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CITY OF SANTA FE, NEW MEXICO

RESOLUTION NO. 2020-12

INTRODUCED BY:

Councilor Signe I. Lindell

Councilor Renee Villarreal

Councilor Roman "Tiger" Abeyta

A RESOLUTION

SUPPORTING THE APPLICATION AND RESPONSE TO THE REQUEST FOR PROPOSALS ISSUED BY THE NORTH CENTRAL NEW MEXICO ECONOMIC DEVELOPMENT DISTRICT, NON-METRO NEW MEXICO AREA AGENCY ON AGING FOR CONTINUATION OF SERVICES FOR THE SENIOR CITIZENS OF THE CITY OF SANTA FE.

WHEREAS, the Older Americans Act of 1965, as amended, was enacted by Congress to ensure provision of social services for America's elderly population; and

WHEREAS, the residents of Santa Fe were afforded an opportunity to submit their recommendations for senior services at an advertised public hearing on February 25, 2020; and

WHEREAS, the City of Santa Fe recognizes that there is a need to provide services for the senior citizens living in Santa Fe; and

WHEREAS, the Division of Senior Services of the City of Santa Fe currently administers social services such as congregate meals, home delivered meals, housekeeping, respite, transportation, volunteer opportunities, and health promotion activities for senior citizens

1 living throughout the city; and

2 **WHEREAS**, every four years, the North Central New Mexico Economic Development
3 District, Non-Metro New Mexico Area Agency on Aging (“Area Agency on Aging”) issues a
4 Request for Proposals (“RFP”) for prospective vendors to provide services for senior citizens; and

5 **WHEREAS**, currently the Division of Senior Services has a vendor agreement with the
6 Area Agency on Aging to provide services for senior citizens; and

7 **WHEREAS**, the current vendor agreement expires on June 30, 2020.

8 **NOW, THEREFORE, BE IT RESOLVED BY THE GOVERNING BODY OF THE**
9 **CITY OF SANTA FE** that the Governing Body:

- 10 1. Desires to continue services to the senior citizens of the community; and
- 11 2. Supports the City’s application and response to the RFP issued by the Area
12 Agency on Aging; and
- 13 3. Directs that, if the City is awarded a vendor agreement for the 2020-2022 funding
14 cycle, July 1, 2020 through June 30, 2022 the Governing Body will review it for
15 approval.

16 **PASSED, APPROVED, and ADOPTED** this 25th day of March, 2020.

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ALAN WEBBER, MAYOR

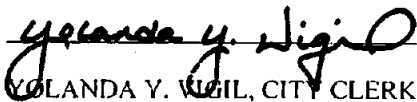
21 **ATTEST:**

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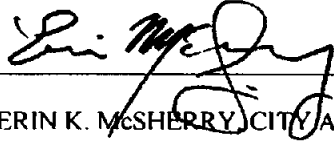


YOLANDA Y. VIGIL, CITY CLERK

1 APPROVED AS TO FORM:

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4 ERIN K. MCSHERRY, CITY ATTORNEY

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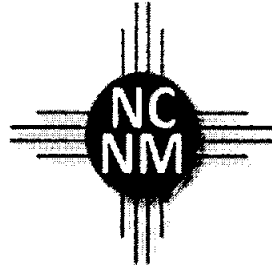
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25 *Legislation/2020/Resolutions/2020-12 Senior Services A.A. RFP*



**NORTH CENTRAL NEW MEXICO
ECONOMIC DEVELOPMENT DISTRICT**

NON – METRO AREA AGENCY ON AGING



REQUEST FOR PROPOSAL (RFP)

**PROVISION OF SERVICE FOR OLDER NEW MEXICANS
July 1, 2020 thru June 30, 2022**

RFP #2019-2020-05

Due: February 21, 2020

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The Request for Proposal (RFP)
with Attachments will be found on the
Website: www.ncnmedd.com

I. INTRODUCTION

A. PURPOSE OF THIS REQUEST FOR PROPOSALS

The purpose of the Request for Proposal (RFP) is to solicit sealed proposals for the provision of services for Older New Mexicans, to include, but not limited to, congregate meals, home delivered meals, transportation, adult day care, respite care, homemaker services, and other supportive and supplemental services.

B. BACKGROUND INFORMATION

Established in 1967, North Central New Mexico Economic Development District (NCNMEDD) is a New Mexico Council of Governments and quasi-governmental entity. NCNMEDD administer the Non-Metro Area Agency on Aging (Non-Metro AAA). One role of the Non-Metro AAA is to develop a comprehensive service delivery plan which assists older persons to maintain their independence and dignity while ensuring accountability and quality service delivery. This community-based delivery system may be provided directly or through this subcontracting process, which Non-Metro AAA is conducting within the 32-county service or service delivery area.

