

Standard Language Document for Social Service and Training Contracts

A Copy of DHS Standard Language Document for Social Service and Training Contracts can be generated here.

[✓] The terms of this contract have been read and understood by the person who certifies this page and the person who approves this contract.

The parties agree to comply with the terms and conditions of the Contract set forth on the attached pages in Article I through Article V, and any related Annexes.

Name: Lorraine Hentz Title: Director

DOAS23AAA017

Sussex County

Administrative Requirements, Supplemental Provisions, Sub-contract Requirements & Contract
Application Provisions

A Copy of DoAS Administrative Requirements, Supplemental Provisions and Sub-Contract Requirements can be generated here.

Upload the signed Administrative Requirements, Supplemental Provisions, and Subcontract Requirements here:

https://njsage.intelligrants.com/_Upload/2810375_1993105-2023signedAPCAdministrativeRequirements.pdf

Sussex County

DHS Organization Information Review Page

Name of Attorney for Agency Douglas Steinhardt [] Check here if your organization does not have an attorney

Attorney Telephone 973-579-0230

Attorney Email dsteinhardt@sussex.nj.us

Address 1 One Spring Street

Address 2

City Newton **State** New Jersey **Zip** 07860

Name of Principal Agency Contact Christine Florio **Title of Principal Agency Contact** Administrator

Principal Agency Telephone 973-579-0559

Principal Agency E-mail cflorio@sussex.nj.us

Address 1 One Spring Street

Address 2

City Newton **State** New Jersey **Zip** 07860

Name of Principal Program Contact Lorraine Hentz **Title of Principal Program Contact** Director

Principal Program Telephone 973-579-0555

Principal Program E-mail lhentz@sussex.nj.us

Address 1 One Spring Street

Address 2

City Newton **State** New Jersey **Zip** 07860

Name of Principal Fiscal Contact Elke Yetter **Title of Principal Fiscal Contact** Treasurer

Principal Fiscal Telephone 973-579-0300

Principal Fiscal E-mail eyetter@sussex.nj.us

Address 1 One Spring Street

Address 2

City Newton **State** New Jersey **Zip** 07860

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

Does the Agency Meet the following Licensure Requirements?

Facility N/A

Services N/A

Personnel N/A

Is a copy of the license attached?

Agency Accounting System

OtherModified Accrual

Affirmative Action Plan

Yes

Type of agency and applicable cost principles

<u>Agency Type</u>	<u>Cost Principles Applied</u>
Private non-profit	OMB Circular A-122
Private for profit	Title 48 CFR, Part 31 et seq.
Government:	OMB Circular A-87
Hospital	Title 45 CFR Part 74, Appendix E
Educational Institutions	OMB Circular A-21, including any amendment published in the Federal Register
Other	<u>Click here</u> and identify applicable cost principles

Selected Type of Agency: County

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

Additional Project Type SelectionProject Types

- Supplemental Home Delivered Meals (SHDM) - 19
- Disaster Relief Funding - 45
- Care Transitions - 46
- Non APC Funds - 25
- Community Based Senior Program - 48
- FFP Federal Financial Participation - Services - 30
- FFP Federal Financial Participation - Administration - 31
- Other 5
- Other 6
- Other 7

- FFCRA C2 Home Delivered Meals - 50
- FFCRA C1 Congregate meals - 49
- CARES - Administration - 54
- CARES - T III B Supportive Services - 51
- CARES - T III C2 Home Delivered Meals - 52
- CARES - T III E Family Caregiver Support Program - 53
- ADRC - COVID-19 Administration - 56
- ADRC - COVID-19 - 55
- CRRSA Adult Protective Services - 58
- ARP - Administration - 66
- ARP - Title III B - 61
- ARP - Title III C1 - 62
- ARP - Title III C2 - 63
- ARP - Title III D - 64
- ARP - Title III E - 65
- Vaccine ADRC Covid-19 Supplement - 60
- VAC5 Covid-19 Vaccine - 59
- Expanding Public Health Workforce - 67

DOAS23AAA017
Sussex County
AAA Provider List

Please enter the Provider Names which will be served by this contract in the fields below.

AAA Sussex County

Sussex County Skylands Ride

Sussex County Division of Social Services

Catholic Family & Community Services

Legal Services of Northwest Jersey, Inc.

Rescare New Jersey d/b/a All Ways Caring Homecare

NORWESCAP Inc.

Sussex County

Application Summary

Will any member of the Board of Directors/Trustees receive any direct or indirect personal or monetary gain from the funding of this grant? () Yes (✓) No
Name of Member(s) (separate with commas):

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

Select Preferred Payment Plan: Advance Payment

Name of Grantee: Sussex County

Organization Address
Sussex County
One Spring Street
Newton, NJ 07860-2091
Phone: (973) 579-0250
Fax: (973) 579-0259

Email Address:

Federal Tax Identification Number: 226002477
Vendor Number: 226002477-99
Vendor Unit: SUSSEX CO TREASURER
ACH ELECTRONIC PAYMENT
Vendor Unit Address
COUNTY ADMIN BLDG
ONE SPRING STREET 1ST FLR
NEWTON, NJ 07860

Certificate of Need Project
() Pending
(✓) Not Required

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

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

Name of NJDHS Program Manager Regarding Application: Dennis McGowen

DOAS23AAA017
Sussex County
Application Summary

Type of Request

() New

(✓) Renewal of Grant #: DOAS23AAA017

() Amendment to Grant #:

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

From: 1/1/2023 Through: 12/31/2023

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

From: 1/1/2023 Through: 12/31/2023

DOAS23AAA017
Sussex County
Project Location

[] Please check this box if the project is statewide

Counties: Sussex County

Municipalities: Andover Borough
Andover Township
Branchville Borough
Byram Township
Frankford Township
Franklin Borough
Fredon Township
Green Township
Hamburg Borough
Hampton Township
Hardyston Township
Hopatcong Borough
Lafayette Township
Montague Township
Newton Town
Ogdensburg Borough
Sandyston Township
Sparta Township
Stanhope Borough
Stillwater Township
Sussex Borough
Vernon Township
Walpack Township
Wantage Township

Local Aid & Legislative Districts

Legislative Districts: 24

Local Aid Districts: District 1

Congressional Districts:

DOAS23AAA017
 Sussex County
AAA Advisory Council

Name	Affiliation	Gender
	Veteran, Volunteer, Elected Official, Person with Disability, Other Agency, etc.	
Ron Tappen	County Administrator, Ex-Officio	M
Christine Florio	Administrator, Dept.of Health & Human Servs Ex Off	F
Kaitlyn Hammerle	Senior Services Staff, Ex-Officio	F
Lorraine Hentz	Director, Senior Services, Ex-Officio	F
Joan Bruseo	Director, Social Services, Ex-Officio	F
Katarzyna Bohaterewicz-Brody	Long Term Care Marketing	F
Ann L. deJongh	Retired, Volunteer	F
Maureen Cianci	Nurse, Volunteer	F
Herman Terpstra	Veteran Advocate, Volunteer	M
Mary Monteiro-Azagra	Retired, Volunteer	F
David Smith	Elected Official, retired volunteer	M
Francesca McKernan	Housing Director, Volunteer	F
Denise A. Minimi	Volunteer, Community Member	F
Marianne Dilworth	Retired, Volunteer	F
Louis J. Avenatti	Retired, Volunteer	M
Louise Imperiale	Senior Housing Marketing	F
Brigitte Heffernan	Counselor, MSW, LCSW, Volunteer	F
Joan Shaw	Retired, Volunteer	F
Kelsey Anderson	Other Agency	F
Jill Space	Elected Official, Ex-Officio	F

DOAS23AAA017
Sussex County
AAA Advisory Council

Name	Ethnicity	Race
Ron Tappen	Not Hispanic or Latino	White (Alone)-Non-Hispanic
Christine Florio	Not Hispanic or Latino	White (Alone)-Non-Hispanic
Kaitlyn Hammerle	Not Hispanic or Latino	White (Alone)-Non-Hispanic
Lorraine Hentz	Not Hispanic or Latino	White (Alone)-Non-Hispanic
Joan Bruseo	Not Hispanic or Latino	White (Alone)-Non-Hispanic
Katarzyna Bohaterewicz-Brody	Not Hispanic or Latino	White (Alone)-Non-Hispanic
Ann L. deJongh	Not Hispanic or Latino	White (Alone)-Non-Hispanic
Maureen Cianci	Not Hispanic or Latino	White (Alone)-Non-Hispanic
Herman Terpstra	Not Hispanic or Latino	White (Alone)-Non-Hispanic
Mary Monteiro-Azagra	Not Hispanic or Latino	White (Alone)-Non-Hispanic
David Smith	Not Hispanic or Latino	White (Alone)-Non-Hispanic
Francesca McKernan	Not Hispanic or Latino	White (Alone)-Non-Hispanic
Denise A. Minimi	Not Hispanic or Latino	White (Alone)-Non-Hispanic
Marianne Dilworth	Not Hispanic or Latino	White (Alone)-Non-Hispanic
Louis J. Avenatti	Not Hispanic or Latino	White (Alone)-Non-Hispanic
Louise Imperiale	Not Hispanic or Latino	White (Alone)-Non-Hispanic
Brigitte Heffernan	Not Hispanic or Latino	White (Alone)-Non-Hispanic
Joan Shaw	Not Hispanic or Latino	White (Alone)-Non-Hispanic
Kelsey Anderson	Not Hispanic or Latino	White (Alone)-Non-Hispanic
Jill Space	Not Hispanic or Latino	White (Alone)-Non-Hispanic

DOAS23AAA017
Sussex County
AAA Advisory Council

Name	Age	Select ALL That Apply			
		General Public	Family Caregiver	Service Provider	Represents Business Community
Ron Tappen	Under 60	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Christine Florio	60 and over			<input checked="" type="checkbox"/>	
Kaitlyn Hammerle	Under 60			<input checked="" type="checkbox"/>	
Lorraine Hentz	Under 60		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Joan Bruseo	Under 60			<input checked="" type="checkbox"/>	
Katarzyna Bohaterewicz-Brody	Under 60	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Ann L. deJongh	60 and over	<input checked="" type="checkbox"/>			
Maureen Cianci	60 and over	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>
Herman Terpstra	60 and over	<input checked="" type="checkbox"/>			
Mary Monteiro-Azagra	60 and over	<input checked="" type="checkbox"/>			
David Smith	60 and over	<input checked="" type="checkbox"/>			
Francesca McKernan	Under 60	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>
Denise A. Minimi	60 and over	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Marianne Dilworth	60 and over	<input checked="" type="checkbox"/>			
Louis J. Avenatti	60 and over	<input checked="" type="checkbox"/>			
Louise Imperiale	Under 60	<input checked="" type="checkbox"/>			
Brigitte Heffernan	Under 60	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>
Joan Shaw	60 and over	<input checked="" type="checkbox"/>			
Kelsey Anderson	Under 60			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Jill Space	60 and over	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>

AAA Advisory Council Bylaws. Upload current version here

https://njsage.intelligrants.com/_Upload/2571732_1938788-AdvisoryCouncilBylaws.pdf

Sussex County

Advisory Council - Advocacy

Enter Description of AAA Activities Below:

The Sussex County Division of Senior Services advocates for those 60 years of age and older or those who are 21 and older with a disability in Sussex County, on an on-going basis by having representation on a variety of committees and attending numerous meetings to convey the needs and issues of seniors and the disabled. Committee memberships include the Human Services Advisory Council (HSAC), Professional Advisory Council for Alcohol and Drug Abuse (PACADA), Citizens Advisory Committee for Transportation (CAC) and United We Ride. Staff also attends the annual Transportation Public Hearing each year and incorporates the needs from the hearing into the planning process. Advisory Board members also attend the Citizens Advisory Committee for Transportation (CAC) and Human Services Advisory Council (HSAC). Advocacy extends to participation in additional human services groups including the Sussex County Council of Service Agencies (CSA), a networking group of human service providers and related organizations that meets monthly to discuss a variety of issues and to provide information to others, along with the United Way Caregiver Coalition. Advisory Council members participate in subcommittees for the United Way Caregiver Coalition and attend the various events and conferences sponsored by the Coalition.

The Division of Senior Services facilitates a Veterans Committee that plans the numerous annual veterans' events and promotes services to veterans. The Advisory Council supports the health care that benefits Veterans. Health promotion advocacy includes the Division's active membership in the Sussex County United Way Caregiver Coalition, along with the United Way Alliance Committee and the Sussex-Warren Regional Chronic Disease Coalition.

Enter Description of Advisory Council Activities Below:

The Advisory Council to the Sussex County Division of Senior Services accomplishes its mission through the work of various committees.

The Outreach Committee explores venues and methods for increasing awareness of services and programs available to Sussex County's older adults with a focus on the isolated, baby-boomers, disabled, veterans, minorities, and limited English speaking populations. Efforts to date include the Spanish translation of various brochures via printed materials. The Veterans' Advocate assists with advocating for veterans and apprising the committee of changes that impact veterans both young and old.

The Housing Committee explores options for affordable housing and advocates for those residing in senior subsidized housing. The Committee also keeps the Council apprised of pending legislation and funding issues that directly impacts affordable housing in Sussex County. Some Council members have reached out to local municipalities and housing facilities to inquire about any potential new housing.

Transportation Advocacy is an ongoing effort. The Council has members that serve as liaisons between the Sussex County Transportation Citizens Advisory Committee, the United We Ride Committee and the Senior Services Advisory Council ensuring that all groups are kept apprised of senior-related transportation issues and efforts to meet identified needs. Members from the Senior Services staff attend the various Transportation meetings and report back to the Council on a monthly basis. A new community contact from a local health care facility that provides transportation for its patients was introduced at a Council meeting by a Council member in 2018 and a representative from the facility is now a member of the Advisory Council. The information provided by the contact has been beneficial for both seniors and professionals that can utilize the service. The Council has assisted with the promotion and implementation of the Assisted Transportation Program which has been contracted to Skylands Ride as of January of 2019. The Legislative Committee continues to work with the Senior Club Presidents to empower seniors. They monitor legislation relative to senior issues, particularly in the areas of housing,

Sussex County

Advisory Council - Advocacy

health care, veterans and scams, along with developing a communication chain to keep seniors informed and notified when action such as letter writing, or call in campaigns are warranted. A presentation was made in early 2019 to the Council on Frauds and Scams, which has enlightened the committee along with increasing their advocacy and awareness in this area for themselves and seniors in the community. The Committee also advocates on local issues within the County that directly impacts seniors and their well-being. Several Council members have contacted legislatures, or other local officials when needed to support current bills that impact seniors, veterans and/or their caregivers.

Council members assist with the monitoring process for the Area Plan Sub-Grantees with the Division of Senior Services staff. The members provide insight and support at the monitoring, while learning more about the services provided. In turn, they promote the service or agency to the senior and business community.

The Advisory Council to the Division of Senior Services supports the Division's many collaborations within the County organization and other community agencies to ensure the most effective and efficient delivery of services for Sussex County citizens age 60+, their caregivers, and the disabled population.

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

The Sussex County Division of Senior Services and its Advisory Council advocate on an on-going basis for seniors age 60+, the disabled and their caregivers, acknowledge service needs and strive to ensure those needs are met by monitoring sub-contracted services for quality, effectiveness and compliance with all requirements. The Advisory Council supports other Division initiatives through active participation in planning and executing numerous special events such as Older Americans Day, Senior Olympics, Senior Day at the NJ State Fair, Senior Healthy Living Festival, Salute to Military Veterans Parade, Veterans' Picnic, caregiver programs, health promotion initiatives and public forums. Advisory Council members are usually present at attending or promoting the event. Representatives from the Advisory Council and staff from the Division of Senior Services attend regional statewide advisory meetings to advocate for the issues that impact the seniors in not only Sussex County but statewide.

Mission Statement and Executive Summary of the AAA**Include Mission Statement of the AAA:**

To empower older individuals, those 21 and older who are disabled, and/or their caregivers to choose from a coordinated system of services that enable them to live as independently as possible in their homes and in their communities while enjoying a dignified quality of life.

Include Executive Summary of the AAA:

The Sussex County Division of Senior Services functions as the Area Agency on Aging as mandated by the Older Americans Act, as amended. It is the lead agency to advocate for transportation, housing, legal services and other mandated services along with the coordination of aging services within the county and a resource for all seniors and caregivers of the elderly, regardless of financial status.

The Division is responsible for the distribution of federal, state, and county funds to provide services including but not limited to care management, in-home health services, chore services, legal services, congregate nutrition, home delivered meals, caregiver support programs, safe housing/residential maintenance, recreation/socialization for the congregate nutrition sites and transportation. The need for these services is derived from the needs assessments and public hearings that are conducted by the Division of Senior Services. The goal for implementing these programs is to maximize independence so that seniors can continue living within their homes and communities for as long as possible. The funding is designated for targeted populations of persons aged 60 and over, and their caregivers, which include minority, impoverished, frail and vulnerable seniors. All of the programs administered through the Older American's Act do not have income guidelines and a voluntary, suggested donation is requested for all the services that are provided. All programs have an age requirement of 60 or older and some programs have additional requirements.

In 2012, the Sussex County Division of Senior Services became the Aging and Disability Resource Connections (ADRC) for Sussex County residents. Senior Services is now open to individuals who are 21 and older who have a disability. The ADRC will provide consumers with improved access to community programs such as home delivered meals, personal care, housekeeping, specialized transportation, assisted living and nursing home care. Health promotion is a Senior Services' priority. Under the umbrella "Project Healthy Living," the Division sponsors several evidence-based programs to support active and healthy aging: HealthEASE educational programs, which include "Be Wise About Your Medications," "Serving Up Good Nutrition," and "Keeping Your Mind Sharp;" just to mention a few are provided to numerous groups throughout the year. ; "Take Control of Your Health" New Jersey's name for the Chronic Disease Self-management program; "Diabetes Self-management"; "Cancer: Thriving and Surviving", a self-management program for individuals with cancer; "A Matter of Balance: Managing Concerns about Falls," a volunteer coach-led program; "Project Healthy Bones," weight bearing exercise for those with or at risk for osteoporosis; and "MOVE Today," resistance band exercise program. Both exercise programs are volunteer-led. The Division also promotes the Stress Busting Program for Family Caregivers, and in 2018 the Division added "Walk with Ease", an evidence based walking program sponsored by the Arthritis Foundation. An annual Healthy Living Festival consists of free health screenings, informational exhibits and life enrichment opportunities for those age 50 plus and their caregivers.

The Division of Senior Services collaborates with other county divisions, community agencies and corporate supporters to provide interesting, educational and rewarding activities for seniors. Older Americans Day, which is typically held in May, offers a variety of educational programs, exhibits of products and services of senior interest. Senior Day at the Fair is always a success with entertainment, exhibitors, refreshments and the presentation of the Sussex County Senior of the Year award. Falls Prevention week is celebrated in September by providing an educational program to the community. In 2014, the Division of Senior Services

Sussex County

Mission Statement and Executive Summary of the AAA

incorporated the Healthy Living Festival with Falls Prevention Week. Skyland's Ride and the Division of Senior Services collaborates to provide transportation to special events and educational programs sponsored by the Division of Senior Services.

The Division of Senior Services funds a variety of caregiver support initiatives including outreach through community organizations; funding of a Caregiver Support group and providing Caregiver informational sessions with the Alzheimer's Association where participants and caregivers learn about dementia related issues and conditions, along with planning for future eventualities. In addition, the Division is part of the local United Way Caregivers Coalition, which shares information among providers and caregivers. The information and planning will allow individuals to remain independent and in the community as long as possible with a dignified quality of life.

There are many opportunities for senior volunteers to help other seniors. State Health Insurance Assistance Program (SHIP) volunteers assist people with their Medicare billing issues and Medicare Part D options. The success of the evidence based health promotion programs is dependent on volunteers who are trained to lead the classes at numerous locations throughout the County.

The Senior Services Advisory Council is instrumental in bringing senior issues to the forefront, reviewing proposals for services, monitoring service providers, addressing legislative issues, advocating for low-income senior housing, veterans issues and supporting Division of Senior Services initiatives in numerous capacities. The Division of Senior Services and the Advisory Council has provided several veterans outreach events throughout the last few years, as well as advocated with various veterans committees to help get a Veterans Clinic opened in Sussex County early in 2017.

In 2013, the Division of Senior Services expanded their ADRC function to include education, screening and options counseling for Medicaid services. The Division assists individuals who meet clinical and/or financial guidelines for long term services and supports (MLTSS) in accessing these services and gathering the required information needed for fiscal screening. This is to assist individuals in accessing these services as quickly as possible. The Division of Senior Services is always working to meet the challenges of seniors and their caregivers in Sussex County. All of the programs offered by and through the Division are open to all eligible individuals including members of the LGBT community, holocaust survivors and those with limited English proficiency. The Area Plan that follows is evidence of the Division of Senior Services' commitment to enhancing and expanding the services available to Sussex County seniors.

