

CONTRACT FOR SERVICES

SECTION I: PARTIES TO THE CONTRACT

CITY OF PORTLAND ("City"), City Hall, 1220 S. W. Fifth Avenue, Portland, Oregon 97204, and

URBAN LEAGUE OF PORTLAND, 718 West Burnside, Suite 404, Portland, Oregon 97209

SECTION II: CONTRACT SUMMARY

Contractor agrees to provide information, referral, case management, and support services to elderly residents in the Near Northeast Senior Service District in Portland/Multnomah County and further agrees that the total cost shall not exceed the sum of \$116,093.

SECTION III: PERIOD OF PERFORMANCE

Performance under this contract shall commence July 1, 1980, and continue through June 30, 1984, unless extended by City Council action. Activities and budget shall be negotiated annually.

SECTION IV: AGREED CONTRACTOR: PROJECT OPERATION

- A. Contractor shall by June 30, 1981, meet all goals and objectives stated in the "Project Narrative" (Exhibit A, hereby incorporated by reference).
- B. Contractor shall ensure that no portion of this contract shall in any way discriminate against, deny benefits to, deny employment to, or exclude from participation any persons on the grounds of race, color, national origin, religion, age, sex, handicap, marital status, sexual preference, political affiliation or belief; and that it shall target these services to those most in need.
- C. Contractor shall provide a minimum 10% cash match to discretionary services (\$5,802) as approved in the budget (refer to Exhibit B). Failure to meet this requirement shall result in a reduction of budget or termination of contract.
- D. Contractor shall retain client records for a minimum of five years and shall make said documents available at all reasonable times to the City, or its duly authorized representative, for evaluation through inspection of the quality, appropriateness, and timeliness of services.

- E. The use or disclosure by any party of any information concerning a recipient of services purchased under this contract, for any purpose not directly connected with the administration or program evaluation of the City, is prohibited except on written consent of the recipient or the recipient's attorney.

SECTION V. CONTRACTOR REPORTING AND RECORD REQUIREMENTS

- A. Contractor shall use the standardized forms provided by the City for reporting purposes (Exhibit C., hereby incorporated by reference). If additional forms are deemed necessary, said forms shall be developed through negotiation.
- B. Required program reports shall be submitted by 3:00 p.m., of the 5th working day of each month. Reports shall be completed accurately in conformance with the guidelines and monitoring directions provided by the City. Program reports which are not received by the time specified shall result in delayed reimbursement.
- C. Contractor shall submit to the City, a final "Director's Narrative Report" within forty-five (45) days of the conclusion of the Project covered by this contract. The report should identify problems corrective action taken, requests for technical assistance, any plans for seeking/securing other resources, and any concerns relative to the City's performance.
- D. Contractor shall maintain for a minimum of three (3) years all fiscal and program reports, including statistical records, and shall provide these reports at times and in the form prescribed by the City. In the event of dissolution of the corporation within the specified time, said records shall be turned over to the City Auditor.
- E. Contractor shall submit to the City copies of all requests for federal, state, or local grants that affect the services provided under this contract prior to submitting the request to the funding source.
- F. Contractor shall provide for program and facility reviews, including meetings with consumers, reviews of service and fiscal records, policies/procedures, staffing patterns, job descriptions, and meeting with any staff directly or indirectly involved in the performance of this contract at any reasonable time on request of and by persons authorized by the City.

- G. Contractor shall submit to the City one (1) copy of all formal documents produced under this contract.
- H. Contractor shall provide proof of its timely payment of withholding taxes, unemployment taxes, and SAIF.
- I. Contractor shall submit to the City, prior to commencement of this contract except where one is already on file, its current:

- personnel policy which sets forth procedures for hiring, firing, grievances; and identifies all paid holidays;

- list of names and signatures of persons authorized to act as the Contractor's agents;

- articles of incorporation and by-laws; and

- list of board of directors and advisory council members.

Contractor further agrees to submit any changes in these documents to the City within thirty (30) days of their effective dates.

SECTION VI: AGREED CITY

- A. City shall provide technical assistance upon written request of the Contractor.
- B. City shall provide all required reporting forms to the Contractor.
- C. City shall monitor the project based on all of the provisions as set forth in this contract.
- D. City shall give Contractor written notification of problem areas related to the performance of this contract, including requirements for corrective action.
- E. City may conduct at least one contractor meeting per month.
- F. City shall conduct training sessions as necessary to ensure quality delivery services and effective program management.
- G. City shall conduct on-site contract and facility reviews on a quarterly basis. On-site monitoring shall be pre-arranged with each Contractor.
- H. City shall process monthly reimbursement requests and contract amendments in a timely manner.

SECTION VII: COMPENSATION - METHOD OF PAYMENT

- A. Total compensation under this contract shall not exceed \$116,093.
- B. An advance shall be made to cover the cost of the Contractor's initial expenses for operation, not to exceed the sum of \$19,349 upon receipt of a written request from the Contractor.
- C. The additional amounts due after the initial advance shall be reimbursed upon receipt of the required Accounting Report Forms (refer to Exhibit C), the original with appropriate documentation attached. All reimbursement documents shall be received by the fifteenth (15th) working day of each month. Reimbursements not received by the specified time shall be delayed and processed for payment the following month, or may result in termination of the contract. Payments shall also be held if the required program reports are not received by the specified time.
- D. All final reimbursement documents shall be received within forty-five (45) days following the end of the budget period. Final reimbursement documents not received within the specified time period shall not be processed, and the expense shall be the sole responsibility of the Contractor.
- E. Advances shall be recovered against expenditures in accordance with an established schedule developed and distributed by the City.
- F. All payments made pursuant to this contract are subject to post audit. The City shall perform spot audits at their discretion any time during the contract period. Contract costs disallowed by the City shall be the sole responsibility of the Contractor. If a contract cost is disallowed after reimbursement has occurred, the Contractor shall promptly repay the City.
- G. All funds received from the City shall be used by the Contractor as set forth in the budget (refer to Exhibit B). Funds not used shall be returned promptly to the City at the end of the budget period. Any costs incurred by the Contractor over and above the agreed sums, as set out in the budget, shall be at the sole risk and expense of the Contractor.
- H. The operating budget may be amended, provided the full cost does not exceed the amount stated in the contract. Budget amendments shall not become effective until the Commissioner-in-Charge has given written approval and filed the approved document with the City Auditor.

Budget overruns of five percent (5%) or \$1,000, whichever is less, are allowable without a budget amendment on all line items within the Materials and Services category, excluding Out-of-Town Travel. These line item overruns shall be compensated for within the same category.

- I. Budget amendments shall not be accepted during the last quarter of the budget period (April 1 through June 30).
- J. All items with a purchase price of one hundred dollars (\$100) or more hereunder shall be purchased in the name of the City. Such purchases shall be for cash and not include any credit terms, and shall be reported to the City within ten (10) days (refer to Exhibit C), tagged by the City, included in the City's Property Control, and shall be the property of the City. Contractor shall maintain an acceptable and current log of this property and property acquired under previous contracts with the City. All non-expendable items shall be returned to the City within ten (10) days after the contract has terminated.
- K. Contractor shall also maintain a current and acceptable log of all non-consumable supplies purchased under this contract. Non-consumable means items with a minimum value of \$25.00 per item and a maximum value of \$99.99 per item purchased under this contract. All such items shall also be returned to the City within ten (10) days after the contract has terminated.

SECTION VIII: GENERAL CONDITIONS

- A. Contractor shall abide by all federal, state, and local regulations/policies governing project operations, management, and service delivery. The funds shall be used for the purpose for which they are provided.
- B. Prior to commencement of this contract, Contractor shall deliver to the City Auditor evidence:
 - (1) that all persons handling funds received or disbursed under this contract are covered by a Fidelity Bond in the amount of \$10,000 or 100% of the estimated sixty (60) day cash flow, whichever is less;
 - (2) of a Standard Liability Insurance Policy in the single limit amount of \$300,000 and provide the City Auditor with an endorsement thereto, naming the City as an additional insured and protecting the City, its agents and employees from claims for damages arising in whole or in part out of the performance of this contract;

- (3) that all property and equipment purchased or received by the Contractor pursuant to this contract is insured against fire, theft, and destruction; and
- (4) that the above policies of insurance are in force and shall not be cancelled without thirty (30) days prior notice to the City.

If approved as self-insured by the City Attorney, the Contractor shall deliver to the City Auditor, in lieu of a Standard Liability Insurance Policy, evidence that they agree to hold harmless, defend and indemnify the City, its agents and employees from any and all claims for damages arising in whole or in part out of the performance of this contract.

If the Contractor enters into more than one (1) contract with the City, insurance and bonding shall be furnished, together with the proper endorsements for each separate contract. Failure to maintain current insurance, bonding and proper endorsements for each separate contract shall result in the withholding of payment to the Contractor or the termination of the contract.

- C. The term "approval by the City" means written approval by the Executive Director and/or the Commissioner-in-Charge of the Human Resources Bureau. Unless otherwise specified, documents submitted to the City shall be regarded as received when delivered to the Human Resources Bureau.
- D. Compensatory time accrued by any employee performing services under this contract shall be taken within the budget period to be charged as a contract cost. Time not taken within this period shall become the sole risk and expense of the Contractor. This condition only applies if compensatory time is indicated in the Contractor's approved personnel policies and procedures.
- E. Upon termination (cash out) of any employee performing services under this contract, a maximum of two weeks accrued vacation time shall be an allowable reimbursement cost. Time in excess of the two weeks maximum shall be the sole responsibility of the Contractor.
- F. It is expressly understood and agreed by both parties hereto that the City is contracting with the Contractor as an Independent Contractor and that the Contractor, as such, agrees to hold the City harmless and to indemnify it from and against any and all claims, demands, and causes of action of every kind and character which may be asserted by any third party arising out of, or in connection with, the services to be performed by the Contractor under this contract.

SECTION IX: SPECIAL CONDITIONS

- A. The staff supervisor, given reasonable notice, shall attend training sessions and meetings and participate in other activities as required by the City to a maximum of three sessions (24 hours) per month.
- B. Other staff hired under this contract shall participate in such training sessions, meetings and other activities as required by the City to a maximum of two sessions (sixteen hours) per month.
- C. The Contractor shall assure that older persons shall not be discriminated against and that older persons shall be employed on a part-time and full-time basis in carrying out programs, to the degree feasible and subject to the provisions of approved personnel policies.
- D. The Contractor shall conform to the client representative policy and the client confidentiality policy as set forth by the City.
- E. In performance hereof, the Contractor shall comply with the provisions of the "Nondiscrimination on Basis of Handicap" Section 504 of the Rehabilitation Act of 1973 (refer to Exhibit "A," Attachment 8).
- F. The Contractor agrees to submit documentation as required by the City to support waivers of contract policies and requirements granted by the City.
- G. The Contractor shall use the service definitions as set forth by the City and standardized reporting forms as developed and provided by the City.
- H. The Contractor shall employ City descriptions, policies, and procedures for the delivery, utilization, and coordination of information, referral, case management, escort, transportation, homemaker, housekeeper, legal, nutrition, and other contracted service provided as part of the Portland/Multnomah County Area Agency on Aging Service System.
- I. The Contractor shall complete the client tracking system forms for all clients accepted for case management services, which includes the client information form, the needs assessment form, and the client service form to be submitted to the City by 3:00 p.m., on the 5th working day of each month.
- J. The Contractor shall conform to state, federal, and local laws and city policies and procedures governing service delivery and eligibility for service.

- K. The Contractor shall provide information services upon request. In the event a client needs extended services and/or case planning, then the client is to be referred to the District Area Agency on Aging Contractor responsible in accordance with established Aging Services District boundaries.
- L. The Contractor shall serve all eligible clients within their boundaries and shall not solicit clients outside those boundaries. If the client wishes to be served by a contractor from another district, the situation will be documented and a letter of agreement signed on the transfer of the client between the two contractors. A request for waiver shall be submitted prior to transfer.
- M. The Contractor shall enter into written agreements with other service providers with the Portland/Multnomah County Area Agency on Aging Service System as directed by the City to specify and clarify procedures of coordination.
- N. The Contractor shall give preference in the delivery of services to older persons with the greatest economic or social need in accordance with priorities and definitions provided by the City. The methods for giving preference may not include use of a means test.
- O. The Contractor shall assure that all older persons in the Aging Services District have reasonably convenient access to information and referral services.
- P. The Contractor shall, in the event resources are not available to provide a service, document the situation, inform the person of the problem and place the person on a waiting list, prioritizing clients relative to those in greatest need of said services. Documentation shall be submitted quarterly to the City.
- Q. The Contractor must:
- (1) provide each older person with a free and voluntary opportunity to contribute to the cost of the service.
 - (2) protect the privacy of each older person with respect to his/her contribution.
 - (3) establish appropriate procedures to safeguard and account for all contributions; and
 - (4) use all contributions to expand the services of the Contractor under this section.

Contractor must use all contributions to increase the number of meals served. The Contractor further:

- (5) may develop a suggested contribution schedule for services provided under this section. In developing a contribution schedule, the Contractor must consider the income ranges of older persons in the community, and the Contractor's other sources of income;
 - (6) must assure that no older person is denied a service because the older person will not or cannot contribute to the cost of the service; and
 - (7) must assure that contributions made by older persons are considered program income.
- R. The Contractor assures that federal funds under this contract are not used to replace funds from non-federal sources and agrees to continue or to initiate efforts to obtain support from private sources and other public organizations for services funded through this contract.
- S. The Contractor shall support an advisory committee which meets at least bi-monthly and which meets the following criteria;
- (a) The membership shall be broadly representative of the elderly population of the Aging Services District and should include representatives of both sexes of major ethnic groups, as well as professionals, business, labor, government, education, volunteer, civic groups, and consumers of services.
 - (b) Persons age 60 or older shall make up more than fifty percent (50%) of the advisory committee membership.
 - (c) Members shall serve without pay and accrue no financial benefit as a result of membership on the advisory committee (does not preclude reimbursement for costs incurred).
 - (d) The Advisory Committee shall have written by-laws which shall include the responsibility (1) to advise the Contractor regarding policies, programs and actions affecting the delivery of services under this contract and (2) to review and comment on policies, programs, and actions of other agencies which affect older people residing in the Aging Services District.

- T. The Contractor shall provide the City with copies of the current advisory committee by-laws and a current list of advisory committee members, such documents to be sent to the City not more than sixty (60) days after execution of this agreement. The Contractor further agrees to submit any changes within thirty (30) days of their effective date.
- U. The Contractor shall submit to the City, minutes of the meetings of the district advisory committee within ten (10) working days after the meeting.
- V. The Contractor shall participate with the City in the ongoing development and implementation of a standardized information, referral, and case management system.
- W. The Contractor agrees that a request for modification which results in a reduction in the number or type of services may result in a reduction of funds available from the City under this contract.
- X. Contractor agrees to comply with Oregon Project Independence Administrative Rules for services funded under Project Independence and to utilize the established fee schedule and other policies and procedures established by the City for implementation of Oregon Project Independence requirements.

SECTION X: CONTRACT MODIFICATION

- . Contractor may request changes in the contract by submitting a written request in accordance with City procedures (refer to Exhibit C). Minor changes shall not become effective until approved by City Council, signed by the appropriate parties, and the approved document filed with the City Auditor.

SECTION XI: CONTRACT ASSIGNMENT

- A. The Contractor has been selected by the City for this work because of its particular experience in this program area. This contract is personal between the parties, and the Contractor shall not assign or sub-contract in whole or in part hereof without prior approval by the City.
- B. In the event the City decides to assign its interest in this contract, in whole or in part, the City shall give written notice of the assignment to the Contractor ten (10) days prior to the assignment.

SECTION XII: TERMINATION REMEDIES

- A. This contract may be terminated by either party at any time by giving a thirty (30) day advance notice by certified mail for failure or refusal of the other to perform faithfully the contract according to its terms.
- B. The contract may also be terminated at any time by the City by giving written notice if its federal, state, or local grants are suspended, modified, or terminated. In the event of termination, the Contractor shall be entitled to reimbursement for allowable costs incurred up to the date of termination indicated in the written notice.
- C. Nothing in this contract shall be construed to limit the City's legal contract remedies including, but not limited to, the right to sue for damages or specific performance should the Contractor materially violate any of the terms of this contract.

SECTION XIII: SIGNATURES

The parties witness their consent to be bound by all the terms of this contract, SECTIONS I through XII, by signing below.