C. SCOPE OF WORK

NCNMEDD Non-Metro AAA will make funding available from the Federal Title III Older Americans Act (OAA) of 1965 and State of New Mexico House Bill 2 Appropriations through annual subrecipient agreements in the following 32 counties, which fall within three Planning and Service Areas.

PSA 2	Cibola, Colfax, Los Alamos, McKinley, Mora, Rio Arriba, Sandoval, San Miguel, San Juan, Santa Fe, Taos, Torrance and Valencia Counties.
PSA 3	De Baca, Chaves, Curry, Guadalupe, Eddy, Harding, Lea, Lincoln, Quay, Roosevelt and Union Counties.
PSA 4	Catron, Dona Ana, Grant, Hidalgo, Luna, Otero, Sierra and Socorro Counties.

NCNMEDD Non-Metro AAA seeks to procure with entities whose purpose and mission are to provide supportive and nutrition services to older individuals through a comprehensive and coordinated effort and by following the intent of the Older Americans Act to serve:

- older individuals residing in rural areas;
- older individuals with greatest economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas);
- older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas)
- older individuals with severe disabilities
- older individuals with limited English proficiency;

- older individuals with Alzheimer’s disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals)
- older individuals at risk for institutional placement;

Attachment A contains a complete list of service definitions and unit measurements.

D. ELIGIBLE ENTITIES

Applicants may be units of local or tribal government; government agencies including public schools; for-profit and non-profit corporations, including 501I3s; and community-based organizations. Collaborative entities and coalitions will also be considered for funding. Proposals will be accepted from current providers as well as new applicants operating in the Planning and Service Areas specified.

E. FUNDING AVAILABILITY

NCNMEDD Non-Metro AAA reserves the right to alter any proposed allocation by program area based on review of all the competitive proposal applications and any legislative mandates included in the appropriations. **Attachment B** list the characteristics of the population by county.

F. PAYMENT PROVISION

Cap rate information is provided as a resource in the development of the applicant budgets. However, applicants should not be limited by cap rates and should submit budgets that reflect the true costs for services and achievable unit goals. Final contract rate will be based on final negotiations with the NCNMEDD Non-Metro AAA based on historical data, funding availability and other reasonable factors.

Service	Rate
Congregate Meal Service	\$4 per meal
Home Delivered Meal Service	\$6 per meal
Transportation Service	\$10 per one-way-trip
Assisted Transportation Service	\$15 per one-way-trip
Case Management Service	\$16 per hour
Homemaker Service	\$15 per hour
Chore Service	Seasonal \$16 per hour Year-Round - \$15 per hour
Adult Day Care Service	\$12 per hour
Caregiver Respite Care Service	\$15 per hour
Grandparent Raising Grandchildren Respite	\$15 per hour
Caregiver Access Assistance	\$ per contact (negotiable)
Caregiver Counseling Service	\$ per session (negotiable)
Caregiver Information Service	\$ per activity (negotiable)
Caregiver Supplemental Service	\$ per distribution event (negotiable)

Evidence Based MyCD Service	\$4 participant hour
Evidence Based EnhanceFitness Service	\$6 participant hour

G. PROCUREMENT MANAGER

1. NCNMEDD Non-Metro AAA has assigned a Procurement Manager who is responsible for the conduct of this procurement whose name, address, telephone number and e-mail address are listed below:

Name: *Marcia Medina*
 Address: NCNMEDD
 3900 Paseo del Sol
 Santa Fe, NM 87505
 Telephone: *(505) 395-2675*
 Email: *marciam@ncnmedd.com*

2. All deliveries of responses via express carrier must be addressed as follows (except for electronic submissions):

Name: *Marcia Medina, Community Services Director*
 Reference RFP Name: *RFP # 2019-2020-05:*
Provision of Service for Older New Mexicans
July 1, 2020 through June 30, 2022
 Address: 3900 Paseo del Sol
 Santa Fe, New Mexico 87505

3. Any inquiries or requests regarding this procurement should be submitted, in writing, to the Procurement Manager. Offerors may contact ONLY the Procurement Manager regarding this procurement. Other employees or Evaluation Committee members do not have the authority to respond on behalf of the NCNMEDD Non-Metro AAA.

II. CONDITIONS GOVERNING THE PROCUREMENT

A. PRE-BIDDERS CONFERENCE CALL

The Pre-Bidders conference call will be held:

Date: Friday, January 22, 2020
 Time: 2:00 PM MST
 Dial In: 712-775-7031
 Access Code: 646-535#

Email questions to Procurement Manager on or before January 21st by 5:00pm.

B. SEQUENCE OF EVENTS

The following schedule lists the major procurement activities and the NCNMEDD Non-Metro AAA will make every effort to adhere to the schedule.