DOAS23AAA017
Sussex County
Public Hearing

		# Attendees						Survey of Needs			Outreach to Target Population			
Date/Time (##/##/#### ##:##:## AM/PM)	Location	Total #	Public	AAA Staff	Service Providers	Special Guests, i.e. Freeholders	Advisory Council	Agenda	Needs Assessment	Survey	Announcement method(s)	Public Hearing was conducted in these languages	Bilingual Services were Available	Transportation was Available upon request
6/2/2022	Knoll Heights Senior Center	32	19	3	7	0	3	[<input checked="" type="checkbox"/>]	[<input type="checkbox"/>]	[<input type="checkbox"/>]	The public Hearing was advertised in 3 newspapers, flyers, and posted on the county website.	English	No	Yes
		0						[<input type="checkbox"/>]	[<input type="checkbox"/>]	[<input type="checkbox"/>]				
		0						[<input type="checkbox"/>]	[<input type="checkbox"/>]	[<input type="checkbox"/>]				
		0						[<input type="checkbox"/>]	[<input type="checkbox"/>]	[<input type="checkbox"/>]				

Upload a Copy of the public newspaper advertisement	
Public Hearing #1 Doc 1:	https://njsage.intelligrants.com/_Upload/2821436_1993711-PublicHearing2022.pdf
Public Hearing #1 Doc 2:	https://njsage.intelligrants.com/_Upload/2821436_1993712-PublicHearingAds.pdf
Public Hearing #1 Doc 3:	
Public Hearing #2 Doc 1:	
Public Hearing #2 Doc 2:	
Public Hearing #2 Doc 3:	
Public Hearing #3 Doc 1:	
Public Hearing #3 Doc 2:	
Public Hearing #3 Doc 3:	
Public Hearing #4 Doc 1:	
Public Hearing #4 Doc 2:	
Public Hearing #4 Doc 3:	
Public Hearing #5 Doc 1:	
Public Hearing #5 Doc 2:	

Public Hearing #5 Doc 3:

Sussex County

Target Population - Targeting Goals

TARGET POPULATION		A	B	C	D	E	F	G (GOAL)	
		Enter census data for 2020				Estimate, based on average historical level of service			
		Actual # County Population 60+	Actual % County Population 60+	Actual # County Population 60+ with income Below Poverty	Actual % County Population 60+ with income Below Poverty	Estimated # County Population 60+ AAA will serve in the current Area Plan Contract Grant Year	Estimated % County Population 60+ AAA will serve in the current Area Plan Contract Grant Year	Estimated % County Population 60+ AAA will serve in the Next Area Plan Contract Grant Year	
ETHNICITY		31580				26993			
Hispanic or Latino		2285	7%			200	9%	%	
Non-Hispanic or Latino		29295	93%			26793	91%	%	
RACE OR ETHNICITY		31580				26993			
White (Alone) Non-Hispanic		28022	89%			26665	95%	%	
O A P S	White (Alone) - Hispanic	2285	7%			200	9%	%	
American Indian or Alaskan Native (Alone)		13	0%			2	15%	%	
Asian (Alone)		589	2%			35	6%	%	
Black (Alone) or African-American (Alone)		618	2%			85	14%	%	
Native Hawaiian or Other Pacific Islander		3	0%			1	33%	%	
Persons: 2 or more races		17	0%			5	29%	%	
Other Ethnic Group(s):		33	0%			0	0%	%	
TOTAL COUNTY POPULATION 60+		31580			0%	26993			

Target Population - Targeting Goals

	FUNCTIONAL ABILITY					2100		
STATE	Frail					950	15%	%
	Vulnerable					1150	15%	%

Sussex County

Priorities Update and Accomplishments

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

Each of the OAA/SUA priority types are addressed as instructed.

Priority Type:

Access & Outreach

Priority Description:

1. The Division promoted service delivery that maximized the consumer's independence and provided options regardless of funding source to enhance home & community based services through effective and appropriate use of the screen for community services. As of August 2021, the Division conducted 137 screens for community services. The plan for 2023 is to continue to provide this screening tool to older individuals, disabled persons and their caregivers who reside in Sussex County.
2. The Division developed working relationships with home & community based service agencies such as the Division of Social Services, Managed Care Organizations (Amerigroup, Horizon, & United Healthcare) Catholic Family & Community Services, VNA of Northern NJ, Rescare, Atlantic Homecare and others that serve the elderly and disabled population. The plan for the Division in 2023 is to facilitate four quarterly partnership meetings to continue to develop the working relationship.
3. The Division provides the services of Information & Assistance, SHIP & Screens for Community Services to individuals and agencies that serve persons with mental illness and developmental disabilities. The information about the services that the Division provides is disseminated to the community at Community/Town Celebration Days, Older Americans' Day Celebration, Senior Day at the Fair, Caregiver Expo, , Veterans' groups, and outreach at senior groups, churches, community agencies/groups, and the DSAC committee. This is expected to continue in 2023.
4. The Division will continue to use SAMS data to evaluate & improve the ADRC service delivery system through monthly report analysis.

Priority Type:

Nutrition Services

Priority Description:

1. Maintain an informational flyer which includes all the locations of the three (3) nutrition sites developed by the Division of Senior Services. This flyer is distributed at programs and community events throughout the year.
2. One health-related educational program will be provided at each Nutrition Site annually. The HealthEASE Program "Serving Up Good Nutrition" was not presented at all three (3) nutrition sites during the month of March to celebrate National Nutrition Month by the Division of Senior Services due to the sites still being closed due to the COVID-19 pandemic. The sites opened to indoor dining on October 1, 2022.
3. Educate the Senior Providers and other Health and Human Service providers regarding the Nutrition Program at least annually, and make information literature available to these organizations for distribution to clients and caregivers annually. Information on all programs, including the Nutrition Program is provided by Division of Senior Services staff at all meetings and events that are attended. These meetings include, but are not limited to the Senior Providers, Human Services Advisory Council, Professional Advisory Council on Alcohol and Drug Abuse (PACADA), Sussex County United Way Caregiver Coalition, along with other various meetings throughout Sussex County.

Sussex County

Priorities Update and Accomplishments

4. Nutrition Site calendars will provide evidence of health promotion, social and recreational activities. At least one program per week will be offered at each site. Staff from the Division of Senior Services provides (1) HealthEASE or other health promotion program at each of the nutrition sites annually. The Division of Senior Services continues to maintain the Congregate Nutrition Program through a grab and go meal service and through the shared services with the municipalities, various recreational and fitness programs are being offered. The sites opened to indoor dining on October 1, 2022.
5. Include a flyer about the Nutrition Program with educational materials distributed with Senior Farmers Market Nutrition Program vouchers. Nutritional information and details regarding the nutrition program was distributed to all eligible participants who received Farmers' Market vouchers. The Farmers Market Vouchers were distributed by Division of Senior Services staff at least three times at each of the three Nutrition Sites in Sussex County.

Priority Type:

Broad Array of Services

Priority Description:

1. Three health-related educational programs will be presented at senior clubs annually.
2. Annual Older Americans' Day will include at least one health-related educational program.
3. Offer at least 2 Tai Ji Quan courses at locations throughout the County annually.
4. Offer 4 peer-led MOB courses at locations throughout the County annually. 3 MOB classes were scheduled and will be held 4th quarter of 2021.
5. Offer at least four classes of peer-led "Take Control of Your Health" (TCOYH), the evidence based Cancer Thriving and Surviving, annually, at various locations throughout the County in 2022.
6. Evaluate each new program or service by monitoring the outcomes, client feedback and evaluations to improve and implement additional programming by September of each year. All class evaluations and surveys are summarized and analyzed for each program to incorporate the feedback and suggestions as opportunities for improvement and program enhancement. The feedback provided has been positive and provides beneficial insight for future planning and programs.
7. Include solicitation letter and envelope for voluntary, confidential client donations to all evidence-based programs. A solicitation letter and envelope is included in program packets for all health-promotion workshops.
8. To reduce social isolation offer two Project Healthy Bones and four Move Today programs at various locations in the County.
9. Increase assisted transportation trips and support caregivers by providing additional transportation.
10. Collaborate with Sussex County Skyland's Ride to provide transportation for all events sponsored by the Division of Senior Services. Sussex County Skyland's Ride provides transportation to all programs such as Older Americans' Day, the Annual Public Hearing, and Senior Day at the Fair, and the caregiver events. Sussex County Skylands Ride was also a key provider who assisted with additional transportation needs for seniors to the COVID-19 vaccine sites.
11. The Division of Senior Services has partnered with Sussex County Community College to provide educational classes on how to use various electronic equipment to increase senior's technological needs.
12. The Division of Senior Services social workers assist older adults in the County with completing housing applications and any other associated forms.

Sussex County

Priorities Update and Accomplishments

Priority Type:

Age Friendly

Priority Description:

1. Sussex County is currently not participating in any age friendly community programs.

Priority Type:

Emergency Preparedness

Priority Description:

1. Provide information and materials regarding emergency preparedness at events and programs, as well as the Division of Senior Services website. An "Emergency Preparedness for Seniors" booklet is posted on the Division website and Register Ready flyers are distributed with Division of Senior Services information at all events. The Sussex County website posts regular articles and information on emergency preparedness, along with providing links to websites that would be beneficial during an emergency. The County's social media outlets also posts related events/issues to the seniors and their caregivers of possible emergency events.
2. Include at least one emergency preparedness educational program at senior events annually. The Office of Public Health Nursing has been present at the virtual Presidents' Club Meetings, Senior Advisory Meetings and Veterans' Meetings to provided continued updates on the COVID-19 pandemic, and will continue to be represented in the future at this and other events. The Office of Emergency Management and the Office of Public Health was present at the annual Senior Day at the Fair.
3. The Division of Senior Services participated in the following safety trainings: active shooter training, Hazard Communications, Right to Know, Blood Borne Pathogen and Fire Extinguisher training.
4. The Access and Functional Needs liaison for the County of Sussex collaborates with the Division of Senior Services as needed.
5. The Division of Senior Services distributes information at all events and programs for Swift911 and Register Ready, along with maintaining the Division of Senior Services website with emergency information and alerts. Over 400 seniors of various senior clubs have been made aware of Swift911 and Register Ready during the focus groups presentations from late 2017 into early 2018. Assistance was provided if needed on how to register for the programs.
6. The Division of Senior Services has a current Continuing Operation Plan to utilize in the event of an emergency.
7. Emergency plans for the County of Sussex and all shelters are maintained by Sussex County OEM and the individual municipalities. Staff from the Division of Senior Services is on-call when emergency situations occur.
8. All contracted providers are required to have emergency plans in place and the requirement is outlined in their respective contracts. Contact is made to clients before, during and after the emergency situation.

Priorities Update and Accomplishments

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

Each of the OAA/SUA priority types are addressed as instructed.

Priority Type:

Empower Caregivers of All Kinds

Priority Description:

1. Coordinate and host an annual caregiver event to increase awareness of resources for home and community based services for seniors and support services for caregivers. The most recent event took place on October 20, 2022.
2. Include Alzheimer's Association and State Respite Program provider in annual county-wide events. The Alzheimer's Association did participate in the Caregiver Expo. The Division of Senior Services was unable to collaborate with the Alzheimer's Association and Newton Medical Center to provide a caregiver conference to the COVID-19 pandemic and staff related issues.
3. Outreach to approximately 45 caregivers at the Caregiver Expo. Marketing will take place to attract caregivers to the event that will be held in 2023.
4. Expose caregivers to at least 30 agencies/service providers at the Caregiver Expo. The event will be held in October of 2023.
5. Expand outreach to caregivers by making four presentations per year to various community and civic organizations such as Rotary/Kiwanis to make them aware of resources available through the Division of Senior Services. Presentations at local community and civic groups are expected to be scheduled throughout 2023.
6. Update Senior Services Resource Directory annually and posted on the County website in 2023.
7. Outreach to caregivers at community events such as health fairs and town celebration days at least four times annually. Division of Senior Services participated in five town events and two community events. Additional community events and several town days are expected to be scheduled throughout the spring, summer and fall of 2023. The Division of Senior Services also works with the United Way Caregiver Coalition.
8. Promote caregiver support groups facilitated by the Division of Senior Services. Two Caregiver Support Groups meet on a monthly basis and the participation has increased at each meeting. The Support Groups are promoted at all events sponsored and attended by the Division of Senior Services. Information on services and programs that are sponsored by the Division of Senior Services is distributed at each monthly meeting. The Support Groups continue to grow each month with increased participation.
9. Continue to offer the evidence based Stress Busting for Family Caregivers Program for caregivers caring for dementia patients. A minimum of two Stress Busting for Family Caregivers Program will be held annually.

Priority Type:

Ensure Rights, Prevent Abuse, Neglect and Exploitation

Priority Description:

1. Information regarding human services, elder abuse, neglect and exploitation was distributed at five town day events and 2 community events in 2022 with more events scheduled for 2023. Additional educational and community programs provided by the Division of Senior Services was also distributed. With all the events the potential number of clients/residents is well over 2,500.
2. An educational in-service on Elder Abuse was provided to the Area Plan Sub-Grantees in 2017 and 2018 and will be offered again in 2023.

Sussex County

Priorities Update and Accomplishments

3. Ongoing relationship and collaboration on cases exists with the Sussex County Division of Social Services and the Division of Senior Services with a clear delineation of roles and responsibilities of duties for cases. Regular meetings and in-services take place to facilitate the process.
4. The identification of elder abuse, neglect and exploitation is done through the Division of Social Services, through a contract as the provider for adult protective services. They have been trained and follow the guidelines as outlined by State standards.
5. Representatives from the Prosecutor's Office will attend monthly Senior Group Presidents' Club meetings and provide updates on current frauds and scams. Facilitate open lines of communication with seniors and the Prosecutor's Office to report and investigate possible scams.
6. the Prosecutor's Office participated in Older Americans Day and Senior Day at the Fair, providing educational material and brochures.
7. Distribute brochures from Legal Services in both English and Spanish at the Division of Senior Services office and at all programs and events sponsored by the Division of Senior Services.
8. Provide information about Legal Services and the services that they provide, especially representation for landlord/tenant issues for the 60+ population at all events and programs sponsored by the Division of Senior services.
9. Offer presentations of services provided by Legal Services at quarterly Sub-Grantee meetings during 2023.
10. Collaborate with Legal Services, the Division of Social Services and Supportive Services for Veterans to provide the best service delivery for those facing eviction or homelessness.

Priority Type:

Priority Description:

Priority Type:

Priority Description:

Priority Type:

Priority Description:

DOAS23AAA017
Sussex County
Assessment of Needs

A. The AAA used the following Methods to identify needs (check all that apply):

- I & R Data
- Client satisfaction surveys
- Client files/records
- Cost/benefit analysis
- AAA staff reports
- Survey of Service Providers
- Monitoring activity reports (directly provided and subcontracted)
- Interviews
- Caregiver Events
- Public forums
- Grievance Reports
- Waiting list information
- Focus groups
- Other, specify:
Needs Assessment that was conducted in 2022, along with information from the Human Services Needs Assessment, and the North Jersey Health Collaborative.

DOAS23AAA017
Sussex County
Assessment of Needs

B. The following persons provided input about community needs (check all that apply):

- Older person in poverty
- Minority older person in poverty
- Caregivers
- Older individuals at risk of institutional placement
- Older individuals with limited English proficiency
- Older individuals with severe disabilities
- Older Individuals with Alzheimer's disease and related disorders
- Caregivers of older individuals with Alzheimer's disease and related disorders
- Grandparents raising grandchildren
- Older individuals 60+
- Homebound
- Frail elders
- Service Recipients
- Advisory councils
- Other, specify:

Sussex County

Needs and Objectives of Projects

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

The needs and priorities for Sussex County have been determined through information and assistance data, client satisfaction survey, Needs Assessment Survey and a public hearing which were completed through the Division of Senior Services for the purpose of planning for the Area Plan Grant. The Needs Assessment Surveys were collected from March 1, 2021 through June 3, 2021. Due to the COVID-19 pandemic, the Division of Senior Services was unable to complete focus groups. The Annual Public Hearing held in June provide information on services and programs administered by the Division of Senior Services, along with generating several general questions regarding services to seniors and where assistance can be obtained.

1.) There is and continues to be a need for affordable housing for individuals 60 and over due to the cost of living, current economic conditions, high property taxes, and maintenance issues for older adults on fixed incomes and physical limitations. Information from the 2021 Needs Assessment and the Elder Economic Security Standard Index determined that it is more difficult for seniors, especially single seniors to own their homes or to live independently in their homes or apartments. Those that are able to live in subsidized housing have more opportunities to live more comfortably. Lack of affordable housing in Sussex County for seniors and all ages further impacts the housing issue in Sussex County.

2.) There is a need for adequate transportation to access health care, food, shopping, social services and other needs of older adults. Transportation is limited due to lack of evening and weekend transportation, along with the vast rural setting of Sussex County, even through limited Saturday transportation began in December 2012. The physical limitations of the older adults can contribute to the accessibility of acquiring adequate transportation to meet one's basic needs. Assisted transportation services are provided, but are limited due to availability of staff and funding. Information from the 2021 Needs Assessment Survey and information and assistance data from Sussex County determined that those that utilize public transportation sometimes have a problem obtaining adequate transportation for medical appointments, especially out of the County and shopping. There are many times transportation is not accessible for those that live in the outer lying areas especially the border towns of the County, and is limited, thus making it more difficult to access their basic needs. The cost to maintain a vehicle often times limits the senior's ability to have a car or to even use it as necessary, thus creating a greater need for public transportation services. Many seniors are not aware of the transportation options that are available within the County.

3.) There is a need for home maintenance and repairs for homeowners due to the home owner's physical inability, lack of skill or knowledge to perform the task, and/or their limited income. Limited funding for those services impacts the number of older adults that can be served and the type of repairs that can be completed by agencies that provide assistance for these types of programs. Information from the 2021 Sussex County Needs Assessment Survey and information and assistance data determined that seniors have more issues with home maintenance, which included snow shoveling and lawn mowing when compared to cleaning their home. Having the funds to pay for those services, or to find a reliable person to complete the job is another issue that impacts the seniors's ability to obtain these services, or to properly maintain their homes.

4.) There is a need for meal preparation and food shopping assistance. There are issues that impact older adults such as limited mobility and lack of adequate transportation. The nutritional needs of older adults who may be at risk due to financial limitations, physical and illnesses/conditions are not being met. Information from the 2021 Sussex County Needs Assessment Survey and data collected from information and assistance determined that some seniors did need assistance with activities of daily living. Meeting the daily nutritional requirements for seniors was identified as one issue. Most seniors feel that they are somewhat healthy eaters, but are not aware of the required dietary allowance that are recommended for consumption.

5.) There is a need for socialization and recreational activities at the Congregate Nutrition

Sussex County

Needs and Objectives of Projects

Sites and throughout Sussex County. Socialization and recreation is a key component at the Congregate Nutrition Sites and throughout Sussex County. Seniors on fixed and limited incomes often times do not even have enough money for housing/shelter and food, thus leaving little or no money for socialization and recreation activities. The average income for many seniors per the 2019 Elder Economic Index leaves very little funding for socialization activities, increasing the potential isolation of seniors.

6.) There is a need for health and wellness services. Providing and assisting older adults with education and programs on staying active, healthy and independent in their communities while enjoying a dignified quality of life will enhance one's life. It will also allow them to remain independent in the community for longer periods of time. Information from the 2021 Sussex County Needs Assessment Survey and information and assistance data determined that most seniors in Sussex County know where to turn for services and programs within Sussex County, which includes the Division of Senior Services and the health and wellness services that they provide.

7.) There is a need for caregiver support services. Caregivers who provide care for loved ones in their homes and communities are in need of support and assistance which allows the loved one to remain in the community and in their own home for as long as possible. Caregivers should have a coordinated system of resources and services available so that services can be easily accessible, some services would include home health aides, transportation services and medical assistance. Information from the 2021 Sussex County Needs Assessment Survey and information and assistance data determined that a small percentage of seniors live with a child or other person, which is the primary caregiver for them. Often, caregivers have been helping loved ones with a variety of assistance for daily living and have been doing so for at least five years or more, not realizing they are caregivers.

8.) There is a need for information and assistance services to educate and help older adults access entitlement programs such as prescription assistance, energy assistance and tax rebates. Assistance is needed with the completion of tax rebate applications, Medicare/Medicaid billing questions and making referrals to the appropriate agency for energy assistance and other programs to assist with living expenses. Lack of understanding on how to complete the necessary paperwork and poor vision contributes to the ability for older adults to access and utilize the benefit programs that are available. The need for this service was determined at the Division of Senior Services Annual Public Hearing. Many seniors are concerned with the changes that could impact Medicare and what the future holds.

9.) There is a need to increase public awareness and education about elder abuse, neglect and exploitation. Often, cases go unreported due to the lack of general understanding and the barriers that surround the response and investigation of the cases.

10.) The general public needs to be more aware of what to do in the event of an emergency, how to prepare for emergencies and what resources are available when an emergency situation occurs. Working closely with agencies that provide emergency response is critical to promoting emergency preparedness to seniors, their caregivers and the general public.

11.) The need to fully implement the Sussex County Division of Senior Services as an Aging and Disability Resource Connection (ADRC), while educating the community and providers on services. The entire process can be confusing and cumbersome for interested parties to understand and navigate.

Needs and Objectives of Projects

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

1. Educate seniors, disabled, baby-boomers and their caregivers on the importance of engaging in healthy lifestyle behaviors that support independence and promote self-management through outreach, education and increase capacity to deliver health and wellness programs and services available throughout Sussex County.
2. Implement and expand caregiver support programs in Sussex County for seniors, the disabled and grandparents caring for grandchildren.
3. Maintain and increase awareness for the Sussex County Division of Senior Services as the Aging and Disabilities Resource Connection (ADRC), while educating the community and agencies about the streamlined process.
4. Continue to incorporate the State Health Insurance Assistance Program (SHIP) counselors into the ADRC process.
5. Continue the utilization of the Social Assistance Management System (SAMS), ensuring comprehensive services for seniors, disabled and their caregivers, simplified data collection, and accurate reporting of statistics.
6. Maintain the Congregate Nutrition Program with the Division of Senior Services and increase participation at the three nutrition sites.
7. Maintain socialization and recreational activities at the Congregate Nutrition Sites and other locations for all of the seniors in Sussex County.
8. Maintain participation with the Home Delivered Meal Program based on the current levels of funding.
9. Maintain and increase transportation services, especially to caregivers.
10. Educate the public and increase public awareness about elder abuse, neglect and exploitation, while working to reduce the barriers to the prevention and investigation of and response to cases.
11. Continue to collaborate with local emergency personnel to promote emergency preparedness information to seniors their caregivers and the community.
12. Provide outreach to caregivers and educational information through the quarterly Sub-Grantee meetings, various community events, Senior Club Presidents' meetings and various senior clubs on current frauds and scams.
13. Receive and provide monthly updates from the Sussex County Prosecutor's Office at senior club meetings and to senior club presidents on current frauds and scams.
14. Maintain and increase awareness of the legal services provided in Sussex County, especially for landlord/tenant issues, homelessness and eviction.

Method(s) and Evaluation of Project

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

Access and Outreach

Objectives: Maintain and increase the Aging and Disabilities Resource Connection (ADRC) through the Sussex County Division of Senior Services.

