$0	\$0	\$0				
State Match		\$46,034	\$0	\$0	\$0	\$252	\$39,806	\$86,092				
Prior Year Approved State Match C/O		\$0	\$0	\$0	\$0	\$0	\$0	\$0				
Prior Year State Match Excess Funds		\$0	\$0	\$0	\$0	\$0	\$0	\$0				
Local Public	\$301,910	\$1,570,502	\$13,565	\$175,246			\$19,728	\$2,080,951				
Local Private		\$76,958	\$165,078	\$314,000	\$8,947	\$3,344		\$568,327	\$2,462,356			
Participant Income		\$4,925	\$93,192	\$138,900	\$250	\$100	\$668	\$238,035				
Income Other		\$88,557	\$100	\$8,527				\$97,184				
State COLA		\$145,529		\$10,099				\$155,628				
NSIP			\$9,542	\$53,954				\$63,496		\$0	\$0	\$0
Allocation Total	\$402,606	\$2,273,741	\$540,550	\$869,079	\$22,618	\$8,460	\$179,647	\$4,296,701				

Actual Contract Allocation (Entered by DACS)		\$321,463	\$340,291	\$194,364	\$13,421	\$4,764	\$132,685	\$1,006,988				
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Federal Fund Balance		\$0	\$0	\$0	\$0	\$0	\$0	\$0				
State Match Fund Balance		\$0	\$0	\$0	\$0	\$0	\$0	\$0				

Non Title III Funding:

Funding Sources	SHTP Admin	SHTP Program	SSBG Admin	SSBG Program	SWHDM Program	Supp Home Deliver Meals	Care Coord CHQA	APS Program	Medicaid Match	CDSM - AoA	Disaster Relief Funding	Non-APC	Title VII
New funds		\$36,200		\$368,377	\$30,429	\$0	\$11,907	\$124,755	\$27,741	\$0	\$0	\$0	\$0
Administrative Allocation Transfer			\$27,265	(\$27,265)									
New Allocation		\$36,200	\$27,265	\$341,112	\$30,429		\$11,907	\$124,755	\$27,741		\$0		
Prior Year Approved C/O										\$0	\$0	\$0	\$0
Prior Yr Excess Funds									\$0	\$0	\$0	\$0	\$0
State Match													
Prior Yr Approved State Match C/O													
Prior Yr State Match Excess Funds													
Local Public		\$17,799	\$5,530	\$153,076	\$32,952		\$2,421				\$0	\$60,880	
Local Private		\$1,500		\$51,330							\$0		
Income Client		\$500		\$32,500	\$1,694								
Income Other				\$50							\$0		
State COLA				\$10,000							\$0		
NSIP				\$7,424	\$2,516								
Allocation Total	\$0	\$55,999	\$32,795	\$595,492	\$67,591	\$0	\$14,328	\$124,755	\$27,741	\$0	\$0	\$60,880	\$0
Actual contract Allocation (Entered by DACS)		\$36,200		\$368,377	\$30,429	\$0	\$11,907	\$124,755	\$27,741	\$0	\$0	\$0	\$0
Federal Fund Balance									\$0	\$0	\$0	\$0	\$0

Funding Sources	Fund Totals	Contract Totals	Actual Allocation (Entered by DACS)
New funds	\$599,409	\$1,606,397	
Administrative	\$0	\$0	
Allocation Transfer	\$0	\$0	
New Allocation	\$599,409	\$1,606,397	
Prior Year Approved C/O	\$0	\$0	
Prior Yr Excess Funds	\$0	\$0	
State Match	\$0	\$86,092	\$86,092
Prior Yr Approved State Match C/O	\$0	\$0	
Prior Yr State Match Excess Funds	\$0	\$0	
Local Public	\$272,658	\$2,353,609	
Local Private	\$52,830	\$621,157	
Income Client	\$34,694	\$272,729	
Income Other	\$50	\$97,234	
State COLA	\$10,000	\$165,628	\$165,628
NSIP	\$9,940	\$73,436	\$76,417
Allocation Total	\$979,581	\$5,276,282	

Actual contract Allocation (Entered by DACS)	\$927,546	\$1,934,534
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Federal Fund Balance	\$0	\$0
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Total Funds From State:	\$1,931,553
Fund Balance:	\$0
Total New Funds:	\$1,931,553
Funds from Other Sources:	\$3,344,729
Total Funds Needed:	\$5,276,282



Attachment C - Program Specifications

Attachment C Uploaded

Attachment C Addendum #1 (Optional)

Attachment C Addendum #2 (Optional)

Attachment C Addendum #3 (Optional)

Additional Information for Grantee Reference (Optional)

Attachment C Manually Input

GRANT PERIOD

The Area Plan Contract is a one year grant from January 1, 2012 through December 31, 2012.