APPROVED AS TO THE CONTENT

CONTRACTOR

By _____
Executive Director Date

By _____

APPROVED AS TO FORM

CITY OF PORTLAND

By _____
City Attorney Date

By _____

By _____

PROJECT APPLICATION SHEET

CITY OF PORTLAND HUMAN RESOURCES BUREAU		APPLICATION FOR PROJECT FUND	
1. Short Title of Project: (Do not exceed one typed line) Near/Northeast Aging District Service Center			
2. Type of Application (Check One) New Project <input checked="" type="checkbox"/> Continuing Project <input type="checkbox"/> Revision of Cont. Proj. <input type="checkbox"/>			
3. Responsible HRB Division Social Service/AAA		4. Contract Period From <u>7/1/80</u> to <u>6/30/84</u>	
5. Budget Period From <u>7/1/80</u> to <u>6/30/81</u>		6. City Support Requested \$ <u>116,093</u>	
7. Applicant Agency (Name, address & telephone) Urban League of Portland 718 West Burnside, Suite 404 224-0151		8. Project Director (Name, address & telephone) Mrs. Barbara A. Bivens 4815 NE 7th Avenue 288-8338	
9. Financial Officer (Name, address & telephone) Mr. Edward Barton Urban League of Portland 718 W. Burnside Rm 404 Portland, OR 97209 224-0151		10. Official Authorized to Bind Agency (Name, address & telephone) Freddie Petett, Executive Director Urban League of Portland 718 West Burnside - Rm. 404 Portland, Oregon 97209 224-0151	
11. Project Summary: Summarize, in approximately 200 words, the project plan presented in application, briefly covering project goals, objectives, strategy, target population and administration.			

The goal of the Urban League Aging Program is to provide a community based facility where access to needed services and activities of elderly residents in the Near/Northeast Service area can be obtained in order to assist those elderly residents to remain in their current domiciles (or to obtain adequate shelter facilities) on an independent status as possible for as long as possible.

The Urban League Aging Program for 7/1/80 to 6/30/81 will provide access to needed services by: a) Dispensing information through a newsletter to approximately 900 elderly residents residing within the geographic boundaries of the Project; and brochures, flyers and other related printed matter; such materials designed to inform elderly persons of services available to them; b) seeking out and accepting as referrals 339 elderly persons in need of case management services as defined by the City of Portland; c) increasing awareness of and access to such services as required by area elderly through the maintenance of a full-time information and referral specialist, available for both telephone, correspondence and walk-in request received by the Project; d) by providing an array of supportive services designed to facilitate accessibility to recognized resources on behalf of case management clients; e) by providing an array of supportive services to any elderly resident in the service area designed to reduce social isolation and bring them to a fuller life through appropriate activities.

In order to accomplish this, there is one Project Director, one Counselor III, one I & R Specialist, two Counselors I, one Outreach Specialist and one Secretary. The staff will be further augmented by Urban League executive staff, and the Board of Directors which is the policy making body and the District Advisory Committee which acts as a community based organization providing advisory assistance to the project.

PROJECT NARRATIVE Exhibit A

1. Statement of Problem/Documentation of Need: (Provide a concise description of the conditions and problems to be addressed by the project. Quantifiable, measurable terms should be used. Verify that the problem exists with documentation.)

Elderly persons often experience a wide arrange of problems related to physical and financial decline associated with old age. Isolation and withdrawal contribute to senility, alchoholism and mental disturbance, often in depressed states they commit suicide by starving themselves to death. Lack of recreational activities with peers outside the home is limited, little if any exposure to educational service is used and the elderly resident soon feels worthless and unwanted. To remain mentally and physically alert, elderly residents need to keep mind and body active and continue to be exposed to new trends in life styles. Further reciprocal relationships need to be maintained in which elderly residents are givers as well as receivers.

Many elderly residents, especially poor and or minority, wish to retain their dignity at all costs and requesting assistance appears to be difficult for some, impossible for others, thus needs such as nutrition and medical go unmet, sometimes causing early insititutionalization, sometimes death, but always suffering.

A special segment of the population designated as frail elderly (suffering from two or more physical or mental impairments) requires special programs because they are not only aged but are suffering from other age-related ailments which limit their capacity to participate in programs. Efforts must be made to mainstream the frail elderly into all areas of life. For them, communicaiton with the outside world is life-line.

Federal guidelines direct that priority shall be given to the services which meet the needs of older persons who encounter social and economic barriers. Title V, Section 504 of the Rehabilitation Act of 1973 mandates that handicapped persons have access to all services and programs available.

The 1970 census data indicates that in service area #5, Near/Northeast Portland there are 13,969 residents, age 60 and older; of these 4,422 are aged 75 and older and 3,402 live alone, 1,077 are minority and 69 live in group facilities. Latest figures indicate that the older population, aged 65 and over, is the fastest growing segment currently comprised of 23 million citizens and an additional eight million have passed their 60th birthday.

As the number of seniors multiply, the number of needs grows as well. Certainly public funds are insufficient to meet all needs; private funds and natural support systems within families, neighborhoods, and communities must be tapped; however, federal, state and local dollars are needed to provide the tie to bind all available resources together.

2. Statement of Project Goals: (The project goal is a brief statement of the intent of the project to change, reduce or eliminate the problem identified above. The goal should relate to overall goal statement of HRB's Divisional Unit and to the general purpose of the project.)

To provide a community based facility where access to needed services and activities can be obtained in order to assist those elderly residents in Near/Northeast Portland in remaining in their current domiciles on as independent a status as possible for as long as possible. Services provided combined with the elderly resident's own resources will assist him/her in remaining in the home and available to the community to impart his/her invaluable support to younger generations.

Overall Area Agency on Aging Goal

To provide the leadership role in order to increase the level of community services for older people in Portland/Multnomah County to meet the basic needs of the elderly and promote independent and dignified living for elders through the processes of evaluating the service systems capacity to meet those needs and by advocating for such increases as necessary.

3. Statement of Objectives and Productivity Indicators: (Set forth, in measurable, timebounded statements the desired results of program operations. For each objective listed, state the productivity indicator, or unit of measurement, by which the objective can be evaluated.)

Objectives:	Productivity Indicators:
1. Maintain effective management of services provided for the elderly in the Near/Northeast Aging Service District through the accomplishment of activities listed in Section 4 during the period 7/1/80 - 6/30/81.	# and dates of activities listed in Section 4 accomplished.
2. Increase knowledge of services and resources available for elderly residents by providing information (simple)* and information (complex)* services in response to 4,150 requests during the period 7/1/80 - 6/30/81.	# of information (simple) services provided. # of information (complex) services provided.
3. Increase access to needed services among elderly residents through the provision of referral (simple)* and referral (complex)* services in response to 904 requests for assistance during the period 7/1/80 - 6/30/81.	# of referrals (simple)* services provided. # of referrals (complex)* services provided.
4. Maintain access to needed services for elderly residents by providing case management for 339 different individuals who meet the established criteria with an average monthly caseload of 191 persons in Level I and 64 persons in Level II during the period 7/1/80 - 6/30/81.	# of different persons with case plans # of different persons with overdue reassessments # of persons serviced in Level I # of persons serviced in Level II.
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3. Statement of Objectives and Productivity Indicators: (Set forth, in measurable, timebounded statements the desired results of program operations. For each objective listed, state the productivity indicator, or unit of measurement, by which the objective can be evaluated.)

Objectives:	Productivity Indicators:
<p>5. To ensure reasonable access to existing services to all Near/Northeast elderly and to provide back-up on behalf of casemanagement clients during the period 7/1/80 - 6/30/81 through the provision of:</p> <p>a) 400 hours of Consumer Assistance to 125 elderly residents</p> <p>b) 100 hours of Residential Displacement Counseling to 60 elderly residents</p> <p>c) 100 escort services to 95 elders</p> <p>d) 2,000 transportation scheduling services to 200 elderly;</p> <p>e) 750 hours of Supportive Counseling to 90 elderly residents</p> <p>f) 240 outreach contacts</p> <p>g) 2,400 telephone reassurance calls to 75 elderly residents</p> <p>h) 2,400 friendly visits to 100 clients</p> <p>i) 24 recreational activities to 200 elderly residents</p> <p>j) 12 escorted trips to 100 elderly residents</p>	<p># of ½ hours of Consumer Assistance # of elderly residents receiving Consumer assistance</p> <p># of ½ hours of Residential Displacement Counseling # of elderly residents receiving Residential Displacement Counseling</p> <p># of escort services # of elderly residents receiving escort services. # unduplicated clients</p> <p># of Transportation Scheduling Services # of elderly residents receiving Transportation Scheduling services</p> <p># of ½ hours of Supportive Counseling # of elderly residents receiving supportive counseling.</p> <p># of outreach contacts made</p> <p># of telephone reassurance calls # of elderly residents receiving telephone reassurance calls # unduplicated clients</p> <p># of friendly visits made # of clients receiving friendly visits # unduplicated clients</p> <p># of recreational activities # of elderly residents participating in recreational activities # unduplicated participants</p> <p># of trip # of participants for trip # unduplicated participants</p>
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3. Statement of Objectives and Productivity Indicators: (Set forth, in measurable, timebounded statements the desired results of program operations. For each objective listed, state the productivity indicator, or unit of measurement, by which the objective can be evaluated.)

Objectives:	Productivity Indicators:
<p>k) Develop resources for the provision of home repair and security, and yard work, such as</p> <ol style="list-style-type: none">1. CETA positions2. Volunteers3. Cooperative agreements with other agencies.	<p># work plan or written agreements # monthly progress statement</p>

Objective # 1 : (Restate Objective Here) Maintain effective management of services provided for elderly in Near/Northeast Aging Service District through the accomplishment of activities listed in Section 4 during the period July 1, 1980 through June 30, 1981. Personnel required: Project Director 23%, Secretary 40%, Finance Director 10%, Exec. Director 5.41%, Bookkeeper 10%.

No.	Activity	Completion Date	Measure of Activity Completion	Staff Assigned
1-1	Maintain personnel to provide effective management of services provided for the elderly in the Near/Northeast service district	Ongoing	Staff hired	Program Director
1-2	Develop and maintain individual job descriptions, maintain work programs, complete evaluations for all assigned personnel	Ongoing	Job descriptions developed, work programs maintained, evaluations completed.	Program Director
1-3	Attend such Area Agency on Aging Contractors' meetings and training session as required.	Ongoing	Attendance recorded by AAA	Staff
1-4	Process all Agency accounts paid out and accounts receivable, and maintain records of all budgetary transactions.	Ongoing	Agency accounts processed	Program Director Finance Director Bookkeeper
1-5	Maintain property records on all city inventory.			Program Director Finance Director Bookkeeper
1-6	Submit required program reports and invoices in the proper form and manner in accordance with all related special and general conditions as required.	Ongoing	Reports and invoices submitted	Program Director Finance Director Exec. Director Bookkeeper
1-7	Maintain staff support to an advisory committee	Ongoing	Staff support provided	Program Director

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4. Statement of Activities/Timelines/Staff Assigned for Each Objective: (List as many activities as necessary to outline the work product.)

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Objective # 1: (Restate Objective Here) Maintain effective management of services provided for elderly in Near/Northeast Aging Service District through the accomplishment of activities listed in Section 4 during the period July 1, 1980 through June 30, 1981.

No.	Activity	Completion Date	Measure of Activity Completion	Staff Assigned
1-8	Provide time for staff training in services, delivery techniques, case management, and information and referral service processes	Ongoing	<p>Staff will attend in-service training courses arranged by AAA.</p> <p>In-house training will be provided on a weekly basis.</p> <p>Outside agency personnel will be brought in to update staff on new and current resources available in the community.</p> <p>In-house procedures manual will be developed to ensure quality and consistency in all service delivery.</p>	Program Director

4. Statement of Activities/Timelines/Staff Assigned for Each Objective: (List as many activities as necessary to outline the work product.)

Objective # 2 : (Restate Objective Here) Increase knowledge of services and resources available for elderly residents by providing information (simple)* and information (complex)* in response to 4,150 requests for information and assistance during the period July 1, 1980 through June 30, 1981. Personnel required: Project Director 5%, Counselor III 7.5%, I & R Specialist 35%, one Outreach Specialist 15% one Secretary 20%.

No.	Activity	Completion Date	Measure of Activity Completion	Staff Assigned
2-1	Maintain personnel to provide information services.	Ongoing	Personnel hired and assigned duties.	Program Director
2-2	Provide staff direction/supervisor job descriptions and work programs, evaluate staff as prescribed in Objective #1	Ongoing	Weekly staff meetings held Weekly training sessions held. Job descriptions and work programs updated, evaluations completed.	Program Director
2-3	Maintain, in conjunction with other agencies providing I&R services an up-to-date file of services and resources available to elderly residents.	Ongoing	Files updated.	I & R Specialist Program Director
2-4	Provide a communication center whereby individuals may inquire about and receive information on services and resources available to elderly residents.	Ongoing	Requests received and responses given.	I & R Specialist
2-5	Provided written materials to community agencies and individuals informing them of services and resources available to elderly residents.	Ongoing	Community agencies and individuals knowledgeable of services.	Program Director I & R Specialist
2-6	Provide reports and maintain records on informational services to project administrator.	Ongoing	Reports filed with project administrator.	Program Director I & R Specialist
(concluded next page)				

Statement of Activities/Timelines/Staff Assigned for Each Objective: (List as many activities as necessary to outline the work product.)

Objective # 2 : (Restate Objective Here) Increase knowledge of services and resources available for elderly residents by providing information (simple)* and information (complex)* in response to 4,150 requests for information and assistance during the period July 1, 1980 through June 30, 1981.

No.	Activity	Completion Date	Measure of Activity Completion	Staff Assigned
2-7	Monitor information service to ensure contract compliance and quality of service as per AIRS standards.	Monthly	Reports reviewed and submitted to HRB	Program Director Counselor III
2-8	Recieve all inquiries from elderly residents and respond as appropriate	Ongoing	Inquiries received and responded to.	I & R Specialist Outreach Specialist Program Director Counselor III

4. Statement of Activities/Timelines/Staff Assigned for Each Objective: (List as many activities as necessary to outline the work product.)

Objective # 3 : (Restate Objective Here) Increase access to needed services among elderly residents through the provision of referral (simple)* and referral (complex)* services in response to 904 requests for assistance during period July 1, 1980 through June 30, 1981. Personnel required: Project Director 5%, Counselor III 7.5%, one I & R Specialist 45%, one Outreach Specialist 20%, one Secretary 10%.

No.	Activity	Completion Date	Measure of Activity Completion	Staff Assigned
3-1	Provide personnel to implement referral service.	Ongoing	Personnel hired and assigned duties.	Program Director
3-2	Provide staff direction/supervision update job description and work programs and evaluate staff as prescribed in objective #1.	Ongoing	Weekly staff meetings held, weekly training sessions held. Job descriptions and work programs updated, evaluations completed.	Program Director
3-3	Accept referrals from agencies individuals and other agency staff for elderly residents in need of referral services.	Ongoing	Referrals accepted and recorded.	Total Staff I & R Specialist- Primary
3-4	Implement the referral service by making appropriate referrals to service providers including advocacy and follow-up to ensure delivery.	Ongoing	Referrals made and recorded.	Total Staff I & R Specialist
3-5	Provide reports and maintain records on referral services to the project administrator.	Monthly	Reports filed with project administrator.	I & R Specialist Counselor III
3-6	Monitor referral service to ensure contract compliance and quality of service in accordance with AIRS standards.	Monthly	Reports reviewed and submitted to HRB.	I & R Specialist Program Director

4. Statement of Activities/Timelines/Staff Assigned for Each Objective: (List as many activities as necessary to outline the work product.)

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Objective # 4 : (Restate Objective Here) Maintain access to needed services for elderly residents by providing casemanagement for 339 different individuals who meet the established criteria with an average monthly caseload of 191 persons in Level I and 64 persons in Level II during the period July 1, 1980 through June 30, 1981. Personnel required: Project Director 28%, Counselor III 50%, two Counselors I 80%.

No.	Activity	Completion Date	Measure of Activity Completion	Staff Assigned
4-1	Maintain personnel to provide case management services.	Ongoing	Personnel assigned.	Program Director
4-2	Provide personnel, direction supervision and work programs for all assigned personnel.	Ongoing	Weekly staff meetings, weekly training sessions and weekly disposition conferences held for all assigned personnel, reviewed and updated.	Program Director
4-3	Accept referrals from agencies, individuals and other agency staff for elderly residents in need of case planning and case management.	Ongoing	Referrals received and recorded.	Counselor I Counselor III
4-4	Perform a needs assessment and develop a case plan according to AAA standards for case management clients.	Ongoing	Needs assessment completed and recorded and case plans developed, maintained and on file for each case management client.	Counselor I Counselor III
4-5	Implement case plans by making appropriate referrals to service providing agencies, including advocacy, follow-up and inter-agency consultations to ensure service delivery and the delivery of related supportive services.	Ongoing	Case plans implemented, services and referrals recorded.	Counselor I Counselor III
4-6	Request waivers for all applicants not conforming to AAA guidelines for case management.	Ongoing	Waivers completed and submitted to AAA	Counselor I Counselor III
(concluded next page)				

4. Statement of Activities/Timelines/Staff Assigned for Each Objective: (List as many activities as necessary to outline the work product.)