1. Hold quarterly meetings with various providers to discuss system issues and apply problem solving strategies to complex cases.
2. Enter data in the SAMS System during, or directly following the client encounter. All data is tracked and is used to assist with the improvement of service delivery.
3. Distribute brochures about MLTSS to various senior club meetings when other presentations are conducted at the meetings.
4. Provide presentations about MLTSS at the annual caregiver expo.
5. Provide education about the services at Older Americans Day and the Sussex County Fair.
6. Provide educational literature about MLTSS to other social & health agencies in the community who provide other services for said population.
7. Screen client/caregiver for services via phone or office visit. During this process MLTSS, information and assistance and Options Counseling are completed.
8. Provide educational counseling on various health, social, & custodial services via phone or office visit.
9. Provide advocacy for frail and/or vulnerable clients.
10. Provide Navigation/Coordination Services to clients who need additional support.
11. Provide outreach and education regarding MLTSS at a variety of community and Division sponsored events.
12. All data is evaluated on a quarterly basis for Quality Assurance.

Broad Array of Services

Objectives: (1) Educate seniors, baby boomers and caregivers on the importance of engaging in healthy lifestyle behaviors that support independence, dignity and promote self-management through outreach, education and an increased capacity to deliver health and wellness programs along with available services throughout the county. (2) To increase awareness of services and expand transportation services to seniors, disabled, baby boomers and / or their caregivers. (3) Advocate and assist seniors, the disabled and their caregivers in Sussex County to meet their needs by providing information and support as needed.

1. Health related educational programs are presented annually at various senior clubs. This is completed by providing information on the types of programs at the monthly senior club presidents meeting, which are conducted by the Division and offers to do presentations to senior clubs at these meetings. The educational programs are promoted and information is provided at all community events and programs by Division staff for potential presentations at various clubs and organizations, along with media releases and social media outlets.
2. A health related educational program will be presented by a health professional at the annual Older American's Day which is sponsored by the Division to increase awareness and to promote the educational programs.
3. A variety of health screenings will be scheduled and offered at the Annual Senior Healthy Living Festival, which is held in September. This will be accomplished by recruiting returning health professionals and exploring options for new screenings from other new potential health professionals via events and programs that are attended throughout the year by Division of Senior Services staff.
4. Offer peer-led A Matter of Balance course at locations throughout the County. This will be accomplished through community contacts and the promotion of the evidence based programs at the various events and meetings throughout the year by Division of Senior Services staff. Courses will be scheduled by the Wellness Coordinator at accessible locations that can accommodate the peer leaders and participants.
5. Offer peer-led "Take Control of Your Health," the evidence based chronic disease

Method(s) and Evaluation of Project

self-management courses throughout the County. Courses will be scheduled by Division staff at accessible locations that can accommodate the peer leaders and participants.

6. Falls Prevention Awareness material will be forwarded to nutrition sites and senior housing facilities to increase awareness by the Division. An annual Falls Awareness event will be held in September at the Senior Healthy Living Festival.

7. Offer the peer-led Stress Busting Program for Family Caregivers of People with Dementia at various locations throughout the County. Program will be scheduled at accessible locations that can accommodate the peer leaders and the participants.

8. Offer peer-led "Diabetic Self-Management," the evidence based chronic disease self-management for those living with diabetes courses throughout the County. Courses will be scheduled by Division staff at accessible locations that can accommodate the peer leaders and participants.

9. Offer peer-led "Cancer Thriving and Surviving," the evidence based chronic disease self-management for those living with cancer and the effects of treatment courses throughout the County. Courses will be scheduled by Division staff at accessible locations that can accommodate the peer leaders and participants.

10. Offer peer-led "Walk with Ease," the evidence based self-directed program for those living with pain from arthritis throughout the County. Courses will be scheduled by Division staff at accessible locations that can accommodate the peer leaders and participants.

11. Program fidelity will be monitored and ensured by staff from the Division of Senior Services that are Master Trainers for all of the various Evidenced Based programs. Achieving the fidelity of the programs will ensure that seniors and their caregivers will learn the skills to become better self-managers of their illnesses and to learn the benefits of a healthier lifestyle.

12. All Evidenced Based programs are promoted through media releases, the Senior Times newsletter, County of Sussex newsletter and various social media outlets.

13. Skyland's Ride and the Division of Senior Services will monitor and review the number of nutrition site transportation requests by obtaining trip request reports from Skyland's Ride at least two times a year. The status of the number of requests will be analyzed and reported as to the reason for the increase or decrease in the number of trips.

14. The number of assisted transportation trips to provide support to caregivers will be accomplished by the sub-grantee through marketing material and promotion of the program at various events and meetings. The Division of Senior Services will make referrals as necessary to the sub-grantee.

15. Offer transportation services to seniors needing transportation that attend events and programs sponsored by the Division of Senior Services. This will be accomplished by providing information on all flyers and media releases that are distributed by the Division of Senior Services.

16. Provide information and brochures at all community events, presentations and programs provided by the Division of Senior Services for both transportation programs that are provided in Sussex County for those 60 and older. This will increase awareness of the programs for those 60 and older in need of transportation.

17. Provide information of the Saturday loop bus that is available at designed stops and routes for a limited time on Saturday's.

18. Provide information on the limited towns and municipalities that provide senior transportation in Sussex County for the residents that live in those towns.

19. Continue to explore the possibility of Uber and Lift rides in rural Sussex County, which is limited with the Sussex County Citizens Transportation Council and United We Ride.

20. Continue and maintain to the Social Assistance Management System (SAMS), ensuring comprehensive services for seniors, disabled and their caregivers, simplified data collection, and accurate reporting of statistics.

21. Continue to advocate for affordable housing options in Sussex County, not only for seniors, but also for the disabled.

22. Continue to expand services and programs to Veterans by conducting various events and

Method(s) and Evaluation of Project

informational programs at Veteran's related events and all Division of Senior Services events.
23. Continue to expand community education and outreach to serve the younger seniors through the collaboration with Sussex County Community College.

Nutrition

Objectives: Increase participation and awareness in the Congregate and Home Delivered Meal Programs, while promoting healthy eating.

1. An informational flyer that includes the three nutrition sites has been developed by the Division of Senior Services. Staff will distribute the flyer at all programs, presentations and community events that the Division of Senior Services attends or provides a presentation.

2. Division staff will provide at least one health related educational program to each nutrition site during 2019. The event will be scheduled by staff who will determine a date and topic with each site for the presentation. The presentation could include one of the HealthEASE topics if requested. The various health programs and the enlightening activities that take place at each of the congregate nutrition sites will continue to increase the participation at the sites.

3. Each congregate nutrition site will provide Open Houses to increase awareness and participation at each site, along with high lighting programs and activities provided at the sites.

4. Health and human service providers are educated and informed of the services and programs conducted through the staff from the Division by attendance at numerous meetings and presentations at the various meetings. These meetings include, but are not limited to the Council of Services Agency, HSAC, Professional Advisory Council on Alcohol and Drug Abuse, Sussex County United Way Caregiver Coalition, North Jersey Health Collaborative, as well as other various meeting throughout Sussex County.

5. Media releases are sent to all media outlets by the Division staff for all upcoming events and programs. The sub-grantee for the nutrition program submits media releases for the national "March for Meals" campaign that is held annually in March.

6. Nutritional information and details regarding the nutrition program is distributed to all eligible participants in the voucher packet to those that receive the Farmers Market's Vouchers. The Division of Senior Services will continue to increase the awareness of the Senior Farmers Market Program, Food Stamps and food pantries within the County to reduce food insecurity within Sussex County.

7. A Social Worker is at each site one time per month to provide Information & Assistance services.

Empower Caregivers of All Kinds

Objectives: Implement and expand caregiver support programs in Sussex County for all caregivers.

1. Coordinate and host an annual Caregiver Event to increase awareness of resources for home and community based services for seniors and support services for caregivers. This will be accomplished by recruiting exhibitors who have services and programs that are beneficial and provide support to all caregivers.

2. Collaborate with Alzheimer's Association and Statewide Respite Program by extending an invitation to events and programs sponsored by the Division of Senior Services. The Division of Senior Services will plan and conduct educational programs with the Alzheimer's Association and the United Way Caregiver Coalition during 2022. The program will include information on dealing with Alzheimer clients, as well as the stress associated with caring for an Alzheimer patient.

3. Marketing and media releases will be completed by the Division to reach approximately 100 caregivers at the Caregiver Event, while providing them with at least 15 informational exhibitors. Exhibitors will be recruited by the Division of Senior Services through the various contacts that they have secured. The marketing will outreach to all types of caregivers.

4. Outreach to all caregivers by making presentation to various employers, civic groups, community town days and community organizations throughout the County. This will be

Method(s) and Evaluation of Project

accomplished through community contacts obtained by the Division of Senior Services through meetings, events, presentations and programs that are conducted throughout the year. Outreach will include information on frauds and scams, along with collaboration from the Prosecutors Office and available services to all caregivers.

5. The Senior Services Resource Directory will be reviewed and updated by Division of Senior Services staff and posted on the Division of Senior Services web-site.
6. The Division of Senior Services will continue to provide a Caregiver Support Group on a monthly basis for all caregivers at two locations. A social worker from the Division of Senior Services will facilitate the monthly support groups. Staff from the Division of Senior Services will promote and market the support group at all sponsored events and programs.
7. Collaborate with the caregiver coalition and maintain an active presence on the United Way Caregiver Board.
8. Staff will participate in various educational programs, along with taking continuing educational courses which are required for their positions. In-services and information regarding programs will be provided to agencies and ADRC providers each year. Information at the ins-services will include issues and trend with the opioid epidemic.
9. The Division of Senior Services will collaborate with the Center for Prevention and Counseling on opioid use in the elderly by attending and providing educational programs and referring clients as needed.

Emergency Preparedness

Objectives: Collaborate with local emergency management personnel to promote emergency preparedness information to seniors, disabled, baby boomers and / or their caregivers. To increase awareness when an emergency situation occurs

1. The Division of Senior Services is part of the Sussex County Office of Emergency Management team and report directly to the AFN coordinator for Sussex County.
2. The Division of Senior Services provides information and materials regarding emergency preparedness at events and programs, as well as the Division of Senior Services web-site. This will be accomplished through a booklet on the Division of Senior Services web-site entitled "Emergency Preparedness for Seniors" and the distribution of Register Ready and Swift 911 flyers at all events and programs. Assistance is provided if needed to assist seniors to enroll in Register Ready or Swift 911.
3. Include Emergency Preparedness Education Program at senior events by incorporating exhibits from American Red Cross, County Emergency Management and the Department of Health and Human Services at the Older American's Day in May, Senior Day at the Fair and the Annual Healthy Living Festival. Informational programs may also be offered if warranted at other Division of Senior Services events if necessary.
4. Include Emergency Preparedness requirements in all sub-grantee contracts and review during the monitoring. Emergency notifications are sent to all providers, agencies, seniors and other distribution lists when a potential weather event or other situation is occurring or about to occur. The notification is also posted on the County of Sussex Website and various social media outlets. All agencies are in contact with clients before, during after an emergency situation to assess needs and provide assistance if necessary. Staff is available throughout the emergency via email, text or phone if needed.
5. The Division of Senior Services has an updated COOP (Continuing Operation Plan) to implement in the need of an emergency.
6. The Division of Senior Services is aware of all emergency shelters, cooling sites, etc and clients are referred to the shelters/centers when necessary, or assistance and transportation is coordinated and provided if necessary.

Ensure Rights, Prevent Abuse, Neglect and Exploitation

Objectives: (1) Increase the awareness of elder abuse, neglect and exploitation, while looking for warning signs, how to report and removing the barriers of reporting. (2) Expand legal service programs and services in Sussex County for those facing homelessness, eviction or

Method(s) and Evaluation of Project

defrauding from frauds and scams.

1. Provide an educational presentation at Older American's Day in May on adult maltreatment, the presentation will include warning signs and how to report adult maltreatment.
2. Provide printed information and public presentations on adult maltreatment at community events, town days and other events sponsored by the Division of Senior Services throughout the year.
3. Provide an informational session at a mandated Sub-Grantee meeting for all Area Plan Grantees on how to refer and criteria of referral for adult maltreatment.
4. Meet and collaborate with the Sussex County Division of Social Services to implement and develop methods to increase public awareness of adult maltreatment, along with types of cases responded to, service delivery and cross system collaboration. The collaboration will also work to remove the barriers associated with prevention, investigation and response.
5. The Division of Senior Services refers clients that are about to be homeless, or facing eviction to the Division of Social Services and Legal Services of Northwest Jersey the legal services provider. If the client is a veteran they are referred to the Supportive Services for Veterans Families for housing assistance.
6. Legal Services of Northwest Jersey assist clients that are 60 and older with Landlord/tenant issues up to and including legal representation in court if necessary.
7. The Sussex County Prosecutors Office provides awareness, education and investigation with frauds and scams. Representative from the Prosecutors Office attend the monthly Senior Club Presidents meetings and provide education at Older American's Day in May. They encourage seniors to email or call with any potential scams to increase awareness and to investigate the validity of the scam.

Method(s) and Evaluation of Project

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

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

Programs and services that are implemented and provided by the Division of Senior Services will be monitored and evaluated by a number of methods throughout the year:

1. All HealthEASE educational programs provided at senior clubs and through the socialization and recreation at the Congregate Nutrition sites will continue to be evaluated with the pre and post tests specifically for the programs, which are administered at each presentation. The results from the test will determine what each participant learned in the program, along with suggestions to improve the program or for future programming. The return rate for the pre and post test is about 80% for each program that is administered.
2. All events such as Older American's Day, Senior Healthy Living Festival and the Caregiver Event will continue to have evaluations that will be completed by participants and/or exhibitors who will critique the event and provide comments for areas of improvement and suggestions for future events. At the conclusion of each event Senior Services staff will critique the event for additional areas of improvement. Participants also provide their overall satisfaction or dissatisfaction of the program or the topics presented at the programs. The return rate for the evaluations and comments is about 75-80%.
3. All volunteers that participate in Peer Leader trainings will receive an evaluation to be completed at the conclusion of each training to critique the overall training and provide areas of improvement for future trainings. The return rate for the evaluations is about 95%.
4. Each sponsored Evidence-Based health promotion program that is administered by the Division of Senior Services will complete surveys at the final session of the program. The surveys that are received from each program will be reviewed, analyzed and forwarded to the appropriate sponsoring agency to compile the results to ensure the integrity and contribute to the results of the Evidence-Based programs. The return rate for the surveys is about 95%.
5. The Division of Senior Services will continue to complete client satisfaction surveys on 20% of clients that access information & assistance services through the Division of Senior Services. The surveys will be sent on a quarterly basis and the results from these surveys will be analyzed and reviewed for areas of improvement. The response rate for the surveys is about 10% when the surveys are mailed and about 100% if they are completed by phone.
6. Provide on-going review and support to sub-grantees through the annual programmatic and fiscal monitoring, which is completed by the Division of Senior Services. Sub-grantees that have outstanding recommendations will need to provide a corrective action plan to the Division of Senior Services regarding the plan to be taken and the timeframe to correct the issue.
7. Provide technical assistance, as needed to sub-grantees who contract with the Division of Senior Services to provide services in conjunction with the Older American's Act. This is completed through a request by the sub-grantee or at the time of monitoring or at the Quarterly Sub-Grantee meetings conducted by the Division of Senior Services.
8. Subgrantees are required to submit client satisfaction surveys at least once per year to the Division of Senior Services, as per contract requirements.
9. Continually update the Continuing Operations Plan for the Division to utilize when emergencies occur.
10. Include emergency/weather alerts on the Sussex County Web-site and other social media outlets when the need arises.
11. Provide assistance, support and knowledge to the Office of Emergency Management for Sussex County when emergencies are taking place.
12. Continue to collaborate with ADRC providers, such as the Statewide Respite Program, Alzheimer's Association, etc. on programs, supports groups and other services and receive feedback from evaluations from collaborative events/educational programs.
13. Receive feedback through evaluations from the Stress-Busting for Family Caregivers with Dementia Program and provide referrals to applicable agencies as needed.
14. Continually use data from SAMS to evaluate ADRC Programs and to improve the service delivery system, while enhancing the home and community based services.

Method(s) and Evaluation of Project

15. Receive feedback from seniors and caregivers about current frauds and scams that are occurring. Seniors and caregivers will reach out directly to the Prosecutors Office regarding current frauds and scams.
16. Have representatives from the Prosecutors Office at educational programs and events to provide updated information and to receive feedback regarding current frauds and scams.
17. Monitor the number of potential cases for Elder Abuse, Neglect and Exploitation that have been reported and the referral source.
18. Monitor the number of potential eviction cases and landlord/tenant cases that have been referred to the Division of Social Services and Legal Services of Northwest Jersey.

Sussex County

Title III B Assurances

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

Enter Total \$162,762

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

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

Service Category	2.A. Estimated actual Current Year-End Total Title III B Expenditures	2.B. Estimated % of actual Current Year-End Total Title III B Expenditures
Access	\$58,422	35.89% of Total Title III B funds
In-Home	\$17,220	10.58% of Total Title III B funds
Legal	\$30,912	18.99% of Total Title III B funds
Total:	\$106,554	

Notification of Fund Availability

[✓] Multiple-year contracts - did not carry out RFP/Bid process subsequent to submittal of the last contract year's approved APC.

AAA implemented an RFP/BID process subsequent to submittal of the Last Contract Year's approved APC. The completed chart below summarizes AAA's efforts to inform potential service providers that Older Americans Act & other APC funds were available subsequent to submittal of the Last Contract Year's approved APC:

Newspaper (Upload scanned copy of actual ad below)	Dates		# Providers and How RFP Package Obtained		
	Notice Published	Proposal Deadline	Total	Mail	In-Person AAA or County Office
			0		
			0		
			0		
			0		

Notification of Fund Availability

Newspaper (Upload scanned copy of actual ad below)	Technical Assistance Information Meeting				
	Provider Attendees				
	Date/Time (##/##/#### ##:##:## AM/PM)	Location	Total #	# New Providers	# Minority: If known

Notification of Fund Availability

<p>Newspaper (Upload scanned copy of actual ad below)</p>	<p>Proposal Submissions</p>				
	<p>Total #</p>	<p># New Providers</p>	<p># Minority: If known</p>	<p># New Minority: If known</p>	<p># Information Meeting Attendees</p>

Sussex County

Notification of Fund Availability

Add specific information about the public buildings and publications announcing availability of funds.

Public Building(s)	Date Notice Posted In Building	Notice Was Translated Into The Following Languages	Notice Was Posted In The Following Public Publication(s)

Describe additional efforts to engage new providers, particularly minority agencies.

Sussex County did not go out for bid in 2022 since we completed a 3 year bid process in 2021. The Sussex County AAA engages new providers through various networking and community meetings. This would include working with other advisory boards such as HSAC and Newton Medical Centers Community Outreach board. In addition we partner with the Sussex County Chamber of Commerce to bring information to our community.

Official AAA contract procedures. Upload current version here.

https://njsage.intelligrants.com/_Upload/2821388_1992872-2023SussexCountyContractingPolicy.doc

AAA's boilerplate/blank contract for next APC grant year. Upload here.

[https://njsage.intelligrants.com/_Upload/2821388_1992871-2023contactboilerplate\(1\).doc](https://njsage.intelligrants.com/_Upload/2821388_1992871-2023contactboilerplate(1).doc)

DOAS23AAA017
Sussex County
OAAPS Requirements

Profile of Community Focal Points and Seniors Centers

Question		Current Area Plan Contract grant year	Next Area Plan Contract grant year
		IF Current Area Plan Contract grant year COLUMN DIFFERS FROM Next Area Plan Contract grant year COLUMN, EXPLAIN BELOW***	
1.	Total number of Focal Points designated under OAA § 306 (a) (3) (A) (42 U.S.C.A. § 3026 (a) (3) (A)) in operation in the past year.	9	9
2.	Of the total number of Focal Points in number 1 above, provide the number that were senior centers.	4	4
3.	Total number of Senior Centers currently operating in your county.	6	6
4.	Total number of Senior Centers in number 3 above receiving funds pursuant to the Older Americans Act of 1965, as amended (42 U.S.C.A. §§ 3001 et seq., as amended).	3	3

1. Difference between Current Area Plan Contract grant year compared with Next Area Plan Contract grant year:

None

2. Difference between Current Area Plan Contract grant year compared with Next Area Plan Contract grant year:

None

3. Difference between Current Area Plan Contract grant year compared with Next Area Plan Contract grant year:

None

4. Difference between Current Area Plan Contract grant year compared with Next Area Plan Contract grant year:

None

Sussex County

OAPS Requirements - Staffing Profile

AAA Personnel Categories <i>(Include ALL AAA staff regardless of funding source)</i>	Total # FTEs ♦	Total # Minority FTEs ♦
1. Agency Executive/Management Staff	1.00	0.00
2. Other Paid Professional Staff <i>(By Functional Responsibility)</i>		
A. Planning	1.00	0.00
B. Development	0.50	0.00
C. Administration	1.00	0.00
D. Service Delivery	0.50	0.00
E. Access/Care Coordination	3.00	0.00
F. Other	0.00	0.00
3. Clerical/Support Staff	1.50	0.00
4. Volunteers	10.00	0.00
Total AAA Staff	18.50	0.00

AAA Staff - Count every individual on the AAAs organizational chart (paid and volunteer) who is the responsibility of the AAA Executive Director. Include volunteers and staff paid by any funding source including but not limited to Area Plan Contract funds, County Funds, SHIP funds, other foundation and grant funds, etc.

Personnel Categories: Corresponds to Organizational Chart

1. AAA Executive/Management Staff, i.e. AAA Executive Director, AAA assistant director(s)
2. Other Paid Professional Staff - AAA personnel who are considered professional staff who are not responsible for overall agency management or direction setting but carry out key responsibilities or tasks within the area agency by Functional Responsibility in the following areas:
 - A. Planning—Includes needs assessment, plan development, budgeting/resource analysis, service inventories, standards development and policy analysis.
 - B. Development—Includes public education, resource development, training and education, research and development and legislative activities.
 - C. Administration—Includes bidding, contract negotiation, reporting, reimbursement, accounting, auditing, monitoring and quality assurance.
 - D. Service Delivery—Includes those activities associated with the direct provision of a service which meets the needs of an individual older person and/or caregiver.
 - E. Access/Care Coordination—Include outreach, screening, assessment, case management and I&R.
 - F. Other
3. Clerical/Support Staff—All paid personnel who provide support to the management and professional staff.
4. Volunteer—An uncompensated individual who provides services or support on behalf of older individuals. Only staff working under the AAA, not the AAA contractors, shall be included.

