

5/10

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

The Japanese Ancestral Society of Portland will administer the project. The Portland Chapter of the Japanese American Citizens League will, through a non-financial agreement with the Ancestral Society, co-sponsor the project.

An Advisory board will be composed of representatives of both of these organizations. In addition, a project participants will be elected to the area-side Nutrition Project Council.

Project staff consists of a Site Manager, selected by the Board of Directors; a Bookkeeper, and Assistant Site Manager. Cater Manager and Caterpersons (two, one on half-time) and a Cook will be selected and supervised by the Site Manager. The Site Manager will be responsible for the recruitment and supervision of volunteers and their assignments in the tasks of escort, outreach, and Nutrition Site activities. The Assistant Site Manager will assist in recording attendance and telephone reassurance. The Cater Manager will be responsible for ordering and serving meals delivered. The Caterperson will substitute for the Cater Manager in his/her absence and assist in serving and cleaning up. The Cook will consult with the Site Manager about the menu then take complete charge of purchasing, preparing, serving, and cleaning up of the Traditional Meals. The Site Manager together with another staff member will be responsible for donations and other transactions. The Bookkeeper will be responsible for making monthly financial reports and doing payrolls. Training activities will include participation in AAA sponsored sessions as well as those offered by other community resources.

Site operations will be from 11:00 a.m. to 2:00 p.m., Monday through Friday. Holidays are New Year's Day, President's, Memorial Day, Fourth of July, Labor Day, Veteran's Day, Thanksgiving, Christmas, and 3 days in allowance for days when there may be conflict in the use of the Church due to their functions.

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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 Japanese Ancestral Society of Portland was founded more than seventy years ago to provide services to Japanese immigrants. The Japanese American Citizen's League just celebrated its fiftieth anniversary. Both organizations have contributed services to Japanese Americans to assist them in adjusting to their new homes.

Both organizations participated in the survey of their community in order to identify the elderly in need of services. Both organizations are helping to publicize the project and work toward its success. A representative of the Nutrition Project is always in attendance at the monthly meeting of the Japanese Ancestral Society.

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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.)

Japanese American community in Portland formed the Japanese Ancestral Society more than 70 years ago to advocate for individuals of Japanese descent. The Portland Chapter of the Japanese American Citizens League was formed 50 years ago with the intent of advocacy and increasing the participation of Japanese American Citizens in the political process. Members of both these groups have been heavily involved on a volunteer basis in the implementation of this project. Extensive volunteer support from the Japanese American community will continue for the life of this project.

In addition, the Advisory Board will advise the Board of Directors of the Ancestral Society on all program operations. The Advisory Board will approve all policy decisions with respect to menu, fees, and other supportive services.

10. Coordination: (Describe the intention 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 Japanese American Nutrition Project (Ihori-No-Kai) will coordinate with other AAA components in providing technical assistance in meeting the needs of elderly Japanese Americans.

The project through a sub-contract will buy meals from Loaves and Fishes Center, Inc. Extensive coordination and assistance between the Japanese American Nutrition Project and Loaves and Fishes Centers, Inc., will make possible improved nutrition services to all members of the community.

Requests and information or assistance to obtain needed services not available through Ihori-No-Kai will be referred by the Site Manager or assistant Site Manager to the Japanese Ancestral Society which provides information and referral services on a full time basis.

EXHIBIT B
BUDGETS AND ATTACHMENTS

FISCAL SECTION Iko1-No-Kai

1. Budget Summary

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

<u>City Support Requested</u>		<u>Amount</u>
Meals	Title III-C-1	36,363
Access Services	Title III-B	10,163
Administration	Title III-C-1	3,474
Subtotal		50,000
Required Cash Match		1,000
In-kind Match		1,920
Program Income		5,648
USDA		3,578
Subtotal		62,146
<u>Other Project Support</u>		
Other Resources / Donations		3,117
TOTAL		65,263

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

Basis of income and support services is calculated from previous years experience.

2. Statement of Certification

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

Authorized Signature _____ Date May 30, 1980

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 -- *Multnomah County*

APPROPRIATION UNIT
LINE ITEM WORKSHEET

Code	Object Title	Title III-C-1 Meals	Title III-B Access Services	Title III-C-1 Administration	Total City Support	Program Income
110	Full Time Employees	17,173	5,942	2,718	25,833	
120	Part-Time Employees					
130	Federal Program Enrollees					
140	Overtime					
150	Premium Pay					
170	Benefits	2,404	832	381	3,617	
190	Less-Labor Turnover					
100	Total Personal Services	19,577	6,774	3,099	29,450	-0-
210	Professional Services					
220	Utilities	3,431	69		3,500	
230	Equipment Rental					
240	Repair & Maintenance	480			480	
260	Miscellaneous Services					
310	Office Supplies			240	240	
320	Operating Supplies	416			416	
330	Repair & Maint. Supplies					
340	Minor Equipment & Tools	200			200	
350	Clothing & Uniforms					
380	Other Commodities-External	11,959			11,959	5,408
410	Education					
420	Local Travel		1,202		1,202	240
430	Out-of-Town Travel					
440	Space Rental					
450	Interest					
460	Refunds					
470	Retirement System Payments					
490	Miscellaneous					
510	Fleet Services					
520	Printing Services			135	135	
530	Distribution Services					
540	Electronic Services					
550	Data Processing Services					
560	Insurance		2,118		2,118	
570	Telephone Services	300			300	
580	Intra-Fund Services					
590	Other Services-Internal					
200- 500	Total Materials & Services	16,786	3,389	375	20,550	5,648
610	Land					
620	Buildings					
630	Improvements					
640	Furniture & Equipment					
600	Total Capital Outlay					
700	Other					
	TOTAL	36,363	10,163	3,474	50,000	5,648

Code	Object Title	Required Cash Match	Required In-Kind Match	Required Total Match	USDA	Total City Contract Amount
110	Full Time Employees		1,684	1,684		27,517
120	Part-Time Employees					
130	Federal Program Enrollees					
140	Overtime					
150	Premium Pay					
170	Benefits		236	236		3,853
190	Less-Labor Turnover					
100	Total Personal Services	-0-	1,920	1,920	-0-	31,370
210	Professional Services					
220	Utilities					3,500
230	Equipment Rental					
240	Repair & Maintenance					480
260	Miscellaneous Services					
310	Office Supplies					240
320	Operating Supplies					416
330	Repair & Maint. Supplies					
340	Minor Equipment & Tools					200
350	Clothing & Uniforms					
380	Other Commodities-External				3,578	20,945
410	Education					
420	Local Travel					1,442
430	Out-of-Town Travel					
440	Space Rental	1,000		1,000		1,000
450	Interest					
460	Refunds					
470	Retirement System Payments					
490	Miscellaneous					
510	Fleet Services					
520	Printing Services					135
530	Distribution Services					
540	Electronic Services					
550	Data Processing Services					
560	Insurance					2,118
570	Telephone Services					300
580	Intra-Fund Services					
590	Other Services-Internal					
200- 500	Total Materials & Services	1,000	-0-	1,000	3,578	30,776
610	Land					
620	Buildings					
630	Improvements					
640	Furniture & Equipment					
600	Total Capital Outlay					
700	Other					
	TOTAL	1,000	1,920	2,920	3,578	62,146

Code	Object Title	Other Resources	Total Project			
110	Full-Time Employees		27,517			
120	Part-Time Employees	602	602			
130	Federal Program Enrollees					
140	Overtime					
150	Premium Pay					
170	Benefits	84	3,937			
190	Less-Labor Turnover					
100	Total Personal Services	686	32,056			
210	Professional Services	843	843			
220	Utilities		3,500			
230	Equipment Rental					
240	Repair & Maintenance		480			
260	Miscellaneous Services					
310	Office Supplies		240			
320	Operating Supplies	488	904			
330	Repair & Maint. Supplies					
340	Minor Equipment & Tools		200			
350	Clothing & Uniforms					
380	Other Commodities-External	300	21,245			
410	Education	200	200			
420	Local Travel		1,442			
430	Out-of-Town Travel					
440	Space Rental		1,000			
450	Interest					
460	Refunds					
470	Retirement System Payments					
490	Miscellaneous	600	600			
510	Fleet Services					
520	Printing Services		135			
530	Distribution Services					
540	Electronic Services					
550	Data Processing Services					
560	Insurance		2,118			
570	Telephone Services		300			
580	Intra-Fund Services					
590	Other Services-Internal					
200-500	Total Materials & Services	2,431	33,207			
610	Land					
620	Buildings					
630	Improvements					
640	Furniture & Equipment					
600	Total Capital Outlay					
700	Other					
	TOTAL	3,117	65,263			

PERSONNEL

DATE June 11, 1980

AGENCY Japanese Ancestral Society

FUNDING SOURCE TITLE III-C-1 / Meals

(A) No. of Persons	(B) Position or Title	(C) Monthly Salary Rate (Full-Time)	(D)% of Time on Contract	(E) Maximum Monthly Charge to Contract	(F) No. of Months on Contract	(G) Cost (Ax CxDxF)
1	Site Manager	865	35	302.75	12	3,633
1	Asst. Site Mgr.	522	30	156.60	12	1,879
1	Cater Mgr.	522	50	261.00	12	3,132
1	Traditional Cook	522	30	156.60	12	1,879
2	Asst. Caterers	502	50	502.00	12	6,024
1	Custodian	522	10	52.20	12	626
SUB-TOTAL, PERSONNEL					17,173	
14 * % FRINGE BENEFITS					2,404	
TOTAL, PERSONNEL					19,577	

*Indicates fringe benefits as a percentage of "Sub-total, Personnel

CONTRACT JUSTIFICATION BUDGET

PERSONNEL

CONTRACT NO.