Objective # 4 : (Restate Objective Here) Maintain access to needed services for elderly residents by providing case management for 339 different individuals who meet the established criteria with an average monthly caseload of 191 persons in Level I and 64 persons in Level II during the period 7/1/80 - 6/30/81.

No.	Activity	Completion Date	Measure of Activity Completion	Staff Assigned
4-7	Conduct weekly casemanagement disposition conferences to ensure service quality and consistency with review of counseling staff progress	Ongoing	Weekly disposition conferences conducted.	Program Director Counselor III
4-8	Responsible counselor will do regular follow-up consultation to ensure quality of service deliver.	Ongoing	Follow-up completed, consultation provided.	Counselor I Counselor III
4-9	Perform a Needs Reassessment for each client as defined by the City of Portland and as notified by the Client Tracking System.	Ongoing	Number of reassessments completed and submitted to HRB	Counselor I Counselor III
4-10	Complete forms relating to client needs and services provided as required by the City of Portland included in the appendix.	Ongoing	Forms completed.	Counselor I Counselor III
4-11	Monitor case management activities to ensure contract compliance and quality of service, on quarterly basis.	Ongoing	Quarterly casemanagement monitoring reports completed.	Program Director Counselor III

4. Statement of Activities/Timelines/Staff Assigned for Each Objective: (List as many activities as necessary to outline the work product.)

Objective # 5 : (Restate Objective Here) To ensure reasonable access to existing services to all Near/Northern West elders and to provide backup on behalf of case management clients through provision of a) 400 hours of consumer assistance to 125 elderly, b) 100 hours of residential displacement counseling to 60 elders, c) 100 escort services to 95 elders, d) 2,000 transportation scheduling services to 200 elderly residents, (continued next page)

No.	Activity	Completion Date	Measure of Activity Completion	Staff Assigned
5-1	Maintain personnel to provide a wide array of discretionary services	Ongoing	Personnel assigned duties.	Program Director
5-2	Provide personal direction/supervision and work programs for all assigned personnel.	Ongoing	Weekly staff meetings held for all personnel and weekly training sessions held to increase skill levels.	Program Director Counselor III
5-3	Provide consumer assistance to individual elderly having a need for this service as identified through needs assessment and noted in the client's case plan (if a client).	Ongoing	Service provided to identified elderly residents.	Total Staff
5-4	Provide residential displacement counseling to individual elders having a need for this service as identified through needs assessment and noted in the case plan (if a client).	Ongoing	Service provided to identified elders.	Total Staff
5-5	Provide escort services to individual elders identified as having a need for this service through needs assessment.	Ongoing	Services provided to identified elders.	Total Staff
5-6	Provide outreach contacts to elderly persons not currently being reached.	Forms to be developed	Delivered services reported on appropriate forms.	Outreach Specialist
(continued next page)				

4. Statement of Activities/Timelines/Staff Assigned for Each Objective: (List as many activities as necessary to outline the work product.)

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* Personnel Required: Project Director 39%, Secretary 30%, 2 Counselors I each 20%, I & R Specialist 20%, Outreach Specialist 65%, Counselor III 35%.

Objective # 5 : (Restate Objective Here) e) 750 hours of supportive counseling to 90 elders, f) 240 outreach contacts to elderly persons not currently being reached, g) 2,400 telephone reassurance calls to 75 clients, h) 2,400 friendly visits to 100 clients, i) 24 recreational activities to 200 elderly residents, j) 12 escorted group trips to 100 elders, k) Develop resources for the provision of home repair, security, and yard work - CETA positions

volunteers, cooperative agreements with other agencies.

No.	Activity	Completion Date	Measure of Activity Completion	Staff Assigned
5-7	Provide transportation scheduling service to individuals having a need for this service as identified through needs assessment and noted in the case plan (if a client).	Ongoing	Service provided to identified elders.	I & R Specialist Secretary
5-8	Provide supportive services counseling to individual elders having a need for this service as identified through the needs assessment and noted in the case plan (if a client).	Ongoing	Service provided to identified elders.	Counselor I Counselor III
5-9	Provide telephone reassurance calls to individual elders having a need for this service as identified through the needs assessment and noted in the case plan (if a client).	Ongoing	Delivered services reported on appropriate forms.	T. R. Lady S.I.C.S.
5-10	Provide friendly visitations to individual elders having a need for this service as identified through the needs assessment and noted in the case plan (if a client)	Ongoing	Delivered services reported on appropriate forms.	Counselor I Counselor III Volunteer CETA Position
5-11	Provide recreational activities to identified elders having a need for this service as identified through the needs assessment and noted in the case plan (if a client). (continue on next page)	Ongoing	Delivered services reported on appropriate forms.	Counselor I

Statement of Activities/Timelines/Staff Assigned for Each Objective: (List as many activities as necessary to outline the work product.)

No.	Activity	Completion Date	Measure of Activity Completion	Staff Assigned
5-12	Provide escorted group trips to identified elders having a need for this service as identified through the needs assessment and noted in the case plan (if a client).	Ongoing	Delivered services reported on appropriate forms	Counselor I Counselor III Volunteer CETA position
5-13	Develop resources for home repair services such as light bulb replacement, leaky faucet repair, etc., to identified elders having a need for this service as identified through the needs assessment and noted in the case plan (if a client)	Ongoing	Delivered services reported on appropriate forms	Counselor I Counselor III Volunteer CETA position
5-14	Develop resources for yard work services to identified elders having a need for this service as identified through the needs assessment and noted in assessment and noted in the case plan (if a client)	Ongoing	Delivered services reported on appropriate forms.	Counselor I Counselor III Volunteer CETA position
5-15	Develop resources for home security services to identified elders having a need for this service as identified through the needs assessment and noted in the case plan (if a client)	Ongoing	Delivered services reported on appropriate forms	Counselor I Counselor III Volunteer CETA position

4. Statement of Activities/Timelines/Staff Assigned for Each Objective: (List as many activities as necessary to outline the work product.)

No.	Activity	Completion Date	Measure of Activity Completion	Staff Assigned
5-16	Complete forms relating to the delivery of services to be developed by the contractor.	Ongoing	Delivered services reported on appropriate forms	Total Staff
5-17	Submit completed forms to City of Portland for contract compliance.		Completed forms submitted.	Counselor III
5-18	Monitor discretionary services activities to insure contract compliance and quality of service on monthly basis.	Monthly	Monthly case management client and other monitoring reports completed and received.	Program Director Counselor III

4. Statement of Activities/Timelines/Staff Assigned for Each Objective: (List as many activities as necessary to outline the work product.)

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5. Strategy/Method: (Briefly describe the general approach to meeting the stated goals and objectives. Discuss the rationale of this approach and how it relates to the overall strategy of the responsible HRB Divisional Unit.)

In accordance with the Comprehensive Aging Plan, neighborhood-based agencies will act as primary access points to service. Based on past experience, it is anticipated that this access to service will enable the older person to facilitate personal life changes resulting in an increase in personal independence. Trained staff will assist the person in obtaining the services necessary for such a change either through the process of information and referral, or through the more intensive case management process.

It is hoped that the overall aging services system will be enhanced, and that a network of formal and informal systems will be developed. It is anticipated that the existing informal networks will be identified through the case management process, and will supplement the more formal system. Services under the above categories will be delivered both at the agency and in individual residences. It is anticipated that these processes of personal assistance will promote overall accessibility, and will determine as well where major service gaps exist. In such cases the informal system will be substituted as it exists. It is further determined that access to recreational and social events will reduce social isolationism and assist seniors in becoming productive members of the community and bring them back or retain them in the mainstream.

Also the inclusion of services of outreach, friendly visitations, telephone reassurance, recreational activities, and newsletter distribution provide a vehicle by which elderly residents can remain involved in the life of the community. Home maintenance may be done, thus assisting elderly residents in upkeep of home and decreasing costs of remaining in own home; yard work services will provide improvement of neighborhood appearance. This service will be provided by youth, thus providing one means to bridge the generation gap and reduce elderly residents' anxieties over youth victimization; home security services will increase elderly residents' feelings of safety when in the home and when away by reducing the incidence of break-in, robbery and physical abuse perpetuated by the thief.

Overall, discretionary services will increase the period of time elderly residents may remain in their own homes by providing those services these elderly residents are unable to provide for themselves.

6. Service Area, Target Population and Eligibility Criteria for Services:
(Describe the service area to be covered by this project and the target population for each service to be provided. Explain how each target population will be identified. State the eligibility criteria to be utilized for each service provided and the method for appeal or exception.)

Service Area: The Senior Adult Service Center will provide services to elderly residents in Near/Northeast Portland in the following census tracts: 22.01, 23.01, 24.02, 25.01, 25.02, 26, 30, 31, 32, 33.01, 33.02, 34.01, 34.02, 36.01, 36.02, 36.03, 37.02, 22.02, 23.02, 24.01

Individuals residing outside the service area can be served only with the express approval of the Area Agency on Aging Contract Unit (see waiver procedures) and with the knowledge and approval of the contractor for the service area in which the individual resides.

Target Population: Elderly persons, 60 years and older, are the general target population for the services provided under this contract. Information and Referral are provided for all elderly residents as are a number of discretionary services. Additional case management services are provided for a limited segment meeting AAA eligibility criteria. Special consideration will be given to minority elderly (especially Black, 75% of whom reside in the service area) and frail elderly whose needs present special problems. Outreach activities will make special efforts to identify and assist these groups.

Particular attention will be given to the low income person, aged 60 and over, who faces premature or inappropriate institutionalization as a direct result of the lack of supportive services.

Eligibility Criteria: Information and referral services are provided to residents of Multnomah County who are 60 years and older without eligibility limitations.

Eligibility for case management and other limited access services is established through a needs assessment performed by a trained staff person who determines: 1) that the individual is in need of case management (and other provided services) to sustain independent living; 2) that the individual is not eligible for those services from another agency legally responsible for their provision; 3) that the individual does not have friends or relatives able and willing to provide the services for him/her; 4) that the net income levels do not exceed 125% of poverty guidelines (\$390/month for single person, \$516/month for couple).

In exceptional circumstances and with express approval (see waiver procedures) of the Area Agency on Aging Contracts Unit, limited access services may be provided to individuals who do not meet all of the above criteria.

7. Organization: (Briefly describe the staffing pattern, selection procedures and administrative procedures.)

The project will be administered by the Project Director, who will be responsible for the overall supervision of all employees, preparation of all reports, staff liaison with Advisory Committee and liaison with other community agencies; the Project Director is responsible to the Urban League Deputy Director.

The Counselor III will be responsible for and will supervise all line staff members and will coordinate all activities necessary for the accomplishment of the project's goals. Training responsibilities will be a part of the Counselor III's duties in cooperation with the Project Director. The Counselor III is responsible to the Project Director.

Counselors I will be responsible for the delivery of services, preparation of documents pertaining to case management, preparation of case plans and all other arrangements necessary to fulfill the needs indicated by the elderly resident and identified in the contract.

The Information and Referral Specialist will provide information and referral to elderly persons and coordinate all related activities within the Center and with other agencies providing information and referral services.

The Outreach Specialist will provide outreach activities to elderly residents not currently being reached, will perform needs assessment, will determine case management eligibility, will perform services as appropriate and will provide documentation to Counselors on persons eligible to become part of the caseload.

The telephone reassurance person will provide telephone reassurance calls to identified elders and refer those needing other services to the Counselor III.

Staff training will be provided in a number of ways: AAA training session and/or meeting will be attended by all staff as appropriate; in-house weekly training session and staff meetings relating to skills and information necessary for service delivery, information, referral and outreach; staff will be cross-trained in all areas to ensure delivery of all services in a manner consistent and adequate; interagency meetings will update staff knowledge of community resources as well as acquainting other agencies with services and other information about the Center.

The Urban League uses all standard referral sources in the selection of candidates through the process identified in the personnel policies.

The project operating hours will be 9:00 a.m. - 5:00 p.m., Monday through Friday.

Holidays observed are: July 4th, Labor day, Veterans' Day, Thanksgiving Day, the day after Thanksgiving Day, Christmas Eve, Christmas Day, New Year's Eve, New Year's Day, Martin Luther King's birthday, Lincoln's birthday, Washington's birthday and Memorial Day.

- 9.
8. Applicant Agency Administration: (Describe the qualifications of the incorporated agency, including experience, support services to be provided for this project and other related projects operated by the agency. Describe the functions of the Board of Directors as they relate to this project.)

The Urban League of Portland is a non-profit social agency and has been providing services to the Portland Metropolitan area since 1945 by working to improve interracial understanding and to improve the conditions under which minorities and other disadvantaged persons of all ages live.

The Urban League will provide for the Senior Adult Service Center, as it does for its other programs, administrative and program development assistance and supervision. The Board of Directors is the policy-making body for all Urban League operations.

The Urban League gives administrative support through the Executive Director, Deputy Director and the Fiscal Unit under the direction of the Director of Finance.

Further the Urban League has contracted with the City of Portland since 1975 to provide aging services to elderly residents of the Near/Northeast Area as well as youth in this same service area.

As a result of these years of experience and because 75% of the Black elderly residing in the City of Portland as well as many other minority elderly reside in this service area, the current Urban League Aging Program is equipped with the expertise and has formed the necessary linkages so necessary to providing an accessible, usable network of senior citizen services and activities.

- 10.
9. Community Participation: (Describe the citizen involvement in planning this project, the methods and expectations for community involvement in the project's operation. Describe the functions of the Advisory Council as they relate to this project. Describe staff, Advisory Council and Corporate Board relationship.)

The District Advisory Committee consisting of community residents (a majority of whom are elderly) is responsible for recommending, monitoring and evaluating programs and services of the Senior Center. This Committee meets bimonthly under its own by-laws in order to execute their functions. Prior to finalization of the proposal FY 80/81, this advisory committee reviewed the draft and gave its input.

The Project Director also receives input from other elderly residents by letter, telephone and personal face-to-face contacts at various functions held throughout the community at various times during the year.

The Project Director has gubernatorial appointments to the Governor's Commission on Aging and the Oregon State Education and Training Council representing the Senior Citizen public sector. Active involvement in these two groups has provided an added dimension to information, programming and future program planning for the Center.

Through the vehicle of interagency meetings and letters of agreement, the Center maintains continual communication with community and city-wide agencies and organizations providing on-going input related to Center goals and objectives in the deliver of services to the elderly residents.

Further, the Project Director, in conjunction with other components of the Urban League's overall operation, as well as with other community-based agencies is attempting to generate a network of formal systems capable of providing services to older persons residing in the Near/Northeast area. Such agencies include providers of primary health care, counseling services, nutrition and residential assistance..

The agency has solicited and received direct goods and services from private sources which have supplemented the program support received from public funding sources. These efforts will continue and be enlarged.

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10. Coordination: (Describe the intentions to coordinate this project with other community organizations and statutory agencies in the service area. Briefly discuss program and service exchanges that may occur. Identify staff positions responsible for these activities.)

The project will maintain all previous linkages and agreements with agencies contracted for services through the AAA systems; these include but are not limited to:

Loaves & Fishes - providing information and referral and other services as appropriate to elderly residents attending those sites and residing in the service area.

Tri-Met and other transportation providing agencies - providing transportation scheduling to elderly residents identified as having a need

Legal Aid - providing referral services to those elderly residents identified as having a need. Location of a Senior Law Project within the service is a goal.

Health Help and other agencies providing medical assistance - providing referral and cooperative planning to provide elderly residents with medical assistance.

Multiservice Center - providing elderly residents with information and assistance in obtaining services available.

Social Security, SSI, Welfare, etc. - providing elderly residents with information and assistance in obtaining additional or adjustments to income.

Other linkages will be provided as needs become identified.

All staff will be responsible for these linkages as determined by the Project Director and or the Counselor III.

Additional co-planning with the Urban League Youth Service Center and CETA Youth Career Training will provide programming around bridging the generation gap and decreasing elderly residents anxieties relating to victimization by youth. Specific programs currently in the planning include escort service, minor home repair and yard work. It is expected that these programs and others will also enhance the availability to services to elderly residents.

EXHIBIT B
BUDGETS AND ATTACHMENTS

12

FISCAL SECTION

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1. Budget Summary

a. Funding Recap: (List all sources of funding by amount and source.)

