LIFT

Community Action Agency, Inc.

Board of Directors Meeting

SEPTEMBER 10, 2024 • 10:00 AM

HEAD START ADMINISTRATION OFFICE

1005 S. 5TH STREET - HUGO, OKLAHOMA

Our Mission:

To improve the lives of low-income individuals and families through service and collaboration leading to self-sufficiency.

Board of Directors and/or Executive Committee Meeting
LIFT Community Action Agency, Inc.
Tuesday, September 10, 2024 · 10:00 a.m.
Head Start Administration Office · 1005 S. 5th Street · Hugo, Oklahoma · 74743

AGENDA

A. Call to Order and Invocation

B. Opening of Board Meeting – Roll Call, Declaration of Quorum, and Introduction of Guests

C. Finance/Audit/Loan Committee Report

Consent Docket *- The following items of business indicated by brackets (D and E, F, G) may be voted upon by a single vote of the Board without discussion, unless and except for any item which any one of the Board desires to have discussion about at the meeting or withdrawn from the Consent Docket and handled individually in order immediately following the completion of the Consent Docket.*

D. Consideration, Discussion, and Vote to Approve August 2024 Regular Meeting Minutes (*Organizational Standard 5.5*)

E. Consideration, Discussion, and Vote to Approve July 2024 Financial Reports; Distribution of August 2024 Financials for October 2024 Consideration and Vote (*OS 8.7*)

F. Consider Submission of Resolutions/Grant Applications, Vote to Approve – **$4,913,867.95**

1. PY 2024 Department of Human Services Low Income Home Energy Assistance Program Application to Oklahoma Department of Commerce/Community Development - ***$86,168.11***
2. Pathway Forward Weatherization Assistance Program Bipartisan Infrastructure Law Application (Round 2) to ODOC - ***$1,018,249.84***
3. FY 2024 Community Services Block Grant Application (1% Increase) to ODOC - ***$2,286***
4. SFY 2025 Community Action Agencies State Appropriated Funds (Head Start) Application to ODOC - ***$91,962***
5. SFY 2025 CAA State Appropriated Funds Application to ODOC - ***$12,160***
6. Signature Cause Grant Application (Holiday Food Baskets) to International Paper Foundation - ***$2,381***
7. Choosing Childbirth Act Funding Application to Oklahoma State Dept. of Health - ***$3,377,586***
8. Weyerhaeuser Giving Fund Application to Weyerhaeuser Company - ***$30,000***
9. PY 2024 Department of Energy Weatherization Assistance Program Application to ODOC - ***$293,075***

G. Consider Acceptance of Grants/Contracts/Awards, Vote to Approve – **$1,434,959.63**

1. FY 2025 Domestic Violence/Sexual Assault Program Services Contract Award from Oklahoma Office of Attorney General - ***$237,992.68***
2. Pathway Forward Weatherization Assistance Program Bipartisan Infrastructure Law Award (Round 2) from ODOC - ***$1,018,249.84*** *(Total Awarded: $1,494,642.84)*
3. PY 2024 Department of Human Services LIHEAP Award from ODOC - ***$86,168.11***
4. SFY 2025 CAA State Appropriated Funds Award from ODOC - ***$12,160***
5. 2024 Victims of Crime Act Grant Award (Court Appointed Special Advocates) from Oklahoma District Attorneys Council - ***$32,185***
6. 2024 VOCA Grant Award (Victim Advocacy Services) from Oklahoma DAC - ***$48,204***

H. Update on Comprehensive Community Addiction Recovery Center/Certification Process (*OS 5.9*)

I. Consideration, Discussion, and Vote to Approve LIFT CAA Policies and Procedures for Outpatient Mental Health Treatment Certification through the Oklahoma Department of Mental Health and Substance Abuse Services

J. Presentation and Review of the Early Head Start-Child Care Partnership Governance, Leadership, and Oversight Capacity Screener and Training Plan (*OS 5.7 & 5.9*)

K. Consideration, Discussion, and Vote to Approve the Early Head Start-Child Care Partnership Governance, Leadership, and Oversight Capacity Screener and Training Plan

L. Consideration, Discussion, and Vote to Approve 2024-2025 Mental Health Contract with Zen Gee Counseling and Psychological Services, LLC

M. Consideration, Discussion, and Vote to Approve 2024-2025 Head Start/Early Head Start Training and Technical Assistance Plan

N. Consideration, Discussion, and Vote to Approve Darla Galyon (Head Start/EHS/EHS-Child Care Director) and Mattie McKee (Head Start/EHS/EHS-Child Care Assistant Director) as the E-Rate Purchasing Agents for the 2024-2025 School Year

O. Board Training/Programmatic Report: Compliance with Children's Internet Protection Act (CIPA) Cyberbullying Awareness (*OS 5.7 & 5.9*)

P. Board Training/Programmatic Report: LIFT Family Resource Center (*OS 5.7 & 5.9*)

Q. Board Training: LIFT CAA Finances (*OS 5.7*)
- CSBG Organizational Standards – Fiscal Management
- Financial Oversight – Overall Agency Fiscal Status, Procedures, Practices, Transactions
- Interpreting Financial Statements

R. Board Giving Report (*OS 5.7*)

S. Transportation Advisory Council Report (*OS 5.9*)

T. Policy Council Report (*OS 2.1 & 5.9*)

U. Recognition of September 2024 Employee of the Month:
Kenesha Coleman, Transit Clerk – Transit Program

V. Recognition of Service Awards
Five Years: Leota Southard, Center Director – Early Learning Centers
Carla Spradling, Teacher Assistant – Head Start Program
Fifteen Years: Adina Burrell, Bookkeeper – Administration

W. Other Reports/Announcements/Correspondence: HS/EHS/EHS-CC Monthly Reports (Program Summary, Communication and Guidance, Meals/Snack, Enrollment/Attendance, Data Analysis); Rural Communities Opioid Response Program-Overdose Response Grant No-Cost Extension

Approval; Second Chance Act: Adult Reentry Education, Employment, Treatment and Recovery Program Grant No-Cost Extension Approval; 2023 LIFT CAA Annual Impact Report (*OS 5.9*)

X. Consideration, Discussion, and Vote on New Business (*Not known about or which could not have been reasonably foreseen prior to time of posting the Agenda, Oklahoma Statute Title 25 § 311*)

Y. Consideration, Discussion, and Vote to Adjourn

Posted: _____ *Date:* _____ *Time:* _____

LIFT COMMUNITY ACTION AGENCY, INC.
209 NORTH 4TH STREET
HUGO, OKLAHOMA 74743

MINUTES
BOARD OF DIRECTORS MEETING
August 13, 2024
Head Start Administration Office - Hugo, Oklahoma

The Board of Directors of LIFT Community Action Agency, Inc. met in a regular meeting session on Tuesday, August 13, 2024 at 10:09 a.m. The meeting was held at LIFT CAA's Head Start Administration Office, located at 1005 S. 5th Street in Hugo, Oklahoma. The notice of time, place, and an agenda for the meeting were posted 24 hours prior within prominent view at the main office (209 N. 4th St., Hugo, Oklahoma) and the meeting site (1005 S. 5th St., Hugo, Oklahoma) as well as online at https://liftca.org/board/.

The meeting was called to order by Chairman David Hawkins.

The Invocation was given by Board Member Andrea Henkel.

Roll Call was taken and a quorum was established (21 Board Members present, 5 absent). The following Board Members were present at the meeting site: Tami Barnes, Tiffany Brockway, Colby Bryant, Brad Burgett, Kevin Cory, Brent Franks, Kristi Graham, Patsy Guess, David Hawkins, Andrea Henkel, Jordan Hill, Jia Johnson, Sharon Johnson, Vickie Leathers, Kara Maness, Carolyn Pool, David Smith, Consuelo Splawn, Jim Bob Sullivan, Leah Thomas, and Vicky Wade. The following members were absent: Jeffery Lucas, Sandra Meeks, William Smith, Debra Williams, and Craig Young. LIFT CAA employees and visitors present at the meeting site were: Kinsey Cox, Rhonda Teague, Macy Self, Sheree Ensley, Darla Galyon, Johnny Moffitt, Brandon McDaniel, Rebecca (Reynolds) Porter, Jordan Mack, Mattie McKee, Kathy James, Aimy Kuykendall, Ayla Pennington, Michelle Pulliam, Amber Duncan, and Pam Waugh.

In order to be in compliance with the Open Meeting Act (Title 25, Oklahoma Statutes §§ 301-314), the vote of each member was publicly cast and recorded. The agenda contained Consent Docket items of business and the rules that pertain to voting on the items.

Brad Burgett, Secretary/Treasurer, provided the Board with a report from the Committee for Nominations, who met prior to the meeting to determine the slate of LIFT CAA Officer Candidates for the upcoming year (2024-2025) in accordance with the agency's By-Laws and requirements for the annual election of Officers. The Committee for Nominations recommended the existing Board Officers to serve over the next year: Chairman – David Hawkins (representing McCurtain County); Vice-Chairman – Leah Thomas (representing Choctaw County); and Secretary/Treasurer – Brad Burgett (representing Pushmataha County). The Committee for Nominations also recommended the existing members of the Executive and Personnel Committee to serve for 2024-2025.

David Hawkins, Chairman, requested the Board's consideration, discussion, and vote to elect LIFT CAA Board of Directors Officers for 2024-2025, pursuant to LIFT CAA Amended and Restated By-Laws, Article VI, Section 2. Hawkins also opened the floor to other nominations. A motion was made by Kara Maness and seconded by Andrea Henkel to retain the existing Board Officers as recommended by the Committee for Nominations, therefore electing the following to serve as LIFT CAA Board of Directors Officers for 2024-2025: Chairman – David Hawkins, Vice-Chairman – Leah Thomas, and Secretary/Treasurer – Brad Burgett. The roll call vote was as follows: Yes 20; No 0; Abstain 0. The motion carried. The Voting Record is attached (Item D).

David Hawkins, Chairman, requested the Board's consideration, discussion, and vote to elect LIFT CAA Executive and Personnel Committee Members for 2024-2025, pursuant to LIFT CAA Amended and Restated By-Laws, Article VI, Section 2 and Article X, Section 1. As stipulated in the By-Laws, the composition of the Committee (which includes the elected Officers of the Board) shall consist of seven members total, comprised of at least one Public sector, one Low-Income sector, and one Private sector member, to be elected by majority vote of the Board. Hawkins listed the current six members of the Committee (with one vacant position) and then asked for any nominations. Brent Franks was nominated to fill the vacant position on the Committee. A motion was made by Jordan Hill and seconded by Jim Bob Sullivan to retain the current Committee members for the upcoming year as recommended by the Committee for Nominations as well as elect Brent Franks to fill the open position; this action elects the following (in addition to the elected Officers) to the LIFT CAA Executive and Personnel Committee for 2024-2025: Brent Franks (Private Sector, Pushmataha County), Vickie Leathers (Private Sector, Pushmataha County), Sandra Meeks (Private Sector, McCurtain County), and Craig Young (Public Sector, McCurtain County). The roll call vote was as follows: Yes 20; No 0; Abstain 0. The motion carried. The Voting Record is attached (Item E).

Sheree Ensley, Fiscal Officer, provided the Board with the Finance/Audit/Loan Committee Report. The Committee met on August 13, 2024 at 9:07 a.m. The Committee received a status report on all active loans; there were no new loan applications to present. The Committee voted to recommend full Board approval of the agency's Financial Reports for June 2024 and was presented with the July 2024 Financial Reports. There were no property updates.

CONSENT DOCKET ITEMS

CONSIDER APPROVAL OF MEETING MINUTES/FINANCIAL REPORTS

David Hawkins, Chairman, requested the Board's consideration, discussion, and vote to approve the July 2024 Regular Meeting Minutes and the June 2024 Financial Reports; the July 2024 Financials were distributed for consideration and vote at the September 2024 Board Meeting (Organizational Standards 5.5 and 8.7). A motion was made by Tami Barnes and seconded by Jia Johnson to approve the July 2024 Regular Meeting Minutes and the June 2024 Financial Reports. The roll call vote was as follows: Yes 20; No 0; Abstain 0. The motion carried. The Voting Record is attached (Items G & H).

CONSIDER SUBMISSION OF RESOLUTIONS/GRANT APPLICATIONS

1. Choctaw County Emergency Food and Shelter Program – Phase 41 Funding Application to EFSP/United Way in the amount of $9,000; if awarded, these funds will be used to

provide emergency food and shelter (utility, rent, or mortgage) assistance to needy individuals in Choctaw County.

2. McCurtain County EFSP – Phase 41 Funding Application to EFSP/United Way in the amount of $1,500; if awarded, these funds will be used to provide emergency food and shelter (utility, rent, or mortgage) assistance to needy individuals in McCurtain County.
3. Pushmataha County EFSP – Phase 41 Funding Application to EFSP/United Way in the amount of $6,700; if awarded, these funds will be used to provide emergency food and shelter (utility, rent, or mortgage) assistance to needy individuals in Pushmataha County.
4. FY 2025 Retired and Senior Volunteer Program Grant Application to AmeriCorps in the amount of $64,299; if awarded, funding will be used to support program operations within the first year of a new three-year grant cycle.

After discussion and Board Member input with regards to the applications presented, a motion was made by Andrea Henkel and seconded by Brad Burgett to approve the submission of resolutions and/or grant applications in the amount of $81,499 presented as listed on the Consent Docket. The roll call vote was as follows: Yes 20; No 0; Abstain 0. The motion carried. The Voting Record is attached (Item I).

CONSIDER ACCEPTANCE OF GRANTS/CONTRACTS/AWARDS

1. Child Care Stabilization Grant Program Awards (Year 3/Quarter 4, Early Learning Centers) from Choctaw Nation of Oklahoma in the amount of $18,000; these funds will provide key operating support to maintain child care services within the Early Learning Centers.
2. SFY 2025 Older Americans Act Title III KEDDO Area Agency on Aging Grant Award from Kiamichi Economic Development District of Oklahoma in the amount of $47,142.17; these funds will be used to administer and operate a Title III program to provide public transportation for eligible participants (age 60 years or older) residing in Choctaw, McCurtain, and Pushmataha Counties within the KEDDO district.
3. 2024 Grant Award (Innovation & Pilot Project) from Potts Family Foundation, Inc. in the amount of $34,247; these funds will be used to establish the Family Support and Resiliency Initiative. Project funding will allow for the creation of a new Family Advocate staff position, whose purpose will be to provide evidence-based family support services to children (prenatal to age 5) and their families. The project will also work to develop child, family and community resilience, supporting early relational health and preventing and mitigating adverse childhood experiences through the provision of education/training and family-positive activities/events.
4. FY 2024 Regional Supplemental Grant Award from NeighborWorks® America in the amount of $15,000; these funds will support the expense associated with conducting Capital Needs Assessments at nine LIFT CAA Apartment locations. These locations include Belmont Place, Boswell, Chappell, Clayton Place, Fort Towson, Garvin, Kiamichi Place, Soper, and Terry Hill.
5. FY 2024 Early Head Start-Child Care Partnership Program Grant Award (New/Baseline & Cost-of-Living Adjustment) from Administration for Children and Families, Office of Head Start in the amount of $2,267,831; New/Baseline funding ($2,216,745) will provide support for program operations and training/technical assistance for the EHS-CC Program for a period of one year (first of five-year grant cycle), serving 120 infants and toddlers in

partnership with six area child care centers. Additionally, COLA funding ($51,086) will be used to provide LIFT CAA's Early Head Start-Child Care Partnership staff with a 2.35% COLA increase (Budget Period: 8/1/2024–7/31/2025). The COLA will serve to increase salaries and fringe benefits in an effort to ensure retention of experienced, qualified staff and maintain overall program quality. The COLA funds will be divided between Personnel Salaries, Fringe Benefits and Indirect Costs associated with staff salaries. The 2.35% COLA will reflect an increase in the hourly rate of pay for each employee and a permanent increase of 2.35% in the Head Start/EHS/EHS-Child Care pay scale. The balance remaining after providing the COLA increase in the hourly rate of staff pay will be used under the Contractual category to offset increased operating costs within the partner child care centers. Included with the grant award is approval of a Waiver of the Non-Federal Share associated with the Federal Request in the amount of $463,843.

6. Fathers Forward Initiative Contract Award (Choctaw County, Year 1) from Oklahoma Department of Human Services in the amount of $300,000; with this funding, the Choctaw County Strong Fathers Program will work to promote responsible fatherhood through activities and supports aimed at improving outcomes for fathers and families in Choctaw County, Oklahoma. Funds will be used to support three staff positions to conduct the program during the three-year project period, with a combined reach of 225 fathers/father figures served.
7. Fathers Forward Initiative Contract Award (McCurtain County, Year 1) from OKDHS in the amount of $300,000; with this funding, the McCurtain County Strong Fathers Program will work to promote responsible fatherhood through activities and supports aimed at improving outcomes for fathers and families in McCurtain County, Oklahoma. Funds will be used to support three staff positions to conduct the program during the three-year project period, with a combined reach of 225 fathers/father figures served.
8. Fathers Forward Initiative Contract Award (Pushmataha County, Year 1) from OKDHS in the amount of $300,000; with this funding, the Pushmataha County Strong Fathers Program will work to promote responsible fatherhood through activities and supports aimed at improving outcomes for fathers and families in Pushmataha County, Oklahoma. Funds will be used to support three staff positions to conduct the program during the three-year project period, with a combined reach of 225 fathers/father figures served.
9. Choctaw County EFSP – Phase 41 Funding Award from EFSP/United Way in the amount of $9,000; these funds will be used to provide emergency food and shelter (utility, rent, or mortgage) assistance to needy individuals in Choctaw County.
10. McCurtain County EFSP – Phase 41 Funding Award from EFSP/United Way in the amount of $1,500; these funds will be used to provide emergency food and shelter (utility, rent, or mortgage) assistance to needy individuals in McCurtain County.
11. Pushmataha County EFSP – Phase 41 Funding Award from EFSP/United Way in the amount of $6,700; these funds will be used to provide emergency food and shelter (utility, rent, or mortgage) assistance to needy individuals in Pushmataha County.

A motion was made by Tami Barnes and seconded by Jia Johnson to approve acceptance of grants, contracts, and awards in the amount of $3,299,420.17 as presented and listed on the Consent Docket. The roll call vote was as follows: Yes 20; No 0; Abstain 0. The motion carried. The Voting Record is attached (Item J).

Johnny Moffitt, Associate Director, requested the Board's consideration, discussion, and vote to approve the revised LIFT Transit Drug and Alcohol Policy. Moffitt explained that there are two proposed revisions to the Drug and Alcohol Policy, which are both found on Attachment 4 and will serve to help improve upon programmatic efficiency and compliance. The first concerns the addition of a named secondary Designated Employer Representative or DER, Sylvia Watkins (Dispatcher/Trainer with the Transit Program), along with her contact information. Watkins will serve in a supportive capacity, assisting the current DER Jeannie McMillin (and Transit Program Director) with administration of the policy/procedures as needed. The second revision reflects the program's transition to a new third-party contractor (per Oklahoma Department of Transportation guidance) for the provision of Medical Review Officer services, along with corresponding contact information. The MRO reviews all the tests and makes the determination of a negative or positive result. A motion was made by Kara Maness and seconded by Tami Barnes to approve the revised LIFT Transit Drug and Alcohol Policy as proposed. The roll call vote was as follows: Yes 20; No 0; Abstain 0. The motion carried. The Voting Record is attached (Item K).

David Hawkins, Chairman, requested the Board's consideration, discussion, and vote to elect Board Members for vacant Committee Seats, pursuant to LIFT CAA Amended and Restated By-Laws, Article XI. Hawkins explained that, through this action, one Board Member would be elected to each of the following Committees, to fill currently vacant seats: Asset Management Committee; By-Laws Committee; Compensation Committee; Finance/Audit/Loan Committee; Risk Assessment and Management Committee; and Succession Committee. Hawkins then opened the floor to nominations. A motion was made by Kevin Cory and seconded by Brad Burgett to elect the following Board Members for vacant Committee Seats:

- Asset Management Committee – Debra Williams (Private Sector, Pushmataha County)
- By-Laws Committee – Kara Maness (Low-Income Sector, McCurtain County)
- Compensation Committee – Brent Franks (Private Sector, Pushmataha County)
- Finance/Audit/Loan Committee – Carolyn Pool (Low-Income Sector, Pushmataha County)
- Risk Assessment & Management Committee – Jeffery Lucas (Private Sector, Pushmataha Co.)
- Succession Committee – William Smith (Low-Income Sector, Choctaw County).

The roll call vote was as follows: Yes 20; No 0; Abstain 0. The motion carried. The Voting Record is attached (Item L).

Jordan Mack, Head Start/Early Head Start/EHS-Child Care Assistant Director, requested the Board's consideration, discussion, and vote to approve the Head Start and Early Head Start/EHS-Child Care Program Menus for the 2024-2025 School Year. The menus, which are on a six-week rotation, were reviewed and approved by a Registered Dietician, to ensure proper nutritional content and consistency with Child and Adult Care Food Program guidelines. A motion was made by Brad Burgett and seconded by Jordan Hill to approve the Head Start and Early Head Start/EHS-Child Care Program Menus for the 2024-2025 School Year. The roll call vote was as follows: Yes 20; No 0; Abstain 0. The motion carried. The Voting Record is attached (Item M).

Jordan Mack, Head Start/Early Head Start/EHS-Child Care Assistant Director, requested the Board's consideration, discussion, and vote to approve the 2024 HS/EHS/EHS-CC Community Assessment. The programs conducted a comprehensive Community Assessment in 2021. The Community Assessment compiles data on the strengths, needs, and resources of the programs' service area. In accordance with Office of Head Start requirements, the 2024 Annual Update is an

addendum to the 2021 Community Assessment (and subsequent updates) used to identify significant changes to the service area. The Community Assessment is used to ensure services provided are best meeting the needs of children and families served by the programs. Mack reviewed the major updates and data of interest with the Board. A motion was made by Kara Maness and seconded by Tami Barnes to approve the 2024 Head Start/Early Head Start/EHS-Child Care Community Assessment. The roll call vote was: Yes 20; No 0; Abstain 0. The motion carried. The Voting Record is attached (Item N).

Darla Galyon, Head Start/Early Head Start/EHS-Child Care Director, requested the Board's consideration, discussion, and vote to approve the updated HS/EHS/EHS-CC Pay Scale based on the 2.35% Cost-of-Living Adjustment Allowance, per the grant award accepted under Item J. The 2.35% COLA reflects an increase in the hourly rate of pay for each program employee and a permanent increase of 2.35% in the Head Start/EHS/EHS-CC Pay Scale. A motion was made by Carolyn Pool and seconded by Jim Bob Sullivan to approve the updated Head Start/Early Head Start/EHS-Child Care Pay Scale as presented. The roll call vote was as follows: Yes 19; No 0; Abstain 0. The motion carried. The Voting Record is attached (Item O).

Darla Galyon, Head Start/Early Head Start/EHS-Child Care Director, provided the Board with an update on the Office of Head Start Focus Area 1 Monitoring Review (Organizational Standard 5.9). The Focus Area 1 Monitoring Review involves assessing a grant recipient's approach to program design and service delivery. This review helps understand the foundation of the program, including staffing structure, governance, education, health, family services, and fiscal infrastructure. It is conducted virtually and focuses on how the program plans to provide high-quality services to children and families. The timeline for the Focus Area 1 Monitoring Review typically involves several key steps, beginning with notification of the upcoming review at least 45 calendar days in advance. Planning and scheduling is then conducted, with the review taking place within the first or second year of the grant period. For LIFT's Head Start, Early Head Start, and EHS-Child Care Programs, the Monitoring Review will take place at some point during FY 2025, which comprises the following period of time: December 1, 2024 – July 31, 2026.

Kathy James, Senior Program Planner, provided Board Training over the following: the Open Meeting Act, Open Records Act, and Role/Recording of the Board Meeting Minutes (Organizational Standard 5.7). The training was facilitated using material provided by the Oklahoma Office of the Attorney General and excerpts from "Tools for Top-Notch CAAs: A Practical Approach to Governance and Financial Excellence" by CAPLAW.

Brandon McDaniel, Housing Director, provided a Board Training/Programmatic Report over Quarterly (April–June 2024) Housing Production, as reported to NeighborWorks® America (Organizational Standards 5.7 and 5.9). McDaniel provided a review of the submitted report and facilitated discussion regarding Housing production and activities over the last quarter.

Mattie McKee, Head Start/Early Head Start/EHS-Child Care Assistant Director, provided the Board with the Policy Council Report for the July 16, 2024 meeting (Organizational Standards 2.1 and 5.9).

Rebecca (Reynolds) Porter, Executive Director, recognized Aimy Kuykendall (Park Assistant, Hugo Lake Park) as the August 2024 Employee of the Month.

Rebecca (Reynolds) Porter, Executive Director, recognized the following Service Award recipients: Five Years – April McAhren (Teacher Assistant, Head Start Program), Michelle Pulliam (Program Analyst, Technical and Management Assistance Program), Vicki Reed (Cook, Head Start Program), Michael Taylor (Transit Driver, Transit Program); Ten Years – Stacey Hill (Teacher, Head Start Program); Twenty-Five Years – Pam Waugh (Program Director, Healthy Start Program); and Thirty-Five Years – Sheila Price (Teacher, Head Start Program).

Other Reports/Announcements/Correspondence were presented as follows: Head Start/Early Head Start/EHS-Child Care Monthly Reports (Program Summary, Communication and Guidance, Meals/Snack, Enrollment/Attendance, Data Analysis) and Kiamichi Family Medical Center - Hugo Facility Grand Opening/Ribbon Cutting Event (Organizational Standard 5.9).

There being no other business to come before the Board, a motion was made by Brad Burgett and seconded by Tami Barnes to adjourn the regular meeting. The roll call vote was as follows: Yes 20; No 0; Abstain 0. The motion carried. Voting record is attached (Item X).

The Regular Meeting adjourned at 10:50 a.m.

_____
Brad Burgett, Secretary/Treasurer

CALL TO ORDER: 10:09 am

	August 13, 2024	Present	Absent	K. MANESS D			A. HENKEL D			J. HILL E			JB. SULLIVAN E			T. BARNES G&H			J. JOHNSON G&H			A. HENKEL I			B. BURGETT I			T. BARNES J			J. JOHNSON J		
				Y	N	A	Y	N	A	Y	N	A	Y	N	A	Y	N	A	Y	N	A	Y	N	A	Y	N	A	Y	N	A	Y	N	A	Y	N	A
1	Tami Barnes	✓		✓						✓						✓						✓						✓							
2	Tiffany Brockway	✓		✓						✓						✓						✓						✓							
3	Colby Bryant	✓		✓						✓						✓						✓						✓							
4	Brad Burgett	✓		✓						✓						✓						✓						✓							
5	Kevin Cory	✓		✓						✓						✓						✓						✓							
6	Brent Franks	✓		✓						✓						✓						✓						✓							
7	Kristi Graham	✓		✓						✓						✓						✓						✓							
8	Patsy Guess	✓		✓						✓						✓						✓						✓							
9	Andrea Henkel	✓		✓						✓						✓						✓						✓							
10	Jordan Hill	✓		✓						✓						✓						✓						✓							
11	Jia Johnson	✓		✓						✓						✓						✓						✓							
12	Sharon Johnson	✓		✓						✓						✓						✓						✓							
13	Vickie Leathers	✓		✓						✓						✓						✓						✓							
14	Jeffery Lucas		✓																																
15	Kara Maness	✓		✓						✓						✓						✓						✓							
16	Sandra Meeks		✓																																
17	Carolyn Pool	✓		✓						✓						✓						✓						✓							
18	David Smith	✓		✓						✓						✓						✓						✓							
19	William Smith		✓																																
20	Consuelo Splawn	✓		✓						✓						✓						✓						✓							
21	Jim Bob Sullivan	✓		✓						✓						✓						✓						✓							
22	Leah Thomas	✓		✓						✓						✓						✓						✓							
23	Vicky Wade	✓		✓						✓						✓						✓						✓							
24	Debra Williams		✓																																
25	Craig Young		✓																																
26	David Hawkins	✓																																	
27																																			

				K. MANESS	T. BARNES	K. CORY	B. BURGETT	B. BURGETT	J. HILL	K. MANESS	T. BARNES	C. POOL	J.B. SULLIVAN
	August 13, 2024	**Present**	**Absent**	K		L		M		N		O	
				Y	N	A	Y	N	A	Y	N	A	Y	N	A	Y	N	A
1	Tami Barnes	✓		✓			✓			✓			✓			✓		
2	Tiffany Brockway	✓		✓			✓			✓			✓			✓		
3	Colby Bryant	✓		✓			✓			✓			✓			✓		
4	Brad Burgett	✓		✓			✓			✓			✓			✓		
5	Kevin Cory	✓		✓			✓			✓			✓			✓		
6	Brent Franks	✓		✓			✓			✓			✓			✓		
7	Kristi Graham	✓		✓			✓			✓			✓			✓		
8	Patsy Guess	✓		✓			✓			✓			✓			✓		
9	Andrea Henkel	✓		✓			✓			✓			✓			✓		
10	Jordan Hill	✓		✓			✓			✓			✓			✓		
11	Jia Johnson	✓		✓			✓			✓			✓			✓		
12	Sharon Johnson	✓		✓			✓			✓			✓			✓		
13	Vickie Leathers	✓		✓			✓			✓			✓			✓		
14	Jeffery Lucas		✓															
15	Kara Maness	✓		✓			✓			✓			✓			✓		
16	Sandra Meeks		✓															
17	Carolyn Pool	✓		✓			✓			✓			✓			✓		
18	David Smith	✓		✓			✓			✓			✓			✓		
19	William Smith		✓															
20	Consuelo Splawn	✓		✓			✓			✓			✓			✓		
21	Jim Bob Sullivan	✓		✓			✓			✓			✓			✓		
22	Leah Thomas	✓		✓			✓			✓			✓			EXC		
23	Vicky Wade	✓		✓			✓			✓			✓			✓		
24	Debra Williams		✓															
25	Craig Young		✓															
26	David Hawkins	✓																
27																		

	August 13, 2024	Present	Absent	B. Burgett	T. Barnes														
				X															
				Y	N	A	Y	N	A	Y	N	A	Y	N	A	Y	N	A	
1	Tami Barnes	✓		✓															
2	Tiffany Brockway	✓		✓															
3	Colby Bryant	✓		✓															
4	Brad Burgett	✓		✓															
5	Kevin Cory	✓		✓															
6	Brent Franks	✓		✓															
7	Kristi Graham	✓		✓															
8	Patsy Guess	✓		✓															
9	Andrea Henkel	✓		✓															
10	Jordan Hill	✓		✓															
11	Jia Johnson	✓		✓															
12	Sharon Johnson	✓		✓															
13	Vickie Leathers	✓		✓															
14	Jeffery Lucas		✓																
15	Kara Maness	✓		✓															
16	Sandra Meeks		✓																
17	Carolyn Pool	✓		✓															
18	David Smith	✓		✓															
19	William Smith		✓																
20	Consuelo Splawn	✓		✓															
21	Jim Bob Sullivan	✓		✓															
22	Leah Thomas	✓		✓															
23	Vicky Wade	✓		✓															
24	Debra Williams		✓																
25	Craig Young		✓																
26	David Hawkins	✓																	
27																			

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LIFT Community Action Agency Inc
Parent - Lift : LIFT Community Action Agency Inc
Comparative Balance Sheet
End of Aug 2024

FINANCIAL ROW	AMOUNT (AS OF AUG 2024)	COMPARISON AMOUNT (AS OF ADJUST 2023)	VARIANCE	% VARIANCE
ASSETS				
Current Assets				
Bank				
1000 - Cash				
1010 - Checking Account	$9,136,868.93	$9,869,315.88	($732,446.95)	-7.42%
1020 - Payroll Account	$388,710.13	$363,621.18	$25,088.95	6.90%
1021 - First United Accounts Payable	$10,790.57	($34,318.47)	$45,109.04	-131.44%
1022 - First United TH Reserve	$144,381.53	$139,439.77	$4,941.76	3.54%
1023 - First United General Escrow	$126,590.15	$159,540.20	($32,950.05)	-20.65%
1024 - First United Marina License	$253.03	$240.82	$12.21	5.07%
1025 - First United Deposit (PayPal)	$2,115.20	$2,115.20	$0.00	0.00%
1028 - First United Unrestricted Funds CD	$840,504.12	$822,783.89	$17,720.23	2.15%
1030 - Shamrock Bank - Clayton	$1,848.02	$1,835.61	$12.41	0.68%
1040 - Petty Cash	$885.00	$410.00	$475.00	115.85%
1050 - McCurtain County National Bank	$21,664.47	$17,224.53	$4,439.94	25.78%
1070 - Fund to Fund Allocation Transfers	($1.75)	$0.00	($1.75)	0.00%
Total - 1000 - Cash	**$10,674,609.40**	**$11,342,208.61**	**($667,599.21)**	**-5.89%**
Total Bank	**$10,674,609.40**	**$11,342,208.61**	**($667,599.21)**	**-5.89%**
Accounts Receivable				
1100 - Receivables	**$319,862.31**	**$2,096,483.02**	**($1,776,620.71)**	**-84.74%**
1300 - Other receivables				
1320 - Notes/loans receivable	$334,632.06	$335,515.82	($883.76)	-0.26%
1321 - Loans Receivable from Belmont	$174,365.48	$162,809.48	$11,556.00	7.10%
1322 - Loans Receivable from Clayton	$218,388.53	$202,957.53	$15,431.00	7.60%
1323 - Loans Receivable rom Kiamichi	$123,563.90	$123,563.90	$0.00	0.00%
1324 - Loans Receivable from SOCDC	$522,001.57	$422,001.57	$100,000.00	23.70%
1326 - Loans Receivable from Rouleau House	$51,909.76	$51,909.76	$0.00	0.00%
Total - 1300 - Other receivables	**$1,424,861.30**	**$1,298,758.06**	**$126,103.24**	**9.71%**
Total Accounts Receivable	**$1,744,723.61**	**$3,395,241.08**	**($1,650,517.47)**	**-48.61%**
Other Current Asset				
1400 - Other assets	**$410.20**	**$26,628.16**	**($26,217.96)**	**-98.46%**
1500 - Investments				
1530 - Property/Lots held for Sale	$375,516.35	$375,516.35	$0.00	0.00%
1599 - Undeposited Funds	$686.75	($1,048.76)	$1,735.51	-165.48%
Total - 1500 - Investments	**$376,203.10**	**$374,467.59**	**$1,735.51**	**0.46%**
NS097 - Interfund Due to /Due from	($0.01)	($0.01)	$0.00	0.00%
Payroll Float	$1,459.05	$0.00	$1,459.05	0.00%
Total Other Current Asset	**$378,072.34**	**$401,095.74**	**($23,023.40)**	**-5.74%**
Total Current Assets	**$12,797,405.35**	**$15,138,545.43**	**($2,341,140.08)**	**-15.46%**
Fixed Assets				
1600 - Fixed operating assets				
1610 - Land	$1,087,094.00	$1,087,094.00	$0.00	0.00%
1620 - Buildings	$7,056,276.04	$7,056,276.04	$0.00	0.00%
1630 - Leasehold Improvements	$2,123,010.79	$2,123,010.79	$0.00	0.00%
1640 - Computers & Equipment over $5,000	$900,393.01	$900,393.01	$0.00	0.00%
1650 - Vehicles	$3,609,015.32	$3,609,015.32	$0.00	0.00%
Total - 1600 - Fixed operating assets	**$14,775,789.16**	**$14,775,789.16**	**$0.00**	**0.00%**
1700 - Accum deprec - fixed operating assets				
1725 - Accum deprec - building	($5,578,660.84)	($5,578,660.84)	$0.00	0.00%
1735 - Accum amort - leasehold improvements	($2,072,640.82)	($2,072,640.82)	$0.00	0.00%
1740 - Accum. Amortization Leases	($16,116.90)	($16,116.90)	$0.00	0.00%
Total - 1700 - Accum deprec - fixed operating assets	**($7,667,418.56)**	**($7,667,418.56)**	**$0.00**	**0.00%**
Total Fixed Assets	**$7,108,370.60**	**$7,108,370.60**	**$0.00**	**0.00%**
Other Assets				
1800 - Other Assets	**$16,716.68**	**$16,729.67**	**($12.99)**	**-0.08%**
Total Other Assets	**$16,716.68**	**$16,729.67**	**($12.99)**	**-0.08%**
Total ASSETS	**$19,922,492.63**	**$22,263,645.70**	**($2,341,153.07)**	**-10.52%**
Liabilities & Equity				
Current Liabilities				
Accounts Payable	**($18,257.43)**	**($19,536.23)**	**$1,278.80**	**-6.55%**