Total AAA Staff: The total of all AAA paid and volunteer staff.

FTE ♦ = Full time equivalent

Integrated Program Summary: 019

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 019	
Program Name Administration		Provider Name AAA Sussex County	
Provider Address 1 Spring Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Newton	State New Jersey	Zip 07860	
Telephone 973-579-0555		Director Lorraine Hentz	
Fax 973-579-0550	Focal Point <input checked="" type="checkbox"/> ADRC Partner ADRC		
Email seniorservices@sussex.nj.us	Focal Point <input checked="" type="checkbox"/> FP		
Provider Federal Tax ID Number 226002477 (#####)		[] Check here if not a Focal Point	
Provider DUNS Number 08-060-9969 (##-###-####)			
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS: 1			

Integrated Program Summary: 019Budget by Line Item

Name of Allocated Fund and Code: Title III - Administration - 01

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

Line Item	Cash	In-Kind	Total
Personnel	\$303,223	\$0	\$303,223
Consultant & Contract			\$0
Travel	\$500		\$500
Food			\$0
Building Space			\$0
Print & Office Supplies	\$2,941		\$2,941
Equipment	\$250		\$250
Other	\$25,149		\$25,149
Indirect Cost		\$283,263	\$283,263
Total Budgeted Cost	\$332,063	\$283,263	\$615,326

Budget by Funding Source

Name Of Allocated Fund	Title III - Administration - 01	\$21,613
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	\$593,713
	Local Private	
	NSIP	
Income:	Other	
	Participant	
Total:		\$615,326

Integrated Program Summary: 020

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 020	
Program Name Information & Assistance		Provider Name AAA Sussex County	
Provider Address 1 Spring Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Newton	State New Jersey	Zip 07860	
Telephone 973-579-0555		Director Lorraine Hentz	
Fax 973-579-0550	Focal Point <input checked="" type="checkbox"/> ADRC Partner		Type Initials ADRC
Email	Focal Point <input checked="" type="checkbox"/> Focal Point		FP
Provider Federal Tax ID Number 226002477 (#####)		[] Check here if not a Focal Point	
Provider DUNS Number 08-060-9969 (##-###-####)			
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS: 1			

Integrated Program Summary: 020Budget by Line Item

Name of Allocated Fund and Code:

Title III B - Supportive Services - 02

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

Line Item	Cash	In-Kind	Total
Personnel	\$114,142	\$0	\$114,142
Consultant & Contract			\$0
Travel			\$0
Food			\$0
Building Space			\$0
Print & Office Supplies			\$0
Equipment			\$0
Other			\$0
Indirect Cost			\$0
Total Budgeted Cost	\$114,142	\$0	\$114,142

Integrated Program Summary: 020Budget by Funding Source

Name Of Allocated Fund	Title III B - Supportive Services - 02	
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	\$114,142
	Local Private	
	NSIP	
Income:	Other	
	Participant	\$0
Total:		\$114,142

Integrated Program Summary: 022

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 022	
Program Name Socialization Recreation		Provider Name AAA Sussex County	
Provider Address One Spring Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Newton	State New Jersey	Zip 07860	
Telephone 973-579-0555		Director Lorraine Hentz	
Fax 973-579-0550	Focal Point Type Initials		
Email	[<input checked="" type="checkbox"/>] ADRC Partner ADRC		
	[<input checked="" type="checkbox"/>] Focal Point FP		
[] Check here if not a Focal Point			
Provider Federal Tax ID Number 226002477 (#####)			
Provider DUNS Number 08-060-9969 (##-###-####)			
Is this Program held at additional sites? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS: 3			

Integrated Program Summary: 022Budget by Line Item

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

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

Line Item	Cash	In-Kind	Total
Personnel	\$0	\$0	\$0
Consultant & Contract			\$0
Travel			\$0
Food	\$2,000		\$2,000
Building Space			\$0
Print & Office Supplies	\$645		\$645
Equipment			\$0
Other	\$3,505		\$3,505
Indirect Cost			\$0
Total Budgeted Cost	\$6,150	\$0	\$6,150

Integrated Program Summary: 022Budget by Funding Source

Name Of Allocated Fund	Title III B - Supportive Services - 02	
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	\$6,145
	Local Private	
	NSIP	
Income:	Other	
	Participant	\$5
Total:		\$6,150

Integrated Program Summary: 051

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 051	
Program Name Senior Transportation		Provider Name Sussex County Skylands Ride	
Provider Address 83 Spring Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Newton	State New Jersey	Zip 07860	
Telephone 973-383-3600		Director Christine Florio	
Fax 973-383-3627	Focal Point Type Initials		
Email	[<input checked="" type="checkbox"/>] ADRC Partner ADRC		
	[] Focal Point FP		
Provider Federal Tax ID Number 226002477 (#####)		[] Check here if not a Focal Point	
Provider DUNS Number 08-060-9969 (##-###-####)			
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS: 1			

Integrated Program Summary: 051Budget by Line Item

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

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

Line Item	Cash	In-Kind	Total
Personnel	\$0	\$0	\$0
Consultant & Contract	\$60,477		\$60,477
Travel			\$0
Food			\$0
Building Space			\$0
Print & Office Supplies			\$0
Equipment			\$0
Other			\$0
Indirect Cost			\$0
Total Budgeted Cost	\$60,477	\$0	\$60,477

Integrated Program Summary: 051Budget by Funding Source

Name Of Allocated Fund	Title III B - Supportive Services - 02	\$29,211
Additional Funds:	State Match	
	Supplemental Funds	\$29,766
	Local Public	
	Local Private	
	NSIP	
Income:	Other	
	Participant	\$1,500
Total:		\$60,477

Integrated Program Summary: 052

[] Approved by GMO or DHS Admin

() New () Revised (✓) Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 052	
Program Name Assisted Transportation		Provider Name Sussex County Skylands Ride	
Provider Address One Spring Street		Minority Provider () Yes (✓) No	
		Non-Profit Provider () Yes (✓) No	
		Proprietary Provider () Yes (✓) No	
City Newton	State New Jersey	Zip 07860	
Telephone 973-579-0480		Director Christine Florio	
Fax	Focal Point		Type Initials
Email cflorio@sussex.nj.us	[] ADRC Partner		ADRC
	[] Focal Point		FP
Provider Federal Tax ID Number 226002477 (#####)		[✓] Check here if not a Focal Point	
Provider DUNS Number 08-060-9969 (##-###-####)			
Is this Program held at additional sites? () Yes (✓) No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 052Budget by Line Item

Name of Allocated Fund and Code:

Title III B - Supportive Services - 02

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

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

Integrated Program Summary: 052Budget by Funding Source

Name Of Allocated Fund	Title III B - Supportive Services - 02	
Additional Funds:	State Match	
	Supplemental Funds	\$0
	Local Public	
	Local Private	
	NSIP	
Income:	Other	
	Participant	
Total:		\$0

Integrated Program Summary: 055

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 055	
Program Name Senior Legal Services		Provider Name Legal Services of Northwest Jersey, Inc.	
Provider Address 90 East Main Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Somerville	State New Jersey	Zip 08876	
Telephone 973-383-7400		Director Michael L. Wojcik	
Fax 973-383-3469	Focal Point <input type="checkbox"/> ADRC Partner ADRC		
Email	Focal Point <input type="checkbox"/> FP		
Provider Federal Tax ID Number 222092489 (#####)		[<input checked="" type="checkbox"/>] Check here if not a Focal Point	
Provider DUNS Number 16-607-5473 (##-###-####)			
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 055Budget by Line Item

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

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

Line Item	Cash	In-Kind	Total
Personnel	\$0	\$0	\$0
Consultant & Contract	\$33,430		\$33,430
Travel			\$0
Food			\$0
Building Space			\$0
Print & Office Supplies			\$0
Equipment			\$0
Other			\$0
Indirect Cost			\$0
Total Budgeted Cost	\$33,430	\$0	\$33,430

Integrated Program Summary: 055Budget by Funding Source

Name Of Allocated Fund	Title III B - Supportive Services - 02	\$15,456
Additional Funds:	State Match	
	Supplemental Funds	\$7,935
	Local Public	
	Local Private	\$10,034
	NSIP	
Income:	Other	
	Participant	\$5
Total:		\$33,430

Integrated Program Summary: 072

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 072	
Program Name Care Management		Provider Name Sussex County Division of Social Services	
Provider Address 83 Spring Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Newton	State New Jersey	Zip 07860	
Telephone 973-383-3600		Director Joan Bruseo	
Fax 973-383-3627	Focal Point <input checked="" type="checkbox"/> ADRC Partner ADRC		
Email	Focal Point <input checked="" type="checkbox"/> FP		
	[] Check here if not a Focal Point		
Provider Federal Tax ID Number 226002477 (#####)			
Provider DUNS Number 08-060-9969 (##-###-####)			
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 072Budget by Line Item

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

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

Line Item	Cash	In-Kind	Total
Personnel	\$0	\$0	\$0
Consultant & Contract	\$12,324		\$12,324
Travel			\$0
Food			\$0
Building Space			\$0
Print & Office Supplies			\$0
Equipment			\$0
Other			\$0
Indirect Cost			\$0
Total Budgeted Cost	\$12,324	\$0	\$12,324

Integrated Program Summary: 072Budget by Funding Source

Name Of Allocated Fund	Title III B - Supportive Services - 02	\$12,319
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	
	Local Private	
	NSIP	
Income:	Other	
	Participant	\$5
Total:		\$12,324

Integrated Program Summary: 086

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 086	
Program Name Certified Home Health Aide		Provider Name Rescare New Jersey d/b/a All Ways Caring Homecare	
Provider Address 171 Woodport Road		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Proprietary Provider <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
City Sparta	State New Jersey	Zip 07871	
Telephone 973-579-9333		Director Tracy Smeltz	
Fax 973-579-3303		Focal Point	Type Initials
Email		<input type="checkbox"/> ADRC Partner	ADRC
		<input type="checkbox"/> Focal Point	FP
		<input checked="" type="checkbox"/> Check here if not a Focal Point	
Provider Federal Tax ID Number 611312327 (#####)			
Provider DUNS Number 02-696-8905 (##-###-####)			
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 086Budget by Line Item

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

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

Line Item	Cash	In-Kind	Total
Personnel	\$0	\$0	\$0
Consultant & Contract	\$18,626		\$18,626
Travel			\$0
Food			\$0
Building Space			\$0
Print & Office Supplies			\$0
Equipment			\$0
Other			\$0
Indirect Cost			\$0
Total Budgeted Cost	\$18,626	\$0	\$18,626

Budget by Funding Source

Name Of Allocated Fund	Title III B - Supportive Services - 02	\$8,610
Additional Funds:	State Match	
	Supplemental Funds	\$6,356
	Local Public	
	Local Private	\$3,655
	NSIP	
Income:	Other	
	Participant	\$5
Total:		\$18,626

Integrated Program Summary: 025

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 025	
Program Name Congregate Nutrition		Provider Name AAA Sussex County	
Provider Address 1 Spring Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Newton	State New Jersey	Zip 07860	
Telephone 973-579-0555		Director Lorraine Hentz	
Fax 973-579-0550	Focal Point Type Initials		
Email	[<input checked="" type="checkbox"/>] ADRC Partner ADRC		
	[<input checked="" type="checkbox"/>] Focal Point FP		
[] Check here if not a Focal Point			
Provider Federal Tax ID Number 226002477 (#####)			
Provider DUNS Number 08-060-9969 (##-###-####)			
Is this Program held at additional sites? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS: 4			

Integrated Program Summary: 025Budget by Line Item

Name of Allocated Fund and Code: Title III C 1 - Congregate Nutrition - 03

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

Line Item	Cash	In-Kind	Total
Personnel	\$33,138	\$0	\$33,138
Consultant & Contract			\$0
Travel			\$0
Food	\$80,783		\$80,783
Building Space	\$79,980		\$79,980
Print & Office Supplies			\$0
Equipment			\$0
Other			\$0
Indirect Cost			\$0
Total Budgeted Cost	\$193,901	\$0	\$193,901

Integrated Program Summary: 025Budget by Funding Source

Name Of Allocated Fund	Title III C 1 - Congregate Nutrition - 03	\$70,112
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	\$95,728
	Local Private	
	NSIP	\$4,061
Income:	Other	
	Participant	\$24,000
Total:		\$193,901

Integrated Program Summary: 020

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 020	
Program Name Congregate Nutrition- Grab and Go Meals		Provider Name AAA Sussex County	
Provider Address 1 Spring Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Newton	State New Jersey	Zip 07860	
Telephone 9735790555		Director Lorraine Hentz	
Fax 9735790550	Focal Point <input checked="" type="checkbox"/> ADRC Partner		Type Initials ADRC
Email	Focal Point <input checked="" type="checkbox"/> Focal Point		FP
Provider Federal Tax ID Number 226002477 (#####)		[] Check here if not a Focal Point	
Provider DUNS Number 08-060-9969 (##-###-####)			
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 020Budget by Line Item

Name of Allocated Fund and Code: Title III C 2 - Home Delivered Meals - 04

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

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

Budget by Funding Source

Name Of Allocated Fund	Title III C 2 - Home Delivered Meals - 04	
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	
	Local Private	
	NSIP	
Income:	Other	
	Participant	
Total:		\$0

Integrated Program Summary: 022

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 022	
Program Name Home Delivered Meals-Weekday		Provider Name Catholic Family & Community Services	
Provider Address 24 Degrasse Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Paterson	State New Jersey	Zip 07505	
Telephone 973-279-7100		Director Scott Milliken	
Fax 973-523-1150	Focal Point		Type Initials
Email	[] ADRC Partner		ADRC
	[] Focal Point		FP
		[<input checked="" type="checkbox"/>] Check here if not a Focal Point	
Provider Federal Tax ID Number 221487121 (#####)			
Provider DUNS Number 03-994-3071 (##-###-####)			
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 022Budget by Line Item

Name of Allocated Fund and Code: Title III C 2 - Home Delivered Meals - 04

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

Line Item	Cash	In-Kind	Total
Personnel	\$0	\$0	\$0
Consultant & Contract	\$140,149		\$140,149
Travel			\$0
Food	\$78,114		\$78,114
Building Space			\$0
Print & Office Supplies			\$0
Equipment			\$0
Other			\$0
Indirect Cost			\$0
Total Budgeted Cost	\$218,263	\$0	\$218,263

Integrated Program Summary: 022Budget by Funding Source

Name Of Allocated Fund	Title III C 2 - Home Delivered Meals - 04	\$42,616
Additional Funds:	State Match	\$10,763
	Supplemental Funds	\$7,128
	Local Public	\$59,954
	Local Private	\$48,740
	NSIP	\$4,062
Income:	Other	
	Participant	\$45,000
Total:		\$218,263

Integrated Program Summary: 080

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 080	
Program Name Education		Provider Name AAA Sussex County	
Provider Address 1 Spring Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Newton	State New Jersey	Zip 07860	
Telephone 973-579-0555		Director Lorraine Hentz	
Fax 973-579-0550	Focal Point <input checked="" type="checkbox"/> ADRC Partner ADRC		
Email seniorservices@sussex.nj.us	Focal Point <input checked="" type="checkbox"/> FP		
Provider Federal Tax ID Number 226002477 (#####)		[] Check here if not a Focal Point	
Provider DUNS Number 08-060-9969 (##-###-####)			
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS: 8			

Integrated Program Summary: 080Budget by Line Item

Name of Allocated Fund and Code:

Title III D - Health Promotion - 10

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

Line Item	Cash	In-Kind	Total
Personnel	\$0	\$0	\$0
Consultant & Contract	\$6,003		\$6,003
Travel			\$0
Food			\$0
Building Space			\$0
Print & Office Supplies			\$0
Equipment			\$0
Other			\$0
Indirect Cost			\$0
Total Budgeted Cost	\$6,003	\$0	\$6,003

Budget by Funding Source

Name Of Allocated Fund	Title III D - Health Promotion - 10	\$5,998
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	
	Local Private	
	NSIP	
Income:	Other	
	Participant	\$5
Total:		\$6,003

DOAS23AAA017
Sussex County
Title III D Funding Request

New Jersey Department of Human Services/Division of Aging Services/Office of Area Agency on Aging Administration

Information Form For Substantiating Evidence-Based Health Promotion Program

Excerpt of Policy Memorandum number 2015-10; I-10 effective 10/1/2016: In accordance with the federal law evidence-based requirement, beginning October 1, 2016, Area Plan Contract 2016 Title IIID funds shall be expended on evidence-based health promotion programs that meet the Administration on Aging's Title IIID criteria. Written DoAS approval is required each year (or with change in circumstances) prior to program implementation. AAAs shall not expend title III D funds or implement a program denied by DoAS. AAAs shall retain documentation of the evidence supporting their approved Title IIID health promotion program(s).

Area Agency on Aging	Sussex County				
Date Submitted in SAGE	11/9/2020	Area Plan Contract (APC) Period	1/1/2021	to	12/31/2021
Anticipated Contract Dates	1/1/2021	to	12/31/2021	Estimated Date of Program Implementation	1/1/2021

Evidence-Based Health Promotion Program Details

Evidence-Based Health Promotion Program Name: Cancer Thriving & Surviving-CDSMP

Identifiable program name not service, service component, or practice.

Program Goals: (i.e. Reduce falls, promote balance and strength, and increase knowledge of environmental factors.)
The Cancer Thriving and Surviving Program is a workshop for people that teaches survivors the skills needed to make treatment decisions, effective communication, proper nutrition and setting priorities in order to maintain and/or increase life's activities. Cancer

Title III D Funding Request

Thriving and Surviving is a peer-led chronic disease self-management program that is goal oriented and includes a manual on "Living A Healthy Life with Chronic Conditions." The program consists of six, 2 ½ hour sessions.

Target Population:

(i.e. Ambulatory Adults 60+, concerned about falling, interested in improving flexibility, balance and strength.)

People that have survived cancer and have completed treatment.

Title III D Funding Request**Authority:**

The operating division of the U.S. Department of Health and Human Services (HHS) already considering the program as evidence-based. Program is listed in their registry.

URL: www.stanford.edu

If proposed evidence-based health promotion plan is not listed in an HHS registry as evidence-based, program must satisfy all 5 components for the federal title III D funding definition (as of 10/1/16). Complete all questions below and remainder of the form.

[] Demonstrated through evaluation to be effective for improving the health and wellbeing or reducing disease, disability, and/or injury among older adults; **and**

Insert the name of a recent article and hyperlink to the article substantiating the proposed program satisfies the 5 criteria to the left:

[] Proven effective with the older adult population, using Experimental or Quasi-Experimental Design, **and**

Article Name:

Article Link

[] Research results published in a peer-review journal; **and**

Insert the name of a recent article and hyperlink to the pre- & post- test evaluation reports:

[] Fully translated in one or more community site(s); **and**

Evaluation Reports

Link

[] Includes developed dissemination products that are available to the public.

Pre-Test Evaluation Report

Post-Test Evaluation Report

DOAS23AAA017
Sussex County
Title III D Funding Request

Evidence-Based Program/Implementation Details

Service Code and Service Taxonomy Name: [] 326 - Physical Health [] 328 - Mental Health
Evidence-Based Program Meets Components and Standards of [] 330 - Physical Activity [✓] 331 - Education
the service taxonomy selected.

Service Levels: *In APC Contract year*
Number of Unduplicated Clients to be served in APC contract # Unduplicated clients 333
year
Number of Service Units to be provided for APC contract # Service Units 333
year

Title III Funding: *In APC Contract year*
Total amount of Title III D funds allocated: \$12,626
Total service budget (funds from all sources): \$2,104

Program Facilitator/Leader: [✓] Leader(s) current/valid certification/licensing on file at AAA.

Program Materials: [✓] Leader Implementation Manual on file at AAA.
[✓] Program dissemination products/participant materials on file and
attached here:
https://njsage.intelligrants.com/_Upload/1865329_1551413-CTS_Leader_Manual_10-2014.pdf

Service Provider

Service Provider (*Official "Legal" Name*) Sussex County Division of
Senior Services

Provider Address One Spring Street

City: Newton **State:** New Jersey **Zip Code:** 07860

DOAS23AAA017
Sussex County
Title III D Funding Request

Check all that apply:

AAA (Direct Service) Governmental Proprietary Non-Profit New Provider (*First Time Contract with AAA*)

Director Name: Lorraine Hentz **Director Title:** Director

Telephone: 973-579-0555 **Fax:** 973-579-0550 **Email:** lhentz@sussex.nj.us

Program Sites: Various locations and sites throughout Sussex County

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

DOAS23AAA017
Sussex County
Title III D Funding Request

New Jersey Department of Human Services/Division of Aging Services/Office of Area Agency on Aging Administration

Information Form For Substantiating Evidence-Based Health Promotion Program

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Area Agency on Aging	Sussex County				
Date Submitted in SAGE	11/2/2021	Area Plan Contract (APC) Period	1/1/2022	to	12/31/2022
Anticipated Contract Dates	1/1/2022	to	12/31/2022	Estimated Date of Program Implementation	1/1/2022

Evidence-Based Health Promotion Program Details

Evidence-Based Health Promotion Program Name: Matter of Balance

Identifiable program name not service, service component, or practice.

Program Goals: (i.e. Reduce falls, promote balance and strength, and increase knowledge of environmental factors.)
Reduce fear of falling, promote balance, strength and flexibility, awareness to environmental factors in the home and community.

Target Population: (i.e. Ambulatory Adults 60+, concerned about falling, interested in improving flexibility, balance and strength.)
60+ and caregivers, those concerned about falling and improving quality of life.

DOAS23AAA017
Sussex County
Title III D Funding Request

Authority:

The operating division of the U.S. Department of Health and Human Services (HHS) already considering the program as evidence-based. Program is listed in their registry.

URL: www.mainehealth.org

If proposed evidence-based health promotion plan is not listed in an HHS registry as evidence-based, program must satisfy all 5 components for the federal title III D funding definition (as of 10/1/16). Complete all questions below and remainder of the form.