<u>City Support Requested</u>	<u>Amount</u>
<u>Information & Referral - Title III - B</u>	<u>\$24,932</u>
<u>Case Management - Title III - B</u>	<u>27,390</u>
<u>Case Management - OPI</u>	<u>11,552</u>
<u>Discretionary - General Fund</u>	<u>40,610</u>
<u>Administration - General Fund</u>	<u>11,609</u>
Subtotal	<u>\$116,093</u>
Required Cash Match	<u>5,802</u>
Program Income	<u></u>
Subtotal	<u>\$121,895</u>
<u>Other Project Support</u>	<u></u>
<u></u>	<u></u>
<u></u>	<u></u>
<u></u>	<u></u>
TOTAL	<u>\$121,895</u>

b. Funding Statement: (Briefly describe the duration of funding from each source listed above.)

United Way - 12 months
City of Portland - 12 months

2. Statement of Certification

The information provided herein is, to the best of my knowledge, certifiable and correct.

Authorized Signature _____ Date _____
Freddie Petett

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ATTACHMENTS

Attachments: (Required information is listed below. Forms, if necessary, are included in this section.)

1. Budget Justification Forms
 - Budget Worksheet
 - Personnel Justification (full-time staff)
 - Personnel Justification (part-time staff)
 - Materials and Services
 - Capital Outlay
2. Project Organization Chart
3. Job Descriptions/Qualifications
4. List of Current Board of Directors
5. List of Current Advisory Council Members
6. Applicant Resume
7. Assurance of Compliance with Section 504, Rehabilitation Act of 1973
8. Map of Service Area

Senior Adult Service Center
 FY 80/81

**APPROPRIATION UNIT
 LINE ITEM WORKSHEET**

Code	Object Title	Title III-B I & R	Title III-B Case Manage	OPI Case Management	General Fund Discretionary	General Fund Administration
110	Full-Time Employees	18,094	22,729	5,682	27,595	6,936
120	Part-Time Employees					
130	Federal Program Enrollees					
140	Overtime					
150	Premium Pay					
170	Benefits	2,894	3,637	909	4,415	1,110
190	Less-Labor Turnover					
100	Total Personal Services	20,988	26,366	6,591	32,010	8,046
210	Professional Services					350
220	Utilities					
230	Equipment Rental			200	820	180
240	Repair & Maintenance		100	100	820	180
260	Miscellaneous Services					
310	Office Supplies	144	432		504	
320	Operating Supplies					
330	Repair & Maint. Supplies					
340	Minor Equipment & Tools					
350	Clothing & Uniforms					
380	Other Commodities--External			852	1,437	
410	Education	75		200	225	
420	Local Travel	165		491	344	
430	Out-of-Town Travel	200		500	500	
440	Space Rental	1,151	442	1,968	2,419	926
450	Interest					
460	Refunds					
470	Retirement System Payments					
480	Miscellaneous	100	50	50	200	
510	Fleet Services					
520	Printing Services	900			300	
530	Distribution Services					
540	Electronic Services					
550	Data Processing Services					
560	Insurance					150
570	Telephone Services	1,209		600	1,031	160
580	Intra-Fund Services					
590	Other Services--Internal					1,617
200-500	Total Materials & Services	3,944	1,024	4,961	8,600	3,563
610	Land					
620	Buildings					
630	Improvements					
640	Furniture & Equipment					
600	Total Capital Outlay					
700	Other					
	TOTAL	24,932	27,390	11,552	40,610	11,609

Urban League
Senior Adult Service Center
FY 80/81

APPROPRIATION UNIT
LINE ITEM WORKSHEET

Code	Object Title	Total City Support	Required Cash Match	Total Project Amount		
110	Full-Time Employees	81,036	5,001	86,037		
120	Part-Time Employees					
130	Federal Program Enrollees					
140	Overtime					
150	Premium Pay					
170	Benefits	12,965	801	13,766		
190	Less-Labor Turnover					
100	Total Personal Services	94,001	5,802	99,803		
210	Professional Services	350		350		
220	Utilities					
230	Equipment Rental	1,200		1,200		
240	Repair & Maintenance	1,200		1,200		
260	Miscellaneous Services					
310	Office Supplies	1,080		1,080		
320	Operating Supplies					
330	Repair & Maint. Supplies					
340	Minor Equipment & Tools					
350	Clothing & Uniforms					
380	Other Commodities-External	2,289		2,289		
410	Education	500		500		
420	Local Travel	1,000		1,000		
430	Out-of-Town Travel	1,200		1,200		
440	Space Rental	6,906		6,906		
450	Interest					
460	Refunds					
470	Retirement System Payments					
480	Miscellaneous	400		400		
510	Fleet Services					
520	Printing Services	1,200		1,200		
530	Distribution Services					
540	Electronic Services					
550	Data Processing Services					
560	Insurance	150		150		
570	Telephone Services	3,000		3,000		
580	Intra-Fund Services					
590	Other Services-Internal	1,617		1,617		
200- 500	Total Materials & Services	22,092		22,092		
610	Land					
620	Buildings					
630	Improvements					
640	Furniture & Equipment					
600	Total Capital Outlay					
700	Other					
	TOTAL	116,093	5,802	121,895		

BUDGET JUSTIFICATION

PERSONNEL

DATE June 13, 1980

PROJECT NO. _____

PROJECT TITLE Urban League Senior Adult Service Center
Case Management Title III-B

(A) Number of Persons	(B) Position or Title	(C) Monthly Salary Rate (Full-time)	(D) Percent of time on Project	(E) No. of Months on Project	(F) Cost (AxCxDxE)
1	Project Director	1,600	22.4	12	4,301
1	Counselor II	1,100	40	12	5,280
2	Counselor I	856	64	12	13,148
SUBTOTAL, PERSONNEL					22,729
16 * % FRINGE BENEFITS					3,637
TOTAL, PERSONNEL					26,366

*Indicate fringe benefits as a percentage of Subtotal, Personnel"

BUDGET JUSTIFICATION

PERSONNEL

DATE June 13, 1980

PROJECT NO. _____

PROJECT TITLE Urban League Senior Adult Service Center
Case Management OPI

(A) Number of Persons	(B) Position or Title	(C) Monthly Salary Rate (Full-time)	(D) Percent of time on Project	(E) No. of Months on Project	(F) Cost (Ax CxDxE)
1	Project Director	1,600	5.6	12	1,075
1	Counselor III	1,100	10	12	1,320
2	Counselor I	856	16	12	3,287
SUBTOTAL, PERSONNEL					5,682
16 * % FRINGE BENEFITS					909
TOTAL, PERSONNEL					6,591

*Indicate fringe benefits as a percentage of "Subtotal, Personnel"

BUDGET JUSTIFICATION

PERSONNEL

DATE June 13, 1980

PROJECT NO. _____

PROJECT TITLE URBAN LEAGUE SENIOR ADULT SERVICE CENTER

Discretionary - General Fund

(A) Number of Persons	(B) Position or Title	(C) Monthly Salary Rate (Full-time)	(D) Percent of time on Project	(E) No. of Months on Project	(F) Cost (AxCxDe)
1	Project Director	1600	39	12	7,488
1	Counselor III	1100	35	12	4,620
2	Counselor I	856	20	12	4,109
1	I & R Spec.	866	20	12	2,078
1	Outreach Spec	950	65	12	7,410
1	Secretary	700	30	9	1,890
SUBTOTAL, PERSONNEL					27,595
16 *% FRINGE BENEFITS					4,415
TOTAL, PERSONNEL					32,010

*Indicate fringe benefits as a percentage of ^{B-8} "Subtotal, Personnel"

BUDGET JUSTIFICATION

PERSONNEL

DATE May 5, 1980

PROJECT NO. _____

PROJECT TITLE URBAN LEAGUE SENIOR ADULT SERVICE CENTER

Administration

GENERAL FUND

(A) Number of Persons	(B) Position or Title	(C) Monthly Salary Rate (Full-time)	(D) Percent of time on Project	(E) No. of Months on Project	(F) Cost (AxCx Dx E)
1	Project Director	1600	23	12	4416
1	Secretary	700	40	9	2,520
SUBTOTAL, PERSONNEL					6,936
			16	* % FRINGE BENEFITS	1,110
TOTAL, PERSONNEL					\$8,046

*Indicate fringe benefits as a percentage of "Subtotal, Personnel"

BUDGET JUSTIFICATION

PERSONNEL

DATE May 5, 1980

PROJECT NO. _____

PROJECT TITLE URBAN LEAGUE SENIOR ADULT SERVICE CENTER

City Support

(A) Number of Persons	(B) Position or Title	(C) Monthly Salary Rate (Full-time)	(D) Percent of time on Project	(E) No. of Months on Project	(F) Cost (AxCx Dx E)
1	Project Director	1600	100	12	19,200
1	Counselor III	1100	100	12	13,200
2	Counselor I	856	100	12	20,544
1	I & R Spec.	866	100	12	10,392
1	Outreach Spec.	950	100	12	11,400
1	Secretary	700	100	9	6,300
SUBTOTAL, PERSONNEL					81,036
16 * % FRINGE BENEFITS					12,965
TOTAL, PERSONNEL					94,001

*Indicate fringe benefits as a percentage of "Subtotal, Personnel"

BUDGET JUSTIFICATION

PERSONNEL

DATE June 13, 1980

PROJECT NO. _____

PROJECT TITLE URBAN LEAGUE SENIOR ADULT SERVICE CENTER

MATCH

(A) Number of Persons	(B) Position or Title	(C) Monthly Salary Rate (Full-time)	(D) Percent of time on Project	(E) No. of Months on Project	(F) Cost (AxCx Dx E)
1	Exec. Director	2,667.60	5.41	12	1,731
1	Bookkeeper	1,041.66	10	12	1,250
1	Finance Director	1,683.33	10	12	2,020
SUBTOTAL, PERSONNEL					5,001
16 * % FRINGE BENEFITS					801
TOTAL, PERSONNEL					5,802

*Indicate fringe benefits as a percentage of "Subtotal, Personnel"

BUDGET JUSTIFICATION

PERSONNEL

DATE May 5, 1980

PROJECT NO. _____

PROJECT TITLE URBAN LEAGUE SENIOR ADULT SERVICE CENTER

Total Contract

(A) Number of Persons	(B) Position or Title	(C) Monthly Salary Rate (Full-time)	(D) Percent of time on Project	(E) No. of Months on Project	(F) Cost (AxCx Dx E)
1	Project Director	1600	100	12	19,200
1	Counselor III	1,100	100	12	13,200
1	I & R Spec.	866	100	12	10,392
2	Counselor I	856	100	12	20,544
1	Outreach Spec.	950	100	12	11,400
1	Secretary	700	100	9	6,300
1	Exec. Director	2,667	5.41	12	1,731
1	Bookkeeper	1,041	10	12	1,250
1	Finance Director	1,683	10	12	2,020
SUBTOTAL, PERSONNEL					86,037
16 * % FRINGE BENEFITS					13,766
TOTAL, PERSONNEL					\$99,803

*Indicate fringe benefits as a percentage of "Subtotal, Personnel"

BUDGET JUSTIFICATION
MATERIALS AND SERVICES

DATE June 13, 1980

PROJECT NO. _____

PROJECT TITLE Urban League Senior Adult Service Center
Information and Referral Title III - B

To extent possible, use format indicated below.

CODE	DESCRIPTION OF ITEM AND BASIS FOR VALUATION	ITEM TOTAL	CATEGORY TOTAL
310	Office Supplies	144	144
410	Education (Training workshops)	75	75
420	Local Travel - 17¢ per mile	165	165
430	Out of town Travel - Conferences	200	200
440	Space Rental (\$6.85/sq. ft. X 168)*	1,151	1,151
490	Misc (p ostagē)	100	100
520	Printing Services	900	900
570	Telephone Service	1,209	1,209
	* Inexact due to rounding.		

BUDGET JUSTIFICATION
MATERIALS AND SERVICES

DATE June 13, 1980

PROJECT NO. _____

PROJECT TITLE Urban League Senior Adult Service Center

Case Management Title III-B

To extent possible, use format indicated below.

CODE	DESCRIPTION OF ITEM AND BASIS FOR VALUATION	ITEM TOTAL	CATEGORY TOTAL
240	Repair and Maintenance (typewriter serv. Cont)	100	100
310	Office Supplies	432	432
440	Space Rental (\$6.85 X 65 sq. ft.)*	442	442
490	Miscellaneous (Postage)	50	50
	* Inexact due to rounding)		

BUDGET JUSTIFICATION
MATERIALS AND SERVICES

DATE June 16, 1980

PROJECT NO. _____

PROJECT TITLE Urban League Senior Adult Service Center

Case Management OPI

To extent possible, use format indicated below.

CODE	DESCRIPTION OF ITEM AND BASIS FOR VALUATION	ITEM TOTAL	CATEGORY TOTAL
230	Equipment Rental- copy machine	200	200
240	Repair and Maintenance	100	100
380	Other Commodities-external (for purchase of light bulbs, extension cords, faucet washers, trash sacks, etc for use in home security, home repair and yard work services.)	852	352
410	Education - Classes, workshops	200	200
420	Local Travel- .17¢/mile and bus charter	491	491
430	Out-of-town Travel - Conferences such as National Urban League and WGS	500	500
440	Space Rental- \$6.85 X 285 sq ft*	1,968	1,968
490	Miscellaneous (postage)	50	50
570	Telephone Service	600	600
	* Inexact due to rounding		

BUDGET JUSTIFICATION
MATERIALS AND SERVICES

DATE June 16, 1980

PROJECT NO. _____

PROJECT TITLE Urban League Senior Adult Service Center

Discretionary General fund
To extent possible, use format indicated below.

CODE	DESCRIPTION OF ITEM AND BASIS FOR VALUATION	ITEM TOTAL	CATEGORY TOTAL
230	Equipment Rental- copy machine	820	820
240	Repair and Maintenance	820	820
310	Office Supplies	504	504
380	Other Commodities-External (for purchase of light bulbs, extension cords, faucet washers, etc. for use in home repair, home security and yard work services.)	1,437	1,437
410	Education Classes, workshops and conferences	225	225
420	Local Travel- \$.17/mile and bus charter	344	344
430	Out-of-town Travel To conferences such as National Urban League, WGS	500	500
440	Space Rental \$6.85 X 353 sq ft *	2,419	2,419
490	Misc. (postage)	200	200
520	Printing Services	300	300
570	Telephone Service	1,031	1,031
	* Inexact due to rounding		

BUDGET JUSTIFICATION
MATERIALS AND SERVICES

DATE June 16, 1980

PROJECT NO. _____

PROJECT TITLE Urban League Senior Adult Service Center
Administration General Fund

To extent possible, use format indicated below.

CODE	DESCRIPTION OF ITEM AND BASIS FOR VALUATION	ITEM TOTAL	CATEGORY TOTAL
210	Professional Services Audit .	350	350
230	Equipment Rental - copy machine	180	180
240	Repair and Maintenance- Typewriter serv. Con	180	180
440	Space Rental \$6.85 X 138 sq. ft.*	926	926
560	Liability Insurance	150	150
570	Telephone Service	160	160
590	Other Services External (indirect costs)	1,617	1,617
* Inexact due to rounding			

BUDGET JUSTIFICATION
MATERIALS AND SERVICES

DATE June 16, 1980

PROJECT NO. _____

PROJECT TITLE Urban League Senior Adult Service Center

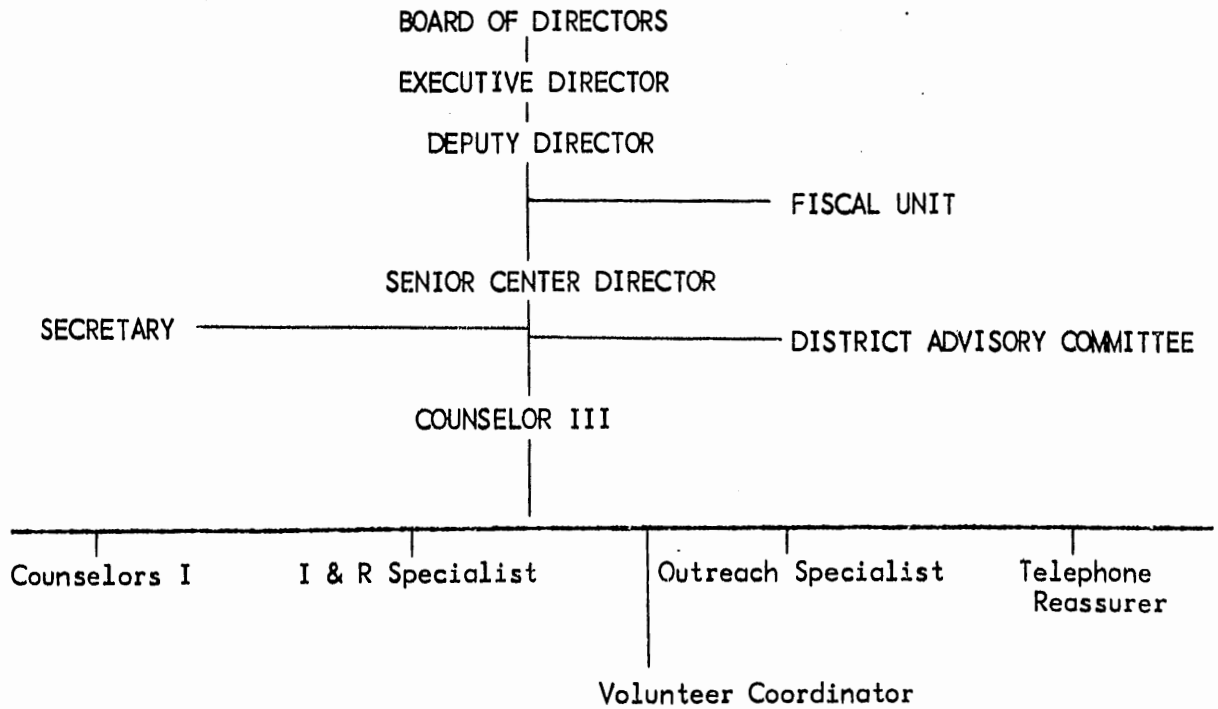
Total City Support/Project amount

To extent possible, use format indicated below.

