

# Welcome to the ~~New~~-Improved HCCBG Provider Packet\*

*\*The forms look the same, but the user experience is completely different*

## Quick Summary of Improvements

- ① Electronic copy of workbook limits need to input all new data each year, just what changed.
- ② Workbook is set up to be a 10 year workbook, just select the fiscal year from list on the "Input" worksheet and it populates all required dates for the new year.
- ③ Dramatic reduction in keystrokes required! When you enter information now, it automatically forwards the value to the next sheet in the packet requiring that information.
- ④ Calculation formulas are already included throughout, including match calculations.
- ⑤ Useful header information; click on a header row and it describes the field name and how to complete cell or column labels.
- ⑥ Increased number of service selections available on forms (increased from 8 to 14).
- ⑦ Detail service information by level eliminates requirement of In-home supplement form.
- ⑧ Salary calculation for fractional FTE reduces math errors on 732A1 Labor Distribution Schedule.
- ⑨ Color coding of input cells. If it is tan it is calculated and locked, if it is green it will accept your input.
- ⑩ Entry proof and error checking... if the system detects an error it will pop up a warning message. Need a second look? make sure no errors are on the new "Proof" worksheet.

## Instructions for use

- Read the "instructions" worksheet first. For a video walkthrough of the HCCBG Provider Packet Please click on the link below. GoToMeeting will request name/email information to register. When video launches please forward through the first 1:30 of the video as the screen is black prior to the video starting, additionally, the webinar launches in "letterbox" format, to make larger click in the presentation and select the arrows in the lower right hand corner.
- <https://attendee.gotowebinar.com/recording/1667454861360868867>
- ① **Green** cells on Input tab must be completed, they are necessary to populate entire workbook. Provider will not need to complete all cells for services, only for the number of unique HCCBG services they provide. Tan cells are formulas, so let the program fill in the values there.
  - ② Navigation through worksheet is left to right, progress through the workbook completing the **green** shaded cells
  - ③ Click on the header cells, the specific instruction on what is necessary to complete the cell will pop up when clicked.
  - ④ 7321A new feature: Assignable salary is calculated based on the FTE value multiplied by the staff salary. This assigned salary must also be categorized into Admin or one of the services selected. The "assigned salary" must match the total keyed into green cells, or an error will pop up at the end of the row.  
732A instructions: Click on row descriptors to left and header cells, instruction on how to complete section or column will show. This is a complicated sheet,
  - ⑤ it is recommended to review video link above prior to completion. Please check for red error messages that pop up below each section and at bottom of page.  
In-Home Supplement is hidden as it is no longer required by most AAAs, if your AAA requires it, you will need to right click in the tab area of the workbook
  - ⑥ and select unhide from the box that pops up. When clicking on unhide a few worksheet names are selected you will need to select the "In-Home Svc Supplement Worksheet."
  - ⑦ 732 instructions: Much less to complete here as most cells are populated from the 732A form, must select drop down indicator for direct or purchased
  - ⑧ service, and HCCBG clients anticipated to be served. If you are an adult day care or adult day health provider, please populate the administrative portion at bottom of the page, those cells are not automatically filled.
  - ⑨ 733 Instructions: Complete green shaded text box with narrative on outreach activities you have implemented or plan to pursue.
  - ⑩ 734 form Instructions (Standard Assurances and Client Rights Assurances): Read it, sign it and submit.
  - ⑪ Proof Sheet: will display known calculation errors or questions. Please use this form to check for internal consistency and discuss issues with county or COG staff. Errors are displayed with a specific message, and value of calculated variance is to the right of the message.
  - ⑫ Save a copy of your file, and submit an electronic copy to the county and/or COG. A signed copy of the forms is also required, but please be aware that some forms are not printer friendly as the forms are wider to incorporate a wider service selection.