Action	Responsibility	Date
Issuance of RFP	Non-Metro AAA Staff	January 17, 2020
Pre-Bidders Conference Call Dial In: 712-775-7031 Access Code: 646-535#	Non-Metro AAA Staff	January 22, 2020 Email questions-January 21, 2020 by 5:00pm to marciam@ncnmedd.com
Deadline to Submit Questions	Applicant	January 31, 2020 email questions to marciam@ncnmedd.com
Answers Posted on Website	Non-Metro AAA Staff	January 22, 2020 through February 21, 2020
Proposal Due Date	Applicants	February 21, 2020 @ 4:00 PM MST
Proposal Evaluation	Evaluation Committee	Beginning March 2, 2020
Funding Recommendations and Notification to Applicants	Non-Metro AAA	April 3, 2020
Appeal Process Deadline	Applicants	Seven (7) days after funding notification
Contracts Issued	Non-Metro AAA Staff	May 31, 2020

III. GENERAL REQUIREMENTS:

A. INCURRING COSTS

Cost of developing this RFP is entirely the responsibility of the applicant and shall not be reimbursed in any manner by NCNMEDD Non-Metro AAA.

B. SUBRECIPIENT CONTRACTORS

Subrecipient contractors and other business associations to be used by the applicant in the performance of the scope of work under this RFP shall be identified with specificity in the proposal.

C. APPLICANT'S RIGHT TO WITHDRAW PROPOSAL

Applicants will be allowed to withdraw their proposal at any time prior to the deadline for receipt. The applicant must submit a written withdrawal signed by the applicant's duly authorized representative and addressed to Procurement Manager.

D. CONFIDENTIALITY OF PROPOSALS

All submitted proposals are classified as competitive proposals and are considered confidential during the negotiation process.

E. RFP CANCELLATION

This RFP may be cancelled at any time and/or any and all proposals may be rejected in whole or in part when NCNMEDD Non-Metro AAA determines it is in the best interest of the consumers. NCNMEDD Non-Metro AAA shall award subrecipient agreements which offer the best possibility for providing the services requested.

F. APPROPRIATION CONTINGENCY

All offers regarding contract amounts will be contingent upon the final amount appropriated by and received from the New Mexico Aging and Long-Term Service Department (ALTSD) on an annual basis. Subrecipient contracts may be renewed during the multi-year period listed above based on the availability of funds and satisfactory performance.

G. RIGHT TO WAIVE MINOR IRREGULARITIES

NCNMEDD Non-Metro AAA reserves the right to waive technical irregularities, which can be corrected without prejudice to other applicants.

H. AGENCY RIGHTS

NCNMEDD Non-Metro AAA shall have the right to use all the ideas or adaptations of ideas contained in any proposal received in response to this RFP.

At its sole discretion, NCNMEDD Non-Metro AAA reserves the right to reject any and/or all proposals received in response to this RFP.

I. OWNERSHIP OF PROPOSALS

All materials submitted in response to this RFP becomes the property of the NCNMEDD Non-Metro AAA upon receipt and will not be returned to the applicant.

IV. PROPOSAL RESPONSE FORMAT

A. PROPOSAL FORMAT

Failure to furnish all information or to follow the proposed format requested in the RFP may disqualify a proposal. NCNMEDD Non-Metro AAA will make the final determination as to a proposal's completeness.

B. MANDATORY REQUIREMENTS

The completed narrative must be submitted on provided Proposal Narrative Document located on the website www.ncnmedd.com. The proposal must contain only the requested information described.

1. PROPOSAL FORMAT

Each item must be answered completely.

2. NARRATIVE COMPONENTS

a. Executive Summary

- As the opening section of the RFP, the Executive Summary should briefly summarize the proposal. Emphasize the major issues, trends and goals set by the applicant, and provide a clear description of the service area vision for services over the next four years.

b. Applicant Organizational Structure

- Describe the configuration, primary functions and mission statement of the applicant.
- Describe the program's placement within its larger organization (if applicable).
- Include an organizational chart.

c. Staff Experience and Qualifications

- Identify all staff by job titles allocated to the proposed program to include managerial and financial functions.
- Summarize the qualifications and experience pertinent to their roles.

d. Fiscal Management

- Describe and attach a sample financial report demonstrating the applicant's accounting structure and ability to report by funding source (revenue) and line item (expense) by service (congregate meals, home delivered meals, homemaker, etc.)
- Describe the methodology used in allocating funds to services.
- Describe how the financial status of the program will be monitored.
- Describe the applicant's financial management and accounting system. Disclose whether the applicant has any audit findings or is debarred, suspended or excluded from any government program.
- Describe commitments of local funds, grants, in-kind, equipment, vehicles, etc. for the services described in the RFP.

e. Characteristics of Service Area

- Describe the characteristics of the proposed service area. Identify those characteristics and conditions that affect the service delivery system, including geography, cultural diversity, language barriers, urban/rural/frontier environments and other information to provide a snapshot of the proposed service area.