FINANCIAL ROW	AMOUNT (AS OF AUG 2024)	COMPARISON AMOUNT (AS OF ADJUST 2023)	VARIANCE	% VARIANCE
Other Current Liability				
2100 - Accrued liabilities	**$894,024.72**	**$1,357,236.17**	**($463,211.45)**	**-34.13%**
2400 - Refundable Advances				
2450 - Apartment Sec Deposits Payable	$29,440.50	$27,400.50	$2,040.00	7.45%
2455 - Sales Taxes Payable	$2,916.03	$0.00	$2,916.03	0.00%
Total - 2400 - Refundable Advances	**$32,356.53**	**$27,400.50**	**$4,956.03**	**18.09%**
Total Other Current Liability	**$926,381.25**	**$1,384,636.67**	**($458,255.42)**	**-33.10%**
Total Current Liabilities	**$908,123.82**	**$1,365,100.44**	**($456,976.62)**	**-33.48%**
Long Term Liabilities				
2700 - Long-term notes & loans payable				
2770 - Long-term liabilities - Mower Loan	$1,729.90	$4,100.28	($2,370.38)	-57.81%
2780 - Lease liability	$727.94	$727.94	$0.00	0.00%
Total - 2700 - Long-term notes & loans payable	**$2,457.84**	**$4,828.22**	**($2,370.38)**	**-49.09%**
Total Long Term Liabilities	**$2,457.84**	**$4,828.22**	**($2,370.38)**	**-49.09%**
Equity	**$19,011,910.97**	**$20,893,717.04**	**($1,881,806.07)**	**-9.01%**
Total Liabilities & Equity	**$19,922,492.63**	**$22,263,645.70**	**($2,341,153.07)**	**-10.52%**

LIFT Community Action Agency Inc
Parent - Lift : LIFT Community Action Agency Inc
Comparative Income Statement
From Jan 2024 to Aug 2024

FINANCIAL ROW	AMOUNT (JAN 2024 - AUG 2024)	COMPARATIVE AMOUNT (JAN 2023 - ADJUST 2023)	VARIANCE	% VARIANCE
Ordinary Income/Expense				
Income				
4000 - Contribution Revenue	**$56,760.44**	**$42,867.82**	**$13,892.62**	**32.41%**
4100 - Inkind Revenue	**$784,866.37**	**$1,268,433.18**	**($483,566.81)**	**-38.12%**
4200 - Miscellaneous Revenue	**$807,676.93**	**$3,707,973.17**	**($2,900,296.24)**	**-78.22%**
4400 - State Revenue	**$1,181,336.49**	**$1,306,592.16**	**($125,255.67)**	**-9.59%**
4500 - Federal Revenue	**$9,668,749.63**	**$15,335,877.40**	**($5,667,127.77)**	**-36.95%**
4900 - Recoveries from Programs	**$2,602,190.70**	**$3,631,342.57**	**($1,029,151.87)**	**-28.34%**
5000 - Rental Revenue	**$498,800.20**	**$657,610.55**	**($158,810.35)**	**-24.15%**
5100 - Program Fee Revenue	**$1,018,638.48**	**$1,723,429.39**	**($704,790.91)**	**-40.89%**
5300 - Interest and Dividends	**$219,714.46**	**$178,422.14**	**$41,292.32**	**23.14%**
5400 - Revenue from other sources	**$523,087.82**	**$1,736,410.96**	**($1,213,323.14)**	**-69.88%**
5800 - Special Event Expense	**$3,186.00**	**$8,795.33**	**($5,609.33)**	**-63.78%**
Total - Income	**$17,365,007.52**	**$29,597,754.67**	**($12,232,747.15)**	**-41.33%**
Cost Of Sales				
8000 - Cost of Goods Sold	**$2,772.07**	**$169.31**	**$2,602.76**	**1,537.27%**
Total - Cost Of Sales	**$2,772.07**	**$169.31**	**$2,602.76**	**1,537.27%**
Gross Profit	**$17,362,235.45**	**$29,597,585.36**	**($12,235,349.91)**	**-41.34%**
Expense				
7000 - Grants, contracts, & direct assistance	**$595,867.55**	**$1,922,010.30**	**($1,326,142.75)**	**-69.00%**
7200 - Salaries & related expenses	**$7,761,968.19**	**$11,604,663.35**	**($3,842,695.16)**	**-33.11%**
7300 - Indirect Cost Pool Expense	**$1,366,907.13**	**$1,917,677.75**	**($550,770.62)**	**-28.72%**
7500 - Contract/Consultant Services	**$1,427,122.72**	**$1,695,750.90**	**($268,628.18)**	**-15.84%**
8100 - Non personnel expenses	**$912,992.51**	**$1,174,591.55**	**($261,599.04)**	**-22.27%**
8200 - Facility & equipment expenses	**$1,878,976.90**	**$2,236,740.58**	**($357,763.68)**	**-15.99%**
8300 - Travel & meetings expenses	**$437,088.26**	**$635,710.63**	**($198,622.37)**	**-31.24%**
8400 - Insurance Expense	$1,616,383.03	$2,043,164.06	($426,781.03)	-20.89%
8600 - Business expenses	**$918.50**	**$8,063.62**	**($7,145.12)**	**-88.61%**
8700 - Food Expenses	**$1,071,710.37**	**$1,609,006.95**	**($537,296.58)**	**-33.39%**
8800 - In-Kind Expenses	**$784,866.37**	**$1,268,433.18**	**($483,566.81)**	**-38.12%**
Total - Expense	**$17,854,801.53**	**$26,115,812.87**	**($8,261,011.34)**	**-31.63%**
Net Ordinary Income	**($492,566.08)**	**$3,481,772.49**	**($3,974,338.57)**	**-114.15%**
Other Income and Expenses				
Other Expense				
8500 - Other Expense	**$1,389,230.09**	**$1,661,896.44**	**($272,666.35)**	**-16.41%**
Total - Other Expense	**$1,389,230.09**	**$1,661,896.44**	**($272,666.35)**	**-16.41%**
Net Other Income	**($1,389,230.09)**	**($1,661,896.44)**	**$272,666.35**	**-16.41%**
Net Income	**($1,881,796.17)**	**$1,819,876.05**	**($3,701,672.22)**	**-203.40%**

LIFT Community Action Agency Inc
Parent - Lift : LIFT Community Action Agency Inc
Statement of Financial Position
End of Aug 2024

FINANCIAL ROW	AMOUNT
ASSETS	
Current Assets	
Bank	
1000 - Cash	
1010 - Checking Account	$9,136,868.93
1020 - Payroll Account	$388,710.13
1021 - First United Accounts Payable	$10,790.57
1022 - First United TH Reserve	$144,381.53
1023 - First United General Escrow	$126,590.15
1024 - First United Marina License	$253.03
1025 - First United Deposit (PayPal)	$2,115.20
1028 - First United Unrestricted Funds CD	$840,504.12
1030 - Shamrock Bank - Clayton	$1,848.02
1040 - Petty Cash	$885.00
1050 - McCurtain County National Bank	$21,664.47
1070 - Fund to Fund Allocation Transfers	($1.75)
Total - 1000 - Cash	**$10,674,609.40**
Total Bank	**$10,674,609.40**
Accounts Receivable	
1100 - Receivables	
1105 - Accrued Acct Receivable	$234,408.57
1110 - Accounts Receivable	$88,248.51
1120 - Due From (A/R)	($2,794.77)
Total - 1100 - Receivables	**$319,862.31**
1300 - Other receivables	
1320 - Notes/loans receivable	$334,632.06
1321 - Loans Receivable from Belmont	$174,365.48
1322 - Loans Receivable from Clayton	$218,388.53
1323 - Loans Receivable rom Kiamichi	$123,563.90
1324 - Loans Receivable from SOCDC	$522,001.57
1326 - Loans Receivable from Rouleau House	$51,909.76
Total - 1300 - Other receivables	**$1,424,861.30**
Total Accounts Receivable	**$1,744,723.61**
Other Current Asset	
1400 - Other assets	
1465 - Advances Paid	$410.20
Total - 1400 - Other assets	**$410.20**
1500 - Investments	
1530 - Property/Lots held for Sale	$375,516.35
1599 - Undeposited Funds	$686.75
Total - 1500 - Investments	**$376,203.10**
NS097 - Interfund Due to /Due from	($0.01)
Payroll Float	$1,459.05
Total Other Current Asset	**$378,072.34**
Total Current Assets	**$12,797,405.35**
Fixed Assets	
1600 - Fixed operating assets	
1610 - Land	$1,087,094.00
1620 - Buildings	$7,056,276.04
1630 - Leasehold Improvements	$2,123,010.79
1640 - Computers & Equipment over $5,000	$900,393.01
1650 - Vehicles	$3,609,015.32
Total - 1600 - Fixed operating assets	**$14,775,789.16**
1700 - Accum deprec - fixed operating assets	
1725 - Accum deprec - building	($5,578,660.84)
1735 - Accum amort - leasehold improvements	($2,072,640.82)
1740 - Accum. Amortization Leases	($16,116.90)
Total - 1700 - Accum deprec - fixed operating assets	**($7,667,418.56)**
Total Fixed Assets	**$7,108,370.60**
Other Assets	
1800 - Other Assets	
1810 - Right to Use Asset - Leases	$16,729.67

FINANCIAL ROW	AMOUNT
1950 - Stale Dated Payables	($12.99)
Total - 1800 - Other Assets	**$16,716.68**
Total Other Assets	**$16,716.68**
Total ASSETS	**$19,922,492.63**
Liabilities & Equity	
Current Liabilities	
Accounts Payable	
2000 - Payables	
2010 - AP Accrued monthly	($18,257.43)
Total - 2000 - Payables	**($18,257.43)**
Total Accounts Payable	**($18,257.43)**
Other Current Liability	
2100 - Accrued liabilities	
2105 - Accrued Expense Payables	$133,106.00
2110 - Wages Payable	$352,669.53
2120 - Accrued Employee Benefits	$288,754.70
2130 - Accrued payroll taxes	$29,128.19
2135 - Indirect Payable	$76,297.76
2150 - Home Loan Escrow Accounts	$1,403.63
2160 - Due to (Liab)	$22,255.06
2180 - Accrued Payroll Deductions	($9,590.15)
Total - 2100 - Accrued liabilities	**$894,024.72**
2400 - Refundable Advances	
2450 - Apartment Sec Deposits Payable	$29,440.50
2455 - Sales Taxes Payable	$2,916.03
Total - 2400 - Refundable Advances	**$32,356.53**
Total Other Current Liability	**$926,381.25**
Total Current Liabilities	**$908,123.82**
Long Term Liabilities	
2700 - Long-term notes & loans payable	
2770 - Long-term liabilities - Mower Loan	$1,729.90
2780 - Lease liability	$727.94
Total - 2700 - Long-term notes & loans payable	**$2,457.84**
Total Long Term Liabilities	**$2,457.84**
Equity	
3000 - Net Assets	$12,712.37
Retained Earnings	$20,880,994.77
Net Income	($1,881,796.17)
Total Equity	**$19,011,910.97**
Total Liabilities & Equity	**$19,922,492.63**

LIFT Community Action Agency Inc
Parent - Lift : LIFT Community Action Agency Inc
Statement of Functional Expense
From Jan 2024 to Aug 2024

FINANCIAL ROW	- UNASSIGNED - Amount	CAPITAL Amount	FUNDRAISING Amount	MANAGEMENT & GENERAL (ADMIN) Amount	OTHER Amount	PROGRAM SERVICES Amount	*TOTAL Amount*
Operating Activities							
Net Income	($2,273,075.59)	($29,060.98)	$745.36	($19,614.59)	$494.17	$438,715.46	($1,881,796.17)
Adjustments to Net Income							
Accounts Receivable	$1,575,059.45	$883.76	$0.00	$214,710.62	$0.00	($140,136.36)	$1,650,517.47
Other Current Asset	$279,472.57	$0.00	$0.00	($59,184.96)	$0.00	($195,528.70)	$24,758.91
Accounts Payable	$1,129.79	$0.00	$0.00	$11,515.56	$0.00	($11,366.55)	$1,278.80
Sales Tax Payable	$11,231.83	$0.00	$0.00	$0.00	$0.00	($8,315.80)	$2,916.03
Other Current Liabilities	$295,452.74	$0.00	$0.00	($46,567.62)	$0.00	($710,056.57)	($461,171.45)
Total Adjustments to Net Income	**$2,162,346.38**	**$883.76**	**$0.00**	**$120,473.60**	**$0.00**	**($1,065,403.98)**	**$1,218,299.76**
Total Operating Activities	**($110,729.21)**	**($28,177.22)**	**$745.36**	**$100,859.01**	**$494.17**	**($626,688.52)**	**($663,496.41)**
Investing Activities							
Other Asset	$0.00	$0.00	$0.00	$0.00	$0.00	$12.99	$12.99
Total Investing Activities	**$0.00**	**$0.00**	**$0.00**	**$0.00**	**$0.00**	**$12.99**	**$12.99**
Financing Activities							
Long Term Liabilities	($2,370.38)	$0.00	$0.00	$0.00	$0.00	$0.00	($2,370.38)
Other Equity	$0.00	$0.00	$0.00	($585,592.75)	$0.00	$585,582.85	($9.90)
Total Financing Activities	**($2,370.38)**	**$0.00**	**$0.00**	**($585,592.75)**	**$0.00**	**$585,582.85**	**($2,380.28)**
Net Change in Cash for Period	**($113,099.59)**	**($28,177.22)**	**$745.36**	**($484,733.74)**	**$494.17**	**($41,092.68)**	**($665,863.70)**
Cash at Beginning of Period	**$21,701,928.01**	**$2,732.89**	**$964.22**	**($8,924,130.62)**	**$182.72**	**($1,440,517.37)**	**$11,341,159.85**
Cash at End of Period	**$21,588,828.42**	**($25,444.33)**	**$1,709.58**	**($9,408,864.36)**	**$676.89**	**($1,481,610.05)**	**$10,675,296.15**

LIFT Community Action Agency Inc
Parent - Lift : LIFT Community Action Agency Inc
Statement of Cash Flow
From Jan 2024 to Aug 2024

FINANCIAL ROW	AMOUNT
Operating Activities	
Net Income	($1,881,796.17)
Adjustments to Net Income	
Accounts Receivable	$1,650,517.47
Other Current Asset	$24,758.91
Accounts Payable	$1,278.80
Sales Tax Payable	$2,916.03
Other Current Liabilities	($461,171.45)
Total Adjustments to Net Income	**$1,218,299.76**
Total Operating Activities	**($663,496.41)**
Investing Activities	
Other Asset	$12.99
Total Investing Activities	**$12.99**
Financing Activities	
Long Term Liabilities	($2,370.38)
Other Equity	($9.90)
Total Financing Activities	**($2,380.28)**
Net Change in Cash for Period	**($665,863.70)**
Cash at Beginning of Period	**$11,341,159.85**
Cash at End of Period	**$10,675,296.15**

LIFT Community Action Agency Inc
Parent - Lift : LIFT Community Action Agency Inc
Statement of Activity
From Jan 2024 to Aug 2024
Options: Activity Only

FINANCIAL ROW	AMOUNT
Operating Activities	
Net Income	($1,881,796.17)
Adjustments to Net Income	
Accounts Receivable	$1,650,517.47
Other Current Asset	$24,758.91
Accounts Payable	$1,278.80
Sales Tax Payable	$2,916.03
Other Current Liabilities	($461,171.45)
Total Adjustments to Net Income	**$1,218,299.76**
Total Operating Activities	**($663,496.41)**
Investing Activities	
Other Asset	$12.99
Total Investing Activities	**$12.99**
Financing Activities	
Long Term Liabilities	($2,370.38)
Other Equity	($9.90)
Total Financing Activities	**($2,380.28)**
Net Change in Cash for Period	**($665,863.70)**
Cash at Beginning of Period	**$11,341,159.85**
Cash at End of Period	**$10,675,296.15**

LIFT Community Action Agency Inc
Parent - Lift : LIFT Community Action Agency Inc
Revenue Stream Distribution by Month
Jun 2024, Jul 2024, Aug 2024
Monthly distribution of Revenue by Revenue Type and Subtype

REVENUE STREAM	JUNE 2024	JULY 2024	AUGUST 2024	TOTAL
Federal Grants	$1,098,667.37	$876,052.69	$921,802.85	$2,896,522.91
Recoveries	$489,015.44	$351,544.87	$337,367.04	$1,177,927.35
Federal Pass Through	$487,184.86	$395,977.11	$275,204.76	$1,158,366.73
Non Federal	$67,141.88	$51,023.37	$281,363.58	$399,528.83
State Contracts	$25,338.60	$227,267.11	$10,840.56	$263,446.27
Program Revenue	$168,705.16	$180,760.98	$156,428.02	$505,894.16
Federal Contract	$105,768.36	$109,378.91	$110,554.08	$325,701.35
State Pass Through	$87,755.93	$9,522.09		$97,278.02
Corporate/Business/Foundation	$7.85	$34,254.74	$36.73	$34,299.32
Transit Contract	$19,479.30	$24,351.90	$28,608.30	$72,439.50
Apartment Revenue	$11,630.00	$11,630.00	$11,630.00	$34,890.00
Miscellaneous	$20,321.49	$13.75	$28.05	$20,363.29
State Grants	$7,888.12	$711.17		$8,599.29
Transit Fares	$5,487.66	$6,286.65	$6,427.75	$18,202.06
Management Fees	$3,654.09	$2,005.58	$2,953.98	$8,613.65
- Unassigned -	($85.00)		($358.00)	($443.00)
Total	$2,597,961.11	$2,280,780.92	$2,142,887.70	$7,021,629.73

LIFT Community Action Agency Inc
Parent - Lift : LIFT Community Action Agency Inc
LIFT | Budget vs. Actual by Grant
From Jan 2024 to Dec 2024
Options: Activity Only

Agency Wide

FINANCIAL ROW	BUDGET AMOUNT	AMOUNT EXPENDED	BUDGET BALANCE	% OF BUDGET
Ordinary Income/Expense				
Income				
4000 - Contribution Revenue	**$59,867.00**	**$56,760.44**	**$3,106.56**	**94.81%**
4100 - Inkind Revenue	**$1,752,948.54**	**$784,866.37**	**$968,082.17**	**44.77%**
4200 - Miscellaneous Revenue	**$12,660.00**	**$807,676.93**	**($795,016.93)**	**6,379.75%**
4400 - State Revenue	**$2,625,115.74**	**$1,181,336.49**	**$1,443,779.25**	**45.00%**
4500 - Federal Revenue	**$18,182,655.74**	**$9,668,749.63**	**$8,513,906.11**	**53.18%**
4900 - Recoveries from Programs	**$2,012,486.97**	**$2,602,190.70**	**($589,703.73)**	**129.30%**
5000 - Rental Revenue	**$0.00**	**$512,509.20**	**($512,509.20)**	**0.00%**
5100 - Program Fee Revenue	**$0.00**	**$1,019,700.49**	**($1,019,700.49)**	**0.00%**
5300 - Interest and Dividends	**$0.00**	**$220,406.69**	**($220,406.69)**	**0.00%**
5400 - Revenue from other sources	**$0.00**	**$523,087.82**	**($523,087.82)**	**0.00%**
5800 - Special Event Expense	**$0.00**	**$3,186.00**	**($3,186.00)**	**0.00%**
Total - Income	**$24,645,733.99**	**$17,380,470.76**	**$7,265,263.23**	**70.52%**
Cost Of Sales				
8000 - Cost of Goods Sold	**$0.00**	**$2,772.07**	**($2,772.07)**	**0.00%**
Total - Cost Of Sales	**$0.00**	**$2,772.07**	**($2,772.07)**	**0.00%**
Gross Profit	**$24,645,733.99**	**$17,377,698.69**	**$7,268,035.30**	**70.51%**
Expense				
7000 - Grants, contracts, & direct assistance	**$115,321.25**	**$595,867.55**	**($480,546.30)**	**516.70%**
7200 - Salaries & related expenses	**$12,170,280.05**	**$8,256,673.81**	**$3,913,606.24**	**67.84%**
7300 - Indirect Cost Pool Expense	**$2,101,912.90**	**$1,452,689.57**	**$649,223.33**	**69.11%**
7500 - Contract/Consultant Services	**$1,641,069.47**	**$1,428,652.72**	**$212,416.75**	**87.06%**
8100 - Non personnel expenses	**$1,115,232.30**	**$914,796.62**	**$200,435.68**	**82.03%**
8200 - Facility & equipment expenses	**$1,290,954.15**	**$1,884,476.90**	**($593,522.75)**	**145.98%**
8300 - Travel & meetings expenses	**$1,040,879.01**	**$437,996.01**	**$602,883.00**	**42.08%**
8400 - Insurance Expense	$90,915.40	$1,616,383.03	($1,525,467.63)	1,777.90%
8600 - Business expenses	**$0.00**	**$918.50**	**($918.50)**	**0.00%**
8700 - Food Expenses	**$138,370.00**	**$1,071,710.37**	**($933,340.37)**	**774.53%**
8800 - In-Kind Expenses	**$1,559,857.54**	**$784,866.37**	**$774,991.17**	**50.32%**
Total - Expense	**$21,264,792.07**	**$18,445,031.45**	**$2,819,760.62**	**86.74%**
Other Income and Expenses				
Other Expense				
8500 - Other Expense	**$2,478,402.57**	**$1,389,413.54**	**$1,088,989.03**	**56.06%**
Total - Other Expense	**$2,478,402.57**	**$1,389,413.54**	**$1,088,989.03**	**56.06%**
Net Income	**$902,539.35**	**($2,456,746.30)**	**$3,359,285.65**	**-272.20%**

LIFT Community Action Agency Inc
Parent - Lift : LIFT Community Action Agency Inc
LIFT | Budget vs. Actual by Grant
From Jan 2024 to Dec 2024
Options: Activity Only

Operations

FINANCIAL ROW	BUDGET AMOUNT	AMOUNT EXPENDED	BUDGET BALANCE	% OF BUDGET
Ordinary Income/Expense				
Income				
4000 - Contribution Revenue	**$0.00**	**$1,302.42**	**($1,302.42)**	**0.00%**
4200 - Miscellaneous Revenue	**$0.00**	**$35,470.44**	**($35,470.44)**	**0.00%**
4400 - State Revenue	**$0.00**	**$282,091.92**	**($282,091.92)**	**0.00%**
4900 - Recoveries from Programs	**$2,012,486.97**	**$2,602,190.70**	**($589,703.73)**	**129.30%**
5000 - Rental Revenue	**$0.00**	**$204,840.64**	**($204,840.64)**	**0.00%**
5300 - Interest and Dividends	**$0.00**	**$44,749.21**	**($44,749.21)**	**0.00%**
5400 - Revenue from other sources	**$0.00**	**$453,337.40**	**($453,337.40)**	**0.00%**
5800 - Special Event Expense	**$0.00**	**$40.00**	**($40.00)**	**0.00%**
Total - Income	**$2,012,486.97**	**$3,624,022.73**	**($1,611,535.76)**	**180.08%**
Gross Profit	**$2,012,486.97**	**$3,624,022.73**	**($1,611,535.76)**	**180.08%**
Expense				
7000 - Grants, contracts, & direct assistance	**$0.00**	**$10,000.00**	**($10,000.00)**	**0.00%**
7200 - Salaries & related expenses	**$1,480,512.38**	**$904,455.20**	**$576,057.18**	**61.09%**
7300 - Indirect Cost Pool Expense	**$0.00**	**$37,449.84**	**($37,449.84)**	**0.00%**
7500 - Contract/Consultant Services	**$115,215.21**	**$168,050.67**	**($52,835.46)**	**145.86%**
8100 - Non personnel expenses	**$54,841.35**	**$184,669.91**	**($129,828.56)**	**336.73%**
8200 - Facility & equipment expenses	**$40,902.28**	**$271,537.28**	**($230,635.00)**	**663.87%**
8300 - Travel & meetings expenses	**$82,133.76**	**$49,572.57**	**$32,561.19**	**60.36%**
8400 - Insurance Expense	$34,962.98	$1,134,566.95	($1,099,603.97)	3,245.05%
8600 - Business expenses	**$0.00**	**$911.00**	**($911.00)**	**0.00%**
8700 - Food Expenses	**$0.00**	**$10,161.26**	**($10,161.26)**	**0.00%**
Total - Expense	**$1,808,567.96**	**$2,771,374.68**	**($962,806.72)**	**153.24%**
Other Income and Expenses				
Other Expense				
8500 - Other Expense	**$153,301.25**	**$333,603.20**	**($180,301.95)**	**217.61%**
Total - Other Expense	**$153,301.25**	**$333,603.20**	**($180,301.95)**	**217.61%**
Net Income	**$50,617.76**	**$519,044.85**	**($468,427.09)**	**1,025.42%**

LIFT Community Action Agency Inc
Parent - Lift : LIFT Community Action Agency Inc
Income/Expense Statement Summary
From Jan 2024 to Aug 2024

Financial Row		10 Operating		
	Amount	Administration Amount	Building Funds Amount	Total Amount
Ordinary Income/Expense				
Income				
4000 - Contribution Revenue	$0.00	$1,302.42	$0.00	$1,302.42
4200 - Miscellaneous Revenue	$0.00	$35,470.44	$0.00	$35,470.44
4400 - State Revenue	$0.00	$282,091.92	$0.00	$282,091.92
4900 - Recoveries from Programs	$0.00	$2,602,190.70	$0.00	$2,602,190.70
5000 - Rental Revenue	$0.00	$0.00	$204,590.64	$204,590.64
5300 - Interest and Dividends	($193.26)	$44,032.25	$910.22	$44,749.21
5400 - Revenue from other sources	($89,669.01)	$464,669.01	$78,337.40	$453,337.40
5800 - Special Event Expense	$0.00	$40.00	$0.00	$40.00
Total - Income	($89,862.27)	$3,429,796.74	$283,838.26	$3,623,772.73
Expense				
7000 - Grants, contracts, & direct assistance	$0.00	$10,000.00	$0.00	$10,000.00
7200 - Salaries & related expenses	$0.00	$842,123.27	$0.00	$842,123.27
7300 - Indirect Cost Pool Expense	$0.00	$35,388.03	$0.00	$35,388.03
7500 - Contract/Consultant Services	$0.00	$127,123.40	$40,090.27	$167,213.67
8100 - Non personnel expenses	$0.00	$169,739.93	$14,809.67	$184,549.60
8200 - Facility & equipment expenses	$0.00	$148,365.09	$123,172.19	$271,537.28
8300 - Travel & meetings expenses	$0.00	$48,913.52	$702.16	$49,615.68
8400 - Insurance Expense	$0.00	$1,085,301.95	$49,265.00	$1,134,566.95
8600 - Business expenses	$0.00	$0.00	$911.00	$911.00
8700 - Food Expenses	$121.21	$10,040.05	$0.00	$10,161.26
Total - Expense	$121.21	$2,476,995.24	$228,950.29	$2,706,066.74
Net Ordinary Income	($89,983.48)	$952,801.50	$54,887.97	$917,705.99
Other Income and Expenses				
Other Expense				
8500 - Other Expense	$0.00	$329,808.27	$3,611.48	$333,419.75
Total - Other Expense	$0.00	$329,808.27	$3,611.48	$333,419.75

LIFT Community Action Agency Inc
Parent - Lift : LIFT Community Action Agency Inc
LIFT | Budget vs. Actual by Grant
From Jan 2024 to Dec 2024
Options: Activity Only

Early Childhood

FINANCIAL ROW	BUDGET AMOUNT	AMOUNT EXPENDED	BUDGET BALANCE	% OF BUDGET
Ordinary Income/Expense				
Income				
4000 - Contribution Revenue	**$44,247.00**	**$34,247.00**	**$10,000.00**	**77.40%**
4100 - Inkind Revenue	**$980,803.00**	**$459,929.57**	**$520,873.43**	**46.89%**
4200 - Miscellaneous Revenue	**$0.00**	**$672,077.47**	**($672,077.47)**	**0.00%**
4400 - State Revenue	**$0.00**	**$135,460.12**	**($135,460.12)**	**0.00%**
4500 - Federal Revenue	**$7,041,268.00**	**$5,493,295.18**	**$1,547,972.82**	**78.02%**
5100 - Program Fee Revenue	**$0.00**	**$403,578.90**	**($403,578.90)**	**0.00%**
5300 - Interest and Dividends	**$0.00**	**$22,807.07**	**($22,807.07)**	**0.00%**
Total - Income	**$8,066,318.00**	**$7,221,395.31**	**$844,922.69**	**89.53%**
Gross Profit	**$8,066,318.00**	**$7,221,395.31**	**$844,922.69**	**89.53%**
Expense				
7200 - Salaries & related expenses	**$4,234,849.23**	**$3,434,511.56**	**$800,337.67**	**81.10%**
7300 - Indirect Cost Pool Expense	**$834,746.77**	**$677,941.57**	**$156,805.20**	**81.22%**
7500 - Contract/Consultant Services	**$1,103,276.00**	**$936,545.92**	**$166,730.08**	**84.89%**
8100 - Non personnel expenses	**$167,129.00**	**$389,837.87**	**($222,708.87)**	**233.26%**
8200 - Facility & equipment expenses	**$164,393.00**	**$268,003.16**	**($103,610.16)**	**163.03%**
8300 - Travel & meetings expenses	**$105,204.00**	**$75,475.50**	**$29,728.50**	**71.74%**
8400 - Insurance Expense	$43,000.00	$128,714.72	($85,714.72)	299.34%
8700 - Food Expenses	**$76,870.00**	**$805,488.17**	**($728,618.17)**	**1,047.86%**
8800 - In-Kind Expenses	**$787,712.00**	**$459,929.57**	**$327,782.43**	**58.39%**
Total - Expense	**$7,517,180.00**	**$7,176,448.04**	**$340,731.96**	**95.47%**
Other Income and Expenses				
Other Expense				
8500 - Other Expense	**$386,647.00**	**$397,225.69**	**($10,578.69)**	**102.74%**
Total - Other Expense	**$386,647.00**	**$397,225.69**	**($10,578.69)**	**102.74%**
Net Income	**$162,491.00**	**($352,278.42)**	**$514,769.42**	**-216.80%**

LIFT Community Action Agency Inc
Parent - Lift : LIFT Community Action Agency Inc
Income/Expense Statement Summary
From Jan 2024 to Aug 2024

Financial Row		CACFP - Daycare Homes	Early Head Start - CC	20 Early Childhood Early Learning Centers		HS/EHS			Total
						EHS	Head Start	Total	
	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount
Ordinary Income/Expense									
Income									
4000 - Contribution Revenue	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$34,247.00	$34,247.00	$34,247.00
4100 - Inkind Revenue	$0.00	$0.00	$2,060.13	$9,739.30	$0.00	$0.00	$448,130.14	$448,130.14	$459,929.57
4200 - Miscellaneous Revenue	$0.00	$0.00	$0.00	$320,321.52	$187,956.53	$0.00	$163,799.42	$351,755.95	$672,077.47
4400 - State Revenue	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$135,460.12	$135,460.12	$135,460.12
4500 - Federal Revenue	$0.00	$705,911.46	$1,340,030.66	$50,175.26	$0.00	$0.00	$3,397,177.80	$3,397,177.80	$5,493,295.18
5100 - Program Fee Revenue	$168.00	$0.00	$0.00	$403,410.90	$0.00	$0.00	$0.00	$0.00	$403,578.90
5300 - Interest and Dividends	$0.00	$0.00	$0.00	$8,576.51	$14,159.01	$0.00	$71.55	$14,230.56	$22,807.07
Total - Income	$168.00	$705,911.46	$1,342,090.79	$792,223.49	$202,115.54	$0.00	$4,178,886.03	$4,381,001.57	$7,221,395.31
Expense									
7200 - Salaries & related expenses	$114,286.31	$67,030.56	$401,558.51	$443,310.56	$38,374.11	$451,596.18	$1,710,062.26	$2,200,032.55	$3,226,218.49
7300 - Indirect Cost Pool Expense	$22,174.11	$13,086.71	$78,945.12	$79,171.09	$9,304.90	$86,987.50	$346,692.45	$442,984.85	$636,361.88
7500 - Contract/Consultant Services	$0.00	$4,554.59	$582,344.78	$2,049.74	$308,740.42	$0.00	$38,665.39	$347,405.81	$936,354.92
8100 - Non personnel expenses	$3,285.44	$3,084.12	$117,404.23	$26,543.23	$16,495.33	$77.99	$222,780.78	$239,354.10	$389,671.12
8200 - Facility & equipment expenses	$152.50	$2,992.00	$69,931.15	$11,261.47	$52,656.00	$433.48	$130,576.56	$183,666.04	$268,003.16
8300 - Travel & meetings expenses	$68.12	$19,516.13	$11,878.32	$3,812.98	$584.00	$51.00	$39,069.15	$39,704.15	$74,979.70
8400 - Insurance Expense	$0.00	$0.00	$15,821.80	$24,527.80	$4.00	$0.00	$88,361.12	$88,365.12	$128,714.72
8700 - Food Expenses	$273.36	$429,755.70	$14.22	$71,974.14	$11,632.57	$0.00	$291,838.18	$303,470.75	$805,488.17
8800 - In-Kind Expenses	$0.00	$0.00	$2,060.13	$9,739.30	$0.00	$0.00	$448,130.14	$448,130.14	$459,929.57
Total - Expense	$140,239.84	$540,019.81	$1,279,958.26	$672,390.31	$437,791.33	$539,146.15	$3,316,176.03	$4,293,113.51	$6,925,721.73
Net Ordinary Income	($140,071.84)	$165,891.65	$62,132.53	$119,833.18	($235,675.79)	($539,146.15)	$862,710.00	$87,888.06	$295,673.58
Other Income and Expenses									
Other Expense									
8500 - Other Expense	$0.00	$59.70	$222,327.21	$3,688.20	$15,088.05	$0.00	$156,062.53	$171,150.58	$397,225.69
Total - Other Expense	$0.00	$59.70	$222,327.21	$3,688.20	$15,088.05	$0.00	$156,062.53	$171,150.58	$397,225.69