State Fiscal Year:	SFY 2020-2021
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Provider Name:	Durham Center for Senior Life
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Address Line 1:	406 Rigsbee Ave
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Address Line 2:	Durham NC 27701
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County:	Durham
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Area Agency on Aging:	Triangle J Council of Governments
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NC DIVISION OF AGING AND ADULT SERVICES COST OF SERVICES - LABOR DISTRIBUTION SCHEDULE DAAS-732A1

AGENCY NAME:	Durham Center for Senior Life
State Fiscal Year:	<u>SFY 2020-2021</u>

<b>Fiscal Period:</b>	July 2020	through	June 2021
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STAFF NAME	POSITION	TOTAL SALARY	FTE Equivalent	FULL TIME PART TIME	Assignable Salary	ADMIN. SALARY	SERVICE	SERVICE	SERVICE	SERVICE	SERVICE	SERVICE	SERVICE	SERVICE
							Senior Center Operation	Information & Case Assistance	Congregate Nutrition	Transportation (General)	Adult Day Care	Adult Day Health	0	0
Carolyn	ADH Receptionist	\$ 10,400	0.33	PART TIME	\$ 3,432						\$ 832	\$ 2,600		
Barbara	Receptionist (Front)	\$ 21,320	1	FULL TIME	\$ 21,320	\$ 12,792	\$ 8,528							
Juith	Receptionist (Mutip)	\$ 20,800	0.5	PART TIME	\$ 10,400	\$ 6,240	\$ 4,160							
		\$ -			\$ -									
Sharon	Certified Nursing Assistant	\$ 22,467	0.33	PART TIME	\$ 7,414						\$ 1,797	\$ 5,617		
Patricia K.	Certified Nursing Assistant	\$ 21,424	0.33	PART TIME	\$ 7,070						\$ 1,714	\$ 5,356		
Alba	Aide Assistant	\$ 23,400	0.33	PART TIME	\$ 7,722						\$ 1,872	\$ 5,850		
Gloria	Certified Nursing Assistant	\$ 24,773	0.33	PART TIME	\$ 8,175						\$ 1,982	\$ 6,193		
Grecia	Certified Nursing Assistant	\$ 22,467	0.33	PART TIME	\$ 7,414						\$ 1,797	\$ 5,617		
Vacant	Certified Nursing Assistant	\$ 22,467	0.33	PART TIME	\$ 7,414						\$ 1,797	\$ 5,617		
		\$ -			\$ -									
Lawanda	Site Coordinator	\$ 31,200	0.5072	PART TIME	\$ 15,825		\$ 3,900		\$ 11,925					
Harold	Site Coordinator	\$ 31,200	0.5072	PART TIME	\$ 15,825		\$ 3,900		\$ 11,925					
		\$ -			\$ -									
Shirley	Health Care Specailist	\$ 24,960	0.33	PART TIME	\$ 8,237						\$ 1,997	\$ 6,240		
Alicia	Social Worker	\$ 47,000	0.265	PART TIME	\$ 12,455			\$ 12,455						
Maggie	Supportive Services Coordinator	\$ 38,001	0.95005	PART TIME	\$ 36,103		\$ 1,901	\$ 30,401		\$ 3,801				
Sallie	Health Care Coordinator	\$ 31,200	0.5	PART TIME	\$ 15,600						\$ 2,340	\$ 13,260		
Janet	Health Care Coordinator	\$ 31,200	0.5	PART TIME	\$ 15,600						\$ 2,340	\$ 13,260		
Patrica	Health Care Coordinator (PRN)	\$ 31,200	0.5	PART TIME	\$ 15,600						\$ 2,340	\$ 13,260		
Kourtney	Site Program Coordinator	\$ 35,360	0.95	PART TIME	\$ 33,592		\$ 15,912		\$ 17,680					
Tyler	Business Specialist	\$ 37,440	0.9007	PART TIME	\$ 33,722	\$ 20,996	\$ 4,867	\$ 5,616	\$ 374	\$ 748	\$ 450	\$ 671		
		\$ -			\$ -									
Janae	Program Volunteer Coordinator	\$ 45,011	0.9	PART TIME	\$ 40,510		\$ 38,259		\$ 2,251					
Tiara	ADH Administrator	\$ 37,440	0.33	PART TIME	\$ 12,355						\$ 2,995	\$ 9,360		
Vacant	Associate Director of Development	\$ 55,000	0		\$ -									
		\$ -			\$ -									
Michael	Support Services Manager	\$ 50,003	0.6900185	PART TIME	\$ 34,503		\$ 2,500	\$ 25,002		\$ 7,001				
Thomas	Facilites Operations Manager	\$ 47,840	1	FULL TIME	\$ 47,840	\$ 4,784	\$ 28,704	\$ 2,392	\$ 2,392		\$ 4,784	\$ 4,784		
		\$ -			\$ -									
Tiketha	ADH Director	\$ 57,000	0.33	PART TIME	\$ 18,810						\$ 4,560	\$ 14,250		
Shelton	Director of Finance	\$ 70,012	0.94799	PART TIME	\$ 66,371	\$ 52,509	\$ 7,704	\$ 770	\$ 770	\$ 770	\$ 1,540	\$ 2,308		
Alvonía	Center Director	\$ 68,016	0.97015	PART TIME	\$ 65,986	\$ 6,812	\$ 31,968		\$ 27,206					
Seanyea	Executive Director	\$ 77,001	0.959987	PART TIME	\$ 73,920	\$ 59,291	\$ 8,470	\$ 770	\$ 770	\$ 770	\$ 1,540	\$ 2,309		
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## DAAS-732A

