

**RESOLUTION OF THE
HEALTH, EDUCATION AND HUMAN SERVICES COMMITTEE
OF THE NAVAJO NATION COUNCIL**

23rd NAVAJO NATION COUNCIL - First Year, 2015

AN ACTION

**RELATING TO HEALTH, EDUCATION AND HUMAN SERVICES COMMITTEE; APPROVING
AND RECOMMENDING TO THE BUDGET AND FINANCE COMMITTEE THE PROPOSED
FISCAL YEAR 2016 BUDGET FOR THE NAVAJO DEPARTMENT OF HEALTH**

BE IT ENACTED:

Section One. Findings

- A. The Health, Education and Human Services Committee is a standing committee of the Navajo Nation Council. 2 N.N.C. § 400 (A).
- B. The Health, Education and Human Services Committee is the oversight committee for the Division of Health, now the Department of Health, 2 N.N.C. § 401 (C) (1); see also CO-50-14.
- C. Each oversight committee shall review and make recommendations to the Budget and Finance Committee concerning the budget in accordance with the annual budget instructions. 12 N.N.C. § 840 (A).
- D. The Health, Education and Human Services Committee held a budget hearing and took budget testimony regarding the Navajo Nation Department of Health's Fiscal Year 2016 Budget. 12 N.N.C. § 840 (A).
- E. The Health, Education and Human Services Committee recommends to the Budget and Finance Committee a fiscal year budget for the Department of Health. 12 N.N.C. § 840 (A).

**SECTION TWO. APPROVING AND RECOMMENDING TO THE BUDGET AND FINANCE
COMMITTEE THE PROPOSED FISCAL YEAR 2016 BUDGET FOR THE NAVAJO
DEPARTMENT OF HEALTH**

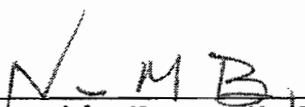
- A. The Health, Education and Human Services Committee hereby acknowledges the proposed Navajo Nation Fiscal Year (FY) 2016 Budget for the Navajo Department of Health, recommended by the President of the Navajo Nation, as provided on the Fund Type Budget Summary, attached as Exhibit "A".
- B. The Health, Education and Human Services Committee requests that the Budget and Finance Committee and the Navajo Nation Council adopt the changes to the Budget, as set forth in the General Fund

Comparative Summary and Recommended Changes to the General Fund Budget forms, attached as Exhibits "B" and "C", respectively.

- C. The Health, Education and Human Services Committee authorizes the Committee Chairperson or Vice-Chairperson to meet and negotiate with the Budget and Finance Committee on these recommendations.

C E R T I F I C A T I O N

I hereby certify that the foregoing resolution was duly considered by the Health, Education and Human Services Committee of the Navajo Nation Council at a duly called meeting at Window Rock, Navajo Nation (Window Rock), at which a quorum was present and that the same was passed by a vote of 4 in favor and 0 opposed, this 13th day of August, 2015.



Honorable Norman M. Begay, Vice-Chairperson
Health, Education and Human Services Committee

Amendment 1: Attach Exhibit A,B,C; Page 2, Line 17, insert the following new letter "C" as stated below:

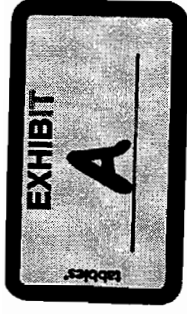
- C. The Health, Education and Human Services Committee requests that the Budget and Finance Committee and the Navajo Nation Council acknowledges the Legislative Concerns as attached as Exhibit D.
- D. The Health, Education and Human Services Committee requests the Budget and Finance Committee and the Navajo Nation Council acknowledge the unmet needs as set forth in Exhibit E.

Renumber the remaining section(s).

Motion: Honorable Nelson BeGaye
Second: Honorable Nathaniel Brown
Vote: 4 in favor: 0 Opposed and 0 Abstain

Main Motion

Motion: Honorable Nelson BeGaye
Second: Honorable Herman Daniels, Jr.
Vice-Chairperson not voting



**Department of Health
Fiscal Year 2016 Budget Summary by Fund Type**

Fiscal Year 2015			Fiscal Year 2016 Navajo Nation Funds						
Business Unit	Program	Navajo Nation Council Approved Budget	Branch Chief's Proposed General Fund Budget	Indirect Cost Fund	Proprietary Fund	Fiduciary Fund	Special Revenue Fund - Internal	Special Revenue Fund - External	Total
113001	Department of Health - Admin.	75,181	75,181	111,988				31,463,886	31,651,055
113003	Uranium Workers' Project	414,047	414,047						414,047
113004	Dilkon Health Center Str Comm/Plng	81,470	81,470						81,470
113005	Office of Environmental Health	46,500	46,500						46,500
113006	Food Distribution Program	1,015,162	1,015,162					3,100,879	4,116,041
113010	Navajo Area Agency on Aging	182,470	182,470			274,308		2,206,731	2,663,509
113011	NAAA - Chinle Agency	1,940,543	1,922,259						1,922,259
113012	NAAA - Ft. Defiance Agency	2,237,601	2,183,575						2,183,575
113013	NAAA - Crownpoint Agency	2,686,263	2,596,626						2,596,626
113014	NAAA - Tuba City Agency	2,109,134	2,087,294						2,087,294
113015	NAAA - Shiprock Agency	1,911,106	1,863,234						1,863,234
113018	Kayenta Health Center Steering	85,298	85,298						85,298
113020	Pueblo Pintado Steering Comm Plng	85,178	85,178						85,178
K090102	W.I.C. Program	0						9,680,069	9,680,069
K100501	B&C Cancer Prevention	0						859,371	859,371
K090570	Special Diabetes Program	0						6,483,989	6,483,989
Total		12,869,953	12,638,294	111,988	0	274,308	0	53,794,925	66,819,515

The Navajo Nation General Fund Comparative Summary

Division: Department of Health

TOTAL:

The Navajo Nation Recommended Changes to the General Fund Budget

Department of Health

EXHIBIT C

**The Navajo Nation
Recommended Conditions of Appropriations and Legislative Concerns**

Branch: _____ Executive

Division: Department of Health

Business Unit #	Program Title	Brief Narrative of Recommended Condition of Appropriation (COA) or Legislative Concern (LC)
113010	NAAA - Administration	The Navajo Area Agency on Aging (NAAA) is currently still operating under sanctions. Pursuant to 12 N.N.C. § 9, the program, division, enterprise or entity which has been sanctioned must demonstrate to the Auditor General that the corrective action plan has been implemented. The Health, Education and Human Services Committee directs the NAAA to work with the Auditor General to ensure that the corrective action plan has been fully implemented such that the Auditor General may recommend lifting of sanctions.

**The Navajo Nation
Recommended Unmet Needs Budgets**

Branch: _____

Executive _____

Division: Department of Health

(A) Business Unit Number	(B) Program Title	(C) Amount of Unmet Need	(D) Explanation of Recommended UNMET NEEDS to the Fiscal Year 2015 General Fund Budget
113011	NAAA- Chinle Agency	599,086	Restore reduced hours to 80 hours per pay period for all staff and meeting Operating Cost shortfall
113012	NAAA - Ft. Defiance Agency	262,609	Restore reduced hours to 80 hours per pay period for all staff and meeting Operating Cost shortfall
113013	NAAA - Crownpoint Agency	478,221	Restore reduced hours to 80 hours per pay period for all staff and meeting Operating Cost shortfall
113014	NAAA - Tuba City Agency	350,532	Meet Operating Cost shortfalls.
113015	NAAA - Shiprock Agency	208,639	Restore reduced hours to 80 hours per pay period for all staff and meeting Operating Cost shortfall
K090570	Navajo Nation Special Diabetes Project	46,430	To pay disallowable costs to vendor.
113006	Food Distribution Program	35,554	To pay Eligibility Technicians who have not been paid grade step increases due to oversight by program.
TOTAL:		1,981,071	

**Executive Branch Budget Review
Additional/Unmet Needs Request
Division/Office: HEALTH**

Priority No.	Executive Branch Priorities Description (1 to 5)	Additional Funds Request (BU/Program)	Purpose/Justification
1	NAAA - Chinle Agency	599,086	Restore reduced hours to 80 hours per pay period for all staff and meet Operating Cost shortfalls.
2	NAAA - Ft. Defiance Agency	262,609	Restore reduced hours to 80 hours per pay period for all staff and meet Operating Cost shortfalls.
3	NAAA - Crownpoint Agency	478,221	Restore reduced hours to 80 hours per pay period for all staff and meet Operating Cost shortfalls.
4	NAAA - Tuba City Agency	350,532	Meet Operating Cost shortfalls.
5	NAAA - Shiprock Agency	208,639	Restore reduced hours to 80 hours per pay period for all staff and meet Operating Cost shortfalls.
6	Navajo Special Diabetes Project	46,430	To pay disallowable cost to vendor.
7	Food Distribution Program	35,554	To pay Eligibility Technicians who have not been paid grade step increases due to oversight by program
TOTAL:		1,981,071	

THE NAJON NATION PROGRAM BUDGET SUMMARY

PART I. Business Unit No.: 113011		Program Title: Navajo Area Agency on Aging - Chinle Agency		Division/Branch: Health Executive	
Prepared By: Jackie Y Burbank		Phone No.: (928)674-2100		Email Address: jackieyburbank@yahoo.com	

PART II. FUNDING SOURCE(S)		Fiscal Year Term	Amount	% of Total
General Fund-Unmet Needs		10/01/15-09/30/16	599,086	100%

PART III. BUDGET SUMMARY				
Fund Type Code	Original Budget	Proposed Budget	Difference (Column B - A)	
2001 Personnel Expenses	424,356	424,356	424,356	
3000 Travel Expenses	15,000	15,000	15,000	
3500 Meeting Expenses			0	
4000 Supplies			0	
5000 Lease and Rental			0	
5500 Communications and Utilities	40,000	40,000	40,000	
6000 Repairs and Maintenance	117,000	117,000	117,000	
6500 Contractual Services			0	
7000 Special Transactions	2,730	2,730	2,730	
8000 Public Assistance			0	
9000 Capital Outlay			0	
9500 Matching Funds			0	
9500 Indirect Cost			0	
TOTAL	0	599,086	599,086	

PART IV. POSITIONS AND VEHICLES	
(D)	(E)
Total # of Positions Budgeted:	39
Total # of Permanently Assigned Vehicles:	