DATE June 11, 1980

CONTRACT TITLE Ikoi-No-Kai Nutrition Project

AGENCY Japanese Ancestral Society

FUNDING SOURCE TITLE III-B / Access Services

[illegible]

*Non union driver salary

SUB-TOTAL, PERSONNEL 5,942

14 * % FRINGE BENEFITS 832

TOTAL, PERSONNEL	6,774
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*Indicates fringe benefits as a percentage of "Sub-total, Personnel

PERSONNEL

DATE June 11, 1980

AGENCY . . . Japanese Ancestral Society

FUNDING SOURCE TITLE III-C-1 / Administration

*Indicates fringe benefits as a percentage of "Sub-total, Personnel

CONTRACT JUSTIFICATION BUDGET

149874

PERSONNEL

CONTRACT NO. _____

DATE June 11, 1980

CONTRACT TITLE Ikoi-No-Kai Nutrition Project

AGENCY Japanese Ancestral Society

FUNDING SOURCE TOTAL CITY SUPPORT

(A) No. of Persons	(B) Position or Title	(C) Monthly Salary Rate (Full-Time)	(D)% of Time on Contract	(E) Maximum Monthly Charge to Contract	(F) No. of Months on Contract	(G) Cost (AxCxDxF)
1	Site Manager	865	60	519.00	12	6,228
1	Asst. Site Mgr.	522	50	261.00	12	3,132
1	Cater Manager	522	50	261.00	12	3,132
1	Traditional Cook	522	30	156.60	12	1,879
2	Asst. Caterers	502	50	502.00	12	6,024
1	Van Driver	522 *	50	261.00	12	3,132
1	Custodian	522	10	52.20	12	626
1	Bookkeeper	700	20	140.00	12	1,680
*Non union driver salary						
SUB-TOTAL, PERSONNEL					25,833	
14* % FRINGE BENEFITS					3,617	
TOTAL, PERSONNEL					29,450	

*Indicates fringe benefits as a percentage of "Sub-total, Personnel"

PERSONNEL

CONTRACT NO.

DATE June 11, 1980

CONTRACT TITLE Ikoi-No-Kai Nutrition Project

AGENCY Japanese Ancestral Society

FUNDING SOURCE	In-Kind Match	/	Required

[illegible]

*In-kind match at rate commensurate with regular union salary

SUB-TOTAL, PERSONNEL 1,684

14 * % FRINGE BENEFITS .236

TOTAL, PERSONNEL	1,920
------------------	-------

*Indicates fringe benefits as a percentage of "Sub-total, Personnel

CONTRACT JUSTIFICATION BUDGET

PERSONNEL

CONTRACT NO. _____
 CONTRACT TITLE Iko-i-No-Kai Nutrition Project
 AGENCY Japanese Ancestral Society
 FUNDING SOURCE TOTAL CONTRACT AMOUNT

DATE June 11, 1980

(A) No. of Persons	(B) Position or Title	(C) Monthly Salary Rate (Full-Time)	(D)% of Time on Contract	(E) Maximum Monthly Charge to Contract	(F) No. of Months on Contract	(G) Cost (AxCxDxF)
1	Site Manager	865	60	519.00	12	6,228
1	Asst. Site Mgr.	522	50	261.00	12	3,132
1	Cater Manager	522	50	261.00	12	3,132
1	Traditional Cook	522	30	156.60	12	1,879
2	Asst. Caterers	502	50	502.00	12	6,024
1	Van Driver	522 *	50	261.00	12	3,132
1	Custodian	522	10	52.20	12	626
1	Bookkeeper	700	20	140.00	12	1,680
1	Van Driver	1,000 **	4	40.00	12	480
2	Kitchen Aides	503	10	100.60	12	1,204

*Non-union driver salary

**In-kind match at rate commensurate with regular union salary

SUB-TOTAL, PERSONNEL 27,517

14 * % FRINGE BENEFITS 3,853

TOTAL, PERSONNEL 31,370

*Indicates fringe benefits as a percentage of "Sub-total, Personnel

BUDGET JUSTIFICATION
MATERIALS AND SERVICES

DATE May 30, 1980

PROJECT NO. _____

PROJECT TITLE Ikoi-No-Kai/Japanese Ancestral Society

Meals

To extent possible, use format indicated below. Title III-C-1

CODE	DESCRIPTION OF ITEM AND BASIS FOR VALUATION	ITEM TOTAL	CATEGORY TOTAL
220	Utilities Heating Oil \$305/mo X 7mos Electricity \$45/mo X 12mos Natural Gas \$45/mo X 12mos Garbage Collection \$10/mo X 12mos Water \$13.75/mo X 7mos	2,135 540 540 120 96	3,431
240	Repair and maintenance	480	480
320	Operating Supplies (paper placemats, chopsticks) 8320 Meals @ .05/meal	416	416
340	Minor Equipment and tools No item to exceed \$99.99	200	200
380	Other Commodities-External * 5722 Meals @ \$2.09 per meal (raw food cost)	11,959	11,959
570	Telephone Service \$25/month	300	300
	* Inexact due to rounding		

BUDGET JUSTIFICATION
MATERIALS AND SERVICES

149874

DATE May 30, 1980

PROJECT NO. _____

PROJECT TITLE Ikoi-No-Kai/ Japanese Ancestral Society

Access Services

To extent possible, use format indicated below. Title III-B

CODE	DESCRIPTION OF ITEM AND BASIS FOR VALUATION	ITEM TOTAL	CATEGORY TOTAL
220	Utilities Water @ \$13.75/mo X 5mos	69	69
420	Local Travel @ \$80/month (van costs) 1423 miles @ .17¢ (private Cars)	960 242	1,202
560	Insurance	2,118	2,118

BUDGET JUSTIFICATION

MATERIALS AND SERVICES

DATE May 30, 1980

PROJECT NO. _____

PROJECT TITLE Ikoi-No-Kai/Japanese Ancestral Society

Administration

To extent possible, use format indicated below. Title III-C-1

CODE	DESCRIPTION OF ITEM AND BASIS FOR VALUATION	ITEM TOTAL	CATEGORY TOTAL
310	Office Supplies @\$20/month	240	240
520	Printing Services	135	135

PROJECT NO. _____

PROJECT TITLE Ikoi-No-Kai/Japanese Ancestral Society

To extent possible, use format indicated below. Title III-C-1

B-14

BUDGET JUSTIFICATION
MATERIALS AND SERVICES

DATE June 11, 1980

PROJECT NO. _____

PROJECT TITLE Iko-i-No-Kai Japanese Ancestral Society

Total City Support

To extent possible, use format indicated below.

CODE	DESCRIPTION OF ITEM AND BASIS FOR VALUATION	ITEM TOTAL	CATEGORY TOTAL
220	Utilities Heating Oil \$305/mo x 7 mos. Electricity \$45/mo x 12 mos. Natural Gas \$45/mo x 12 mos. Garbage Collection \$10/mo x 12 mos. Water @ \$13.75/mo x 12 mos.	2,135 540 540 120 165	3,500
240	Repair and Maintenance	480	480
310	Office Supplies @ \$20/mo.	240	240
320	Operating Supplies (paper placemats, chopsticks) 8,320 meals @ .05/meal	416	416
340	Minor Equipment and Tools No item to exceed \$99.99	200	200
380	Other Commodities - External 5722 meals @\$2.09 per meal * raw food cost	11,959	11,959
420	Local Travel @\$80/month 1,423 miles @ .17	960 242	1,202
520	Printing Services	135	135
560	Insurance	2,118	2,118
570	Telephone Services \$25/month	300	300
	*Inexact due to rounding		

BUDGET JUSTIFICATION
MATERIALS AND SERVICES

DATE May 30, 1980

PROJECT NO. _____

PROJECT TITLE Ikoi-No-Kai/ Japanese Ancestral Society

Program Income

To extent possible, use format indicated below.

CODE	DESCRIPTION OF ITEM AND BASIS FOR VALUATION	ITEM TOTAL	CATEGORY TOTAL
380	Other commodities_ External Donations for meals 2588 Meals @\$2.09*	5,408	5,408
420	Local travel Donations from van riders \$20/mo	240	240
* Inexact due to rounding Amount calculated at a rate of \$.65 per meal x 8320 meals			

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BUDGET JUSTIFICATION
MATERIALS AND SERVICESDATE May 30, 1980

PROJECT NO. _____

PROJECT TITLE Iko-i-No-Kai/Japanese Ancestral SocietyRequired Cash Match

To extent possible, use format indicated below.