		Service	Service	Service	Service	Service	Service	Service	Service	Service	Service	Service	Service	Service	Service	Service
		Senior Center Operation 170	Information & Case Assistance 040	Congregate Nutrition 180	Transportation (General) 250	Adult Day Care 030	Adult Day Health 155	0 #N/A	0 #N/A	0 #N/A	0 #N/A	0 #N/A	0 #N/A	0 #N/A	0 #N/A	0 #N/A
<b>Projected Revenues</b>		<b>Grand Total</b>														
A. Fed/State Funding From the Div. of Aging & Adult Svcs.		\$ 693,261	\$ 311,967	\$ 79,725	\$ 93,591	\$ 110,922	\$ 13,865	\$ 83,191	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Required Minimum Match - Cash																
1) DCSL Match Contribution		\$ 77,031	\$ 34,663	\$ 8,859	\$ 10,399	\$ 12,325	\$ 1,541	\$ 9,244								
2) 0		\$ -														
3) 0		\$ -														
Total Required Minimum Match - Cash		\$ 77,031	\$ 34,663	\$ 8,859	\$ 10,399	\$ 12,325	\$ 1,541	\$ 9,244	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Required Minimum Match - In-Kind																
1) 0		\$ -														
2) 0		\$ -														
3) 0		\$ -														
Total Required Minimum Match - In-Kind		\$ -														
B. Total Required Minimum Match (cash + in-kind)		\$ 77,031	\$ 34,663	\$ 8,858	\$ 10,399	\$ 12,325	\$ 1,541	\$ 9,243	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
C. Subtotal, Fed/State/Required Match Revenues		\$ 770,292	\$ 346,630	\$ 88,583	\$ 103,990	\$ 123,247	\$ 15,406	\$ 92,434	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
D. NSIP Cash Subsidy/Commodity Valuation		\$ 7,125	\$ -	\$ -	\$ 7,125	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
E. OAA Title V Worker Wages, Fringe Benefits and Costs		\$ -														
Local Cash, Non-Match																
1) Dept of Social Services- ADH/ADC		\$ 97,056					\$ 13,865	\$ 83,191								
2) Dept of Social Services- EATS		\$ 30,000		\$ 30,000												
3) Traingle J Fans		\$ 1,500		\$ 1,500												
4) ACL		\$ -														
F. Subtotal, Local Cash, Non-Match		\$ 128,556	\$ -	\$ 31,500	\$ -	\$ -	\$ 13,865	\$ 83,191	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Other Revenues, Non-Match																
1) Private Pay- ADH		\$ 95,000					\$ 95,000									
2) Veterans Administration		\$ 25,000				\$ 25,000	\$ -									
3) Grants & Foundations/Rental Income/Other		\$ 30,000	\$ 30,000													
G. Subtotal, Other Revenues, Non-Match		\$ 150,000	\$ 30,000	\$ -	\$ -	\$ -	\$ 25,000	\$ 95,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Local In-Kind Resources (Includes Volunteer Resources)																
1) In-Kind Transporations		\$ 30,000				\$ 30,000										
2) 0		\$ -														
3) 0		\$ -														
H. Subtotal, Local In-kind Resources, Non-Match		\$ 30,000	\$ -	\$ -	\$ -	\$ 30,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
I. Client Cost Sharing		\$ 4,635		\$ 4,635												
Total Projected Revenues (Sum I.C,D,E,F,G,H, & I)		\$ 1,090,608	\$ 376,630	\$ 120,083	\$ 115,750	\$ 153,247	\$ 54,271	\$ 270,625	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