TOTAL:	\$599,086	100%
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PART V. I HEREBY ACKNOWLEDGE THAT THE INFORMATION CONTAINED IN THIS BUDGET PACKAGE IS COMPLETE AND ACCURATE.		
SUBMITTED BY: Program Manager's Printed Name and Signature / Date <i>Lucinda Martin</i> 8/12/15 Lucinda Martin, Acting Health Services Administrator		APPROVED BY: Division Director/Branch Chief's Printed Name and Signature / Date Ramona Antone-Nez, Acting Executive Director

PROGRAM BUDGET SUMMARY

FY 2011

PART I. PROGRAM INFORMATION: Business Unit No.: 113011 Program Name/Title: Navajo Area Agency on Aging - Chinle Agency																									
PART II. PLAN OF OPERATION REFERENCE/LEGISLATED PROGRAM PURPOSE: GSCO-82-96. The purpose of the Navajo Area Agency on Aging program is to provide meals, transportation, health, personal, social, recreational, and referral support and services to eligible Navajo individuals in coordination with other tribal and non-tribal agencies / entities.																									
PART III. PROGRAM PERFORMANCE CRITERIA:																									
1. Program Performance Area: Programmatic (Data) Reports Goal Statement: Submit to Navajo Area Agency on Aging administration by the sixth business day of each month.	<table border="1"> <thead> <tr> <th colspan="2">1st QTR</th> <th colspan="2">2nd QTR</th> <th colspan="2">3rd QTR</th> <th colspan="2">4th QTR</th> </tr> <tr> <th>Goal</th> <th>Actual</th> <th>Goal</th> <th>Actual</th> <th>Goal</th> <th>Actual</th> <th>Goal</th> <th>Actual</th> </tr> </thead> <tbody> <tr> <td>5</td> <td></td> <td>5</td> <td></td> <td>5</td> <td></td> <td>5</td> <td></td> </tr> </tbody> </table>	1st QTR		2nd QTR		3rd QTR		4th QTR		Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual	5		5		5		5	
1st QTR		2nd QTR		3rd QTR		4th QTR																			
Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual																		
5		5		5		5																			
2. Program Performance Area: Staff Development and Training Goal Statement: Provide training for 43 staff to enhance knowledge and skills for their respective jobs.	<table border="1"> <tbody> <tr> <td>11</td> <td></td> <td>11</td> <td></td> <td>11</td> <td></td> <td>10</td> <td></td> </tr> </tbody> </table>	11		11		11		10																	
11		11		11		10																			
3. Program Performance Area: Caregiver/Housekeeping/Providers Goal Statement: Acquire 3 Caregiver Providers per quarter.	<table border="1"> <tbody> <tr> <td>3</td> <td></td> <td>3</td> <td></td> <td>3</td> <td></td> <td>3</td> <td></td> </tr> </tbody> </table>	3		3		3		3																	
3		3		3		3																			
4. Program Performance Area: Meal Service Goal Statement: Provide Home Delivered and Congregate meals to participants.	<table border="1"> <tbody> <tr> <td>29,706</td> <td></td> <td>29,706</td> <td></td> <td>29,706</td> <td></td> <td>29,706</td> <td></td> </tr> </tbody> </table>	29,706		29,706		29,706		29,706																	
29,706		29,706		29,706		29,706																			
5. Program Performance Area: Senior Center Monitoring Goal Statement: Four site monitoring evaluations per quarter to reduce deficiencies and to achieve compliance.	<table border="1"> <tbody> <tr> <td>4</td> <td></td> <td>4</td> <td></td> <td>4</td> <td></td> <td>4</td> <td></td> </tr> </tbody> </table>	4		4		4		4																	
4		4		4		4																			
PART IV. I HEREBY ACKNOWLEDGE THAT THE ABOVE INFORMATION HAS BEEN THOROUGHLY REVIEWED. <i>Lucinda Martin</i> Lucinda Martin, Acting Health Services Administrator Program Manager's Printed Name and Signature/Date <i>Ramona Anlone-Nez</i> Ramona Anlone-Nez, Acting Executive Director Division Director/Branch Chief's Printed Name and Signature / Date																									

THE NATION PROGRAM BUDGET SUMMARY

PART I. PROGRAM INFORMATION:			
Program Name/Title:		Business Unit No.: 113011	
Navajo Area Agency on Aging - Chinle Agency			
PART II. DETAILED BUDGET:			
(A)	(B)	(C)	(D)
Object Code (LOD 6)	Object Code Description and Justification	Total by DETAILED Object Code	Total by MAJOR Object Code
2001 PERSONNEL EXPENSES			
2110	Regular 2120 39 Regular Full-Time positions 291,453	291,453	424,356
2900	Fringe Benefits 2900 \$2191,453 x 45.60% 132,903	132,903	
3000 TRAVEL EXPENSES			
Monthly mileage and fleet rental.			
3110	Fleet 3111 Monthly/Permi: To pay lease cost for Agency Office vehicle \$ 4,750.00 3113 Mileage for Agency Office vehicle \$ 10,000.00 5% Sales Tax \$ 250.00 Total \$ 5,000.00	5,000	15,000
5500 COMMUNICATIONS & UTILITIES			
5570	Internet 5600 Internal Services for 3 Senior Centers & Agency Office \$ 4,000.00	4,000	40,000
5710	Energy 5720 Electric \$ 15,000.00 5730 Natural Gas \$ 5740 Propane \$ 21,000.00	36,000	
TOTAL		479,356	479,356

THE NATION

PROGRAM BUDGET SUMMARY

Program Name/Title: Navajo Area Agency on Aging - Chinle Agency		Business Unit No.: 113011	
PART II. DETAILED BUDGET:			
(A) Object Code (LOD 6)	(B) Object Code Description and Justification	(C) Total by DETAILED Object Code	(D) Total by MAJOR Object Code
6020	6000 REPAIRS & MAINTENANCE Annual repair & maintenance fees, pest control and waste disposal for Senior Centers and Agency administration. Supplies 6050 Building R&M Services for 3 Senior Centers \$ 114,000.00 6250 Waste Disposal \$ 3,000.00	114,000 3,000	117,000
7710	7000 SPECIAL TRANSACTIONS Employee training fees and required premiums. Insurance Premiums 7765 Policy Payment (General Liability) \$424,356 / 100 x .19 = \$ 806 7767 Workers Comp (less fringe) \$291,453 / 100 x .66 \$ 1,924	2,730	2,730
TOTAL		119,730	119,730
PART I. PROGRAM INFORMATION:			
Program Name/Title: Navajo Area Agency on Aging - Chinle Agency		Business Unit No.: 113011	

THE NATION
SUMMARY OF CHANGES TO BUDGETED POSITIONS

PART I. PROGRAM INFORMATION:								
Program Name/Title: Navajo Area Agency on Aging - Chinle Agency				Business Unit No.: 113011				
PART II. PERSONNEL/POSITION CHANGES:								
(A) Type of Change	(B) Sub Acct Object Code	(C) Position Number	(D) Job Type / Class Code	(E) Position Title	(F) Employee ID No. or Vacant	(G) Salary	(H) Fringe Benefit	(I) Total (Col. G + H)
Prorated	1004	153604	3824	SENIOR CENTER SUPERVISOR	12233	6,614	3,016	9,630
Prorated	1005	153608	3824	SENIOR CENTER SUPERVISOR	12944	6,614	3,016	9,630
Prorated	1006	152834	3824	SENIOR CENTER SUPERVISOR	10073	6,614	3,016	9,630
Prorated	1007	153645	3824	SENIOR CENTER SUPERVISOR	189364	6,236	2,844	9,080
Prorated	1008	158922	3824	SENIOR CENTER SUPERVISOR	15307	6,236	2,844	9,080
Prorated	1009	157499	3824	SENIOR CENTER SUPERVISOR	14642	6,614	3,016	9,630
Prorated	1010	150445	3824	SENIOR CENTER SUPERVISOR	14697	6,614	3,016	9,630
Prorated	1012	156477	3824	SENIOR CENTER SUPERVISOR	153577	6,236	2,844	9,080
Prorated	1014	153607	3824	SENIOR CENTER SUPERVISOR	11983	6,236	2,844	9,080
Prorated	1015	233640	3849	COOK	48561	4,426	2,018	6,444
Prorated	1016	233654	3849	COOK	11630	4,697	2,142	6,839
Prorated	1017	233653	3849	COOK	12967	4,697	2,142	6,839
Prorated	1018	212835	3849	COOK	14439	4,426	2,018	6,444
Prorated	1020	233656	3849	COOK	14344	4,559	2,079	6,638
Prorated	1021	233655	3849	COOK	165514	4,426	2,018	6,444
Prorated	1022	233630	3849	COOK	205933	4,426	2,018	6,444
Prorated	1023	238756	3849	COOK	12280	4,426	2,018	6,444
Prorated	1024	230578	3849	COOK	12883	4,697	2,142	6,839
Prorated	1025	276478	3849	COOK	256389	4,426	2,018	6,444
Prorated	1026	278247	3849	COOK	153547	4,426	2,018	6,444
Prorated	1027	233562	4144	DRIVER	12491	4,426	2,018	6,444
PAGE TOTAL:						112,072	51,105	163,177

THE NATION
SUMMARY OF CHANGES TO BUDGETED POSITIONS

PART I. PROGRAM INFORMATION:									
Program Name/Title: Navajo Area Agency on Aging - Chinle Agency					Business Unit No.: 113011				
PART II. PERSONNEL/POSITION CHANGES:									
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	
Type of Change	Sub Acct Object Code	Position Number	Job Type / Class Code	Position Title	Employee ID No. or Vacant	Salary	Fringe Benefit	Total (Col. G + H)	
Prorated	1028	233577	4144	DRIVER	233941	4,426	2,018	6,444	
Prorated	1029	233566	4144	DRIVER	14771	4,559	2,079	6,638	
Prorated	1030	233563	4144	DRIVER	10368	4,426	2,018	6,444	
Prorated	1032	239943	4144	DRIVER	11435	4,426	2,018	6,444	
Prorated	1033	233559	4144	DRIVER	14716	4,697	2,142	6,839	
Prorated	1034	233584	4144	DRIVER	14542	4,426	2,018	6,444	
Prorated	1036	230577	4144	DRIVER	313105	4,426	2,018	6,444	
Prorated	1037	276479	4144	DRIVER	306315	4,426	2,018	6,444	
Prorated	1038	278248	4144	DRIVER	10389	4,426	2,018	6,444	
Prorated	1040	153386	3824	SENIOR CENTER SUPERVISOR	12963	6,614	3,016	9,630	
Prorated	1041	151123	3824	SENIOR CENTER SUPERVISOR	15288	6,236	2,844	9,080	
Prorated	1042	273388	3849	COOK	12548	4,838	2,206	7,044	
Prorated	1043	273390	4144	DRIVER	12131	4,426	2,018	6,444	
Prorated	1044	157099	3824	SENIOR CENTER SUPERVISOR	12723	6,236	2,844	9,080	
Prorated	1045	157098	3824	SENIOR CENTER SUPERVISOR	161397	6,236	2,844	9,080	
Prorated	1046	204888	3849	COOK	181809	4,426	2,018	6,444	
Prorated	1047	204889	3849	COOK	153472	4,426	2,018	6,444	
Prorated	1053	242932	0 599	UNCLASSIFIED TITLE	VACANT	4,426	2,018	6,444	
PAGE TOTAL:						88,102	40,175	128,277	