CODE	DESCRIPTION OF ITEM AND BASIS FOR VALUATION	ITEM TOTAL	CATEGORY TOTAL
440	Space rental \$83.30/mo X 12mos	1,000	1,000

BUDGET JUSTIFICATION
MATERIALS AND SERVICES

DATE May 30, 1980

PROJECT NO. _____

PROJECT TITLE Iko-i-No-Kai/Japanese Ancestral Society

USDA

To extent possible, use format indicated below.

CODE	DESCRIPTION OF ITEM AND BASIS FOR VALUATION	ITEM TOTAL	CATEGORY TOTAL
380	Other commodities-External Title III 8320 meals @ \$o.430	3,578	3,578

JA 80/81

BUDGET JUSTIFICATION
MATERIALS AND SERVICES

DATE May 30, 1980

PROJECT NO. _____

PROJECT TITLE Ikoï-No-Kai/ Japanese Ancestral Society

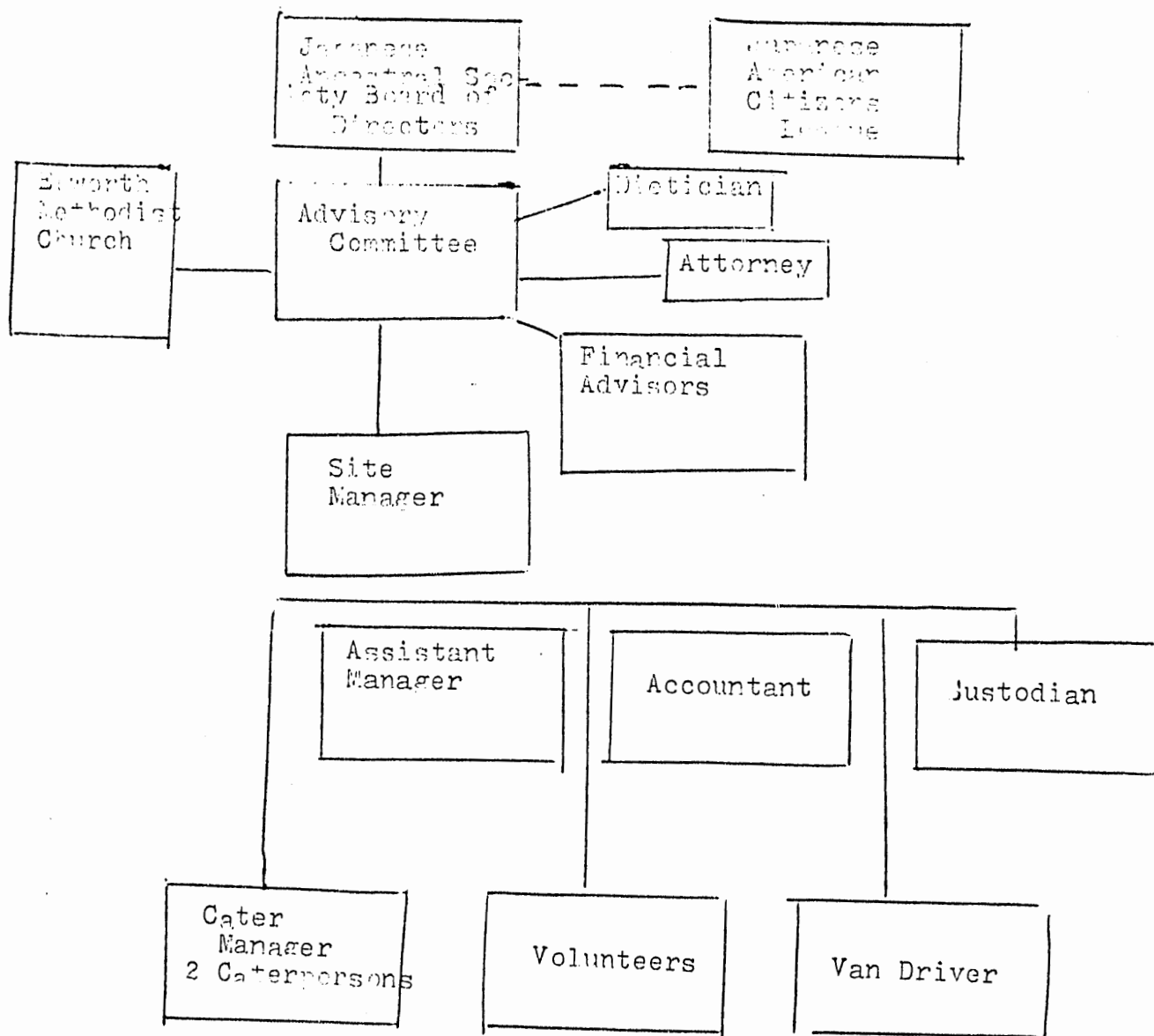
Total City Contract

To extent possible, use format indicated below.

CODE	DESCRIPTION OF ITEM AND BASIS FOR VALUATION	ITEM TOTAL	CATEGORY TOTAL
220	Utilities Heating Oil \$305/mo X 7mos Electricity \$45/mo X 12mos Natural Gas \$45/mo X 12mos Garbage Collection \$10/mo X 12mos Water \$13.75 X 12mos	2,135 540 540 120 165	3,500
240	Repair and maintenance	480	480
310	Office Supplies \$20/mo	240	240
320	Operating Supplies (paper placemats, shopsticks) 8320 meals @ \$.05 per meal	416	416
340	Minor Equipment and Tools	200	200
380	Other Commodities-External 8320 meals @ \$2.53 per meal (raw food cost) (Inexact due to rounding)	20,945	20,945
420	Local Travel Van Costs @ \$80/month Mileage 1423miles @ \$.17 Cash donation from van riders \$20/month	960 242 240	1,442
440	Space rental @ \$83.30/mo X 12mos	1,000	1,000
520	Printing services	135	135
560	Insurance	2,118	2,118
570	Telephone service \$25/mo	300	300

PROJECT TITLE: _____

PROJECT ORGANIZATION CHART:



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SITE MANAGER

General Responsibility:

Operate and manage nutrition site components including congregate meal service, social services program, volunteer organization, and staff supervision

Reports to:

Advisory Committee

Supervisory Responsibilities:

Assistant Manager, Traditional Cook, Caterpersons, Custodian, Van Driver, Volunteers

Key Duties and Responsibilities:

1. Recruit, train, supervise and give recognition to volunteers.
2. Provide social activities and appropriate meal in a comfortable setting for participants.
3. Maintain records and prepare reports.
4. Supervise and provide training for staff.
5. Attend meetings as required.

Qualifications:

1. Supervisory skills for administration of program, paid staff and volunteers.
2. Organization and communication skills to create and direct the program, recruit volunteers and participants, and maintain a satisfactory level of performance.
3. Record-keeping skills for fiscal and participation reports.

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80/81

CATER PERSONGeneral Responsibility:

Produce meals at congregate facility for persons 60 and over.

Reports to:

Site Manager

Supervisory Responsibilities:

Assistant Caterpersons and volunteers.

Key Duties and Responsibilities:

1. Produce appropriate quality and quantity of meals at congregate site.
2. Supervise paid and volunteer staff in preparation of meals and clean-up.
3. Responsible for sanitary conditions in kitchen and dining room.

Qualifications:

1. Knowledge of food handling procedures.
2. Ability to supervise assistants and volunteers.
3. Ability to operate appropriate equipment.

ASSISTANT SITE MANAGER

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General Responsibility:

- Assist site manager in all facets of operation of meal site.

Reports to:

Site Manager

Supervisory Responsibilities:

Supervises all-staff during absence of site manager.

Key Duties and Responsibilities:

1. Assist site manager in daily operation of the meal site.
2. Assume responsibility for a portion of the support services such as friendly visits and telephone reassurance.
3. Operate and manage program in the absence of the site manager.

Qualifications:

1. Supervisory and administrative skills to operate program satisfactorily.
2. Communication skills to focus on support services.
3. Technical skills for record-keeping and adequate knowledge of food service.

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ASSISTANT CATERPERSON

General Responsibility: Assist in production of meals at congregate site.

Reports to: Caterperson

Supervisory Responsibilities: None

Key Duties and Responsibilities:

1. Arrange tables and settings
2. Serve meals
3. Participate in clean-up activities

Qualifications:

1. Ability to handle and serve food properly

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B O O K K E E P E RGeneral Responsibility:

Maintain fiscal records for program

Reports to:

Site Manager

Supervisory Responsibilities:

None

Key Duties and Responsibilities:

1. Maintain appropriate fiscal records in accordance with contract requirements.
2. Assist site manager with financial aspects of program.

Qualifications:

1. Knowledge of appropriate bookkeeping procedures.
2. Ability to translate bookkeeping procedures into workable system for meal site.