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F. Subtotal, General Operating Expenses	\$ 1,015,000	\$ 509,000	\$ 82,000	\$ -	\$ 240,000	\$ 120,000	\$ 18,000	\$ 46,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
G. Subtotal, Other Administrative Cost Not Allocated in Lines II.A through E																
H. Total Proj. Expenses Prior to Admin. Distribution	\$ 1,769,421	\$ 700,926	\$ 259,072	\$ 84,078	\$ 324,053	\$ 166,091	\$ 58,983	\$ 176,218	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
I. Distribution of Administrative Cost	\$ (22,111)		\$ (117,558)	\$ (36,005)	\$ 208,303	\$ 12,844	\$ 4,712	\$ (94,407)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
J. Total Proj. Expenses After Admin. Distribution	\$ 1,090,606		\$ 376,630	\$ 120,083	\$ 115,750	\$ 153,247	\$ 54,271	\$ 270,625	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

nces Must Equal

Grand Total		Service Senior Center Operation 170	Service Information & Case Assistance 040	Service Congregate Nutrition 180	Service Transportation (General) 250	Service Adult Day Care 030	Service Adult Day Health 155	Service 0 #N/A	Service 0 #N/A	Service 0 #N/A	Service 0 #N/A	Service 0 #N/A	Service 0 #N/A	Service 0 #N/A	Service 0 #N/A	Service 0 #N/A
III. Computation of Rates																
A. Computation of Unit Cost Rate:																
1. Total Expenses (equals line II.J)	\$ 1,090,606	\$ 376,630	\$ 120,083	\$ 115,750	\$ 153,247	\$ 54,271	\$ 270,625	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2. Total Projected Units				9,500	5,700	900	3,500									
3. Total Unit Cost Rate		\$ -	\$ -	\$ 12.1842	\$ 26.8854	\$ 60.3011	\$ 77.3214	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
B. Computation of Reimbursement Rate:																
1. Total Revenues (equals line I.J)	\$ 1,090,608	\$ 376,630	\$ 120,083	\$ 115,750	\$ 153,247	\$ 54,271	\$ 270,625	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2. Less: NSIP (equals line I.D)	\$ 7,125	\$ -	\$ -	\$ 7,125	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Title V (equals line I.E less II.D)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Non Match In-Kind (equals line I.H less II.C)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
3. Revenues Subject to Unit Reimbursement	\$ 1,083,483	\$ 376,630	\$ 120,083	\$ 108,625	\$ 153,247	\$ 54,271	\$ 270,625	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Total Projected Units (equals line III.A.2)		\$ -	\$ -	9,500	5,700	900	3,500	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Total Reimbursement Rate		\$ -	\$ -	\$ 11.4342	\$ 26.8854	\$ 60.3011	\$ 77.3214	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
C. Units Reimbursed Through HCCBG				9,095	4,584	255	1,195	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
D. Units Reimbursed Through Program Income*				405	-	-	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
E. Units Reimbursed Through Remaining Revenues				-	1,116	645	2,305	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
F. Total Units Reimbursed/Total Projected Units				9,500	5,700	900	3,500	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

\* The Division of Aging ARMS deducts reported program income from reimbursement paid to providers. Line III.D indicates the number of units that will have to be produced in addition to those stated on line III.C in order to earn the net revenues stated on line I.C.

Certification:

I certify to the best of my knowledge and belief that the information included in the cost computation above is accurate and complies with all laws and regulations. I also understand that material deviations in reported cost information could limit funding, and also result in return of funds if the error or omission results in a higher than actual reported cost.

Authorized Signature

Title

Date

Information on this form (DAAS-732A) corresponds with information stated on the Provider Services Summary (DAAS-732) as follows:

DAAS-732A	DAAS-732
Block Grant Funding	Col. A
Required Local Match-Cash & In-Kind	Col. B
Net Service Cost	Col. C
NSIP Subsidy	Col. D
Total Funding	Col. E
Projected HCCBG Reimbursed Units	Col. F
Total Reimbursement Rate	Col. G
Projected Total Service Units	Col. I

Durham Center for Senior Life

406 Rigsbee Ave

Durham NC 27701

Home and Community Care Block Grant for Older Adults

County Funding Plan

Provider Services Summary

DAAS-732

County: Durham

Budget Period: July 2020 through June 2021

Revision #: 

Date:

Services	Serv. Delivery		A				B	C	D	E	F	G	H	I
	(Check One)		Block Grant Funding				Required Local Match	Net Service Cost	NSIP Subsidy	Total Funding	Projected HCCBG Units	Projected Reimburse Rate*	Projected HCCBG Clients	Projected Total Units
	Direct	Purchase	Access	In-Home	Other	Total								
Senior Center Operation	X		\$ -	\$ -	\$ 311,967	\$ 311,967	\$ 34,663	\$ 346,630	\$ -	\$ 346,630	-	\$ -	2,000	-
Information & Case Assistance	X		\$ 79,725	\$ -	\$ -	\$ 79,725	\$ 8,858	\$ 88,583	\$ -	\$ 88,583	-	\$ -	500	-
Congregate Nutrition	X		\$ -	\$ -	\$ 93,591	\$ 93,591	\$ 10,399	\$ 103,990	\$ 7,125	\$ 111,115	9,095	\$ 11.4342	110	9,500
Transportation (General)	X		\$ 110,922	\$ -	\$ -	\$ 110,922	\$ 12,325	\$ 123,247	\$ -	\$ 123,247	4,584	\$ 26.8854	30	5,700
Adult Day Care	X		\$ -	\$ 13,865	\$ -	\$ 13,865	\$ 1,541	\$ 15,406	\$ -	\$ 15,406	255	\$ 60.3011	10	900
Adult Day Health	X		\$ -	\$ 83,191	\$ -	\$ 83,191	\$ 9,243	\$ 92,434	\$ -	\$ 92,434	1,195	\$ 77.3214	15	3,500
0			\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	-	\$ -		-
0			\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	-	\$ -		-
0			\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	-	\$ -		-
0			\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	-	\$ -		-
0			\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	-	\$ -		-
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0			\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	-	\$ -		-
0			\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	-	\$ -		-
Total			\$ 190,647	\$ 97,056	\$ 405,558	\$ 693,261	\$ 77,029	\$ 770,290	\$ 7,125	\$ 777,415	15,130		2,665	19,600

\*Adult Day Care & Adult Day Health Care Proj. Service Cost/Rate

	ADC	ADHC
Daily Care	\$33.07	\$ 40.00
Administrative		
Proj. Reimbursement Rate	\$33.07	\$ 40.00
Administrative %	0.00%	0.00%

Certification of required minimum local match availability.

Required local match will be expended simultaneously with Block Grant Funding.

Signature, County Finance Officer

Date

Executive Director

05/06/2020

Authorized Signature, Title

Community Service Provider

Signature, Chairman, Board of Commissioners

Date





**Home and Community Care Block Grant for Older Adults  
Outreach Methodology**

July 2020 through June 2021

Methodology to Address Service Needs of Low Income (Including Low-Income Minority Elderly), Rural Elderly and Elderly with Limited English Proficiency (Older Americans Act, Section 305(a)(2)(E))

Community Service Provider: Durham Center for Senior Life

County: Durham

The Older Americans Act requires that the service provider attempt to provide services to low-income minority individuals in accordance to their need for aging services. The community service provider shall specify how the service needs of low income, low-income (including low income minority elderly), rural elderly and elderly with limited English proficiency will be met through the services identified on the Provider Services Summary (DAAS-732). This narrative shall address outreach and service delivery methodologies that will ensure that this target population is adequately served and conform with specific objectives established by the Area Agency on Aging, for providing services to low income minority individuals. Additional pages may be used as necessary.

The Durham Center for Senior Life prevents premature and unnecessary institutionalization of seniors, keeping at risk-seniors living independently and leading self-sufficient lives. In the fiscal year 2019-2020, 62% of the old adults ages 55 plus were minorities. For the fiscal year 2020-2021, the Durham Center for Senior Life (DCSL) has partnered with the Durham Housing Authority (DHA) to provide transportation to our three senior sites. These sites are our downtown Durham site, Little River and JFK Towers. This partnership will increase our services provided to low-income seniors and promote our services in the Durham community. Our Little River location is located in Bahama NC, a rural area within the Durham Co. lines. 95% of the participants are considered rural residents. FY 2020/2021 plans to continue community outreaches through church partnerships and volunteers to continue to build this site.

DCSL has also connected with DHA to transport residents living closer to the JFK satellite site. At JFK seniors will engage in our nutritional programs, social activities and transportation services. DHA provides housing for low-income seniors throughout Durham Co.

Nearly 2,000 seniors received services from DCSL program FY 2020. Our goal is to continue to building partnerships, networking and enrolling seniors into our programs to increase the number of older adults served per year.