- Describe other service providers within the service area such as hospitals, long-term care facilities, volunteer programs, public transportation systems, housing, behavioral health centers, economic initiatives, and the like, which impact the lives of older adults in the community.
- f. Coordination and Capacity Building**
- Describe how the applicant works within the proposed service area to coordinate and collaborate with other entities to better serve older adults, especially assisted transportation needs.
 - Describe other services and activities to older adults that are funded outside of the scope of this RFP.
 - Describe how the applicant intends to strengthen the service system, maximize resources, and minimize duplication of service.
- g. Innovation and Forward Thinking**
- Describe current and future plans to respond to the changing environment in which older adults and adults with disabilities live.
 - Describe efforts to reduce hunger and food insecurity.
- h. Emergency Preparedness**
- Describe how the applicant will coordinate activities and develop long-range emergency preparedness plans with local and state emergency responders, relief organizations, local and state governments, and any others that have responsibility for disaster relief service delivery.
- i. Outreach**
- Describe how the applicant will ensure the use of outreach efforts that identify eligible individuals, with special emphasis on older individuals who have the greatest economic or social need, particularly older individuals with low incomes, including minority older individuals with low incomes, older individuals with limited English proficiency, and older individuals residing in rural areas, and to inform these elders of the availability of supportive and nutrition services.
 - Specifically provide information regarding the number of American Indian elders within the service area and how the applicant will work to increase access of services to these individuals, as well as how OAA Title III services coordinate with those funded under OAA Title VI (Native American programs) when applicable.
- j. Service Goals and Objectives**
- List area-wide service goals with objectives. Each objective must be measurable and include anticipated outcomes and outcome measures. Include goals and objectives for each proposed service. Include projected units of service and projected unduplicated consumers to be served for each proposed service with special emphasis on older individuals who have the greatest economic or social need, particularly older individuals with low incomes, including minority older individuals with low incomes, older individuals with limited English proficiency, and older individuals residing in rural areas, and to inform these elders of the availability of supportive and nutrition services.

- List Goals and objectives to address the areas covered in the RFP response to align with the US Administration for Community Living (ACL) strategic goals and priorities.
 - GOAL 1: ADVOCACY
 - GOAL 2: PROTECT RIGHTS AND PREVENT ABUSE
 - GOAL 3: INDIVIDUAL SELF-DETERMINATION & CONTROL
 - GOAL 4: LONG-TERM SERVICES AND SUPPORTS
 - GOAL 5: EFFECTIVE AND RESPONSIVE MANAGEMENT
- http://www.acl.gov/About_ACL/StrategicPlan/Index.aspx

C. BUDGET AND OTHER REQUIRED INFORMATION

The completed budget must be submitted on provided budget workbook format located on the www.ncnmedd.com website.

D. ADDENDA

1. Legal Authorizing Documentation: For private organizations, provide a copy of the articles of incorporation; for public organizations, provide a copy of the governing regulations.
2. Assurances
3. Certification Regarding Debarment, Suspension, and Other Responsibility Matters
4. Certification Regarding Lobbying
5. A Resolution Authorization
6. Commitment of Local Funds and support including equipment, vehicles and in-kind.
7. Complete applicant sites and services information listed below on the Proposal Narrative Document at www.ncnmedd.com:
 - Legal name of the organization or entity
 - Name of the chair of the governing body
 - Name of the organization's executive director or chief officer
 - Legal address, phone and fax numbers of the organization or entity
 - Relevant e-mail addresses
 - Senior Center
 - Focal Points

8. **Public Hearing**

If a public hearing was held in the proposed service area, submit documentation of meeting(s) in this section, including dates and locations of meeting(s); methods used to publicize meeting(s); methods used in conducting meeting(s); number of persons in attendance; comments on the plan and from whom they were received; and any changes made to the plan as a result of the meetings. Include sign in sheets from meeting(s).

E. EVALUATION FACTORS/RATING CRITERIA

NCNMEDD Non-Metro AAA will utilize the following rating criteria to evaluate proposals submitted in response to the RFP.

Executive Summary	50 pts.
Organizational Structure	300 pts.
Staff Experience and Qualifications	300 pts.
Fiscal Management and Budget	800 pts.
Characteristics	200 pts.
Coordination and Capacity Building	250 pts.
Innovation and Forward Thinking	200 pts.
Emergency Preparedness	100 pts.
Outreach	200 pts.
Goals and Objectives	500 pts.

F. CLOSING DATE

The closing date for receipt of completed RFP is **February 21, 2020** at 4:00 P.M. MDT. Any proposal received after that time may be eliminated from competition as not meeting the requirements of the RFP.