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C U S T O D I A N

General Responsibility:

Clean floors at meal site and set up tables and chairs

Reports to:

Site Manager

Supervisory Responsibilities:

None

Key Duties and Responsibilities:

1. Maintain meal site floors in sanitary condition.
2. Set up tables and chairs for weekly operation and remove for week-end activities.

Qualifications:

1. Ability to use cleaning equipment.
2. Physical ability to set up tables and chairs.

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V A N D R I V E RGeneral Responsibility:

Transport participants to and from meal site.

Reports to:

Site Manager

Supervisory Responsibilities:

None

Key Duties and Responsibilities:

1. Transport participants from their homes to meal sites or activities and back.
2. Maintain vehicle in proper condition.

Qualifications:

1. Valid Oregon Chauffeur's license.
2. Ability to plan and execute appropriate routes.

17 PROJECT TITLE: Itoi-No-Kai Japanese Nutrition Project

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

NAME/ADDRESS	TELEPHONE	TERM
Kawasaki, Corky, Chairman	232 8763	
Azumano, George	223 6245	
Kondo, Saburo	223 4405	
Iwamoto, Isamu	760 2931	
Dozeno, Asazo	232 3526	
Ueno, Henry	253 3001	
Morita, Chieto	255 7839	
Soga, Kanichi	228 7069	
Kida, Keiichi	227 2544	
Nishimoto, Y.	774 6377	
Sunamoto, Hiroshi	644 3003	
Ikata, Sueo	238 4618	
Koida, Minoru	659 6261	
Abe, Albert	639 5166	
Ikeda, Kaneo	228 4784	

PROJECT TITLE: Ihei-Ni-Kai, Japanese Nutrition Project

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.)
Kawagaki, Corky	617 N.E. Randall	1/82	Yes	Consumer, Minority
Dozero, Asezo	3125 S.E. Lincoln	1/82	Yes	Consumer, Minority
Sargent, Peggy	1226 S.W. Saring Lafayette	1/82	No	Consumer
Azumano, Geo	2802 S.E. Moreland	1/82	Yes	Consumer, Minority
Suzabiro, William	4664 S.E. King Rd.	1/82	No	653 1294
Ovanasi, Waichi		6/80	Yes	
Sasaki, Truman	7745 S.W. Cedar	1/81	No	Volunteer
Ninomiya, Harue	1729 N. Russet	1/81	No	Volunteer
Rev. Chester Earle	1333 S.W. 28th	6/80	No	Volunteer
Marv Maito	4830 S. Fairview Blvd	6/80	No	Volunteer
Akiyama, Harue	511 S.W. Nevada	6/80	Yes	Consumer, Minority
Henjyoji, Mrs.	2634 N.E. 12th	1/80	Yes	Consumer, Minority
Inouye, Jerry	2019 N.E. Morgan	1/81	No	Volunteer
Fujii, Aya	1516 N.W. Division Gresham	6/80	No	Volunteer
Kato, Henry	7620 S.E. 190 Dr. Gresham	6/80	Yes	Consumer, Minority
Soga, Kanichi	4323 Condor	1/81	No	Volunteer

APPLICANT AGENCY RESUME

Applicant Agency Legal Name: Japanese American Society of Portland Date of Incorporation: _____

Type of Organization:

Public	_____
Private Non-Profit	<u>x</u>
Private-Profit	_____
Other (_____)	_____

Short Statement of Agency Purpose:

All services of Japanese Community

Major Agency Bank Account (give name of bank, address and contact person): First State Bank of Oregon S.W. Sixth & Alder Office Portland, OR. 97204	Fiscal Accounting Arrangement (give name of staff responsible or, if by contract, name of agency, address and contact person): Lury Sato Site Manager
---	--

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.)

Hartford Fire Insurance Co. Fire & Lightning	(Paid half of year's
\$300,000 for liability	Extended Coverage premium 1-5-80 to
\$4,000 for Fire on Equipments	5-5-81)

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

Lury Sato , Site Mre.	\$10,000.00
Yuji Hiromura, Bookkeeper	

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

Agreement with the church to make improvements with approval of the Church. There is to be no charge on the rent, but that the Nutrition Project will cover all the utilities, however we are negotiation about the heating oil, that it might be shared.

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

Japanese Ancestral Soc. (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 affects 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.

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

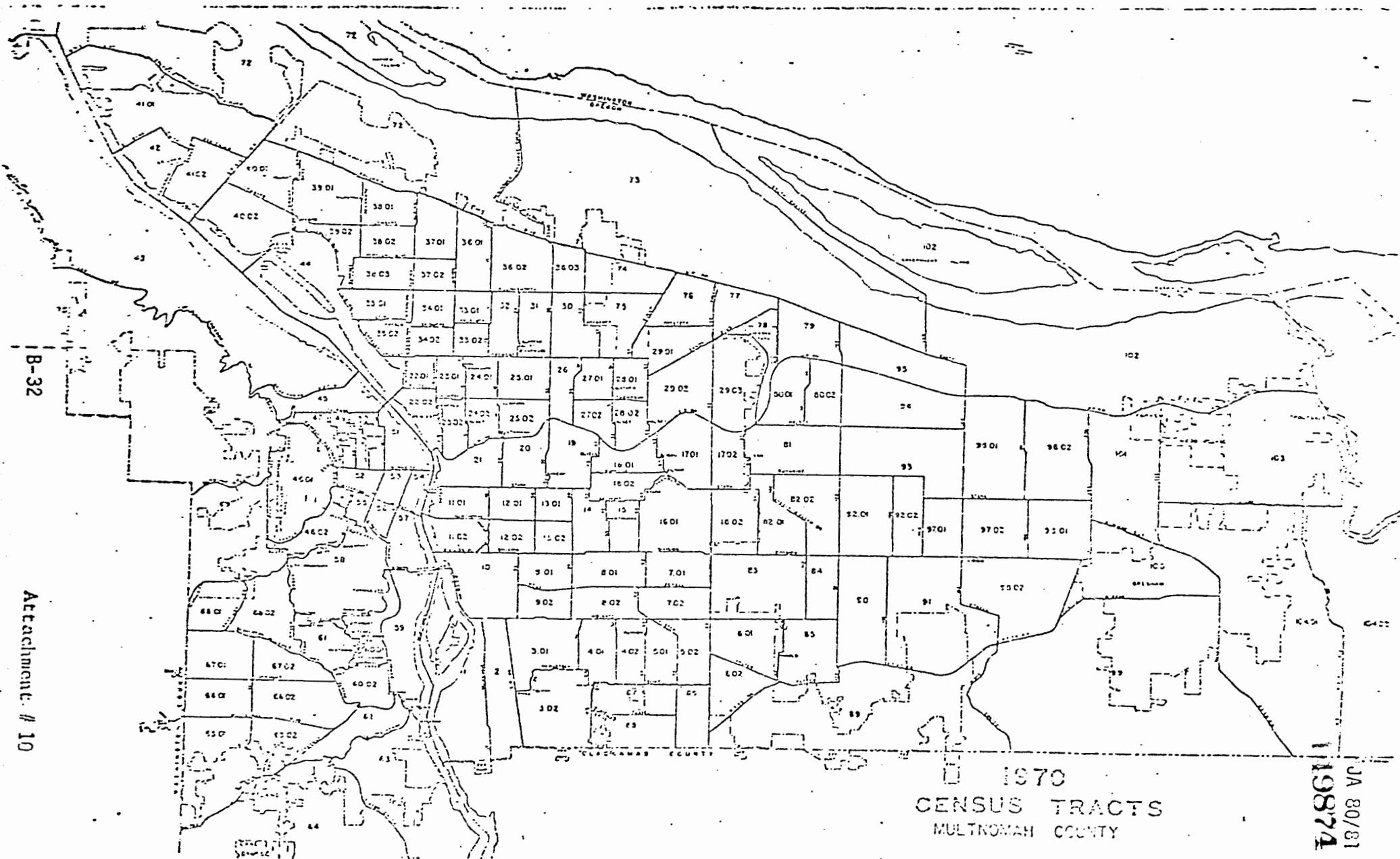


EXHIBIT C
REQUIRED REPORTING FORMS
AND
PROCEDURES

ACTION CODE

- ☐ 1. New
☐ 2. Correct/Update
☐ 3. Last name change

CLIENT INFORMATION FORM

Completed by _____

Intake/Transaction DATE

Mo Day Yr
3 8

CASE NUMBER

9 14

CLIENT NAME

15 Last 26

(*)

27 First 35 M.I.

ADDRESS

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

PHONE NUMBER

53 59

(*)CENSUS TRACT

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

- ☐ 1. Male
☐ 2. Female

(*)ETHNIC GROUP

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

(*)MARITAL STATUS

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

(*)INCOME SOURCE(S)

- ☐ 1. Earnings
☐ 2. Property
☐ 3. Savings
☐ 4. Welfare
☐ 5. Pension
☐ 6. V.A.
☐ 7. SSI
☐ 8. Other

(*)MONTHLY
INCOME

84 86

(*)NO. ON INCOME

87

HOUSING TYPE

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

(*)HOUSEHOLD COMP.

