



**DEADLINE:** Application must be postmarked or delivered by **November 8, 2017**. Handwritten applications will not be accepted. Documents can be submitted hard copy or electronic on USB drive/CD-ROM. Please do not modify the fonts, type size or margins of this document.

## Aid to Non-Profits Grant Application Form

### 1. ORGANIZATION INFORMATION

Organization Name: Areawide Council on Aging of Broward County, Inc.  
Address: 5300 Hiatus Road, Sunrise, Florida 33351  
Contact Person: Edith Lederberg Title: Executive Director  
Telephone: 954-745-9567 Email: lederbee@adrcbroward.org  
Federal Identification Number: 59-1529419 DUNS: 039-652-961  
National Taxonomy of Exempt Entities Code(s) (NTEE-CC): Example: Children and Youth Services(P30)  
Senior Centers (P81)

### 2. REQUEST INFORMATION

Project/Program Name: 2018 Fair Shaire  
Requested Funding Amount: \$21,264  
Will these funds be used provide matching for a different grant? ☒ Yes ☐ No  
If yes, please provide the following:  
• Granting Agency: Department of Elder Affairs  
• Grant Name: Older Americans Act (OAA) and Community Care for the Elderly (CCE)  
• \$ Value of Match: \$212,640 Match Ratio (City Grant to Match): 1:9

### 3. PROJECT/PROGRAM DETAILS

a. Briefly describe your organization.

We are the federally and state mandated prime planning, coordinating, funding, and advocacy body for services benefitting the multiple needs of Older Americans, 60 years of age and older, who reside in Broward County. Our main goals are: to delay or prevent the institutionalization of elders; and to assure their merited right to life, with dignity, during their retirement years.

- b. Explain the objectives of your project.

We are one of two Broward Programs, mandated, by Federal and State Legislation, to raise a local 10% match for appropriated funding.

Services are provided by the Aging and Disability Resource Center (ADRC) and 23 subcontracted providers throughout Broward County, including but not limited to Broward County Elderly and Veterans Services Division and Meals on Wheels of South Florida. Our prime objective is accomplished by funding the following programs activities: Adult Day Care; Case Management; Chore; Counseling; Emergency Alert Response; Health Support; Home Repair; In-Home Services; Legal Assistance; Meals on Wheels; Recreation; Alzheimer's Respite; and Transportation.

- c. Provide a detailed scope of services explaining what will be accomplished with the funds requested.

We provide a wide variety of services to Oakland Park Residents. In 2016, the total dollar value for meals, in-home legal, adult day care, Alzheimer's, and other services, through our project network, totaled \$175,747. We have determined to place the City's match into both in-home and site meals since the community's need is extensive, and our Meals-on-Wheels Project is the prime source of nutriment for the municipality's aging population. In addition, our other services, as listed on the attached Fair Share Report are not duplicated by any other entity.

#### 4. TARGET POPULATION

- a. Define the target population for your project. Please be specific and include demographic information on the population served, geographic location, etc.

The targeted populations in Oakland Park are elders who are 60+ and Alzheimer residents 18+. The number of unduplicated Oakland Park Residents, served in 2016, was 105. The unduplicated number of clients served county wide in 2016 was 12,274. Many received multiple services through our project network. In 2018, we are hoping to provide services to at least the same number of Oakland Park Residents, as in 2016. The total amount of money spent on services for Oakland Park Residents approximated \$175,747.

- b. Estimate the number Oakland Park residents to be served: 105+

#### 5. EVALUATION

- a. Describe how you will evaluate the success of your project below. List the quantitative measurements you will use to evaluate your project and explain how you will obtain, verify, and report them.

We utilize an outcomes evaluation model, designed by the Department of Elder Affairs (DOEA). This tool assists the agency in measuring the impact of efforts in reaching the target population. We also utilizes satisfaction surveys. In addition, baseline data (demographics of clients served) are captured by our internal system, Client Information and Referral Tracking System (CIRTS). This information is employed to develop benchmarks, and document trends, as well as show progress of the agency in reaching the target population. The methodology also is employed to determine unduplicated client counts.

**6. CERTIFICATION**

If this application is approved for funding, the organization agrees to comply with all required Federal, state and local laws and regulations. The organization confirms that it is fully capable of fulfilling the obligations as stated in this proposal and in any attachments or documents included with this application.

As a duly authorized representative of this organization, I submit this application to the City of Oakland Park and verify that the information herein is true, accurate and complete.

**Edith Lederberg**

Name (Printed)

*Edith Lederberg*

Signature

**Executive Director**

Title

*10/20/17*

Date