LIFT Community Action Agency Inc
Parent - Lift : LIFT Community Action Agency Inc
LIFT | Budget vs. Actual by Grant
From Jan 2024 to Dec 2024
Options: Activity Only

Community Services

FINANCIAL ROW	BUDGET AMOUNT	AMOUNT EXPENDED	BUDGET BALANCE	% OF BUDGET
Ordinary Income/Expense				
Income				
4000 - Contribution Revenue	**$15,620.00**	**$21,192.02**	**($5,572.02)**	**135.67%**
4100 - Inkind Revenue	**$584,645.54**	**$324,936.80**	**$259,708.74**	**55.58%**
4200 - Miscellaneous Revenue	**$12,660.00**	**$13,774.65**	**($1,114.65)**	**108.80%**
4400 - State Revenue	**$2,612,955.74**	**$583,781.05**	**$2,029,174.69**	**22.34%**
4500 - Federal Revenue	**$6,162,668.68**	**$1,581,165.74**	**$4,581,502.94**	**25.66%**
5300 - Interest and Dividends	**$0.00**	**$1,137.67**	**($1,137.67)**	**0.00%**
5400 - Revenue from other sources	**$0.00**	**$45,126.25**	**($45,126.25)**	**0.00%**
5800 - Special Event Expense	**$0.00**	**$2,480.00**	**($2,480.00)**	**0.00%**
Total - Income	**$9,388,549.96**	**$2,573,594.18**	**$6,814,955.78**	**27.41%**
Gross Profit	**$9,388,549.96**	**$2,573,594.18**	**$6,814,955.78**	**27.41%**
Expense				
7000 - Grants, contracts, & direct assistance	**$115,321.25**	**$69,541.09**	**$45,780.16**	**60.30%**
7200 - Salaries & related expenses	**$4,512,216.57**	**$1,172,088.81**	**$3,340,127.76**	**25.98%**
7300 - Indirect Cost Pool Expense	**$861,414.73**	**$233,353.72**	**$628,061.01**	**27.09%**
7500 - Contract/Consultant Services	**$240,509.00**	**$81,193.47**	**$159,315.53**	**33.76%**
8100 - Non personnel expenses	**$600,864.61**	**$143,734.16**	**$457,130.45**	**23.92%**
8200 - Facility & equipment expenses	**$312,288.71**	**$117,536.26**	**$194,752.45**	**37.64%**
8300 - Travel & meetings expenses	**$311,829.43**	**$88,346.50**	**$223,482.93**	**28.33%**
8400 - Insurance Expense	$50.00	$6,047.32	($5,997.32)	12,094.64%
8600 - Business expenses	**$0.00**	**$7.50**	**($7.50)**	**0.00%**
8700 - Food Expenses	**$61,500.00**	**$9,945.40**	**$51,554.60**	**16.17%**
8800 - In-Kind Expenses	**$584,645.54**	**$324,936.80**	**$259,708.74**	**55.58%**
Total - Expense	**$7,600,639.84**	**$2,246,731.03**	**$5,353,908.81**	**29.56%**
Other Income and Expenses				
Other Expense				
8500 - Other Expense	**$1,549,916.73**	**$273,631.98**	**$1,276,284.75**	**17.65%**
Total - Other Expense	**$1,549,916.73**	**$273,631.98**	**$1,276,284.75**	**17.65%**
Net Income	**$237,993.39**	**$53,231.17**	**$184,762.22**	**22.37%**

LIFT Community Action Agency Inc
Parent - Lift : LIFT Community Action Agency Inc
Income/Expense Statement Summary
From Jan 2024 to Aug 2024

Financial Row	30 Community Service																	
		CASA	Community Services	Drug Free Communities	Emergency Services			Healthy Start	Mentoring	RCOR TRI-CORP	RSVP	RX	Safe Place Healing Hearts	Second Chance	VOCA	WORK READY OK	Youth Build	Total
	Amount	Amount	Amount	Amount	Amount	EFSP Amount	Total Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount	Amount
Ordinary Income/Expense																		
Income																		
4000 - Contribution Revenue	$0.00	$520.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$5,810.00	$0.00	$0.00	$0.00	$0.00	$0.00	$14,862.02	$21,192.02
4100 - Inkind Revenue	$0.00	$0.00	$0.00	$67,554.46	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$17,704.28	$0.00	$0.00	$0.00	$0.00	$0.00	$239,678.06	$324,936.80
4200 - Miscellaneous Revenue	$0.00	$1,274.65	$0.00	$0.00	$0.00	$0.00	$0.00	$2,500.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$10,000.00	$13,774.65
4400 - State Revenue	$443,519.10	$3,785.83	$81,903.18	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$924.77	$0.00	$0.00	$421.31	$53,226.86	$0.00	$583,781.05
4500 - Federal Revenue	$0.00	$0.00	$41,264.37	$49,235.00	$0.00	$0.00	$0.00	$572,713.09	$18,238.38	$237,343.03	$23,695.10	$0.00	$122,075.25	$123,484.42	$79,461.10	$0.00	$313,656.00	$1,581,165.74
5300 - Interest and Dividends	$29.66	$188.06	$50.99	$53.54	$17.97	$0.00	$17.97	$14.33	$107.23	$21.62	$17.16	$0.00	$0.00	$25.37	$555.46	$0.00	$56.28	$1,137.67
5400 - Revenue from other sources	$0.00	$13,000.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$12,500.00	$0.00	$19,626.25	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$45,126.25
5800 - Special Event Expense	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$980.00	$0.00	$0.00	$1,500.00	$2,480.00
Total - Income	$443,548.76	$18,768.54	$123,218.54	$116,843.00	$17.97	$0.00	$17.97	$575,227.42	$30,845.61	$237,364.65	$66,852.79	$924.77	$122,075.25	$124,489.79	$80,437.87	$53,226.86	$579,752.36	$2,573,594.18
Expense																		
7000 - Grants, contracts, & direct assistance	$0.00	$0.00	$51,493.80	$0.00	$2,193.62	$2,756.40	$4,950.02	$0.00	$451.03	$0.00	$0.00	$0.00	$4,797.37	$0.00	$7,026.68	$0.00	$822.19	$69,541.09
7200 - Salaries & related expenses	$131,413.56	$0.00	$11,452.97	$34,161.85	$0.00	$0.00	$0.00	$375,554.34	$14,938.08	$162,997.49	$32,531.86	$2,177.80	$48,179.55	$73,523.49	$64,535.82	$13,072.43	$135,001.92	$1,099,541.16
7300 - Indirect Cost Pool Expense	$25,903.33	$0.00	$2,229.09	$6,672.60	$0.00	$0.00	$0.00	$74,638.10	$2,886.44	$32,361.04	$6,786.87	$439.22	$9,676.19	$14,761.40	$12,606.01	$2,538.45	$27,528.75	$219,027.49
7500 - Contract/Consultant Services	$2,285.00	$0.00	$17,120.00	$0.00	$0.00	$0.00	$0.00	$32,742.09	$1,331.00	$2,599.00	$0.00	$0.00	$1,331.70	$22,222.00	$0.00	$857.00	$705.68	$81,193.47
8100 - Non personnel expenses	$71,734.10	$334.67	$2,105.24	$29.93	$0.00	$0.00	$0.00	$20,278.76	$1,008.21	$14,488.37	$1,030.11	$0.00	$4,271.80	$4,804.12	$875.64	$8,091.41	$13,630.06	$142,682.42
8200 - Facility & equipment expenses	$48,698.39	$1,026.00	$0.00	$0.00	$0.00	$0.00	$0.00	$23,112.00	$320.00	$6,606.98	$2,072.00	$0.00	$4,522.00	$3,040.00	$2,884.98	$7,921.50	$17,332.41	$117,536.26
8300 - Travel & meetings expenses	$4,669.89	$1,358.09	$1,521.85	$132.92	$0.00	$0.00	$0.00	$18,332.42	$1,837.71	$8,858.93	$1,346.31	$0.00	$5,341.58	$9,981.29	$2,417.80	$2,822.67	$29,725.04	$88,346.50
8400 - Insurance Expense	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$24.00	$0.00	$0.00	$1,494.32	$0.00	$0.00	$0.00	$0.00	$0.00	$4,529.00	$6,047.32
8600 - Business expenses	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$7.50	$7.50
8700 - Food Expenses	$3,139.24	$0.00	$0.00	$255.57	$0.00	$0.00	$0.00	$3,870.87	$0.00	$578.36	$933.19	$0.00	$0.00	$0.00	$0.00	$951.13	$217.04	$9,945.40
8800 - In-Kind Expenses	$0.00	$0.00	$0.00	$67,554.46	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$17,704.28	$0.00	$0.00	$0.00	$0.00	$0.00	$239,678.06	$324,936.80
Total - Expense	$287,843.51	$2,718.76	$85,922.95	$108,807.33	$2,193.62	$2,756.40	$4,950.02	$548,552.58	$22,772.47	$228,490.17	$63,898.94	$2,617.02	$78,120.19	$128,332.30	$90,346.93	$36,254.59	$469,177.65	$2,158,805.41
Net Ordinary Income	$155,705.25	$16,049.78	$37,295.59	$8,035.67	($2,175.65)	($2,756.40)	($4,932.05)	$26,674.84	$8,073.14	$8,874.48	$2,953.85	($1,692.25)	$43,955.06	($3,842.51)	($9,909.06)	$16,972.27	$110,574.71	$414,788.77
Other Income and Expenses																		
Other Expense																		
8500 - Other Expense	$76,526.33	$2,918.63	$9,080.00	$7,597.35	$0.00	$0.00	$0.00	$35,426.90	$660.40	$27,692.52	$183.80	$0.00	$1,759.26	$2,770.75	$6,205.13	$23,465.63	$79,345.28	$273,631.98
Total - Other Expense	$76,526.33	$2,918.63	$9,080.00	$7,597.35	$0.00	$0.00	$0.00	$35,426.90	$660.40	$27,692.52	$183.80	$0.00	$1,759.26	$2,770.75	$6,205.13	$23,465.63	$79,345.28	$273,631.98

LIFT Community Action Agency Inc
Parent - Lift : LIFT Community Action Agency Inc
LIFT | Budget vs. Actual by Grant
From Jan 2024 to Dec 2024
Options: Activity Only

Housing

FINANCIAL ROW	BUDGET AMOUNT	AMOUNT EXPENDED	BUDGET BALANCE	% OF BUDGET
Ordinary Income/Expense				
Income				
4100 - Inkind Revenue	**$187,500.00**	**$0.00**	**$187,500.00**	**0.00%**
4200 - Miscellaneous Revenue	**$0.00**	**$84,709.78**	**($84,709.78)**	**0.00%**
4400 - State Revenue	**$12,160.00**	**$6,448.75**	**$5,711.25**	**53.03%**
4500 - Federal Revenue	**$4,978,719.06**	**$2,329,290.79**	**$2,649,428.27**	**46.78%**
5000 - Rental Revenue	**$0.00**	**$307,668.56**	**($307,668.56)**	**0.00%**
5100 - Program Fee Revenue	**$0.00**	**$85,204.30**	**($85,204.30)**	**0.00%**
5300 - Interest and Dividends	**$0.00**	**$132,725.82**	**($132,725.82)**	**0.00%**
5400 - Revenue from other sources	**$0.00**	**$9,800.00**	**($9,800.00)**	**0.00%**
Total - Income	**$5,178,379.06**	**$2,955,848.00**	**$2,222,531.06**	**57.08%**
Gross Profit	**$5,178,379.06**	**$2,955,848.00**	**$2,222,531.06**	**57.08%**
Expense				
7000 - Grants, contracts, & direct assistance	**$0.00**	**$503,132.00**	**($503,132.00)**	**0.00%**
7200 - Salaries & related expenses	**$1,942,701.87**	**$1,099,309.01**	**$843,392.86**	**56.59%**
7300 - Indirect Cost Pool Expense	**$405,751.40**	**$224,608.55**	**$181,142.85**	**55.36%**
7500 - Contract/Consultant Services	**$182,069.26**	**$118,718.22**	**$63,351.04**	**65.20%**
8100 - Non personnel expenses	**$292,397.34**	**$84,379.95**	**$208,017.39**	**28.86%**
8200 - Facility & equipment expenses	**$773,370.16**	**$750,363.79**	**$23,006.37**	**97.03%**
8300 - Travel & meetings expenses	**$541,711.82**	**$90,689.47**	**$451,022.35**	**16.74%**
8400 - Insurance Expense	$12,902.42	$180,389.17	($167,486.75)	1,398.10%
8700 - Food Expenses	**$0.00**	**$665.78**	**($665.78)**	**0.00%**
8800 - In-Kind Expenses	**$187,500.00**	**$0.00**	**$187,500.00**	**0.00%**
Total - Expense	**$4,338,404.27**	**$3,052,255.94**	**$1,286,148.33**	**70.35%**
Other Income and Expenses				
Other Expense				
8500 - Other Expense	**$388,537.59**	**$213,770.77**	**$174,766.82**	**55.02%**
Total - Other Expense	**$388,537.59**	**$213,770.77**	**$174,766.82**	**55.02%**
Net Income	**$451,437.20**	**($310,178.71)**	**$761,615.91**	**-68.71%**

LIFT Community Action Agency Inc
Parent - Lift : LIFT Community Action Agency Inc
Income/Expense Statement Summary
From Jan 2024 to Aug 2024

Financial Row	40 Housing Department									
	Amount	Apartments Amount	Construction Amount	HUD Apartments (Lift) Amount	Amount	Housing Weatherization Amount	Total Amount	Self Help Housing Amount	TMA Amount	Total Amount
Ordinary Income/Expense										
Income										
4200 - Miscellaneous Revenue	$0.00	$0.00	$0.00	$0.00	$84,709.78	$0.00	$84,709.78	$0.00	$0.00	$84,709.78
4400 - State Revenue	$0.00	$0.00	$0.00	$0.00	$6,448.75	$0.00	$6,448.75	$0.00	$0.00	$6,448.75
4500 - Federal Revenue	$0.00	$0.00	$311,326.02	$0.00	$898,176.32	$0.00	$898,176.32	$335,826.52	$783,961.93	$2,329,290.79
5000 - Rental Revenue	$9,722.50	$284,487.06	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$294,209.56
5100 - Program Fee Revenue	$460.14	$2,422.65	$0.00	$19,641.98	$62,553.03	$0.00	$62,553.03	$55.75	$0.00	$85,133.55
5300 - Interest and Dividends	$107,917.00	$15,257.77	$0.00	$0.00	$9,551.05	$0.00	$9,551.05	$0.00	$0.00	$132,725.82
5400 - Revenue from other sources	$0.00	$9,800.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$9,800.00
Total - Income	$118,099.64	$311,967.48	$311,326.02	$19,641.98	$1,061,438.93	$0.00	$1,061,438.93	$335,882.27	$783,961.93	$2,942,318.25
Expense										
7000 - Grants, contracts, & direct assistance	$116,317.00	$11,815.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$375,000.00	$503,132.00
7200 - Salaries & related expenses	$49,879.05	$17,789.20	$450,821.01	$446.79	($48,272.76)	$19,253.54	($29,019.22)	$249,432.94	$290,754.29	$1,030,104.06
7300 - Indirect Cost Pool Expense	$10,440.67	$3,447.36	$89,076.33	$4,394.70	($8,258.96)	$4,029.34	($4,229.62)	$48,160.93	$59,505.63	$210,796.00
7500 - Contract/Consultant Services	$295.00	$25,731.50	$29,497.00	$0.00	$46,108.50	$0.00	$46,108.50	$0.00	$17,001.22	$118,633.22
8100 - Non personnel expenses	$2,538.76	$3,430.89	$45,247.94	$312.51	$15,445.46	$0.00	$15,445.46	$5,484.59	$11,824.80	$84,284.95
8200 - Facility & equipment expenses	$13,315.28	$138,318.88	$5,416.62	$1,046.17	$560,310.54	$0.00	$560,310.54	$13,176.30	$13,280.00	$744,863.79
8300 - Travel & meetings expenses	$51.25	$1,599.35	$12,073.51	$548.73	$441.15	$0.00	$441.15	$28,113.44	$47,406.98	$90,234.41
8400 - Insurance Expense	$0.00	$155,865.12	$0.00	$0.00	$24,362.05	$0.00	$24,362.05	$162.00	$0.00	$180,389.17
8700 - Food Expenses	$0.00	$0.00	$0.00	$0.00	$665.78	$0.00	$665.78	$0.00	$0.00	$665.78
Total - Expense	$192,837.01	$357,997.30	$632,132.41	$6,748.90	$590,801.76	$23,282.88	$614,084.64	$344,530.20	$814,772.92	$2,963,103.38
Net Ordinary Income	($74,737.37)	($46,029.82)	($320,806.39)	$12,893.08	$470,637.17	($23,282.88)	$447,354.29	($8,647.93)	($30,810.99)	($20,785.13)
Other Income and Expenses										
Other Expense										
8500 - Other Expense	$1,189.72	$15,471.58	$60,926.96	$4,433.35	$113,965.03	$0.00	$113,965.03	$478.68	$17,305.45	$213,770.77
Total - Other Expense	$1,189.72	$15,471.58	$60,926.96	$4,433.35	$113,965.03	$0.00	$113,965.03	$478.68	$17,305.45	$213,770.77

LIFT Community Action Agency Inc
Parent - Lift : LIFT Community Action Agency Inc
LIFT | Budget vs. Actual by Grant
From Jan 2024 to Dec 2024
Options: Activity Only

Transportation

FINANCIAL ROW	BUDGET AMOUNT	AMOUNT EXPENDED	BUDGET BALANCE	% OF BUDGET
Ordinary Income/Expense				
Income				
4400 - State Revenue	**$0.00**	**$104,747.00**	**($104,747.00)**	**0.00%**
4500 - Federal Revenue	**$0.00**	**$189,997.92**	**($189,997.92)**	**0.00%**
5100 - Program Fee Revenue	**$0.00**	**$245,133.54**	**($245,133.54)**	**0.00%**
5300 - Interest and Dividends	**$0.00**	**$791.94**	**($791.94)**	**0.00%**
5400 - Revenue from other sources	**$0.00**	**$12,594.46**	**($12,594.46)**	**0.00%**
Total - Income	**$0.00**	**$553,264.86**	**($553,264.86)**	**0.00%**
Gross Profit	**$0.00**	**$553,264.86**	**($553,264.86)**	**0.00%**
Expense				
7000 - Grants, contracts, & direct assistance	**$0.00**	**$12,594.46**	**($12,594.46)**	**0.00%**
7200 - Salaries & related expenses	**$0.00**	**$667,682.86**	**($667,682.86)**	**0.00%**
7300 - Indirect Cost Pool Expense	**$0.00**	**$135,543.20**	**($135,543.20)**	**0.00%**
7500 - Contract/Consultant Services	**$0.00**	**$30,252.50**	**($30,252.50)**	**0.00%**
8100 - Non personnel expenses	**$0.00**	**$31,584.16**	**($31,584.16)**	**0.00%**
8200 - Facility & equipment expenses	**$0.00**	**$128,857.29**	**($128,857.29)**	**0.00%**
8300 - Travel & meetings expenses	**$0.00**	**$123,830.42**	**($123,830.42)**	**0.00%**
8400 - Insurance Expense	$0.00	$77,820.55	($77,820.55)	0.00%
Total - Expense	**$0.00**	**$1,208,165.44**	**($1,208,165.44)**	**0.00%**
Other Income and Expenses				
Other Expense				
8500 - Other Expense	**$0.00**	**$114,663.66**	**($114,663.66)**	**0.00%**
Total - Other Expense	**$0.00**	**$114,663.66**	**($114,663.66)**	**0.00%**
Net Income	**$0.00**	**($769,564.24)**	**$769,564.24**	**0.00%**

LIFT Community Action Agency Inc
Parent - Lift : LIFT Community Action Agency Inc
Income/Expense Statement Summary
From Jan 2024 to Aug 2024

Financial Row		50 Transportation Transit	Total
	Amount	Amount	Amount
Ordinary Income/Expense			
Income			
4400 - State Revenue	$0.00	$104,747.00	$104,747.00
4500 - Federal Revenue	$0.00	$189,997.92	$189,997.92
5100 - Program Fee Revenue	$0.00	$245,133.54	$245,133.54
5300 - Interest and Dividends	$0.00	$791.94	$791.94
5400 - Revenue from other sources	$0.00	$12,594.46	$12,594.46
Total - Income	$0.00	$553,264.86	$553,264.86
Expense			
7000 - Grants, contracts, & direct assistance	$0.00	$12,594.46	$12,594.46
7200 - Salaries & related expenses	$21,760.25	$600,397.47	$622,157.72
7300 - Indirect Cost Pool Expense	$4,385.79	$121,991.50	$126,377.29
7500 - Contract/Consultant Services	$0.00	$30,252.50	$30,252.50
8100 - Non personnel expenses	$4,692.50	$26,731.24	$31,423.74
8200 - Facility & equipment expenses	$0.00	$128,857.29	$128,857.29
8300 - Travel & meetings expenses	$0.00	$123,830.42	$123,830.42
8400 - Insurance Expense	$0.00	$77,820.55	$77,820.55
Total - Expense	$30,838.54	$1,122,475.43	$1,153,313.97
Net Ordinary Income	($30,838.54)	($569,210.57)	($600,049.11)
Other Income and Expenses			
Other Expense			
8500 - Other Expense	$0.00	$114,663.66	$114,663.66
Total - Other Expense	$0.00	$114,663.66	$114,663.66

LIFT Community Action Agency Inc
Parent - Lift : LIFT Community Action Agency Inc
LIFT | Budget vs. Actual by Grant
From Jan 2024 to Dec 2024
Options: Activity Only

Economic Development

FINANCIAL ROW	BUDGET AMOUNT	AMOUNT EXPENDED	BUDGET BALANCE	% OF BUDGET
Ordinary Income/Expense				
Income				
4000 - Contribution Revenue	**$0.00**	**$19.00**	**($19.00)**	**0.00%**
4200 - Miscellaneous Revenue	**$0.00**	**$1,761.73**	**($1,761.73)**	**0.00%**
4400 - State Revenue	**$0.00**	**$68,807.65**	**($68,807.65)**	**0.00%**
4500 - Federal Revenue	**$0.00**	**$75,000.00**	**($75,000.00)**	**0.00%**
5100 - Program Fee Revenue	**$0.00**	**$278,379.68**	**($278,379.68)**	**0.00%**
5300 - Interest and Dividends	**$0.00**	**$18,194.98**	**($18,194.98)**	**0.00%**
5400 - Revenue from other sources	**$0.00**	**$2,229.71**	**($2,229.71)**	**0.00%**
5800 - Special Event Expense	**$0.00**	**$626.00**	**($626.00)**	**0.00%**
Total - Income	**$0.00**	**$445,018.75**	**($445,018.75)**	**0.00%**
Cost Of Sales				
8000 - Cost of Goods Sold	**$0.00**	**$2,371.54**	**($2,371.54)**	**0.00%**
Total - Cost Of Sales	**$0.00**	**$2,371.54**	**($2,371.54)**	**0.00%**
Gross Profit	**$0.00**	**$442,647.21**	**($442,647.21)**	**0.00%**
Expense				
7200 - Salaries & related expenses	**$0.00**	**$205,851.24**	**($205,851.24)**	**0.00%**
7300 - Indirect Cost Pool Expense	**$0.00**	**$42,414.44**	**($42,414.44)**	**0.00%**
7500 - Contract/Consultant Services	**$0.00**	**$28,048.81**	**($28,048.81)**	**0.00%**
8100 - Non personnel expenses	**$0.00**	**$39,372.82**	**($39,372.82)**	**0.00%**
8200 - Facility & equipment expenses	**$0.00**	**$237,533.72**	**($237,533.72)**	**0.00%**
8300 - Travel & meetings expenses	**$0.00**	**$8,841.56**	**($8,841.56)**	**0.00%**
8400 - Insurance Expense	$0.00	$86,964.27	($86,964.27)	0.00%
Total - Expense	**$0.00**	**$649,026.86**	**($649,026.86)**	**0.00%**
Other Income and Expenses				
Other Expense				
8500 - Other Expense	**$0.00**	**$31,221.50**	**($31,221.50)**	**0.00%**
Total - Other Expense	**$0.00**	**$31,221.50**	**($31,221.50)**	**0.00%**
Net Income	**$0.00**	**($237,601.15)**	**$237,601.15**	**0.00%**

LIFT Community Action Agency Inc
Parent - Lift : LIFT Community Action Agency Inc
Income/Expense Statement Summary
From Jan 2024 to Aug 2024

Financial Row	60 Economic Development							
	Amount	Economic Development/Lending Amount	Amount	Clayton Lake Amount	State Parks Hugo Lake Amount	Raymond Gary Amount	Total Amount	Total Amount
Ordinary Income/Expense								
Income								
4000 - Contribution Revenue	$0.00	$0.00	$0.00	$19.00	$0.00	$0.00	$19.00	$19.00
4200 - Miscellaneous Revenue	$0.00	$0.00	$0.00	$0.00	$955.00	$806.73	$1,761.73	$1,761.73
4400 - State Revenue	$0.00	$0.00	$0.00	$33,267.50	$0.00	$35,540.15	$68,807.65	$68,807.65
4500 - Federal Revenue	$0.00	$75,000.00	$0.00	$0.00	$0.00	$0.00	$0.00	$75,000.00
5100 - Program Fee Revenue	$0.00	$4,609.04	$7,263.50	$25,141.00	$183,467.56	$56,907.32	$272,779.38	$277,388.42
5300 - Interest and Dividends	$0.00	$15,447.92	$0.00	$0.00	$1,661.51	$393.32	$2,054.83	$17,502.75
5400 - Revenue from other sources	$0.00	$0.00	$221.00	$0.00	$1,988.71	$20.00	$2,229.71	$2,229.71
5800 - Special Event Expense	$0.00	$0.00	$0.00	$0.00	$626.00	$0.00	$626.00	$626.00
Total - Income	$0.00	$95,056.96	$7,484.50	$58,427.50	$188,698.78	$93,667.52	$348,278.30	$443,335.26
8000 - Cost of Goods Sold								
8010 - Resale Fuel Expense	$0.00	$0.00	$0.00	$0.00	$569.85	$0.00	$569.85	$569.85
8020 - Ship Store (Resale Inv)	$0.00	$0.00	$0.00	$0.00	$1,801.69	$0.00	$1,801.69	$1,801.69
Total - 8000 - Cost of Goods Sold	$0.00	$0.00	$0.00	$0.00	$2,371.54	$0.00	$2,371.54	$2,371.54
Expense								
7200 - Salaries & related expenses	$0.00	$0.00	$0.00	$33,002.49	$115,344.03	$44,806.45	$193,152.97	$193,152.97
7300 - Indirect Cost Pool Expense	$0.00	$0.00	$0.00	$6,793.29	$23,880.10	$9,172.84	$39,846.23	$39,846.23
7500 - Contract/Consultant Services	$0.00	$0.00	$0.00	$0.00	$22,990.01	$4,658.80	$27,648.81	$27,648.81
8100 - Non personnel expenses	$170.64	$1,409.33	$0.00	$1,757.21	$32,747.57	$3,288.07	$37,792.85	$39,372.82
8200 - Facility & equipment expenses	$0.00	$18,539.66	$259.36	$7,122.44	$183,750.92	$27,861.34	$218,994.06	$237,533.72
8300 - Travel & meetings expenses	$0.00	$0.00	$0.00	$53.75	$6,319.95	$2,467.86	$8,841.56	$8,841.56
8400 - Insurance Expense	$0.00	$0.00	$0.00	$5,823.03	$73,627.21	$7,514.03	$86,964.27	$86,964.27
Total - Expense	$170.64	$19,948.99	$259.36	$54,552.21	$458,659.79	$99,769.39	$613,240.75	$633,360.38
Net Ordinary Income	($170.64)	$75,107.97	$7,225.14	$3,875.29	($272,332.55)	($6,101.87)	($267,333.99)	($192,396.66)
Other Income and Expenses								
Other Expense								
8500 - Other Expense	$0.00	$0.00	$0.00	$2,418.06	$21,603.48	$7,199.96	$31,221.50	$31,221.50
Total - Other Expense	$0.00	$0.00	$0.00	$2,418.06	$21,603.48	$7,199.96	$31,221.50	$31,221.50

LIFT Community Action Agency Inc
Parent - Lift : LIFT Community Action Agency Inc
Credit Card Vendor Totals
Aug 2024
Options: Show Zeros

NAME	AMOUNT (GROSS)
CAPITAL ONE	$21,003.90
DAVISON FUELS & OIL, LLC	$13,319.21
HOME DEPOT BRC/GECF	$3,836.30
OFFICE DEPOT BUSINESS CREDIT	$98.99
TCM BANK NA	$42,633.32
WAL-MART COMMUNITY BRC	$7,076.62
Total	**$87,968.34**

LIFT Community Action Agency Inc
Parent - Lift : LIFT Community Action Agency Inc
Credit Card Report
Aug 2024

Program	Contract/Consultant Services	Cost of Goods Sold	Facility & equipment expenses	Food Expenses				Grants, contracts, & direct assistance			Events/Meeting Expense	Medical/Dental Supplies	Office/Teaching Supplies	Non personn
	Contract Services Amount	Ship Store (Resale Inv) Amount	Repair/Maint for Building/Equip Amount	Food Nutrition Cost Amount	Non -Food, Nutrition Cost Amount	Other Food Expense Amount	Total Amount	Direct Assistance - Other Amount	Direct Assistance - Utilities Amount	Total Amount	Amount	Amount	Amount	Other/Maint Supplies Amount
Administration						$213.66	$213.66			$0.00	$29.83		$503.07	$136.62
Apartments							$0.00			$0.00				
CASA							$0.00			$0.00				
Community Services							$0.00			$0.00				
Early Head Start							$0.00			$0.00				
Early Head Start Child Care							$0.00			$0.00			$95.47	
Early Learning Centers				$75.38		$198.44	$273.82			$0.00			$1,370.17	
Head Start			$7,373.30	$355.31	$5,273.81	$782.77	$6,411.89			$0.00	$41.40	$696.29	$5,892.73	
Housing	$295.00						$0.00			$0.00				
Mentoring							$0.00			$0.00				
RSVP							$0.00			$0.00				
Safe Place Healing Hearts							$0.00	$947.76	$954.69	$1,902.45				
State Park Operations		$174.75	$54.07				$0.00			$0.00				
TMA							$0.00			$0.00				
TRANSIT							$0.00			$0.00			$167.50	
Tri-CORPS							$0.00			$0.00				
VOCA							$0.00	$1,085.36		$1,085.36				
WRO						$899.10	$899.10			$0.00	$83.63		$267.72	$420.72
Youth Build							$0.00	$432.46		$432.46	$305.98		$110.46	$97.13
Total	**$295.00**	**$174.75**	**$7,427.37**	**$430.69**	**$5,273.81**	**$2,093.97**	**$7,798.47**	**$2,465.58**	**$954.69**	**$3,420.27**	**$460.84**	**$696.29**	**$8,407.12**	**$654.47**

ıel expenses				Other Expense						Travel & meetings expenses				Total
Postage & shipping Amount	Printing & copying Amount	Telephone & Internet Amount	Total Amount	Advertising & Community Sponsorships Amount	Computer & Software Related Expenses Amount	Fees/Dues Amount	Other Expenses Amount	Recognition Amount	Training & TTA Amount	Total Amount	Fuel Cost Amount	Out of Area Travel Amount	Vehicle Repair & Maint Amount	Total Amount	Amount
$48.60			$718.12		$1,044.69	$163.61		$151.01	$1,250.00	$2,609.31		$275.71		$275.71	$3,816.80
			$0.00							$0.00	$231.27			$231.27	$231.27
			$0.00			$57.00				$57.00				$0.00	$57.00
	$135.63		$135.63							$0.00				$0.00	$135.63
			$0.00						$796.00	$796.00				$0.00	$796.00
			$95.47	$183.66		$24.25			$2,081.22	$2,289.13	$272.61	$76.53		$349.14	$2,733.74
			$1,370.17			$0.00			$64.00	$64.00				$0.00	$1,707.99
			$6,630.42	$416.34	$19.99	$976.25		$46.79	$4,503.71	$5,963.08	$618.08	$173.47		$791.55	$27,170.24
	$692.40		$692.40			$75.00			$3,084.76	$3,159.76	$2,483.57	$1,286.85	$103.08	$3,873.50	$8,020.66
			$0.00			$19.00		$60.00		$79.00				$0.00	$79.00
			$0.00			$69.25				$69.25				$0.00	$69.25
			$0.00							$0.00				$0.00	$1,902.45
		$783.88	$783.88		$0.00	$818.77				$818.77	$537.69		$182.20	$719.89	$2,551.36
			$0.00			$95.94				$95.94		$1,825.80		$1,825.80	$1,921.74
			$167.50			$192.43				$192.43	$9,028.72			$9,028.72	$9,388.65
			$0.00	$47.00					$2,180.00	$2,227.00				$0.00	$2,227.00
			$0.00							$0.00				$0.00	$1,085.36
			$772.07	$6,322.06	$30.00	$44.47	$2,808.51			$9,205.04		$1,135.55		$1,135.55	$12,011.76
			$513.57	$391.31					$4,770.89	$5,162.20	$127.27	$1,990.64		$2,117.91	$8,226.14
$48.60	**$828.03**	**$783.88**	**$11,879.23**	**$7,360.37**	**$1,094.68**	**$2,535.97**	**$2,808.51**	**$257.80**	**$18,730.58**	**$32,787.91**	**$13,299.21**	**$6,764.55**	**$285.28**	**$20,349.04**	**$84,132.04**

LIFT Community Action Agency Inc
Parent - Lift : LIFT Community Action Agency Inc
LIFT | Budget vs. Actual by Grant
From Dec 2023 to Dec 2024
Options: Activity Only