- ☐ 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

- ☐ 1. None
☐ 2. Children
☐ 3. Other Relative
☐ 4. Friend
☐ 5. Other

(*)AVAILABLE HELP

- ☐ 1. None
☐ 2. Daily
☐ 3. Weekly
☐ 4. Bi-Monthly
☐ 5. Monthly
☐ 6. Emergency only

(*)SELF CARE-LIMITATIONS

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

(*)MOBILITY LIMITATIONS

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

(*)PHYSICAL HEALTH PROB.

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

(*)MENTAL HEALTH STATUS

- ☐ 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

- ☐ 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

- ☐ 1. None
☐ 2. Private Physician
☐ 3. Outpatient clinic
☐ 4. U. of O.
☐ 5. Other

I.D. # _____

TRANSPORTATION

Usual (*)Special

- ☐ 1. None
☐ 2. Walk
☐ 3. Own car
☐ 4. Taxi
☐ 5. Bus
☐ 6. Friend/frel.
☐ 7. Special
☐ 8. Center
☐ 9. Other

DATE CLOSED

Mo. Day Yr.

109 114

REASON FOR CLOSURE

- ☐ 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.

116 117 120

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

CODES: Client ServicesHousing

- 11 - Housing location
- 12 - Moving assistance
- 13 - Subsidized housing
- 14 - Minor 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

TO: OFFICE OF ELDERLY AFFAIRS
772 Commercial Street, S.E.
Salem, Oregon 97310

(B)

DATE: _____

(C)

MONTH ENDING: _____

(A)

FROM: _____

MEAL COUNT

(D) SITE	(E) NO. OF MEALS SERVED	(F) REIMBURSEMENT
(G) TOTALS	MEALS	\$
(J) STATE AGENCY USE ONLY	(H) THIS INCLUDES MEALS SERVED TO INDIVIDUALS UNDER 60.	(I) I CERTIFY THIS REPORT IS CORRECT SIGNED _____ / _____ Date SIGNED _____ / _____ Date

Contract Agency _____

Address _____

City _____ State _____

Contract # _____ Contract Period: From _____ To _____

Funding Source _____ Service Category _____

Advance Received _____ Reimbursement Request for _____ month & year

149874
Social Services Division
Accounting Unit
522 SW Fifth Ave., 8th Fl. Yeon Bldg.
Portland, Oregon 97204
Phone: 248-4752

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 _____

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

149874

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.

19874

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 248-4752.

PROCEDURES FOR CONTRACT MODIFICATIONS

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:

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.

CONTRACT FOR SERVICES

19874

SECTION I: PARTIES TO THE CONTRACT

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

COMMITTEE OF SPANISH SPEAKING PEOPLE OF OREGON, ("CONTRACTOR"), 1006 S.E. Grand, Portland, Oregon 97214.

SECTION II: CONTRACT SUMMARY

Contractor agrees to provide meals and access services to older Hispanics and other eligible persons, and further agrees that the total cost shall not exceed the sum of \$62,500.

SECTION III: PERIOD OF PERFORMANCE

Performance under this contract shall commence July 1, 1980, and continue through June 30, 1981, 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 5% match (\$3289) 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 the fifth (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. A final "Director's Narrative Report" shall be submitted 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. (Delete down to the final "Director's Narrative Report" for AAA contracts.)
- 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 meetings 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 \$62,500.
- B. An advance shall be made to cover the cost of the Contractor's initial expenses for operation, not to exceed the sum of \$10,417 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. Payment 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 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 there-to, 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 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 a 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. In purchasing food, and preparing and delivering meals, Contractor must follow appropriate procedures to preserve nutritional value and food safety.
- B. The Contractor must comply with all state and local health laws and ordinances concerning preparation, handling, and serving food.

- C. The Contractor must provide special menus, where feasible and appropriate, to meet the particular dietary needs arising from the health requirements, religious requirements, or ethnic backgrounds of eligible individuals. In determining feasibility and appropriateness, the Contractor must use the following criteria:
- (1) Whether there are sufficient numbers of persons who need the special menus to make their provision practical; and
 - (2) Whether the food and skills necessary to prepare the special menus are available in the planning and service area.
- D. The Contractor must have available for use upon request, appropriate food containers and utensils for blind and handicapped participants.
- E. Each meal served by the Contractor must contain at least one-third of the current Recommended Dietary Allowances as established by the Food and Nutrition Board of the National Academy of Sciences -- National Research Council.
- F. If the Contractor receives cash, instead of food, the provider must spend the cash only for buying United States agriculture commodities and other food.
- G. Food Stamp Program. The Contractor must assist participants in taking advantage of benefits available to them under the food stamp program. The Contractor must coordinate its activities with agencies responsible for administering the food stamp program to facilitate participation of older persons in the program.
- H. The Contractor shall, within ten (10) days of the execution of this contract, notify the City, in writing, of the staff person who shall be responsible for the performance of contractor staff under this contract and the staff person to whom official correspondence regarding performance under this contract shall be sent.
- I. 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 (3) sessions, or twenty-four (24) hours per month.
- J. 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 (2) sessions, or sixteen (16) hours per month.
- K. 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.
- L. The Contractor agrees to submit documentation as required by the City to support waivers of contract policies and requirements required by the City.

- M. The Contractor shall use the service definitions as set forth by the City and standardized reporting forms as developed and provided by the City.
- N. 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 services provided as part of the Portland/Multnomah County Area Agency on Aging Service System.
- O. The Contractor shall complete the client tracking system forms for all clients accepted for nutrition services, which includes the client information form, the needs assessment form and the client service form, to be submitted to the City by the fifth (5th) working day of each month.
- P. The Contractor shall enter into or continue written agreements with other service providers with the Portland/Multnomah County Area Agency on Aging Services System as directed by the City to specify and clarify procedures of coordination.
- Q. The Contractor shall assure that older persons with the greatest economic and social need receive preference in the delivery of each service provided through the contract in accordance with definitions provided by the City.
- R. The Contractor shall not use City resources to provide a service that would duplicate a service under another City Area Agency on Aging contract unless specifically approved by the City.
- S. 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 client relative to those in greatest need of said service.
- T. The Contractor shall assure that a means test shall not be used to determine the eligibility of an older person for any service funded under Title III of the Older Americans Act of 1965, as amended.
- U. Each 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.
- V. The Contractor shall agree to continue or to initiate efforts to obtain support from private sources and other public organizations for services funded through this contract.
- 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.

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 the Commissioner-in-Charge has given written approval, and the approved document is filed with the 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 subcontract 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 CONTENT

CONTRACTOR

By _____
Executive Director_____
Date

By _____

APPROVED AS TO FORM

CITY OF PORTLAND

By _____
City Attorney_____
Date

By _____

By _____

CITY OF PORTLAND HUMAN RESOURCES BUREAU		APPLICATION FOR PROJECT FUND	
1. Short Title of Project: (Do not exceed one typed line) <u>Hispanic Elderly Nutrition Program</u>			
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 Services- Aging		4. Contract Period From <u>7/01/80</u> to <u>6/30/81</u>	
5. Budget Period From <u>7/01/80</u> to <u>6/30/81</u>		6. City Support Requested \$ <u>62,500</u>	
7. Applicant Agency (Name, address & telephone) Committee of Spanish Speaking People of Oregon 1006 S.E. Grand, 3rd flr. Portland, Oregon 97214 238-1387		8. Project Director (Name, address & telephone) Jose Calderon Sr. 1006 S.E. Grand, 3rd flr. Portland, Oregon 97214 238-1387	
9. Financial Officer (Name, address & telephone) Luz Boyd 1006 S.E. Grand, 3rd flr. Portland, Oregon 97214 238-1387		10. Official Authorized to Bind Agency (Name, address & telephone) Luis A. Alvarez 1006 S.E. Grand, 3rd flr. Portland, Oregon 97214 238-1387	
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 purpose of the project is to provide nutrition and access services to elderly persons over the age of 60 of Hispanic heritage in the Portland/Multnomah County area. The objectives of the project are:

- 1) - To maintain access to needed services for elderly Hispanics by providing transportation;
- 2) - to reduce isolation among elderly Hispanics by conducting outreach activities;
- 3) - to obtain agreements with agencies to provide information and referral;
- 4) - to maintain access to needed services by providing escort services; and
- 5) - to increase sound nutrition habits among elderly Hispanics by providing meals in a congregate setting.

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.)

Poor nutrition habits among the elderly, in conjunction with other physical, social, and economic changes associated with increasing age may result in a pattern of living which causes malnutrition and loss of normal independent functioning. Many elderly persons do not eat adequately because: (1) they cannot afford to do so; (2) they lack the knowledge and/or skills to select and prepare nourishing and well-balanced meals; (or) (3) they have limited mobility which may impair their capacity to shop and cook for themselves (or) (4) they have feelings of rejection and loneliness which obliterate the incentive necessary to prepare and eat a meal alone.