PROGRAM SPECIFICATIONS

This grant follows the guidelines set forth under the Older Americans Act, and State regulations, Policies and Procedures, to provide home and community based services designed to prevent or delay nursing home placement,

These services include but are not limited to: information and access services; legal assistance, in-home services; care management; health and wellness programs; congregate and home-delivered nutrition services, and adult protective services.

It is understood that:

1. The Grantee may not make any changes to the approved 2012 Area Plan Contract without the Division's prior approval (as per policies and procedures). Any changes to the approved Area Plan Contract must be requested in SAGE.

2. No advance payments will be issued without a fully signed contract.

3. The Grantee shall submit a finalized Integrated Program Summary (IPS) form for each sub-grantee, no later than the first of February that consists of the program's

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txtAttachmentC continued

line item budget, funding source and service projections for the contract year. Revised IPSs must be submitted, via a revision request in SAGE, whenever changes are made to agreements.

IPS revisions -IPS revisions are due prior to November 15 of the contract year.

4. Financial and program reports are due quarterly by the 10th business day of the month following the end of the quarter, as specified in PM 99-2, III-2. Quarterly expenditure reports are to be submitted via SAGE. Quarterly program reports are to be submitted quarterly via SAMS. Revisions to quarterly financial and program reports must be submitted to the State Division by the deadline for the next quarters reports. Written requests for extensions must be submitted prior to the deadline. Advance payments will be withheld until quarterly financial and program reports are received, reviewed and approved by the Division of Aging and Community Services.

5. The program name, program code, service code(s), units of service, and clients served for each sub-grantee must be consistent in fiscal reports, program reports and contractual agreements. In addition, the Grantee will assure each sub-grantee employs acceptable procedures for counting and evaluating quality of units delivered and for identifying and counting new clients as well as reviewing for accuracy in each category in all reports submitted by each sub-Grantee.

6. The Grantee will monitor and document sub-grantees good standing and ability to provide funded programs and services to the target population in the planning and service area.



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ADVANCE PAYMENT SCHEDULE FOR GRANTS

Grantee Name
Monmouth County

Total Grant Amount
\$1,934,534

Vendor ID Number
216000881-00

Grant Period
From: 1/1/2012 Through: 12/31/2012

Amendment No. Interest Bearing Acct.
 Yes No

Release Date	Amount	Fiscal Year	Account Number					G/L Order Reference
			Org.	Appr. Unit	Act.	Obj.	Rep. Cat.	
1/2/2012	\$214,309	12	4144	262	J004	6110	12B	Title III B-Line16
1/2/2012	\$226,861	12	4144	061	J004	6110	12C1	Title III C1-Line 17
1/2/2012	\$129,576	12	4144	061	J004	6110	12C2	Title III C2-Line 18
1/2/2012	\$8,947	12	4144	265	J004	6110	12D	Title III D-Line 19
1/2/2012	\$3,176	12	4144	265	J004	6110	12D	Title III D Med Mgnt-Li
1/2/2012	\$88,457	12	4144	331	J004	6110	12E	Title III E-Line 21
1/2/2012	\$57,395	12	4144	228	J004	6110	STMO	Title III State Match-L
1/2/2012	\$20,286	12	4144	080	J004	6110		SWHDM-Line 3
1/2/2012	\$24,133	12	4144	077	J004	6110		SHTP-Line 4
1/2/2012	\$26,105	12	4144	226	J004	6110		APS-Line 5
1/2/2012	\$33,462	12	4144	228	J004	6110		APS-Line 6
1/2/2012	\$5,951	12	4144	076	J004	6110		APS-Line 7
1/2/2012	\$17,651	12	4144	397	J004	6110		APS-Line 8
1/2/2012	\$57,981	12	4144	244	J004	6110	5752	SSBG
1/2/2012	\$187,604	12	4144	248	J004	6110		SSBG-Line 9
1/2/2012	\$11,065	12	4144	248	J004	6110		COLA-Line 11
1/2/2012	\$99,354	12	4144	227	J004	6110		COLA-Line 13
1/2/2012	\$7,938	12	4144	228	J004	6110		CARE COORD-Line 14
1/2/2012	\$18,494	12	4144	371	J004	6110	MEDB	MEDICAID MATCH-Line 15
1/2/2012	\$50,945	12	4144	049	J004	6110	12IP	NSIP-Line 22
	\$0							
	\$0							
	\$0							
	\$0							
	\$0							