**THE NAVAJO NATION
SUPPLEMENTAL FUNDING PROPOSAL SUMMARY**

PART I. Business Unit No.: 113011 **Program Title:** Navajo Area Agency on Aging - Chinle Agency
Division/Branch: Health **Amount Requested:** \$ 683,136.00 **Phone No.:** (928) 674-2100
Prepared By: Jackie Y. Burbank **Email Address:** j.burbank@ndoh.org

PART II. REASON FOR REQUEST AND STATEMENT OF NEED:

We are requesting for additional funding to re-instate the employee hours back to 2080 as directed by President Begaye. Chinle Agency is in need of \$683,136.00 to effectively operate and adequately staff our 15 Senior Centers. We are requesting additional funding to fund six (6) new positions for the Chinle Agency: Whippoorwill Senior Center Supervisor, Rock Point Driver, Cottonwood Driver, Tsaille Driver, Round Rock Cook and Round Rock supervisor. Round Rock Chapter has passed a resolution requesting the center to be reopen.
Whippoorwill Senior Center is in dire need of a full time supervisor to monitor staff, activities and correct OEH findings.
Drivers are needed at Cottonwood, Tsaille, and Rock Point to adequately meet the needs of elders.

PART III. SCOPE OF WORK/METHODOLOGY

This allocation will be used to keep Chinle Agency Senior Centers in operation full time. The Program Supervisor and Senior Center Supervisors will be responsible for correcting any OEH findings, tracking monthly program expenditures, ensuring that projects are completed, compiling and submitting required program/progress reports on a monthly basis.

PART IV. AFFIRMATION IS PROVIDED THAT THE PROPOSAL INFORMATION IS COMPLETE AND ACCURATE AND THE APPROPRIATE BRANCH CHIEF RECOMMENDS APPROVAL.

Thomas Andrew Vay 8/12/15

REVIEWED BY: Division Director's Signature / Date

RECOMMEND APPROVAL: Branch Chief's Signature / Date

**THE NATION
PROGRAM BUDGET SUMMARY**

PART I. Business Unit No.: 113012		Program Title: Navajo Area Agency on Aging - Fort Defiance Agency		Division/Branch: Health Executive	
Prepared By: Johnny Johnson		Phone No.: (928) 729-4019		Email Address: johnny.johnson@nndoh.org	

PART III. BUDGET SUMMARY			(A)	(B)	(C)
Fund Type	Code	Original Budget	Proposed Budget	Difference (Column B - A)	
2001	Personnel Expenses	1	260,930	260,930	
3000	Travel Expenses			0	
3500	Meeting Expenses			0	
4000	Supplies			0	
5000	Lease and Rental			0	
5500	Communications and Utilities			0	
6000	Repairs and Maintenance			0	
6500	Contractual Services			0	
7000	Special Transactions	1	1,679	1,679	
8000	Public Assistance			0	
9000	Capital Outlay			0	
9500	Matching Funds			0	
9500	Indirect Cost			0	
TOTAL			262,609	262,609	

PART IV. POSITIONS AND VEHICLES			(D)	(E)
Total # of Positions Budgeted:				49
Total # of Permanently Assigned Vehicles:				

PART V. I HEREBY ACKNOWLEDGE THAT THE INFORMATION CONTAINED IN THIS BUDGET PACKAGE IS COMPLETE AND ACCURATE.	
SUBMITTED BY: Rosalyn Curtis, Health Services Administrator <i>Rosalyn Curtis</i>	APPROVED BY: Ramona Antone-Nez, Acting Executive Director <i>Ramona Antone-Nez</i>

THE NATION PROGRAM PERFORMANCE CRITERIA

PART I. PROGRAM INFORMATION:		Navajo Area Agency on Aging - Fort Defiance Agency											
Business Unit No.: 113012		Program Name/Title:											
PART II. PLAN OF OPERATION REFERENCE/LEGISLATED PROGRAM PURPOSE:													
GSCO-82-96. The purpose of the Navajo Area Agency on Aging program is to provide meals, transportation, health, personal, social, recreational, and referral support and services to eligible Navajo individuals in coordination with other tribal and non-tribal agencies / entities.													
PART III. PROGRAM PERFORMANCE CRITERIA:													
1. Program Performance Area:		1st QTR		2nd QTR		3rd QTR		4th QTR					
Programmatic (Data) Reports		Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual
Goal Statement:													
Submit to Navajo Area Agency on Aging administration by the sixth business day of each month.		5		5		5		5		5		5	
2. Program Performance Area:													
Staff Development and Training													
Goal Statement:													
Conduct training for 52 personnel to enhance their knowledge and abilities.		13		13		13		13		13		13	
3. Program Performance Area:													
Caregiver/Housekeeping/Providers													
Goal Statement:													
Acquire three (3) Caregiver Providers per Quarter		3		3		3		3		3		3	
4. Program Performance Area:													
Meal Service													
Goal Statement:													
Provide Home Delivered and Congregate meals to participants.		29,706		29,706		29,706		29,706		29,706		29,706	
5. Program Performance Area:													
Senior Center Monitoring													
Goal Statement:													
Conduct On-site monitoring evaluations, if deemed necessary, complete corrective action plans per quarter.		4		5		5		5		4		4	
PART IV. I HEREBY ACKNOWLEDGE THAT THE ABOVE INFORMATION HAS BEEN THOROUGHLY REVIEWED.													
<i>Rosajyn Curtis</i> Rosajyn Curtis, Health Services Administrator Program Manager's Printed Name and Signature/Date <i>Ramona Antone-Nez</i> Ramona Antone-Nez, Acting Executive Director Division Director/Branch Chiefs Printed Name and Signature / Date													

THE NATION
DETAILED LINE ITEM BUDGET AND JUSTIFICATION

PART I. PROGRAM INFORMATION:			
Program Name/Title: Navajo Area Agency on Aging - Fort Defiance Agency	Business Unit No.: 113012		
PART II. DETAILED BUDGET:			
(A)	(B)	(C)	(D)
Object Code (LOD 6)	Object Code Description and Justification	Total by DETAILED Object Code	Total by MAJOR Object Code
	2001 PERSONNEL EXPENSES		260,930
2110	Regular		
	2120 Forty-Eight (48) Regular Full-Time positions per Budget Form 3	148,031	
	2120 One Senior Center Supervisor - UNCLASSIFIED	31,179	
		179,210	
2900	Fringe Benefits		
	2900 \$179,210 x 45.60%	81,720	
	7000 SPECIAL TRANSACTIONS		1,679
7710	Insurance Premiums		
	7765 Policy Payment (General Liability) \$260930 / 100 x .19 =	496.00	
	7767 Workers Comp (less fringe) \$179,210 / 100 x .66	1,183.00	
		1,679	
	TOTAL	262,609	262,609

THE NATION
SUMMARY OF CHANGES TO BUDGETED POSITIONS

PART I. PROGRAM INFORMATION:									
Program Name/Title:			Navajo Area Agency on Aging - Fort Defiance Agency				Business Unit No.:		
							113012		
PART II. PERSONNEL/POSITION CHANGES:									
(A) Type of Change	(B) Sub Acct Object Code	(C) Position Number	(D) Job Type / Class Code	(E) Position Title	(F) Employee ID No. or Vacant	(G) Salary	(H) Fringe Benefit	(I) Total (Col. G + H)	
PRORATE	1005	153090	003824	Sr Center Supervisor	153757	4,014.00	1,830	5,844	
PRORATE	1006	152706	003824	Sr Center Supervisor	14414	4,519.00	2,061	6,580	
PRORATE	1008	153600	003824	Sr Center Supervisor	15235	4,261.00	1,943	6,204	
PRORATE	1009	158238	003824	Sr Center Supervisor	VACANT	3,897.00	1,777	5,674	
PRORATE	1011	157498	004144	Sr Center Supervisor	17313	4,519.00	2,061	6,580	
PRORATE	1012	153598	003824	Sr Center Supervisor	VACANT	3,897.00	1,777	5,674	
PRORATE	1017	153609	003824	Sr Center Supervisor	10207	3,897.00	1,777	5,674	
PRORATE	1022	213091	003849	Cook	210730	2,766.00	1,261	4,027	
PRORATE	1023	212705	003849	Cook	151340	2,935.00	1,338	4,273	
PRORATE	1025	239940	003849	Cook	128584	2,766.00	1,261	4,027	
PRORATE	1027	233641	003849	Cook	152576	2,766.00	1,261	4,027	
PRORATE	1028	238920	003849	Cook	187132	2,766.00	1,261	4,027	
PRORATE	1029	233658	003849	Cook	313413	2,766.00	1,261	4,027	
PRORATE	1030	233634	003849	Cook	15984	2,766.00	1,261	4,027	
PRORATE	1031	233619	003849	Cook	153178	2,766.00	1,261	4,027	
PRORATE	1032	233621	003849	Cook	15484	3,115.00	1,420	4,535	
PRORATE	1033	233639	003849	Cook	VACANT	2,766.00	1,261	4,027	
PRORATE	1034	233633	003849	Cook	313616	2,766.00	1,261	4,027	
PRORATE	1035	236034	003849	Cook	17398	2,766.00	1,261	4,027	
PRORATE	1036	276459	003849	Cook	11863	2,766.00	1,261	4,027	
PRORATE	1037	276460	003849	Cook	251074	2,766.00	1,261	4,027	
PAGE TOTAL:						68,246	31,120	99,366	