CODE	DESCRIPTION OF ITEM AND BASIS FOR VALUATION	ITEM TOTAL	CATEGORY TOTAL
210	Professional Services- Audit Costs	350	350
230	Equipment Rental- copy machine \$100 X 12mos	1,200	1,200
240	Repair & Maintenance- Service Contract 100 /mo X 12mos. (typewriter)	1,200	1,200
310	Office supplies- \$90/mo X 12mos	1,080	1,080
380	Other Commodities-External (for purchase of light bulbs, extension cords, faucet washers, etc., for use in home repair, home security and yard work services.)	2,289	2,289
410	Education- classes, workshops & conferences for 6 staff members.	500	500
420	Local Travel- \$.17/mile and charter bus	1,000	1,000
430	Out-of-town Travel- to conferences such as Urban League National Conference, WGS, Minority Aging Conference, NCOA, OGA	1,200	1,200
440	Space Rental-\$6.85 X 1,008.32 sq ft	6,906	6,906
490	Miscellaneous - postage \$34.33/mo X 12mos	400	400
520	Printing- \$100 X 12mos (Newsletter, flyer)	1,200	1,200
560	Liability Insurance	150	150
570	Telephone Service- \$250 X 12mos	3,000	3,000
590	Other Services-Internal (indirect costs)	1,617	1,617

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PROJECT TITLE: URBAN LEAGUE OF PORTLAND, SENIOR ADULT SERVICE CENTER

PROJECT ORGANIZATION CHART:



JOB DESCRIPTION

URBAN LEAGUE OF PORTLAND BOARD OF DIRECTORS

Policy making body for Urban League operations

URBAN LEAGUE OF PORTLAND EXECUTIVE DIRECTOR *

provides overall policy implementation
interviews and hires Project Director

URBAN LEAGUE OF PORTLAND DEPUTY DIRECTOR *

provides direct supervision to Project Director
approves recommendations relating to overall operation of project
provides programmatic back-up to project

URBAN LEAGUE OF PORTLAND FISCAL UNIT *

headed by Director of Financial Affairs
processes all Agency accounts paid out and accounts recieved
maintains records of all budgetary transactions

*Detailed job descriptions to be provided.

JOB DESCRIPTIONS

PROJECT DIRECTOR

Responsibilities:

Administers, coordinates and directs all activities of the Project to accomplish established goals and objectives; includes recommending, developing and implementing policies and procedures regarding activities of the Center in conjunction with the Urban League of Portland and the Area Agency on Aging.

Work Effectively with the District Advisory Committee to insure community input and AAA contract compliance.

Perform administrative and supervisory duties.

Maintain and adhere to budget and project guidelines.

Evaluate staff performance and take appropriate action.

Conduct weekly staff meetings and training sessions as appropriate.

Interpret program and services to individuals and groups and maintain a cooperative planning and working relationship with other social service programs, projects and agencies.

Develop proposals and work to secure financial resources to expand project activities and to provide new activities.

Conduct employment interviews, orientate and train new staff.



THE URBAN LEAGUE OF PORTLAND

WORKING TO IMPROVE THE TOTAL COMMUNITY IN THE AREA OF INTERGROUP RELATIONS

MAIN OFFICE • 404 COMMUNITY SERVICE CENTER • 718 WEST BURNSIDE • PORTLAND, OREGON 97209 • (503) 224-0151
NORTH EAST OFFICE • 3830 N. VANCOUVER AVENUE • PORTLAND, OREGON 97227 • (503) 288-6517

OFFICERS

H.J. Belton Hamilton
President

Paul Cook
Vice President

Clair Silver
Vice President

Dick Kishimoto
Treasurer

William Hilliard
Secretary

Bonita Stroughter
Member at Large

Gayle Gammell
Member at Large

DIRECTORS

Luis A. Alvarez
Debra Barnett
David Baugh

Joan Biggs
Gwen Blake

Robert P. Burns
Larry Campbell

Kev Collins
Nelle Fox

Bob Jackson
Richard Miller

Charles Moss
Bruce Posey

Fred Rosenbaum
Ted Runsteln

Bill Supak
Linda Torrence

Lou Williams
Joana Woppley

STAFF

Freddie Pelett
Executive Director

Deputy Director

George Rankins
*Director of Employment
and Economic Development*

Vernon V. Chatman
*Director of Education
and Youth Incentives*

*Director of Financial
Affairs*

A NATIONAL
URBAN LEAGUE
AFFILIATE



A United Way Agency

SECRETARY

Job Description

1. Perform general secretarial and office duties.
2. Perform basic receptionist duties, involving answering phones, and greeting and directing visitors.
3. Open and sort mail.
4. Type correspondence, reports, proposals, etc., from copy or rough draft.
5. Maintain accurate filing system.
6. Be familiar with the use of various office machines.
7. Keep abreast of up-to-date office practices and procedures by participation in appropriate training events.
8. Be able to work well with fellow employees and people of various ethnic and age groups.

QUALIFICATIONS

Knowledge of filing, subject, alphabetic and geographic.

Ability to type 55 wpm.

Knowledge of reception duties.

Knowledge of telephone procedures.

Knowledge of office procedures.

Some knowledge of elementary record-keeping.

Able to type correspondence and other documents.

Able to work with senior citizens.

At least one year's experience as secretary/clerk typist.

JOB DESCRIPTION

COUNSELOR I

Responsibilities:

Accept referrals via Counselor III for older persons in need of services, case planning and/or case management.

Perform a needs assessment and develop a case plan according to AAA standards.

Implement case plans by making appropriate referrals to service providers, including advocacy, follow-up, disposition conferences and inter-agency consultations to ensure service delivery.

Request waiver from AAA for all applicants not conforming to AAA guidelines for case management and/or service delivery.

Perform needs assessment and/or reassessment for each client defined by the City of Portland, and as notified by the client tracking system; Level I every six months, Level II every three months.

Provide discretionary services as needed.

Complete forms relating to the delivery of services as required by UL and/or AAA in a timely manner.

Submit completed forms as required by UL and AAA in a timely manner.

Maintain proper file documentation for completion of ULSASC monthly case summary (disposition conference) and report; document in the file each client/non client contact; submit as required.

Provide supervision to volunteers and/or youth doing services for elderly residents.

Participate in all staff meetings, training sessions and disposition conferences as directed by Urban League and AAA.

URBAN LEAGUE OF PORTLAND

JOB DESCRIPTION

JOB TITLE: COUNSELOR III

SALARY: \$12,500 Annually, Plus Fringe Benefits

HOURS: 8:30 A.M. - 5:30 P.M., Monday-Friday

EDUCATION: Should have a degree in Social Work or related field.

EXPERIENCE: Should have at least two (2) years experience working in a social agency. Should have at least one (1) year in supervision of employees. Prefer experience in scheduling activities in a social work program. Should have experience involving case planning and monitoring responsibilities. Experience can be substituted for part of the educational requirement.

JOB DUTIES: Supervises all counseling staff, the I & R Specialist, and shares supervision of volunteers with Center Director. This supervision includes training of new staff and volunteers and assignment of duties. Maintain daily records, client files, assign client numbers and monitor intake assessments and reassessments. Client counseling, case monitoring, information and referral, etc.

MUST HAVE: Sympathetic attitude toward the welfare of others; capacity to absorb training and apply knowledge to the solution of diverse problems; verbal facility to relate to people of all levels; organizational ability in order to plan and direct guidance programs; tact, poise, tend to inspire confidence and esteem.

JOB DESCRIPTION

INFORMATION AND REFERRAL SPECIALIST

Responsibilities:

Maintain, in conjunction with other agencies providing I & R services, an updated file of services and resources available to elderly residents.

Provide a communication center whereby elderly residents may inquire about and receive information on services and resources available.

Provide written materials to community agencies and elderly residents informing them of services and resources available.

Provide monthly reports and maintain records on informational services to project Administrator via Counselor III as required by UL and AAA.

Receive inquiries from elderly persons (may be telephone, written or walk-in) and respond as appropriate.

For each referral, follow-up with elderly resident and/or agency is necessary to determine if satisfactory linkage and service has occurred. If follow-up data reveals that satisfactory linkage and service has not occurred, reassess elderly resident's situation to determine whether or not other activities can be undertaken.

Act as advocate in behalf of elderly resident to find and obtain services and benefits for which they qualify.

Coordinate information and referral services with other Center services as designated by Counselor III.

Participate in orientation and training sessions as required by UL and AAA.

Arrange transportation for clients through Tri-Met LIFT program and other resources available.

Assist in publication of newsletter.

JOB DESCRIPTION

OUTREACH SPECIALIST

Responsibilities:

Contact agencies, churches, and community organizations to request assistance in identifying senior citizens in the Near/Northeast.

Contact individual seniors to offer assistance.

Contact senior citizens referred to this agency to set up interview

Interview senior citizens, completing a needs assessment to determine areas in which seniors need assistance.

If appropriate, complete paperwork making senior a client.

If senior needs a single service, complete service and document activity.

Turn over appropriate opened cases to counselors

Complete referrals when service is unavailable through this agency.

Complete follow-up on all referrals

Maintain accurate and up-to-date information on all client contacts.

JOB DESCRIPTION

TELEPHONE REASSURANCE*

Responsibilities:

Accept referrals for Near/Northeast elderly residents needing telephone reassurance; clients must be called twice weekly, non clients once.

Complete telephone reassurance calls to designated elderly residents.

Complete reporting forms required to UL and AAA in a timely manner.

Refer elderly residents requesting information and/or referral to Information and Referral Specialist.

Refer clients and non clients requesting service to Counselor III

Provide social and/or recreational activity information to elderly residents called.

*This is a CETA funded half-time position, preferably held by an elderly resident; this is a Seniors in Community Service slot.

JOB DESCRIPTION

COORDINATOR OF VOLUNTEER SERVICES

Responsibilities:

Coordinates community volunteer services programs

Consults Director and staff to determine organizational needs

Plans volunteer recruitment

Interviews, screens and refers applicants to appropriate staff in cooperation with Director and Counselor III

Arranges for some training, supervision and evaluation

Resolves personnel problems of volunteers

Serves as liason between administration, staff and volunteers.

Assists in preparation of procedure and training manual.

Provides volunteer information for agency newsletter

Prepares statistical reports on extent, nature and value of volunteer service.

PROJECT TITLE: URBAN LEAGUE OF PORTLAND SENIOR ADULT SERVICE CENTER

List of Current Board of Directors: (Indicate Chairperson by an asterisk (*).)

NAME/ADDRESS	TELEPHONE	TERM
*Judge H. Belton Hamilton 800 Terminal Sales Building 1220 S.W. Morrison Portland, OR 97204	221-3278	1982
Paul Cook 1st State Bank 1212 S.W. 6th Portland, OR 97204	243-36644	1981
Gayle Gemmell 222 S.W. Harrison, 14F (H) Portland, OR 97201	229-5951	1980
William Hilliard The Oregonian 1320 S.W. Broadway Portland, OR 97201	221-8147	1981
Benita Stroughter PNWB Lincoln Building (604) 421 S.W. Oak Portland, OR 97204	242-8381	1981
Dick Kishimoto Xerox Corporation 1800 S.W. 1st Portland, OR 97201	221-1850	1981
Luis A. Alvarez COSSPO 3214 S.E. Holgate Portland, OR 97202	238-8317	1982
David Baugh 5701 Arizona Drive Vancouver, WA 98661	(206) 834-4444	1981

PROJECT TITLE: URBAN LEAGUE OF PORTLAND SENIOR ADULT SERVICE CENTER

List of Current Board of Directors: (Indicate Chairperson by an asterisk (*).)

NAME/ADDRESS	TELEPHONE	TERM
Joan Biggs KGW (channel 8) 1501 S.W. Jefferson Portland, OR 97201	226-5000	1981
Gwen Blake Personnel Department Tektronix Delivery Station 58012 P.O. Box 500 Beaverton, OR 97077	644-0161	1982
Robert P. Burns 8809 S.W. 13th (H) Portland, OR 97219	233-5787	1982
Larry Campbell KGW Radio 1505 S.W. Jefferson Portland, OR 97201	226-5055	1982
Ozella Canada 4227 N.E. 12th (H) Portland, OR 97211	287-9249	
Kevin Collins 2103 N.E. Morgan St. (H) Portland, OR 97211	235-5166	1980
Nellie Fox State AFL-CIO 530 Center, N.E. Suite 210 Salem, OR 97301	224-3169 (W)	1982
M/G Richard Miller Military Department 2150 Fairgrounds Rd, N.E. Salem, OR 97303	378-3981 (W)	1980

PROJECT TITLE: URBAN LEAGUE OF PORTLAND SENIOR ADULT SERVICE CENTER

List of Current Board of Directors: (Indicate Chairperson by an asterisk (*).)

NAME/ADDRESS	TELEPHONE	TERM
Charles Moss 4840 N.E. Garfield Portland, OR 97213	248-4680	1980
Bruce K. Posey 900 S.W. 5th 23rd Floor Portland, OR 97204	224-3380	1982
Fred Rosenbaum 975 S.E. Sandy Blvd Portland, OR 97214	234-6551	1980
Ted Runstein The Bank of California Tower 707 S.W. Washington Suite 1330 Portland, OR 97205	222-3531	1981
Bill Supak United Airlines Portland International Airport Portland, OR 97218	249-4201	1982
Linda Torrence Pacific Northwest Red Cross Blood Program 4200 S.W. Corbett Ave Portland, OR 97201	243-5256	1981
Lou Williams Oregon Offices Systems 8283 S.W. Cirrus Drive Koll Business Center Building 15 Beaverton, OR 97005	641-7550	1981
Jean Woolley 4205 N.E. 15th Portland, OR 97211	248-4136	1981

Ex-Officio Member
 Roy Schnaible
 Pacific Northwest Bell
 Lincoln Building (100)
 421 S.W. Oak
 Portland, OR 97204

ATTACHMENT #4

18.

PROJECT TITLE: URBAN LEAGUE SENIOR ADULT SERVICE CENTER

List of Current Advisory Council Members: (Indicate the Chairperson by an asterisk (*)).

Name	Mailing Address	Term Expires	60+ Yes/No	Representation (Consumer, Agency Minority, etc.)
Butler, Eddie	4006 NE Cleveland	June, 1981	yes	NAACP
Chiles, Emma E.	4834 N.B orthwick	June, 1980	yes	minority
Fisher, Texana	4540 N. E.Rodney	June, 1980	yes	minority
Ford, Charles	4012 N. Commerical	June, 1980	yes	Retired Railroaders
Freeman, Theodore	4926 NE Grand	June, 1980	yes	Masonic Lodge
Friday, Maggie	3036 NE 12th	June, 1980	yes	minority
Gordon, William	67 NE Failing	June, 1980	yes	minority
Loving, James	26 N. Saratoga	June, 1980	no	King Facility
Phillips, Robert	4106 NE 15th	June, 1980	no	Adult/Family Service
Plummer, Bernadett	13740 NE Fremont Ct.	June, 1980	no	minority
Robertson, Edna	4406 NE Grand	June, 1980	no	Neighborhood Office
Rutherford, Otto	833 NE Shaver	June, 1980	yes	minority
Smith, Marie, *	714 NE Sumner	June, 1980	yes	Retired Railroaders
Thompson, Betty	2433 NE 8th	June, 1980	no	Oregon clubwomen
Young, Maude	533 NE Dekum	June, 1980	no	NE Seniors, Inc.