[] Demonstrated through evaluation to be effective for improving the health and wellbeing or reducing disease, disability, and/or injury among older adults; **and**

Insert the name of a recent article and hyperlink to the article substantiating the proposed program satisfies the 5 criteria to the left:

[] Proven effective with the older adult population, using Experimental or Quasi-Experimental Design, **and**

Article Name:

Article Link

[] Research results published in a peer-review journal; **and**

Insert the name of a recent article and hyperlink to the pre- & post- test evaluation reports:

[] Fully translated in one or more community site(s); **and**

Evaluation Reports

Link

[] Includes developed dissemination products that are available to the public.

Pre-Test Evaluation Report

Post-Test Evaluation Report

DOAS23AAA017
Sussex County
Title III D Funding Request

Evidence-Based Program/Implementation Details

Service Code and Service Taxonomy Name: [] 326 - Physical Health [] 328 - Mental Health
Evidence-Based Program Meets Components and Standards of [] 330 - Physical Activity [✓] 331 - Education
the service taxonomy selected.

Service Levels: *In APC Contract year*
Number of Unduplicated Clients to be served in APC contract # Unduplicated clients 333
year
Number of Service Units to be provided for APC contract # Service Units 333
year

Title III Funding: *In APC Contract year*
Total amount of Title III D funds allocated: \$12,626
Total service budget (funds from all sources): \$2,104

Program Facilitator/Leader: [✓] Leader(s) current/valid certification/licensing on file at AAA.

Program Materials: [✓] Leader Implementation Manual on file at AAA.
[✓] Program dissemination products/participant materials on file and
attached here:
https://njsage.intelligrants.com/_Upload/1865330_1551413-MOBClassFlyer-Participant.doc

Service Provider

Service Provider (*Official "Legal" Name*) Sussex County Division of
Senior Services

Provider Address One Spring Street

City: Newton **State:** New Jersey **Zip Code:** 07860

DOAS23AAA017
Sussex County
Title III D Funding Request

Check all that apply:

AAA (Direct Service) Governmental Proprietary Non-Profit New Provider (*First Time Contract with AAA*)

Director Name: Lorraine Hentz **Director Title:** Director

Telephone: 973-579-0555 **Fax:** 973-579-0550 **Email:** seniorservices@sussex.nj.us

Program Sites: Various locations and sites throughout Sussex County.

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

DOAS23AAA017
Sussex County
Title III D Funding Request

New Jersey Department of Human Services/Division of Aging Services/Office of Area Agency on Aging Administration

Information Form For Substantiating Evidence-Based Health Promotion Program

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Area Agency on Aging	Sussex County				
Date Submitted in SAGE	11/2/2021	Area Plan Contract (APC) Period	1/1/2022	to	12/31/2022
Anticipated Contract Dates	1/1/2022	to	12/31/2022	Estimated Date of Program Implementation	1/1/2022

Evidence-Based Health Promotion Program Details

Evidence-Based Health Promotion Program Name: Take Control of Your Health

Identifiable program name not service, service component, or practice.

Program Goals: (i.e. Reduce falls, promote balance and strength, and increase knowledge of environmental factors.)

Action Plans for Enhancing Wellness for adults of all ages and caregivers who are dealing with a long term health/medical condition(s). Peer led, six-week (2 ½ hour sessions) self-management programs that are goal-oriented and includes a manual, "Living a Healthy Life with Chronic

Title III D Funding Request

Conditions.”

Target Population:

(i.e. Ambulatory Adults 60+, concerned about falling, interested in improving flexibility, balance and strength.)

60+ and caregivers, those concerned with living with chronic diseases

DOAS23AAA017
Sussex County
Title III D Funding Request

Authority:

The operating division of the U.S. Department of Health and Human Services (HHS) already considering the program as evidence-based. Program is listed in their registry.

URL: www.stanford.edu

If proposed evidence-based health promotion plan is not listed in an HHS registry as evidence-based, program must satisfy all 5 components for the federal title III D funding definition (as of 10/1/16). Complete all questions below and remainder of the form.

[] Demonstrated through evaluation to be effective for improving the health and wellbeing or reducing disease, disability, and/or injury among older adults; **and**

Insert the name of a recent article and hyperlink to the article substantiating the proposed program satisfies the 5 criteria to the left:

[] Proven effective with the older adult population, using Experimental or Quasi-Experimental Design, **and**

Article Name:

Article Link

[] Research results published in a peer-review journal; **and**

Insert the name of a recent article and hyperlink to the pre- & post- test evaluation reports:

[] Fully translated in one or more community site(s); **and**

Evaluation Reports

Link

[] Includes developed dissemination products that are available to the public.

Pre-Test Evaluation Report

Post-Test Evaluation Report

DOAS23AAA017
Sussex County
Title III D Funding Request

Evidence-Based Program/Implementation Details

Service Code and Service Taxonomy Name: [] 326 - Physical Health [] 328 - Mental Health
Evidence-Based Program Meets Components and Standards of [] 330 - Physical Activity [✓] 331 - Education
the service taxonomy selected.

Service Levels: *In APC Contract year*
Number of Unduplicated Clients to be served in APC contract # Unduplicated clients 333
year
Number of Service Units to be provided for APC contract # Service Units 333
year

Title III Funding: *In APC Contract year*
Total amount of Title III D funds allocated: \$12,626
Total service budget (funds from all sources): \$2,104

Program Facilitator/Leader: [✓] Leader(s) current/valid certification/licensing on file at AAA.

Program Materials: [✓] Leader Implementation Manual on file at AAA.
[✓] Program dissemination products/participant materials on file and
attached here:
https://njsage.intelligrants.com/_Upload/1865331_1551413-takecontrolofyourlifeflyer.doc

Service Provider

Service Provider (*Official "Legal" Name*) Sussex County Division of
Senior Services

Provider Address One Spring Street

City: Newton **State:** New Jersey **Zip Code:** 07860

DOAS23AAA017
Sussex County
Title III D Funding Request

Check all that apply:

AAA (Direct Service) Governmental Proprietary Non-Profit New Provider (*First Time Contract with AAA*)

Director Name: Lorraine Hentz

Director Title: Director

Telephone: 973-579-0555

Fax: 973-579-0550

Email: seniorservices@sussex.nj.us

Program Sites: Various locations and sites throughout Sussex County.

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

DOAS23AAA017
Sussex County
Title III D Funding Request

New Jersey Department of Human Services/Division of Aging Services/Office of Area Agency on Aging Administration

Information Form For Substantiating Evidence-Based Health Promotion Program

Excerpt of Policy Memorandum number 2015-10; I-10 effective 10/1/2016: In accordance with the federal law evidence-based requirement, beginning October 1, 2016, Area Plan Contract 2016 Title IIID funds shall be expended on evidence-based health promotion programs that meet the Administration on Aging's Title IIID criteria. Written DoAS approval is required each year (or with change in circumstances) prior to program implementation. AAAs shall not expend title III D funds or implement a program denied by DoAS. AAAs shall retain documentation of the evidence supporting their approved Title IIID health promotion program(s).

Area Agency on Aging	Sussex County				
Date Submitted in SAGE	11/2/2021	Area Plan Contract (APC) Period	1/1/2022	to	12/31/2022
Anticipated Contract Dates	1/1/2022	to	12/31/2022	Estimated Date of Program Implementation	1/1/2022

Evidence-Based Health Promotion Program Details

Evidence-Based Health Promotion Program Name: Diabetes Self-Management Program

Identifiable program name not service, service component, or practice.

Program Goals: (i.e. Reduce falls, promote balance and strength, and increase knowledge of environmental factors.)
Action Plans for Enhancing Wellness for adults of all ages and caregivers who are dealing with Type 2 diabetes. Peer led, six-week (2 ½ hour sessions) self-management programs that are goal-oriented and includes a manual, "Living a Healthy Life with Chronic Conditions."

DOAS23AAA017

Sussex County

Title III D Funding Request

Target Population:

(i.e. Ambulatory Adults 60+, concerned about falling,
interested in improving flexibility, balance and strength.)

60+ and caregivers, those
concerned with living with
diabetes

Title III D Funding Request**Authority:**

The operating division of the U.S. Department of Health and Human Services (HHS) already considering the program as evidence-based. Program is listed in their registry.

URL: www.stanford.edu

If proposed evidence-based health promotion plan is not listed in an HHS registry as evidence-based, program must satisfy all 5 components for the federal title III D funding definition (as of 10/1/16). Complete all questions below and remainder of the form.

[] Demonstrated through evaluation to be effective for improving the health and wellbeing or reducing disease, disability, and/or injury among older adults; **and**

Insert the name of a recent article and hyperlink to the article substantiating the proposed program satisfies the 5 criteria to the left:

[] Proven effective with the older adult population, using Experimental or Quasi-Experimental Design, **and**

Article Name:

Article Link

[] Research results published in a peer-review journal; **and**

Insert the name of a recent article and hyperlink to the pre- & post- test evaluation reports:

[] Fully translated in one or more community site(s); **and**

Evaluation Reports

Link

[] Includes developed dissemination products that are available to the public.

Pre-Test Evaluation Report

Post-Test Evaluation Report

DOAS23AAA017
Sussex County
Title III D Funding Request

Evidence-Based Program/Implementation Details

Service Code and Service Taxonomy Name: [] 326 - Physical Health [] 328 - Mental Health
Evidence-Based Program Meets Components and Standards of [] 330 - Physical Activity [✓] 331 - Education
the service taxonomy selected.

Service Levels: *In APC Contract year*
Number of Unduplicated Clients to be served in APC contract # Unduplicated clients 333
year
Number of Service Units to be provided for APC contract # Service Units 333
year

Title III Funding: *In APC Contract year*
Total amount of Title III D funds allocated: \$12,626
Total service budget (funds from all sources): \$2,104

Program Facilitator/Leader: [✓] Leader(s) current/valid certification/licensing on file at AAA.

Program Materials: [✓] Leader Implementation Manual on file at AAA.
[✓] Program dissemination products/participant materials on file and
attached here:
https://njsage.intelligrants.com/_Upload/1865332_1551413-DiabetesSelf-ManagementFlyer.doc

Service Provider

Service Provider (*Official "Legal" Name*) Sussex County Division of
Senior Services

Provider Address One Spring Street

City: Newton **State:** New Jersey **Zip Code:** 07860

DOAS23AAA017
Sussex County
Title III D Funding Request

Check all that apply:

AAA (Direct Service) Governmental Proprietary Non-Profit New Provider (*First Time Contract with AAA*)

Director Name: Lorraine Hentz **Director Title:** Director

Telephone: 973-579-0555 **Fax:** 973-579-0550 **Email:** seniorservices@sussex.nj.us

Program Sites: Various locations and sites throughout Sussex County.

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

Title III D Funding Request

New Jersey Department of Human Services/Division of Aging Services/Office of Area Agency on Aging Administration

Information Form For Substantiating Evidence-Based Health Promotion Program

Excerpt of Policy Memorandum number 2015-10; I-10 effective 10/1/2016: In accordance with the federal law evidence-based requirement, beginning October 1, 2016, Area Plan Contract 2016 Title IIID funds shall be expended on evidence-based health promotion programs that meet the Administration on Aging's Title IIID criteria. Written DoAS approval is required each year (or with change in circumstances) prior to program implementation. AAAs shall not expend title III D funds or implement a program denied by DoAS. AAAs shall retain documentation of the evidence supporting their approved Title IIID health promotion program(s).

Area Agency on Aging	Sussex County		
Date Submitted in SAGE	11/2/2021	Area Plan Contract (APC) Period	1/1/2022 to 12/31/2022
Anticipated Contract Dates	1/1/2022 to 12/31/2022	Estimated Date of Program Implementation	1/1/2022

Evidence-Based Health Promotion Program Details**Evidence-Based Health Promotion Program Name:**

Stress-Busting Program For Family Caregivers

Identifiable program name not service, service component, or practice.

Program Goals:

(i.e. Reduce falls, promote balance and strength, and increase knowledge of environmental factors.)

Improve the quality of life for family caregivers who provide care for person's with Alzheimer's disease or other related dementias by helping them manage stress and cope better with their lives through support, education and problem solving.

DOAS23AAA017

Sussex County

Title III D Funding Request

Target Population:

(i.e. Ambulatory Adults 60+, concerned about falling, interested in improving flexibility, balance and strength.)

Those 60+ and/or caregivers for those with Alzheimer's disease or other dementia's.

Title III D Funding Request**Authority:**

The operating division of the U.S. Department of Health and Human Services (HHS) already considering the program as evidence-based. Program is listed in their registry.

URL: www.caregiversstress.org

If proposed evidence-based health promotion plan is not listed in an HHS registry as evidence-based, program must satisfy all 5 components for the federal title III D funding definition (as of 10/1/16). Complete all questions below and remainder of the form.

Demonstrated through evaluation to be effective for improving the health and wellbeing or reducing disease, disability, and/or injury among older adults; **and**

Insert the name of a recent article and hyperlink to the article substantiating the proposed program satisfies the 5 criteria to the left:

Proven effective with the older adult population, using Experimental or Quasi-Experimental Design, **and**

Article Name:**Article Link**

A Stress-Busting Program for Family Caregivers

Rehabilitation Nursing, Vol 34, No. 4 July/August 2009

Research results published in a peer-review journal; **and**

Insert the name of a recent article and hyperlink to the pre- & post- test evaluation reports:

Fully translated in one or more community site(s); **and**

Evaluation Reports**Link**

Includes developed dissemination products that are available to the public.

Pre-Test Evaluation Report

Post-Test Evaluation Report

DOAS23AAA017
Sussex County
Title III D Funding Request

Evidence-Based Program/Implementation Details

Service Code and Service Taxonomy Name: [] 326 - Physical Health [] 328 - Mental Health
Evidence-Based Program Meets Components and Standards of [] 330 - Physical Activity [✓] 331 - Education
the service taxonomy selected.

Service Levels: *In APC Contract year*
Number of Unduplicated Clients to be served in APC contract # Unduplicated clients 333
year
Number of Service Units to be provided for APC contract # Service Units 333
year

Title III Funding: *In APC Contract year*
Total amount of Title III D funds allocated: \$12,626
Total service budget (funds from all sources): \$2,104

Program Facilitator/Leader: [✓] Leader(s) current/valid certification/licensing on file at AAA.

Program Materials: [✓] Leader Implementation Manual on file at AAA.
[✓] Program dissemination products/participant materials on file and
attached here:
https://njsage.intelligrants.com/_Upload/1865333_1551413-RecruitingFlyer.docx

Service Provider

Service Provider (*Official "Legal" Name*) Sussex County Division of
Senior Services

Provider Address One Spring Street

City: Newton **State:** New Jersey **Zip Code:** 07860

DOAS23AAA017
Sussex County
Title III D Funding Request

Check all that apply:

AAA (Direct Service) Governmental Proprietary Non-Profit New Provider (*First Time Contract with AAA*)

Director Name: Lorraine Hentz **Director Title:** Director

Telephone: 973-579-0555 **Fax:** 973-579-0550 **Email:** seniorservices@sussex.nj.us

Program Sites: Various locations and sites throughout Sussex County.

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

DOAS23AAA017
Sussex County
Title III D Funding Request

New Jersey Department of Human Services/Division of Aging Services/Office of Area Agency on Aging Administration

Information Form For Substantiating Evidence-Based Health Promotion Program

Excerpt of Policy Memorandum number 2015-10; I-10 effective 10/1/2016: In accordance with the federal law evidence-based requirement, beginning October 1, 2016, Area Plan Contract 2016 Title IIID funds shall be expended on evidence-based health promotion programs that meet the Administration on Aging's Title IIID criteria. Written DoAS approval is required each year (or with change in circumstances) prior to program implementation. AAAs shall not expend title III D funds or implement a program denied by DoAS. AAAs shall retain documentation of the evidence supporting their approved Title IIID health promotion program(s).

Area Agency on Aging	Sussex County				
Date Submitted in SAGE	11/2/2021	Area Plan Contract (APC) Period	1/1/2022	to	12/31/2022
Anticipated Contract Dates	1/1/2022	to	12/31/2022	Estimated Date of Program Implementation	1/1/2022

Evidence-Based Health Promotion Program Details

Evidence-Based Health Promotion Program Name: Walk With EASE

Identifiable program name not service, service component, or practice.

Program Goals: (i.e. Reduce falls, promote balance and strength, and increase knowledge of environmental factors.)
Self Directed Program to reduce pain and discomfort of arthritis, increase balance and strength, along with building confidence in the ability to physically active,

Target Population: (i.e. Ambulatory Adults 60+, concerned about falling, interested in improving flexibility, balance and strength.)
Community dwelling adults with arthritis and other chronic conditions.

DOAS23AAA017

Sussex County

Title III D Funding Request

DOAS23AAA017
Sussex County
Title III D Funding Request

Authority:

The operating division of the U.S. Department of Health and Human Services (HHS) already considering the program as evidence-based. Program is listed in their registry.

URL: www.arthritis.org

If proposed evidence-based health promotion plan is not listed in an HHS registry as evidence-based, program must satisfy all 5 components for the federal title III D funding definition (as of 10/1/16). Complete all questions below and remainder of the form.

Demonstrated through evaluation to be effective for improving the health and wellbeing or reducing disease, disability, and/or injury among older adults; **and**

Insert the name of a recent article and hyperlink to the article substantiating the proposed program satisfies the 5 criteria to the left:

Proven effective with the older adult population, using Experimental or Quasi-Experimental Design, **and**

Article Name: **Article Link**

Research results published in a peer-review journal; **and**

Insert the name of a recent article and hyperlink to the pre- & post- test evaluation reports:

Fully translated in one or more community site(s); **and**

Evaluation Reports **Link**

Includes developed dissemination products that are available to the public.

Pre-Test Evaluation Report

Post-Test Evaluation Report

DOAS23AAA017
Sussex County
Title III D Funding Request

Evidence-Based Program/Implementation Details

Service Code and Service Taxonomy Name: [] 326 - Physical Health [] 328 - Mental Health
Evidence-Based Program Meets Components and Standards of [] 330 - Physical Activity [✓] 331 - Education
the service taxonomy selected.

Service Levels: *In APC Contract year*
Number of Unduplicated Clients to be served in APC contract # Unduplicated clients 333
year
Number of Service Units to be provided for APC contract # Service Units 333
year

Title III Funding: *In APC Contract year*
Total amount of Title III D funds allocated: \$12,626
Total service budget (funds from all sources): \$2,104

Program Facilitator/Leader: [✓] Leader(s) current/valid certification/licensing on file at AAA.

Program Materials: [✓] Leader Implementation Manual on file at AAA.
[✓] Program dissemination products/participant materials on file and attached here:
https://njsage.intelligrants.com/_Upload/1865334_1551413-AFWalkWithEaseWor kshopOutline_0216.pdfT;C.pdf

Service Provider

Service Provider (*Official "Legal" Name*) Sussex County Division of Senior Services

Provider Address One Spring Street

City: Newton **State:** New Jersey **Zip Code:** 07860

DOAS23AAA017
Sussex County
Title III D Funding Request

Check all that apply:

AAA (Direct Service) Governmental Proprietary Non-Profit New Provider (*First Time Contract with AAA*)

Director Name: Lorraine Hentz **Director Title:** Director

Telephone: 973-579-0555 **Fax:** 973-579-0550 **Email:** lhentz@sussex.nj.us

Program Sites: Various locations and sites throughout Sussex County. Staff is in the process of being trained as facilitators.