THE NATION
SUMMARY OF CHANGES TO BUDGETED POSITIONS

PART I. PROGRAM INFORMATION:								
Program Name/Title:			Navajo Area Agency on Aging - Fort Defiance Agency		Business Unit No.:			
					113012			
PART II. PERSONNEL/POSITION CHANGES:								
(A) Type of Change	(B) Sub Acct Object Code	(C) Position Number	(D) Job Type / Class Code	(E) Position Title	(F) Employee ID No. or Vacant	(G) Salary	(H) Fringe Benefit	(I) Total (Col. G + H)
PRORATE	1039	213092	004144	Driver	128628	2,766.00	1,261	4,027
PRORATE	1040	212704	004144	Driver	11547	3,115.00	1,420	4,535
PRORATE	1042	239942	004144	Driver	200495	2,850.00	1,300	4,150
PRORATE	1043	230435	004144	Driver	VACANT	2,766.00	1,261	4,027
PRORATE	1044	233574	004144	Driver	18044	2,766.00	1,261	4,027
PRORATE	1045	230258	004144	Driver	319602	2,766.00	1,261	4,027
PRORATE	1046	233594	004144	Driver	150580	2,766.00	1,261	4,027
PRORATE	1047	233573	004144	Driver	13837	2,766.00	1,261	4,027
PRORATE	1048	233560	004144	Driver	201463	2,850.00	1,300	4,150
PRORATE	1049	233575	004144	Driver	157167	2,766.00	1,261	4,027
PRORATE	1050	233578	004144	Driver	VACANT	2,766.00	1,261	4,027
PRORATE	1051	233581	004144	Driver	10722	3,115.00	1,420	4,535
PRORATE	1052	236035	004144	Driver	17837	2,766.00	1,261	4,027
PRORATE	1054	276462	004144	Driver	277450	2,766.00	1,261	4,027
PRORATE	1056	278178	004144	Driver	155839	2,766.00	1,261	4,027
PRORATE	1057	278179	004144	Driver	309222	2,766.00	1,261	4,027
PRORATE	1062	152865	003824	Sr Center Supervisor	15178	4,391.00	2,002	6,393
PRORATE	1063	232866	003849	Cook	150807	2,766.00	1,261	4,027
PRORATE	1064	232867	003849	Cook	242700	2,766.00	1,261	4,027
PRORATE	1065	232869	004144	Driver	255226	2,766.00	1,261	4,027
PRORATE	1066	232871	004144	Driver	15940	3,115.00	1,420	4,535
PAGE TOTAL:						60,926	27,782	88,708

THE NAVAJO NATION
SUMMARY OF CHANGES TO BUDGETED POSITIONS

PART I. PROGRAM INFORMATION:									
Program Name/Title: Navajo Area Agency on Aging - Fort Defiance Agency				Business Unit No.:			113012		
PART II. PERSONNEL/POSITION CHANGES:									
(A) Type of Change	(B) Sub Acct Object Code	(C) Position Number	(D) Job Type / Class Code	(E) Position Title	(F) Employee ID No. or Vacant	(G) Salary	(H) Fringe Benefit	(I) Total (Col. G + H)	
PRORATE	1070	240217	004144	Driver	150961	2,766.00	1,261	4,027	
PRORATE	1071	240216	003849	Cook	150924	2,766.00	1,261	4,027	
PRORATE	1072	240215	003824	Sr Center Supervisor	160234	3,897.00	1,777	5,674	
PRORATE	1076	241012	003824	Sr Center Supervisor	18029	3,897.00	1,777	5,674	
PRORATE	1091	233631	003849	Cook	129705	2,766.00	1,261	4,027	
PRORATE	1092	233582	004144	Driver	150147	2,766.00	1,261	4,027	
NEW	1093	999999	003824	Sr Center Supervisor	VACANT	31,179.00	14,218	45,397	
PAGE TOTAL:						50,037	22,817	72,854	

**THE NAVAJO NATION
SUPPLEMENTAL FUNDING PROPOSAL SUMMARY**

PART I. Business Unit No.: 113012 **Program Title:** Navajo Area Agency on Aging - Fort Defiance Agency
Division/Branch: Health **Amount Requested:** \$ 1,987,491.00 **Phone No.:** (928) 729-4019
Prepared By: Johnny Johnson **Email Address:** johnny.johnson@nandn.org

PART II. REASON FOR REQUEST AND STATEMENT OF NEED:

We are requesting for additional funding to re-instate the employee hours back to 2080 as directed by President Begaye. Fort Defiance Agency is in need of \$233,638 to effectively operate and adequately staff our 18 Senior Centers. We are requesting additional funding to fund a Senior Center Supervisor position for the Fort Defiance Senior Center. Currently, we have one Supervisor overseeing both Fort Defiance and St. Michaels Senior Center and that responsibility is too much as these two Senior Centers serve and accommodate huge numbers of Older Americans on a daily basis. Both Senior Centers are in dire need of full time supervision to monitor staff, activities and correct the OEH findings.

PART III. SCOPE OF WORK/METHODOLOGY

This allocation will be used to keep Fort Defiance Agency Senior Centers in operation full time. The Program Supervisor and Senior Center Supervisors will be responsible for correcting any OEH findings, tracking monthly program expenditures, ensuring that projects are completed, compiling and submitting required program/progress reports on a monthly basis.

PART IV. AFFIRMATION IS PROVIDED THAT THE PROPOSAL INFORMATION IS COMPLETE AND ACCURATE AND THE APPROPRIATE BRANCH CHIEF RECOMMENDS APPROVAL.

Johnny Johnson 08/12/15
REVIEWED BY: Division Director's Signature / Date

RECOMMEND APPROVAL: Branch Chief's Signature / Date

FY 2016

PART I. Business Unit No.: 113013		Program Title: NAAA Crownpoint Agency		Division/Branch: Executive/Health	
Prepared By: Camille A. Bia		Phone No.: 505-786-2044		Email Address: camille.bia@nndoh.org	

PART II. FUNDING SOURCE(S)		Fiscal Year Term	Amount	% of Total	PART III. BUDGET SUMMARY			Fund Type Code	Original Budget	Proposed Budget	Difference (Column B - A)
General Funds		7/1/15 - 6/30/16	478,221	100%							
					2001	Personnel Expenses			329,414		329,414
					3000	Travel Expenses			44,962		44,962
					3500	Meeting Expenses					0
					4000	Supplies			86,415		86,415
					5000	Lease and Rental					0
					5500	Communications and Utilities					0
					6000	Repairs and Maintenance			17,430		17,430
					6500	Contractual Services					0
					7000	Special Transactions					0
					8000	Public Assistance					0
					9000	Capital Outlay					0
					9500	Matching Funds					0
					9500	Indirect Cost					0
					TOTAL				\$0.00	478,221	478,221

PART IV. POSITIONS AND VEHICLES		(D)	(E)
Total # of Positions Budgeted:		62	62
Total # of Permanently Assigned Vehicles:		26	26

PART V. I HEREBY ACKNOWLEDGE THAT THE INFORMATION CONTAINED IN THIS BUDGET PACKAGE IS COMPLETE AND ACCURATE.	
Rosalyn Curtis <i>Rosalyn Curtis</i> 8/12/15	Ramona Antone Nez <i>Ramona Antone Nez</i> 8/12/15
SUBMITTED BY: Program Manager's Printed Name and Signature / Date	APPROVED BY: Division Director/Branch Chief's Printed Name and Signature / Date

THE NAJAVO NATION
PROGRAM PERFORMANCE CRITERIA/RESULTS

PART I. PROGRAM INFORMATION:

Business Unit No.: 113013

Program Name/Title:

Navajo Area Agency of Aging - Crownpoint

PART II. PLAN OF OPERATION REFERENCE/LEGISLATED PROGRAM PURPOSE:

The purpose of NAAA is to provide meals, transportation, health, personal, social recreational and referral support and services to eligible Navajo in Coordination with other tribal and non-tribal agencies/entities.

PART III. PROGRAM PERFORMANCE CRITERIA:

1. Program Performance Area:

Programmatic (Data) Reports

Goal Statement:

Submit to Navajo Area Agency on Aging administration by the sixth business day of each month.

2. Program Performance Area:

Employee Development Training

Goal Statement:

Provide training for 60 staff in Customer Service and Case Management.

3. Program Performance Area:

Caregiver/Housekeeping/Providers

Goal Statement:

Acquire three (3) Caregiver Providers per Quarter

4. Program Performance Area:

Meal Service

Goal Statement:

Provide Home Delivery and Congregate meals to participants.

5. Program Performance Area:

Senior Center Monitoring

Goal Statement:

Conduct four (4) On-Site evaluations per quarter to reduce OEH findings and achieve compliance.

PART IV. I HEREBY ACKNOWLEDGE THAT THE ABOVE INFORMATION HAS BEEN THOROUGHLY REVIEWED.