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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 reduce social isolation and poor nutrition habits among elderly Hispanic residents by providing nutritious meals in a congregate setting, and to increase the ability of elderly Hispanic residents to attend congregate meals by providing necessary supportive services such as outreach, transportation, and escort services.

Overall AAA 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 system's capacity 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 elderly Hispanics in Portland/Multnomah County through the accomplishment of the activities listed in Section 4 during the period July 1, 1980, thru June 30, 1981.	1-a Number and dates of activities listed in Section 4 accomplished
2-Maintain access to needed services for elderly residents by providing 1,300 one-way rides to 20 different individuals who require accompaniment to ensure completed journeys to nutrition sites during the period 7-1-80 to 6-30-81.	2-a Number of transportation services 2-b Number of unduplicated elderly individuals receiving transportation services
3-To reduce isolation among elderly Hispanic residents by identifying 60 new Hispanic individuals and performing 60 outreach activities during the period 7-1-80 to 6-30-81.	3-a Number of new unduplicated elderly individuals identified as low-income and/or of a minority heritage.
4-To increase awareness of and provide services available to elderly Hispanics by obtaining formal agreements for information and referral services with agencies which can provide bilingual services for Hispanic participants for the period 7/1/80-6/30/81	4-a Submission of agreements to AAA 4-b Submission of monthly narrative reports.
5-To maintain access to needed services by providing 96 escort services to older Hispanics who require accompaniment to ensure successful completed tasks and trips for the period 7/1/80-6/40/81	5-a Number of escort services 5-b Number of unduplicated elderly individuals receiving escort services
6-To increase sound nutrition habits among elderly Hispanic residents by providing 9,357 meals to 75 different individuals 5 days a week during the period 7/1/80 through 6/30/81.	6-a Number of congregate meals served 6-b Number of unduplicated eligible participants

Objective # 1: (Restate Objective Here)

To maintain effective management of services provided for elderly Hispanics in Portland/Multnomah County through the accomplishment of the activities listed in Section 4, during the period 07/01/80 through 06/30/81

No.	Activity	Completion Date	Measure of Activity Completion	Staff Assigned
1-1	Provide personnel direction/supervision and training through individual and/or group staff meetings. The personnel will be: Executive Director 10% Program Director 20%, Bkkpr 10% Receptionist 10%	Ongoing	Staff hired	Exec. Director Program Director Receptionist
1-2	Develop and maintain individual job descriptions and work tasks for all assigned personnel.	Ongoing	Job descriptions & work tasks developed.	Program Director
1-3	Develop and implement upon approval by Aging Services a training plan for all assigned personnel. (paid and volunteer).	09/30/80	Training plan submitted.	Executive Dir. Program Director
1-4	Attend such Area Agency on Aging Contractor meetings and training sessions required.	Ongoing	Attendance recorded by AAA	Executive Dir. Program Director
1-5	Process all agency accounts paid out and accounts receivable and maintain records of all budgetary transactions in accordance with General Condition VII, Nos. 1 through 9.	Ongoing	Agency accounts processed	Program Director Bookkeeper

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

Objective # 1: (Restate Objective Here)

To maintain effective management of services provided for Hispanics in Portland/Multnomah County through the accomplishment of the activities listed in Section 4 during the period from July 1, 1980 to June 30, 1981. 4.

No.	Activity	Completion Date	Measure of Activity Completion	Staff Assigned
1-6	Maintain property records on all City inventory in accordance with General Condition V, l.c, 71, 8.	Ongoing	Records maintained	Bookkeeper
1-7	Submit required program reports and invoices in the proper manner in accordance with all related special and general conditions as required.	Ongoing	Reports and invoices submitted	Program Director Bookkeeper

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) To maintain access to needed services for elderly residents by providing 1,300 one-way rides to 20 different individuals who require accompaniment to ensure complete journeys to nutrition sites during the period July 1, 1980 through June 30, 1981

No.	Activity	Completion Date	Measure of Activity Completion	Staff Assigned
2-1	Maintain personnel to provide services. The personnel will be: the Program Director 2%; Outreach worker 35%.	Ongoing	Personnel hired	Program Director
2-2	Provide supervision of staff	Ongoing	Job descriptions, training performance, objective, and evaluation completed.	Program Director
2-3	Develop a list of clients needing escort services.	Ongoing	Initial list made	Outreach Worker
2-4	Provide reports and maintain records on escort services to project administration.	Monthly	Reports made	Outreach Worker

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)

To reduce isoation among elderly Hispanic residents by identifying 60 new Hispanic individuals and performing 60 outreach activities during the period 7/1/80 to 6/30/81

No.	Activity	Completion Date	Measure of Activity Completion	Staff Assigned
3-1	Maintain personnel to provide outreach services. Personnel will be: Program Director 5%; Outreach Worker 15%.	Ongoing	Personnel hired	Program Director
3-2	Provide supervision of staff	Ongoing	Job descriptions, training performance and evaluation completed.	Program Director
3-3	Conduct 60 public outreach activities and document in a written report	Monthly	Reports completed	Outreach Worker
3-4	Develop a plan for canvassing areas where older Hispanics live and schedule visits to those needing services	9/30/80	Plan submitted to AAA	Outreach Worker
3-5	Identify 60 individual elderly Hispanics as new program participants	Monthly	Individual outreach activities recorded	Outreach Worker
3-6	Maintain records on numbers and characteristics of clients served through outreach.	Monthly	Client tracking system forms submitted to AAA	Outreach Worker

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)

To increase awareness and provide services available to elderly Hispanics by obtaining formal agreements for information and referral services with agencies which can provide bilingual services for Hispanic participants for the period 7/1/80 - 6/30/81.

No.	Activity	Completion Date	Measure of Activity Completion	Staff Assigned
4-1	Solicit agreements with appropriate agencies. Personnel will be: Program Director 8%.	9/1/80	Submission of copies of solicitation efforts to AAA	Program Director
4-2	Submit potential agreements and preferences to AAA	10/1/80	Receipt by AAA of potential agreements	Program Director
4-3	Write up final agreement	11/1/80	Completed and signed agreement	Program Director
4-4	Submit monthly narrative reports to AAA outlining implementation activities for information and referral.	Ongoing	Completed reports.	Program Director

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 maintain access to needed services by providing 96 escorts services to elderly Hispanics who require accompaniment to ensure successful completed tasks and trips for the period 7/1/80 - 6/30/81

No.	Activity	Completion Date	Measure of Activity Completion	Staff Assigned
5-1	Maintain personnel to provide escort services. The personnel will be: the Program Director 3% Outreach Worker 10%. Provide supervision of staff	Ongoing	Job descriptions, training, performance, objective and evaluation completed.	Program Director
5-2	Provide reports and maintain records on escort services to project administration.	Monthly	Reports completed	Program Director Outreach Worker
5-3	Monitor escort service to ensure contract compliance and quality of service.	Ongoing	Supervisory meetings held, case plans reviewed, clients staffing held	Program Director Outreach Worker

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

Objective # 6 : (Restate Objective Here)

To increase sound nutrition habits among elderly Hispanic residents by providing 8,357 meals to 75 participants, 5 days a week during the period July 1, 1980, through June 30, 1981

No.	Activity	Completion Date	Measure of Activity Completion	Staff Assigned
6-1	Maintain personnel to provide meal service on-site for 5 days of the week, and nutrition education. The personnel will be Prog. Dir. 62% Outreach Worker 40%, Cook 50%, Asst. Cook 25%	Ongoing	Number of meals served, participants escorted to meals.	Program Director
6-2	Provide staff training/supervision develop job descriptions and work programs, and evaluate staff as prescribed in objective #1 for assigned personnel.	Ongoing	Bi-weekly staff meetings held, job descriptions completed, work tasks updated, evaluations updated.	Program Director Staff
6-3	Accept referrals form other agencies and meal sites for eligible participants.	Ongoing	Meals served to eligible participants	Outreach Worker Cook Assistant Cook
6-4	Plan, schedule, and implement nutrition education program in response to needs of participants.	Ongoing	Number of participants receiving nutrition education	Outreach Worker
6-5	Maintain fiscal and program records and documentation.			Program Director Outreach Worker

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

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.)

To remedy poor nutrition habits and social isolation among elderly Hispanics, COSSPO will set up a nutrition program which will serve as a focal point for elderly Hispanics seeking assistance. To enable elderly Hispanics to fully participate in the nutrition program, COSSPO will also provide supportive services such as information and referral, escort, outreach and transportation. COSSPO will also enter into agreements for information and referral with agencies which can provide bilingual services for Hispanic participants.

The rationale for starting a nutrition program is twofold. First, the program will make it possible for elderly Hispanics to socialize on a regular basis with people of the same language and similar cultures, thereby reducing social isolation and loneliness associated with old age.

Second, the program will also improve nutrition habits among the elderly who don't eat adequately for those reasons stated in the Problem Section.