The proposal narrative application form and budget worksheets can be downloaded from the website: www.ncnmedd.com. Upon completion, the entire proposal package should be emailed to the attention of:

Josh Hirsch joshh@ncnmedd.com and
Jose Fonseca jfonseca@ncnmedd.com

Questions are directed only to the Procurement Manager.

V. REVIEW PROCESS

NCNMEDD Non-Metro AAA shall establish an Evaluation Committee to review all proposals and recommend applications for funding.

A. NOTIFICATION OF OUTCOME

NCNMEDD Non-Metro AAA will notify all applicants in writing by April 3, 2020.

B. APPEAL PROCESS

Applicants who are not recommended for funding have seven (7) days to respond to the written notification if they wish to appeal the decision.

The appeal letter should be addressed to the Executive Director of the NCNMEDD and must include a written explanation of the perceived procedural error or errors of fact in the selection process.

Monica Abeita, Executive Director
NCNMEDD
3900 Paseo del Sol
Santa Fe, NM 87507

The applicant must ensure that NCNMEDD receives the letter within seven (7) working days after the date of notification.

An appointed appeals officer shall review material in collaboration with the staff and a recommendation shall be made to the NCNMEDD Executive Committee within two (2) weeks.

The decision of the Executive Committee shall be final and conclusive. Written notification will be sent to the applicant within five (5) working days of the decision.

**ATTACHMENT A
SERVICE DEFINITIONS**

Definitions and Unit Measurements

Note: Examples provided are for the purpose of assisting in the understanding of the service definitions. Service definitions should not be limited to examples provided.

Service	Definition	Unit
Adult Day Care	<p>Adult Day Care Services is a supervised, protective, congregate setting in which social services, recreational activities, meals, personal care, rehabilitative therapies and/or nursing care are provided to dependent adults. Facility must be licensed by the State of New Mexico.</p> <p><i>Example:</i> The participant arrives at 9 a.m. and leaves the facility at 2:30 p.m. The recorded units of service are five- and one-half units (5.5 hours).</p>	<p>1 Hour <i>Partial Hour may be reported to two decimal places, e.g. 0.25</i></p>
Case Management	<p>Assistance either in the form of access or care coordination in circumstances where the older person is experiencing diminished functioning capacities, personal conditions or other characteristics which require the provision of services by formal service providers or family caregivers. Activities of case management include such practices as assessing needs, developing care plans, authorizing and coordinating services among providers, and providing follow-up and reassessment, as required. Note: This is an ongoing process including assessing needs of a client and effectively planning, arranging, coordinating and following-up services which most appropriately meet the identified needs as mutually defined by the client, staff, and where appropriate, a family member(s) or other caregiver(s).</p> <p><i>Example:</i> A Participant comes to a facility for an appointment with the staff Case Manager. The appointment lasts two (2) hours. (Note: Appointments can occur at facility or in an individual's place of residence.) During this time, the Case Manager performs an assessment on the participant and develops a care plan for home delivered meals. The Care Manager also assists the participant with paperwork to qualify for energy assistance for local utility bills. During this appointment the Case Manager contacts an In-Home Service Agency to arrange possible Medicaid Personal Care Services for the individual. The Case Manager makes a follow-up appointment with the participant in one week to review paperwork and ensure that services have been scheduled. The</p>	<p>1 Hour <i>Partial Hour may be reported to two decimal places, e.g. 0.25</i></p>

	recorded units of service for the first meeting are two (2) units (hours).	
Chore	Assistance with heavy housework, yard work or sidewalk maintenance at a person's place of residence. <i>Example:</i> The program schedules a Chore worker to go to Mrs. Smith's home to shovel snow, chop wood and bring the wood into the house. Worker is at the home from 9 a.m. to 11:00 a.m. The recorded units of service are two (2) units (hours).	<i>1 Hour Partial Hour may be reported to two decimal places, e.g. 0.25</i>
Homemaker Housekeeping	Assistance with meal preparation, shopping, managing money, making telephone calls, light housework, doing errands and/or providing occasional transportation. <i>Example:</i> A Staff Homemaker arrives at Mr. Garcia's home to do laundry, make the bed, sweep porch and clean bathroom. Homemaker arrives at 1:00 p.m. and leaves at 3:00 p.m. The recorded units of service are two (2) units (hours).	<i>1 Hour Partial Hour may be reported to two decimal places, e.g. 0.25</i>
Transportation Services	Services designed to transport older persons to and from medical and health care services, social services, meal programs, senior center, shopping and recreational activities so such service will be accessible to eligible individuals who have no other means of transportation or are unable to use their own transportation. THERE ARE TWO TYPES OF TRANSPORTATION SERVICES: Demand/Response- This are transportation services designed to carry older individuals from specific origin to specific destination upon request. Older individuals request the transportation service in advance of their need. Fixed Route- This are transportation services that operates along a prescribed route according to a fixed schedule. The fixed route does not vary and the provider strives to reach each transit stop at the scheduled time. The older individual does not reserve a ride as in a demand-response system; the individual simply goes to the designated location and at the designated time to gain access to the transit system.	<i>1 One-Way Trip</i>
Transportation	Taking an older person from one location to another. <u>This does not include any other activity.</u> <i>Example:</i> Demand/Response: Al Price calls the Senior Center and requests a ride to the Center the next day to lunch and then requested to be put on the list for a trip to Wal-Mart and the Post Office after lunch. The next day Mr. Price is picked up at his home by the senior center van and is taken, along with others, to the Center for lunch. After lunch Mr. Price gets in the Senior Center van, with other riders, and is taken to Wal-Mart and the Post Office where he exits the van at both locations to perform shopping	<i>1 One-Way Trip</i>