Roselyn Curtis

Program Manager's Printed Name and Signature/Date

Ramona Antone Nez

Division Director/Branch Chief's Printed Name and Signature / Date

THE NAJNATION
DETAILED LINE ITEM BUDGET AND JUSTIFICATION

PART I. PROGRAM INFORMATION: Program Name/Title: _____ Business Unit No.: _____ 113013			
PART II. DETAILED BUDGET:			
(A)	(B)	(C)	(D)
Object Code (LOD 6)	Object Code Description and Justification	Total by DETAILED Object Code	Total by MAJOR Object Code
	2001 PERSONNEL EXPENSES Employment salary and fringe benefits. Payment for Eligible staff.		329,414
2110	Regular Salary \$226,246	226,246	
2900	Fringe Benefits \$226,246 x 45.60% \$103,168	103,168	
	3000 TRAVEL EXPENSES To pay for daily lease rate and mileage for department usage when permanent vehicle is being services to conduct site visits, transportation services, meeting and ect.Meals and lodging expenses directly related to program business. Other miscellaneous travel expense. Transportation toconferences and other program related functions.		44,962
3110	FLEET 3111 Mileage \$ 44,962		
	4000 SUPPLIES To purchase office supplies, printers and office furniture, daily operational/janitorial supplies, postage stamp, shipping & handling charges, to purchase raw food, non capsoftware, printing & binding & photocopying.		86,415
4410	OPERATING SUPPLIES 4460 FOOD SUPPLIES \$ 86,415		
TOTAL		329,414	460,791

THE NATION
DETAILED LINE ITEM BUDGET AND JUSTIFICATION

PART I. PROGRAM INFORMATION: Program Name/Title: _____ Business Unit No.: 113013			
PART II. DETAILED BUDGET:			
(A)	(B)	(C)	(D)
Object Code (LOD 6)	Object Code Description and Justification	Total by DETAILED Object Code	Total by MAJOR Object Code
6000 REPAIR & MAINTENANCE	To pay for pest control, waste disposal, plumbing and electric services for the agency and senior centers		17,430
6200	EXTERNAL CONTRACTORS		
6230 HVAC	\$ 17,430		
TOTAL			17,430

THE NATION

SUMMARY OF CHANGES TO BUDGETED POSITIONS

PART I. PROGRAM INFORMATION:								
Program Name/Title:			Navajo Area Agency of Aging - Crownpoint		Business Unit No.: 113013			
PART II. PERSONNEL/POSITION CHANGES:								
(A) Type of Change	(B) Sub Acct Object Code	(C) Position Number	(D) Job Type / Class Code	(E) Position Title	(F) Employee ID No. or Vacant	(G) Salary	(H) Fringe Benefit	(I) Total (Col. G + H)
PRORATE	1005	153615	003824	SR CENTER SUPERVIS.	150166	3,118	1,422	4,540
PRORATE	1006	157497	003824	SR CENTER SUPERVIS.	13868	3,212	1,465	4,677
PRORATE	1007	150428	003824	SR CENTER SUPERVIS.	207638	3,118	1,422	4,540
PRORATE	1009	153617	003824	SR CENTER SUPERVIS.	282479	3,118	1,422	4,540
PRORATE	1011	271145	004144	DRIVER	150462	2,490	1,135	3,625
PRORATE	1012	158235	003824	SR CENTER SUPERVIS.	14228	3,212	1,465	4,677
PRORATE	1013	150255	003824	SR CENTER SUPERVIS.	VACANT	3,118	1,422	4,540
PRORATE	1015	158921	003824	SR CENTER SUPERVIS.	14409	3,212	1,465	4,677
PRORATE	1016	158236	003824	SR CENTER SUPERVIS.	150598	3,212	1,465	4,677
PRORATE	1017	233629	003849	COOK	159854	2,490	1,135	3,625
PRORATE	1018	233661	003849	COOK	298539	2,490	1,135	3,625
PRORATE	1019	230429	003849	COOK	15565	2,490	1,135	3,625
PRORATE	1020	239944	003849	COOK	10762	2,490	1,135	3,625
PRORATE	1021	233625	003849	COOK	164928	2,490	1,135	3,625
PRORATE	1022	230175	004144	DRIVER	257775	2,490	1,135	3,625
PRORATE	1023	230217	003849	COOK	240065	2,490	1,135	3,625
PRORATE	1024	233662	003849	COOK	13627	2,490	1,135	3,625
PRORATE	1026	233624	003849	COOK	13814	2,565	1,170	3,735
PRORATE	1027	230318	003849	COOK	14611	2,490	1,135	3,625
PRORATE	1028	230319	003849	COOK	151044	2,490	1,135	3,625
PRORATE	1029	233571	004144	DRIVER	262571	2,490	1,135	3,625
PAGE TOTAL:						57,765	26,341	84,106

THE NAJAVO NATION
SUMMARY OF CHANGES TO BUDGETED POSITIONS

PART I. PROGRAM INFORMATION:								
Program Name/Title:			Navajo Area Agency of Aging - Crownpoint		Business Unit No.: 113013			
PART II. PERSONNEL/POSITION CHANGES:								
(A) Type of Change	(B) Sub Acct Object Code	(C) Position Number	(D) Job Type / Class Code	(E) Position Title	(F) Employee ID No. or Vacant	(G) Salary	(H) Fringe Benefit	(I) Total (Col. G + H)
PRORATE	1031	239941	004144	DRIVER	239817	2,490	1,135	3,625
PRORATE	1032	230430	004144	DRIVER	207978	2,490	1,135	3,625
PRORATE	1033	233588	004144	DRIVER	189505	2,490	1,135	3,625
PRORATE	1034	232292	004144	DRIVER	309098	2,490	1,135	3,625
PRORATE	1036	233583	004144	DRIVER	308823	2,490	1,135	3,625
PRORATE	1037	276468	003849	COOK	191105	2,490	1,135	3,625
PRORATE	1038	233589	004144	DRIVER	15849	2,490	1,135	3,625
PRORATE	1042	156247	003824	SR CENTER SUPERV.	13841	3,212	1,465	4,677
PRORATE	1044	236250	003849	COOK	162607	2,490	1,135	3,625
PRORATE	1045	150219	003824	SR CENTER SUPERV.	14946	3,118	1,422	4,540
PRORATE	1046	236251	004144	DRIVER	166401	2,213	1,009	3,222
PRORATE	1049	156464	003824	SR CENTER SUPERV.	150142	3,118	1,422	4,540
PRORATE	1050	156465	003824	SR CENTER SUPERV.	10880	3,212	1,465	4,677
PRORATE	1051	156466	003824	SR CENTER SUPERV.	13874	3,118	1,422	4,540
PRORATE	1053	233590	004144	DRIVER	14457	2,490	1,135	3,625
PRORATE	1054	276469	003849	COOK	151104	2,490	1,135	3,625
PRORATE	1055	249470	003849	COOK	115283	2,490	1,135	3,625
PRORATE	1057	276472	004144	DRIVER	152529	2,490	1,135	3,625
PRORATE	1058	276474	004144	DRIVER	15775	2,490	1,135	3,625
PRORATE	1059	276475	004144	DRIVER	150127	2,490	1,135	3,625
PRORATE	1060	276475	004144	DRIVER	150127	2,490	1,135	3,625
PAGE TOTAL:						55,341	25,235	80,576

PART I. PROGRAM INFORMATION:									
Program Name/Title:				Navajo Area Agency of Aging - Crownpoint				Business Unit No.:	
								113013	
PART II. PERSONNEL/POSITION CHANGES:									
(A) Type of Change	(B) Sub Acct Object Code	(C) Position Number	(D) Job Type / Class Code	(E) Position Title	(F) Employee ID No. or Vacant	(G) Salary	(H) Fringe Benefit	(I) Total (Col. G + H)	
PRORATE	1061	278533	003849	COOK	VACANT	2,490	1,135	3,625	
PRORATE	1062	278534	003849	COOK	150680	2,490	1,135	3,625	
PRORATE	1063	278536	004144	DRIVER	16180	2,490	1,135	3,625	
PRORATE	1064	278525	004144	DRIVER	3189247	2,490	1,135	3,625	
PRORATE	1065	152145	003824	SR CENTER SUPERV.	193667	3,118	1,422	4,540	
PRORATE	1067	273095	003849	COOK	18032	2,490	1,135	3,625	
PRORATE	1072	150886	003824	SR CENTER SUPERV.	10342	3,212	1,465	4,677	
PRORATE	1077	158543	003824	SR CENTER SUPERV.	153711	3,508	1,600	5,108	
PRORATE	1082	202985	004144	DRIVER	152629	2,490	1,135	3,625	
PRORATE	1083	202986	004144	DRIVER	15010	2,490	1,135	3,625	
PRORATE	1088	203515	004144	DRIVER	13891	2,490	1,135	3,625	
PRORATE	1089	203005	003849	COOK	115287	2,490	1,135	3,625	
PRORATE	1094	948531	004144	DRIVER	17338	2,490	1,135	3,625	
PRORATE	1095	948532	004144	DRIVER	15931	2,490	1,135	3,625	
PRORATE	1096	948529	003849	COOK	14156	2,565	1,170	3,735	
PRORATE	1097	948530	003849	COOK	160702	2,490	1,135	3,625	
							42,283	19,281	61,564
PAGE TOTAL:									

**THE NAVAJO NATION
SUPPLEMENTAL FUNDING PROPOSAL SUMMARY**

PART I. Business Unit No.: 113013 **Program Title:** NAAA - Crownpoint Agency
Division/Branch: NDOH/ NAAA **Amount Requested:** \$374,889 **Phone No.:** 505-786-2045
Prepared By: Lee Begay **Email Address:** lee.begay@nndoh.org

PART II. REASON FOR REQUEST AND STATEMENT OF NEED:

Salaries: \$226,082 is still needed to bring the supervisors, cooks, and drivers back to 2080 hours. With the current allocation, the supervisors were budget at 1872-hours, the cooks and drivers were budgeted at 1834 hours.

Travel: \$44,962 is needed to pay for additional fuel and maintenance cost to continue providing services due to expected harsh winter.

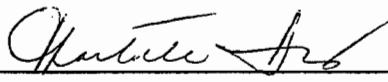
HVAC: \$17,430 is needed to pay for repairs and maintenance of heating and cooling system in anticipation of harsher winter condition.

Food: \$86,415 is needed to pay for higher cost of food supplies.

PART III. SCOPE OF WORK/METHODOLOGY

The accounts are already in place for the personnel, travel, repairs and maintenance, and food supplies. The supplemental allocation will be added to the initial allocation and used in FY2016.

PART IV. AFFIRMATION IS PROVIDED THAT THE PROPOSAL INFORMATION IS COMPLETE AND ACCURATE AND THE APPROPRIATE BRANCH CHIEF RECOMMENDS APPROVAL.

 8/12/15
REVIEWED BY: Division Director's Signature / Date

RECOMMEND APPROVAL: Branch Chief's Signature / Date

PART I. Business Unit No.: 113014		Program Title: Navajo Area Agency on Aging / Tuba City		Division/Branch: Health	
Prepared By: Charles Joe, PSII		Phone No.: 928-283-3351		Email Address: charles.joe@nndoh.org	

PART II. FUNDING SOURCE(S)		Fiscal Year Term	Amount	% of Total
General Funds		10/01/15 - 09/30/16	350,532	100%

PART III. BUDGET SUMMARY			Fund Type Code	Original Budget	Proposed Budget	Difference (Column B - A)
2001	Personnel Expenses	1			0	
3000	Travel Expenses	1		77,136	77,136	
3500	Meeting Expenses	1		1,790	1,790	
4000	Supplies	1		174,379	174,379	
5000	Lease and Rental	1		6,800	6,800	
5500	Communications and Utilities	1		75,887	75,887	
6000	Repairs and Maintenance	1		8,500	8,500	
6500	Contractual Services	1		3,000	3,000	
7000	Special Transactions	1		3,040	3,040	
8000	Public Assistance	1			0	
9000	Capital Outlay	1			0	
9500	Matching Funds	1		0	0	
9500	Indirect Cost				0	
TOTAL				350,532	350,532	

PART IV. POSITIONS AND VEHICLES		(D)	(E)
Total # of Positions Budgeted:		46	46
Total # of Permanently Assigned Vehicles:		19	19

TOTAL:		\$350,532.00	100%
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PART V. I HEREBY ACKNOWLEDGE THAT THE INFORMATION CONTAINED IN THIS BUDGET PACKAGE IS COMPLETE AND ACCURATE.