APPLICANT AGENCY RESUME

149873

Applicant Agency Legal Name: URBAN LEAGUE OF PORTLAND, INC.	Date of Incorporation: MAY 28, 1965
--	--

Type of Organization:

Public _____

Private Non-Profit X

Private-Profit _____

Other (_____) _____

Short Statement of Agency Purpose: works to benefit total community by improving the conditions under which non-whites and other minorities live and work by creating a better climate of inter-racial understanding and eliminating discrimination in all its forms.

Major Agency Bank Account (give name of bank, address and contact person): First National Bank of Oregon Main Branch P.O. Box 3438 Portland, Oregon 97208	Fiscal Accounting Arrangement (give name of staff responsible or, if by contract, name of agency, address and contact person): Edward W. Barton Finance Director 718 W. Burnside #404 Portland, Oregon 97209
--	---

Does Applicant Agency have federal tax exempt status? Yes X No _____

Does Applicant Agency have liability, fire and theft insurance? (List the kind of insurance, the amount, expiration date and name of Insuring Agent.)

Yes. Comprehensive General Liability
500,000/300,000 BI,PD

Fire, 85,000 "all risk"

Policies automatic renewal July 1, 1980

Campbell Galt and Newlands
921 S.W. Washington; Portland, OR 97205

Are key staff bonded? Yes X No _____
(List individuals, by name and position, who are bonded, amount and name of Insuring Agent.)

10,000 all employees (Commercial Blanket Bond)

25,000 (includes additional 15,000) Executive Director, Freddy Petett
718 W. Burnside #404
Portland, OR 97209

Description of Lease Arrangement: (Describe terms of lease agreement, e.g., dates, excluded activities and other conditions or other arrangements for space availability.)

Term: July 1, 1979 to June 30, 1980 (to be renewed)

Leaser: School District #1
Portland, Oregon

ATTACHMENT #6

Assurance of Compliance with
"Nondiscrimination on Basis of Handicap"
Section 504 of the Rehabilitation Act of 1973

Urban League (hereinafter called the "Contractor"), HEREBY AGREES THAT it will comply with "Nondiscrimination on Basis of Handicap" Section 504, of the Rehabilitation Act of 1973, dated June 3, 1977, (hereinafter referred to as Section 504) and procedures established by City of Portland, Human Resources Bureau, Aging Services Division (hereinafter referred to as the Area Agency on Aging - AAA). The regulation defines and forbids acts of discrimination against qualified handicapped persons in employment and in the operation of programs/activities receiving assistance from the Department of Health Education and Welfare. The Contractor hereby gives assurance that it will immediately take measures necessary to effectuate this agreement.

As an employer, the Contractor agrees to make reasonable accommodation to the handicaps of applicants and employees unless the accommodation would cause the employer undue hardship, as defined in Section 504. This extends to all phases of employment including recruitment, selection and placement, compensation, promotion and transfer, disciplinary measures, demotions, layoffs and terminations, testing and training, daily working conditions, awards and benefits, and all other terms and conditions of employment.

The Contractor shall submit to the AAA, for analysis and recommendations, copies of their affirmative action plan and personnel policies which include provisions that assure the following:

1. No qualified handicapped person shall, on the basis of handicap, be subjected to discrimination in employment by the Contractor.
2. The Contractor shall make all decisions concerning employment in a manner which ensures that discrimination on the basis of handicap does not occur and may not limit, segregate, or classify applicants or employees in any way that adversely effects their opportunities or status because of handicap.
3. The Contractor shall not participate in a contractual or other relationship that has the effect of subjecting qualified handicapped applicants or employees to discrimination.
4. The Contractor shall make reasonable accommodation to the known physical or mental limitations of an otherwise qualified handicapped applicant or employee.

5. The Contractor shall not deny any employment opportunity to a qualified handicapped employee or applicant if the basis for the denial is the need to make reasonable accommodation.

As a provider of community services, the Contractor shall take appropriate steps in accordance with the established procedures, to assure that no qualified handicapped person, because of the Contractor's facilities are inaccessible to or usable by handicapped persons, be denied the benefits of, be excluded from participation in, or otherwise be subjected to discrimination under any program or activity. The Contractor's programs and activities, when viewed in its entirety, will be readily accessible to handicapped persons.

The Contractor hereby recognizes and agrees that an Assurance of Compliance with Section 504 is given in consideration of and for the purpose of obtaining any and all AAA contracts or other financial assistance extended after the date hereof to the Contractor by the AAA, including installment payments after such date on account of applications for AAA financial assistance which were approved before such date. The Contractor recognizes and agrees that such AAA financial assistance will be extended in reliance on the representations and agreements made in this Assurance, and that the AAA shall have the right to seek judicial enforcement of this Assurance. This Assurance is binding on the Contractor, its successors, transferees, and assignees, and the person whose signature appears below is authorized to sign this Assurance on behalf of the Contractor.

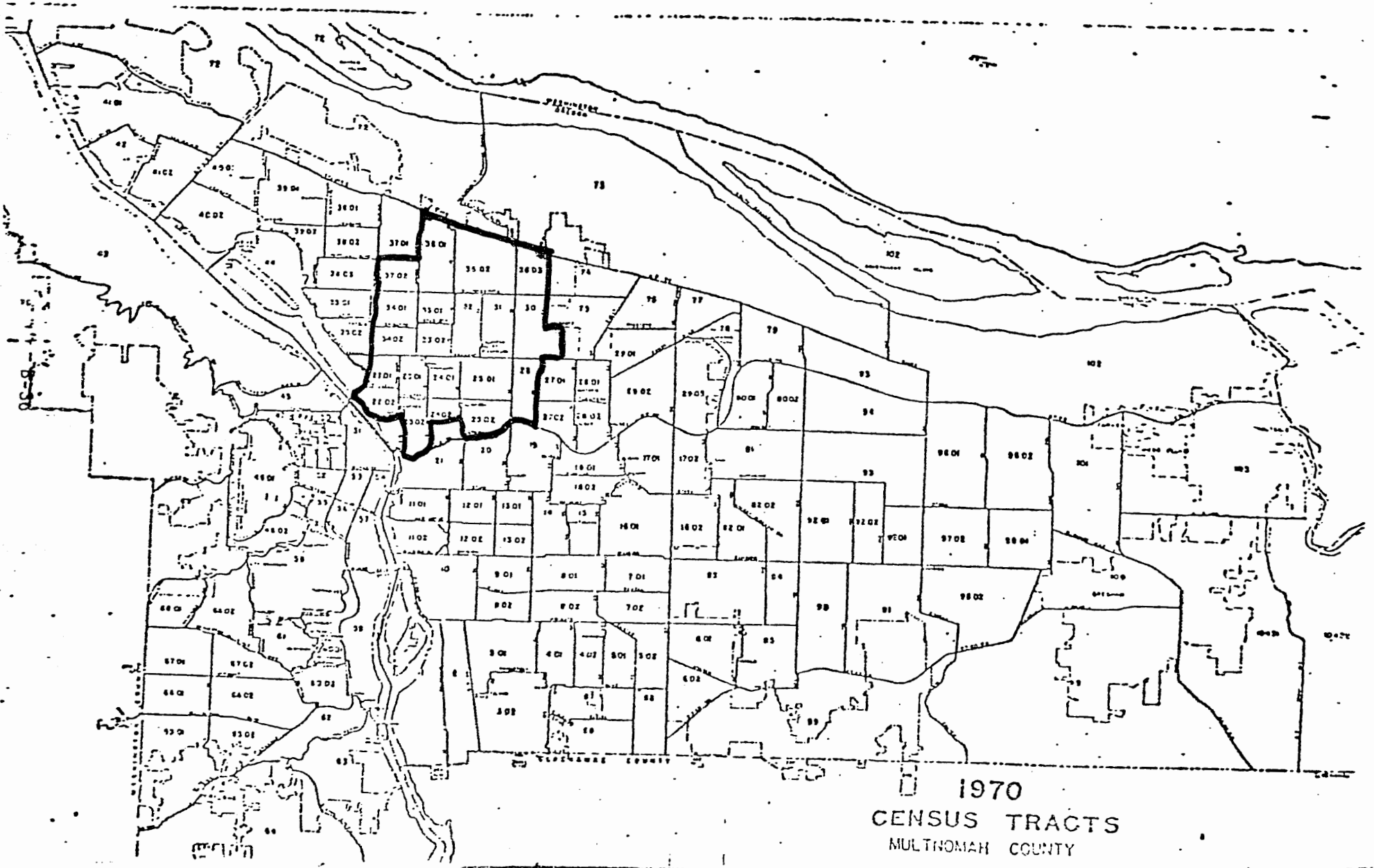
Dated this 5 day of May 1980.

By Krofford Petrell

Title Ex. Director

Contractor's mailing address

Map of Service Area (Draw the boundaries of the service area of this project on the black lines on the map provided below.)



149873

DISTRICT ADVISORY COMMITTEE REVIEW

The District Advisory Committee of the Near/Northeast Area #5 Aging Services District in Portland/Multnomah County has reviewed the proposal for Discretionary Services to be provided by Urban League in the _____ District through contract with the City of Portland, Human Resources Bureau. Comments are attached.

The District Advisory Committee approves the proposal for discretionary services.

The District Advisory Committee does not approve of the proposal for discretionary services for reasons listed below:

The District Advisory Committee has reviewed the proposal, but has taken no action at this time.

Marie B Smith
Signature of Chairperson

April 28-80
Date

EXHIBIT C
REQUIRED REPORTING FORMS
AND
PROCEDURES

I. Information and Referral

	<u>this month</u>	<u>YTD</u>
A. Number of simple information requests	_____	_____
B. Number of complex information requests	_____	_____
C. Number of simple referrals	_____	_____
D. Number of complex referrals	_____	_____

II. Discretionary Services

A. Consumer Assistance Counseling (a)

1. Number of ½ hrs. of svc. provided	_____	_____
2. Number of persons counseled	_____	_____
3. Number of new persons counseled	_____	_____

B. Residential Displacement Counseling (b)

1. Number of ½ hrs. of svc. provided	_____	_____
2. Number of persons counseled	_____	_____
3. Number of new persons counseled	_____	_____

C. Escort (c)

1. Number of escorts provided (in support of referrals)	_____	_____
2. Number of individuals escorted	_____	_____
3. Number of new individuals escorted	_____	_____

D. Outreach (f)

1. Number of high risk elderly identified	_____	_____
a. number of low income	_____	_____
b. number minority	_____	_____

E. Telephone Reassurance (g)

1. Number of calls completed	_____	_____
2. Number of people called	_____	_____
3. Number of new people called	_____	_____

F. Friendly Visits (h)

1. Number of visits made	_____	_____
2. Number of people visited	_____	_____
3. Number of new people visited	_____	_____

G. Ed/Rec Events (i)

<u>Event (topic)</u>	<u>Date</u>	<u>Total Attendance</u>	<u>First Time Attendance</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
Number of events this month		_____	_____
		YTD	_____

H. Escorted Group Trips (j)

<u>Trip</u>	<u>Date</u>	<u>Total Attendance</u>	<u>First Time Attendance</u>
-------------	-------------	-------------------------	------------------------------

1. _____

2. _____

Number of trips this month _____ YTD _____

I. Status of Resource Development (k)

1. Resources developed

	<u>this month</u>	<u>YTD</u>
2. Clients served	_____	_____
a. Home repair	_____	_____
b. Yard work	_____	_____
c. Home Security	_____	_____

Signature _____

City of Portland-Human Resource Bureau
Aging Services Division/Client Tracking System

ACTION CODE

CLIENT INFORMATION FORM

Completed by _____

- 1. New
- 2. Correct/Update
- 4. Last name change

Intake/Transaction DATE

Mo.	Day	Yr.
3		8

CASE NUMBER

CLIENT NAME

(*)

9	14
---	----

15	26	27	35	M.I.
Last		First		

ADDRESS

PHONE NUMBER

(*)CENSUS TRACT

37	52
(P.O. Box or Street Address)	

53	59
----	----

60	64
----	----

(*)CLIENT STATUS

- 1. Level I
- 2. Level II
- 3. Close(d)
- 4. Nutrition Only

(*)Agency with PRIMARY RESPONSIBILITY

66	67
----	----

Caseworker CODE

68

O.P.I. STATUS

- 1. New
- 2. Reopen
- 3. Discontinue(d)

REFERRAL SOURCE

- 1. Self
- 2. Spouse
- 3. Friend/Rel.
- 4. Nutrition Site
- 5. Church
- 6. Agency
- 7. Health Care Provider
- 8. Other

(*)BIRTHDATE

Mo.	Day	Yr.
71		76

(*)SEX

- | | |
|---------|-----------|
| 77 | |
| 1. Male | 2. Female |

(*)ETHNIC GROUP

- | | | | | | |
|----------|----------|-----------------|------------------|-------------|----------|
| 78 | | | | | |
| 1. White | 2. Black | 3. Amer. Indian | 4. Spanish Amer. | 5. Oriental | 6. Other |

(*)MARITAL STATUS

- | | | | | |
|------------|------------|--------------|-------------|----------------|
| 79 | | | | |
| 1. Married | 2. Widowed | 3. Separated | 4. Divorced | 5. Never Marr. |

(*)INCOME SOURCE(S)

- | | | | | | | | | |
|-------------|-------------|------------|--------------|------------|------------|---------|--------|----------|
| 80 | 83 | | | | | | | |
| 1. Earnings | 2. Property | 3. Savings | 4. Soc. Sec. | 5. Welfare | 6. Pension | 7. V.A. | 8. SSI | 9. Other |

(*)MONTHLY INCOME

84	86
----	----

(*)NO. ON INCOME

87

HOUSING TYPE

- | | | | | | | |
|----------|-----------|--------------|-----------------|-----------------|---------|----------------|
| 88 | | | | | | |
| 1. Owned | 2. Rented | 3. Sub. Rent | 4. Room & Board | 5. Shared Costs | 6. Free | 7. Institution |

(*)HOUSEHOLD COMP.

- | | | | | | | | |
|----------|-------------|---------------|-------------------|--------------|--------------------|-----------------|----------|
| 89 | | | | | | | |
| 1. Alone | 2. w/spouse | 3. w/relative | 4. w/non-relative | 5. B&R/Hotel | 6. Retirement Home | 7. Nursing Home | 8. Other |

(*)SIGNIFICANT OTHERS

- | | | | | |
|---------|-------------|-------------------|-----------|----------|
| 90 | 91 | | | |
| 1. None | 2. Children | 3. Other Relative | 4. Friend | 5. Other |

(*)AVAILABLE HELP

- | | | | | | |
|---------|----------|-----------|---------------|------------|-------------------|
| 92 | 93 | | | | |
| 1. None | 2. Daily | 3. Weekly | 4. Bi-Monthly | 5. Monthly | 6. Emergency only |

(*)SELF CARE-LIMITATIONS

- | | | | | | | | |
|----------------------|------------------|-----------------|-------------------|--------------------------|--------------------|---------------------|-------------------|
| 94 | 96 | | | | | | |
| Cannot do w/o help | | | | | | | |
| 1. Any personal care | 2. Use of toilet | 3. Feeding Self | 4. Dress/grooming | 5. Meals/light housework | 6. Basic marketing | 7. Routine Finances | 8. No Limitations |

(*)MOBILITY LIMITATIONS

- | | | | | | |
|---------|-----------------|----------------------|---------------|--------------|---------------|
| 97 | | | | | |
| 1. None | 2. Tires easily | 3. Ambulatory w/dif. | 4. Housebound | 5. Bedridden | 6. Wheelchair |

(*)PHYSICAL HEALTH PROB.