HS 23-24

FINANCIAL ROW	BUDGET AMOUNT	AMOUNT EXPENDED	BUDGET BALANCE	% OF BUDGET
Ordinary Income/Expense				
Income				
4100 - Inkind Revenue	**$684,597.00**	**$405,239.25**	**$279,357.75**	**59.19%**
4200 - Miscellaneous Revenue	**$0.00**	**$7,924.80**	**($7,924.80)**	**0.00%**
4500 - Federal Revenue	**$3,510,751.00**	**$2,825,798.00**	**$684,953.00**	**80.49%**
Total - Income	**$4,195,348.00**	**$3,238,962.05**	**$956,385.95**	**77.20%**
Gross Profit	**$4,195,348.00**	**$3,238,962.05**	**$956,385.95**	**77.20%**
Expense				
7200 - Salaries & related expenses				
7220 - Salaries & wages - other	$2,038,720.00	$1,457,974.46	$580,745.54	71.51%
7230 - Pension plan contributions	$202,000.00	$104,922.39	$97,077.61	51.94%
7240 - Employee benefits - not pension	$273,476.00	$228,256.01	$45,219.99	83.46%
7250 - Payroll taxes, etc.	$215,533.00	$117,889.28	$97,643.72	54.70%
Total - 7200 - Salaries & related expenses	**$2,729,729.00**	**$1,909,042.14**	**$820,686.86**	**69.94%**
7300 - Indirect Cost Pool Expense	**$536,183.00**	**$384,209.62**	**$151,973.38**	**71.66%**
7500 - Contract/Consultant Services	**$46,700.00**	**$35,808.99**	**$10,891.01**	**76.68%**
8100 - Non personnel expenses				
8110 - Office/Teaching Supplies	$13,250.00	$114,276.51	($101,026.51)	862.46%
8120 - Other/Maint Supplies	$0.00	$16,552.04	($16,552.04)	0.00%
8130 - Telephone & Internet	$0.00	$39,081.61	($39,081.61)	0.00%
8140 - Postage & shipping	$0.00	$593.49	($593.49)	0.00%
8150 - Medical/Dental Supplies	$0.00	$17,267.72	($17,267.72)	0.00%
8160 - Events/Meeting Expense	$0.00	$113.90	($113.90)	0.00%
8170 - Printing & copying	$0.00	$11,290.95	($11,290.95)	0.00%
8180 - Fatherhood	$1,000.00	$0.00	$1,000.00	0.00%
Total - 8100 - Non personnel expenses	**$14,250.00**	**$199,176.22**	**($184,926.22)**	**1,397.73%**
8200 - Facility & equipment expenses				
8210 - Space Lease	$0.00	$2,685.67	($2,685.67)	0.00%
8220 - Electric	$35,000.00	$31,356.16	$3,643.84	89.59%
8225 - Water	$0.00	$3,243.73	($3,243.73)	0.00%
8230 - Trash	$0.00	$7,627.69	($7,627.69)	0.00%
8235 - Sewer	$0.00	$2,548.36	($2,548.36)	0.00%
8240 - Natural Gas	$0.00	$2,012.90	($2,012.90)	0.00%
8250 - Equip & Over $5000.00 (Inv Items)	$0.00	$5,057.86	($5,057.86)	0.00%
8260 - Repair/Maint for Building/Equip	$14,208.00	$78,797.63	($64,589.63)	554.60%
Total - 8200 - Facility & equipment expenses	**$49,208.00**	**$133,330.00**	**($84,122.00)**	**270.95%**
8300 - Travel & meetings expenses				
8310 - Local Travel	$10,000.00	$25,882.06	($15,882.06)	258.82%
8320 - Out of Area Travel	$3,400.00	$4,956.72	($1,556.72)	145.79%
8330 - Fuel Cost	$0.00	$3,351.28	($3,351.28)	0.00%
8335 - Vehicle Repair & Maint	$7,000.00	$766.71	$6,233.29	10.95%
8340 - Child Transportation Exp	$0.00	$1,452.92	($1,452.92)	0.00%
Total - 8300 - Travel & meetings expenses	**$20,400.00**	**$36,409.69**	**($16,009.69)**	**178.48%**
8400 - Insurance Expense	$23,500.00	$76,352.55	($52,852.55)	324.90%
8700 - Food Expenses	**$46,800.00**	**$132,444.35**	**($85,644.35)**	**283.00%**
8800 - In-Kind Expenses	**$684,597.00**	**$405,239.25**	**$279,357.75**	**59.19%**
Total - Expense	**$4,151,367.00**	**$3,312,012.81**	**$839,354.19**	**79.78%**
Other Income and Expenses				
Other Expense				
8500 - Other Expense				
8520 - Recognition	$0.00	$2,455.85	($2,455.85)	0.00%
8530 - Fees/Dues	$865.00	$15,990.85	($15,125.85)	1,848.65%
8540 - Training & TTA	$39,956.00	$45,637.10	($5,681.10)	114.22%
8560 - Computer & Software Related Expenses	$0.00	$41,250.71	($41,250.71)	0.00%
8570 - Advertising & Community Sponsorships	$2,160.00	$16,506.48	($14,346.48)	764.19%
8590 - Other Expenses	$1,000.00	$832.45	$167.55	83.25%
Total - 8500 - Other Expense	**$43,981.00**	**$122,673.44**	**($78,692.44)**	**278.92%**
Total - Other Expense	**$43,981.00**	**$122,673.44**	**($78,692.44)**	**278.92%**
Net Income	**$0.00**	**($195,724.20)**	**$195,724.20**	**0.00%**

LIFT Community Action Agency Inc
Parent - Lift : LIFT Community Action Agency Inc
LIFT | Budget vs. Actual by Grant
From Dec 2023 to Dec 2024
Options: Activity Only

EHS 23-24

FINANCIAL ROW	BUDGET AMOUNT	AMOUNT EXPENDED	BUDGET BALANCE	% OF BUDGET
Ordinary Income/Expense				
Income				
4100 - Inkind Revenue	**$193,091.00**	**$46,314.90**	**$146,776.10**	**23.99%**
4500 - Federal Revenue	**$999,189.00**	**$684,275.00**	**$314,914.00**	**68.48%**
Total - Income	**$1,192,280.00**	**$730,589.90**	**$461,690.10**	**61.28%**
Gross Profit	**$1,192,280.00**	**$730,589.90**	**$461,690.10**	**61.28%**
Expense				
7200 - Salaries & related expenses				
7220 - Salaries & wages - other	$512,515.00	$352,441.20	$160,073.80	68.77%
7230 - Pension plan contributions	$50,593.00	$21,496.85	$29,096.15	42.49%
7240 - Employee benefits - not pension	$68,696.00	$54,790.00	$13,906.00	79.76%
7250 - Payroll taxes, etc.	$53,984.00	$28,762.26	$25,221.74	53.28%
Total - 7200 - Salaries & related expenses	**$685,788.00**	**$457,490.31**	**$228,297.69**	**66.71%**
7300 - Indirect Cost Pool Expense	**$134,791.00**	**$90,315.61**	**$44,475.39**	**67.00%**
7500 - Contract/Consultant Services	**$2,500.00**	**$7,663.50**	**($5,163.50)**	**306.54%**
8100 - Non personnel expenses				
8110 - Office/Teaching Supplies	$34,340.00	$34,615.71	($275.71)	100.80%
8120 - Other/Maint Supplies	$0.00	$3,211.41	($3,211.41)	0.00%
8130 - Telephone & Internet	$0.00	$4,940.83	($4,940.83)	0.00%
8140 - Postage & shipping	$0.00	$127.21	($127.21)	0.00%
8150 - Medical/Dental Supplies	$0.00	$3,772.85	($3,772.85)	0.00%
8160 - Events/Meeting Expense	$0.00	$583.62	($583.62)	0.00%
8170 - Printing & copying	$0.00	$2,412.43	($2,412.43)	0.00%
8180 - Fatherhood	$2,500.00	$0.00	$2,500.00	0.00%
Total - 8100 - Non personnel expenses	**$36,840.00**	**$49,664.06**	**($12,824.06)**	**134.81%**
8200 - Facility & equipment expenses				
8210 - Space Lease	$0.00	$162.96	($162.96)	0.00%
8220 - Electric	$25,500.00	$9,695.38	$15,804.62	38.02%
8225 - Water	$0.00	$1,281.19	($1,281.19)	0.00%
8230 - Trash	$0.00	$1,560.19	($1,560.19)	0.00%
8235 - Sewer	$0.00	$750.90	($750.90)	0.00%
8240 - Natural Gas	$0.00	$1,024.10	($1,024.10)	0.00%
8250 - Equip & Over $5000.00 (Inv Items)	$0.00	$1,084.33	($1,084.33)	0.00%
8260 - Repair/Maint for Building/Equip	$27,000.00	$14,239.86	$12,760.14	52.74%
Total - 8200 - Facility & equipment expenses	**$52,500.00**	**$29,798.91**	**$22,701.09**	**56.76%**
8300 - Travel & meetings expenses				
8310 - Local Travel	$5,000.00	$3,188.71	$1,811.29	63.77%
8320 - Out of Area Travel	$34,000.00	$801.83	$33,198.17	2.36%
8330 - Fuel Cost	$0.00	$659.56	($659.56)	0.00%
8335 - Vehicle Repair & Maint	$0.00	$162.99	($162.99)	0.00%
Total - 8300 - Travel & meetings expenses	**$39,000.00**	**$4,813.09**	**$34,186.91**	**12.34%**
8400 - Insurance Expense	$13,500.00	$21,381.26	($7,881.26)	158.38%
8700 - Food Expenses	**$22,070.00**	**$34,042.28**	**($11,972.28)**	**154.25%**
8800 - In-Kind Expenses	**$0.00**	**$46,314.90**	**($46,314.90)**	**0.00%**
Total - Expense	**$986,989.00**	**$741,483.92**	**$245,505.08**	**75.13%**
Other Income and Expenses				
Other Expense				
8500 - Other Expense				
8520 - Recognition	$0.00	$417.35	($417.35)	0.00%
8530 - Fees/Dues	$0.00	$4,990.75	($4,990.75)	0.00%
8540 - Training & TTA	$19,304.00	$19,769.97	($465.97)	102.41%
8560 - Computer & Software Related Expenses	$0.00	$7,609.62	($7,609.62)	0.00%
8570 - Advertising & Community Sponsorships	$2,000.00	$4,830.08	($2,830.08)	241.50%
8590 - Other Expenses	$21,496.00	$26.27	$21,469.73	0.12%
Total - 8500 - Other Expense	**$42,800.00**	**$37,644.04**	**$5,155.96**	**87.95%**
Total - Other Expense	**$42,800.00**	**$37,644.04**	**$5,155.96**	**87.95%**
Net Income	**$162,491.00**	**($48,538.06)**	**$211,029.06**	**-29.87%**

LIFT Community Action Agency Inc
Parent - Lift : LIFT Community Action Agency Inc
LIFT | Budget vs. Actual by Grant
From Jan 2024 to Dec 2024
Options: Activity Only

24-25 EHS Child Care Partnership

FINANCIAL ROW	BUDGET AMOUNT	AMOUNT EXPENDED	BUDGET BALANCE	% OF BUDGET
Ordinary Income/Expense				
Income				
4100 - Inkind Revenue	**$103,115.00**	**$0.00**	**$103,115.00**	**0.00%**
4500 - Federal Revenue	**$2,267,831.00**	**$19,754.00**	**$2,248,077.00**	**0.87%**
Total - Income	**$2,370,946.00**	**$19,754.00**	**$2,351,192.00**	**0.83%**
Gross Profit	**$2,370,946.00**	**$19,754.00**	**$2,351,192.00**	**0.83%**
Expense				
7200 - Salaries & related expenses				
7220 - Salaries & wages - other	$487,412.00	$35,307.51	$452,104.49	7.24%
7230 - Pension plan contributions	$48,741.00	$3,089.16	$45,651.84	6.34%
7240 - Employee benefits - not pension	$65,279.00	$6,226.48	$59,052.52	9.54%
7250 - Payroll taxes, etc.	$41,674.00	$2,830.19	$38,843.81	6.79%
Total - 7200 - Salaries & related expenses	**$643,106.00**	**$47,453.34**	**$595,652.66**	**7.38%**
7300 - Indirect Cost Pool Expense	**$128,189.00**	**$9,325.50**	**$118,863.50**	**7.27%**
7500 - Contract/Consultant Services	**$1,054,076.00**	**$7,619.46**	**$1,046,456.54**	**0.72%**
8100 - Non personnel expenses				
8110 - Office/Teaching Supplies	$56,000.00	$4,424.41	$51,575.59	7.90%
8120 - Other/Maint Supplies	$0.00	$850.61	($850.61)	0.00%
8130 - Telephone & Internet	$9,000.00	$140.12	$8,859.88	1.56%
8140 - Postage & shipping	$1,000.00	$0.00	$1,000.00	0.00%
8150 - Medical/Dental Supplies	$2,000.00	$90.17	$1,909.83	4.51%
8170 - Printing & copying	$7,000.00	$76.80	$6,923.20	1.10%
8180 - Fatherhood	$2,000.00	$0.00	$2,000.00	0.00%
Total - 8100 - Non personnel expenses	**$77,000.00**	**$5,582.11**	**$71,417.89**	**7.25%**
8200 - Facility & equipment expenses				
8210 - Space Lease	$0.00	$55.10	($55.10)	0.00%
8220 - Electric	$4,400.00	$0.00	$4,400.00	0.00%
8225 - Water	$400.00	$7.54	$392.46	1.89%
8230 - Trash	$100.00	$0.00	$100.00	0.00%
8235 - Sewer	$400.00	$4.94	$395.06	1.24%
8240 - Natural Gas	$100.00	$0.00	$100.00	0.00%
8260 - Repair/Maint for Building/Equip	$45,000.00	$339.84	$44,660.16	0.76%
Total - 8200 - Facility & equipment expenses	**$50,400.00**	**$407.42**	**$49,992.58**	**0.81%**
8300 - Travel & meetings expenses				
8310 - Local Travel	$7,500.00	$537.81	$6,962.19	7.17%
8320 - Out of Area Travel	$5,000.00	$76.53	$4,923.47	1.53%
8330 - Fuel Cost	$2,500.00	$107.65	$2,392.35	4.31%
8335 - Vehicle Repair & Maint	$2,500.00	$0.00	$2,500.00	0.00%
Total - 8300 - Travel & meetings expenses	**$17,500.00**	**$721.99**	**$16,778.01**	**4.13%**
8400 - Insurance Expense	$6,000.00	$0.00	$6,000.00	0.00%
8700 - Food Expenses	**$6,000.00**	**$0.00**	**$6,000.00**	**0.00%**
8800 - In-Kind Expenses	**$103,115.00**	**$0.00**	**$103,115.00**	**0.00%**
Total - Expense	**$2,085,386.00**	**$71,109.82**	**$2,014,276.18**	**3.41%**
Other Income and Expenses				
Other Expense				
8500 - Other Expense				
8520 - Recognition	$9,150.00	$0.00	$9,150.00	0.00%
8530 - Fees/Dues	$1,500.00	$69.92	$1,430.08	4.66%
8540 - Training & TTA	$42,863.00	$110.20	$42,752.80	0.26%
8560 - Computer & Software Related Expenses	$26,000.00	$0.00	$26,000.00	0.00%
8570 - Advertising & Community Sponsorships	$7,000.00	$2,681.80	$4,318.20	38.31%
8590 - Other Expenses	$3,000.00	$0.00	$3,000.00	0.00%
8595 - Subsidy Expense	$196,047.00	$0.00	$196,047.00	0.00%
Total - 8500 - Other Expense	**$285,560.00**	**$2,861.92**	**$282,698.08**	**1.00%**
Total - Other Expense	**$285,560.00**	**$2,861.92**	**$282,698.08**	**1.00%**
Net Income	**$0.00**	**($54,217.74)**	**$54,217.74**	**0.00%**

OKLAHOMA Commerce

900 N. Stiles Avenue
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March 18, 2024

Becky Porter, Executive Director
LIFT Community Action Foundation (LIFT)
209 N. 4th Street
Hugo, OK 74743

Dear Mrs. Porter:

The Oklahoma Department of Commerce/Community Development (ODOC/CD) is pleased to inform the LIFT Community Action Foundation (LIFT) that PY 2024 Department of Human Services Low Income Home Energy Assistance (DHS LIHEAP) funds, for Region 5, are now available.

Each agency may allocate Program funds by county based on need and available resources. Although it is not required to serve every county annually, every county must be served over a period of time (for example, every 2 or 3 years). Any counties an agency decides not to serve this program year must be listed in the OKGrants Management Plan Justification box along with the planned year it is anticipated the counties will next be served.

Program Outreach and *Training and Technical Assistance* awarded funds are elective – an agency may choose to budget none, some, or all of the awarded amounts indicated in the table below. Any leftover award in these line items must be budgeted in one of the remaining amount line items.

PY'24 Year-to-Date Total Award

		Required Homes
Admin Amount	$6,418.00	
Program Outreach	$17,866.00	
Training and Technical Assistance	$8,333.34	
Remaining Amount (for Program Operations, Audit, Insurance, and Health & Safety)	$53,550.77	
Total Award	**$86,168.11**	**4**

For PY 2024, the Health and Safety budget cannot be initially budgeted at greater than 18% of Program Operation expenditures nor the Average Cost Per Unit (ACPU) greater than $9,500. ODOC permission to exceed either the H&S or ACPU threshold may be requested at any time during the contract period after initial contract execution. ODOC permission must be requested in writing via email through ODOC's Energy Projects Specialist.

Please proceed to OKGrants https://grants.ok.gov to apply for DHS LIHEAP funds and complete the five (5) following required forms:

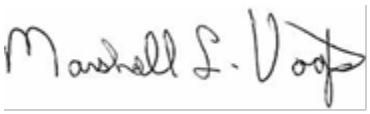
1. Applicant Information
2. Detailed Line-Item Budget
3. Management Plan
4. Audit
5. Uploads
    a. If Program Outreach funds are budgeted, an **Outreach Plan** must be uploaded. *Use the attached Outreach Plan Guidelines to develop your Outreach Plan.*
    b. If an agency maintains a separate DHS LIHEAP waiting list (separate from DOE) that has not been submitted to ODOC through the DOE WAP 2024 application process, that **Waiting List** must also be uploaded.

Application submission will begin the process for the preparation and execution of an ODOC contract for the following contract period: April 1, 2024 – March 31, 2025. Applications should be initiated and submitted as soon as possible, but no later than Tuesday, April 30, 2024.

Please understand that applying for this offer does not constitute your authority to expend funds or make any commitment of funds relative to the DHS LIHEAP Program until full execution of your contract has occurred. When you are notified that your contract is ready, carefully review it, taking note of all deadlines and the contract start date, as funds will not be reimbursed for expenditures before the start of the contract.

We look forward to working with you. If you have any questions about your award or about how to initiate an application in OKGrants, please contact Kayla Cornett at Kayla.Cornett@okcommerce.gov.

Sincerely,



Marshall Vogts, Director
Community Development

OKLAHOMA Commerce

900 N. Stiles Avenue
Oklahoma City, OK 73104, USA
405-815-5251 | Toll Free 800-588-5959
OKCOMMERCE.GOV

March 18, 2024

Becky Porter, Executive Director
LIFT Community Action Agency
209 North 4th
Hugo, OK 74743

Dear Executive Director Porter:

The Oklahoma Department of Commerce/Community Development (ODOC/CD) is pleased to inform you that Round 2 of the Department of Weatherization Assistance Program Bipartisan Infrastructure Law (WAP BIL) funding, is now available. The figures found in Table 1.0 below show the entire BIL allocation awarded to your region to date.

Round 2 Weatherization Assistance Program Bipartisan Infrastructure Law (WAP BIL) Total Award Year to Date				
Program	***Administration***	***Training and Technical Assistance***	***Total Award Year to Date***	***Minimum Homes Required***
$1,309,130.97	**$145,511.87**	**$40,000**	***1,494,642.84**	**136**

Table 1.0

For WAPBIL, the following budget limits apply:

- BIL funds should only be used once Annual DOE WAP funds are expended and ODOC has determined no additional annual DOE WAP funds are available to be awarded and spent.

- Health and Safety may not be more than 17% of the DOE - approved WAPBIL ACPU of **$8,009**.

- Program Operations divided by the number of units may **ultimately** not exceed the State's ACPU. However, as explained in the Request for Application (RFA), ODOC does not expect the ACPU to be within the allowable limits for the first 12–18 months of WAPBIL. ODOC understands that each agency will need time to "ramp up." However, the minimum number of homes listed above will ultimately be required to be completed at some point, to justify the Program Operations spent. For this specific grant, ODOC will approve initial OKGrants applications that exceed the ACPU, provided there is a plan in the Subgrantee Workbook (as further explained in the RFA to be an upload to the application) and to be within allowable limits by the end of the contract period.

- To calculate the ACPU, take the Program Operations total divided by the Number of Units/Homes. DOE determines the State's ACPU for the entire WAP BIL performance period. The ACPU amount remains at $8,009 for the entire period BIL funds are being used.
- Although an agency may choose to budget less admin or program operations funds, ODOC is requiring all agencies to budget the full T/TA amounts at this time. T/TA funds may only be budgeted for T/TA expenses at this time and regions should have requested the amount of T/TA needed prior to this award letter.

Proceed to https://grants.ok.gov to create a contract modification. This will begin the process for the contract modification and then the execution of an ODOC contract which will have a start date of October 1, 2022 - December 31, 2026.

The following required OKGrants forms must be modified:

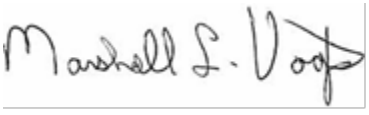
1. Detailed Line-Item Budget
2. Management Plan with updated total number of homes

ODOC will work with agencies to update their BIL workbook later.

ODOC reserves the right to decrease Subrecipient allocations due to low production, performance concerns, or other policy-related issues. Applying for this offer does not constitute your authority to expend funds or make any commitment of funds relative to the Subrecipient program until full execution of your contract has occurred. Subrecipients may claim expenditures back to October 1, 2022, once the fully executed contract is complete. When you are notified that your contract is ready for review and signature in OKGrants, we recommend that you carefully review it, take note of all deadlines, review any special conditions, and be sure to check the contract start date as funds will not be reimbursed for expenditures before the start date of the contract.

We look forward to working with you. If you have questions or concerns regarding the WAP BIL Program, please contact Greg Gaden at 405-623-9314 or gregory.gaden@okcommerce.gov.

Sincerely,



Marshall Vogts | Director of Community Development
Oklahoma Department of Commerce

CC: WAP/BIL Manager (Terry Wren)

OKLAHOMA Commerce

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August 5, 2024

Rebecca Porter, Executive Director
LIFT Community Action Agency
209 North 4th
Hugo, OK 74743

Dear Ms. Porter:

The Oklahoma Department of Commerce/ Community Development Services (ODOC/CDS) has received an additional 1% allocation of our FY'24 Community Services Block Grant (CSBG). The U.S. Department of Health and Human Services/ Office of Community Services (OCS) initially withholds these funds from our annual CSBG award. These funds are awarded to revitalize communities and create opportunities for economic prosperity among low-income individuals and families.

Your agency's current and cumulative allocation is:

1st Allocation	$31,632.00
2nd Allocation	$50,347.00
3rd Allocation	$37,275.00
4th Allocation	$115,169.00
1%	$2,286.00
	$236,709.00

Please proceed to OKGrants https://grants.ok.gov to request a modification to your 2024 CSBG contract and budget.

If you have questions, please contact Shellie Schlegel at Shellie.Schlegel@okcommerce.gov.

Sincerely,

Marshall L. Vogts

Marshall Vogts, Director
Community Development

OKLAHOMA Commerce

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August 15, 2024

Rebecca Porter, Executive Director
LIFT Community Action Agency
209 North 4th
Hugo, OK 74743

Dear Ms. Porter:

The Oklahoma Department of Commerce/Community Development (ODOC/CD) is pleased to inform you that SFY 2025 Community Action Agencies State Appropriated Funds for Head Start (SAF HS) are now available for distribution. Your allocation is $91,962.00.

Please proceed to OKGrants (https://grants.ok.gov) to apply for the SAF HS funds and complete the required forms by 09/15/2024. This will begin the process to prepare and execute an ODOC contract with a start date of **July 8, 2024**.

Forms to be completed in OKGrants are:
1) Application Information
2) Budget Detail (use SFY 2025 Funding Amount indicated above)
3) Budget Summary
4) Upload (upload the electronic version of other documents as required in the SAF HS Program RFA
5) Audit

Please understand that applying for this offer does not constitute your authority to expend funds or commit funds relative to the CAA HS Program until full execution of your contract has occurred. When you are notified that your contract is ready for review and signature in the OKGrants, we recommend that you carefully review it, note all deadlines, review any special conditions, and be sure to check the contract start date, as funds will not be reimbursed for expenditures before the start of the contract.

If you have questions or concerns regarding the SAF HS Program, please contact Shellie Schlegel at Shellie.Schlegel@okcommerce.gov.

Sincerely,

Marshall L. Vogts

Marshall Vogts, Director
Community Development

OKLAHOMA Commerce

900 N. Stiles Avenue
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405-815-6552 | Toll Free 800-879-6552
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August 27, 2024

Rebecca Porter, Executive Director
LIFT Community Action Agency
209 North 4th
Hugo, OK 74743

Dear Ms. Porter,

The Oklahoma Department of Commerce/Community Development (ODOC/CD) is pleased to inform you that SFY 2025 Community Action Agencies State Appropriated Funds (SAF CAA) are now available for distribution. Your allocation is $12,160.00.

Please proceed to OKGrants (https://grants.ok.gov) to apply for the SAF CAA funds and complete the required forms by 10/30/2024. This will begin the process of preparing and executing an ODOC contract with a start date of **July 8, 2024**.

Forms to be completed in OKGrants are:
1) Application Information
2) Budget Detail (use SFY 2025 Funding Amount indicated above)
3) Budget Summary
4) Upload (upload the electronic version of other documents as required in the SAF CAA Program RFA
5) Audit

Please understand that applying for this offer does not constitute your authority to expend funds or commit funds relative to the SAF CAA Program until full execution of your contract has occurred. When you are notified that your contract is ready for review and signature in the OKGrants, we recommend that you carefully review it, note all deadlines, review any special conditions, and be sure to check the contract start date, as funds will not be reimbursed for expenditures before the start of the contract.

If you have questions or concerns regarding the SAF CAA Program, please contact Shellie Schlegel at Shellie.Schlegel@okcommerce.gov.

Sincerely,

Marshall L. Vogts

Marshall Vogts, Director
Community Development

Program:	Signature Cause Grant Funding
Funder:	International Paper Foundation
Funding Request:	$2,381
Program:	Holiday Food Baskets

International Paper Foundation makes sustainable investments to protect and improve the lives of their employees, and they mobilize their people, products and resources to address critical needs in the communities where they live and work. Most of the company's donations and IP Foundation grants support projects and programs focused on their signature causes which include education, hunger, health and wellness, and disaster relief.

LIFT Community Action Agency, Inc. is requesting the Board of Director's approval to submit an application in the amount of $2,381 to the International Paper Foundation to support LIFT CAA's Annual Holiday Food Basket Initiative.

If awarded, these funds will be used to purchase food baskets for Thanksgiving and/or Christmas for families in need. The funds will be leveraged with LIFT CAA non-federal dollars.

Funding Opportunity: Choosing Childbirth Act Funding
Funding Entity: Oklahoma State Department of Health
Amount Requested: $3,377,586
Due Date: September 11, 2024

Choosing Childbirth (CCB) funded organizations will provide services, meaning those services that empower women/parents to choose childbirth by providing information, counseling, education and support services that assist pregnant women or women who believe they may be pregnant to choose childbirth and to make informed decisions regarding the choice of adoption or parenting with respect to their children, including additional evidence-based, evidence-informed, or promising practices, early intervention and family support services to maximize their potential thereafter, extending to support the child up to three years of age. The services must be outcome-based with positive results and evaluated with proven methods.

Services
The information, counseling and services provided under this program may include, but not limited to:
• Medical care attention for the pregnant woman for the duration of her pregnancy including, but not limited to, obstetric ultrasounds;
• Mental health and substance abuse services; including evidence-based and evidence-informed infant mental health and perinatal specialized services.
• Nutritional support services;
• Transportation assistance;
• Housing assistance;
• Adoption services;
• Education and employment assistance;
• Parenting education and support services; specific evidence-based and evidence-informed

LIFT CAA is requesting the Board's approval to submit an application to OSDH in the amount of $3,377,586 for the Choosing Childbirth funding opportunity. If awarded, these funds will be used to implement a tri-county CCB program. This funding will support pregnant women and those who may become pregnant through the provision of direct and indirect services. Direct services will include delivery of evidence-based curriculum, parenting education, case management, employment, transportation, housing, emergency, nutrition and education assistance. LIFT CAA will formalize Memorandums of Understanding with healthcare providers and other organizations to ensure for participants awareness and access to additional community supports. This program will result in the creation of eight new jobs and will serve 120 women each year. Dependent upon funding availability, the program will run for three years from October 1, 2024 through September 30, 2027.

Program:	Weyerhaeuser Giving Fund
Funder:	Weyerhaeuser
Funding Requested:	$30,000
Program:	Terry Hill Apartments

The Weyerhaeuser Giving Fund concentrates the majority of their funding in seven focus areas:

- Affordable Housing
- Education and Youth Development
- Environmental Stewardship
- Human Services
- Civic and Cultural Growth
- Workforce Development
- Diversity, Equity and Inclusion

LIFT Community Action Agency, Inc. is requesting the Board of Directors' approval to submit an application in the amount of $30,000 to the Weyerhaeuser Giving Fund to support renovations at the Terry Hill apartments.

If awarded, these funds will be used to purchase and install new cabinetry for apartments at Terry Hill. The funds will be leveraged with LIFT CAA non-federal dollars.

OKLAHOMA Commerce

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September 5, 2024

Rebecca Porter, Executive Director
LIFT Community Action Foundation
209 North 4th
Hugo, OK 74743

Dear Executive Director Porter:

The Oklahoma Department of Commerce/Community Development (ODOC/CD) is pleased to inform the LIFT Community Action Foundation (LIFT) that PY 2024 Department of Energy Weatherization Assistance Program (DOE WAP) funds are now available.

Each agency may allocate Program funds by county based on need and available resources. Although it is not required to serve every county annually, every county must be served over a period of time (for example, every 2 or 3 years). Any counties an agency decides not to serve this program year must be listed in the OKGrants Management Plan Justification box along with the planned year in which it is anticipated the counties will next be served. If all counties will be served, please note that all counties will be served instead.

PY'24 Year-to-Date Total Award[1]

		Required Homes [2] [3]
Admin Amount	$34,647.00	
Training and Technical Assistance	$5,000.00	
Readiness Funds	$50,000.00	
Program Allocation (for Program Operations, Audit, Insurance, and Health & Safety)	$203,428.00	
SERC Funds Total (if applicable)	N/A[4]	
SERC Admin (if applicable)	N/A	
SERC Program Ops (if applicable)	N/A	
Total Award	**$293,075.00**	**19**

*Table 1 **The agency must be within 10% of the required minimum homes.*

[1] This total is based on Year-to-Date amounts and is not in addition to PY 23's award funds.
[2] The agency must be within 10% of the required homes. Agencies will not face any punitive actions in the current program year for achieving between 90% and 99% of their production goals, but they will have a note placed on their future WAP applications. This note may be considered a factor, along with others, in how funds are distributed in the future.
[3] To calculate the agency's PY24 required homes, ODOC added the agency's DOE WAP PY 23 audit and insurance total expenditures reported along with the PY24 maximum budgeted H&S and subtracted them from the formula allocated PY24 program allocation and divided by the current allowed ACPU.
[4] The agency did not request SERC funds during the 2023 SERC interest process.

For PY 2024, the Health and Safety budget cannot be initially budgeted at greater than 18% of Program Operation expenditures nor the Average Cost Per Unit (ACPU) greater than $8,497. You may request ODOC permission to exceed either the H&S or ACPU threshold at any time before the end of the third quarter (December 30) during the contract period after initial contract execution. ODOC permission must be requested in writing via email through ODOC's Energy Projects Specialist.

Please proceed to OKGrants to apply for DOE WAP funds and complete the five (5) following required forms:

1. Applicant Information
2. Detailed Line-Item Budget
3. Management Plan
4. Audit
5. Uploads
    - 5.1. Agency Quality Control Inspector Building Performance Institute Certification(s)
    - 5.2. Energy Auditor Building Performance Institute Certification(s) (optional)
    - 5.3. Waiting Lists
    - 5.4. MOUs with third-party subcontractors (any) (including any other CAAs)
    - 5.5. Copy of statement or agreement that will be used with subcontractors to verify Field Guide/SWS Contractor Compliance
    - 5.6. Attached Training Plan

Application submission will begin the process for the preparation and execution of an ODOC contract for the following contract period: **April 1, 2024 – March 31, 2025.** Applications should be initiated and submitted as soon as possible, but no later than **September 30, 2024.**

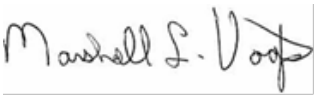
Please understand that applying for this offer does not constitute your authority to expend funds or make any commitment of funds relative to the DOE WAP program until full execution of your contract has occurred. When you are notified that your contract is ready, carefully review it, taking note of all deadlines and the contract start date, as funds will not be reimbursed for expenditures before the start of the contract.

Please note that annual WAP funds may not be braided with BIL funds in the same home. Annual WAP funds may continue to be braided with DHS LIHEAP funds. Since WAP dollars will end sooner than BIL funding, prioritize spending annual WAP funds before BIL homes. Ideally, your agency will have enough workforce capacity to complete both BIL and annual WAP/LIHEAP homes at the same time. Please continue to work with ODOC as needed to increase workforce capacity or for assistance with production planning.

A Sustainable Energy Resources for Consumers Grant (SERC) and Weatherization Readiness Funds (WRF) Oklahoma Weatherization Program Notice (OWPN) will be released soon to provide guidance when using these funds.

We look forward to working with you. If you have any questions about your award or about how to initiate an application in OKGrants, please contact Kayla Cornett by email at kayla.cornett@okcommerce.gov.