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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: COSSPO will provide services to Hispanic elderly residents throughout Portland/Multnomah County.

Target

Population: Elderly persons over the age of 60 of Hispanic heritage are the general target population for the services provided by this project.

The target population will be identified primarily from previous COSSPO Aging Services clients, direct inquiry of elderly persons, and from referrals by interested individuals and other agencies.

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

Staffing for the Hispanic Elderly Nutrition Program will include a Program Director and Outreach worker, and a Cook and Assistant Cook. The Program Director will be responsible for overall management of the program to assure conformance with objectives and regulations. The Program Director in cooperation with the COSSPO Treasurer and Bookkeeper will carry out administrative activities related to the operation of the nutrition program. The Program Director will be under the direct supervision of the Executive Director of COSSPO. The Executive Committee of the COSSPO Board of Directors is responsible for staff selection. The COSSPO Personnel Policies describe the staff selection process.

The work day is from 8:00AM to 5:00 PM Monday through Friday. Paid holidays are: New Years Day, President's Day, Memorial Day, Independence Day, Labor Day, Veteran's Day, Columbus Day, Thanksgiving Day, and Christmas Day.

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 Committee of Spanish Speaking People of Oregon has been a non-profit, social service organization since February 1977. Programs operated by the agency include job development and employment assistance, information and referral, bilingual employment and training/ English-as-a-Second Language, Occupational English-as-a-Second-Language, and the Hispanic Aging Program. COSSPO has served older people through a contract with the City since February 1978.

The Executive Director of COSSPO will supervise and guide all activities of the Hispanic Elderly Nutrition Program. The COSSPO Board of Directors will be informed of the progress of the program to assure consistency with policies and priorities of the agency. The Board of Directors can also provide direct assistance and linkages to the Hispanic community in the design and implementation of the nutrition program.

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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.)

To help plan the nutrition program, COSSPO enlarged the existing Aging Committee to include representation of other local Hispanic organizations. The Advisory Committee is the direct link between the community and program staff. The Committee will be expected to advise staff on policy matters relating to the operation of the nutrition site, and some of the members will also be actual participants in the program.

In terms of the relationship between the COSSPO Board of Directors and the Advisory Committee, the Advisory Committee will be responsible for making recommendations to staff about how the program should be run, and staff will be reporting to the COSSPO Board of Directors on a regular basis.

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 Program Director of the Hispanic Elderly Nutrition site will be responsible for contacting local community organizations that can provide information and referral services on a bilingual level to Hispanic clients. COSSPO will arrange to write up an agreement with at least one agency to provide information and referral services to COSSPO clients and participants. The contracting agency will refer clients to COSSPO's nutrition program, and COSSPO will refer clients to the agency for information and referral.

EXHIBIT B
BUDGETS AND ATTACHMENTS

FISCAL SECTION

1. Budget Summary

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

<u>City Support Requested</u>	<u>Amount</u>
<u>Access (Title III-B)</u>	<u>\$10,163</u>
<u>Congregate Meals (Title III C-1)</u>	<u>47,563</u>
<u>Administration (Title III-C1)</u>	<u>4,774</u>
Subtotal	<u>62,500</u>
Required Cash Match	<u>3,398</u>
Program Income	<u>2,400</u>
USDA	<u>3,594</u>
<u>Other Project Support</u>	<u>71,892</u>
Sub-total	<u>71,892</u>
<u>Volunteer Time</u>	<u>3,360</u>
TOTAL	<u>75,252</u>

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

Access (Title III-B) 7/1/80 to 6/30/81
 Congregate Meals 7/1/80 to 6/30/81
 Administration 7/1/80 to 6/30/81
 Cash Match 7/1/80 to 6/30/81
 Program Income 7/1/80 to 6/30/81
 USDA 7/1/80 to 6/30/81

2. Statement of Certification

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

Authorized Signature _____ Date _____

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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

HISPANIC ELDEPLY NUTRITION PROGRAM
Committee of Spanish Speaking People of Oregon
Fiscal Year 1980-1981

APPROPRIATION UNIT
LINE ITEM WORKSHEET

149874

Code	Object Title	Title III-C-1 Meals	Title III-B Access Services	Title III-C-1 Administration	Total City Support	Project Income
110	Full Time Employees	11,801	8,071	3,876	23,748	
120	Part Time Employees	5,520			5,520	
130	Federal Program Enrollees					
140	Overtime					
150	Premium Pay					
170	Benefits	2,786	1,452	698	4,936	
190	Less-Labor Turnover					
100	Total Personal Services	20,107	9,523	4,574	32,204	-0-
210	Professional Services					
220	Utilities					
230	Equipment Rental					
240	Repair & Maintenance					
260	Miscellaneous Services					
310	Office Supplies					
320	Operating Supplies	419			419	
330	Repair & Maint. Supplies					
340	Minor Equipment & Tools					
350	Clothing & Uniforms					
380	Other Commodities--External	11,139			11,139	2,400
410	Education					
420	Local Travel	98	460		558	
430	Out-of-Town Travel					
440	Space Rental	3,000			3,000	
450	Interest					
460	Refunds					
470	Retirement System Payments					
490	Miscellaneous					
510	Fleet Services					
520	Printing Services					
530	Distribution Services					
540	Electronic Services					
550	Data Processing Services					
560	Insurance			200	200	
570	Telephone Services	300	180		480	
580	Intra-Fund Services					
590	Other Services--Internal					
200- 500	Total Materials & Services	14,956	640	200	15,796	2,400
610	Land					
620	Buildings					
630	Improvements	5,000			5,000	
640	Furniture & Equipment	7,500			7,500	
600	Total Capital Outlay	12,500	-0-	-0-	12,500	-0-
700	Other					
	TOTAL	47,563	10,163	4,774	62,500	2,400

Code	Object Title	USDA	Required Cash Match	Total City Contract	Other Resources	
110	Full Time Employees		2,880	26,628		
120	Part-Time Employees			5,520	3,360	
130	Federal Program Enrollments					
140	Overtime					
150	Premium Pay					
170	Benefits		518	5,454		
190	Less-Labor Turnover					
100	Total Personal Services	-0-	3,398	37,602	3,360	
210	Professional Services					
220	Utilities					
230	Equipment Rental					
240	Repair & Maintenance					
260	Miscellaneous Services					
310	Office Supplies					
320	Operating Supplies			419		
330	Repair & Maint. Supplies					
340	Minor Equipment & Tools					
350	Clothing & Uniforms					
380	Other Commodities-External	3,594		17,133		
410	Education					
420	Local Travel			558		
430	Out-of-Town Travel					
440	Space Rental			3,000		
450	Interest					
460	Refunds					
470	Retirement System Payments					
490	Miscellaneous					
510	Fleet Services					
520	Printing Services					
530	Distribution Services					
540	Electronic Services					
550	Data Processing Services					
560	Insurance			200		
570	Telephone Services			480		
580	Intra-Fund Services					
590	Other Services-Internal					
200- 500	Total Materials & Services	3,594	-0-	21,790	-0-	
610	Land					
620	Buildings					
630	Improvements					
640	Furniture & Equipment					
600	Total Capital Outlay	-0-	-0-	12,500	-0-	
700	Other					
	TOTAL	3,594	3,398	71,892	3,360	

DATE 6-3-80

PROJECT TITLE HISPANIC ELDERLY NUTRITION PROGRAM / COSSPO

TITLE III-C-1

*Indicate fringe benefits as a percentage of "Subtotal, Personnel" B-5

*Indicate fringe benefits as a percentage of "Subtotal, Personnel" B-6

DATE June 12, 1980

PROJECT TITLE Hispanic Elderly Nutrition Program -- COSSPO
Administration

[illegible]

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

19874

DATE June 12, 1980

PROJECT TITLE HISPANIC ELDERLY NUNRITION PROGRAM -- COSSPO

[illegible]

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

BUDGET JUSTIFICATION
MATERIALS AND SERVICES

DATE June 12, 1980

PROJECT NO. _____

PROJECT TITLE HISPANIC ELDERLY NUTRITION PROGRAM -- COSSPO
Meals

To extent possible, use format indicated below.

Title III-C-1

CODE	DESCRIPTION OF ITEM AND BASIS FOR VALUATION	ITEM TOTAL	CATEGORY TOTAL
320	Operating Supplies (paper) 8,357 @ .05 *	419	419
380	Meals 6,876 @ \$1.62	11,139	11,139
420	Local Travel 545 @ .18	98	98
440	Space Rental 250 x 12	3,000	3,000
570	Telephone Services 25 x 12	300	300
*Not exact due to rounding			

BUDGET JUSTIFICATION
MATERIALS AND SERVICES

DATE June 12, 1980

PROJECT NO. _____

PROJECT TITLE Hispanic Elderly Nutrition Program/COSSPO
Administration

To extent possible, use format indicated below.