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

Integrated Program Summary: 051

[] Approved by GMO or DHS Admin

() New () Revised (✓) Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 051	
Program Name Senior Transportation		Provider Name Sussex County Skylands Ride	
Provider Address 83 Spring Street		Minority Provider	() Yes (✓) No
		Non-Profit Provider	(✓) Yes () No
		Proprietary Provider	() Yes (✓) No
City Newton	State New Jersey	Zip 07860	
Telephone 9735790555		Director Nick Kapetanakis	
Fax 9733833627	Focal Point		
Email	[✓] ADRC Partner ADRC		
Provider Federal Tax ID Number 226002477 (#####)		[] Focal Point FP	
Provider DUNS Number 08-060-9969 (##-###-####)		[] Check here if not a Focal Point	
Is this Program held at additional sites? () Yes (✓) No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 051Budget by Line Item

Name of Allocated Fund and Code: Title III E - National Family Caregiver Support Program
(NFCSP) - 08

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

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

Integrated Program Summary: 051Budget by Funding Source

Name Of Allocated Fund	Title III E - National Family Caregiver Support Program (NFCSP) - 08	
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	
	Local Private	
	NSIP	
Income:	Other	
	Participant	
Total:		\$0

Integrated Program Summary: 052

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 052	
Program Name Assisted Transportation		Provider Name Sussex County Skylands Ride	
Provider Address One Spring Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Newton	State New Jersey	Zip 07860	
Telephone 973-579-0480		Director Christine Florio	
Fax	Focal Point		Type Initials
Email cflorio@sussex.nj.us	[] ADRC Partner		ADRC
	[] Focal Point		FP
Provider Federal Tax ID Number 226002477 (#####)		[<input checked="" type="checkbox"/>] Check here if not a Focal Point	
Provider DUNS Number 08-060-9969 (##-###-####)			
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 052Budget by Line Item

Name of Allocated Fund and Code: Title III E - National Family Caregiver Support Program
(NFCSP) - 08

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

Line Item	Cash	In-Kind	Total
Personnel	\$0	\$0	\$0
Consultant & Contract	\$23,918		\$23,918
Travel			\$0
Food			\$0
Building Space			\$0
Print & Office Supplies			\$0
Equipment			\$0
Other			\$0
Indirect Cost			\$0
Total Budgeted Cost	\$23,918	\$0	\$23,918

Integrated Program Summary: 052Budget by Funding Source

Name Of Allocated Fund	Title III E - National Family Caregiver Support Program (NFCSP) - 08	\$7,018
Additional Funds:	State Match	\$4,929
	Supplemental Funds	\$10,471
	Local Public	
	Local Private	
	NSIP	
Income:	Other	
	Participant	\$1,500
Total:		\$23,918

Integrated Program Summary: 087

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 087	
Program Name NFCSP Certified Home Health Aide		Provider Name Rescare New Jersey d/b/a All Ways Caring Homecare	
Provider Address 171 Woodport Road		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Proprietary Provider <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
City Sparta	State New Jersey	Zip 07871	
Telephone 973-579-9333		Director Tracy Smeltz	
Fax 973-579-3303		Focal Point <input type="checkbox"/> ADRC Partner	Type Initials ADRC
Email		<input type="checkbox"/> Focal Point	FP
		<input checked="" type="checkbox"/> Check here if not a Focal Point	
Provider Federal Tax ID Number 611312327 (#####)			
Provider DUNS Number 02-696-8905 (##-###-####)			
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 087Budget by Line Item

Name of Allocated Fund and Code: Title III E - National Family Caregiver Support Program
(NFCSP) - 08

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

Line Item	Cash	In-Kind	Total
Personnel	\$0	\$0	\$0
Consultant & Contract	\$25,930		\$25,930
Travel			\$0
Food			\$0
Building Space			\$0
Print & Office Supplies			\$0
Equipment			\$0
Other			\$0
Indirect Cost			\$0
Total Budgeted Cost	\$25,930	\$0	\$25,930

Integrated Program Summary: 087Budget by Funding Source

Name Of Allocated Fund	Title III E - National Family Caregiver Support Program (NFCSP) - 08	\$18,696
Additional Funds:	State Match	\$3,574
	Supplemental Funds	
	Local Public	
	Local Private	\$3,655
	NSIP	
Income:	Other	
	Participant	\$5
Total:		\$25,930

Integrated Program Summary: 019

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2022	To: 12/31/2022
Calendar Year 2022	County Sussex County	Program # 019	
Program Name Administration		Provider Name AAA Sussex County	
Provider Address 1 Spring Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Newton	State New Jersey	Zip 07860	
Telephone 973-579-0555		Director Lorraine Hentz	
Fax 973-579-0550	Focal Point Type Initials		
Email seniorservices@sussex.nj.us	[<input checked="" type="checkbox"/>] ADRC Partner ADRC		
	[<input checked="" type="checkbox"/>] Focal Point FP		
Provider Federal Tax ID Number 226002477 (#####)		[] Check here if not a Focal Point	
Provider DUNS Number 08-060-9969 (##-###-####)			
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 019Budget by Line Item

Name of Allocated Fund and Code:

Safe Housing and Transportation Program Admin - 12

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

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

Budget by Funding Source

Name Of Allocated Fund	Safe Housing and Transportation Program Admin - 12	
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	
	Local Private	
	NSIP	
Income:	Other	
	Participant	
Total:		\$0

Integrated Program Summary: 060

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 060	
Program Name Residential Maintenance		Provider Name NORWESCAP Inc.	
Provider Address 350 Marshall Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Phillipsburg	State New Jersey	Zip 08865	
Telephone 908-454-7000		Director Mark Valli	
Fax	Focal Point		Type Initials
Email	[] ADRC Partner		ADRC
	[] Focal Point		FP
		[<input checked="" type="checkbox"/>] Check here if not a Focal Point	
Provider Federal Tax ID Number 221777156 (#####)			
Provider DUNS Number 06-080-8219 (##-###-####)			
Is this Program held at additional sites?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 060Budget by Line Item

Name of Allocated Fund and Code: Safe Housing and Transportation Program (SHTP) - 11

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

Line Item	Cash	In-Kind	Total
Personnel	\$0	\$0	\$0
Consultant & Contract	\$17,567		\$17,567
Travel			\$0
Food			\$0
Building Space			\$0
Print & Office Supplies			\$0
Equipment			\$0
Other			\$0
Indirect Cost			\$0
Total Budgeted Cost	\$17,567	\$0	\$17,567

Integrated Program Summary: 060Budget by Funding Source

Name Of Allocated Fund	Safe Housing and Transportation Program (SHTP) - 11	\$13,693
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	\$1,369
	Local Private	\$2,500
	NSIP	
Income:	Other	
	Participant	\$5
Total:		\$17,567

Integrated Program Summary: 019

[] Approved by GMO or DHS Admin

() New () Revised (✓) Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 019	
Program Name Administration		Provider Name AAA Sussex County	
Provider Address One Spring Street		Minority Provider () Yes (✓) No	
		Non-Profit Provider (✓) Yes () No	
		Proprietary Provider () Yes (✓) No	
City Newton	State New Jersey	Zip 07860	
Telephone 9735790555		Director Lorraine Hentz	
Fax 973-579-0550	Focal Point Type Initials		
Email seniorservices@sussex.nj.us	[✓] ADRC Partner ADRC		
Provider Federal Tax ID Number 226002477 (#####)	[✓] Focal Point FP		
Provider DUNS Number 08-060-9969 (##-###-####)	[] Check here if not a Focal Point		
Is this Program held at additional sites? () Yes (✓) No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 019Budget by Line Item

Name of Allocated Fund and Code:

Supplemental Aging Supportive Services Admin - 21

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

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

Budget by Funding Source

Name Of Allocated Fund	Supplemental Aging Supportive Services Admin - 21	
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	
	Local Private	
	NSIP	
Income:	Other	
	Participant	
Total:		\$0

Integrated Program Summary: 072

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 072	
Program Name Outreach		Provider Name Sussex County Division of Social Services	
Provider Address 83 Spring Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Newton	State New Jersey	Zip 07860	
Telephone 973-383-3600		Director Joan Bruseo	
Fax 973-383-3627	Focal Point <input type="checkbox"/> ADRC Partner ADRC		
Email	[<input checked="" type="checkbox"/>] Focal Point FP		
	[] Check here if not a Focal Point		
Provider Federal Tax ID Number 226002477 (#####)			
Provider DUNS Number 08-060-9969 (##-###-####)			
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 072Budget by Line Item

Name of Allocated Fund and Code: Supplemental Aging Supportive Services (SASS) - 20

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

Line Item	Cash	In-Kind	Total
Personnel	\$0	\$0	\$0
Consultant & Contract	\$16,494		\$16,494
Travel			\$0
Food			\$0
Building Space			\$0
Print & Office Supplies			\$0
Equipment			\$0
Other			\$0
Indirect Cost			\$0
Total Budgeted Cost	\$16,494	\$0	\$16,494

Integrated Program Summary: 072Budget by Funding Source

Name Of Allocated Fund	Supplemental Aging Supportive Services (SASS) - 20	\$13,191
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	\$3,298
	Local Private	
	NSIP	
Income:	Other	
	Participant	\$5
Total:		\$16,494

Integrated Program Summary: 022

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 022	
Program Name Weekend Home Delivered Meals		Provider Name Catholic Family & Community Services	
Provider Address 24 DeGrasse Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Paterson	State New Jersey	Zip 07505	
Telephone 973-279-7100		Director Scott Milliken	
Fax 973-523-1150	Focal Point <input type="checkbox"/> ADRC Partner Type Initials ADRC <input type="checkbox"/> Focal Point FP <input checked="" type="checkbox"/> Check here if not a Focal Point		
Email			
Provider Federal Tax ID Number 221487121 (#####)			
Provider DUNS Number 03-994-3071 (##-###-####)			
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 022Budget by Line Item

Name of Allocated Fund and Code: State Weekend Home Delivered Meals (SWHDM) - 06

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

Line Item	Cash	In-Kind	Total
Personnel	\$0	\$0	\$0
Consultant & Contract	\$28,816		\$28,816
Travel			\$0
Food	\$3,200		\$3,200
Building Space			\$0
Print & Office Supplies			\$0
Equipment			\$0
Other			\$0
Indirect Cost			\$0
Total Budgeted Cost	\$32,016	\$0	\$32,016

Integrated Program Summary: 022Budget by Funding Source

Name Of Allocated Fund	State Weekend Home Delivered Meals (SWHDM) - 06	\$13,000
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	\$3,462
	Local Private	
	NSIP	
Income:	Other	
	Participant	\$15,554
Total:		\$32,016

Integrated Program Summary: 022

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 022	
Program Name State Home Delivered Meals		Provider Name Catholic Family & Community Services	
Provider Address 24 DeGrasse Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Paterson	State New Jersey	Zip 07505	
Telephone 973-279-7100		Director Scott Milliken	
Fax 973-523-1150	Focal Point <input type="checkbox"/> ADRC Partner ADRC		
Email	Focal Point <input type="checkbox"/> FP		
Provider Federal Tax ID Number 221487121 (#####)		[<input checked="" type="checkbox"/>] Check here if not a Focal Point	
Provider DUNS Number 03-994-3071 (##-###-####)			
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 022Budget by Line Item

Name of Allocated Fund and Code: Supplemental Home Delivered Meals (SHDM) - 19

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

Line Item	Cash	In-Kind	Total
Personnel	\$0	\$0	\$0
Consultant & Contract	\$29,486		\$29,486
Travel			\$0
Food			\$0
Building Space			\$0
Print & Office Supplies			\$0
Equipment			\$0
Other			\$0
Indirect Cost			\$0
Total Budgeted Cost	\$29,486	\$0	\$29,486

Integrated Program Summary: 022Budget by Funding Source

Name Of Allocated Fund	Supplemental Home Delivered Meals (SHDM) - 19	\$19,486
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	
	Local Private	
	NSIP	
Income:	Other	
	Participant	\$10,000
Total:		\$29,486

Integrated Program Summary: 019

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 019	
Program Name Care Coordination		Provider Name AAA Sussex County	
Provider Address 1 Spring Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Newton	State New Jersey	Zip 07860	
Telephone 973-579-0555		Director Lorraine Hentz	
Fax 973-579-0550	Focal Point <input checked="" type="checkbox"/> ADRC Partner ADRC		
Email	Focal Point <input checked="" type="checkbox"/> FP		
Provider Federal Tax ID Number 226002477 (#####)		[] Check here if not a Focal Point	
Provider DUNS Number 08-060-9969 (##-###-####)			
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 019Budget by Line Item

Name of Allocated Fund and Code: Care Management/Quality Assurance (CMQA) - 17

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

Line Item	Cash	In-Kind	Total
Personnel	\$23,810	\$0	\$23,810
Consultant & Contract			\$0
Travel			\$0
Food			\$0
Building Space			\$0
Print & Office Supplies			\$0
Equipment			\$0
Other			\$0
Indirect Cost			\$0
Total Budgeted Cost	\$23,810	\$0	\$23,810

Budget by Funding Source

Name Of Allocated Fund	Care Management/Quality Assurance (CMQA) - 17	\$23,810
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	
	Local Private	
	NSIP	
Income:	Other	
	Participant	
Total:		\$23,810

Integrated Program Summary: 069

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 069	
Program Name Adult Protective Services		Provider Name Sussex County Division of Social Services	
Provider Address 83 Spring Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Newton	State New Jersey	Zip 07860	
Telephone 973-383-3600		Director Joan Bruseo	
Fax 973-383-3627	Focal Point <input type="checkbox"/> ADRC Partner ADRC		
Email	[<input checked="" type="checkbox"/>] Focal Point FP		
	[] Check here if not a Focal Point		
Provider Federal Tax ID Number 226002477 (#####)			
Provider DUNS Number 08-060-9969 (##-###-####)			
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 069Budget by Line Item

Name of Allocated Fund and Code: Adult Protective Services (APS) - 14

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

Line Item	Cash	In-Kind	Total
Personnel	\$0	\$0	\$0
Consultant & Contract	\$85,807		\$85,807
Travel			\$0
Food			\$0
Building Space			\$0
Print & Office Supplies			\$0
Equipment			\$0
Other			\$0
Indirect Cost			\$0
Total Budgeted Cost	\$85,807	\$0	\$85,807

Budget by Funding Source

Name Of Allocated Fund	Adult Protective Services (APS) - 14	\$85,807
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	
	Local Private	
	NSIP	
Income:	Other	
	Participant	
Total:		\$85,807

Integrated Program Summary: 051

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 051	
Program Name Senior Transportation		Provider Name Sussex County Skylands Ride	
Provider Address 83 Spring Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Newton	State New Jersey	Zip 07860	
Telephone 973-383-3600		Director Christine Florio	
Fax 973-579-0550	Focal Point [] ADRC Partner		Type Initials ADRC
Email	[] Focal Point		FP
Provider Federal Tax ID Number 226002477 (#####)		[<input checked="" type="checkbox"/>] Check here if not a Focal Point	
Provider DUNS Number 08-060-9969 (##-###-####)			
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 051Budget by Line Item

Name of Allocated Fund and Code: Medicaid Match - 35

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

Line Item	Cash	In-Kind	Total
Personnel	\$0	\$0	\$0
Consultant & Contract	\$2,875		\$2,875
Travel			\$0
Food			\$0
Building Space			\$0
Print & Office Supplies			\$0
Equipment			\$0
Other			\$0
Indirect Cost			\$0
Total Budgeted Cost	\$2,875	\$0	\$2,875

Integrated Program Summary: 051Budget by Funding Source

Name Of Allocated Fund	Medicaid Match - 35	\$2,870
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	
	Local Private	
	NSIP	
Income:	Other	
	Participant	\$5
Total:		\$2,875

Integrated Program Summary: 072

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 072	
Program Name Care Management		Provider Name Sussex County Division of Social Services	
Provider Address 83 Spring Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Newton	State New Jersey	Zip 07860	
Telephone 973-383-3600		Director Joan Bruseo	
Fax 973-383-3627	Focal Point <input type="checkbox"/> ADRC Partner		Type Initials ADRC
Email		<input checked="" type="checkbox"/> Focal Point FP	
		<input type="checkbox"/> Check here if not a Focal Point	
Provider Federal Tax ID Number 226002477 (#####)			
Provider DUNS Number 08-060-9969 (##-###-####)			
Is this Program held at additional sites?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 072Budget by Line Item

Name of Allocated Fund and Code: Medicaid Match - 35

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

Line Item	Cash	In-Kind	Total
Personnel	\$0	\$0	\$0
Consultant & Contract	\$2,874		\$2,874
Travel			\$0
Food			\$0
Building Space			\$0
Print & Office Supplies			\$0
Equipment			\$0
Other			\$0
Indirect Cost			\$0
Total Budgeted Cost	\$2,874	\$0	\$2,874

Integrated Program Summary: 072Budget by Funding Source

Name Of Allocated Fund	Medicaid Match - 35	\$2,869
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	
	Local Private	
	NSIP	
Income:	Other	
	Participant	\$5
Total:		\$2,874

Integrated Program Summary: 022

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2022	To: 12/31/2022
Calendar Year 2022	County Sussex County	Program # 022	
Program Name Home Delivered Meals		Provider Name AAA Sussex County	
Provider Address 1 Spring Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Newton	State New Jersey	Zip 07860	
Telephone 9735790555		Director Lorraine Hentz	
Fax	Focal Point		Type Initials
Email	<input checked="" type="checkbox"/> ADRC Partner		ADRC
	<input checked="" type="checkbox"/> Focal Point		FP
Provider Federal Tax ID Number 226002477 (#####)		[] Check here if not a Focal Point	
Provider DUNS Number 08-060-9969 (##-###-####)			
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 022Budget by Line Item

Name of Allocated Fund and Code:

FFP Federal Financial Participation - Services - 30

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

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

Integrated Program Summary: 022Budget by Funding Source

Name Of Allocated Fund	FFP Federal Financial Participation - Services - 30	
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	
	Local Private	
	NSIP	
Income:	Other	
	Participant	
Total:		\$0

Integrated Program Summary: 026

[] Approved by GMO or DHS Admin

() New (✓) Revised () Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 026	
Program Name Socialization Recreation		Provider Name AAA Sussex County	
Provider Address 1 Spring Street		Minority Provider () Yes (✓) No	
		Non-Profit Provider () Yes (✓) No	
		Proprietary Provider () Yes (✓) No	
City Newton	State New Jersey	Zip 07860	
Telephone 973-579-0555		Director Lorraine Hentz	
Fax 973-579-0550	Focal Point Type Initials		
Email seniorservices@sussex.nj.us	[✓] ADRC Partner ADRC		
	[✓] Focal Point FP		
Provider Federal Tax ID Number 226002477 (#####)		[] Check here if not a Focal Point	
Provider DUNS Number 08-060-9969 (##-###-####)			
Is this Program held at additional sites? () Yes (✓) No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 026Budget by Line Item

Name of Allocated Fund and Code:

FFP Federal Financial Participation - Services - 30

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

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

Budget by Funding Source

Name Of Allocated Fund	FFP Federal Financial Participation - Services - 30	
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	
	Local Private	
	NSIP	
Income:	Other	
	Participant	\$0
Total:		\$0

Integrated Program Summary: 027

[] Approved by GMO or DHS Admin

() New () Revised (✓) Delete		From: 1/1/2021	To: 12/31/2021
Calendar Year 2021	County Sussex County	Program # 027	
Program Name Telephone Reassurance		Provider Name AAA Sussex County	
Provider Address 1 Spring Street		Minority Provider () Yes (✓) No	
		Non-Profit Provider (✓) Yes () No	
		Proprietary Provider () Yes (✓) No	
City Newton	State New Jersey	Zip 07860	
Telephone 973-579-0555		Director Lorraine Hentz	
Fax 973-579-0550	Focal Point		Type Initials
Email seniorservices@sussex.nj.us	[✓] ADRC Partner		ADRC
Provider Federal Tax ID Number 226002477 (#####)	[✓] Focal Point		FP
Provider DUNS Number 06-080-8219 (##-###-####)	[] Check here if not a Focal Point		
Is this Program held at additional sites? () Yes (✓) No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 027Budget by Line Item

Name of Allocated Fund and Code:

FFP Federal Financial Participation - Services - 30

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

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

Budget by Funding Source

Name Of Allocated Fund	FFP Federal Financial Participation - Services - 30	
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	
	Local Private	
	NSIP	
Income:	Other	
	Participant	
Total:		\$0

Integrated Program Summary: 051

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 051	
Program Name Senior Transportation		Provider Name Sussex County Skylands Ride	
Provider Address 1 Spring Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Newton	State New Jersey	Zip 07860	
Telephone 973-579-0480		Director Nick Kapetanakis	
Fax	Focal Point		Type Initials
Email	[] ADRC Partner		ADRC
	[] Focal Point		FP
Provider Federal Tax ID Number 226002477 (#####)		[<input checked="" type="checkbox"/>] Check here if not a Focal Point	
Provider DUNS Number 08-060-9969 (##-###-####)			
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 051Budget by Line Item

Name of Allocated Fund and Code:

FFP Federal Financial Participation - Services - 30

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

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

Budget by Funding Source

Name Of Allocated Fund	FFP Federal Financial Participation - Services - 30	
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	
	Local Private	
	NSIP	
Income:	Other	
	Participant	
Total:		\$0

Integrated Program Summary: 055

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2022	To: 12/31/2022
Calendar Year 2022	County Sussex County	Program # 055	
Program Name Legal Services		Provider Name Legal Services of Northwest Jersey, Inc.	
Provider Address 90 East Main Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Somerville	State New Jersey	Zip 08876	
Telephone 973-383-7400		Director Michael L. Wojcik	
Fax 973-383-3469	Focal Point		Type Initials
Email	[] ADRC Partner		ADRC
	[] Focal Point		FP
		[<input checked="" type="checkbox"/>] Check here if not a Focal Point	
Provider Federal Tax ID Number 222092489 (#####)			
Provider DUNS Number 16-607-5473 (##-###-####)			
Is this Program held at additional sites?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 055Budget by Line Item

Name of Allocated Fund and Code:

FFP Federal Financial Participation - Services - 30

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

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

Budget by Funding Source

Name Of Allocated Fund	FFP Federal Financial Participation - Services - 30	
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	
	Local Private	
	NSIP	
Income:	Other	
	Participant	\$0
Total:		\$0

Integrated Program Summary: 069

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2026	County Sussex County	Program # 069	
Program Name Adult Protective Services		Provider Name Sussex County Division of Social Services	
Provider Address 83 Spring Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Newton	State New Jersey	Zip 07860	
Telephone 973-383-3600		Director Joan Bruseo	
Fax 973-383-3627	Focal Point <input checked="" type="checkbox"/> ADRC Partner ADRC		
Email	Focal Point <input checked="" type="checkbox"/> FP		
	[] Check here if not a Focal Point		
Provider Federal Tax ID Number 226002477 (#####)			
Provider DUNS Number 08-060-9969 (##-###-####)			
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 069Budget by Line Item

Name of Allocated Fund and Code:

FFP Federal Financial Participation - Services - 30

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

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

Budget by Funding Source

Name Of Allocated Fund	FFP Federal Financial Participation - Services - 30	
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	
	Local Private	
	NSIP	
Income:	Other	
	Participant	
Total:		\$0

Integrated Program Summary: 086

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 086	
Program Name Certified Home Health Aide		Provider Name Rescare New Jersey d/b/a All Ways Caring Homecare	
Provider Address 171 Woodport Road		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Proprietary Provider <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
City Sparta	State New Jersey	Zip 07871	
Telephone 973-579-9333		Director Tracy Smeltz	
Fax 973-579-3303		Focal Point	Type Initials
Email		<input type="checkbox"/> ADRC Partner	ADRC
		<input type="checkbox"/> Focal Point	FP
		<input checked="" type="checkbox"/> Check here if not a Focal Point	
Provider Federal Tax ID Number 611312327 (#####)			
Provider DUNS Number 02-696-8905 (##-###-####)			
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 086Budget by Line Item

Name of Allocated Fund and Code:

FFP Federal Financial Participation - Services - 30

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

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

Budget by Funding Source

Name Of Allocated Fund	FFP Federal Financial Participation - Services - 30	
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	
	Local Private	
	NSIP	
Income:	Other	
	Participant	
Total:		\$0

Integrated Program Summary: 001

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/30/2023
Calendar Year 2023	County Sussex County	Program # 001	
Program Name Administration FFP		Provider Name AAA Sussex County	
Provider Address One Spring Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Newton	State New Jersey	Zip 07860	
Telephone 973-579-0555		Director Lorraine Hentz	
Fax 973-579-0550	Focal Point <input checked="" type="checkbox"/> ADRC Partner ADRC		
Email	Focal Point <input checked="" type="checkbox"/> FP		
	[] Check here if not a Focal Point		
Provider Federal Tax ID Number 226002477 (#####)			
Provider DUNS Number 08-080-9969 (##-###-####)			
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 001Budget by Line Item

Name of Allocated Fund and Code:

FFP Federal Financial Participation - Administration - 31

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

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

Budget by Funding Source

Name Of Allocated Fund	FFP Federal Financial Participation - Administration - 31	
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	
	Local Private	
	NSIP	
Income:	Other	
	Participant	
Total:		\$0

Integrated Program Summary: 020

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 020	
Program Name I & A ARP III B		Provider Name AAA Sussex County	
Provider Address One Spring Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Newton	State New Jersey	Zip 07860	
Telephone 973-579-0555		Director Lorraine Hentz	
Fax	Focal Point <input checked="" type="checkbox"/> ADRC Partner ADRC		
Email	Focal Point <input checked="" type="checkbox"/> FP		
Provider Federal Tax ID Number 226002477 (#####)		[] Check here if not a Focal Point	
Provider DUNS Number 08-060-9969 (##-###-####)			
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 020Budget by Line Item

Name of Allocated Fund and Code: ARP - Title III B Supportive Services - 61

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

Line Item	Cash	In-Kind	Total
Personnel	\$18,144	\$0	\$18,144
Consultant & Contract			\$0
Travel			\$0
Food			\$0
Building Space			\$0
Print & Office Supplies			\$0
Equipment			\$0
Other			\$0
Indirect Cost			\$0
Total Budgeted Cost	\$18,144	\$0	\$18,144

Budget by Funding Source

Name Of Allocated Fund	ARP - Title III B Supportive Services - 61	
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	\$18,144
	Local Private	
	NSIP	
Income:	Other	
	Participant	
Total:		\$18,144

Integrated Program Summary: 055

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 055	
Program Name Legal Services		Provider Name Legal Services of Northwest Jersey, Inc.	
Provider Address 90 East Main Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Somerville	State New Jersey	Zip 08876	
Telephone 973-383-7400		Director Michael L. Wojcik	
Fax 9733833469	Focal Point <input type="checkbox"/> ADRC Partner		Type Initials ADRC
Email	<input type="checkbox"/> Focal Point		FP
Provider Federal Tax ID Number 222092489 (#####)		<input checked="" type="checkbox"/> Check here if not a Focal Point	
Provider DUNS Number 16-607-5473 (##-###-####)			
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 055Budget by Line Item

Name of Allocated Fund and Code: ARP - Title III B Supportive Services - 61

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

Line Item	Cash	In-Kind	Total
Personnel	\$0	\$0	\$0
Consultant & Contract	\$10,005		\$10,005
Travel			\$0
Food			\$0
Building Space			\$0
Print & Office Supplies			\$0
Equipment			\$0
Other			\$0
Indirect Cost			\$0
Total Budgeted Cost	\$10,005	\$0	\$10,005

Integrated Program Summary: 055Budget by Funding Source

Name Of Allocated Fund	ARP - Title III B Supportive Services - 61	\$10,000
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	
	Local Private	
	NSIP	
Income:	Other	
	Participant	\$5
Total:		\$10,005

Integrated Program Summary: 091

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 091	
Program Name Emergency Services		Provider Name Sussex County Division of Social Services	
Provider Address 83 Spring Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Newton	State New Jersey	Zip 07860	
Telephone 9733833600		Director Joan Bruseo	
Fax	Focal Point		Type Initials
Email	[] ADRC Partner		ADRC
	[<input checked="" type="checkbox"/>] Focal Point		FP
Provider Federal Tax ID Number 226002477 (#####)		[] Check here if not a Focal Point	
Provider DUNS Number 08-060-9969 (##-###-####)			
Is this Program held at additional sites?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 091Budget by Line Item

Name of Allocated Fund and Code:

ARP - Title III B Supportive Services - 61

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

Line Item	Cash	In-Kind	Total
Personnel	\$0	\$0	\$0
Consultant & Contract	\$83,741		\$83,741
Travel			\$0
Food			\$0
Building Space			\$0
Print & Office Supplies			\$0
Equipment			\$0
Other			\$0
Indirect Cost			\$0
Total Budgeted Cost	\$83,741	\$0	\$83,741

Integrated Program Summary: 091Budget by Funding Source

Name Of Allocated Fund	ARP - Title III B Supportive Services - 61	\$83,741
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	
	Local Private	
	NSIP	
Income:	Other	
	Participant	
Total:		\$83,741

Integrated Program Summary: 025

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 025	
Program Name Congregate Nutrition		Provider Name AAA Sussex County	
Provider Address 1 Spring Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Newton	State New Jersey	Zip 07860	
Telephone 9735790555		Director Lorraine Hentz	
Fax	Focal Point		Type Initials
Email	[<input checked="" type="checkbox"/>] ADRC Partner		ADRC
	[<input checked="" type="checkbox"/>] Focal Point		FP
Provider Federal Tax ID Number 226002477 (#####)		[] Check here if not a Focal Point	
Provider DUNS Number 08-060-9969 (##-###-####)			
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 025Budget by Line Item

Name of Allocated Fund and Code: ARP - Title III C1 Congregate Meals - 62

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

Line Item	Cash	In-Kind	Total
Personnel	\$0	\$0	\$0
Consultant & Contract			\$0
Travel			\$0
Food	\$45,053		\$45,053
Building Space			\$0
Print & Office Supplies			\$0
Equipment			\$0
Other			\$0
Indirect Cost			\$0
Total Budgeted Cost	\$45,053	\$0	\$45,053

Budget by Funding Source

Name Of Allocated Fund	ARP - Title III C1 Congregate Meals - 62	\$38,063
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	\$6,990
	Local Private	
	NSIP	
Income:	Other	
	Participant	
Total:		\$45,053

Integrated Program Summary: 022

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 022	
Program Name Home Delivered Meals		Provider Name AAA Sussex County	
Provider Address 1 Spring Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Newton	State New Jersey	Zip 07860	
Telephone 9735790555		Director Lorraine Hentz	
Fax	Focal Point		Type Initials
Email	[<input checked="" type="checkbox"/>] ADRC Partner		ADRC
	[<input checked="" type="checkbox"/>] Focal Point		FP
Provider Federal Tax ID Number 226002477 (#####)		[] Check here if not a Focal Point	
Provider DUNS Number 08-060-9969 (##-###-####)			
Is this Program held at additional sites?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 022Budget by Line Item

Name of Allocated Fund and Code:

ARP - Title III C2 Home Delivered Meals - 63

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

Line Item	Cash	In-Kind	Total
Personnel	\$0	\$0	\$0
Consultant & Contract			\$0
Travel			\$0
Food	\$85,357		\$85,357
Building Space			\$0
Print & Office Supplies			\$0
Equipment			\$0
Other			\$0
Indirect Cost			\$0
Total Budgeted Cost	\$85,357	\$0	\$85,357

Integrated Program Summary: 022Budget by Funding Source

Name Of Allocated Fund	ARP - Title III C2 Home Delivered Meals - 63	\$71,498
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	\$13,859
	Local Private	
	NSIP	
Income:	Other	
	Participant	
Total:		\$85,357

Integrated Program Summary: 020

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 020	
Program Name Health Promotion		Provider Name AAA Sussex County	
Provider Address 1 Spring Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Newton	State New Jersey	Zip 07860	
Telephone 9735790555		Director Lorraine Hentz	
Fax	Focal Point Type Initials		
Email	<input checked="" type="checkbox"/> ADRC Partner ADRC		
	<input checked="" type="checkbox"/> Focal Point FP		
Provider Federal Tax ID Number 226002477 (#####)		[] Check here if not a Focal Point	
Provider DUNS Number 08-060-9969 (##-###-####)			
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 020Budget by Line Item

Name of Allocated Fund and Code: ARP - Title III D Preventive Health - 64

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

Line Item	Cash	In-Kind	Total
Personnel	\$0	\$0	\$0
Consultant & Contract	\$9,550		\$9,550
Travel			\$0
Food			\$0
Building Space			\$0
Print & Office Supplies			\$0
Equipment			\$0
Other			\$0
Indirect Cost			\$0
Total Budgeted Cost	\$9,550	\$0	\$9,550

Integrated Program Summary: 020Budget by Funding Source

Name Of Allocated Fund	ARP - Title III D Preventive Health - 64	\$9,545
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	
	Local Private	
	NSIP	
Income:	Other	
	Participant	\$5
Total:		\$9,550

Integrated Program Summary: 020

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 020	
Program Name Caregiver Expo		Provider Name AAA Sussex County	
Provider Address 1 Spring Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Newton	State New Jersey	Zip 07860	
Telephone 9735790555		Director Lorraine Hentz	
Fax	Focal Point		Type Initials
Email	[<input checked="" type="checkbox"/>] ADRC Partner		ADRC
	[<input checked="" type="checkbox"/>] Focal Point		FP
Provider Federal Tax ID Number 226002477 (#####)		[] Check here if not a Focal Point	
Provider DUNS Number 08-060-9969 (##-###-####)			
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 020Budget by Line Item

Name of Allocated Fund and Code: ARP - Title III E Family Caregivers - 65

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

Line Item	Cash	In-Kind	Total
Personnel	\$0	\$0	\$0
Consultant & Contract			\$0
Travel			\$0
Food			\$0
Building Space			\$0
Print & Office Supplies			\$0
Equipment			\$0
Other	\$6,000		\$6,000
Indirect Cost			\$0
Total Budgeted Cost	\$6,000	\$0	\$6,000

Budget by Funding Source

Name Of Allocated Fund	ARP - Title III E Family Caregivers - 65	\$6,000
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	
	Local Private	
	NSIP	
Income:	Other	
	Participant	
Total:		\$6,000

Integrated Program Summary: 060

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 060	
Program Name Residential Maintenance		Provider Name NORWESCAP Inc.	
Provider Address 350 Marshall Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Phillipsburg	State New Jersey	Zip 08865	
Telephone 9084547000		Director Mark Valli	
Fax	Focal Point		Type Initials
Email	[] ADRC Partner		ADRC
	[] Focal Point		FP
		[<input checked="" type="checkbox"/>] Check here if not a Focal Point	
Provider Federal Tax ID Number 001777156 (#####)			
Provider DUNS Number 06-080-8219 (##-###-####)			
Is this Program held at additional sites?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 060Budget by Line Item

Name of Allocated Fund and Code: ARP - Title III E Family Caregivers - 65

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

Line Item	Cash	In-Kind	Total
Personnel	\$0	\$0	\$0
Consultant & Contract	\$15,963		\$15,963
Travel			\$0
Food			\$0
Building Space			\$0
Print & Office Supplies			\$0
Equipment			\$0
Other			\$0
Indirect Cost			\$0
Total Budgeted Cost	\$15,963	\$0	\$15,963

Budget by Funding Source

Name Of Allocated Fund	ARP - Title III E Family Caregivers - 65	\$15,958
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	
	Local Private	
	NSIP	
Income:	Other	
	Participant	\$5
Total:		\$15,963

Integrated Program Summary: 019

[] Approved by GMO or DHS Admin

<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Delete		From: 1/1/2023	To: 12/31/2023
Calendar Year 2023	County Sussex County	Program # 019	
Program Name Expanding Public Health Workforce		Provider Name AAA Sussex County	
Provider Address 1 Spring Street		Minority Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Non-Profit Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		Proprietary Provider <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
City Newton	State New Jersey	Zip 07860	
Telephone 9735790555		Director Lorraine Hentz	
Fax	Focal Point		Type Initials
Email	<input checked="" type="checkbox"/> ADRC Partner		ADRC
	<input checked="" type="checkbox"/> Focal Point		FP
Provider Federal Tax ID Number 226002477 (#####)		[] Check here if not a Focal Point	
Provider DUNS Number 08-060-9969 (##-###-####)			
Is this Program held at additional sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, please click the Sites/Locations link in the related pages section at the top or bottom of this form.			
Number of Sites/Locations for this IPS:			

Integrated Program Summary: 019Budget by Line Item

Name of Allocated Fund and Code: Expanding Public Health Workforce - 67

If Personnel has been filled out, please visit the Personnel Justification Form found in the Related Documents section at the bottom of the page.

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

Budget by Funding Source

Name Of Allocated Fund	Expanding Public Health Workforce - 67	
Additional Funds:	State Match	
	Supplemental Funds	
	Local Public	
	Local Private	
	NSIP	
Income:	Other	
	Participant	
Total:		\$0

Sussex County

Personnel Justification Part I: AAA Sussex County 1

Provider Name: AAA Sussex County

Position Title	First Name	Last Name	Total Yearly Salary per W2	Standard Weekly Hours Worked	Weekly Hours Worked on this program	Salary Charge to this APC Program w/o Fringe	Fringe Rate	Fringe Cost for this APC Program	Total Salary & Fringe for this APC Program	Outside APC (Salary Only)
Administrative Assistant	Sheila	Brunda	\$51,525	40	40	\$38,603	47.72%	\$18,421	\$57,024	\$12,922
Prog Dev Spec Aging	James	Cerny	\$49,505	40	40	\$22,433	47.72%	\$10,705	\$33,138	\$27,072
Sr Prog Dev Spec Aging	Kaitlyn	Hammerle	\$54,605	40	40	\$15,342	47.72%	\$7,321	\$22,663	\$39,263
Division Director	Lorraine	Hentz	\$110,497	40	40	\$110,497	47.72%	\$52,729	\$163,226	\$0
Fiscal Officer	Vacant	Vacant	\$52,621	40	40	\$29,023	47.72%	\$13,850	\$42,873	\$23,598
Receptionist	Brenda	Monica	\$11,804	15	15	\$11,804	47.72%	\$5,633	\$17,437	\$0
Supervisor Sr Outreach	Lori	Baker	\$62,738	40	40	\$62,738	47.72%	\$29,939	\$92,677	\$0
Social Worker Aging	Rae Ann	Gerow	\$48,661	40	40	\$24,613	47.72%	\$11,745	\$36,358	\$24,048
Social Worker Aging	Theresa	Seibert	\$54,319	40	13.5	\$18,319	47.72%	\$8,742	\$27,061	\$36,000
		Total:	\$496,275	335	308.5	\$333,372	429.48	\$159,085	\$492,457	\$162,903

Sussex County

Personnel Justification Part II: AAA Sussex County 1 1

Position Title	First Name	Last Name	Total Salary & Fringe for this APC Program	019 CMQA-1 7	020 TIII B-02	025 TIII C1-03	019 TIII Ad-01	020 ARP T B-61	019 [DELETE D]	Total
Administrative Assistant	Sheila	Brunda								\$0
Prog Dev Spec Aging	James	Cerny								\$33,138
Sr Prog Dev Spec Aging	Kaitlyn	Hammerle								\$3,178
Division Director	Lorraine	Hentz								\$0
Fiscal Officer	Vacant	Vacant								\$0
Receptionist	Brenda	Monica								\$0
Supervisor Sr Outreach	Lori	Baker								\$23,810
Social Worker Aging	Rae Ann	Gerow								\$0
Social Worker Aging	Theresa	Seibert								\$0
		Total:	\$492,457							

Non-Allocated Funding Sources:

State Match/Supplemental Funds

DOAS23AAA017
Sussex County
Agency Budget Plan Part I

Agency: Sussex County

County: Sussex County

Title III Funding:

Funding Sources	Title III ADMIN	Title III B	Title III C1	Title III C2	Title III D Health Promotion	Title III E
New Funds		\$81,381	\$71,311	\$44,615	\$5,998	\$28,344
Administrative-Title III(01)	\$21,613	(\$15,785)	(\$1,199)	(\$1,999)		(\$2,630)
Allocation Transfer		\$0	\$0	\$0		
New Allocation	\$21,613	\$65,596	\$70,112	\$42,616	\$5,998	\$25,714
Prior Year Approved Carry Over		\$0	\$0	\$0	\$0	\$0
Prior Year Excess Funds		\$0	\$0	\$0	\$0	\$0
State Match			\$0	\$10,763	\$0	\$8,503
Prior Year Approved State Match C/O		\$0	\$0	\$0	\$0	\$0
Prior Year State Match Excess Funds		\$0	\$0	\$0	\$0	\$0
Local Public	\$593,713	\$120,287	\$95,728	\$59,954		
Local Private		\$13,689		\$48,740		\$3,655
Participant Income		\$1,520	\$24,000	\$45,000	\$5	\$1,505
Income Other						
Supplemental Funds		\$44,057		\$7,128		\$10,471
NSIP			\$4,061	\$4,062		
Allocation Total	\$615,326	\$245,149	\$193,901	\$218,263	\$6,003	\$49,848
Actual Contract Allocation (Entered by DoAS)		\$0	\$0	\$0	\$0	\$0
Federal Fund Balance		\$0	\$0	\$0	\$0	\$0
State Match Fund Balance		\$0	\$0	\$0	\$0	\$0

Agency Budget Plan Part I

Funding Sources	Fund Totals	MOE Requirement	NSIP Approved Carry Over	NSIP Excess Funds	NSIP Fund Balance
New Funds	\$231,649				
Administrative-Title III(01)	\$0				
Allocation Transfer	\$0				
New Allocation	\$231,649				
Prior Year Approved Carry Over	\$0				
Prior Year Excess Funds	\$0				
State Match	\$19,266				
Prior Year Approved State Match C/O	\$0				
Prior Year State Match Excess Funds	\$0				
Local Public	\$869,682				
Local Private	\$66,084	\$0			
Participant Income	\$72,030				
Income Other	\$0				
Supplemental Funds	\$61,656				
NSIP	\$8,123		\$0	\$0	\$0
Allocation Total	\$1,328,490				

Actual Contract Allocation (Entered by DoAS)	\$0
---	-----

Federal Fund Balance	\$0
State Match Fund Balance	\$0

DOAS23AAA017
Sussex County
Agency Budget Plan Part I

Other Funding:

Funding Sources	SHTP ADMIN	SHTP PROGRAM	SASS ADMIN	SASS PROGRAM	SWHDM PROGRAM	Supplemental Home Delivered Meals	Care Coord CMQA	APS PROGRAM
New Funds		\$13,693		\$13,191	\$13,000	\$19,486	\$23,810	\$85,807
Administrative								
Allocation Transfer								
New Allocation		\$13,693		\$13,191	\$13,000	\$19,486	\$23,810	\$85,807
Prior Year Approved Carry Over								
Prior Year Excess Funds								
State Match								
Prior Year Approved State Match C/O								
Prior Year State Match Excess Funds								
Local Public		\$1,369		\$3,298	\$3,462			
Local Private		\$2,500						
Participant Income		\$5		\$5	\$15,554	\$10,000		
Income Other								
Supplemental Funds								
NSIP								
Allocation Total	\$0	\$17,567	\$0	\$16,494	\$32,016	\$29,486	\$23,810	\$85,807
Actual Contract Allocation (Entered by DoAS)		\$0		\$0	\$0	\$0	\$0	\$0

DOAS23AAA017
Sussex County
Agency Budget Plan Part I

Funding Sources	MEDICAID MATCH	FFP Federal Financial Participati on - Services - 30	FFP Federal Financial Participati on - Administ ration - 31	Community Based Senior Program	Non - APC	FUND TOTALS	CONTRACT TOTALS	Actual Allocation (Entered by DoAS)
New Funds	\$5,739	\$0	\$0	\$0	\$0	\$174,726	\$641,180	
Administrative						\$0	\$0	
Allocation Transfer						\$0	\$0	
New Allocation	\$5,739					\$174,726	\$641,180	
Prior Year Approved Carry Over	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Prior Year Excess Funds	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
State Match						\$0	\$19,266	\$0
Prior Year Approved State Match C/O						\$0	\$0	
Prior Year State Match Excess Funds						\$0	\$0	
Local Public						\$8,129	\$916,804	
Local Private						\$2,500	\$68,584	
Participant Income	\$10			\$0		\$25,574	\$97,619	
Income Other						\$0	\$0	
Supplemental Funds						\$0	\$61,656	\$0
NSIP						\$0	\$8,123	\$0
Allocation Total	\$5,749	\$0	\$0	\$0	\$0	\$210,929	\$1,813,232	
Actual Contract Allocation (Entered by DoAS)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Federal Fund Balance	\$0	\$0	\$0	\$0	\$0	\$0	\$0	

DOAS23AAA017

Sussex County

Agency Budget Plan Part I

Total Funds From State:	\$730,225
Fund Balance:	\$0
Total New Funds:	\$730,225
Funds from Other Sources:	\$1,083,007
Total Funds Needed:	\$1,813,232

Sussex County

Agency Budget Plan Part II

Agency: Sussex County

County: Sussex County

Title III Funding:

Funding Sources	ARP ADMIN	CARES ADMIN	CARES - T III B Supportive Services - 51	CARES - T III C2 Home Delivered Meals - 52	CARES - T III E Family Caregiver Support Program - 53	CAA - T III C2 Home Delivered Meals - 57	CRRSA - APS - 58
New Funds			\$0	\$0	\$0	\$0	\$0
Administrative - ARP (66)							
Administrative - CARES (54)		\$0	\$0	\$0	\$0		
Allocation Transfer			\$0	\$0			
New Allocation		\$0	\$0	\$0	\$0	\$0	\$0
Prior Year Approved Carry Over			\$0	\$0	\$0	\$0	\$0
Prior Year Excess Funds			\$0	\$0	\$0	\$0	\$0
State Match			\$0	\$0	\$0	\$0	\$0
Prior Year Approved State Match C/O			\$0	\$0	\$0	\$0	\$0
Prior Year State Match Excess Funds			\$0	\$0	\$0	\$0	\$0
Local Public							
Local Private							
Participant Income			\$0	\$0	\$0		
Income Other							
Supplemental Funds							
NSIP							
Allocation Total	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Actual Contract Allocation (Entered by DoAS)			\$0	\$0	\$0	\$0	\$0

Agency Budget Plan Part II

Federal Fund Balance		\$0	\$0	\$0	\$0	\$0	\$0
State Match Fund Balance		\$0	\$0	\$0	\$0	\$0	\$0