Sincerely,



Marshall Vogts, Director
Community Development

Oklahoma Office of the Attorney General
Victim Advocacy and Services Unit

Notice of FVPSA Award to Oklahoma

Federal Award Number/FAIN: 2401OKVPS
Federal Award Period: 10/1/2023 - 9/30/2025
Estimated Total Federal Award to Oklahoma: $1,853,998.00

Recipient Information

1. Recipient Name
LIFT Community Action Agency
209 North 4th Street
Hugo, OK 74743

2. Congressional District of Recipient
2

3. Employee Identification Number (EIN)
73-0772321

4. Unique Entity Identifier (UEI)
XL9DVU1YDGU2

5. Project Director
Doris Long
doris.long@liftca.org

6. Authorized Official
David Hawkins
dhawkins@wcisd.org

State Agency Information

7. Awarding Agency Contact Information
Stephanie Lowery
Grants Administrator
Stephanie.Lowery@oag.ok.gov
405-522-2617

Award Information for Subgrantee

8. Award Number
FC-25-12

9. Statutory Authority
Family Violence Prevention Services Act S303
Title 28 Oklahoma Statutes Section 153 F

10. Catalog of Federal Domestic Assistance (CFDA) Number (FVPSA award funds only)
93.671

11. CFDA Program Title
Family Violence Prevention and Services/Domestic Violence Shelter and Supportive Services

12. Award Action Type
New

13. Is the Award for Research and Development (R&D)?
No

14. Are Indirect Cost (IDC) included in this award?
No

Summary of Award - Financial Information

15. Budget Period Start Date	**07/01/2024**	**Project Period End Date**	**06/30/2025**
16. Project Period Start Date	**07/01/2024**	**Project Period End Date**	**06/30/2025**
17. Total Amount of Funds Awarded	**$237,992.68** **see notes below*		
18. Match Requirement on FVPSA	**$2,016.54**		

19. Grants Administrator – Signature

Stephanie Lowery

Notes

FVPSA Award Amount	**$10,082.68**
State Appropriations Amount	**$225,250.00**
Court Fees Amount	**$2,660.00**
Total	**$237,992.68**

RATES AND INCREMENTS DVSA PROGRAMS

Service Code	Description	Rate	Increment	Per Hour Equivalent
141	Screening and Assessment	$20.00	15 Min.	$80.00
144	Advocacy	$6.67	5 Min.	$80.04
146	Court Advocacy	$7.50	5 Min.	$90.00
150	Crisis Intervention Face-to-Face	$9.17	5 Min	$110.04
151	Crisis Intervention Telephone	$9.17	5 Min	$110.04
165	Individual Supportive Services	$15.15	15 Min.	$60.60
166	Group/Educational Services	$8.00	15 Min.	$32.00
169	Referral	$4.00	5 Min.	$48.00
200	Children's Activities	$4.50	15 Min.	$18.00
245	Travel	State Rate*		
341	Counseling Evaluation & Assessment (Licensed Behavioral Health Professional)	$40.00	30 Min	$80.00
365	Individual Counseling (Licensed Behavioral Health Professional)	$37.15	30 Min.	$74.30
366	Group Counseling (Licensed Behavioral Health Professional)	$18.57	30 Min	$37.14
369	Case Management	$17.50	15 Min.	$70.00
444	Safety Planning	$22.50	15 Min.	$90.00
446	Counseling Treatment Planning (Licensed Behavioral Health Professional)	$135.00	Per Plan	
447	Counseling Treatment Plan Review (Licensed Behavioral Health Professional)	$85.00	Per Review	
449	Intervention Team Meeting	$15.00	15 Min.	$60.00
541	Community Education	$20.00	15 Min	$80.00
543	Training/Delivered/Received	$20.00	15 Min	$80.00
545	Consultation	$20.00	15 Min	$80.00
547	Language Interpretation	$20.00	30 Min	$40.00
550	Outreach	$15.00	15 Min	$60.00
550B	Outreach Community Events	$10.00	15 Min	$40.00
RSA	Adult Shelter for Primary Victim	$125.00	Day	
RSC	Shelter for Dependents	$80.00	Day	
ES	Short Term Emergency Shelter	$125.00	Day	
TL	Transitional Living	$55.00	Day	
SH	Safe Home	$30.00	Day	

OKLAHOMA OFFICE OF ATTORNEY GENERAL

BILLING CODES/SERVICES DEFINITIONS
For
CONTRACTED DOMESTIC VIOLENCE/SEXUAL ASSAULT PROGRAMS

Documentation required on all services as set forth in applicable Administrative Rule

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141 INTAKE/SCREENING/ASSESSMENT: An interaction intended to discover what has happened, determine what the crisis is, assess dangerousness indicators, do safety planning, and/or establish the immediate needs of domestic violence/sexual assault & stalking victims and their dependents to determine appropriate services and referrals. Includes interaction with an individual determined to be appropriate for ongoing service in order to obtain basic demographic information, gather vital information on the adult and the children, orient the victim/survivor to the program, program rules, and if applicable the facilities. *Required: in person.*

144 ADVOCACY: Assistance provided on behalf of a domestic violence/sexual assault & stalking victim/survivor and their dependents within the legal, medical, educational, social services and other systems, to encourage self-reliance and provide information that will enable victims/survivors to do for themselves rather than doing things for them. Advocacy can be viewed as a combination of active listening and facilitating personal problem solving along with researching options of action, safety planning, community outreach, and education on the issue. *Required: in person, telephone, electronic or written correspondence.*

146 COURT ADVOCACY: Assistance provided to victims and their dependents in legal matters relevant to their situation. Information, support, assistance, safety planning, accompaniment and intervention with any aspect of the civil or criminal legal system on behalf of a victim of domestic violence, sexual assault or stalking. Court advocacy services must be provided by qualified, trained staff members or volunteers. *Required: in person, telephone, electronic or written correspondence.*

150 CRISIS INTERVENTION Face-to-Face

151 CRISIS INTERVENTION Phone
Services are based upon a problem-solving model to provide information and referrals that assist an individual domestic violence/sexual assault or stalking victim/survivor in crisis. Crisis intervention services include but are not limited to:

- Assessing dangerousness;
- Safety planning;
- Information about available legal remedies;
- Establishing rapport and communication;

- Identifying major problems;
- Exploring feelings and providing support;
- Exploring possible alternatives;
- Formulating an action plan; and

Follow-up measures. *Required: in person, electronic or telephone contact.*

165 INDIVIDUAL SUPPORTIVE SERVICES: The process of supporting and helping victims/survivors and their dependents as they cope with and overcome the effects of domestic violence, sexual assault and stalking. Actions may include activities such as:

- Developing, reviewing, and updating the service plan that is designed to solve specific problems in the current life situation;
- Supporting adult/child survivor's skills in making their desired life changes through activities such as introducing new skills, modifying previous ways of coping with their situation and linking to resources to address immediate needs and secondary issues.
- Exit planning may be part of the individual supportive services. *Required: in person, telephone.*

166 GROUP / EDUCATIONAL SERVICES: Interactive group sessions for adult/child victims/survivors of domestic violence, sexual assault or stalking that may be topic oriented and educational and facilitated by qualified, trained staff members or volunteers.

The focus is on safety, the dynamics of domestic violence, sexual assault, stalking, relationships, emotions, the impact of trauma and life skills. (House meetings are not considered group/educational services.) *Required: in person.*

169 REFERRAL: Information disseminated and/or coordinated access to agency and community services to meet victim/survivor's and their dependents identified needs; *Required: in person, electronic or telephone contacts. Intra-agency referrals are not to be reported.*

200 CHILDREN'S ACTIVITIES
Activities with children that are not counseling or advocacy in nature. This includes recreational activities, childcare, and other activities. *Required: in person.*

245 TRAVEL: Transporting individuals to access needed services. *Report the number of miles traveled.*

341 COUNSELING EVALUATION AND ASSESSMENT: (Licensed Behavioral Health Professional) Evaluate and assess the adult/child victim/survivor's current situation. Provide therapy services that are appropriate to the needs of the adult/child victim/survivor. Program offering professional therapy must:

- Assess dangerousness indicators;
- Provide crisis intervention when needed, and
- Assist with safety planning and information on legal options available.

365 INDIVIDUAL COUNSELING (Licensed Behavioral Health Professional):
A face-to-face therapeutic session with one-on-one interaction between a licensed behavioral health professional and an individual to promote emotional and/or behavioral change focused on victim safety and perpetrator accountability. Those individuals providing professional therapy to

adult/child victims/survivors of domestic violence/sexual assault and stalking must be prepared to provide education and information about:

- Safety;
- How perpetrators maintain control and dominance over their victims;
- The need to hold perpetrators accountable for their actions;
- The recognition that individuals victimized are not responsible for a perpetrator's violent behavior, and
- The role of society in perpetuating violence against women and the social change necessary to eliminate violence against women, including the elimination of discrimination based on race, color, gender, sexual orientation, age, disabilities, economic or educational status, religion and national origin.

366 GROUP COUNSELING (Licensed Behavioral Health Professional):

- A face-to-face therapeutic session with a group of adult/child victims/survivors to promote emotional or behavioral change. Those individuals providing professional therapy to victims/survivors of domestic violence must be prepared to provide education and information about:
- Safety;
- How perpetrators maintain control and dominance over their victims;
- The need to hold perpetrators accountable for their actions;
- The recognition that individuals victimized are not responsible for a perpetrator's violent behavior, and
- The role of society in perpetuating violence against women and the social change necessary to eliminate violence against women, including the elimination of discrimination based on race, color, gender, sexual orientation, age, disabilities, economic or educational status, religion and national origin.

369 CASE MANAGEMENT SERVICES: The process of supporting and helping victims/survivors and their dependents as they cope with and overcome the effects of domestic violence, sexual assault and stalking. Actions may include activities such as:

- Developing, reviewing, and updating the service plan that is designed to solve specific problems in the current life situation;
- Supporting adult/child survivor's skills in making their desired life changes through activities such as introducing new skills, modifying previous ways of coping with their situation and linking to resources to address immediate needs and secondary issues.
- Exit planning may be part of the individual supportive services.

The service provider must be a Certified Domestic and Sexual Violence Response Professional (CDSVRP) certified by the Oklahoma Coalition Against Domestic Violence and Sexual Assault. *Required: in person, telephone.*

444 SAFETY PLANNING: The process of working with the adult/child victim/survivor to develop tools in advance of potential abuse or violence for the immediate and long-term safety of the victim/survivor. The plans should be based on the individual's dangerousness indicators and should include the safety needs of dependents. *Required: in person, electronic or telephone.*

446 COUNSELING TREATMENT PLANNING (Licensed Behavioral Health Professional): The process of developing a written plan based on formal and/or informal assessments that identify the abuse issues necessitating treatment. This process includes establishing goals and objectives; planning appropriate interventions; and developing safety planning. This includes a review of the treatment plan with the individual 14 years of age or older and the modification of the plan as required. If the individual is under 18 years of age, the parent or guardian must also be involved. *Required: written documentation which must include the individual's participation and signature.*

447 COUNSELING TREATMENT PLAN REVIEW (Licensed Behavioral Health Professional): The evaluation or updating of the treatment plan based on victim/survivors documented progress. This includes a review of the treatment plan with the individual and the modification of the plan as required, if the individual is 14 years of age or older. If the individual is under 18 years of age, the parent or guardian must also be involved. *Required: written documentation must include the individual's participation and signature.*

449 INTERVENTION TEAM MEETING: A formal and structured process of interaction among staff from the same agency for the purpose of evaluating the individual's progress, when the individual is not present.

541 COMMUNITY EDUCATION: Presentation of domestic violence/sexual assault and stalking information to increase public knowledge of the destructive dynamics and societal costs and/or to increase awareness of available and needed resources and/or identify the role the community can play in eliminating domestic violence/sexual assault and stalking. *Required: group activity.*

543 TRAINING/DELIVERED/RECEIVED: A structured, formal process by which information is delivered to or received by staff for orientation purposes, enhancement of service procedures, on-going in-service, or accreditation for professional/contractual requirements. *Required: individual or group activity.*

545 CONSULTATION: A formal and structured process of interaction between staff members and unrelated individuals, groups, or agencies for the purpose of problem solving and/or enhancing services for the safety of victims/survivors within the program's service area. *Required: in person, telephone.*

547 LANGUAGE INTERPRETATION: Activities that involve a client who is deaf or hearing impaired or has limited English proficiency requiring an interpreter for a staff member to provide services. *Required: in person or by electronic means.*

550 OUTREACH: Activities directed toward potential domestic violence/sexual assault & stalking victims, with the purpose of establishing trust and rapport, explaining services available. *Required: in person; individual or group activity.*

550B OUTREACH COMMUNITY EVENTS:
The purpose of this code is to capture information about awareness events when a participant count is not feasible. This includes such things as health fairs, large community events, press conferences, etc.

SHELTER SERVICES

RSA ADULT SHELTER FOR PRIMARY VICTIM: A residential living arrangement in a secure setting with staff providing appropriate services for the needs of the primary abuse victim.

RSC SHELTER FOR DEPENDENTS: A residential living arrangement for dependents of the primary abuse victim with staff providing appropriate services for the needs of the dependent.

ES SHORT TERM EMERGENCY SHELTER: Temporary residential sites which are provided to immediately remove domestic violence, stalking or sexual assault victims and their dependents from danger. Sites might include hotel/motel or other sites as appropriate.

TL TRANSITIONAL LIVING: Temporary, independent living programs with support services provided by the staff of the sponsoring domestic violence, sexual assault or stalking program. These services are extensions of domestic violence shelter services to victims of domestic violence and/or sexual assault and their dependents. These services permit victims to develop their financial capacity and other means to live independently.

SH SAFE HOMES: Private dwellings available for the temporary housing of victims of domestic violence, stalking or sexual assault to ensure safety of victims and their families until other housing arrangements can be made.

LIFT Community Action, Inc. **BIL-2022-LIFT CAA-00006**

Contract Part I: 19022 BDOE 22

FAIN #: DE-EE010010 UEI #: XL9DVU1YDGU2 FEI #: 73-0772321

CONTRACT - MODIFICATION
PART I
SUMMARY AND SIGNATURES

Contracting Agency:	Oklahoma Department of Commerce State of Oklahoma (ODOC)
Contractor:	LIFT Community Action Agency, Inc.
Contract Title:	ODOC Weatherization Assistance Program - DOE
Contract Number:	19022 BDOE 22
Federal Amount:	$1,494,642.84
Match Amount:	
Contract Amount:	$1,494,642.84
Research and Development:	Not R&D Related
Indirect Cost Rate:	35.68
Grant Award Amount - This Action:	$1,494,642.84
Total Committed:	$1,494,642.84
Total Obligated:	$1,494,642.84
Source:	Department of Energy (DOE) Weatherization Assistance Program. Catalog of Federal Domestic Assistance (CFDA) Number 81.042
Project Funding Period:	October 1, 2022 through December 31, 2026
Federal Award Period:	7/1/2022 through 6/30/2027

Summary of Project

Budget Summary

CDBG Funds
Construction -
Engineering/Architect -
Inspection -
Other -
Public Facilities Admin -
Direct Grantee Admin -
Planning -
TOTAL CDBG -
TOTAL LEVERAGE -
TOTAL FUNDS -

LIFT Community Action, Inc. **BIL-2022-LIFT CAA-00006**

Contract Part I: 19022 BDOE 22

Submit Requisitions to:	Issue Payment To:
Community Development	LIFT Community Action Agency, Inc.
Oklahoma Department of Commerce	209 N 4th Street
900 North Stiles	Hugo, OK 74743-3809
Oklahoma City, OK 73104-3234	
AGREEMENT COMPONENTS:	Part I - Summary and Signatures
	Part II - Terms and Conditions
	Certification Regarding Lobbying

SPECIAL CONDITIONS:

SIGNATURES – EXECUTION OF CONTRACT

The rights and obligations of the parties to this contract are subject to and governed by Part II – Terms and Conditions. To the extent of any inconsistency between the general and the specific, the specific governs.

✔ I certify that I am authorized to sign this document, and any attachments or addendums thereto, and I have read and agree to all parts of the contract.

Executed by:	Executed by:
LIFT Community Action Agency, Inc.	Oklahoma Department of Commerce
Sheree Ensley	
	Marshall Vogts
Signature of Authorized Official	Signature of Authorized ODOC Official
7/8/2024	7/11/2024
Date	Date

LIFT Community Action, Inc. **DHS/LIHEAP-2024-LIFT CAA-00017**

Contract Part I: 19459 DHS 24

FAIN #:2401OKLIEA	UEI #: XL9DVU1YD GU2	FEI #:	730772321

CONTRACT - PART I SUMMARY AND SIGNATURES

Contracting Agency:	Oklahoma Department of CommerceState of Oklahoma (ODOC)
Contractor:	LIFT Community Action Inc.
Contract Title:	Department of Human Services/Low Income Home Energy Assistance ProgramODOC DHS/LIHEAP Application 2023
Contract Number:	19459 DHS 24
Federal Amount:	$86,168.11
Match Amount:	
Contract Amount:	$86,168.11
Research and Development:	Not R&D Related
ODOC Indirect Cost Rate:	28
Grantee Indirect Cost Rate:	
Grant Award Amount - This Action:	$86,168.11
Total Committed:	$86,168.11
Total Obligated:	$86,168.11
Source:	Department of Human Services (DHS) Low Income Home Energy Assistance Program (LIHEAP) §2601, et seq., Public Law 97-35. Catalog of Federal Domestic Assistance (CFDA) Number 93.568
Project Funding Period:	April 1, 2024 through March 31, 2025
Federal Award Period:	October 1, 2023 through March 31, 2025
Summary of Project	
	Assistance for low income households, particularly those with the lowest incomes that pay a high proportion of household income for home energy, primarily in meeting their immediate home energy needs.
Budget Summary	
Total On-Site	$0
Total Labor: Payroll	$0
Total Subcontracted	$0
Total Transportation	$0
Tools and Equipment	$0
Storage	$0
Total Office Expenses	$0
Materials	$0
Insurance	$0

LIFT Community Action, Inc. **DHS/LIHEAP-2024-LIFT CAA-00017**

Contract Part I: 19459 DHS 24

Health and Safety	$7,386.48
Program Outreach	$0
Total Administration	$6,418.00
Audit	$0
Training/Technical Assistance	$8,333.34
Total Budget	$86,168.11

Submit Requisitions to:
Community Development
Oklahoma Department of Commerce
900 North Stiles
Oklahoma City, OK 73104-3234
Phone Number : 405-815-6552

Issue Payment To:
LIFT Community Action Inc.
209 N 4th St.
Hugo, OK 74743-3809

AGREEMENT COMPONENTS: Part I - Summary and Signatures Part II - Terms and Conditions

SPECIAL CONDITIONS:

SIGNATURES – EXECUTION OF CONTRACT
The rights and obligations of the parties to this contract are subject to and governed by Part II – Terms and Conditions. To the extent of any inconsistency between the general and the specific, the specific governs.
✔ I certify that I am authorized to sign this document, and any attachments or addendums thereto, and I have read and agree to all parts of the contract.

Executed by:LIFT Community Action Inc.
Rebecca Reynolds Porter
Signature of Authorized Official
8/13/2024
Date

Executed by:Oklahoma Department of Commerce
Marshall Vogts
Signature of Authorized ODOC Official
8/14/2024
Date

LIFT Community Action, Inc. **CAA-2025-LIFT CAA-00341**

Contract Part I: 19480 SAF/CAA 25

FEI #: 730772321

CONTRACT
PART I
SUMMARY AND SIGNATURES

Contracting Agency:	Oklahoma Department of Commerce State of Oklahoma (ODOC)
Contractor:	LIFT Community Action Agency, Inc.
Contract Title:	
Contract Number:	19480 SAF/CAA 25
Contract Amount:	$12,160.00
Source:	House Bill 2928, Second Session, 59th Oklahoma Legislature (2024)
Funding Period:	July 8, 2024 through June 30, 2025

Submit Requisitions to:
Community Development
Oklahoma Department of Commerce
900 North Stiles
Oklahoma City, OK 73104-3234

Issue Payment To:
LIFT Community Action Agency, Inc.
209 N 4th Street
Hugo, Oklahoma 74743

AGREEMENT COMPONENTS:

Part I - Summary and Signatures
Part II - Terms and Conditions

SPECIAL CONDITIONS:

SIGNATURES – EXECUTION OF CONTRACT

The rights and obligations of the parties to this contract are subject to and governed by Part II – Terms and Conditions. To the extent of any inconsistency between the general and the specific, the specific governs.

I certify that I am authorized to sign this document, and any attachments or addendums thereto, and I have read and agree to all parts of the contract.

Executed by:
LIFT Community Action Agency, Inc.
Sheree Ensley
Signature of Authorized Official
8/30/2024
Date

Executed by:
OKLAHOMA DEPARTMENT OF COMMERCE

Signature of Authorized ODOC Official

Date

STATE OF OKLAHOMA

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Document Information: 2024-VOCA-LIFT CAA-130

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AWARD NOTICE

AWARD NOTICE
District Attorneys Council
421 N.W. 13th, Suite 290
Oklahoma City OK 73103

Organization:	LIFT Community Action Agency, Inc.	**SUBGRANT NO:**	2024-VOCA-LIFT CAA-130
PHONE:	(580) 326-3351	**Project Name:**	LIFT CASA
FAX:	(580) 326-2305	**START DATE:**	10/1/2023
		END DATE:	9/30/2024
Federal ID Number:	73-0772321	**DAC CONTACT:**	(405) 264-5008 or VOCAhelp@dac.state.ok.us
UEI Number:	XL9DVU1YDGU2		
CFDA:	16.575		
		Program Director:	
Grant Amount:	$32,185	Doris Long	
Match Amount:	$0		

Special Conditions:

All:

Subgrantee will ensure accurate reporting within the Program Measurements Tool (PMT). Only report services performed by VOCA funded staff. If the VOCA funded staff member is split funded only report services performed during VOCA time. Due to budget cuts, prior to accepting award subgrantee must do a Grant Adjustment Notice (GAN) to ensure goals and objectives only reflect VOCA funded services and activities. Goals and Objectives must be modified before the first drawdown. Subgrantee must ensure objectives are measurable and verifiable.

All VOCA funded subgrantees are required to allocate their grant funds for salaries exclusively for direct victim service provider positions. No grant funds may be used to support administrative or directorial positions that do not provide direct victims services. Direct services refer to immediate assistance and support provided to victims such as crisis intervention, counseling and mental health services, legal services, safety planning, emergency shelter, advocacy, information and referral services.

Due to budget cuts, prior to accepting award, subgrantee must do a Grant Adjustment Notice (GAN) to ensure goals and objectives only reflect VOCA-funded services and activities. Goals and Objectives must be modified before the first drawdown. Subgrantee must ensure objectives are measurable and verifiable. All subgrantees are required to allocate their grant funds for salaries exclusively for direct victim service provider positions. No grant funds may be used to support administrative or directorial positions that do not provide direct victims services. Direct services refer to immediate assistance and support provided to victims such as crisis intervention, counseling and mental health services, legal services, safety planning, emergency shelter, advocacy, and information and referral services. Subgrantee will ensure accurate reporting within the Program Measurements Tool (PMT). Only report services performed by VOCA-funded staff. If the VOCA-funded staff member is split funded only report services performed during VOCA time.

Non-Profit:

Due to budget cuts, prior to accepting award, subgrantee must do a Grant Adjustment Notice (GAN) to ensure goals and objectives only reflect VOCA-funded services and activities. Goals and Objectives must be modified before the first drawdown. Subgrantee must ensure objectives are measurable and verifiable. All subgrantees are required to allocate their grant funds for salaries exclusively for direct victim service provider positions. No grant funds may be used to support administrative or directorial positions that do not provide direct victims services. Direct services refer to immediate assistance and support provided to victims such as crisis intervention, counseling and mental health services, legal services, safety planning, emergency shelter, advocacy, and information and referral services. Subgrantee will ensure accurate reporting within the Program Measurements Tool (PMT). Only report services performed by VOCA-funded staff. If the VOCA-funded staff member is split funded only report services performed during VOCA time.
Personnel will aid victims in applying for Victims Compensation. Advocates employed less than 12 months with no formal victims services training or education will attend trauma-informed domestic violence training (VAT) online or equivalent within 6 months of hiring and upload verification in OKGrants. Non-attorney victim services advocates will comply with any continuing education requirements. If no requirement exists, advocates will attend training every 3 years with documentation uploaded in OKGrants.

This grant is subject to the terms and conditions set forth in the application which was submitted to the District Attorneys Council. The award is authorized by the District Attorneys Council (DAC) . The federal award number(s) used for this award can be found on the document "Federal Funds Used for Subaward" that has been uploaded to the Correspondence section of the grant. The subgrantees shall administer the project for which this subgrant is awarded in accordance with the applicable rules, regulations, and conditions as set forth in the federal guidelines; the Administrative Guide published by DAC, and the effective edition of the Department of Justice (DOJ) Office of Justice Programs, Financial and Administrative Guide for Grants. The subgrantee shall also administer the project in accordance with the Certified Assurances and Special Conditions of the award.

The subgrantee shall maintain separate accounts and accounting records for the subgrant funds, and shall maintain and furnish to DAC and DOJ upon request, detailed accounting and supportive records. The subgrantee shall file such reports relating to the subgrant as are required by DAC and DOJ.

Name of Authorizing Official **Date**

David Hawkins *

☐ I am the signing authority, or have been delegated or designated formally as the signing authority by the appropriate authority or official, to provide the information requested throughout this contract package on behalf of this jurisdiction. Information regarding the signing authority, or the delegation of such authority, has been placed in a file and is available on-site for immediate review.*

Navigation Links

Status	Page Name	Note	Created By	Last Modified By
	Award Packet Instructions		Long, Doris 9/5/2024 9:46:46 AM	
	Award Packet Checklist			
	VOCA Award Budget Summary		Long, Doris 9/4/2024 2:53:33 PM	
	Award Notice			
	Requirement to Report Actual or Imminent Breach of Personally Identifiable Information (PII)			
	Determination of Suitability to Interact with Participating Minors in Grant Funded Project - VOCA			
	Certification Of Equal Employment Opportunity Plan			
	Certification of Privacy			
	Certification of Confidentiality			
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	Statement of Audit Arrangements			
	Disclosure Of Lobbying Activities Form			
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Document Information: 2024-VOCA-LIFT CAA-130

Details

VOCA AWARD BUDGET SUMMARY

Awarded Amount: **$32,185**
Required Match: **$0**

- Your Awarded Amount and Required Match are listed at the top of the screen and in the chart below.
- The Amount Requested/Match Requested columns are the amounts requested in your grant application.
- If the Approved Budget differs from the requested amounts and you need to make adjustments to the budget, you can request a GAN after the award is accepted.
- Once you have reviewed the Approved Budget amounts, you may SAVE the form and go to the Award Notice.

1

	Amount Requested	Match Requested	Approved Budget	Approved Match	Description of Approved Expenses
Personnel	$23,230	$0	$20,034	$0	0.4 FTE Advocate Coordinator
Benefits	$7,924	$0	$6,883	$0	
Contractors & Consultants	$0	$0	$0	$0	
Travel	$4,711	$0	$0	$0	
Equipment	$0	$0	$0	$0	
Facilities, Equipment Rental and Leases	$0	$0	$0	$0	
Supplies & Operating	$2,640	$0	$0	$0	
Other	$424	$0	$0	$0	
Indirect Costs	$5,268		$5,268		
Volunteer Time		$0		$0	
TOTALS	**$44,197**	**$0**	**$32,185**	**$0**	

Navigation Links

Status	Page Name	Note	Created By	Last Modified By
	Award Packet Instructions		Long, Doris 9/5/2024 9:46:46 AM	
	Award Packet Checklist			
	VOCA Award Budget Summary		Long, Doris 9/4/2024 2:53:33 PM	
	Award Notice			
	Requirement to Report Actual or Imminent Breach of Personally Identifiable Information (PII)			
	Determination of Suitability to Interact with Participating Minors in Grant Funded Project - VOCA			
	Certification Of Equal Employment Opportunity Plan			

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AWARD NOTICE

AWARD NOTICE
District Attorneys Council
421 N.W. 13th, Suite 290
Oklahoma City OK 73103

Organization:	LIFT Community Action Agency, Inc.	**SUBGRANT NO:**	2024-VOCA-LIFT CAA-131
PHONE:	(580) 326-3351	**Project Name:**	Victim Advocacy Services
FAX:	(580) 326-2305	**START DATE:**	10/1/2023
		END DATE:	9/30/2024
Federal ID Number:	73-0772321	**DAC CONTACT:**	(405) 264-5008 or VOCAhelp@dac.state.ok.us
UEI Number:	XL9DVU1YDGU2		
CFDA:	16.575		
		Program Director:	
Grant Amount:	$48,204	Doris Long	
Match Amount:	$0		

Special Conditions:

All:

Subgrantee will ensure accurate reporting within the Program Measurements Tool (PMT). Only report services performed by VOCA funded staff. If the VOCA funded staff member is split funded only report services performed during VOCA time. Due to budget cuts, prior to accepting award subgrantee must do a Grant Adjustment Notice (GAN) to ensure goals and objectives only reflect VOCA funded services and activities. Goals and Objectives must be modified before the first drawdown. Subgrantee must ensure objectives are measurable and verifiable.

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Non-Profit:

Due to budget cuts, prior to accepting award, subgrantee must do a Grant Adjustment Notice (GAN) to ensure goals and objectives only reflect VOCA-funded services and activities. Goals and Objectives must be modified before the first drawdown. Subgrantee must ensure objectives are measurable and verifiable. All subgrantees are required to allocate their grant funds for salaries exclusively for direct victim service provider positions. No grant funds may be used to support administrative or directorial positions that do not provide direct victims services. Direct services refer to immediate assistance and support provided to victims such as crisis intervention, counseling and mental health services, legal services, safety planning, emergency shelter, advocacy, and information and referral services. Subgrantee will ensure accurate reporting within the Program Measurements Tool (PMT). Only report services performed by VOCA-funded staff. If the VOCA-funded staff member is split funded only report services performed during VOCA time.
Personnel will aid victims in applying for Victims Compensation. Advocates employed less than 12 months with no formal victims services training or education will attend trauma-informed domestic violence training (VAT) online or equivalent within 6 months of hiring and upload verification in OKGrants. Non-attorney victim services advocates will comply with any

This grant is subject to the terms and conditions set forth in the application which was submitted to the District Attorneys Council. The award is authorized by the District Attorneys Council (DAC) . The federal award number(s) used for this award can be found on the document "Federal Funds Used for Subaward" that has been uploaded to the Correspondence section of the grant. The subgrantees shall administer the project for which this subgrant is awarded in accordance with the applicable rules, regulations, and conditions as set forth in the federal guidelines; the Administrative Guide published by DAC, and the effective edition of the Department of Justice (DOJ) Office of Justice Programs, Financial and Administrative Guide for Grants. The subgrantee shall also administer the project in accordance with the Certified Assurances and Special Conditions of the award.

The subgrantee shall maintain separate accounts and accounting records for the subgrant funds, and shall maintain and furnish to DAC and DOJ upon request, detailed accounting and supportive records. The subgrantee shall file such reports relating to the subgrant as are required by DAC and DOJ.

Name of Authorizing Official	Date
David Hawkins *	

☐ I am the signing authority, or have been delegated or designated formally as the signing authority by the appropriate authority or official, to provide the information requested throughout this contract package on behalf of this jurisdiction. Information regarding the signing authority, or the delegation of such authority, has been placed in a file and is available on-site for immediate review.*

Navigation Links

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	Award Packet Instructions			
	Award Packet Checklist			
	VOCA Award Budget Summary		Long, Doris 9/4/2024 2:55:40 PM	
	Award Notice			
	Requirement to Report Actual or Imminent Breach of Personally Identifiable Information (PII)			
	Determination of Suitability to Interact with Participating Minors in Grant Funded Project - VOCA			
	Certification Of Equal Employment Opportunity Plan			
	Certification of Privacy			
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	Disclosure Of Lobbying Activities Form			
	Certification of Project Income			
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Document Information: 2024-VOCA-LIFT CAA-131

Details

VOCA AWARD BUDGET SUMMARY

Awarded Amount: **$48,204**
Required Match: **$0**

- Your Awarded Amount and Required Match are listed at the top of the screen and in the chart below.
- The Amount Requested/Match Requested columns are the amounts requested in your grant application.
- If the Approved Budget differs from the requested amounts and you need to make adjustments to the budget, you can request a GAN after the award is accepted.
- Once you have reviewed the Approved Budget amounts, you may SAVE the form and go to the Award Notice.

1

	Amount Requested	Match Requested	Approved Budget	Approved Match	Description of Approved Expenses
Personnel	$46,671	$0	$30,051	$0	0.6 FTE Victim Service Coordinator
Benefits	$15,919	$0	$10,250	$0	
Contractors & Consultants	$0	$0	$0	$0	
Travel	$0	$0	$0	$0	
Equipment	$0	$0	$0	$0	
Facilities, Equipment Rental and Leases	$0	$0	$0	$0	
Supplies & Operating	$0	$0	$0	$0	
Other	$0	$0	$0	$0	
Indirect Costs	$7,903		$7,903		
Volunteer Time		$0		$0	
TOTALS	**$70,493**	**$0**	**$48,204**	**$0**	

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	Determination of Suitability to Interact with Participating Minors in Grant Funded Project - VOCA			
	Certification Of Equal Employment Opportunity Plan			

Lift Community Action Agency

Policy 01-00-00
Organizational and Facility

POLICY: It is the policy of Lift Community Action Agency , to provide for organizational planning to include:

I. A written mission, vision, and values statement for the organization as well as strategic, operational, program-related, and other plans and policies in order to achieve them.

II. In keeping with the agency's mission, vision, and values, giving priority services to identified target populations as defined by DMHSAS Standards and Criteria for Outpatient Alcohol and Drug Treatment Programs.

III. In keeping with the agency's mission, vision, and values, LIFT CAA shall state in writing the annual center goals and objectives, including the goal of continued progress for the agency in providing recovery oriented, culturally competent, trauma informed and co-occurring capable services.

IV. A written plan for professional services.

V. An annual program evaluation.

PROCEDURE:

I. The agency's mission statement shall be defined in accordance with the Department of Mental Health and Substance Abuse Services (DMHSAS) overall mission, vision, and values, approved by the Director and reviewed annually. The overall mission of LIFT CAA is to provide quality mental health and alcohol / drug services to the target populations for its surrounding area and state, and is defined as follows:

"**To improve the lives of low-income individuals and families through service and collaboration leading to self-sufficiency. To Free Generations of People from Poverty and to foster and enhance the quality of life and emotional well being of persons who struggle with substance abuse and/or referral for mental health. Lift Community Action Agency will meet this mission by providing a safe space through open communication, spiritual growth, trust and perseverance.**

II. LIFT CAA shall make the organizational description, mission statement, annual goals and the strategic plan, as relevant, available to persons served, personnel and other stakeholders.

III. Lift CAA has a person-centered philosophy that:

A. Is demonstrated by:
   1. Leadership
   2. Personnel
B. Guides the service delivery.
C. Is communicated to stakeholders in an understandable manner.

IV. Lift CAA Leadership is accessible to the persons served and personnel.

V. The identified leadership guides the following:

A. Establishment of the:
   1. Mission of the organization.
   2. Direction of the organization.
B. Promotion of value in the programs and services offered.
C. Achievement of outcomes in the programs and services offered.
   1. Stakeholder input is used in strategic planning and other service related and business activities.
   2. Outcomes are used to guide performance and are identified through satisfaction of persons served and other stakeholders and through Performance Improvement efforts and needed change is addressed in strategic planning.