Title III-C-1

CODE	DESCRIPTION OF ITEM AND BASIS FOR VALUATION	ITEM TOTAL	CATEGORY TOTAL
560	Insurance policy payment (liability for accident or illness of participants)	200	200

BUDGET JUSTIFICATION
MATERIALS AND SERVICES

DATE June 12, 1980

PROJECT NO. _____

PROJECT TITLE Hispanic Elderly Nutrition Program -- COSSPO
Total City Support

To extent possible, use format indicated below.

CODE	DESCRIPTION OF ITEM AND BASIS FOR VALUATION	ITEM TOTAL	CATEGORY TOTAL
320	Operating Supplies (paper) 8,357 @ .05 *	419	419
380	Meals 6,876 @ \$1.62	11,139	11,139
420	Local Travel 3,100 miles @ .18	558	558
440	Rental 250 x 12	3,000	3,000
560	Insurance Policy Payment (liability for accident or illness of participants)	200	200
570	Telephone	480	480
	*Not exact due to rounding		

BUDGET JUSTIFICATION
MATERIALS AND SERVICES

DATE June 12, 1980

PROJECT NO. _____

PROJECT TITLE Hispanic Elderly Nutrition Program -- COSSPO

PROJECT INCOME

To extent possible, use format indicated below.

CODE	DESCRIPTION OF ITEM AND BASIS FOR VALUATION	ITEM TOTAL	CATEGORY TOTAL
380	Meals -- Donations 1481 meals @ \$1.62/meal *	2,400	2,400
	*Not exact due to rounding		

BUDGET JUSTIFICATION
MATERIALS AND SERVICES

DATE June 12, 1980

PROJECT NO. _____

PROJECT TITLE Hispanic Elderly Nutrition Program -- COSSPO
USDA

To extent possible, use format indicated below.

CODE	DESCRIPTION OF ITEM AND BASIS FOR VALUATION	ITEM TOTAL	CATEGORY TOTAL
380	USDA Commodities 8,357 @ .43	3,594	3,594

BUDGET JUSTIFICATION
MATERIALS AND SERVICES

DATE June 12, 1980

PROJECT NO. _____

PROJECT TITLE Hispanic Elderly Nutrition Program -- COSSPO

Total City Contract

To extent possible, use format indicated below.

CODE	DESCRIPTION OF ITEM AND BASIS FOR VALUATION	ITEM TOTAL	CATEGORY TOTAL
320	Operating Supplies (paper) 8,357 @ .05	419	419
380	Meals 8,357 @ \$1.62/meal Donations 1,481* @ \$1.62/meal USDA 8,357 @ .43	11,139 2,400 3,594	17,133
420	Local Travel 3,100 @ .18	558	558
440	Rental 250 x 12	3,000	3,000
560	Insurance	200	200
570	Telephone	480	480
	*Not exact due to rounding		

BUDGET JUSTIFICATION

CAPITAL OUTLAY

DATE 6-3-80

PROJECT NO. _____

PROJECT TITLE HISPANIC ELDERLY NUTRITION PROGRAM -- COSSPO

MEALS

To extent possible, use format indicated below

Title III-C-1

CODE	DESCRIPTION OF ITEM AND BASIS FOR VALUATION	ITEM TOTAL	CATEGORY TOTAL
630	Improvements	5,000	5,000
640	Furniture & Equipment (Specific items to be determined when meal site is selected and approved).	7,500	7,500

BUDGET JUSTIFICATION

CAPITAL OUTLAY

DATE 6-3-80

PROJECT NO. _____

PROJECT TITLE HISPANIC ELDERLY NUTRITION PROGRAM -- COSSPO

TOTAL CITY SUPPORT

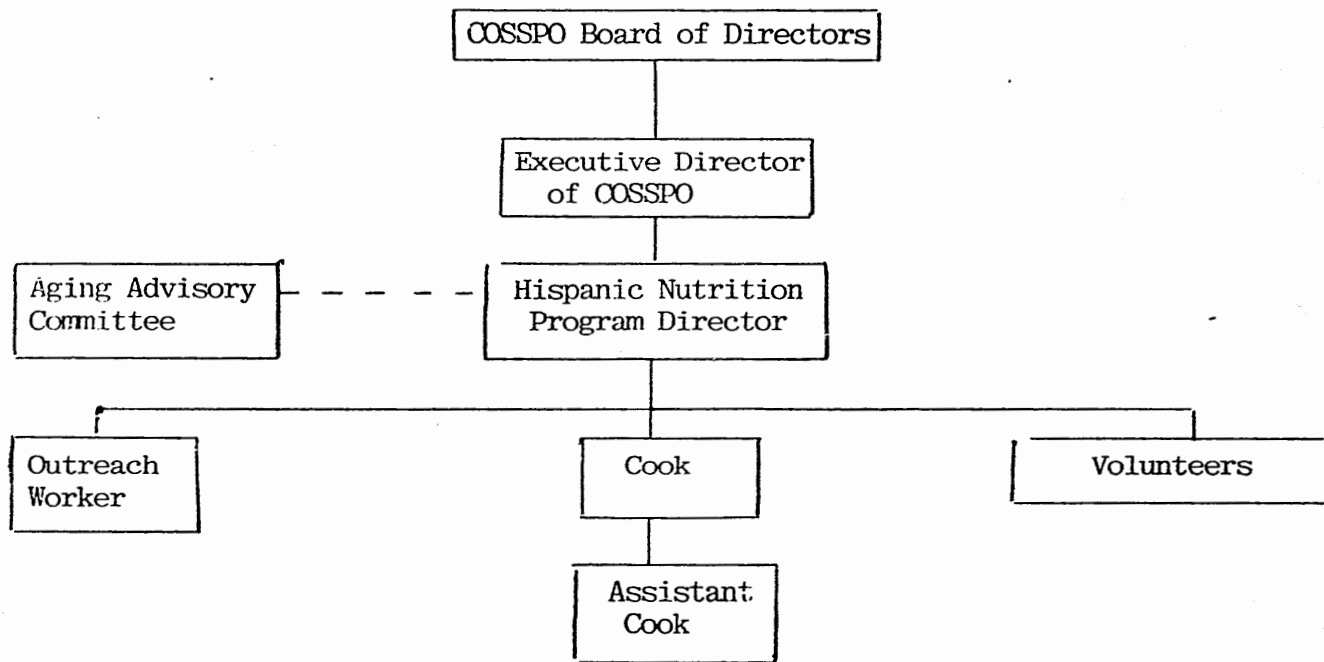
To extent possible, use format indicated below

Total City Contract

CODE	DESCRIPTION OF ITEM AND BASIS FOR VALUATION	ITEM TOTAL	CATEGORY TOTAL
630	Improvements	5,000	5,000
640	Furniture & Equipment (Specific items to be determined when meal site is selected and approved).	7,500	7,500

PROJECT TITLE: Hispanic Elderly Nutrition Program

PROJECT ORGANIZATION CHART:



JOB DESCRIPTION

PROGRAM DIRECTOR (\$12,840.00 yearly)

Coordinates total site activities including personnel, food service, program services, records, and reporting. Supervised by the Executive Director of Cossपो.

Personnel

1. Prepares written job descriptions for all assigned staff positions.
2. Develops and implements a training plan for paid and volunteer staff
3. Conducts regular staff meetings for volunteers and paid staff.

Food Service

1. Plans six weeks menus in accordance with federal guidelines and requirements.
2. Oversees the preparation of meals; assures that sanitary and safety standards are met.
3. Assists cook with purchase of all food items, supplies, and equipment.
4. Orders USDA commodities and assures that they are used.
5. Maintains accurate records of income and expenditures related to the meal program, keeping within budget limitations.

Supportive Services

1. Assists outreach worker in identifying a list of clients needing transportation and escort services.
2. Assists outreach worker in developing a plan for canvassing areas where Hispanic elderly live.
3. Helps to identify new program participants.
4. Solicits agreements with appropriate agencies to provide information and referral services.
5. Maintains fiscal and program records and documentation of services.

Records and Reporting

1. Maintains up-to-date record systems as established by AAA.
2. Submits regular reports to AAA as specified in the Aging contract.
3. Maintains inventory records.
4. Supervises collection and deposits of meal donations.

Other

1. Attends such Area Agency on Aging contractor meetings and training sessions as required.
2. Helps publicize the program in the community through the media and individual contacts.

Qualifications

1. Must be fluent in English and Spanish.
2. Must have experience in directing and/or coordinating social programs.
3. Must have a car and a valid Oregon Driver's license.
4. Must have a college degree.

119874

JOB DESCRIPTION

OUTREACH WORKER (\$9,600 yearly)

Coordinates all outreach and access services for Hispanic Nutrition Program. Supervised by the Program Director.

1. Develops, in consultation with the Program Director, a list of clients needing transportation and escort services.
2. Provides transportation and escort services to individuals who require accompaniment to ensure completed journeys to meal sites.
3. Performs public outreach activities to increase program participation.
4. Develops, in consultation with the Program Director, a plan for canvassing areas where older Hispanics live.

Qualifications

1. Must be fluent in English and Spanish.
2. Must have a high school education.
3. Must have experience in counselling and social work.