	and to pick up his mail. He is then taken home where he exits the van and goes inside. Mr. Price exited the vehicle at the Senior Center for lunch, again at Wal-Mart to shop, again at the Post Office to get mail and again at home to end his trip. The recorded units of service for Al Price are four (4).	
Assisted Transportation	<p>Providing assistance and transportation, including escort, to an older individual who has difficulties (physical or cognitive) using regular vehicular transportation. The “trip” includes the following: assisting the older individual from preparation for the trip, to assisting the older individual from their place of residence into the vehicle providing transportation, assisting the older individual from the transporting vehicle to the destination, such as the doctor’s office, staying with the older individual at the point of destination; and the reverse for a return trip.</p> <p>Example: A participant is picked up at home by a staff member (escort) and transported to the doctor’s office; the escort helps the participant out of the vehicle and provides assistance and escort services while at the doctor’s office. After the appointment, the escort assists the participant back to the vehicle, drives to the participant’s home and assists the individual back in to their home. The participant exited the vehicle at the doctor’s office and again when they returned home. The recorded units of service are two (2) (trips).</p>	<i>1 one-way Trip</i>
Congregate Meals	<p>A hot or other appropriate meal served to an eligible person which meets one- third (1/3) of the dietary reference intakes (DRI) as established by the Food and Nutrition Board of the Institute of Medicine of the National Academy of Sciences and complies with the most recent Dietary Guidelines for Americans, published by the Secretary and the Secretary of Agriculture, and which is served in a congregate setting 5 or more days per week. There are two types of congregate meals:</p> <p>Standard meal – A regular meal from the standard menu that is served to the majority of the participants.</p> <p>Therapeutic meal or liquid supplement – A special meal or liquid supplement that has been prescribed by a physician and is planned specifically for the participant by a dietician (e.g., diabetic diet, renal diet, tube feeding).</p> <p>Example: Mr. and Mrs. Jones attend the Senior Center for the congregate lunch. Both are eligible participants and both sign the Sign-in Sheet for lunch.</p>	<i>1 Meal</i>

	The recorded unit of service for Mrs. Jones is one (1) meal. The recorded unit of service for Mr. Jones is one (1) meal.	
Home Delivered Meals	<p>Hot, cold, frozen, dried, canned or supplemental food (with a satisfactory storage life) which provides a minimum of one-third (1/3) of the dietary reference intakes (DRI) as established by the Food and Nutrition Board of the Institute of Medicine of the National Academy of Sciences and complies with the Dietary Guidelines for Americans, published by the Secretary and the Secretary of Agriculture, and is delivered to an eligible person in the place of residence. The objective is to assist the recipient sustain independent living in a safe and healthful environment five (5) or more days per week. Home delivered meals may be served as breakfast, lunch, dinner or weekend meals.</p> <p>Example: Mrs. White received a home delivered lunch for two weeks (ten days). She also received weekend frozen lunch during this period (four days [two (2) weekends], Saturday and Sunday). The recorded units of service for Mrs. White for two weeks of service are ten (10) home delivered lunches and four (4) weekend home delivered lunches.</p>	<i>1 Meal</i>
Nutrition Education	<p>Accurate and culturally sensitive nutrition and health related information and instruction provided in a group or individual setting overseen by a dietician or individual comparable expertise.</p> <p>Example for Congregate Meals: The County Extension Agency comes to Senior Center before lunch and gives a presentation to 50 congregate meal participants about diabetes. Hand-outs and samples of menus are distributed that can be used at home by the participants. All participants who listened to the presentation signed a Nutrition Education Sign-in Sheet to document their participation and copies of the material handed-out are retained with the sign-in sheet as documentation of the session. The recorded units on service are one session and 50 participants, 50 units.</p> <p>Example for Home Delivered Participants: One hundred home delivered meal participants are sent hand-outs along with samples of menus that can be used at home, which were presented by the County Extension Agent to the congregate participants. This activity is documented as to the number of participants who received the information along with a copy of all information</p>	<i>1 Session per Participant</i>