SUBMITTED BY: Lucinda Martin 8/12/15

Program Manager's Printed Name and Signature / Date

APPROVED BY: Charles Joe 8/12/15

Division Director/Branch Chief's Printed Name and Signature / Date

THE NAI NATION
DETAILED LINE ITEM BUDGET AND JUSTIFICATION

PART I. PROGRAM INFORMATION:			
Program Name/Title:		Navajo Area Agency on Aging / Tuba City	Business Unit No.: 113014
PART II. DETAILED BUDGET:			
(A)	(B)	(C)	(D)
Object Code (LOD 6)	Object Code Description and Justification	Total by DETAILED Object Code	Total by MAJOR Object Code
3110	3000 TRAVEL EXPENSES Transportation to and from senior centers to provide congregate and home delivered meals to eligible elderly clients. Transportation to and from authorized training, meetings, conferences, and other program related functions. Meals and lodging expense directly related to program business and other miscellaneous travel expenses.		77,136
	.3111 Month/Perm 14 Suburbans @ 521/mo x 4 mo = \$ 29,176 .3111 Month/Perm 2 Vans @ 460/mo x 4 mo = \$ 3,680 .3111 Month/Perm 1 Depl Purchase Vans @ \$108/mo x 4 mo = \$ 432 .3111 Month/Perm 1 Depl Purchase Subu @ \$140/mo x 4 mo = \$ 560 .3113 Mileage \$.30 per mile x 4 months x 19 vehicles = \$ 22,800	56,648	
3230	Personal Travel (CONUS rates apply) .3240 Per D Meals \$46/day x 38 person x 4 days \$ 6,992 .3250 Lodging \$83 x 38 person x 2 nights \$ 6,308 .3260 POV .575/mile x 500 miles x 25 persons \$ 7,188	20,488	
3810	3500 MEETING EXPENSE Payments of stipend and mileage for Navajo Nation Council on Aging (NNCoA) Representatives to attend meetings on behalf of NAAA. Meetings .3811 Stipends \$80/per mtg x 4 mtgs x 2 rep = \$ 640 .3813 Mileage 250 miles/per mtg .575 x 4 mtgs x 1 rep = \$ 1,150	1,790	1,790
TOTAL		78,926	78,926

Page 4 of 6

NNOMB-BF4

THE NATION
DETAILED LINE ITEM BUDGET AND JUSTIFICATION

PART I. PROGRAM INFORMATION:			
Program Name/Title:		Business Unit No.:	
Navajo Area Agency on Aging / Tuba City		113014	
PART II. DETAILED BUDGET:			
(A)	(B)	(C)	(D)
Object Code (LOD 6)	Object Code Description and Justification	Total by DETAILED Object Code	Total by MAJOR Object Code
	5400 LEASE & RENTAL		6,800
	Rental of meeting room for worksession and quarterly staff meeting. Storage space rentals for senior centers. Propane tank rentals for senior centers.		
5310	Building Space		
	.5320 Meeting Space \$ 300		
	.5330 Storage Space \$ 6,500	6,800	
	5500 COMMUNICATIONS & UTILITIES		75,887
	Basic telephone services and line charges. DSL and Internet dial up services/connectivity Electric. Propane, Natural Gas, Water, and Sewage expenses for NAAA Agency Ofc and Senior Centers.		
5520	Telephone		
	.5530 Basic Services \$ 3,000	3,000	
5570	Internet		
	.5580 DSL \$ 1,500	1,980	
	.5600 Internet Service \$ 480		
5710	Energy		
	.5720 Electric \$ 20,000	60,000	
	.5740 Propane \$ 40,000		
5750	Services		
	.5760 Water \$ 8,693	10,907	
	.5770 Sewage \$ 2,214		
TOTAL		82,687	82,687

THE NATION
DETAILED LINE ITEM BUDGET AND JUSTIFICATION

PART I. PROGRAM INFORMATION: Program Name/Title: <u>Navejo Area Agency on Aging / Tuba City</u> Business Unit No.: <u>113014</u>			
PART II. DETAILED BUDGET:			
(A)	(B)	(C)	(D)
Object Code (LOD 6)	Object Code Description and Justification	Total by DETAILED Object Code	Total by MAJOR Object Code
6000	6000 REPAIRS & MAINTENANCE Annual repairs and maintenance services for hood exhaustion, fire extinguishers, freezers, refrigerators, stove, oven, heating and cooling units. Monthly pesticide and waste pick up services for senior centers. External Contractors .6240 Pest Control \$ 3,000 .6250 Waste Disposal \$ 5,500	8,500	8,500
6500	6500 CONTRACTUAL SERVICES Monthly services for alarm security system at three senior centers.		3,000
6910	Other Contractual Services .6916 Security Services \$ 1,500 .6921 Other Services \$ 1,500	3,000	
7000	7000 SPECIAL TRANSACTION Promote and advertise program's initiative. Gifts and awards to be presented to employees. Catering and refreshments for dept. special events. Training for staff development in computers, supervisory, management, and communications insurance coverage for our employees and property contents.		3,040
7110	Programs .7130 Promotional Items \$ 500 .7140 Gifts & Awards \$ 500 7190 Refreshments \$ 500	1,500	
7510	Training and Professional Dues .7520 Training/Registration \$ 1,540	1,540	
TOTAL		350,532	350,532

THE NAVAJO NATION
SUPPLEMENTAL FUNDING PROPOSAL SUMMARY

PART I. Business Unit No.: 113014

Program Title: NAVAJO AREA AGENCY on AGING

Division/Branch: HEALTH

Amount Requested: \$ 350,532.00

Phone Number: 928-283-3351

Prepared By: Charles Joe

Email Address: cjnav2013@yahoo.com

PART II. REASON FOR REQUEST AND STATEMENT OF NEED:

The reason for Tuba City- NAAA requesting for Supplemental Funding, the amount allocated is not enough to operate the senior center programs. The directive from the Navajo Nation President to keep all staff at 80 hours has depleted most of the allocation. The funding is needed to keep our senior centers in operation to accommodate our elderly's. The funding will be use for operating, maintenance and repair to some of our Senior Centers to meet the deficiencies cited. In addition, continuous program staff development for all staff to assure positive program outcomes.

PART III. SCOPE OF WORK/METHODOLOGY

This allocation will be utilizes to accommodate the senior center and any deficiency finding by OEH. The funding will be monitor by Program Supervisor, and Senior Center Supervisor to ensure that project is completed and submit a progress report on monthly basic. Keeping record of expenditure report pertain to the project and other program expenditure.

PART IV. AFFIRMATION IS PROVIDED THAT THE PROPOSAL INFORMATION IS COMPLETE AND ACCURATE AND THE APPROPRIATE BRANCH CHIEF RECOMMENDS APPROVAL.

Rosalyn Curtis 8/12/15
Rosalyn Curtis, HAS-NAAA

Ramona Antonie-Nez, Acting Executive Director-DOH

REVIEWED BY: Director's Signature / Date

RECOMMEND APPROVAL: Branch Chief's Signature / Date

PART I. Business Unit No.: 113015		Program Title: NAAA - Shiprock Agency		Division/Branch: Health/Executive	
Prepared By: Dewayne Johnson		Phone No.: (505) 368-1250		Email Address: d.johnson@nndoh.org	

PART II. FUNDING SOURCE(S)	Fiscal Year Term	Amount	% of Total	PART III. BUDGET SUMMARY			Difference (Column B - A)
				Fund Type Code	NNC Approved Original Budget	Proposed Budget	
General Funds	10/01/15 - 09/30/16	208,656	100%				
Supplemental Fund							
				2001	Personnel Expenses	48,328	48,328
				3000	Travel Expenses		0
				3500	Meeting Expenses		0
				4000	Supplies	100,000	100,000
				5000	Lease and Rental	6,000	6,000
				5500	Communications and Utilities		0
				6000	Repairs and Maintenance	54,000	54,000
				6500	Contractual Services		0
				7000	Special Transactions	311	311
				8000	Public Assistance		0
				9000	Capital Outlay		0
				9500	Matching and Indirect Cost		0
				TOTAL			208,639

PART IV. POSITIONS AND VEHICLES	(D)	(E)
Total # of Positions Budgeted:	12	12
Total # of Permanently Assigned Vehicles:		

TOTAL: 208,656	100%
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PART V. I HEREBY ACKNOWLEDGE THAT THE INFORMATION CONTAINED IN THIS BUDGET PACKAGE IS COMPLETE AND ACCURATE.