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ADVANCE PAYMENT SCHEDULE FOR GRANTS

Grantee Name
Monmouth County

Total Grant Amount
\$1,934,534

Vendor ID Number
216000881-00

Grant Period
From: 1/1/2012 Through: 12/31/2012

Amendment No. Interest Bearing Acct.
 Yes No

Release Date	Amount	Fiscal Year	Account Number					G/L Order Reference
			Org.	Appr. Unit	Act.	Obj.	Rep. Cat.	
4/26/2012	\$107,154	12	4144	262	J004	6110	12B	Title III B-Line 16
4/26/2012	\$113,430	12	4144	061	J004	6110	12C1	Title III C1-Line 17
4/26/2012	\$64,788	12	4144	061	J004	6110	12C2	Title III C2-Line 18
4/26/2012	\$4,474	12	4144	265	J004	6110	12D	Title III D-Line 19
4/26/2012	\$1,588	12	4144	265	J004	6110	12D	Title III D Med Mgnt-Li
4/26/2012	\$44,228	12	4144	331	J004	6110	12E	Title III E-Line 21
4/26/2012	\$28,697	12	4144	228	J004	6110	STMO	Title III State Match-L
4/26/2012	\$10,143	12	4144	080	J004	6110		SWHDM-Line 3
4/26/2012	\$12,067	12	4144	077	J004	6110		SHTP-Line 4
4/26/2012	\$13,053	12	4144	226	J004	6110		APS-Line 5
4/26/2012	\$16,731	12	4144	228	J004	6110		APS-Line 6
4/26/2012	\$2,976	12	4144	076	J004	6110		APS-Line 7
4/26/2012	\$8,826	12	4144	397	J004	6110		APS-Line 8
4/26/2012	\$28,990	12	4144	244	J004	6110	5752	SSBG
4/26/2012	\$93,802	12	4144	248	J004	6110		SSBG-Line 9
4/26/2012	\$5,533	12	4144	248	J004	6110		COLA-Line 11
4/26/2012	\$49,676	12	4144	227	J004	6110		COLA-Line 13
4/26/2012	\$3,969	12	4144	228	J004	6110		CARE COORD-Line 14
4/26/2012	\$9,247	12	4144	371	J004	6110	MEDB	MED-Line 15
4/26/2012	\$25,472	12	4144	049	J004	6110	12IP	NSIP-Line 22
	\$0							
	\$0							
	\$0							
	\$0							
	\$0							

November 30, 2012

Monmouth County

Hall of Records One East Main Street PO Box 1256

Freehold, NJ 07728-1256

Phone: (732) 431-7391

Fax: (732) 409-4824

Grant No: DACS12AAA002

In accordance with Subpart U of the Terms and Conditions for Administration of Grants, the Office of Financial Services is providing this correspondence as a reminder that the above referenced grant(s) terminates on 12/31/2012 . To finalize this grant, the required close-out documents listed below need to be submitted via New Jersey's SAGE site as prescribed on Attachment A of the grant award.

- A final Report of Grant Expenditures. If this report is not submitted within the required period and extension of time for submitting this report has not been granted, you could be at risk of not being reimbursed for expenses incurred.
- A final Payment Voucher, if required.
- A Statement of Equipment Inventory.
- A Program Income Statement, if required.
- Statements related to royalties, inventories and copyrights, if required.
- A final Progress Report, if required.

If your grant was provided with cash advances and these amounts exceed the final expenditures, this cash balance must be returned to the granting agency with the submission of a final Report of Grant Expenditures.

If you have questions concerning this matter, please contact your Grants Management Officer or Program Management Officer directly. Please include your grant number in all correspondence.

Program Management Officer

Name: Tina Zsenak
Phone: 609 943 4037
Email: tina.zsenak@doh.state.nj.us

Grants Management Officer

Name: Anthony Garofalo
Phone: 609 943 3354
Email: anthony.garofalo@doh.state.nj.us