	distributed. The recorded units on service are one session and 100 participants, 100 units.	
Nutrition Counseling	A standardized service as defined by the Academy of Nutrition & Dietetics that provides individualized guidance to individual who are nutritionally at risk because of their health or nutrition history, dietary intake, chronic illness, or medication use, or to caregivers. Counseling is provided one-on-one by a registered dietitian and addresses the options and methods for improving nutrition status with a measurable goal.	1 Hour <i>Partial Hour may be reported to two decimal places, e.g. 0.25</i>
Health Promotion Non-Evidence-Based	<p>Health promotion and disease prevention activities that do not meet the ACL/AoAs definition for an evidence-based program as defined at ACL's website. www.acl.gov.</p> <p>Education/Training – Formal or informal opportunities for individuals to acquire knowledge or experience, increase awareness, promote personal or community enrichment and/or increase or gain skills. Example: The program offers a CPR class for seniors. 50 individuals attend the session. The session is from 1 p.m. to 3 p.m.</p> <p>Health Screening – Pre-nursing home admission screening and/or routine health screening. Example: Program offers blood pressure and blood sugar screening every Wednesday from 9 a.m. to 11:00 a.m. Recorded units for one session, two (2) units (hours).</p> <p>Home Safety Services – Home assessment, assistive devices, accident prevention training, assistance with modifications to prevent accidents/facilitate mobility, and/or follow-up services to determine effectiveness of modifications/assistive devices. Example: The program staff installs handrails for a senior at their residence. Activity starts at 9:00 a.m. and is completed at 11:00 a.m. Recorded units for the service are two (2) units (hours).</p> <p>Medication Management – Monitoring, screening and education to prevent incorrect medication usage and adverse drug reactions. Example: The program enlists the assistance of a certified pharmacist who will be at the facility from 8:00 a.m. to 12:00.p.m. and from 1:00 p.m. to 4:00 p.m. to review medications. Seniors are encourage to bring all their medications and let the pharmacist review what they are taking to ensure that medications do not negatively interact with on other. The Pharmacist sees seventy-five seniors who have all signed-in for the service. The recorded units for service is seventy-five (75) units (contacts)</p> <p>Physical Fitness/Exercise – Individual or group exercise activities</p>	<p>Education Training 1 Hour <i>Partial Hour may be reported to two decimal places, e.g. 0.25</i></p> <p>Health Screening 1 Hour <i>Partial Hour may be reported to two decimal places, e.g. 0.25</i></p> <p>Home Safety Services 1 Hour <i>Partial Hour may be reported to two decimal places, e.g. 0.25</i></p> <p>Medication Management 1 Contact</p> <p>Physical Fitness & Exercise 1 Session per</p>

	(with or without equipment), such as walking, running, swimming, sports and/or Senior Olympics physical conditioning/training. Example: Program offers a yoga class on Wednesdays which is facilitated by an instructor. The Wednesday class had forty-five participating seniors. The recorded units of service for this activity are forty-five (45) participants per session.	<i>Participant</i>
Health Promotion Evidence-Based	<p>Activities related to the prevention and mitigation of the effects of chronic disease (including osteoporosis, hypertension, obesity, diabetes, and cardiovascular disease) alcohol and substance abuse reduction, smoking cessation, weight loss and control, stress management falls prevention, physical activity and improved nutrition. Activities must meet ACL/AoA's definition for an evidence based program as presented on the ACL's Website www.acl.gov.</p> <p>Existing evidence-based programs currently offered in New Mexico include:</p> <p>EnhanceFitness- a low-cost, evidence-based group exercise program, helps older adults at all levels of fitness become more active, energized, and empowered to sustain independent lives.</p> <p>A Matter of Balance- View falls as controllable, set goals for increasing activity, make changes to reduce fall risk at home, exercise to increase strength</p> <p>Manage Your Chronic Disease (My CD) – Designed to help people gain self-confidence in their ability to manage the symptoms of their chronic disease and how it affects their lives.</p> <p>Tomando Control de su Salud (Spanish-language Manage Your Chronic Disease)</p>	<i>Unit Criteria information based on the individual program requirements</i>
III E Family Caregiver Support Program	<p><i>services for family caregivers and grandparent caregivers. The following are the allowable service categories as of May 25, 2010.</i></p> <p>Access Assistance – A service that assists caregivers in obtaining access to the services and resources that are available within their communities. To the maximum extent practicable, it ensures that the individuals receive the services needed by establishing adequate follow-up procedures. [Note: Information and assistance to caregivers is an access service, i.e., a service that:</p> <p>(A) provides individuals with information on services available within the communities; (B) links individuals to the services and opportunities that are available within the communities; (C) to the maximum extent practicable, establishes adequate follow-up procedures. Internet web site "hits" are to be counted only if information is requested and supplied.]</p>	<i>Access Assistance / Contact</i>