July 2020 through June 2021

**Home and Community Care Block Grant for Older Adults  
Community Service Provider  
Standard Assurances**

Durham Center for Senior Life agrees to provide services through the Home and Community Care Block Grant, as specified on the Provider Services Summary (DAAS-732) in accordance with the following:

1. Services shall be provided in accordance with requirements set forth in:
  - a) The County Funding Plan;
  - b) The Division of Aging and Adult Services Home and Community Care Block Grant Procedures Manual for Community Service Providers; and
  - c) The Division of Aging and Adult Services Standards Manual, Volumes I through IV or at <http://www.ncdhhs.gov/aging/monitor/mpolicy.htm>.

Community service providers shall monitor any subcontracts with providers of Block Grant services and take appropriate measures to ensure that services are provided in accordance with the aforementioned documents.
2. Priority shall be given to providing services to those older persons with the greatest economic or social needs. The service needs of low-income minority elderly will be addressed in the manner specified on the Methodology to Address Service Needs of Low-Income (Including Low Income Minority Elderly), Rural Elderly and Elderly with Limited English Proficiency format, (DAAS-733).
3. The following service authorization activities will be carried out in conjunction with all services provided through the Block Grant:
  - a) Eligibility determination;
  - b) Client intake/registration;
  - c) Client assessment/reassessments and quarterly visits, as appropriate;
  - d) Determining the amount of services to be received by the client; and
  - e) Reviewing consumer contributions policies with eligible clients.
4. All licenses, permits, bonds, and insurance necessary for carrying out Block Grant Services will be maintained by the community service provider and any contracted providers.
5. As specified in 45 CFR 75, Subpart D-Post Federal Award Requirements, Procurement Standards, community service providers shall have procedures for settling all contractual and administrative issues arising out of procurement of services through the Block Grant. Community service providers shall have procedures governing the evaluation of bids for services and procedures through which bidders and contracted providers may appeal or dispute a decision made by the community service provider.
6. Applicant/Client appeals shall be addressed as specified in Section 7 of the Division of Aging and Adult Services Home and Community Care Block Grant Manual for Community Service Providers, dated February 17, 1997.
7. Community service providers are responsible for providing or arranging for the provision of required local match, as specified on the Provider Services Summary, (DAAS-732). Local match shall be expended simultaneously with Block Grant funding.
8. Community service providers agree to comply with audit and fiscal reporting requirements as specified in the Agreement for the Provision of County-Based Aging Services (DAAS-735).
9. Compliance with Equal Employment Opportunity and Americans with Disabilities Act requirements, as specified in paragraph fourteen (14) of the Agreement for the Provision of County-Based Aging Services (DAAS-735) shall be maintained.

10. Providers of In-Home Aide, Home Health, Housing and Home Improvement, and Adult Day Care or Adult Day Health Care shall sign and return the attached assurance to the area agency on aging indicating that recipients of these services have been informed of their client rights, as required in Section 314 of the 2006 Amendments to the Older Americans Act.
11. Subcontracting – All HCCBG community service providers must assure that subcontractors (for-profit and non-profit entities only) meet the following requirements:
  - a. The subcontractor has not been suspended or debarred. (N.C.G.S. §143C-6-23, 09 NCAC 03M)
  - b. The subcontractor has not been barred from doing business at the federal level.
  - c. The subcontractor is able to produce a notarized [“State Grant Certification of No Overdue Tax Debts.”](#)
  - d. All licenses, permits, bonds and insurance necessary for carrying out Home and Community Care Block Grant services will be maintained by both the community service provider and any subcontractors.
  - e. The subcontractor is registered as a charitable, tax-exempt (501c3) organization with the Internal Revenue Service (non-profit subcontractors only).
12. Confidentiality and Security. Per the requirements in 10A NCAC 05J and Section 6 of the Home and Community Care Block Grant Procedures Manual, client information in any format and whether recorded or not shall be kept confidential and not disclosed in a form that identifies the person without the informed consent of the person or legal representative. Community service providers, including subcontractors and vendors, must adhere to all applicable federal, state and departmental requirements for protecting the security and confidentiality of client information including but not limited to appropriately restricting access, establishing procedures to reduce the risk of accidental disclosures from data processing systems, and developing a process by which the Division of Adult Aging Services is notified of suspected or confirmed security incidents and data breaches.
13. Record Retention and Disposition. All community service providers are responsible for maintaining custody of records and documentation to support the allowable expenditure of funds, service provision, and the reimbursement of services. Service providers must adhere to the approved record retention and disposition schedule posted semiannually on the website of the NC Department of Health and Human Services Controller at <http://www.ncdhhs.gov/control/retention/retention.htm>