Rosalyn Curfiss
 Rosalyn Curfiss, HSA

SUBMITTED BY: Program Manager's Printed Name and Signature / Date

James H. Martin
 James H. Martin, Acting Executive Director

APPROVED BY: Division Director/Branch Chief's Printed Name and Signature / Date

THE NAV. NATION

PROGRAM PERFORMANCE CRITERIA/RESULTS

PART I. PROGRAM INFORMATION:																									
Business Unit No.: 113015	Name/Title: NAAA - Shiprock Agency																								
PART II. PLAN OF OPERATION REFERENCE/LEGISLATED PROGRAM PURPOSE:																									
GSCO-82-96 The purpose of the Navajo Area Agency on Aging program is to provide meals, transportation, health, personal, social, recreational and referral support and services to eligible Navajo individuals in coordination with other tribal and non-tribal agencies/entities.																									
PART III. PROGRAM PERFORMANCE CRITERIA:																									
1. Program Performance Area: Programmatic (Data) Reports Goal Statement: Submit to Navajo Area Agency on Aging administration by the sixth business day of each month	<table border="1"> <thead> <tr> <th colspan="2">1st QTR</th> <th colspan="2">2nd QTR</th> <th colspan="2">3rd QTR</th> <th colspan="2">4th QTR</th> </tr> <tr> <th>Goal</th> <th>Actual</th> <th>Goal</th> <th>Actual</th> <th>Goal</th> <th>Actual</th> <th>Goal</th> <th>Actual</th> </tr> </thead> <tbody> <tr> <td>15</td> <td></td> <td>15</td> <td></td> <td>15</td> <td></td> <td>15</td> <td></td> </tr> </tbody> </table>	1st QTR		2nd QTR		3rd QTR		4th QTR		Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual	15		15		15		15	
1st QTR		2nd QTR		3rd QTR		4th QTR																			
Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual																		
15		15		15		15																			
2. Program Performance Area: Employee Development Training Goal Statement: 44 staff will be trained to enhance their knowledge and skill through perspective job responsibilities.	<table border="1"> <tbody> <tr> <td>11</td> <td></td> <td>11</td> <td></td> <td>11</td> <td></td> <td>11</td> <td></td> </tr> </tbody> </table>	11		11		11		11																	
11		11		11		11																			
3. Program Performance Area: Caregiver/Housekeeping/Providers Goal Statement: Acquire Six (6) Caregiver Providers per Quarter	<table border="1"> <tbody> <tr> <td>6</td> <td></td> <td>6</td> <td></td> <td>6</td> <td></td> <td>6</td> <td></td> </tr> </tbody> </table>	6		6		6		6																	
6		6		6		6																			
4. Program Performance Area: Meal Service Goal Statement: Provide Home Delivery and Congregate meals to participants.	<table border="1"> <tbody> <tr> <td>21,000</td> <td></td> <td>21,000</td> <td></td> <td>21,000</td> <td></td> <td>21,000</td> <td></td> </tr> </tbody> </table>	21,000		21,000		21,000		21,000																	
21,000		21,000		21,000		21,000																			
5. Program Performance Area: Senior Center Monitoring Goal Statement: Six On-site monitoring evaluations per quarter, if deemed necessary, complete corrective action plan.	<table border="1"> <tbody> <tr> <td>6</td> <td></td> <td>6</td> <td></td> <td>6</td> <td></td> <td>6</td> <td></td> </tr> </tbody> </table>	6		6		6		6																	
6		6		6		6																			
PART IV. I HEREBY ACKNOWLEDGE THAT THE ABOVE INFORMATION HAS BEEN THOROUGHLY REVIEWED.																									
Rosalyn Curtis Program Manager's Printed Name and Signature/Date	Ramone Antone Nez Division Director/Branch Chiefs Printed Name and Signature / Date																								

THE NATIONAL NATION

DETAILED LINE ITEM BUDGET AND JUSTIFICATION

PART I. PROGRAM INFORMATION:			
Program Name/Title:		NAAA / Shiprock Agency	Business Unit No.: 113015
PART II. DETAILED BUDGET:			
(A)	(B)	(C)	(D)
Object Code (LOD 6)	Object Code Description and Justification	Total by DETAILED Object Code	Total by MAJOR Object Code
	2001 PERSONNEL EXPENSES		48,328
	Employment salary and fringe benefits. Based on reduced salary hours for all field staff.		
2110	Regular	33,192	33,192
2900	Fringe Benefits Permanent \$33,192 X 45.60%	15,136	15,136
	Total:	48,328	
	4000 SUPPLIES		100,000
	To buy general office supply, paper, pen, etc. Operating supplies for 15 Senior Centers, HD Trays, Raw Food, etc.		
4120	Office Supplies	20,000	20,000
	4130 - General Office Supplies (Supporting 15 Senior Centers)		
4410	Operating Supplies		
	4420 - General Operating Supplies	40,000	40,000
	4460 - Food Supplies	40,000	
5310	5000 LEASE & RENTAL		6,000
	Building/Space	6,000	
	To support space rental for meetings, staff trainings, seminars, agency meetings, etc.		
6020	6000 REPAIRS & MAINTENANCE		54,000
	Supplies/Building	5,000	5,000
6040	6030 - Building R & M Supplies	5,000	
	Services		
6110	6050 - Furn & Equip R & M Supplies	5,000	
	Supplies		
6130	6120 - Furn & Equip R & M Supplies	5,000	
	Services		
	6140 - Furn & Equip R & M Services	5,000	
		174,328	208,328

THE NAACON NATION
SUMMARY OF CHANGES TO BUDGETED POSITIONS

PART I. PROGRAM INFORMATION:									
Program Name/Title: NAAA - Shiprock Agency					Business Unit No.: 113015				
PART II. PERSONNEL/POSITION CHANGES:									
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	
Type of Change	Sub Acct Object Code	Position Number	Job Type / Class Code	Position Title	Employee ID No. or Vacant	Salary	Fringe Benefit	Total (Col. G + H)	
PRORATE	1020	233622	3849	COOK	275448	2,766	1,261	4,027	
PRORATE	1021	238242	3849	COOK	165876	2,766	1,261	4,027	
PRORATE	1022	233618	3849	COOK	150365	2,766	1,261	4,027	
PRORATE	1023	233623	3849	COOK	VACANT	2,766	1,261	4,027	
PRORATE	1024	233626	3849	COOK	136106	2,766	1,261	4,027	
PRORATE	1025	233628	3849	COOK	16387	2,766	1,261	4,027	
PRORATE	1026	238243	3849	COOK	163566	2,766	1,261	4,027	
PRORATE	1027	223638	3849	COOK	153994	2,766	1,261	4,027	
PRORATE	1028	223627	3849	COOK	153313	2,766	1,261	4,027	
PRORATE	1029	236240	3849	COOK	193462	2,766	1,261	4,027	
PRORATE	1032	236241	3849	COOK	159062	2,766	1,261	4,027	
PRORATE	1033	278189	3849	COOK	151099	2,766	1,261	4,027	
PAGE TOTAL:							33,192	15,136	48,328

THE NAVAJO NATION SUPPLEMENTAL FUNDING PROPOSAL SUMMARY

PART I. Business Unit No.: 113015 **Program Title:** Shiprock / Navajo Area Agency on Aging
Division/Branch: NDOH **Amount Requested:** \$208,656.00 **Phone No.:** (505) 368-1250
Prepared By: Dewayne Johnson **Email Address:** d.johnson@nndoh.org

PART II. REASON FOR REQUEST AND STATEMENT OF NEED:

Due to the shortfall of funding, twelve (12) Shiprock Agency Senior Center Cooks had to be reduced to 70-Hrs per Pay Period Ending (1820 Hrs/Year), the total requested amount in this proposal summary will allow reinstatement of the affected positions back to full-time status and secure some backup funds in the repair and maintenance and operating line-items. Though a cut back in working hours was applied, a critical shortfall occurred in the General Fund Repair and Maintenance line-items. In addition, as a result of the State of New Mexico cutting an additional \$200,000.00 in the FY'16 New Mexico House Bill-II NAAA contract allocation, Navajo Nation supplemental fund request became inevitable. At the moment, General Fund Supplemental fund support is an immediate optimistic hope to temporarily replace the funding lost from the State of New Mexico, at least for another year as supplemental funding is often a one-time allocation. As a recap, Shiprock NAAA hopes that the Navajo Nation government will support various solutions proposed by the agency programs within the past 3 to 4 years with one high interest where downsizing the total number of operating senior centers on the Navajo Nation should be considered. The downsizing recommendation may allow for acquiring higher qualified personnel with appropriate salaries and sufficient monies for operating cost since the Navajo Nation keeps cutting funds to NAAA. Perhaps downsizing a majority of the current operating senior centers would stop the yearly program budget cuts, however receiving a government guaranteed assurance that program budget cuts will stop after downsizing would highly be unlikely.

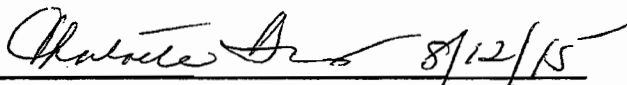
PART III. SCOPE OF WORK/METHODOLOGY

2080 Hrs @ 10.64	1820 Hrs. @ 10.64	Difference w/out FB	FB		
22,131.00	19,364.00	2,767.00	1,261.75	4130-General Office Supplies	20,000.00
22,131.00	19,364.00	2,767.00	1,261.75	4420-General Operating Supplies	40,000.00
22,131.00	19,364.00	2,767.00	1,261.75	4460-Food Supplies	40,000.00
22,131.00	19,364.00	2,767.00	1,261.75	5310-Building/Space	6,000.00
22,131.00	19,364.00	2,767.00	1,261.75	6030-Building R & M Supplies	5,000.00
22,131.00	19,364.00	2,767.00	1,261.75	6050-Building R & M Services	5,000.00
22,131.00	19,364.00	2,767.00	1,261.75	6120-Furn & Equip. R & M Supplies	5,000.00
22,131.00	19,364.00	2,767.00	1,261.75	6140-Furn & Equip. R & M Services	5,000.00
22,131.00	19,364.00	2,767.00	1,261.75	6210-Plumbing	3,000.00
22,131.00	19,364.00	2,767.00	1,261.75	6220-Electrical	3,000.00
22,131.00	19,364.00	2,767.00	1,261.75	6230-HVAC	20,000.00
22,131.00	19,364.00	2,767.00	1,261.75	6240-Pest Control	8,000.00
22,131.00	19,364.00	2,767.00	1,261.75		
Total: 265,572.00	232,368.00	33,204.00	15,141.00		160,000.00

Total Salary with FB 48,345.00
 Policy 91.86
 Workers' Comp Prem 219.15
Total 48,656.00

Total Supplemental Request: 208,656.00

PART IV. AFFIRMATION IS PROVIDED THAT THE PROPOSAL INFORMATION IS COMPLETE AND ACCURATE AND THE APPROPRIATE BRANCH CHIEF RECOMMENDS APPROVAL.