D. Balancing the expectations of the persons served and other stakeholders.
E. Financial solvency.

F. Risk management
G. Ongoing performance improvement.
H. Development of corporate responsibilities.
1. Lift CAA is a member of the local Chamber of Commerce.
2. Leadership and other staff members volunteer at community functions participating in the Domestic Violence Vigil, County Free Fair and holiday parades.)
3. Leadership attends monthly Choctaw County Coalition meeting

I. Implementation of corporate responsibilities.
1. Information regarding services offered by LIFT CAA are relayed to the public through:
a. Brochures
b. Making accessible the facility's annual report upon request.
c. Handouts, given to the public by the residents during holiday parades and County Free Fair.
d. Leadership speaking at local meetings.
e. Leadership/staff participation in community events/meetings.
J. Compliance with:
1. All legal requirements.
2. All regulatory requirements.
K. Annual review of the organization's policies.
L. Health and safety.
M. Succession planning.
1. In the interest of maintaining facility business and uninterrupted service delivery in the event key leadership personnel is unavailable to perform their duties, LIFT CAA:
a. Holds leadership meetings to keep those in leadership roles current on changes/issues.
b. P.I. meetings to keep those in leadership roles current on LIFT CAA issues.
c. Supports and encourages employees efforts in securing higher education or training.
d. Provides in-house supervision services.

VI. In keeping with the agency's mission, vision, and values, priority shall be given to the following target population as defined by DMHSAS Standards and Criteria for Outpatient Alcohol and Drug Treatment Programs:

A. Pregnant injecting drug users;
B. Pregnant substance abusers;
C. Injecting Drug Users
D. Women With Dependent Children
E. Persons with HIV/AIDS or Hepatitis-C

VII. There shall be documented evidence that goals and objectives, strategic, operational, program-related, including continued progress for the agency in providing recovery oriented, culturally competent, trauma informed and co-occurring mental health conditions, as well as other plans and policies, have been developed, planned, and implemented and approved by the agency's Director.

A. Criteria for setting goals, objectives, and priorities are based on the agency's mission, target population, acuity, and aspects of care / services.

B. There shall be documentation that these goals and objectives, strategic, operational, program-related, and other plans and policies, are communicated to staff via minutes of meetings, memorandums, and so forth, and are made accessible to all staff.

C. Agency goals and objectives shall be made available to members of the general public upon request, as shall other information concerning the facility, including, but not limited to: quality and effectiveness of services, persons served, customer satisfaction and survey results.

D In keeping with the agency's overall mission, annual program planning shall occur in conjunction with the annual Program Evaluation. Program planning shall be developed by the Leadership Committee, with the approval of the director, outlining the agency's annual goals and objectives, as well as individual program goals and objectives, target dates, and designated staff responsible for carrying out these plans. Program planning will include identification of performance improvement activities selected for the fiscal year.

F. For program planning purposes, target populations are determined and defined each fiscal year via the performance agreement with the DMHSAS, and review of local needs.

G. Short-term strategic planning as well as annual and long-range strategic planning shall take into consideration needs assessments. Needs assessments may be conducted internally and / or externally. Long-term planning will incorporate the DMHSAS long-range plan for allocation of resources.

1. The ongoing strategic planning of the organization considers:
    a. Expectations of persons served.
    b. Expectations of other stakeholders.
    c. The competitive environment.
    d. Financial opportunities.
        (1) Private Pay consumers
        (2) Insured Consumers
    e. Financial threats.
        (1) Reduction of contracted slots due to state/federal funding changing.
        (2) Health and safety risks
        (3) Intangible threats, i.e. reputation
    f. The organization's capabilities.
        (1) Succession planning for key positions in case of unexpected vacancies or absences.
        (2) Ethical values
    g. Service areas needs.
    h. Demographics of the service area.
    i. The organization's relationships with external stakeholders.
        (1) Drug Courts
        (2) Carl Albert Mental Health
        (3) Other
    j. The regulatory environment
    k. The legislative environment
    l. The use of technology to support:
        (1) Efficient operations

Lift Community Action Agency

Policy 1-00-01
Community information, consultation, outreach, and street outreach

Policy:

LIFT CAA will provide the community with information, consultation and outreach services to aid in reaching and attracting women and men and family members in need of services. Community outreach may include, but is not limited to, presentations and/or outreach efforts to community groups, organizations, and individuals. Presentations and/or outreach efforts are made by staff members or trained volunteers (excluding individuals in treatment).

PROCEDURE:

1. The Executive Director, Cooperative Compliance Officer and staff members, as a regular part of consumer-based planning and services provision, will actively seek opportunities to provide the community with information, consultation and outreach services to aid in reaching and attracting the population we serve.

2. These services shall be designed to:
    a. Reach and attract Lift CAA's target population outpatient – men and women;
    b. Provide information on substance abuse and related issues to the public; and
    c. Provide information to the public regarding Lift CAA services.

3. These services include, but are not limited to, presentations or outreach efforts to community groups, organizations and individuals. These presentations or outreach efforts are made by staff members or trained volunteers (excluding individuals in treatment). They may include, but are not limited to, organizations such as Choctaw County Coalition for Change, Drug Take Back Event, Overdose Prevention Event.

4. LIFT CAA provides outreach efforts in the local community for the purpose of alerting persons and their families to the services Lift CAA provides. This is done by participating in community activities such as parades during the annual McCurtain County Free Fair by handing out rolled Serenity Prayer and Contact Information to the crowd and attending monthly coalition meetings.

5. Any calls to the facility in reference to presentations will be forwarded to the Executive Director, Clinical Director or the Administrative Assistant.

6. When presentations are given and/or services rendered, written documentation will be completed by the presenter. Documentation shall include:
    a. Name of person(s) or organization(s) receiving the services
    b. Name of person(s) providing the service
    c. Number of persons attending
    d. Location at which the services were provided
    e. Date services were provided
    f. Description of the services provided

7. The documentation will be given to the Executive Director and will be filed in the Community Consultation Manual.

Lift Community Action Agency

Policy 01-00-02

LIFT COMMUNITY ACTION AGENCY, INC.
AMENDED AND RESTATED BY-LAWS

ARTICLE I
Name

The name of this Corporation is LIFT COMMUNITY ACTION AGENCY, INC.

ARTICLE II
Place of Business

The principal office for the Corporation shall be located in Hugo, Oklahoma at 209 N. 4th Street.

ARTICLE III
Purposes

The principal purposes for which this Corporation is formed within Oklahoma are:

To assist, for charitable purposes, in developing, executing and coordinating plans and programs authorized under the Economic Opportunity Act of 1964 and subsequent amendments which may be made to that Act, and other legislation affecting the Corporation including, but not limited to, Community Services Block Grant, which activities extend to include other federal, state and local laws, programs and activities and shall include (1) efforts to alleviate and eradicate poverty; (2) planning and the initiation of community development; (3) various efforts in housing-related activities, including assistance and development of affordable housing, housing and loan packaging and counseling, housing rehabilitation and other areas; (4) assisting in the planning, initiation, and operation of economic development that lessens the burdens of state and local governments; (5) aiding in the planning, initiation and operation of other educational activities, including early childhood development, and social and civic purposes for the betterment of communities; and (6) aiding, planning, initiating, and operation of health related activities.

ARTICLE IV
Membership

Section 1. Inasmuch as this Corporation is formed solely for the general welfare of the people of Choctaw, McCurtain, and Pushmataha Counties, the State of Oklahoma and the United States of America, and as such is organized on a non-stock, non-profit basis with no stockholders as such, the entire management and operation of the Corporation shall be vested in a Board of Directors which shall be its members. The Board of Directors of the Corporation shall consist of twenty-seven (27) members, the composition of which must be one-third representatives of the public sector, one-third representatives of the low-income community, and one-third representatives of the private sector.

a. Public Sector: One-third of the members of the Board shall be elected public officials currently holding office or their representatives. If, however, the number of elected officials reasonably available and willing to serve is less than one-third of the membership, appointed public officials may be counted in meeting the one-third requirement.

1. The term "elected public official" refers to a duly elected representative of a municipality, county, tribal government or State political subdivision.
2. The term "appointed public official" refers to employees of public agencies and members of boards and commissions established under State and/or local law who have responsibility and authority to determine and implement the policies of those agencies, boards or commissions.
3. An elected or appointed public official may designate another person to serve on the Board as their representative as long as the representative is entitled to act on behalf of the public official represented with regard to the business of the Board.

b. Low-Income Sector: One-third of the members of the Board shall be democratically selected representatives of low-income persons residing in the service area.
c. Private Sector: One-third of the members of the Board shall be officials or members of business, industry, labor, religious, welfare, education or other major groups and interests in the service area.

No current or former employee of LIFT Community Action Agency, Inc. (formerly Little Dixie Community Action Agency, Inc.) may serve on the Board of Directors.

Section 2. Representation of the Public Sector
One-third of the Board shall be represented by the public sector. Such members shall be designated by the governing officials of the political jurisdiction, unless they are chosen to represent independent public agencies; in that event, those agencies should select their own representatives.

The term "public officials" includes those employees of agencies and members of Boards established under state or local law who have the responsibility and authority to decide and carry out the policies of the agencies or Boards. However, those public officials who are designated for representation on the governing Board, may, if they wish, choose representatives to serve on the Board in their place or in their absence. The representatives need not be public or elected officials themselves so long as they are entitled to speak and act for the officials who they represent in connection with the Board's business.

If the elected officials of the political subdivisions or group of subdivisions are greater in number than one-third of the seats on the Board, the Board shall decide how the available seats shall be allotted among them. In this case, the Board shall devise a plan for equitable rotation.

The Board of Directors (excluding the person being approved) shall review and approve each Public Sector Entity representative as soon as possible after selection.

The Board shall at all times strive to maintain equal representation of the three counties on the public sector of the Board. If for any reason there are not enough qualified public sector representatives able or willing to serve in any county, the Board may allow another county, or counties, to elect more than three representatives to the Board.

Section 3. Representation of the Low-Income Sector
One-third of the Board shall be made up of representatives of low-income individuals and families who reside in LIFT Community Action Agency's service area. Three groups in each county served by the Corporation shall be designated Low-Income Entities for purposes of

representation on the Board. The designated Low-Income Entities are responsible for nominating individuals for election to the low-income sector of the Board.

Low-income sector representatives shall be elected in accordance with LIFT Community Action Agency's Procedures for Democratic Selection of Low-Income Representatives, which is included as an Addendum to these By-Laws.

The Board shall at all times strive to maintain equal representation of the three counties on the low-income sector of the Board. If for any reason there are not enough qualified low-income representatives able or willing to serve in any county, the Board may allow another county, or counties, to elect more than three representatives to the Board.

In the event that a community organization or representative group of the low-income, including, but not limited to, the minority low-income, the elderly low-income or the rural low-income, feel themselves inadequately represented on the Board, they may petition for adequate representation on the Board by following the procedure hereinafter set out.

A low-income individual, community organization, or religious organization, or representative of low-income individuals that considers its organization, or low-income individuals, to be inadequately represented on the Board may submit a petition for representation to the Chairman who shall present the petition to the Directors at the next Board meeting. In the case of unincorporated organizations or interests, the petition must be signed by at least 25 individuals, unless the Chairman determines that it is appropriate to waive this requirement in a particular case. The petitioning individual or organization shall be given an opportunity to be heard at a meeting of the Board, upon such reasonable terms as the Directors shall determine. A written statement of the Board's action on the petition shall be provided to the petitioning individual or group and a copy of the statement shall be sent to the appropriate government funding sources as required by law or procedure in effect from time to time. Should it decide to provide representation to the petitioning organization or interest, the Board shall take any actions necessary to provide that representation while ensuring that the Board's composition meets the requirements of the federal Community Services Block Grant Act and any other applicable laws or regulations.

Section 4. Representation of the Private Sector
One-third of the Board shall be officials or members of business, industry, labor, religious, welfare, education or other major groups and interests in the service area.

The groups and interests in the private sector which will be entitled to be represented on the Board shall be selected by a majority of the Board in such a manner as to ensure that the Board is a continuing and effective mechanism to support the mission of the Corporation. After such groups and interests are selected by the Board, the representative groups and interests shall choose their respective representatives to serve on the Board. The Board of Directors (excluding the person being approved) shall review and approve each Private Sector Entity representative as soon as possible after selection.

The Board shall at all times strive to maintain equal representation of the three counties on the private sector of the Board. If for any reason there are not enough qualified private sector representatives able or willing to serve in any county, the Board may allow another county, or counties, to elect more than three representatives to the Board.

Section 5. Compensation/Distribution
No member of the Board shall receive any compensation or any distribution from the Corporation for services rendered as a Director. No member shall serve the Corporation in any other capacity and receive compensation from the Corporation for such services. However, members may receive reimbursement for expenses for transportation costs incurred as a result of attendance at Board or Board committee meetings and out of area travel. Travel reimbursement shall be in accordance with standardized government travel regulations.

Section 6. Each member of the Board of Directors selected to represent a specific service area within the community shall reside in the area which he/she represents.

Section 7. No person may sit on the Board who is an officer or an employee of an organization contracting to perform a component of the Corporation's work. No employee of the Corporation may serve on the Board and no Federal employee may serve on the Board in a capacity that shall require him/her to act as an agent of or as an attorney for the Corporation in its dealings with any Federal agency.

Section 8. Each individual who serves on the Board must agree to support the objectives of the Economic Opportunity Act of 1964, as amended, the Consolidated Farm and Rural Development Act, as amended, the Housing Act of 1947, as amended, and other legislation affecting the Corporation including, but not limited to, Community Services Block Grant. All members of the Board of Directors and Committees shall be of good character.

ARTICLE V
Terms and Vacancies

Section 1. No individual shall be allowed to begin a term that may result in exceeding any of the limitations herein.

Section 2. Private Sector
There are no limitations on the number of years that a Director representing the Private Sector may serve on the Board. However, each term shall be for a period of three years. At the end of each three-year term of service on the Board, the Private Sector entity must re-appoint the outgoing representative to be re-seated or appoint a new representative to serve.

Section 3. Low-Income Sector
There are no limitations on the number of years that a Director representing the Low-Income Sector may serve on the Board. However, each term shall be for a period of three years. At the end of each three-year term of service on the Board, the Low-Income Entity will follow a democratic selection process to elect a representative. Through this process, the outgoing representative can be re-seated or a new representative elected to serve. The individual must be elected under the appropriate criteria before obtaining the seat and must not exceed the requirements set forth in the Addendum regarding Procedures for Democratic Selection of Low-Income Representatives.

Section 4. Public Sector
There are no specific time limitations for service on the Board by members representing the Public Sector, but each term shall be for a period of three years. A Public Sector representative

may retain the seat for only the period of time that the individual retains the office which the Public Sector Representative represents on the Board. At the end of each three-year term of service on the Board (or a change in composition of the appointing body), the appointing council, commission or other group must re-appoint the outgoing representative to be re-seated or appoint a new representative to serve.

Section 5. A vacancy on the Board is created (a) when a member has been notified of his/her official removal by action of the Board for cause, (b) when a member notifies the Board of his/her resignation, (c) when the designating officials remove a public official, (d) when a public official leaves office or there is a change in composition of the public sector appointing body, or (e) when a member is absent from three consecutive regularly scheduled Board meetings without valid excuse, which excuse may be approved at the discretion of the Board Chairman if any such absence is the result of extraordinary circumstance such as weather, illness, accident or other reasonably unavoidable circumstance. For the purposes of this Section 5, any regularly scheduled meeting shall be considered a meeting, whether or not a quorum was present.

Section 6. When the seat of a public official becomes vacant the Board shall request the current holder of the public office to serve or to designate a representative to fill the seat within forty-five (45) days of the vacancy. Every effort shall be made to fill the vacant seat within forty-five (45) days of the vacancy.

Section 7. When the seat of a representative of the low-income sector becomes vacant the designated organization shall hold an election within sixty (60) days to elect the person to fill the vacancy on the Board of Directors. Every effort shall be made to hold an election within sixty (60) days of the vacancy. The election procedure outlined in the Addendum regarding Procedures for Democratic Selection of Low-Income Representatives shall be followed to elect a new member as soon as reasonably possible.

Section 8. When the seat of a representative of a private sector group or interest becomes vacant the Board shall request the designated organization to fill the vacant seat within forty-five (45) days of the vacancy. Every effort shall be made to fill the seat within forty-five (45) days of the vacancy. In the event that organization does not fill the vacant seat within forty-five (45) days, the Board of Directors can, at its next meeting, select another organization to appoint a representative to the Board and the newly selected member shall serve for the unexpired term.

Section 9. From time to time, the Board may designate a new group and interest to have representation on the Board. Once selected, the representative groups and interests shall choose or elect their respective representatives to serve on the Board in accordance with these By-Laws. This procedure shall allow different organizations the opportunity to be represented.

ARTICLE VI
Meetings

Section 1. The Board shall have at least nine (9) meetings within twelve calendar months with at least six (6) of those meetings having a quorum. The required quorum shall be more than fifty percent (50%) of the current membership of the Board. The act of the majority of the Board Members present at a meeting at which a quorum is present shall be the act of the Board of Directors.

Section 2. The annual meeting shall be held in August each year at which the Board of Directors shall elect officers and Executive Committee members.

Section 3. The meetings shall be scheduled for the convenience of its members and the general public and shall be open to the public. All meetings shall be preceded by advance public notice specifying the time and place of each such meeting to be convened as well as the subject matter or matters to be considered at such meeting. All members of the Board shall be notified in writing of all meetings in sufficient time for them to receive the written notice at least five (5) days before the day of the meeting. Board meetings shall receive public announcement and comply with the Oklahoma Open Meeting Act. Minutes of the previous meeting and the agenda shall be distributed to all members before the next meeting and shall be made available to the public upon request.

Section 4. The Board of Directors may designate any place within Choctaw, McCurtain, and Pushmataha Counties for any meeting that is to be held. The Board of Directors shall determine the date, time, and location of the meetings for the following year by December 15th of each calendar year and shall file the same in writing with the County Clerk wherein the Corporation is headquartered. The Board of Directors shall also provide such notices as are necessary to ensure compliance with applicable law, including the Oklahoma Open Meeting Act.

Section 5. Special meetings of the Board may be called by the Chairman, Executive Committee, or on presentation to the Board Secretary of a petition requesting the same when said petition is signed by no less than twenty-five percent (25%) of the Board. Only matters appearing on the posted agenda may be considered at a special meeting. Notice of special meetings shall be given at least forty-eight (48) hours prior to the meeting. Oklahoma Open Meeting Act requirements shall be met concerning notice and agenda for both special and emergency meetings.

Section 6. Voting by proxy is not permitted at meetings of the Board of Directors or its Committees.

Section 7. No member of the Board may appoint an alternate to attend a meeting of the Board in place of such member.

Section 8. The proceedings of the Board shall be kept by the Board Secretary in the form of written minutes which shall be an official summary of the proceedings showing clearly those members present and absent, and shall maintain a sign-in sheet of attending Board Members. Further, the Board Secretary shall record all matters considered and all actions taken by the Corporation, and votes by members on each motion. The minutes of each meeting shall be open to public inspection and shall reflect the manner and time of notice required by the Oklahoma Open Meeting Act.

In the written minutes of an emergency meeting, the nature of the emergency and the proceedings occurring at such meeting, including reasons for declaring such emergency meeting, shall be included.

Section 9. All Board meetings, whether in person or electronically attended, shall be in compliance with the Oklahoma Open Meeting Act, 25 O.S. §301, et seq., as revised.

Section 10. *Robert's Rules of Order Revised* shall govern at all meetings except when they conflict with these By-Laws.

Section 11. Any meeting of the Board or any Committee may be held by video conference, conference call or other similar electronic means if, in the discretion of the Chairman, such is appropriate to protect the health and safety of Board members. Additionally, at the discretion of the Chairman, individual Board or Committee members may, on occasion, be permitted to attend meetings via such electronic means so long as all members are able to hear one another; provided that such individual electronic attendance shall be an exception, in-person attendance is strongly favored. Any electronic meeting or attendance that is subject to the Oklahoma Open Meeting Act shall comply with § 307.1 of such act.

ARTICLE VII
Code of Conduct

Section 1. A Code of Conduct shall be established to ensure the appropriate conduct by members of the Board. Such Code shall prohibit the promotion of or involvement in nepotism, conflict of interest, and discriminatory practices.

Section 2. Each member of the Board shall sign the Code of Conduct upon becoming a member of the Board and in each January thereafter.

ARTICLE VIII
Powers, Responsibilities, and Role of the Board

Section 1. The Corporation's Board of Directors shall possess the following specific powers:

a. Appointing an Executive Director;
b. Evaluating the Executive Director annually;
c. Determining the rules of procedures for the Board;
d. Determining the policies under which the Board and Corporation shall operate;
e. Determining within regulations and policies, the major fiscal, personnel, and program policies;
f. Reviewing and approving programs and expenditures;
g. Considering and approving all program proposals and budgets;
h. Enforcing compliance with all conditions on grants;
i. Determining overall program plans and priorities;
j. Determining the use of all discretionary money;
k. Compliance with the Oklahoma Open Meeting Act, 25 O.S. §301, et seq., as revised, and Oklahoma Open Records Act, 51 O.S. §24A.1, et seq.;
l. Compliance with the Code of Conduct;
m. Reviewing the Mission Statement at least every five years to ensure the mission addresses poverty and programs/services are in alignment;
n. Ensuring the Community Action Plan is outcome based, anti-poverty focused and ties directly to the Community Needs Assessment;
o. Ensuring an approved, written succession plan for the Executive Director is in place; and
p. Reviewing the annual audit and addressing all findings.

Section 2. The role of the Board shall include but not be limited to:

a. Being a catalyst for positive change in the community;

b. Bringing the problems and needs of the community to the Board for discussion;
c. Looking at options for solving some of the problems or fulfilling the needs of the community;
d. Examining issues affecting the quality of life in the community;
e. Raising money;
f. Serving as an advocate for clients and being a catalyst for institutional change in institutions that serve them;
g. Serving as a link between the Board of Directors and the people or groups represented;
h. Serving as a good public relations advocate for the programs, projects, and activities of the Corporation;
i. Recruiting volunteers and space for programs and activities; and
j. Mobilizing resources for the entire community.

Section 3. Limitations of the Board
Individual Board Members do not have the authority to and shall not direct, coerce or in any way influence the actions of the Corporation's staff.

ARTICLE IX
Officers of the Board

Section 1. The officers of the Corporation shall consist of a Chairman, Vice-Chairman, Secretary, and Treasurer. The Board of Directors may, by majority vote, combine the offices of the Secretary and Treasurer.

Section 2. The said officers shall be elected from the membership of the Board of Directors at the annual meeting and shall serve one (1) year or until their successors are elected and qualified. Officers may be re-elected by majority vote but their successive term in one office shall not exceed three (3) years. If combined, the offices of Secretary and Treasurer shall be considered one office for calculation of time served.

Section 3. A vacancy in any office shall be filled promptly by majority vote of the Board either at a regular meeting or at a special meeting called for that purpose.

Section 4. The Chairman shall be the principal officer of the Corporation and, subject to the control of the Board of Directors, shall in general maintain an overview of the business of the Corporation. He/she shall preside at all meetings of the Board of Directors when he/she is present. He/she shall represent the Corporation and shall serve as ex-officio member of committees. In general, the Chairman shall perform all duties as may be described by the Board of Directors.

Section 5. The Vice-Chairman, in the absence of the Chairman or in the event of his or her inability or refusal to act, shall have all the powers of and be subject to all restrictions of the Chairman. The Vice-Chairman shall perform such other duties as from time to time may be assigned to him/her by the Chairman or by majority vote of the Board of Directors.

Section 6. The Secretary shall keep the Minutes of the Board of Directors and all Committees' meetings, be custodian of the records of the Corporation and of the Seal of the Corporation and see that the Seal of the Corporation is affixed to all documents requiring the Seal, the execution of which on behalf of the Corporation under its Seal is fully authorized, and in general perform

all duties incident to the office of Secretary and other such duties as from time to time may be assigned to him/her by the Chairman or by majority vote of the Board of Directors. In the absence of the Chairman and Vice-Chairman during a Board of Directors meeting, the Secretary shall preside at such meeting.

Section 7. The Treasurer shall ensure all funds received by the Corporation are deposited into accounts of the Corporation or otherwise secured, receipts are given for money due and payable to the Corporation, and all such moneys are deposited in the name of the Corporation in such banks as selected by the Board of Directors, and in general perform all the duties incident to the office of Treasurer and such other duties as from time to time may be assigned to him/her by the Chairman or by majority vote of the Board of Directors. In the absence of the Chairman, Vice-Chairman, and Secretary during a Board of Directors meeting, the Treasurer shall preside at such meeting.

Section 8. An officer may receive assistance from another individual in performing such duties, so long as the officer retains responsibility and reviews the records and documents prepared and distributed.

ARTICLE X
Executive Committee

Section 1. The Board shall annually elect an Executive Committee to transact routine and ordinary business between meetings of the full Board. The composition of this committee shall consist of seven members. The Committee shall be comprised of the elected officers of the Board of Directors; the remaining members shall consist of at least a representative from each sector (public, low-income, and private) elected by majority vote of the Board.

Section 2. The Executive Committee shall not take the place of a full Board meeting more than two (2) times during a twelve (12) month period.

Section 3. The quorum for the Executive Committee shall be more than fifty percent (50%) of the current membership of the committee.

Section 4. Any decision of the Executive Committee shall be discussed and must be ratified by a majority vote of the Board at the next Board meeting. Any action of the Executive Committee that is not ratified by the Board shall be deemed to have been revoked by the Board as of the date of the vote on ratification.

Section 5. In the event of an Executive Committee member's resignation, inability to serve, or failure to serve, the majority of the Board shall elect a member to fill the vacancy at the Board's next meeting.

ARTICLE XI
Other Committees

Section 1. At any Board meeting the Board may establish any committees it considers necessary for carrying on its business. Members of said committees shall be elected by majority vote of the Board. To the extent possible, the composition of these committees shall fairly reflect the composition of the full Board.

Section 2. The Board shall establish all standing committees. The Board Chairman shall be responsible for appointing the chairman of each standing and temporary committee. Standing committees shall exist until terminated by majority vote of the Board. A committee quorum vote shall be required for any official committee action. A quorum shall be more than fifty percent (50%) of the current membership of the committee. Each committee chairman shall report the actions of the committee to the Board of Directors.

Section 3. In addition to the standing committees, the Board may elect to establish policy advisory committees to advise the Board in various program areas.

ARTICLE XII
Committee Restrictions

No committee of the Board shall have the authority to:

a. adopt, amend or repeal the By-Laws or Articles of Incorporation;
b. elect, appoint or remove Board Members or fill vacancies on the Board or on any of its committees; or
c. approve a dissolution or merger of the Corporation or the sale of any or all of the Corporation's assets.

ARTICLE XIII
Executive Director and Staff

Section 1. The Board of Directors shall select and hire an Executive Director who shall be given the necessary authority and responsibility for the management of the Corporation, subject only to the policies and regulations enacted by the Board of Directors. A majority vote of the Board of Directors shall be required to appoint or to discharge the Executive Director.
The Executive Director shall be the Chief Executive Officer of the Corporation and shall:

a. Serve at the pleasure of the Board of Directors;
b. Faithfully carry out the policies and directives of said Board;
c. Serve as liaison between the Board and various funding agencies;
d. Advise and recommend policies and programs to the Board within the scope of the Corporation's purposes;
e. Keep the Board informed of activities both within and without the Corporation that affect the programs, purposes and business of the Corporation; and
f. Develop proposals to various funding agencies to provide the means to carry out the Corporation's purposes and shall negotiate same on behalf of the Board.

Section 2. In the event of a vacancy of the Executive Director, the Executive Committee of the Board of Directors shall convene to recommend an Executive Director for hiring. The Board Chairman shall appoint two (2) additional Board Members to serve on the Executive Committee only for this purpose, so that member representation on the Committee will be comprised of: three (3) from Choctaw County, three (3) from McCurtain County, and three (3) from Pushmataha County. After this Committee recommends an Executive Director for hiring, the Board of Directors shall then act upon said recommendation.

Section 3. The Executive Director shall employ such staff as may be needed to assist in the operations of the Corporation. All such staff employment shall be governed by established

personnel policies as adopted from time to time by the Board of Directors. Salary schedules shall be established by the Board of Directors.

ARTICLE XIV
Fiscal Year of Corporation

The fiscal year of the Corporation is and shall remain as beginning on the first day of January and ending on the thirty-first day of December of each year.

ARTICLE XV
Contracts

Section 1. The Board of Directors may authorize any officer or officers, or agents to enter into any contract or execute and deliver any instrument in the name and on behalf of the Corporation and such authority may be general or confined to specific instances.

Section 2. Whenever the Corporation chooses to place the responsibility for planning, conducting or evaluating a component of its work or program with another organization, it shall formalize the relationship with that organization in a contract which states the specific responsibilities contracted and the conditions for performance.

ARTICLE XVI
Books and Records

The Corporation shall keep correct and complete books and records of account. All books and records shall be available for inspection by any member of the Board of Directors.

ARTICLE XVII
Dissolution of Corporation

Section 1. Dissolution of this Corporation shall be in compliance with the laws of the State of Oklahoma.

Section 2. Disposition of all property and assets of this Corporation shall be in accordance with regulations from the funding source and Corporation policy.

ARTICLE XVIII
Amendments

These Amended and Restated By-Laws shall supersede and replace any and all prior By-Laws of the Corporation, which prior By-Laws are void and of no effect from and after the date hereof. These By-Laws may be changed in part or in their entirety by a majority vote of the Board of Directors, present and voting, provided a quorum is present and provided notice of proposed change or changes shall have been mailed by the Secretary to each member of the Board of Directors not less than five (5) days prior to the meeting.

ARTICLE XIX
Seal

Lift Community Action Agency

The Board of Directors has heretofore provided a Corporate Seal, which Seal shall be stamped or affixed to such documents as may be prescribed by law or custom or by the Board of Directors.

ARTICLE XX
Waiver of Notice

Whenever any notice is required, a waiver thereof in writing signed by the person or persons entitled to notice, whether before or after the time stated therein shall be deemed equivalent to the giving of such notice.

Adopted this 14th day of September, 2021 by a majority vote of the Board of Directors, present and voting, there being a quorum present and after having mailed the proposed Amended and Restated By-Laws at least five (5) days prior to the meeting.

LIFT COMMUNITY ACTION AGENCY, INC.

BY: _____
William Smith, Chairman

ATTEST:

_____
David Hawkins, Secretary/Treasurer

LIFT COMMUNITY ACTION AGENCY, INC.
BY-LAWS ADDENDUM
PROCEDURES FOR DEMOCRATIC SELECTION OF LOW-INCOME REPRESENTATIVES

1. LIFT Community Action Agency, Inc. (LIFT CAA) serves Choctaw, McCurtain, and Pushmataha Counties. By resolution of the LIFT CAA Board of Directors (the Board), three groups in each county served by the agency shall be designated Low-Income Entities (LIEs) for purposes of representation on the Board. The designated LIEs are responsible for nominating individuals for election to the low-income sector of LIFT CAA's Board. If the LIE is unable, for any reason, to nominate individuals for election to the low-income sector of the Board, then the LIFT CAA Board will designate a new entity as a replacement LIE.

2. Each county shall have three low-income representatives on the LIFT CAA Board. A low-income representative must reside in the county he/she represents. If for any reason there are not enough qualified low-income representatives able or willing to serve in any county, the Board may allow another county, or counties, to elect more than three representatives to the Board. The Board shall at all times strive to maintain equal representation of the three counties on the low-income sector of the Board.

3. When a seat in the low-income sector of the Board is up for election, the Board will send a letter (written or electronic) to the LIE in the county seeking nominations for the election. To foster maximum participation by low-income persons, LIEs should strive to nominate low-income individuals (e.g. low-income clients of organization, etc.). While every effort should be made to identify low-income individuals for nomination as representatives, LIEs will ensure those chosen are the best candidates to represent the low-income population fairly. There is no minimum or maximum number of nominations a LIE must make, but the Board will ask the LIE to submit at least two nominations for the voting ballot by a specified date. For reference, a sample letter to a LIE is attached to this document.

4. Once the deadline for nominations from the LIE has passed, the Board will place a notice in a newspaper that is distributed in the county holding the election. The notice will provide all relevant details for the election, including the voting times and location. The notice will explain that any individuals seeking to be placed on the ballot may do so by providing written notice to the appropriate LIE within a designated timeframe. For reference, a sample newspaper notice is attached to this document.

5. All of the nominees for a given county, including individuals nominated by the LIE and individuals who requested a nomination pursuant to paragraph 4 of these procedures, shall be placed on a ballot. Voting by ballot shall take place at the time, place, and manner described in the newspaper notice. The Board shall be responsible for designating the method by which the ballots will be distributed, collected, and returned to the Board.

Once the ballots have been returned to the Board, the Board will tally the results. The nominee with the highest number of votes will be submitted to the Board for final approval. As long as the nominee with the highest number of votes is qualified to sit on the Board (i.e., the nominee meets the residency requirement and does not have a prohibited conflict of interest) the Board shall seat the nominee on the low-income sector of the Board.

Lift Community Action Agency

1-00-03
Written Program Description Physical Facility Environment and Safety
Hygiene and Sanitation

POLICY
LIFT CAA shall maintain a written program description that guides the delivery of services.

PROCEDURES

The overall mission of LIFT CAA, approved by the agency's Director, is to provide quality mental health and alcohol / drug services to the target populations for its surrounding area and state, welcoming all consumers with substance-related and addictive disorders, including those with co-occurring mental health conditions, and is defined as follows:

"**To improve the lives of low-income individuals and families through service and collaboration leading to self-sufficiency. To Free Generations of People from Poverty and to foster and enhance the quality of life and emotional well being of persons who struggle with substance abuse and/or referral for mental health. Lift Community Action Agency will meet this mission by providing a safe space through open communication, spiritual growth, trust and perseverance."**

A. LIFT CAA maintains a person-centered philosophy that addresses alcoholism and drug addiction as diseases that affect all areas of a person's life and includes a recovery oriented and welcoming service delivery.
   1. Treatment of these diseases is most successful when the entire family is involved.
   2. Appropriate treatment ranges from involvement in twelve-step programs, outpatient counseling, and long-term residential treatment followed by after-care.
   3. Treatment must address the major areas of physical, social, spiritual, family, psychological, occupational and vocational aspects.
   4. Utilization of the concepts of individual worth, choice, trauma, empowerment, positive parenting, and twelve-step recovery programs are the foundation of treatment.

B. LIFT CAA maintains annual facility goals and objectives, including the goal of continued progress for the agency in providing recovery oriented, culturally competent, trauma informed, and co-occurring capable services and the same are documented in the annual report and approved by the Director.

   Lift CAA maintains the following as goals:
   1. Provide treatment in a safe, secure, welcoming environment.
   2. Support the recovery of the consumers or families served.
   3. Enhance the quality of life of the consumers served.
   4. Reduce symptoms.
   5. Restore and/or improve functioning.
   6. Reduce incidence with the legal system.
   7. Support the integration of consumers into the community.
   8. Reduce relapse.