Service providers are not authorized to destroy records related to the provision of services under this Agreement except in compliance with the approved DHHS retention and disposition schedule, which allows for the proper destruction of records based on a schedule by funding source and fiscal year. The agency agrees to comply with 07 NCAC 04M .0510 when deciding on a method of record destruction. Confidential records will be destroyed in such a manner that the records cannot be practically read or reconstructed.

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(Authorized Signature)

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(Date)

**Standard Assurance To Comply with Older Americans Act  
Requirements Regarding Clients Rights  
For  
Agencies Providing In-Home Services through the  
Home and Community Care Block Grant for Older Adults**

As a provider of one or more of the services listed below, our agency agrees to notify all Home and Community Care Block Grant clients receiving any of the below listed services provided by this agency of their rights as a service recipient. Services in this assurance include:

- In-Home Aide
- Home Care (home health)
- Housing and Home Improvement
- Adult Day Care or Adult Day Health Care

Notification will include, at a minimum, an oral review of the information outlined below as well as providing each service recipient with a copy of the information in written form. In addition, providers of in-home services will establish a procedure to document that client rights information has been discussed with in-home services clients (e.g. copy of signed Client Bill of Rights statement).

Clients Rights information to be communicated to service recipients will include, at a minimum, the right to:

- be fully informed, in advance, about each in-home service to be provided and any change and any change in service(s) that may affect the wellbeing of the participant;
- participate in planning and changing any in-home service provided unless the client is adjudicated incompetent;
- voice a grievance with respect to service that is or fails to be provided, without discrimination or reprisal as a result of voicing a grievance;
- confidentiality of records relating to the individual;
- have property treated with respect; and
- be fully informed both orally and in writing, in advance of receiving an in-home service, of the individual's rights and obligations.

Client Rights will be distributed to, and discussed with, each new client receiving one or more of the above listed services prior to the onset of service. For all existing clients, the above information will be provided no later than the next regularly scheduled service reassessment.

Agency Name: Durham Center for Senior Life

Name of Agency Administrator:  

Signature:  

(Please return this form to your Area Agency on Aging and retain a copy for your files.)

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## CLIENT/PATIENT RIGHTS

1. You have the right to be fully informed of all your rights and responsibilities as a client in the program.
  2. You have the right to appropriate and professional care relating to your needs.
  3. You have the right to be fully informed in advance about the care to be provided by the program.
  4. You have the right to be fully informed in advance of any changes in the care that you are receiving and to give informed consent to the provision of the amended care.
  5. You have the right to participate in determining the care that you will receive and in a change in the nature of the care as your needs change.
  6. You have the right to voice your grievances with respect to care that is provided and there will be no reprisal for the grievance expressed.
  7. You have the right to expect that the information you share with the agency will be held in strict confidence, to be shared only with your written consent and as it relates to obtaining of other needed community services.
  8. You have the right to expect the preservation of your privacy and respect for your personal information.
  9. You have the right to receive a timely response to your request for service.
  10. You shall be admitted for service only if the agency has the ability to provide safe and professional care at the level of intensity needed.
  11. You have the right to be informed of agency policies, changes, and costs for service.
  12. If you are denied service solely on your inability to pay, you have the right to be referred elsewhere.
  13. You have the right to honest, accurate information regarding the industry, agency and program in particular.
  14. You have the right to be fully informed about other services provided by this agency.
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# Internal Consistency Ch

## Review of Local Match Comparison Input Sheet vs. 732A Cash and In-Kind Totals

Senior Center Operation	OK
Information & Case Assistance	Match Totals Do Not Match Difference Is--->
Congregate Nutrition	OK
Transportation (General)	OK
Adult Day Care	OK
Adult Day Health	Match Totals Do Not Match Difference Is--->
0	OK
0	OK
0	OK
0	OK
0	OK
0	OK
0	OK
0	OK
0	OK

## 732A1 Labor Distribution Schedule Comparison of Assignable Salary To Overall Salary Entered

Total Assignable Salary and Cumulative Salary total for Se	0
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ecks

Difference

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