- | | | | | | |
|---------|-------------------|----------------|----------------------|---------------------|---------------------|
| 98 | 99 | | | | |
| 1. None | 2. Minor/sporadic | 3. Minor/Perm. | 4. Severe/short-term | 5. Severe/long-term | 6. Life threatening |

(*)MENTAL HEALTH STATUS

- | | | | | | | | |
|----------|--------------------|--------------------------|------------------------|----------------|----------------------|---------------------------|------------------------------|
| 100 | 101 | | | | | | |
| 1. Alert | 2. Rarely Confused | 3. Occasionally Confused | 4. Frequently Confused | 5. Disoriented | 6. Appears depressed | 7. Appears overly anxious | 8. Seriously Impaired Memory |

HEALTH INSURANCE

- | | | | | | | | | |
|---------|---------------|-------------------|-------------|------------------|-------------|-------------------|----------------------|----------|
| 102 | 104 | | | | | | | |
| 1. None | 2. Medicare A | 3. Medicare A & B | 4. Medicaid | 5. SS Disability | 6. Veterans | 7. Project Health | 8. Private Insurance | 9. Other |

HEALTH CARE PROVIDER

- | | | | | |
|--------------|----------------------|----------------------|-------------|----------|
| 105 | | | | |
| 1. None | 2. Private Physician | 3. Outpatient clinic | 4. U. of O. | 5. Other |
| I.D. # _____ | | | | |

TRANSPORTATION

- | | | | | | | | |
|---------|---------------|---------|------------------|---------------------|------------|-----------|----------|
| Usual | (*)Special | | | | | | |
| 06 | 107 | 108 | | | | | |
| 1. None | 2. Gen. pass. | 3. AAA | 4. Other Sponsor | 5. Private provider | | | |
| 2. Walk | 3. Own car | 4. Taxi | 5. Bus | 6. Friend/Rel. | 7. Special | 8. Center | 9. Other |

DATE CLOSED

Mo.	Day	Yr.
109		114

REASON FOR CLOSURE

- | | | | |
|------------|----------------|-----------------|-------------------|
| 115 | | | |
| 1. No Need | 2. Seek on own | 3. Other Agency | 4. Cannot provide |

- 5. Institutionalized
- 6. Moved
- 7. Died
- 8. Ineligible
- 9. Other

WAIVER REVIEW DATE

Mo.	Yr.
116	120

- 1. OPI Income
- 2. Income
- 3. Age
- 4. Agency
- 5. Living Arrangements
- 6. Other
- 7. Elig. w/out waiver

CITY OF PORTLAND - HUMAN RESOURCES BUREAU
AGING SERVICES DIVISION/CLIENT TRACKING SYSTEM

AAA 102.05

Needs Assessment Form

Completed by: _____

Instructions: 1. Complete each starred (*) Item 2. Complete other items as Appropriate

(*) <u>Action Code</u>		(*) <u>Case Number</u>					(*) <u>Assessment Date</u>				
1. New 2. Reassessment		3 4 5 6 7 8					9 10 11 12 13 14				

(*) <u>Client Name - Last</u>															<u>First</u>					<u>M.I.</u>			(*) <u>Primary Responsibility</u>				
15 16 17 18 19 20 21 22 23 24 25 26																							51 52				

27 28		29 30	
31 32		33 34	
35 36		37 38	
39 40		41 42	
43 44		45 46	
47 48		49 50	

00 - No Need

- | | | | |
|---|---|---|--|
| <p><u>Housing</u></p> <ul style="list-style-type: none"> 11 - Housing 12 - Home Repair 13 - Yard Maintenance 14 - Belongings Moved 15 - Weather Proofing 16 - Home Security <p><u>Social Contact</u></p> <ul style="list-style-type: none"> 21 - Regular Personal Contact 22 - Meaningful Activity 23 - Regular Reassurance 24 - Opportunities for Social Involvement <p><u>Information/Service Utilization</u></p> <ul style="list-style-type: none"> 31 - Information 32 - Assist in Solving Individual Problems 33 - Assistance in Shopping | <p><u>Income</u></p> <ul style="list-style-type: none"> 41 - Employment 42 - Financial Assistance 43 - Money Management 44 - Clothing 45 - Food <p><u>Transportation</u></p> <ul style="list-style-type: none"> 51 - for Housing 52 - for Social Contact 53 - for Information 54 - for Income 55 - for Congregate Dining 56 - for Shopping 57 - for Protective/Legal 58 - for Nutrition 59 - for Health | <p><u>In-Home Assistance</u></p> <ul style="list-style-type: none"> 61 - Light Chore Services 62 - Home Health Care 63 - Meal Prep./Delivery 64 - Personal Care 65 - Heavy Housework <p><u>Protective/Legal</u></p> <ul style="list-style-type: none"> 71 - Protective Living Situation 72 - Legal Assistance 73 - Crisis Counseling 74 - Personal Security 75 - Counseling | <p><u>Nutrition</u></p> <ul style="list-style-type: none"> 81 - Adequate Food Intake 82 - Food Purchase <p><u>Health</u></p> <ul style="list-style-type: none"> 91 - Medical Screening 92 - Medical Care 93 - Medical Equipment 94 - Drug/Alcohol Treatment 95 - Mental/Emotional Treatment 97 - Dental Care |
|---|---|---|--|

CITY OF PORTLAND - HUMAN RESOURCES BUREAU
AGING SERVICES DIVISION/CLIENT TRACKING SYSTEM

Completed by: _____

Agency: _____

Date: _____

Client Service Form

- Instructions:
1. Complete each starred (*) item.
 2. Complete other items as appropriate.

(*) Action Code

| 3 | 1 |
|_____2

(*) Case Number

|_3_|_|_|_|_|_|_|_|_|_|
|_____8

(*) Service Date

Mo Yr
|_9_|_|_|_|_|_|_|_|
|_____12

1. New

(*) Client Name - Last

|_13_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|
|_____24

First

M.I.

Agency
Providing
Service

Service
Code

Referral Code

1. accepted
2. pending
3. denied

Service
Frequency

Referral
Made To

25 _ _____26	_____	_27_ _ _____28	_29_ _____	_30_ _ _____31	_32_ _ _____33	_____
---------------------	-------	---------------------	-----------------	---------------------	---------------------	-------

34 _ _____35	_____	_36_ _ _____37	_38_ _____	_39_ _ _____40	_41_ _ _____42	_____
---------------------	-------	---------------------	-----------------	---------------------	---------------------	-------

43 _ _____44	_____	_45_ _ _____46	_47_ _____	_48_ _ _____49	_50_ _ _____51	_____
---------------------	-------	---------------------	-----------------	---------------------	---------------------	-------

52 _ _____53	_____	_54_ _ _____55	_56_ _____	_57_ _ _____58	_59_ _ _____60	_____
---------------------	-------	---------------------	-----------------	---------------------	---------------------	-------

61 _ _____62	_____	_63_ _ _____64	_65_ _____	_66_ _ _____67	_68_ _ _____69	_____
---------------------	-------	---------------------	-----------------	---------------------	---------------------	-------

70 _ _____71	_____	_72_ _ _____73	_74_ _____	_75_ _ _____76	_77_ _ _____78	_____
---------------------	-------	---------------------	-----------------	---------------------	---------------------	-------

Comments:

CODES: Client ServicesHousing

- 11 - Housing location
- 12 - Moving assistance
- 13 - Subsidized housing
- 14 - Major home repair
- 15 - Minor home repair (construction)
- 16 - Minor home repair (maintenance)
- 17 - Yard work
- 18 - Winterization
- 19 - Home security

Social Contact

- 21 - Friendly visiting
- 22 - Telephone reassurance
- 23 - Volunteer opportunities
- 24 - Education
- 25 - Recreation
- 26 - Escorted Group Activity

Information/Service Utilization

- 31 - Information
- 32 - Outreach
- 33 -
- 34 - Pre-retirement counseling
- 35 - Discretionary Service Units
- 36 - Escort
- 37 - Advocacy
- 38 - Scheduling
- 39 - Personal business

Income

- 41 - Emergency assistance
- 42 - Assistance in applying for government financial programs
- 43 - Adjustment of government benefits
- 44 - Financial assistance (other)
- 45 - Employment
- 46 - Subsidized employment
- 47 - Discounts/rebates

Transportation

- 51 - Transpo for housing
- 52 - Transpo for social contact
- 53 - Transpo for information/service utilization
- 54 - Transpo for income
- 55 - Transpo for congregate dining
- 56 - Transpo for shopping
- 57 - Transpo for protective/legal
- 58 - Transpo for work/school
- 59 - Transpo for health

In-home Assistance

- 61 - Housekeeper
- 62 - Housekeeper (MFS Only)
- 63 - Homemaker
- 64 - Homemaker Level I (MFS only)
- 65 - Homemaker Level II (MFS only)
- 66 - Home health care
- 67 - Personal care assistance

Protective/Legal

- 71 - Legal assistance
- 72 - Legal education
- 73 - Arrangement of guardianship/conservatorship
- 74 - Arrangement for protective living
- 75 - Money management
- 76 - Supportive counseling
- 77 - Nursing home placement
- 78 - Crisis Counseling
- 79 - Hours (PS only)

Nutrition

- 81 - Home delivered meals
- 82 - Congregate meals
- 83 - Nutrition counseling/education
- 84 - Food buying
- 85 - Shopping assistance (food)
- 86 - Food growing
- 87 - Meal preparation

Health

- 91 - Health screening
- 92 - Health education (diabetic clinic, etc.)
- 93 - Medical equipment
- 94 - Physical/occupational therapy
- 95 - Mental health services
- 96 - Detoxification
- 97 - Dental care
- 98 - Physician/out-patient care
- 99 - In-patient care, (hospital, etc.)
- 01 - Podiatry care
- 02 - Eye care
- 03 - Adult day care
- 04 - Hearing and speech

AREA AGENCY ON AGING
CLIENT REPRESENTATIVE
RECEIPT

PART A

Describe task to be performed/items to be purchased/bill to be paid:

Store or place of business:

Amount of funds:

Check \$ _____

Cash \$ _____

Agreed, the above is correct information

Signature of Client Representative _____

Agency _____

Signature of Client _____

Date: _____

(Agency's Copy)

AREA AGENCY ON AGING
CLIENT REPRESENTATIVE
RECEIPT

PART A

Describe task to be performed/items to be purchased/bill to be paid:

Store or place of business:

Amount of funds:

Check \$ _____

Cash \$ _____

Agreed, the above is correct information

Signature of Client Representative _____

Agency _____

Signature of Client _____

Date: _____

(Client's Copy)

PART B

Describe items purchased, or bill paid:

Store or place of business:

Amount of funds returned to client:

\$ _____

Agreed the above is correct information.

Signature of Client Representative _____

Agency _____

Signature of Client _____

Date: _____

PART B

Describe items purchased, or bill paid:

Store or place of business:

Amount of funds returned to client:

\$ _____

Agreed the above is correct information.

Signature of Client Representative _____

Agency _____

Signature of Client _____

Date: _____

INFORMATION TALLY SHEET

AAA 211 (Revised 6/79)

Completed by: _____

Month _____

TYPE OF CONTACT

Phone:	Walk-in:	Other:	Total:
--------	----------	--------	--------

TYPE OF SERVICE PROVIDED

Info/simple:	Info/complex:	Other:
--------------	---------------	--------

SOURCE OF CONTACT

Self:	Spouse:	Friend/Relative:	Agency:	Other:
-------	---------	------------------	---------	--------

Disposition of Request

Subject of Request	Information Only	Center Service	Other Agency	Unable to Help	TOTAL
Location					
Repair/Maint					
Yard Work					
Friendly V./TR					
Ed/Rec					
Vol Act.					
Emergency					
Income Maint					
Case Mngt					
Special Trans					
Escort					
Live-in					
Housekeeper					
Homemaker					
Protective Serv					
Legal Assist.					
Meal Prep/mow					
Shopping Abst.					
Medical Care					
Dental					
Other					
TOTAL					

REQUEST FOR WAIVER

1. _____
Name of Agency requesting waiver

2. Type of request
 New
 Review

4. _____
Name of Client

5. _____
CTS Case Number

6. Briefly describe the situation.
(Attach a copy of the latest 101 & 102)

Criteria to be waived	
Income <input type="checkbox"/>	<input type="checkbox"/> OPI Guidelines
	<input type="checkbox"/> AAA Guidelines
<input type="checkbox"/> Age	<input type="checkbox"/> Living Arrangement
<input type="checkbox"/> Other Agency	<input type="checkbox"/> Other _____ Specify

7. Resources Investigated

Services Requested

Outcome

8. _____
Signature of Counselor Date

9. _____
Signature of Signature Date

----- DO NOT WRITE BELOW THIS LINE -----

10. Request is: Approved AAA
 OPI

Temporarily AAA
Approved OPI _____
Date

Denied AAA
 OPI

11. Comments:

Signature of Reviewer

Date

Contract Agency _____
 Address _____
 City _____ State _____

Social Services Division
 Accounting Unit
 522 SW Fifth Ave., 8th Fl. Yeon Bldg.
 Portland, Oregon 97204
 Phone: 248-4752

Contract # _____ Contract Period: From _____ To _____

Funding Source _____ Service Category _____

Advance Received _____ Reimbursement Request for _____ month & year

CODE	OBJECT TITLE	CURRENT PERIOD REQUEST	YEAR TO DATE REQUEST	CURRENT BUDGET	BALANCE
110	Full-Time Employees				
120	Part-Time Employees				
170	Benefits				
100	Total Personnel Services				
210	Professional Services				
220	Utilities				
230	Equipment Rental				
240	Repair and Maintenance				
260	Miscellaneous Services				
310	Office Supplies				
320	Operating Supplies				
330	Repair and Maint. Supplies				
340	Minor Equipment and Tools				
380	Other Commodities-External				
410	Education				
420	Local Travel				
430	Out-of-Town Travel				
440	Space Rental				
490	Miscellaneous				
520	Printing Services				
550	Data Processing Services				
560	Insurance				
570	Telephone Services				
590	Other Services-Internal				
	Others, Specify Below				
200	Total Materials & Services				
500					
620	Buildings				
630	Improvements				
640	Furniture & Equipment				
600					
	TOTAL				

ATTACH TO THIS INVOICE:
 1. Supporting documentation for all costs or expenditures grouped by expenditure object category. (Attach adding machine tape to each group of supporting documents.)
 INVOICE & SUPPORTING DOCUMENTS ARE TO BE SUBMITTED TO THE CITY NO LATER THAN THE FIFTEENTH WORKING DAY FOLLOWING MONTH END.

I certify that the information pertaining to this request is true and complete to the best of my knowledge

Signed _____ Date Signed _____

Title _____ Phone _____

PROCEDURES FOR CONTRACT MODIFICIATIONS

WHY?

Contract modifications are required in the following situations:

- change in total contract amount (increase or decrease)
- changes in staff salaries
- changes in staff positions to be supported through the contract
- changes in line item budget
- changes in number or type of services to be provided
- other substantial changes

HOW?

Contracts may be modified in 3 ways:

- ordinance-authorized by City Council
- contract change order-approval by Social Services Manager , Human Resources Bureau Executive Director, and Commissioner-in-Charge
- initial-by both parties

<u>Type of Change</u>	<u>Modification Procedure</u>
Total funds increase/decrease	Ordinance
Total same line item changes	Change Order
Staff salary	Change Order
Staff position	Change Order
Service Objectives	Change Order
General/special conditions	Ordinance/change order
Other substantial changes	Ordinance/change order
Clerical errors	Initial by both parties

PROCEDURE:

A. Initiated by City:

1. The City shall inform the Contractor in writing what and why changes are required, what information (if any) is needed from the Contractor to make such changes and what modification procedures will be utilized.

2. City staff shall be responsible for obtaining necessary materials from the Contractor or shall prepare revised materials (to include revised contract or project applications pages) and amendment form, as necessary.

3. Contractor shall review material and indicate approval formally or informally.

4. If an Ordinance is required:

- City staff shall prepare and file Ordinance
- City shall notify Contractor of action on Ordinance
- If authorized by City Council, Contractor shall sign three (3) copies of amendment (if not already signed) and return to designated City office
- City staff shall obtain necessary City signatures
- Amendment goes into effect when both parties have signed and the changes are documented in the City Auditor's Office
- Fully signed copy shall be returned to the Contractor

5. If change order procedure is utilized:

- City staff shall prepare change order
- Program Staff, Accountant, Division Manager, HRB Executive Director, and Commissioner-in-Charge shall review and indicate approval
- Contractor shall sign Amendment and return to City
- Amendment goes into effect when City and Contractor signatures are obtained

B. Initiated by Contractor:

1. Contractor shall submit a letter to the Unit Director requesting modification. This letter should contain the following information:

- a. Specific changes desired (e.g. increase printing by \$500, decrease local travel by \$200 and decrease office supplies by \$300).
- b. Reason or need for changes (e.g. the newsletter mailing list has doubled so more copies are printed; counselors are carpooling in an effort to save gasoline).
- c. Statement regarding how these changes will affect the provision of services (e.g. line item changes are more consistent with actual spending patterns and services will continue to be delivered as specified in the contract).