Funding Sources	ARP - Title III B Supportive Services - 61	ARP - Title III C1 Congregate Meals - 62	ARP - Title III C2 Home Delivered Meals - 63	ARP - Title III D Preventive Health - 64	ARP - Title III E Family Caregivers - 65
New Funds	\$93,741	\$38,063	\$71,498	\$9,545	\$21,958
Administrative - ARP (66)	\$0	\$0	\$0		\$0
Administrative - CARES (54)					
Allocation Transfer	\$0	\$0	\$0		
New Allocation	\$93,741	\$38,063	\$71,498	\$9,545	\$21,958
Prior Year Approved Carry Over	\$0	\$0	\$0	\$0	\$0
Prior Year Excess Funds	\$0	\$0	\$0	\$0	\$0
State Match	\$0	\$0	\$0	\$0	\$0
Prior Year Approved State Match C/O	\$0	\$0	\$0	\$0	\$0
Prior Year State Match Excess Funds	\$0	\$0	\$0	\$0	\$0
Local Public	\$18,144	\$6,990	\$13,859		
Local Private					
Participant Income	\$5			\$5	\$5
Income Other					
Supplemental Funds					
NSIP					
Allocation Total	\$111,890	\$45,053	\$85,357	\$9,550	\$21,963
Actual Contract Allocation (Entered by DoAS)	\$0	\$0	\$0	\$0	\$0

DOAS23AAA017
Sussex County
Agency Budget Plan Part II

Federal Fund Balance	\$0	\$0	\$0	\$0	\$0
State Match Fund Balance	\$0	\$0	\$0	\$0	\$0

Agency Budget Plan Part II

Funding Sources	Fund Totals	MOE Requirement	NSIP Approved Carry Over	NSIP Excess Funds	NSIP Fund Balance
New Funds	\$234,805				
Administrative - ARP (66)	\$0				
Administrative - CARES (54)	\$0				
Allocation Transfer	\$0				
New Allocation	\$234,805				
Prior Year Approved Carry Over	\$0				
Prior Year Excess Funds	\$0				
State Match	\$0				
Prior Year Approved State Match C/O	\$0				
Prior Year State Match Excess Funds	\$0				
Local Public	\$38,993				
Local Private	\$0	0			
Participant Income	\$15				
Income Other	\$0				
Supplemental Funds	\$0				
NSIP	\$0		0	0	00
Allocation Total	\$273,813				

Actual Contract Allocation (Entered by DoAS)	\$0
---	-----

Federal Fund Balance	\$0
State Match Fund Balance	\$0

DOAS23AAA017
 Sussex County
Agency Budget Plan Part II

Other Funding:

Funding Sources	FFCRA C1 Congregate meals - 49	FFCRA C2 Home Delivered Meals - 50	ADRC - COVID-19 ADMIN - 56	ADRC - COVID-19 - 55
New Funds	\$0	\$0	\$0	\$0
Administrative				
Allocation Transfer	\$0	\$0	\$0	\$0
New Allocation	\$0	\$0	\$0	\$0
Prior Year Approved Carry Over	\$0	\$0	\$0	\$0
Prior Year Excess Funds	\$0	\$0	\$0	\$0
State Match				
Prior Year Approved State Match C/O				
Prior Year State Match Excess Funds				
Local Public				
Local Private				
Participant Income		\$0		
Income Other				
Supplemental Funds				
NSIP				
Allocation Total	\$0	\$0	\$0	\$0
Actual Contract Allocation (Entered by DoAS)	\$0	\$0	\$0	\$0
Federal Fund Balance	\$0	\$0	\$0	\$0

DOAS23AAA017
Sussex County
Agency Budget Plan Part II

Funding Sources	Vaccine ADRC Covid-19 Supplement - 60	VAC5 Covid-19 Vaccines - 59	Expanding Public Health Workforce - 67	FUND TOTALS	CONTRACT TOTALS	Actual Allocation (Entered by DoAS)
New Funds	\$0	\$0	\$0	\$0	\$641,180	
Administrative				\$0	\$0	
Allocation Transfer				\$0	\$0	
New Allocation	\$0	\$0	\$0	\$0	\$641,180	
Prior Year Approved Carry Over	\$0	\$0	\$0	\$0	\$0	
Prior Year Excess Funds	\$0	\$0	\$0	\$0	\$0	
State Match				\$0	\$19,266	\$0
Prior Year Approved State Match C/O				\$0	\$0	
Prior Year State Match Excess Funds				\$0	\$0	
Local Public				\$0	\$916,804	
Local Private				\$0	\$68,584	
Income Client				\$0	\$97,619	
Income Other				\$0	\$0	
Supplemental Funds				\$0	\$61,656	\$0
NSIP				\$0	\$8,123	\$0
Allocation Total	\$0	\$0	\$0	\$0	\$1,813,232	
Actual Contract Allocation (Entered by DoAS)	\$0	\$0	\$0	\$0	\$0	
Federal Fund Balance	\$0	\$0	\$0	\$0	\$0	

Agency Budget Plan Part II

Total Funds From State:	\$730,225
Fund Balance:	\$0
Total New Funds:	\$730,225
Funds from Other Sources:	\$1,083,007
Total Funds Needed:	\$1,813,232

Schedule D - Officers and Directors List: Anthony Fasano

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

Officer 1:

First Name: Anthony
Last Name: Fasano
Title: Commissioner Director
Address 1: One Spring Street
Address 2:
City: Newton
State: New Jersey
Zip Code: 07860

Officer 2:

First Name: Chris
Last Name: Carney
Title: Deputy Commissioner Director
Address 1: One Spring Street
Address 2:
City: Newton
State: New Jersey
Zip Code: 07860

Officer 3:

First Name: Dawn
Last Name: Fantasia
Title: Commissioner
Address 1: One Spring Street
Address 2:
City: Newton
State: New Jersey
Zip Code: 07860

Officer 4:

First Name: Jill
Last Name: Space
Title: Commissioner
Address 1: One Spring Street
Address 2:
City: Newton
State: New Jersey
Zip Code: 07860

Schedule D - Officers and Directors List: Anthony Fasano

Officer 5:

First Name: Herbert

Last Name: Yardley

Title: Commissioner

Address 1: One Spring Street

Address 2:

City: Newton

State: New Jersey

Zip Code: 07860

Sussex County

Schedule G - Certification Regarding Debarment and Suspension

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

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

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

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

Name of Official certifying for Agency

Lorraine Hentz

Title

Director

Schedule H - Certification Regarding Lobbying

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

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

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

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

Name of Official certifying for Agency

Lorraine Hentz

Title

Director

Sussex County

Schedule J - Agency Minority Profile

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

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

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

() (✓)
Yes No

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

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

2. Is this agency serving a large minority population?

() (✓)
Yes No

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

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

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

- English
- Spanish
- French
- Creole
- Other

Schedule K - Certification Regarding Environmental Tobacco Smoke

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

Name of Official certifying for Agency

Lorraine Hentz

Title

Director

Sussex County

Schedule M - Certification Regarding Disclosure of Investment Activities in Iran**PART 1: CERTIFICATION**

APPLICANT / BIDDER MUST COMPLETE PART 1 BY CHECKING EITHER BOX.

FAILURE TO CHECK ONE OF THE BOXES WILL RENDER THE PROPOSAL NON-RESPONSIVE.

Pursuant to Public Law 2012, c. 25, any person or entity that submits a bid or proposal or otherwise proposes to enter into or renew a contract must complete the certification below to attest, under penalty of perjury, that the person or entity, or one of the person or entity's parents, subsidiaries, or affiliates, is not identified on a list (on the web at <http://www.state.nj.us/treasury/purchase/pdf/Chapter25List.pdf>) created and maintained by the New Jersey Department of the Treasury as a person or entity engaging in investment activities in Iran. If the Director finds a person or entity to be in violation of the principles which are subject of this law, s/he shall take action as may be appropriate and provided by law, rule or contract, including but not limited to, imposing sanctions, seeking compliance recovering damages, declaring the party in default and seeking debarment or suspension of the person or entity.

- I certify, pursuant to Public Law 2012, c. 25, that neither the bidder listed above nor any of the bidder's parents, subsidiaries, or affiliates is listed on the NJ Department of the Treasury's list of entities determined to be engaged in prohibited activities in Iran pursuant to P.L. 2012, c. 25 ("Chapter 25 List"). I further certify that I am the person listed above, or I am an officer or representative of the entity listed above and am authorized to make this certification on its behalf. I will skip Part 2 and sign and complete the Certification below.

OR

- I am unable to certify as above because the bidder and / or one or more of its parents, subsidiaries, or affiliates is listed on the Department's Chapter 25 list. I will provide a detailed, accurate and precise description of the activities in Part 2 below and sign and complete the Certification below. Failure to provide such will result in the proposal being rendered as nonresponsive and appropriate penalties, fines and / or sanctions will be assessed as provided by law.

PART 2: PLEASE PROVIDE FURTHER INFORMATION RELATED TO INVESTMENT ACTIVITIES IN IRAN

Using attached sheets, provide a detailed, accurate and precise description of the activities of the bidding person/entity, or one of its parents, subsidiaries or affiliates, engaging in the investment activities in Iran outlined above.

- I, being duly sworn upon my oath, hereby represent and state that the foregoing information and any attachments thereto to the best of my knowledge are true and complete. I attest that I am authorized to execute this certification on behalf of the above-referenced person or entity. I acknowledge that the State of New Jersey is relying on the information contained herein and thereby acknowledge that I am under a continuing obligation from the date of this certification through the completion of any contracts with the State to notify the State in writing of any changes to the answers of information contained herein. I acknowledge that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I recognize that I am subject to criminal prosecution under the law and that it will also constitute a material breach of my agreement(s) with the State of New Jersey and the State at its option may declare any contract(s) resulting from this certification void and unenforceable.

Schedule M - Certification Regarding Disclosure of Investment Activities in Iran

Name of Official certifying for Agency

Lorraine Hentz

Title

Director

Sussex County

Schedule I - Certification Sheet

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

Schedule I - Certification Sheet

Yes N/A I have read, understand, and will comply with the instructions received
with the grant application package.

Name of Official certifying for Agency

Lorraine Hentz

Title

Director

DOAS23AAA017
Sussex County
Required Attachments

N/A			Correction Needed	Attachment Approved
[]	ORGANIZATIONAL CHART	https://njsage.intelligent.com/_Upload/2807077_1995380-2022SeniorServicesOrganizationalChart121APRevised.ppt	<input type="checkbox"/>	[]
[]	CURRENT COUNTY FRINGE RATE (from County Treasurer)	https://njsage.intelligent.com/_Upload/2807077_1995309-FringeBenefitsRateLetter2023-Preliminarynon-TAG.pdf	<input type="checkbox"/>	[]
[✓]	<u>NJ CHARITIES REGISTRATION</u>		<input type="checkbox"/>	[]
[✓]	<u>PROOF OF NON PROFIT STATUS (501C3)</u>		<input type="checkbox"/>	[]
[✓]	CERTIFICATE OF INCORPORATION		<input type="checkbox"/>	[]
[✓]	CERTIFICATE OF EMPLOYEE INFORMATION REPORT (AA302)		<input type="checkbox"/>	[]
[]	STANDARDIZED BOARD RESOLUTIONS	https://njsage.intelligent.com/_Upload/2807077_1995303-2023StandardBoardResolutionForm.pdf	<input type="checkbox"/>	[]
[]	BUSINESS ASSOCIATES AGREEMENT	https://njsage.intelligent.com/_Upload/2807077_1995323-2023BAA.pdf	<input type="checkbox"/>	[]
[]	COPY OF INTEREST BEARING BANK ACCOUNT STATEMENT	https://njsage.intelligent.com/_Upload/2807077_1995377-LakelandBkCurrentFundSep-22BankStatement.pdf	<input type="checkbox"/>	[]
[✓]	PROOF OF INDIRECT RATE		<input type="checkbox"/>	[]
[]	PROGRAM INCOME STATEMENT	https://njsage.intelligent.com/_Upload/2807077_1995375-PROJECTINCOMEPolicy320.doc	<input type="checkbox"/>	[]
[]	AUDIT ENGAGEMENT LETTER	https://njsage.intelligent.com/_Upload/2807077_1995375-PROJECTINCOMEPolicy320.doc	<input type="checkbox"/>	[]

Sussex County

Required Attachments

rants.com/_Upload/28070
77_1995374-AuditEngagem
entLetter-2018-2022.pdf

<input type="checkbox"/>	STAFF RESUMES	https://njsage.intelligent.com/_Upload/2807077_1995373-SeniorServicesResumes1022.doc	<input type="checkbox"/>
<input checked="" type="checkbox"/>	SALARY RANGES		<input type="checkbox"/>
<input checked="" type="checkbox"/>	SALARY POLICY		<input type="checkbox"/>
<input type="checkbox"/>	TRAVEL POLICY	https://njsage.intelligent.com/_Upload/2807077_1995370-SussexCountyTravelPolicy.doc	<input type="checkbox"/>
<input type="checkbox"/>	TELEPHONE POLICY	https://njsage.intelligent.com/_Upload/2807077_1995369-SussexCountyTelephonePolicy.pdf	<input type="checkbox"/>
<input checked="" type="checkbox"/>	MAINTENANCE AGREEMENTS		<input type="checkbox"/>
<input checked="" type="checkbox"/>	LEASE OR MORTGAGE DOCUMENT		<input type="checkbox"/>
<input type="checkbox"/>	INSURANCE POLICY	https://njsage.intelligent.com/_Upload/2807077_1995366-GRANTAPPLICATIONSCOI-NJDEPTHUMANSVC2022.pdf	<input type="checkbox"/>

DOAS23AAA017
Sussex County
Required Attachments

<input checked="" type="checkbox"/>	COST ALLOCATION PLAN		<input type="text"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	ESTIMATES FOR EQUIPMENT		<input type="text"/>	<input type="checkbox"/>
<input type="checkbox"/>	COMPUTER SECURITY POLICY	https://njsage.intelligent.com/_Upload/2807077_1995363-InternetAUP-2002.pdf	<input type="text"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	CONSULTANT AGREEMENTS		<input type="text"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	STATEMENT OF GROSS REVENUE OR		<input type="text"/>	<input type="checkbox"/>
<input type="checkbox"/>	ANNUAL AUDIT REPORT	https://njsage.intelligent.com/_Upload/2807077_1995360-CountyofSussex2021Audit.pdf	<input type="text"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	TAX CLEARANCE CERTIFICATE		<input type="text"/>	<input type="checkbox"/>

Miscellaneous Attachments

Description

https://njsage.intelligrants.com/_Upload/2812983_1993864-Allwayscaringhousekeeping.pdf

Description

https://njsage.intelligrants.com/_Upload/2812983_1993866-allwayscaringIIIE.pdf

Description

https://njsage.intelligrants.com/_Upload/2812983_1993868-APSwavier.pdf

Description

https://njsage.intelligrants.com/_Upload/2812983_1993870-AsstTransportwaiver.pdf

Description

https://njsage.intelligrants.com/_Upload/2812983_1993872-Caremanagementwaiver.pdf

Description

https://njsage.intelligrants.com/_Upload/2812983_1993874-Congregatewaiver.pdf

Description

https://njsage.intelligrants.com/_Upload/2812983_1993876-SeniorTransportationwaiver.pdf

Description

https://njsage.intelligrants.com/_Upload/2812983_1993879-SocRecwaiver.pdf

Description

Description

DHS Account Information: 75308002428 2021

Name of Grantee: Sussex County

Organization Address

Sussex County
One Spring Street
Newton, NJ 07860-2091
Phone: (973) 579-0250
Fax: (973) 579-0259

Email Address:

Federal Tax Identification Number: 226002477

Total Grant

Vendor Number: 226002477-99

Award

\$557,861.00

Vendor Unit: SUSSEX CO TREASURER
ACH ELECTRONIC PAYMENT

Vendor Unit Address: COUNTY ADMIN BLDG
ONE SPRING STREET 1ST FLR
NEWTON, NJ 07860

Total Grant

Grant Order Number 054 75308002428 FY 2021

Order(s) Amount

\$486,164

Account Number LINE # - FUND - AGCY - ORG - APU - OBJ - REPCAT - CFDA - PROGNAME
[01]-[100]-[054]-[7530]-[112]-[6110]-[MEDA]-[93.778]-[FFP]

Amount

\$71,697

[✓] CFS
Approved

DHS Account Information: 75308002449 2022

Name of Grantee: Sussex County

Organization Address

Sussex County
One Spring Street
Newton, NJ 07860-2091
Phone: (973) 579-0250
Fax: (973) 579-0259

Email Address:

Federal Tax Identification Number: 226002477

Total Grant

Award

\$557,861.00

Vendor Number: 226002477-99

Vendor Unit: SUSSEX CO TREASURER
ACH ELECTRONIC PAYMENT
Vendor Unit Address: COUNTY ADMIN BLDG
ONE SPRING STREET 1ST FLR
NEWTON, NJ 07860

Total Grant

Order(s) Amount

\$140,601

Grant Order Number 054 75308002449 FY 2022

LINE # - FUND - AGCY - ORG - APU - OBJ - REPCAT - CFDA - PROGNAME

Amount

DHS Account Information: 75308002449 2022

Account Number	[01]-[100]-[054]-[7530]-[058]-[6110]-[0001]-[93.044]-[IIIB]	\$78,227	[✓] CFS Approved
	[02]-[100]-[054]-[7530]-[056]-[6110]-[22C1]-[93.045]-[IIIC1]	\$69,678	[✓] CFS Approved
	[03]-[100]-[054]-[7530]-[111]-[6110]-[0001]-[93.045]-[IIIC2]	\$41,755	[✓] CFS Approved
	[04]-[100]-[054]-[7530]-[060]-[6110]-[0001]-[93.043]-[IIID]	\$5,998	[✓] CFS Approved
	[05]-[100]-[054]-[7530]-[062]-[6110]-[22E]-[93.052]-[IIIE]	\$27,417	[✓] CFS Approved
	[06]-[100]-[054]-[7530]-[038]-[6110]-[]-[]-[St Match]	\$18,584	[✓] CFS Approved
	[07]-[100]-[054]-[7530]-[066]-[6110]-[MEDB]-[93.778]-[Medicaid]	\$5,739	[✓] CFS Approved
	[08]-[100]-[054]-[7530]-[039]-[6110]-[0001]-[93.053]-[NSIP]	\$8,123	[✓] CFS Approved
	[09]-[100]-[054]-[7530]-[066]-[6110]-[MEDA]-[93.778]-[FFP]	\$0	
	[10]-[100]-[054]-[7530]-[036]-[6110]-[]-[]-[SHDM]	\$13,872	[✓] CFS Approved
	[11]-[491]-[054]-[7530]-[009]-[6110]-[]-[]-[SWHDM]	\$8,335	[✓] CFS Approved
	[12]-[491]-[054]-[7530]-[009]-[6110]-[]-[]-[SHTP]	\$6,835	[✓] CFS Approved
	[13]-[100]-[054]-[7530]-[036]-[6110]-[]-[]-[APS 01]	\$37,066	[✓] CFS Approved
	[14]-[100]-[054]-[7530]-[038]-[6110]-[]-[]-[APS 02]	\$4,649	[✓] CFS Approved
	[15]-[491]-[054]-[7530]-[009]-[6110]-[]-[]-[APS 03]	\$10,994	[✓] CFS Approved
	[16]-[100]-[054]-[7530]-[036]-[6110]-[]-[]-[SASS]	\$7,807	[✓] CFS Approved
	[17]-[100]-[054]-[7530]-[038]-[6110]-[]-[]-[SUPP 01]	\$0	
	[18]-[100]-[054]-[7530]-[036]-[6110]-[]-[]-[SUPP 02]	\$0	
	[19]-[495]-[054]-[7530]-[001]-[6110]-[]-[]-[SUPP 03]	\$0	
	[20]-[491]-[054]-[7530]-[009]-[6110]-[]-[]-[SUPP 04]	\$61,066	[✓] CFS Approved

DOAS23AAA017

Sussex County

DHS Account Information: 75308002449 2022

[21]-[100]-[054]-[7530]-[038]-[6110]-[]-[]-[Care Coor]

\$11,115

[✓] CFS
Approved

DOAS23AAA017

Sussex County

DHS Account Information: 75308002449 2022

[23]-[100]-[054]-[7530]-[130]-[6110]-[0001]-[93.045]-[CAA HDM]

[24]-[100]-[054]-[7530]-[134]-[6110]-[0001]-[93.047]-[CRRSA APS]

DHS Account Information: 75308002520 2023

Name of Grantee: Sussex County

Organization Address

Sussex County
One Spring Street
Newton, NJ 07860-2091
Phone: (973) 579-0250
Fax: (973) 579-0259

Email Address:

Federal Tax Identification Number: 226002477

Total Grant

Award

\$1,607,612.00

Vendor Number: 226002477-99

Vendor Unit: SUSSEX CO TREASURER
ACH ELECTRONIC PAYMENT
Vendor Unit Address: COUNTY ADMIN BLDG
ONE SPRING STREET 1ST FLR
NEWTON, NJ 07860

Total Grant

Order(s) Amount

\$488,957

Grant Order Number 054 75308002520 FY 2023

LINE # - FUND - AGCY - ORG - APU - OBJ - REPCAT - CFDA - PROGNAME

Amount

DHS Account Information: 75308002520 2023**Account Number**

[01]-[100]-[054]-[7530]-[038]-[6110]-[]-[]-[St Match]	\$0
[02]-[10]-[054]-[7530]-[039]-[6110]-[0001]-[93.053]-[NSIP]	\$0
[03]-[100]-[054]-[7530]-[112]-[6110]-[MEDA]-[93.778]-[FFP]	\$0
[04]-[100]-[054]-[7530]-[036]-[6110]-[]-[]-[SHDM]	\$5,614
[05]-[491]-[054]-[7530]-[009]-[6110]-[]-[]-[SWHDM]	\$4,665
[06]-[491]-[054]-[7530]-[009]-[6110]-[]-[]-[SHTP]	\$6,858
[07]-[100]-[054]-[7530]-[036]-[6110]-[]-[]-[APS 04]	\$18,219
[08]-[491]-[054]-[7530]-[009]-[6110]-[]-[]-[APS 05]	\$14,879
[09]-[100]-[054]-[7530]-[036]-[6110]-[]-[]-[SASS]	\$5,384
[10]-[491]-[054]-[7530]-[009]-[6110]-[]-[]-[Supp 05]	\$590
[11]-[100]-[054]-[7530]-[038]-[6110]-[]-[]-[Care Coor]	\$12,695
[12]-[100]-[054]-[7530]-[036]-[6110]-[]-[]-[CBSP]	\$0

[] **CFS**
Approved