C. Delivery of dependency education/counseling may be in a variety of ways, including but not limited to the following:
   a. Video tapes
   b. Audio tapes
   c. Lectures
   d. Guest Speakers
   1. Group therapy, including, but not limited to:
      a. RET Therapy
      b. Cognitive Behavioral Therapies

c. Motivational Interviewing

2. Curriculum includes, but is not limited to:
   a. A Woman's Addiction workbook: Your Guide to In-depth Healing (Lisa M. Najavits, Ph.D)
   b. Boundaries: Where You End and I Begin (Anne Katherine, M.A.)
   c. Co-Dependent No More: How to Stop Controlling Others and Start Caring For Yourself (Melody Beattie)
   d. Rebuilding Relationships In Recovery/A Guide to Healing Relationships Impacted By Addiction (Catherine Patterson-Sterling, M.A.)
   e. How To Spot a Dangerous Man Before You Get Involved (Sandra L. Brown, M.A.)
   f. Positive Discipline for Parenting in Recovery (Jane Nelson, Riki Intner, Lynn Lott) A Guide
   g. The Anger Workbook for Women: How to Keep Your Anger from Undermining Your Self Esteem, Your Emotional Balance & Your Relationships (Laura J. Petracek, PH.D, LCSW
   h. The Courage to Heal: A Guide for Women Survivors of Child Sexual Abuse (Ellen Bass & Laura Davis)
3. Family Systems and Addiction Education
4.. Family Therapy
   a. Therapy with the consumer
   b. Therapy with the consumer and family upon request
   c. Addiction education provided to family members and/or significant others outside of treatment, upon request and with consent of consumer
5. Community groups
6. Life-skills
7. Attendance at 12 step meetings
8. Recreational activities
9. Recovery activities

D. Services are provided by a coordinated team and are based on the specific needs of the persons served. The team consists of a plan coordinator, qualified behavioral health practitioner and providers of appropriate medical support services when applicable. Staff providing clinical services shall have documented qualifications or training specific to the clinical services they provide.
Persons served are assigned a primary counselor/case manager.

Mechanisms used to meet their needs include:

1. Knowledge of the legal decision making authority of persons served.
   a. Guardian or other
   b. When applicable, the provision of information to the persons served regarding resources related to legal decision-making authority and assistance in accessing resources to make changes in legal autonomy status, if appropriate.

G. LIFT CAA shall assure adequate resources are available to meet the needs of the core program.

1. Outpatient areas shall have water obtained from an approved public water supply or tested at least quarterly and treated as necessary, thereby maintaining a determination as an approved water supply by the authority having jurisdiction and the Oklahoma State Department of Health or Department of Environmental Quality, as necessary.

2. Outpatient area shall have lavatories and toilet facilities in a minimum ratio of one per twenty persons.

3. Lift CAA is a tobacco free facility. There shall be no smoking or tobacco use in the facility or on the grounds of LIFT CAA.

4. Therapeutic services shall be provided in an environment conducive to therapy and providing confidentiality.
   a. Each Primary Counselor/Therapist conducting individual or family therapy shall have a private office or access to a private room in which to conduct such therapy.

b. Group Therapy shall be conducted in a room away from public access, with limited distractions, in an area absent from intrusion, and allowing adequate space for the number of consumers in a group.

5. Weapons, including knives, guns or other items considered or being used as weaponry are not allowed in the facility or on the grounds.
6. Illegal drugs discovered will be turned over to the proper local authorities and legal drugs that are not specifically prescribed to residents, or not allowed in the facility.
7. Smoking cessation
   a. For all consumers that identify themselves as tobacco users, information will be made available to them about the use of prescription and/or non-prescription medication for the treatment of tobacco dependence. Also, referrals to Oklahoma's Tobacco Helpline: 1-800-QUIT-NOW.

H. To facilitate integrated service delivery, Lift CAA implements communication mechanisms regarding the person served that:
   a. Address:
      (1) Emergent issues
         (a) Open door policy – Director and clinicians
         (b) Case management
         (c) Situational communication

      (2) Ongoing issues
         (a) Case management
      (3) Continuity of services, including:
         (a) Contingency planning
            1. Treatment planning
         (b) Future planning
            1. Discharge planning
      (4) Decisions concerning the person served.
         (a) Treatment Team meetings each weekly.
         (b) Impromptu Treatment Meetings when necessary.
         (c) Situational communication
   b. Ensure the exchange of information regarding the person-centered plan.
      (1) Communication with consumer's referring entity, i.e. Probation Officer, DOC Administrator, DHS, Drug Court, Judge, etc.

I. Lift CAA shares information about the scope of services with:

1. Persons served
2. Families/support systems in accordance with the choices of person served
3. Referral sources
4. Payer and funding sources
5. Other relevant stakeholders
6. The general public

J. The scope of services is reviewed at least annually and updated as necessary.

Lift Community Action Agency

1-00-04
450: 18-1-9 Staff qualifications 450: 18-9-3 Staff Privileging

Lift CAA shall have an organized and operational method for documenting and verifying the training, experience, education, and other credentials of treatment personnel prior to their providing clinical or treatment services. The policy shall include procedures and operational methods for evaluating the professional qualifications of staff providing treatment services (including those who perform these evaluations and the verification process and the granting of privileges.

PROCEDURE:

A. Lift CAA documents and verifies the training, experience, education and other credentials of service providers prior to their providing treatment services. Professional qualifications of service providers providing treatment services are evaluated, including those who perform these evaluations and the verification process and the granting of privileges:

1. Clinical personnel employed prior to performing treatment services shall complete the form "Staff Privileges" and submit documentation-supporting qualifications for providing clinical services. Documentation shall include:
    a. Professional Degree's (University Transcripts);
    b. Professional experience (verification of employment);
    c. Certification and/or Letter of Intent (CADC)
    d. Professional Licensure
    e. CEU's
    f. Hours of trainings

2. Documentations shall be presented to the Clinical Director and professional qualifications reviewed and verified.

3. The Clinical Director shall review the documentations with the Executive Director, or designee, to be included in LIFT CAA's annual review.

4. Only those people providing documentation of requirements as according to job descriptions shall be considered for employment and appointed to provide clinical services.

5. The Clinical Director and Executive Director shall conduct an annual review of credentials to assure maintenance of licensure and/or certification for privileges to provide specific treatment services.

6. Limited privileges will be given for new employees and/or employees wanting approval to increase privileges. When employees are working with limited privileges, specific conditions for their work and for approval to receive full privileges will be noted on the Staff Privileging Review form. Documentation that the conditions have been met will be provided before an employee may work with full privileges.

7. Lift CAA shall maintain documentation that professional treatment staff is knowledgeable regarding bio-psychosocial dimensions of substance abuse, counseling theory and techniques, and possess one of the following:

    (a) All staff who provide clinical or supportive services for LIFT CAA shall have documented qualifications, licensing or training specific to the clinical services they provide.

    (b) The following service providers may provide behavioral health treatment and support services as agreed upon per contract between ODMHSAS and the contractor:

        (1) Behavioral Health Case Manager (BHCM)
        (2) Certified Alcohol and Drug Counselor (CADC);
        (3) Licensed Behavioral Health Professional (LBHP);
        (4) Licensed Mental Health Professional (LMHP);

(5) Licensed Physician;
(6) Licensed Practical Nurse
(7) Psychiatrist;
(8) Recovery Support Specialist (RSS);
(9) Registered Nurse;

c. The professional treatment staff shall have training within 30 day of hire in cultural-specific, age-specific, and gender-specific issues and counseling techniques, lethality, code of ethics, domestic violence and child abuse, consumer rights, crisis intervention, suicide reis assessment, prevention, and response, Oklahoma Child Abuse Reporting and prevention Act, blood pathogen and exposure control, health, fire and safety, confidentiality, and shall be knowledgeable regarding Lift CAA's education and policies.

d. Staff shall be, at least, eighteen (18) years old; and

e. Lift CAA shall provide for initial verification of required credentials with primary sources and shall document the same in personnel records and shall document in personnel records all education, training, and experience stated in above prior to providing direct care services.

8. Initial training and annual training updates for all personnel employed by the treatment facility shall cover, at a minimum:

a. Rights of consumers served;
b. Person and family centered services
c. Prevention of violence in the workplace
d. Confidentiality requirements
e. Cultural Competency
f. Expectations regarding professional conduct.

B. For personnel providing direct services, Lift CAA includes the following in its assessment of competency and competency-based training.

1. Areas that reflect the specific needs of the persons served.
2. Clinical skills appropriate to the position.
   a. All staff who provide clinical or supportive services for LIFT CAA shall have documented qualifications, licensing or training specific to the clinical services they provide. (See A.7. b. above.)
3. Person centered plan development.
4. Interviewing skills
5. Program-related research-based treatment approaches.
6. De-escalation techniques
7. Risk assessment
8. Trauma-informed approaches

Lift Community Action Agency

1-00-05
18-5-2.2 Information Management and Performance Improvement

POLICY:

LIFT CAA is committed to improving the organization and service delivery to the persons served. The organization shall collect data and analyze it, using the information toward managing and improving service delivery. Data collected shall reflect needs of the stakeholders, as well as business needs of the organization.

PROCEDURE:

1. Lift CAA has a written description of its performance measurement and management system that includes at a minimum:

    a. Mission
    b. Programs/services seeking certification
        (1) Outpatient

    c. Objectives of the programs/services seeking certification
        (1) Performance objective collecting data on efficiency, effectiveness, satisfaction and access
    d. Personnel responsibilities related to performance measurement and management.
        (1) Each staff member is responsible for gathering and recording data that is within their job description, (i.e. all staff – critical incident reports,
        (2) The Director compiles all the data gathered, quarterly and/or annually and puts into the annual report.

2. LIFT CAA shall have a defined and written plan for conducting an organizational needs assessment which specifies the methods and data to be collected, to include, but not limited to, information from:

    a. Consumers
    b. Governing Authority;
    c. Staff;
    d. Stakeholders;
    e. Outcomes management processes;
    f. Quality record review; and
    g. Self-assessment tools to determine progress toward co-occurring, recovery oriented, trauma informed, and consumer driven capability.

3. LIFT CAA shall have a defined ongoing system to collect data and information on a quarterly basis to manage the organization.

4. Information collected shall be analyzed to improve consumer services and organizational performance.

A. A written analysis is completed:
   (1) At least annually.
   (2) That analyzes performance indicators in relation to performance targets, including:
      a. Business functions.
      b. Service delivery of each program seeking accreditation, including:
         1. The effectiveness of services.
         2. The efficiency of services.
         3. Service access.
         4. Satisfaction and other feedback from:
            (i) The persons served.
            (ii) Other stakeholders.
   (3) Extenuating or influencing factors.

5. LIFT CAA shall prepare an end of year management report, which includes, but is not limited to:

   a. An analysis of the needs assessment process;
   b. Performance improvement program findings; and
   c. Claims and accomplishments by facilities, including but not limited to consumer count and success rates, which may be verified by the ODMHSAS Board.

6. Data collected shall:
   a. Address:

      (1) Needs of persons served:
         Round table – treatment team with individual once monthly
         Suggestion box
         Surveys
         Focus Groups
         Incident Reports
         Grievances
      (2) Needs of other stakeholders include, but are not limited to:
         Surveys
         Verbal Requests
      (3) Business needs of the organization include, but are not limited to:
         Financial meeting minutes
         Staff meetings

   b. Allow for comparative analysis

      Compares discharges (ACA and planned)
      Incoming versus outgoing trauma screening scores,
      Quality record reviews
      Stakeholder satisfaction
      Documents above in annual report.

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7. The organization demonstrates how it addresses data:

    (1) Reliability
        Through client data core – reviewed periodically
        trauma screening scores increase or decrease at time of discharge.
        Training of personnel responsible for collecting data
    (2) Validity
        Shown through reducing level of impairment
        ASI scores which are standardized and reliable
    (3) Completeness
        Staff training
    (4) Accuracy
        Spot checks

8. For business function improvement, LIFT CAA:

    a. Sets performance indicators, including, but not limited to
        (1) Effectiveness
            Increase in decrease in trauma screening scores from time of admission to discharge.
        (2) Efficiency:
            Planned vs. Unplanned Discharges
        (3) Access
            Waiting period prior to admission Outpatient
        (4) Satisfaction of persons served/other stakeholders
            satisfaction survey
        (5) Quality Chart Reviews
            Outpatient chart reviews
        (6) Grievances
            Policy time lines and timely resolutions
        (7) Critical Incidents
            Time lines and timely resolution
        (8) Quarterly Reports from the State
        (9) Emergency Drills
        (10) Complaints or suggestions
            Suggestion box provided and available to persons served, other stakeholders and staff members. Issues discussed in staff meetings.
        (11) Service delivery system
            For each service delivery performance indicator, the organization determines:
            (a) To whom the indicator will be applied
            (b) The person(s) responsible for collecting the data
            (c) The source from which data will be collected
            (d) A performance target based on an industry benchmark, the organization's performance history, or established by the organization or other stakeholder.

b. Measures performance indicators.

(1) Trauma screening scores at admission and at discharge
(2) Waiting time for admission after initial contact
(3) Planned vs. unplanned discharges
(4) Satisfaction Surveys
(5) Grievances
(6) Incident Reports
(7) Open and closed charts are reviewed using Quality Record Review Form
(8) Emergency Drills
(9) Meeting minutes

c. Utilizes data from the following in setting and measuring performance indicators:

(1) Financial information
Budget & Profit and Loss
(2) Accessibility
Initial intake and admission forms
(3) Resource Allocation
Budget – prioritizing fund
(4) Surveys
State surveys
Satisfaction surveys
(5) Risk Management
Incident reports
Budget
(6) Governance, if applicable (not applicable to Lift CAA)
(7) Human Resources
Increase in consumer numbers results in staff increase
(8) Technology
Computer access and virus protection to reduce risk of breaking confidentiality
(9) Environmental health and safety
Walk thru inspection by safety officer
(10) Strategic planning information
(11) Field trends, including research findings, if applicable
(12) Service delivery system
Surveys
Round Table – one on one with treatment team and consumer
Outcomes reports

9. The written analysis identifies areas needing performance improvement, resulting in an action plan to address the improvement needed to revise or reach performance targets. A written analysis is completed that analyzes performance indicators in relation to performance targets.

a. The analysis of performance indicators is used to:
(1) Review the implementation of:

(i) The mission of the organization.
(ii) The core values of the organization.
(2) Improve the quality of programs and services.
(3) Facilitate organizational decision making.
(4) Review or update the organization's strategic plan.

10. Outline actions taken or changes made to improve performance.

11. Are used to set:

(1) Written business function:
(a) Objectives
(b) Performance indicators
(c) Performance targets

(2) Written service delivery:
(a) objectives
(b) Performance indicators
(c) Performance targets

12. LIFT CAA communicates performance information:

(1) To:

(a) Persons served
(b) Personnel
(c) Other stakeholders, including governing authority and ODMHSAS, as requested

(2) According to the needs of the specific group, including:

(a) The format of the information communicated.
(b) The content of the information communicated.
(c) The timeliness of the information communicated.

(3) That is accurate.

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1-00-06
450:18-5-2.3. Performance Improvement

Lift CAA shall have an ongoing performance improvement program designed to objectively and systematically monitor, evaluate and improve the quality of consumer care.

PROCEDURES:

(a) The Performance improvement program shall address the fiscal management of the facility.

(b) Lift CAA plan shall include, but not limited to:

(1) Outcomes management specific to each program component which minimally measures:

A. Efficiency;
B. Effectiveness of treatment; and
C. Consumer satisfaction;

(2) A quarterly quality record review to evaluate:

A. The quality of services delivered;
B. The appropriateness of services;
C. The patterns of service utilization; and
D. Model fidelity, when an evidence-based practice is identified
E. That persons served were:
   (i) Provided an orientation to the program and services; and
   (ii) Actively involved in making informed choices regarding the services they receive;
F. Confidential information was released according to applicable laws/regulations;
G. Assessments shall be thorough, timely and complete;
H. Treatment goals and objectives shall be based on
   (i) Assessment findings; and
   (ii) Consumer input;
I. Services provided shall be related to the goals and objectives in the person's plan;
J. The actual services reflect appropriate level of care and reasonable duration;
K. Services shall be documented as prescribed by policy; and
L. The treatment Plan shall be reviewed and updated as prescribed;
M. When applicable the transition plan and discharge summary have been completed.

(3) The facility shall conduct a performance improvement activity to support increased access to and retention in treatment. This activity will be conducted annually. The activities shall include a walk through of the intake and admission process. Steps of the walk through will include:

A. Two staff members will be selected one from the facility, at least one will be a member from management, to play the role of a "consumer" or "family member";
B. All staff will be notified prior to doing the walk-through exercise;
C. A complete intake and admission process as defined by facility policy for a typical consumer and family will take place;
D. Staff members will document at each step of the intake and admission process, feelings and observations about the barriers and improvement that could be made to address these barriers.
E. Staff will address the needs from both the consumers and staff perspectives.

F. Staff will submit a performance improvement report to identify potential areas for change and describe what implementation looked like, how would change be successful, what changes could be tested to improve the current process.

(4) Staff privileging; and
(5) Review of critical and unusual incidents and consumer grievances and complaints.
(6) Improvement in the following:
  a. Co-occurring capability
  b. Provision of trauma informed services
  c. Provision of culturally competent services
  d. Provision of consumer driven services

(c) Lift CAA shall monitor the implementation of the performance improvement plan on an on-going, annual basis and shall make adjustments as needed.

(d) Performance improvement findings shall be communicated and made available to, among others;
(1) The governing authority
(2) Facility staff
(3) Consumers;
(4) Stakeholders, and
(3) ODMHSAS, as requested.

(e) Lift CAA shall identify a performance improvement officer. (Dionne Frankum)

Lift Community Action Agency

1-00-09

18-5.3.1

Tobacco-free Workplace Policy Enforcement Plan

In accordance with State law (IF ENACTED in 2007), all premises of Lift Community Action Agency are tobacco-free properties. Lift Community Action Agency is committed to providing and maintaining a safe and healthy workplace and promoting the health and well-being of its employees and consumers. As tobacco use is the number one preventable cause of disease and death in the United States, it is the policy of Lift Community Action Agency to be tobacco free.

Definition

"Tobacco" includes any nicotine delivery product or device that is not approved by the U.S. Food and Drug Administration (FDA) for the purpose of nicotine dependence treatment, including, but not limited to cigarettes, cigars, snuff, chewing tobacco, electronic cigarettes or vaping devices.

Procedure
To ensure compliance with the tobacco free policy, Lift Community Action Agency has the following enforcement plan:

1. New Hire packets and New Employee Orientation will contain information about Lift Community Action Agency 's tobacco free environment policy and resources available to help staff quit.

2. Tobacco Cessation Programs are available through referrals to the Oklahoma Tobacco Helpline, calling 1-800-QUITNOW.

3. All Lift Community Action Agency facilities will post signs visibly in high traffic areas notifying everyone that the possession and use of tobacco products, electronic cigarettes, and/or vaping devices is strictly prohibited.

4. No ashtrays, tobacco products or other paraphernalia are permitted in any indoor or outdoor area on agency premises, in agency vehicles, when on Lift Community Action Agency business or at any LIFT CAA sponsored events.

5. Enforcing the tobacco free workplace policy shall be the responsibility of the entre agency community.

6. Employees. Shall not share tobacco or tobacco replacement products with consumer.

Violations
If a staff member is seen to be in violation of Lift CAA's tobacco free policy, progressive disciple such as that outlined below is recommended:

1. The employee who witnesses the violation respectfully informs the person of the Lift CAA tobacco free environment and asks them to comply with the policy by disposing of their tobacco products. The employee may present them a card with information on the tobacco policy and a list of cessation resources including but not limited to the Oklahoma Tobacco Helpline.

2. If the person in violation does not comply, he or she should be reported to his or her supervisor or director.

    - First offense: employee shall receive a verbal warning to discuss the violation and to review the policy. Employee will be presented with resources for tobacco cessation

    - Second offense: employee shall work with supervisor or director designate to develop a plan of correction which he or she will sign, verifying that he or she understands the violation which has occurred and will thus forth comply with the tobacco free policy. Employee will again be presented with resources for tobacco cessation.

    - Subsequent offenses: If the violations continue to occur despite previous, in some cases, subsequent violations of this policy will be subject to disciplinary action, up to and including discharge, absent mitigating circumstances.

If a consumer is seen to be in violation of Lift CAA's tobacco policy the following steps should be taken:

1. The employee who witnesses the violation respectfully informs the consumer that he or she is in violation of the department's tobacco free policy and asks them to comply by disposing of their tobacco products. The employee may present them a card with information on the tobacco free policy and a list of cessation resources including but not limited to the Oklahoma Tobacco Helpline.

2. If the person in violation does not comply, he or she should be reported to his or treatment team and a critical incident report should be filed so that the treatment team can follow up with further supports for tobacco cessation.

A violation of this policy by any person other than an Employee or consumer shall be handled in the following manner:

1. First, the company will request that the violator stop using the Tobacco Product.

2. If the violator refuses to stop, the company will request that the person leave company property or company sponsored meeting or event.

3. If the violator refuses to leave, the company will follow its standard procedure for removing unwanted visitors.

Action

Any violation (s) of Lift Community Action Agency ’s Tobacco-Free Workplace policy and/or compliance/enforcement plans will be required to submit a 30 day plan of correction to their Director. Lift Community Action Agency will be encouraged to keep a log of organizational violations and the steps taken to address these violations. Lift Community Action Agency Director will connect agency staff members to the DMHSAS Behavioral Health and Wellness program for any technical assistance needs in terms of cessation materials, information, and resources.

Accountability

Lift Community Action Agency recommends that tobacco be addressed in each consumer’s treatment plan by means of the 5 A’s Tobacco Cessation counseling process. This process would be imbedded in the electronic medical record in a way that is appropriate to each specific program’s needs.

Lift Community Action Agency

2-00-00
450:18-5-8 Incident Reporting

Lift CAA Shall have in place procedures to document and report critical incidents. Lift CAA incorporates the Confidential Critical Incident Reporting developed by the department of Mental Health and Substance Abuse Services.

PROCEDURES:

1. All staff shall be trained through in-service training and orientation training on appropriate reporting and documenting of critical incidents as outlined by the Department of Mental Health and Substance Abuse Services.
2. Staff will complete the Critical Incident Report immediately following the incident has been reported and/or as soon as possible. The document will include the following:
   a. Facility name
   b. Consumer's name
   c. Name and signature of person reporting the incident
   d. Staff member or property involved
   e. Time, date and physical location of the incident
   f. Time, date the incident was reported and name of staff member whom reported to.
   g. Description of the incident
   h. Resolution of action taken, date action was taken, and signature of appropriate staff member
   i. Severity of each injury, if applicable and shall be indicated by the following:
      - No off site medical care required or first aid care administered on site
      - Medical care by a physician or nurse or follow-up attention was required
      - Hospitalization or immediate off-site medical attention was required
3. Reports will be done on a critical incident form for the following incidents, if appropriate:
   - Medication errors
   - Use of seclusion or restraint (Lift CAA does not practice seclusion or restraint)
   - Incidents involving injury
   - Communicable disease
   - Infection control
   - Violence or aggression
   - Use and unauthorized possession of weapons
   - Vehicular accidents
   - Biohazardous accidents
   - Unauthorized use or possession of legal or illegal substances, including any legal substance that is in violation of the organization's policies and procedures.
   - Abuse and neglect
   - Suicide or attempted suicide
   - Sexual Assault
   - Elopement

- Wandering
- Other sentinel events

4. Initial Incident reports are given to the Executive Director for review and comments within twenty-four (24) hours of occurrence of incident or next business day (if the incident occurs on a weekend or holiday).
5. Critical Incidents are to be reported in a Critical Incident Report for the following occurrences:
    a. Incidents requiring medical care by a physician or nurse or follow up attention and incidents requiring hospitalization or immediate off-site medical attention shall be delivered via fax or mail to Oklahoma Department of Mental Health and Substance Abuse Services Provider Certification within twenty-four (24) hours of the occurrence.
    b. Incidents involving allegations constituting a sentinel event, suicide or attempted suicide, or consumer abuse shall be reported to Oklahoma Department of Mental Health and Substance Abuse Services immediately via telephone or fax, within twenty-four (24) hours of the occurrence.
    c. If reported by telephone, the report shall be followed with a written report within twenty-four (24) hours at the Department of Mental Health and Substance Abuse Services, 2000 N. Classen Blvd, E600, Oklahoma City 73106 and the fax number is (405) 248-9325.
6. Significant Critical Incidents shall be reported to the Executive Director and/or designee immediately.
7. Significant Critical Incidents include, but not limited to the following:
    a. Death of a consumer, staff, or visitor;
    b. Any environmental or natural disaster that affects consumer care area;
    c. Any occurrence which seriously threatens the safety, health or well being of a consumer, staff or visitor; and
    d. Any event or occurrence that has the potential of becoming a media element.
8. Debriefing will follow critical incidents and documentation shall be found in meeting minutes.
9. All critical incident reports are documented, whether required to be reported to the ODMHSAS or not, and is kept in a critical incident file and appropriately considered in analysis for employee competency based training and Performance Improvement purposes.

Lift Community Action Agency

2-00-01
18-5-11 Technology

POLICY: LIFT CAA recognizes that information technology is an integral part of business strategies and practices. It is critical for organizations to proactively plan and take measures to avoid potential threats and ensure uninterrupted access to systems. Lift CAA implements a technology and system plan and will continue to work toward improvement in this area.

PROCEDURE:

1. LIFT CAA's implements a technology and system plan that:

a. Includes:

(1) Hardware

A. Computers - located in the offices and work areas of staff members;
B. Facility telephones are set up on a key system.

(2) Software:

A. LIFT CAA computer software includes versions of Windows. Word and Excel are LIFT CAA's preferred programs.

(3) Security:

A. Facility computers are password protected and are located in staff only areas, attended by staff members during working hours. During off hours, the computers are behind locked doors or are attended by a staff member. Computers are plugged into surge protectors to protect data loss from power surges.

(4) Confidentiality:

A. Computers are password protected in order to protect confidentiality. They are attended by staff members during working hours and during off hours are behind locked doors or attended by a staff member.

(5) Backup Policies

A. Computer files containing facility forms are backed up by hard copy and flash drives.

(6) Assistive technology

A. LIFT CAA does not presently offer assistive technology.

(7) Disaster recovery preparedness

A. Hard copies are kept in addition to any electronic files containing consumer information.
B. Hard copies are back up for electronic files containing facility forms and other documents and more than one staff member will also have backup for these files.

(8) Virus protection

Lift CAA computers utilize virus protection and firewall protection on facility computers.

Lift Community Action Agency

b. Supports:

(1) Information management to:

A. Improve efficiency and productivity of personnel.
B. Provide better communication with stakeholders.
C. Enhance individual services.

(2) Performance improvement activities for:

A. Program/service delivery.
1. Reducing the complexity or number of steps required to perform a task.
2. Providing the performance information an employee needs to perform a task.
3. Providing a decision support system that enables an employee to identify the action that is appropriate for a particular set of conditions.

B. Business functions.
1. LIFT CAA is located in a rural town and depends on technology service, i.e. telephone and internet services, to better serve consumers, business contacts and stakeholders.
2. Enhance individual services.
3. Improve efficiency & productivity of personnel.
4. Communicate with stakeholders.
5. Improve services to isolated populations when applicable.

c. Is reviewed at least annually for relevance.

d. Is updated as needed.

2. To meet the needs of the persons served, uses technology to increase access to services, increase supports and enhance services:

a. Through social media (Facebook).

Lift Community Action Agency

1-00-08
18-1-10

VOLUNTEERS

POLICY: Lift CAA shall not utilize any volunteers in the direct care of Individuals. This policy excludes students, enrolled in regional college and universities, who are participating in Lift CAA Practicum and Internship Program.

PROCEDURES:

Lift CAA shall have specific policies and procedures in place which define the purpose, scope, training, operations, and supervision related to the use of volunteers.

The Director shall assign the responsibility for the management and coordination of Volunteers Services to Clinical Director.

All Lift CAA policies and procedures relating to volunteer services will be reviewed by the Director.

In order for a potential volunteer to participate in a Lift CAA volunteer role, they must first attend an interview. Once the volunteer is conditionally approved, the following items must be completed before orientation and commencement of volunteering:

- Lift CAA Volunteer Application
- Two (2) Letters of Reference
- Resume
- Criminal History Request
- Drug Testing
- Emergency Contact Information Card
- Copy of current Driver's License and Social Security Card
- Signed Mission Statement
- Signed Lift CAA Confidentiality Statement
- Signed Verification of Receipt of Lift CAA Policies & Procedures Manual

Lift Community Action Agency

1-00-07
18-5-12

POLICY: Lift Community Action Agency are committed to complying fully with the Americans with Disabilities Act (ADA) and ensuring equal opportunity in employment for qualified Individual with disabilities. All employment practices and activities are conducted on a non-discriminatory basis.

Under Titles 11 and 111 of the ADA, LIFT CAA shall comply with the “Accessibility Guidelines for Buildings and Facilities (ADAAG) for alterations and new construction.” United States government facilities are exempt for the ADA as they shall comply with the “Uniform Federal Accessibility Standards (UFAS)”, effective August 7, 1984.

In assuring quality design and accessibility, Lift CAA will also utilize the American National Stands Institute (ANSI) A117.1 “American National Standard for Accessible and Usable Buildings and Facilities” as well as state and local standards for accessibility and usability of buildings and facilities.

PROCEDURES:
Hiring procedures have been reviewed and provide Individual with disabilities meaningful employment opportunities. Upon request, job applications are available in alternative, accessible formats, as is assistance in completing the application. Pre-employment inquiries are made only regarding an applicant's ability to perform the duties of the position.

Reasonable accommodation is available to all disabled employees, where their disability affects the performance of job functions. All employment decisions are based on the merits of the situation in accordance with defined criteria, not the disability of the individual.

Qualified individuals with disabilities are entitled to equal pay and other forms of compensation (or changes in compensation) as well as in job assignments, classifications, organizational structures, position descriptions, lines of progression and seniority lists. Leave of all types will be available to all employees on an equal basis.

Lift CAA is also committed to not discriminating against any qualified employees or applicants because they are related to or associated with a person with a disability. LIFT CAA will follow any state or local law that provides individuals with disabilities greater protection than the ADA.

Lift CAA is also committed to following ADA guidelines by providing or arranging for services for persons who fall under the protection of the Americans With Disabilities Act of 1990 and provide documentation of compliance with applicable Federal, state, and local requirements.

Reasonable accommodation form is available for consumers to complete if the provision or arrangement of services is needed due to disability.

Assistive Technology can be provided to any employee and/or consumer who may request through reasonable accommodations as for mentioned.

Lift CAA will use the recommended reference “Americans With Disabilities Handbook” published in the U.S. Equal Employment Opportunities Commission and the U.S. Department of Justice to ensure compliance.

This policy is neither exhaustive nor exclusive. Lift CAA is committed to taking all other actions necessary to ensure equal employment opportunity for Individual with disabilities in accordance with the ADA and all other applicable federal, state, and local laws.

Lift Community Action Agency

3-00-00
18-7-1.1 Record System

Policy: In order to protect the privacy of all stakeholders and any confidential information that records may contain, Lift CAA addresses applicable legal and regulatory requirements concerning privacy of health information and confidential records.

Procedure:

Policies and written procedures address:

a. Confidential administrative records
b. The records of the persons served
c. Security of all records
d. Confidentiality of records
e. Compliance with applicable laws concerning records
f. Time frames for documentation in the records of the persons served

Lift CAA shall maintain an organized record system for the content, confidentiality, storage, retention and disposition of consumer case records and administrative records.

Lift CAA adheres to policy and procedures concerning consumer records, which define required documentation within the case record.

Consumer records shall be contained within equipment that shall be maintained under locked and secure measures.

Lift CAA maintains consumer records where the individual is being treated or served. (In the case of temporary office space and in-home treatment services, records may be maintained in the permanent office and transported in a secured lock box or vehicle trunk to and from temporary offices and homes, when necessary).

Lift CAA has policies which govern the storage, retention, and disposition of consumer case records.

These policies shall be compatible with protection of consumer rights against confidential information disclosure at a later date.

Lift CAA complies with records disposition schedule 82-17 as approved by the Oklahoma Archives and Records Commission.

Lift Community Action Agency

3-00-01
18-7-2 Consumer Record basic requirements

Policy:

LIFT CAA shall maintain individual charts on each consumer served. Charts are used as a tracking system for verifications of appropriate consumer care, treatment progress or lack of, appropriate referrals, participation of consumer in treatment, medical status, etc. The charts are to be kept in an organized order based on entry and closing date. LIFT CAA assures charts are protected by the Federal Confidentiality Regulations. Charts are available for review by the Oklahoma Department of Mental Health and Substance Abuse Services for audit purposes.

PROCEDURES:

(a) Consumer records shall be developed and maintained to ensure that all appropriate individuals have access to relevant clinical and other information regarding the consumer. The consumer record shall communicate information in a manner that is organized, clear, complete, current and legible.
Consumer records shall contain, if applicable, the following:

(1) Entries in consumer records shall be legible, signed with first name or initial, last name, and dated by the person making the entry.
(2) The consumer shall be identified by name on each sheet in the consumer record, on both sides of each page if both sides are used and on each screen of an electronic record.
(3) A signed consent for treatment shall be obtained before any person can be admitted into the treatment program unless the admission was an involuntary basis.
(4) A signed consent for follow-up, referral and payment for subsequent services shall be obtained before any contact after discharge can be made.
(5) An intake and admission assessment.
(6) A biopsychosocial assessment.
(7) Service plans
(8) Progress Notes
(9) A continuing care plan
(10) Consultation reports
(11) Psychological or psychometric testing
(12) Records and reports from other entities
(13) Medication records
(14) Discharge Summary
(15) The date of admission.
(16) Information about the individual's personal representative, conservator, guardian, or representative payee, if any of these have been appointed, including the name, address and telephone number.
(17) Information about the person to contact in the event of an emergency, including the name, address and telephone number.
(18) The name of the person currently coordinating the services of the persons served.
(19) The location of other records.

(20) Information about the individual's primary care physician, including the name, address and telephone number, when available.
(21) Financial agreement with the person served.
(22) Healthcare reimbursement information, if applicable.
(23) The person's:
  a. Health history
  b. Current medications
  c. Preadmission screening, when conducted
  d. Documentation of orientation
  e. Person-centered plan, including reviews.
  f. Transition plan, when applicable.
(24) Correspondence pertinent to the person served
(25) Authorization for release of information
(26) Documentation of internal or external referrals

(b) If duplicate information or reports from the main records of a person served exist, or if working files are maintained, such materials are considered secondary documents and are not substituted for the main record. They are maintained in a confidential manner.

(c) Entries to the records of the persons served follow the organizations' policy that specifies time frames for entries.
(1) Biopsychosocial assessment time frame.
(2) Treatment Planning and Review time frames

(d) All documents generated by the organization that require signatures include original or electronic signatures.