2. The Contractor shall prepare revised project application pages as follows:

149873

a. BUDGET CHANGES

(1) Budget Worksheet

The budget worksheet must include the following columns for each funding source to be modified:

current
+ or -
revised

If the contract includes a funding source which is not to be modified, a column must be included for this current breakdown.

If the contract includes more than one funding source, the budget worksheet must also include columns for the following:

current total
total + or - (omit if only 1 funding
revised total source changes)

The budget worksheet must include the name of the contract agency and the contract number in the upper left hand corner.

The budget worksheet must include the date of the revision in the lower right hand corner (this date should correspond with the date of the letter requesting the modification).

(SEE SAMPLE)

(2) Budget Justification Sheets

A full set of original budget justification sheets must be submitted, showing the total justification as revised. It is not necessary to show + or - on the justification sheets.

The budget justification forms should be consistent with the budget worksheet columns for the revised funding for each source and for the revised total.

Even if a budget justification sheet does not change, a new original must be prepared (e.g. pink sheet, typed original) to meet the contract requirements of the City Auditor's office.

Each budget justification sheet must be completed in full:

DATE - date of revision request (put this new date even if no changes were made on a particular page.

PROJECT NUMBER - contract number assigned by the City.

PROJECT TITLE - name of agency and service (if there are multiple contracts with the Human Resources Bureau e.g. PACT Senior Service Center).

(3) Miscellaneous Comments on Budget Changes

All changes shown on the budget worksheet or the budget justification pages should be addressed in the letter requesting the modification.

A modification is not required for any line item changes in materials and services in which that line will not be over-expended by 5% of the line item or \$1,000, whichever is less. Formal modification is not required for lines which will be underexpended.

e.g., if line 420 in the contract is \$1,000 and if there is an expected overspending of \$48, a contract modification is not required because \$48 is less than 5% of \$1,000.

If this \$48 will come from line 310 office supplies, no change is required because you will simply underspend line 310 by \$48.

Any changes in staff positions (increase in salary, change in % of time or number of months on project) requires a modification. A modification is not necessary if an individual is being paid at a lower rate of pay for a given position.

If an authorized position is to be filled by a different person, please notify the City accountant to assist in speedy processing of your invoices. A contract modification is not required.

b. SERVICE CHANGES

- (1) OBJECTIVES - (Project Narratives, Section 3)
A revised objective section should be submitted showing the revised number or type of services to be provided or the revised period in which services will be provided.

(The need for these changes and the impact should be discussed in the letter requesting the modification).

- (2) ACTIVITIES - (Project Narrative, Section 4)

Revised activities pages must be submitted only if changes are made. These activity pages will be used as a basis for monitoring the provision of services, so they should reflect current practices and procedures.

c. OTHER PROGRAM OR MANAGEMENT CHANGES

Other program or management changes will be handled on a case by case basis. Consult the City Staff responsible for contract development for specific requirements.

3. Contractor shall submit letter and revised pages as described above to Human Resources Bureau Unit Director.
4. Social Service Unit staff shall review the request for completeness and impact and shall make a determination about which modification procedure shall be utilized.

- a. If Unit Staff supports the requested change and if an Ordinance is required, City Staff shall prepare the contract amendment prepare the ordinance and complete the regular Human Resources Bureau ordinance review process. If authorized by City Council, the Contractor shall sign 3 official copies and return to the City for City signatures and processing. A signed copy will be returned to the Contractor.
- b. If unit staff supports the request and if a change order is to be used, City staff shall prepare the change order.

The contract change order along with the letter of request and modified pages shall be submitted for review and approval to our Accountant, Manager of Social Services, Human Resources Bureau Executive Director and the Commissioner-in-Charge.

If approved, the original change order shall be filed in the City Auditor's Office. Copies shall be provided to the Contractor, the Fiscal Unit and the responsible Program Unit.

The Contract change order becomes effective when all City signatures have been obtained.

- c. If Unit Staff does not support the request, the Contractor shall be notified. The request may be denied or additional information or documentation may be requested.

SCHEDULE OF MODIFICATIONS

Contract modifications will be accepted within 30 days of receipt of completed quarterly progress reports or at other times as directed or approved by the responsible Program Unit.

CITY OF PORTLAND/HUMAN RESOURCES BUREAU
SOCIAL SERVICES DIVISION
CONTRACT REIMBURSEMENT PROCEDURES

1. Reports are due monthly on the fifteenth (15th) working day following the end of the month. Reimbursement request shall be mailed directly to the Accounting Unit:

Human Resources Bureau
 Social Services Division
 Accounting Unit
 522 S.W. Fifth Ave., 8th Floor
 Yeon Building
 Portland, Oregon 97204

2. Reports not received by the deadline shall not be processed until the next month. This will result in a delay in payment.
3. City forms must be used. If additional forms are needed, please contact the Accounting Unit (248-4752).
4. Materials to be submitted each month are as follows:
- a) A separate Reimbursement Request Form for each funding source and each service category requiring City reimbursement as included in the approved contract budget.
 - e.g. -- I & R -- III-B
 - Admin. -- OPI
 - Admin. -- General Fund
 - Meals -- III-C-1
 - General Fund
 - Other
 - b) A Reimbursement Request Form for Required Match, as included in the approved budget.
 - c) A Reimbursement Form showing Project Income/Contributions collected.
 - d) A Reimbursement Form showing total City reimbursement.
 - e) Supporting documentation showing proof of payment (attached to respective Reimbursement Request Forms). This may include:
 - copies of checks
 - copies of bills
 - payroll register
 - etc.
5. Supporting documentation is to be attached to each request form, including the Required Match (copies of documentation are not necessary for the Total City Reimbursement).

For each request form, documentation is to be grouped by line item. (Attach adding machine tape to each group of supporting documents.)

Please Note: For purposes of fiscal reporting, Match included in the contract requires the same documentation as City Support requested.

6. If a piece of documentation is applicable to more than one funding source (or match), write on the supporting documentation how much is to be applied to each funding source/service category.
7. The "indirect cost" line item may be used to cover any costs incurred in support of the services included in the contract. Documentation/proof of payment must be submitted for each reimbursement requested.
8. Grant or Agency policy requires that expenditures be reported in dollars and cents. *DO NOT ROUND TO THE NEAREST DOLLAR!*
9. Reimbursement requests must be typed or written in ink.
10. Reimbursement Request Forms must be signed in ink by an authorized person designated by the Agency. Each agency must submit to the City the names of all persons authorized to sign these reports. The Agency is responsible for notifying the City in writing of any changes in authorized signatures.
11. The reimbursement request must be made against the current authorized contract. Each agency is responsible for notifying appropriate personnel of budget changes.
12. Incomplete or incorrect Reimbursement Request Forms will be returned to the Contractor for completion or correction.
13. Match expenditures will be analyzed quarterly as part of the monitoring procedures. Corrective action plans will be developed if necessary to assure contract compliance.

Corrective action may include: withholding of funds, suspension, or termination of the contract.

If match is not produced in accordance with the approved contract by the third (3rd) quarter of the budget year, the City will reduce its contribution to maintain the established ratio of shared costs. (For AAA District Centers, this ratio is a minimum of 90/10 City/Agency share for Discretionary Services. For other contracts, the level of required match has been negotiated.)

14. Upon receipt of completed reimbursement forms, the Accounting Unit staff reviews the request for accuracy and compliance with the approved budget, prepares payment authorization, and submits the reimbursement package to the Program staff.
15. Program Staff reviews the package and signs off, if request complies with regard to appropriate service delivery. Reimbursement request will be held until Program reports are received.
16. Principal Accountant reviews the package, approves payment, and forwards the package to Accounts Payable at City Hall.

17. Accounts Payable reviews the package, approves payment, and processes the package for the computer to fill out the warrant (check). Computer runs are made every Tuesday and Thursday evenings.
18. Checks are returned to Accounts Payable for verification of computer run.
19. The computer run is forwarded to the Auditor's Office for auditing and release (mailing) of the warrant.
20. Total estimated turnaround time is two weeks from the time a completed package leaves the Human Resources Bureau. HRB staff can usually complete its work within two days, if the requests are complete and correct, and program reports have been received.
21. In the event of an emergency or other unusual circumstances, as approved by the Principal Accountant, a manual warrant may be issued within 72 hours. A manual warrant process will not be utilized on a regular basis.

We hope that these procedures will clarify what is expected of Agency staff in the filling out and processing of these documents. If you have any questions or need further information, please feel free to call the Accounting Unit or Social Services Contract Management staff at 243-4752.

CONTRACT FOR SERVICES

SECTION I: PARTIES TO THE CONTRACT

CITY OF PORTLAND ("City"), City Hall, 1220 S. W. Fifth Avenue, Portland, Oregon 97204, and

Hollywood Senior Center, Inc., "Contractor", 1820 N.E. 40th Avenue, Portland, Oregon 97212.

SECTION II: CONTRACT SUMMARY

Contractor agrees to provide information, referral, case management, and support services to elderly residents in the Northeast Senior Service District in Portland/Multnomah County and further agrees that the total cost shall not exceed the sum of \$70,505.

SECTION III: PERIOD OF PERFORMANCE

Performance under this contract shall commence July 1, 1980, and continue through June 30, 1984, unless extended by City Council action. Activities and budget shall be negotiated annually.

SECTION IV: AGREED CONTRACTOR: PROJECT OPERATION

- A. Contractor shall by June 30, 1981 meet all goals and objectives stated in the "Project Narrative" (Exhibit A, hereby incorporated by reference).
- B. Contractor shall ensure that no portion of this contract shall in any way discriminate against, deny benefits to, deny employment to, or exclude from participation any persons on the grounds of race, color, national origin, religion, age, sex, handicap, marital status, sexual preference, political affiliation or belief; and that it shall target these services to those most in need.
- C. Contractor shall provide a minimum 10% match to discretionary services (\$3,355) as approved in the budget (refer to Exhibit B). Failure to meet this requirement shall result in a reduction of budget or termination of contract.
- D. Contractor shall retain client records for a minimum of five years and shall make said documents available at all reasonable times to the City, or its duly authorized representative, for evaluation through inspection of the quality, appropriateness, and timeliness of services.
- E. The use or disclosure by any party of any information concerning a recipient of services purchased under this contract, for any purpose not directly connected with the administration or program evaluation of the City, is prohibited except on written consent of the recipient or the recipient's attorney.

SECTION V: CONTRACTOR REPORTING AND RECORD REQUIREMENTS

- A. Contractor shall use the standardized forms provided by the City for reporting purposes (Exhibit C, hereby incorporated by reference). If additional forms are deemed necessary, said forms shall be developed through negotiation.
- B. Required program reports shall be submitted by 3:00 P.M. of the 5th working day of each month. Reports shall be completed accurately in conformance with the guidelines and monitoring directions provided by the City. Program reports which are not received by the time specified shall result in delayed reimbursement.
- C. Contractor shall submit to the City, a final "Director's Narrative Report" within forty-five (45) days of the conclusion of the Project covered by this contract. The report should identify problems, corrective action taken, requests for technical assistance, any plans for seeking/securing other resources, and any concerns relative to the City's performance.
- D. Contractor shall maintain for a minimum of three (3) years all fiscal and program reports, including statistical records, and shall provide these reports at times and in the form prescribed by the City. In the event of dissolution of the corporation within the specified time, said records shall be turned over to the City Auditor.
- E. Contractor shall submit to the City copies of all requests for Federal, state or local grants that affect the services provided under this contract prior to submitting the request to the funding source.
- F. Contractor shall provide for program and facility reviews, including meetings with consumers, reviews of service and fiscal records, policies/procedures, staffing patterns, job descriptions, and meeting with any staff directly or indirectly involved in the performance of this contract at any reasonable time on request of and by persons authorized by the City.
- G. Contractor shall submit to the City one (1) copy of all formal documents produced under this contract.
- H. Contractor shall provide proof of its timely payment of withholding taxes, unemployment taxes, and SAIF.
- I. Contractor shall submit to the City, prior to commencement of this contract except where one is already on file, its current:
 - Personnel Policy which sets forth procedures for hiring, firing, grievances; and identifies all paid holidays;

- List of names and signatures of persons authorized to act as the Contractor's agents;
- Articles of Incorporation and By-Laws;
- List of Board of Directors and Advisory Council members.

Contractor further agrees to submit any changes in these documents to the City within thirty (30) days of their effective dates.

SECTION VI: AGREED CITY

- A. City shall provide technical assistance upon written request of the Contractor.
- B. City shall provide all required reporting forms to the Contractor.
- C. City shall monitor the project based on all of the provisions as set forth in this contract.
- D. City shall give Contractor written notification of problem areas related to the performance of this contract, including requirements for corrective action.
- E. City may conduct at least one contractor meeting per month.
- F. City shall conduct training sessions as necessary to ensure quality delivery services and effective program management.
- G. City shall conduct on-site contract and facility reviews on a quarterly basis. On-site monitoring shall be pre-arranged with each Contractor.
- H. City shall process monthly reimbursement requests and contract amendments in a timely manner.

SECTION VII: COMPENSATION - METHOD OF PAYMENT

- A. Total compensation under this contract shall not exceed \$70,505.
- B. An advance shall be made to cover the cost of the Contractor's initial expenses for operation, not to exceed the sum of \$11,751 upon receipt of a written request from the Contractor.

- C. The additional amounts due after the initial advance shall be reimbursed upon receipt of the required ACCOUNTING REPORT FORMS (refer to Exhibit C), the original with appropriate documentation attached. All reimbursement documents shall be received by the fifteenth (15th) working day of each month. Reimbursements not received by the specified time shall be delayed and processed for payment the following month, or may result in termination of the contract. Payments shall also be held if the required program reports are not received by the specified time.
- D. All final reimbursement documents shall be received within forty-five (45) days following the end of the budget period. Final reimbursement documents not received within the specified time period shall not be processed, and the expense shall be the sole responsibility of the Contractor.
- E. Advances shall be recovered against expenditures in accordance with an established schedule developed and distributed by the City.
- F. All payments made pursuant to this contract are subject to post audit. The City shall perform spot audits at their discretion any time during the contract period. Contract costs disallowed by the City shall be the sole responsibility of the Contractor. If a contract cost is disallowed after reimbursement has occurred, the Contractor shall promptly repay the City.
- G. All funds received from the City shall be used by the Contractor as set forth in the budget (refer to Exhibit B). Funds not used shall be returned promptly to the City at the end of the budget period. Any costs incurred by the Contractor over and above the agreed sums, as set out in the budget, shall be at the sole risk and expense of the Contractor.
- H. The operating budget may be amended, provided the full cost does not exceed the amount stated in the contract. Budget amendments shall not become effective until the Commissioner-in-Charge has given written approval and filed the approved document with the City Auditor. Budget overruns of five percent (5%) or \$1,000, whichever is less, are allowable without a budget amendment on all line items within the Materials and Services category, excluding Out-of-Town Travel. These line item overruns shall be compensated for within the same category.
- I. Budget amendments shall not be accepted during the last quarter of the budget period (April 1 through June 30).

- J. All items with a purchase price of one hundred dollars (\$100) or more hereunder shall be purchased in the name of the City. Such purchases shall be for cash and not include any credit terms, and shall be reported to the City within ten (10) days (refer to Exhibit C), tagged by the City, included in the City's Property Control, and shall be the property of the City. Contractor shall maintain an acceptable and current log of this property and property acquired under previous contracts with the City. All non-expendable items shall be returned to the City within ten (10) days after the contract has terminated.
- K. Contractor shall also maintain a current and acceptable log of all non-consumable supplies purchased under this contract. Non-consumable means items with a minimum value of \$25.00 per item and a maximum value of \$99.99 per item purchased under this contract. All such items shall also be returned to the City within ten (10) days after the contract has terminated.

SECTION VIII: GENERAL CONDITIONS

- A. Contractor shall abide by all Federal, state and local regulations/policies governing project operations, management, and service delivery. The funds shall be used for the purpose for which they are provided.
- B. Prior to commencement of this contract, Contractor shall deliver to the City Auditor evidence:
- 1) that all persons handling funds received or disbursed under this contract are covered by a Fidelity Bond in the amount of \$10,000 or 100% of the estimated sixty (60) day cash flow, whichever is less;
 - 2) of a Standard Liability Insurance Policy in the single limit amount of \$300,000 and provide the City Auditor with an endorsement thereto, naming the City as an additional insured and protecting the City, its agents, and employees from claims for damages arising in whole or in part out of the performance of this contract;
 - 3) that all property and equipment purchased or received by the Contractor pursuant to this contract is insured against fire, theft and destruction; and
 - 4) that the above policies of insurance are in force and shall not be cancelled without thirty (30) days prior notice to the City.