	<p>Example: Mrs. Smith, who is 60 years old, is the primary caregiver for her husband who is seventy-five. She is working with a staff member at the Senior Center. During her appointment, the staff member helps Mrs. Smith determine other Agencies within the community that can assist her. She is informed about an Agency that provides wheelchairs that can be used while her husband is recovering from a broken leg. Mrs. Smith is informed about a flu shot clinic that will be made available in four days by the Health Department. The senior center staff member makes a follow up call to Mrs. Smith to inquire about whether she obtained the wheelchair and inquire if she needs transportation to the flu clinic. The recorded unit for Mrs. Smith for this service is one (1) contract. Note follow-up is part of the original contact.</p> <p>Counseling – Counseling to caregivers to assist them in making decisions and solving problems relating to their caregiver roles. This includes counseling to individuals, support groups, and caregiver training (of individual caregivers and families).</p> <p>Example: The senior center works with the Methodist Church which hosts a non- denominational caregiver support group that meets every Tuesday afternoon. There are ten (10) caregivers from the senior center that attend the Support Group every week. The recorded units for a Tuesday session with ten individuals in attendance are 10 units.</p> <p>Information Services – A service for caregivers that provides the public and individuals with information on resources and services available to the individuals within their communities. [Note: service units for information services are for activities directed to large audiences of current or potential caregivers such as disseminating publications, conducting media campaigns, and other similar activities.</p> <p>Example: The Agency dedicates one page of their monthly newsletter to caregivers. This page provides information about services, hours and location of support group meetings and an article that provides information and support for caregivers. The recorded unit of service for one publication of the newsletter is one (1) unit (activity).</p> <p>Supplemental Services – Good and Services provided on a limited basis to</p>	<p><i>Counseling 1 Session per Participant</i></p> <p><i>Information Services 1 Activity</i></p> <p><i>Supplemental Services 1 Distribution Event</i></p>
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	<p>complement the care provided by caregivers. Examples of supplemental services include, but are not limited to, home modifications, assistive technologies, emergency response systems, and incontinence supplies.</p> <p>Example: Mr. Green is seventy-three years old and is the primary caregiver for his wife who is sixty-nine years old. The senior center has provided Mr. Green with handrails that he will install at his home to assist his wife. He was also supplied with a lift belt which will provide assistance to him when he needs to help his wife out of a chair. The recorded units for this service are two (2) units (distributions).</p> <p>Support Groups – a service led by a trained individual, moderator or professional as required by state policy, to facilitate caregivers to discuss their common experiences and concerns and develop a mutual support system. For the purposes of Title III -E caregiver support groups would not include ‘caregiver education groups, peer-to-peer support groups or other groups primarily aimed at teaching skills or meeting on an informal basis without a facilitator that possessed training and/or credentials as required by state policy.</p>	<p><i>Support Groups 1 Session per Participant</i></p>
<p>Respite Care</p>	<p>Services which offer temporary, substitute supports or living arrangements for care recipients in order to provide a brief period of relief or rest for caregivers. Respite Care includes:</p> <ol style="list-style-type: none"> (1) In-home respite (personal care, homemaker, and other in-home respite); (2) Respite provided by attendance of the care recipient at a senior center or other nonresidential program i.e. Adult Day Program; (3) Institutional respite provided by placing the care recipient in an institutional setting such as a nursing home for a short period of time as a respite service to the caregiver; and (for grandparents caring for children) summer camps. If the specific service units purchased via a direct payment (cash or voucher) can be tracked or estimated, report those service unit hours. If not, a unit of service in a direct payment is one payment. <p>Example: Mrs. Gonzales is 75 years old and is the primary caregiver to her husband who is eighty years old. On Friday afternoons from 1:00 p.m. to 3:00 p.m., a staff member from the Senior Center arrives at the Gonzales home to assist Mrs. Gonzales with her husband. The staff member visits and plays games with Mr. Gonzales while Mrs. Gonzales leaves the home to shop and run errands. The recorded units of service for Mrs. Gonzales for this day are two (2) units (hours).</p>	<p><i>1 Hour Partial Hour may be reported to two decimal places, e.g. 0.25</i></p>

	NOTE: WITH THE GRANDPARENT CAREGIVING PROGRAM THE CAREGIVER MAY BE 55 YEARS OF AGE.	
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ATTACHMENT B
Characteristics of Target Population by County

Available on website
www.ncnmedd.com

ATTACHMENT C
Budget and Justification Workbook

Available on website
www.ncnmedd.com