 8/12/15

REVIEWED BY: Division Director's Signature / Date

RECOMMEND APPROVAL: Branch Chief's Signature / Date

THE NAVAJO NATION PROGRAM BUDGET SUMMARY

PART I. Business Unit No.:		Program Title:		Navajo Special Diabetes Project		Division/Branch:		Health	
Prepared By:		Betty Delrow		Phone No.:		928-871-6532		Email Address:	
								b.delrow@nnsdp.org	

PART II. FUNDING SOURCE(S)			Fiscal Year Term	Amount	% of Total	PART III. BUDGET SUMMARY				
						Fund Type Code	NNC Approved Original Budget	(A)	(B)	(C)
										Difference (Column B - A)
General Funds Unmet Needs			10/1/15-9/30/16	46,429.00	100.00%					0
					0.00%					0
						2001 Personnel Expenses				0
						3000 Travel Expenses				0
						3500 Meeting Expenses				0
						4000 Supplies				0
						5000 Lease and Rental				0
						5500 Communications and Utilities				0
						6000 Repairs and Maintenance				0
						6500 Contractual Services	1		7,433	7,433
						7000 Special Transactions	1		38,996	38,996
						8000 Public Assistance				0
						9000 Capital Outlay				0
						9500 Matching and Indirect Cost				0
						TOTAL		\$0.00	46,429.00	46,429

PART IV. POSITIONS AND VEHICLES		(D)	(E)
Total # of Positions Budgeted:			
Total # of Permanently Assigned Vehicles:			

PART V. I HEREBY ACKNOWLEDGE THAT THE INFORMATION CONTAINED IN THIS BUDGET PACKAGE IS COMPLETE AND ACCURATE.	
--	--

Betty Delrow <i>Betty Delrow 8-13-15</i> SUBMITTED BY: Program Manager's Printed Name and Signature / Date		Ramona Antone Naz <i>Ramona Antone Naz 8/13/15</i> APPROVED BY: Division Director/Branch Chief's Printed Name and Signature / Date	
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THE NAVAJO NATION PROGRAM PERFORMANCE CRITERIA

FY 2016

PART I. PROGRAM INFORMATION:		Navajo Special Diabetes Project							
Business Unit No.:		Program Name/Title:							
PART II. PLAN OF OPERATION REFERENCE/LEGISLATED PROGRAM PURPOSE:									
PART III. PROGRAM PERFORMANCE CRITERIA:									
1. Program Performance Area:		1st QTR		2nd QTR		3rd QTR		4th QTR	
6% of individual will have achieved 5-7% of their weight loss goal.		Goal		Actual		Goal		Actual	
Goal Statement:									
Reduce the incidence rate of diabetes among the Navajo population through community directed activities.		22		23		24		25	
2. Program Performance Area:		1st QTR		2nd QTR		3rd QTR		4th QTR	
20% of individual will have achieved their nutritional goal.		Goal		Actual		Goal		Actual	
Goal Statement:									
Reduce the incidence rate of diabetes among the Navajo population through community directed activities.		116		126		136		146	
3. Program Performance Area:		1st QTR		2nd QTR		3rd QTR		4th QTR	
5% of individuals will have achieved their physical activity goal.		Goal		Actual		Goal		Actual	
Goal Statement:									
Reduce the incidence rate of diabetes among the Navajo population through community directed activities.		231		241		251		261	
4. Program Performance Area:		1st QTR		2nd QTR		3rd QTR		4th QTR	
5% of individuals will participate in a physical activity event.		Goal		Actual		Goal		Actual	
Goal Statement:									
Reduce the incidence rate of diabetes among the Navajo population through community directed activities.		420		458		496		534	
5. Program Performance Area:		1st QTR		2nd QTR		3rd QTR		4th QTR	
20% of individual will participate in an diabetes awareness education.		Goal		Actual		Goal		Actual	
Goal Statement:									
Reduce the incidence rate of diabetes among the Navajo population through community directed activities.		770		840		910		980	
PART IV. I HEREBY ACKNOWLEDGE THAT THE ABOVE INFORMATION HAS BEEN THOROUGHLY REVIEWED.									
Betty Delow Program Manager's Printed Name and Signature/Date		Ramona Antone Nez Division Director/Branch Chief's Printed Name and Signature / Date							

THE NATION

DETAILED LINE ITEM BUDGET AND JUSTIFICATION

PART I. PROGRAM INFORMATION: Program Name/Title: Navajo Special Diabetes Project Business Unit No.:			
PART II. DETAILED BUDGET:			
(A)	(B)	(C)	(D)
Object Code (LOD 6)	Object Code Description and Justification	Total by DETAILED Object Code	Total by MAJOR Object Code
6500	CONTRACTUAL SERVICES Professional Services for various program initiatives. Contractual services for specialized services. for DSL line.		7,433
6520	Consulting		
	6530 Fees	7,433	
	6540 Expenses		
7000	SPECIAL TRANSACTIONS Promote and advertise program's initiative. Gifts and awards to be presented to employees. Catering and refreshments for department special events. Print advertising and employee training fees.		38,996
7510	Training & Professional	38,996	
	7520 Training/Registration Fees		
	7530 Training Supplies		
	7550 Mandatory Professional		
TOTAL		46,429	46,429

THE NAVAJO NATION
EXTERNAL CONTRACT AND GRANT FUNDING INFORMATION

PART I. PROGRAM INFORMATION: Program Name/Title: <u>Navajo Special Diabetes Project</u> K #: <u>150526</u> Contract/Grant No.: <u>H1D1HS0199</u> Prepared by: <u>Betti Deltrow</u>			
PART II. PURPOSE OF FUNDING AND MATCH FUNDS REQUIREMENT			
PART III. BUDGET INFORMATION:			
Major Object Code and Description	(B) Current Award Fiscal Year 2015	(C) Anticipated Funding Fiscal Year 2016	(D) Difference Columns (C) - (B)
2001 Personnel Expenses	3,029,950	4,124,813	1,094,863.00
3000 Travel Expenses	365,634	378,075	12,441.00
3500 Meeting Expenses	-	-	-
4000 Supplies	38,004	233,000	194,996.00
5000 Lease and Rental	65,380	106,500	41,120.00
5500 Communication and Utilities	5,500	122,599	117,099.00
6000 Repairs and Maintenance	-	203,000	203,000.00
6500 Contractual Services	50,000	60,000	10,000.00
7000 Special Transaction	40,220	273,500	233,280.00
8000 Assistance	-	-	-
9000 Capital Outlay	2,280,000	50,000	(2,230,000.00)
9510 Matching - Cash	-	-	-
9610 Matching - In - Kind	-	-	-
9710 Indirect Cost (Overhead) Allocation	609,300	932,501	323,201.00
TOTALS:	6,483,988	6,483,988	-
PART IV. FTEs/MATCH FUNDS: No. of Positions/ FTEs: <u>78</u> <u>78</u> MATCHING FUND REQUIRED: Required GF Cash Match: <u>-</u> Required GF In - Kind Match: <u>-</u> CONCURRED BY:			
Contracting Officer's Signature / Date: _____			
PART V. ACKNOWLEDGEMENT: Submitted by (print): <u>Betty Deltrow</u> Approved by (print): <u>Ramona Antone Nez</u> Signature/Date: <u>Betty Deltrow 8/13/15</u> Signature/Date: <u>Ramona Antone Nez 8/13/15</u>			

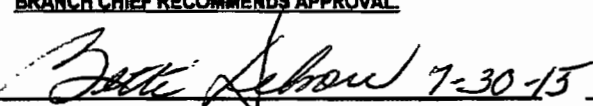
THE NAVAJO NATION
SUPPLEMENTAL FUNDING PROPOSAL SUMMARY

PART I. Business Unit No.: _____		Program Title: <u>Navajo Special Diabetes Project</u>	
Division/Branch: <u>HEALTH</u>	Amount Requested: <u>\$46,429.00</u>	Phone No.: <u>928-871-6532</u>	
Prepared By: <u>Betti Delrow, Program Manager</u>		Email Address: <u>b.delrow@nnsdp.org</u>	

PART II. REASON FOR REQUEST AND STATEMENT OF NEED:
The Navajo Special Diabetes Project is requesting for Supplemental Funding's assistance in paying two (2) outstanding bills for fiscal Year 2014 on rendered professional consultant services for employee staff development trainings. The Navajo Nation Office of the Controller has determined that the rendered services are "after the fact" and were not able to process the contract and payment due to contracts not signed and executed by the Navajo Nation President by December 31, 2014.

PART III. SCOPE OF WORK/METHODOLOGY
Consultant (Creative Project Associate's) provided staff development training services utilizing completed Navajo Terminology For Foods and Nutrients Resource Booklet. The training was structured toward learning objectives, hands-on activities, and role playing with pre/post-tests. The consultant provided the following scope of training services in month of December 2014: 1. Developed a comprehensive training session plan and curriculum which included formulating instruction methods and techniques, produced and conducted a pre/post-test assessments, utilizing medically accurate and culturally sensitive Navajo translation of nutrition medical terminology; 2. Provided training materials and necessary equipment for the 2 days training session on the content of Navajo Terminology for Foods and Nutrients at four (4) different geographical locations on and/or near the Navajo Nation; 3. Provided learning opportunities for other communities, community leaders, administration, and health care professionals; 4. Provided role playing to help with accurate and culturally sensitive Navajo (Diné) translation of the nutrition medical terminology; and 5. The training sessions included Navajo (Diné) language reading, writing and interpretation strategies for training specifics and overall elements.

Consultant (AIMS Seminars) provided staff development trainings at 2014 NSDP Annual Meeting in December 2014. Staff development workshops to Navajo Nation Special Diabetes Project Employees on the following topics: "Ethics, Conflict of Interest & Standards of Conduct for Tribal Staff"; "Laughter in Workplace"; "Team Building"; "Employee Wellness"; "Self-Esteem & Motivation and Communication & Conflict Management"; and "Fitness, Nutrition & Diabetes"

PART IV. <u>AFFIRMATION IS PROVIDED THAT THE PROPOSAL INFORMATION IS COMPLETE AND ACCURATE AND THE APPROPRIATE BRANCH CHIEF RECOMMENDS APPROVAL</u>	
 REVIEWED BY: Division Director's Signature / Date	RECOMMEND APPROVAL: Branch Chief's Signature / Date

THE NAVAJO NATION PROGRAM BUDGET SUMMARY

[illegible]

NNOMB-BF2

THE NAVAJO NATION
DETAILED LINE ITEM BUDGET AND JUSTIFICATION

PART I. PROGRAM INFORMATION:			
Program Name/Title: Navajo Nation Food Distribution Program		Business Unit No.: 113006	
PART II. DETAILED BUDGET:			
(A) (B) (C) (D)			
Object Code (LOD 6)	Object Code Description and Justification	Total by DETAILED Object Code	Total by MAJOR Object Code
2200	2200 Salary Adjustment To compensate Eligibility Technicians who were inadvertently not paid for a period of time due to an internal oversight in the implementation of an approved revised pay and grade.		35,554
	2220 Salary Adjustment Compensation to Eligibility Technicians for revised pay and grade that has not been paid to date.		
TOTAL			35,554