Lift Community Action Agency

3-00-02
450:18-7-3.1 Confidentiality of Mental Health and Drug or Alcohol Abuse Treatment Information

Here at LIFT CAA all staff, volunteers, consumers, visitors, and the liaison with community and provider partners shall be under the jurisdiction of federal confidentiality regulations according to "Confidentiality of Alcohol and Drug Abuse Patient Records" (42CFR, Part 2). This policy will govern sets of records and data collection/processing information relative to alcohol/drug abuse here at LIFT CAA. Confidential information is defined as personal facts or conditions pertaining to the consumer's life which the Consumer has communicated to staff of the facility, including the fact that the consumer has requested services or is participating in the program. LIFT CAA and other organizations relating to the program, acting in the scope and course of their duties, shall not divulge, nor shall they be required to provide, any specific information concerning consumers being treated. Should any person breach confidentiality; such information and any product thereof shall not be admissible as evidence to be considered in any criminal proceeding.

PROCEDURES For All Programs:

I. All mental health and drug or alcohol abuse treatment information, whether recorded or not, and all communication between a physician or psychotherapist and a consumer are both privileged and confidential. In addition, the identity of all consumers who have received or are receiving mental health or drug or alcohol abuse treatment services is both confidential and privileged. Such information shall only be available to persons or agencies actively engaged in the treatment of the consumer unless a state or federal law exception applies.

II. LIFT CAA adheres to strict policy and procedures protecting the confidential and privileged nature of mental health and drug or alcohol abuse treatment information in compliance with state and federal law and which contain at a minimum:

A. LIFT CAA acknowledges that all mental health and drug or alcohol abuse treatment information, whether recorded or not, and all communications between a physician or psychotherapist and a consumer are both privileged and confidential and will not be released without the written consent of the consumer or the consumer's legally authorized representative;

B. LIFT CAA abides by the policy that the identity of a consumer who has received or is receiving mental health or drug or alcohol abuse treatment services is both confidential and privileged and will not be released without the written consent of the consumer or the consumer's legally authorized representative except as otherwise permitted by state and federal law.

C. LIFT CAA limits access to mental health and drug or alcohol abuse treatment information to only those persons or agencies (court ordered) actively engaged in the treatment of the consumer to the minimum amount of information necessary to carry out the purpose for the release;

D. A procedure by which a consumer, or the consumer's legally authorized representative, may access the consumer's mental health and drug or alcohol abuse treatment information for disclosure of confidential records:

1. Confidentiality may be waived by the consumers, providing such waiver is freely and voluntarily made, and will full prior knowledge as to the consequences thereof. The disclosure of confidential information shall be restricted to information, which is necessary to fulfill the specific need for the disclosure (see Consent for Release of Confidential Information form.)

2. Upon informed consent and written request of the consumers, specifying the person or agency to which the information is to be given. This request is to be time-limited, content specific and signed by the consumer. The consumer shall be informed that treatment services are not contingent, or influenced by, his/her decision to permit the information release. A copy will be given to the consumer and placed in their treatment chart.

3. Upon informed consent and written request of the consumer, disclosure may be made to other agencies involved in providing services to the consumer. This request is also to be time-limited, content-specific and signed by the consumer. A copy will be given to the consumer and placed in their treatment chart.

4. Disclosure shall be made to appropriate agencies or persons when it is determined that there is a clear and present danger to the consumer or others and/or there is child abuse or neglect (10 O.S., § 7005 (1.7) and abuse of elderly or incapacitated adults (43 A O.S., §§ 7005 (1.1) through 7005 (1.3); or

5. Upon receipt of a court order signed by a presiding Judge of a court of competent jurisdiction; or

6. Holders of contracts with ODMHSAS having signed a qualified service agreement (43A O.S., § 1-109 (A) (2), as provided by said contract. These facilities shall have policy and procedures to permit transmittal of records and information regarding the care and treatment of a specific consumer as necessary and appropriate between them and/or the ODMHSAS, and/or another contracted holder of a qualified service agreement.

7. Disclosure shall be made pursuant to a crime at the treatment program or against program personnel.

8. No initial response will be made over the telephone, in person, or in writing that indicates the consumer is involved with the program until the appropriate written consents are in place.

9. In the event information is released without the consumer's consent when such release is proper and mandatory through the courts, the consumer will be informed in writing that such a disclosure has occurred and the reasons for such disclosure explained.

10. Any document released will be stamped in red "This information has been disclosed to you from records protected by Federal Confidentiality rules (42 CFR Part 2). The Federal rules prohibit you from making any further disclosure of this information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by (42 CFR Part 2). A general authorization for the release of medical or other information is NOT sufficient for this purpose. This information authorized for release may include records, which may indicate the presence of a communicable, or venereal disease, gonorrhea, and human immunodeficiency virus, also known as acquired immune deficiency syndrome (AIDS). The Federal rules restrict any use of the information to criminally investigate or prosecute any alcohol or drug abuse patient."

E. LIFT CAA acknowledges that certain state and federal law exceptions to disclosure of mental health and drug or alcohol abuse treatment information without the written consent of the consumer or the consumer's legally authorized representative exist and the facility will release information as required by those laws; and

1. With respect to drug and alcohol rehabilitation, education, and treatment. Federal law allows consent to disclosure to be given to a minor and does not require his parent or guardian's consent or authority to act on his behalf when, under state law, the minor child could apply for and obtain services.

2. A minor child 13 years or younger may not give his own consent to have his records divulged and requires his parent's or legal guardian's signature to execute the consent form in order that his records could be divulged.

3. Federal law and regulations do not protect any information about a crime committed by a consumer whether at the program or against any person who works for the program or about any threat to commit such a crime.

4. Federal regulations do not protect any information about suspected child abuse or neglect from being reported under state law to appropriate sate or local authorities.

5. A woman has the right to control the release of confidential records and information pertaining to her infant or child (except as above, in case of child abuse, neglect, or commitment of any other crime). Release of confidential records requires written informed consent of the parent or legal guardian and must meet all previously stated legal requirements.

Lift Community Action Agency

F. A procedure by which to notify a consumer of his or her right to confidentiality.

1. During the intake process, staff will explain to the consumer his or her right to confidentiality. The consumer will be given a written documentation (Statement of Confidentiality) 42 C.F.R., Part 2 of stating his or her rights to confidentiality, with signature by both the consumer and the Intake Officer. A copy is given to the consumer and the original goes in the consumer's chart.

III. LIFT CAA's written consent to release information shall ensure the written consent form complies with all applicable state and federal law and does contain the following:

A. The name and address of the facility making the disclosure of information, and the name and title of the Person completing the disclosure;

1. B. *The name(s) of the individual(s) to whom a disclosure is to be made; or*

(ii) *Entities with a treating provider relationship with the patient. If the recipient entity has a treating provider relationship with the patient whose information is being disclosed, such as a hospital, a health care clinic, or a private practice, the name of that entity; or*

(iii) *Entities without a treating provider relationship with the patient.*
(A) *If the recipient entity does not have a treating provider relationship with the patient whose*

information is being disclosed and is a third-party payer, the name of the entity; or

(B) *If the recipient entity does not have a treating provider relationship with the patient whose information is being disclosed and is not covered by paragraph (a)(4)(iii)(A) of this section, such as an entity that facilitates the exchange of health information or a research institution, the name(s) of the entity(-ies); and*

(1) *The name(s) of an individual participant(s); or*
(2) *The name(s) of an entity participant(s) that has a treating provider relationship with the*

patient whose information is being disclosed; or

(3) *A general designation of an individual or entity participant(s) or class of participants that must be limited to a participant(s) who has a treating provider relationship with the patient whose information is being disclosed.*

(i) *When using a general designation, a statement must be included on the consent form that the patient (or other individual authorized to sign in lieu of the patient), confirms their understanding that, upon their request and consistent with this part, they must be provided a list of entities to which their information has been disclosed pursuant to the general designation (see§ 2.13(d)).*

(ii) *[Reserved]*

C. The name of the consumer whose records are to be released;

D. How much and what kind of information is to be disclosed, including an explicated description of the Substance use disorder information that may disclosed

E. Specific reason for the disclosure;

F. The signature of the consumer or the consumer's legally authorized representative;

G. The date the consent to release was signed by the consumer or the consumer's legally authorized representative.

H. Statement that treatment services are not contingent upon or influenced by the client's decision to permit the information release;

I. An expiration date, event or condition that shall ensure the release will last no longer than reasonably necessary to serve the purpose for which it is given;

J. A statement of the right of the consumer, or the consumer's legally authorized representative, to revoke the consent to release in writing and a description of how the consumer may do so;

K. A confidentiality notice which complies with state and federal law (HIPPA), and

A statement in bold face writing "The information I authorize for release may include information that could be considered information about communicable, non-communicable or venereal diseases, which may include, but are not limited to, disease such as hepatitis, syphilis, gonorrhea and human immunodeficiency virus, also known as Acquired Deficiency Syndrome. I further understand that my medical information may indicate that I have or have been treated for psychological or psychiatric conditions or substance abuse."

IV. Unless an exception applies, LIFT CAA will provide consumers with a copy of the ODMHSAS Notice of Privacy Practices.

V. LIFT CAA's written consent from a consumer to release treatment information to persons within the criminal justice system which have mandated the consumer's participation in treatment as a condition of the disposition of any criminal proceeding against the consumer does comply with all applicable state and federal laws and contain at a minimum the following:

A. The name of the person or program permitted to make the disclosure;

1. B. *The name(s) of the individual(s) to whom a disclosure is to be made; or*

(ii) *Entities with a treating provider relationship with the patient. If the recipient entity has a treating provider relationship with the patient whose information is being disclosed, such as a hospital, a health care clinic, or a private practice, the name of that entity; or*

(iii) *Entities without a treating provider relationship with the patient.*
(A) *If the recipient entity does not have a treating provider relationship with the patient whose*

information is being disclosed and is a third-party payer, the name of the entity; or

(B) *If the recipient entity does not have a treating provider relationship with the patient whose information is being disclosed and is not covered by paragraph (a)(4)(iii)(A) of this section, such as an entity that facilitates the exchange of health information or a research institution, the name(s) of the entity(-ies); and*

(1) *The name(s) of an individual participant(s); or*
(2) *The name(s) of an entity participant(s) that has a treating provider relationship with the*

patient whose information is being disclosed; or

(3) *A general designation of an individual or entity participant(s) or class of participants that must be limited to a participant(s) who has a treating provider relationship with the patient whose information is being disclosed.*

(i) *When using a general designation, a statement must be included on the consent form that the patient (or other individual authorized to sign in lieu of the patient), confirms their understanding that, upon their request and consistent with this part, they must be provided a list of entities to which their information has been disclosed pursuant to the general designation (see§ 2.13(d)).*

(ii) *[Reserved]*

C. The name of the consumer whose records are to be released.

D. How much and what kind of information is to be disclosed, including an explicated description of the Substance use disorder information that may disclosed.

E. The specific reason for the disclosure;

F. The signature of the consumer or the consumer's authorized representative;

G. The date the consent to release was signed by the consumer or the consumer's authorized representative;

H. A statement in bold face writing "The information I authorize for release may include information that could be considered information about communicable, non-communicable or venereal diseases, which may include, but are not limited to, disease such as hepatitis, syphilis, gonorrhea and human immunodeficiency virus, also known as Acquired Deficiency Syndrome. I further understand that my medical information may indicate that I have or have been treated for psychological or psychiatric conditions or substance abuse."

I. Statement that treatment services are not contingent upon or influenced by client's decision to permit the information release.

J. A specific time or specific event upon which the consent will expire and during which the consent shall be irrevocable, which in no event may be later than the final disposition of the criminal proceeding; and

K. Included in the consent to release form is a statement that any disclosure made is bound by the federal law and regulations governing confidentiality of alcohol and drug patient records (42 U.S.C.§ 290dd-2; 42 C.F.R., Part 2) and that recipients of the information may receive and re-disclose it only in connection with their official duties with respect to the particular criminal proceeding and may not be used in other proceedings, for other purposes, or with respect to their individuals.

VI. LIFT CAA makes available to the consumer a statement of the right of the consumer, or the consumer's legally authorized representative, to revoke the consent to release in writing and a description of how the patient may do so (HIPPA). A consumer has the fight to make a request to amend consent to release and may do so in writing with reason for amendment.

VII. The presence of a consumer in treatment may be given only upon informed consent and written request of the consumer, specifying the person or agency to which the information is to be given. This consent is to be time-limited, content-specific and signed by the consumer and witness and signed by a staff member. A copy will be placed in the consumer's chart and the consumer will be given a copy.

Lift Community Action Agency

VIII. Entries to the building shall be through the East (front) door, on 1005 S 5th St. Hugo, OK

IX. All staff shall be trained in "Confidentiality of Alcohol and Drug Abuse Patient Records" (42 CFR, Part 2).

X. All staff shall sign a Statement of Confidentiality following training on (42 CFR, Part 2).

XI. All communications between a consumer and a psychotherapist and/or physician is privileged and confidential and will not be released without the written consent of the consumer or the consumer's legally authorized representative.

XII. Access to confidential records:

A. Consumer's records shall be maintained in locked file cabinets within the locked office of the records room in the building at 1005 S 5th Street Hugo, OK.

B. Records removed from the secured area shall be returned during the same day.

C. Records shall not be removed from the primary agency without written notification being provided to, and Approval received from, the agency's Executive Director. The staff person must notify the Executive Director or designee upon the return of the records.

D. Current therapeutic staff of the agency shall have access to confidential records. All other staff shall have access only on a "need to know basis", approved by the Assistant Director.

E. Funding source monitors requiring pertinent program evaluation data upon showing proof of identification relating to their job capacity and binding to the oath of confidentiality monitoring.

F. Agency interns and/or practicum students may have access with supervisory approval and monitoring.

G. Consumers may have access to their particular case. Only information pertaining to that individual will be provided. No information received from other sources will be released. Personal access of present or former consumer to their records will be restricted in a manner conforming to 43A O.S. § 1-109, 3-422 and 3-343.

H. Referring agencies may have access with proper release of information.

I. Medical personnel in response to a medical emergency may have access.

XII. LIFT CAA adheres to strict policy and procedures protecting the confidential and privileged nature of mental health and drug or alcohol abuse treatment information in compliance with state and federal law and which contain at a minimum:

A. LIFT CAA acknowledges that all mental health and drug or alcohol abuse treatment information, whether recorded or not, and all communications between a physician or psychotherapist and a consumer are both privileged and confidential and will not be released without the written consent of the consumer or the consumer's
legally authorized representative.

B. LIFT CAA abides by the policy that the identity of a consumer who has received or is receiving mental health or drug or alcohol abuse treatment services is both confidential and privileged and will not be released without the written consent of the consumer or the consumer's legally authorized representative;

C. LIFT CAA limits access to mental health and drug or alcohol abuse treatment information to only those persons or agencies (court ordered) actively engaged in the treatment of the consumer to the minimum amount of information necessary to carry out the purpose for the release;

D. The consumer's legally authorized representative may access the consumer's mental health and drug or alcohol abuse treatment information.

Lift Community Action Agency

IX. A consumer's written consent for the release of information shall be considered valid only if the following conditions have been met and documented in writing:

A. The consumer is informed, in a manner that assures his or her understanding, of the specific type(s) of Information that has been requested and the period of time for which the information has been requested;

B. The consumer is informed of the purpose or need for the information.

C. Services are not contingent upon, or influenced by, the consumer's decision concerning authorization for the release
of information; and

D. The consumer gives his or her consent freely and voluntarily.

Lift Community Action Agency

3-00-03

18-7-4 Consumer record storage, retention and disposition

Policy: In order to protect the privacy of all stakeholders and any confidential information that records may contain, LIFT CAA addresses applicable legal and regulatory requirements concerning privacy of health information and confidential records. LIFT CAA charts are to be kept in an organized order based on entry and closing date.

PROCEDURES:

LIFT CAA shall maintain an organized system for the content, confidentiality, storage, retention, and disposition of consumer case records and administrative records.

A. Confidential administrative records

1. Administrative files will be filed in the executive offices, with any sensitive information being filed in a secure metal file cabinet, in offices that are locked. Access is limited to the Director, Executive Assistant and other designees as applicable. Personnel files are in the office of the Executive Assistant and billing information is secured in the office of the Billing Specialist.

B. The records of the persons served.

1. **Records of the persons served are accessible to staff on a need to know basis**
2. **LIFT CAA shall have a procedure concerning consumer records, which defines require documentation within the case record. Below is a listing of required documentation in a consumer's case file:**

a. Entries in consumer records shall be legible, signed with first name or initial, last name, and dated by the person making the entry. Information will be filed in chronological order with most recent information on the top.

b. The consumer shall be identified by name and identification number on each sheet in the consumer record, on both sides of each page if both sides are used.

c. Pages not completely filled should have a line crossed through the unused section.

d. When an error is made by a staff person then mark through the error with one line, make correction, and put your first and last name initial next to the correction.

e. A signed consent for treatment shall be obtained before any person can be admitted into the treatment program unless the admission was an involuntary basis.

f. A signed consent for follow-up shall be obtained before any contact after discharge can be made.

g. Consumer's record shall contain any additional information relating to the consumer, which has been secured from sources outside of the facility i.e., TANF Treatment Plans and, Mental Health Plans, Child Welfare Treatment Plans, court warrants, psychological or psychometric evaluation results and recommendations, consultations report and any other sources obtained during the consumers active treatment. This would apply to consultation reports i.e., consultations between TANF and LIFT CAA, Child Welfare and/or Mental Health. Consumer's record shall contain any additional information relating to the consumer that has been secured from sources outside the facility. All information obtained shall be

confidential and privileged and may not be released except as allowed by applicable state and federal laws.

h. An intake and admission assessment

i. A biopsychosocial assessment.

j. Service plans

k. Progress notes

l. A continuing care plan

m. Medication records

n. A discharge summary

C. Security of all records.

1. All charts of active consumers are stored in metal file cabinets, files shall be maintained under locked/secured measures in a locked and secured room.

2. Only designated Administrative and Clinical staff shall have keys and access to the records storage area, with access to consumer records limited to persons with a need to know

3. Consumer's records will be maintained in each facility where the individual is being treated or served. In the case of temporary office space and in-home treatment services, records may be maintained in the main (permanent) office and transported in secured lock boxes or vehicle trucks to and from temporary offices and homes, when necessary. Consumer records may be permanently maintained at the facility's administrative offices; however, a working copy of the consumer for the purposes of documentation and review of services provided must be maintained at the site in which the consumer is receiving treatment.

4. All consumers chart records will have the consumer's identification number and name on the front tab of the chart.

5. Subsequent to consumer discharge, the terminated files are stored in separate metal file cabinets from the active files, which shall be maintained under locked/secured measures in a locked and secured room.

6. At the end of the fiscal year in June, all terminated files will be placed in secured boxes with each record documented and accounted for, and will be stored at LIFT CAA. 1005S 5th St. Hugo, Oklahoma. The records will be placed in a locked file cabinet within the confines of the locked storage room.

7. Administrative files will be filed in the executive offices, with any sensitive information being filed in a metal file cabinet, in offices that are locked and if necessary to transport the same measures are used as with consumer files.
8. Backup of electronic records will be done on a weekly basis.

9. Electronically generated documents include a statement with instructions in case of receipt by an unintended recipient. Incoming facsimiles are received into a fax machine placed in a secure area, which is locked when not attended by a staff member.

10. All records at LIFT CAA shall be maintained for a minimum of seven (7) years from the date they are officially closed.

11. At the end of the fiscal year in June, the Records Officer will review and dispose of records that have been in storage for over seven (7) years. The Records Officer will make a roster of charts that are to be destroyed. This list will be approved and initialed by the Director and the approval will be kept in the Records Officer logbook.

12. Files to be destroyed will be shredded or burned under confidential conditions and the facility will be in compliance with any state or federal laws that apply. This includes electronic records, with the exception that they may be erased and written over or exposed to a magnetic field of sufficient strength to disrupt the recorded data, rather than being burned and if possible.

13. In the event a legal process is initiated against LIFT CAA, the facility shall halt the destruction of records until such time that the matter is resolved.

14. All data that is not incorporated into a consumer or non-medical record, except Report of Contact Forms, is shredded after five (5) years.

D. Confidentiality of records.

1. LIFT CAA assures charts are protected by the Federal confidentiality regulations (HIPPA). During retention and disposal, strict guidelines are in place to assure confidentiality of consumer and administrative records.

E. Compliance with applicable laws

1 All information obtained shall be confidential and privileged and may not be released except as allowed by applicable state and federal laws.

2. No information may be removed from the consumers file, and no copies of the information can be made and/or removed from the facilities, except under the provisions allocated by ODMHSAS 450:18-7-3.1.

3. In order to document Treatment Team and Administrative Meetings the consumer's full name will not be used in meeting minutes. Meeting minutes will be locked in Executive Assistant's office file cabinet.

F. Time frames for documentation in the records of the persons served.

1. Progress Notes – 24 hrs.

2. Service Plan: Outpatient – by 4th visit

3. Personnel records – within 3 working days of handing documents to the Executive Assistant.

Lift Community Action Agency

4-00-00
450:18-7-21 Clinical Record content, screening, intake, and assessment
450:18-7-22 Intake and assessment

LIFT CAA shall assess each consumer for appropriateness of admission to each substance abuse service's level of care. Each presenting consumer is assessed, according to prescribed criteria, for admission to a specific level of care. This organized process involves professional determination of severity of symptoms and current situations to determine clinically appropriate placement in the least restrictive level of care. Initial treatment plans are based on presenting information for those services determined to be immediately necessary prior to the completion of a biopsychosocial and case management assessment.

PROCEDURES:

1. When initial contact is made from a person seeking assistance for treatment the procedure is as follows:

    a. LIFT CAA outpatient intake coordinator completes a face to face screening with each outpatient individual to determine appropriateness of further assessment.

    b. All LIFT CAA personnel are trained to complete an Initial Screening/Referral Form, either in person or by phone to assure prompt service. The staff completes the Initial Screening/Referral form in its entirety, which includes the following information: name, personal information (i.e. age, date of birth, ethnic background), emergency contact, demographics, substance of choice and history of substance abuse, priority population, health issues and mental health concerns, (i.e. pregnancy, medications, handicaps, allergies, and suicide or violent history), referral source, and previous treatments.

    c. Phone screens as per "b." above are given to the Intake Coordinator for determination of available space. If a space is not immediately available for a consumer, he/she is advised during the initial screening or by the intake coordinator as soon as possible and his/her name is placed on a waiting list if he/she meets criteria. Placement date, identified needs and contacts with consumer are documented. Interim referrals and contact numbers for other facilities may be provided unless refused. Consumers will also be referred to available services and community supports such as AA/NA meetings, their local county Health Department for STD, HIV/AIDS, TB screening - Hepatitis C at their local doctor. They will be offered an educational session if desired. For pregnant women, a referral for prenatal care and counseling on the effects of alcohol and drug use is offered.

    d. Should service providers determine the consumer's needs cannot be met within the agency, clinical assessments and referrals for the consumer shall be documented. Referrals are made to consumers who are found ineligible to be admitted. The person served is informed as to the reason. In accordance with the choice of the person served, the family/support system and/or referral source is also informed. For a person to be admitted into LIFT CAA the ASAM PPC Admission Criteria for each program must be met by one of LIFT CAA certified program. Admission will be dependent upon LIFT CAA's ability to provide the needed services. If a person is found ineligible, documentation is maintained showing facility's actions.

    e. When a person is to be admitted, contact is made by the Intake Coordinator and an admit date and time is set.

    g. Upon determination of appropriate admission, consumer assessment demographic information shall contain, but not be limited to:

        1. Date of initial contact requesting services
        2. Date of intake

3. Gender
4. Birthdate
5. Identification information
6. Consumer's name
7. Consumer's home address and,
8. Telephone number
9. Referral source
10. Reason for referral
11. Mental status exam examination by a licensed mental health professional
12. Significant other to be notified in case of emergency;
13. PICIS intake data core content
14. Document and assess all consumers for appropriateness of admission to each level of care by utilizing the ASAM PPC dimensions administered by a licensed mental health professional or other person certified to administer.

2. During an initial screening call, if an urgent and critical need is identified, it is documented and appropriate action is taken immediately. If the person calling is determined to be in crisis, the staff member completing the screening will refer the person to a Crisis Center in the demographic area in which the person is calling from. If a crisis assessment is conducted:
    a. It is documented
    b. The following are addressed:
        (1) Suicide risk
        (2) Danger to self or others
        (3) Urgent or critical medical condition(s)
        (4) Immediate threat(s)
    c. Contact local authorities if a person is an imminent to self or others.

3. Screening includes a review of each person's eligibility for admission based on the person's:

    a. Presenting problems
    b. Need for services
    c. Legal eligibility criteria, when applicable

4. Screening assesses:
    a. Appropriateness of available services
    b. Availability of funding resources

5. Screening identifies whether the organization can provide the services needed, as well as alternate resources when services cannot be provided.

6. Included in the screening process is an interview with the person to be served or referral source and when appropriate, a pre-admission, on-site visit to the organization and its programs by the person to be served or their legal guardian is available when appropriate.

    a. Priority Population:
        1. Pregnant injecting drug users
        2. Pregnant substance abusers
        3. Injecting drug users
        4. Women with Dependent Children
        5. Persons with HIV/AIDS, or Hepatitis-C if physically able to participate in the treatment program.

7. LIFT CAA does accommodate persons with special needs. The facility is handicap accessible it is LIFT CAA's mission to provide services for all who are eligible for our services regardless of handicap, or any other persons with special needs.

8. The Intake Coordinator conducts intakes of new consumers, completing required paperwork. Assessments, including the ASI, Biopsychosocial, Integrated Summary, Individual Treatment Plan and ASAM are conducted by a LMHP. Exception: The ASI may be administered by a staff member having had the two-day ASI training

by a certified trainer in 2002 or more recent.

a) Oklahoma Department of Mental Health & Substance Abuse Services Consumer Data Core Form (CDC)
b) Initial Contact Form
c) OMHIS Information
d) Initial Adult ASAM Intake Placement Assessment
e) Biopsychosocial Assessment
f) Clinical Assessments
    1. Bio/psycho/social Assessment (ASI Addendum)
    2. ASI
    3. ODASL
g) Consumer Rights
h) Mental Status
i) Educational Session on HIV/AIDS
j) Synopsis of Consumer Bill of Rights
k) Verification of Consumer Orientation
l) Statement of Handbook
m) Grievance Form
n) Southern Oaks Gambling Screen (SOGS) (Interpretation by LMHP)
o) 5 A's tobacco screening
p) Consent Forms:
    1. Consent for Treatment
    2. Consent for Release of Confidential Information in Criminal Proceedings if applicable
    3. Client Notification of CRF-42
    4. Consent for Drug Screening
    5. Release From Responsibility for Personal Injury/Personal Property
    6. Consent for Follow-Up
q) Initial Treatment Plan which includes the following information:

    1. **Presenting challenges, problems and diagnosis**
    2. **Strengths, needs, abilities, and preferences of the consumer**
    3. **Goals for treatment with specific, measurable, attainable, realistic and time limited objectives**
    4. **Type and frequency of services to be provided**
    5. **List primary person (s) responsible for providing services**
    6. **Description of consumer's involvement in, and responses to, the service plan and his/her signature and date.**
    7. **Individualized discharge criteria, and beyond that which may be stated in the ASAM criteria**
    8. **Projected date for a planned service plan review/update**
    9. **Barriers that impact treatment**
    10. **Readiness to change**
    11. **Expected date of discharge.**

9. The Intake Coordinator or assignee will present an orientation to familiarize the consumer with rules and regulations and the therapy schedule. Orientation will be provided in a timely manner, based on the person's presenting condition and the type of services provided. It will be understandable to the person served and it will be documented. Each admitting consumer shall complete an Intake packet and shall receive an Orientation Packet, including, but not limited to, the following as applicable:

    a. An explanation of:
        (1) The rights and responsibilities of the persons served.
        (2) Complaint and appeal procedures.
        (3) Ways in which input can be given.
        (4) The organization's:

(i) Confidentiality policies and privacy practices
(ii) Intent/consent to treat
(iii) Behavioral expectations of the person served
(iv) Transition criteria and procedures
(v) Discharge criteria
(vi) Response to identification of potential risk to the person served.
(vii) Access to after-hour services
(viii) Standards of professional conduct related to services
(ix) Requirements for reporting and/or follow-up for the mandated person served, regardless of his or her discharge outcome.

(5) Privacy practices
(6) Any and all financial obligations, fees, and financial arrangements for services provided by the organization.
(7) The program's health and safety policies regarding:
(i) The use of seclusion and restraint.
(ii) Use of tobacco products.
(iii) Illegal or legal substances brought into the program.
(iv) Prescription medication brought into the program.
(v) Weapons brought into the program.
(8) The program rules and expectations of the person served, which identifies the following:
(i) Any restrictions the program may place on the person served.
(ii) Events, behaviors, or attitudes and their likely consequences.

b. Familiarization with the premises, including emergency exits and/or shelters, fire suppression equipment and first aid kits.
c. Education regarding advance directives, when indicated.

10. Records on consumers requesting services. The same procedure that applies in ODMHSAS policy (Consumer Records, Storage, Retention and disposal 450:18-7-4) applies here. The initial screening form is placed in the Intake Coordinator's office while on the waiting list; in the consumer's chart if/when admitted; and moved to a locked file in the records storage room if not admitted.

11. No person will be determined ineligible based on the following factors

1. The consumer's past or present mental health issues, substance abuse issues or co-occurring disorder issues
2. The presumption of the consumer's inability to benefit from treatment;
3. The specific substance used by the consumer;
4. The consumer's continued substance use
5. The consumer's level of success in prior treatment episodes.

12. A consumer's refusal of a particular service does not preclude the consumer from accessing other needed mental health or substance-related or addictive disorder treatment services.

Lift Community Action Agency

4-00-01
ODMHSAS 450:18-7-23 18-7-24
ODMHSAS 450:18-7-27
Biopsychosocial assessments are in-person interviews conducted by professionally trained personnel and are designed to elicit historical and current information regarding the behavior and experiences of a consumer, and are designed to provide sufficient information for problem formulation, intervention planning, case management needs, and formulation of appropriate substance abuse-related treatment and service planning.

PROCEDURES:

A. Trained professional personnel will complete the Biopsychosocial Assessment/Addendum to the ASI, by the fourth (4^{th}) visit for outpatient.
The Assessment contains, but is not limited to:

1. Presenting issues from perspective of person served
2. Urgent needs, including:
   a. Suicide risks (LIFT CAA does with the ASI)
   b. Personal safety
   c. Risk to others
3. History of presenting problem
4. Previous treatment history, which includes mental health, substance abuse, domestic violence and sexual abuse and diagnostic and treatment information.
5. Physical health issues, including:
   a. Health history
   b. Current health needs
   c. Current pregnancy and prenatal care
6. Alcohol, tobacco and drug use history
7. Use of complementary health approaches.
8. Experienced or witnessed violent behavior and domestic violence experiences, abuse and/or sexual assault, neglect and trauma.
9. Family and social history, including family history of alcohol/drug use
10. Educational attainment, difficulties, history and future goals
11. Cultural/religious orientation
12. Vocational/occupational/military history
13. Sexual history, including HIV/AIDS and STD at-risk behaviors
14. Marital/significant other relationship history; relationships including families, friends, community members and other interested parties.
15. Recreational/leisure history and future goals
16. Legal history/involvement
17. Present living arrangement and life situation, to include age and gender, sexual orientation and gender expression.
18. Economic resources
19. Level of functioning
20. Need for and availability of current support system, including peer, social and other recovery supports
21. Medication history and current medications, if applicable (to record a consumer's current medications, efficacy of current/ prior medications include obtainable information regarding the name of prescribing physician, name of medication, strength and dosage, and length of time consumer was on the medication, allergies or adverse reactions to medication).
20. Strengths, needs, abilities, and preferences.
22. Consumer's goals and expectations in terms of service
23. Assessment summary or diagnosis, and signature of the assessor and date of the assessment.
24. Need for assistive technology in provision of services
25. Co-occurring disabilities, disorders, and medical conditions.
26. Advance directives, when applicable.
27. Psychological and social adjustment to disabilities and/or disorders.

28. Resultant diagnosis(es), if identified.
29. Mental Status

B. The assessment process begins at the time of first contact with the agency. Assessments may include information from consumer's family members and/or legal guardian and other collateral sources when applicable or permitted. Information may be obtained from external sources when the need for specified assessments not able to be provided by the organization is identified.

C. Client will participate in assessments and treatment planning to welcome and engage client in treatment services. Client will be offered feedback on assessments to explain benefits of treatment and encourage a positive treatment experience.

D. A trained professional will administer and complete the following assessments during the time frame shown, upon the consumer's admission into the facility.

1. Addiction Severity Index (ASI) – within 2 visits
2. URICA – completed date of intake
3. Biopsychosocial – within 4 visits for outpatient
4. ASAM – within 1visit for outpatient
5. Interpretive Summary – within 4 visits for outpatient
6. Mental Status – within 4 visits for outpatient

E. All assessments are then given to the assigned counselor for review and assessed for the consumer's treatment service plan. Results are communicated to the person served, legal guardian when applicable and others as appropriate.

F. Assessment is an on-going process throughout the consumer's treatment services, is responsive to the changing needs of the person served and documented in progress notes, treatment plan/update. Significant life or status changes of person served is reflected.

G. Assessments provide the basis for legally required notification when applicable.

1. Child protective services
2. Probation/Parole Officers
3. Department of Corrections (Community Sentencing)
4. Referring courts

H. LIFT CAA uses the Adult Severity Index (ASI) with an addendum Biopsychosocial addendum as outlined by the ODMHSAS.

I. An ASI is completed every six (6) months on active clients.

J. Assessments are conducted by qualified personnel:
1. Knowledgeable to assess the specific needs of the person served,
2. Trained in the use of applicable tools, tests or instruments, prior to administration.
3. Able to communicate with the persons served.

K. When assessment results in a diagnosis(es), the diagnosis is determined by a practitioner legally qualified to do so in accordance with all applicable laws and regulations.

Lift Community Action Agency

5-00-00

450: 18-7-61. 62. 63

Policy: It is LIFT CAA's LLC belief that case management is an essential element during the treatment process, which enhances the consumer's potential for successful recovery. The organization provides for coordination and ongoing communication between internal and external service providers. Case management services are designed to address areas of consumer's life that, if not addressed, often contribute to relapse. Case management services facilitate the consumer's ability to empower oneself by developing self-determined goals and the potential for a successful re-integration into community living. Either the primary service provider or certified Case Manager may provide case management services.

PROCEDURES:

A. Persons served are linked and referred to services and resources to achieve objectives as identified in their person-centered plan. Case management efforts shall empower consumers to access and use needed services and meet self-determined goals. These services include resource skills development consumer advocacy provided in various settings based on consumer need. Contact with consumers shall be made on at least a monthly basis unless otherwise specified in the service plan.

1. When requested, the Case Manager and/or Primary Counselor will act as advocate for the consumer (in person or in writing) and/or give support for, though not limited to, the following:

   a. Court dates with the consumer;
   b. Medical appointments;
   c. DHS consultations or court hearings.

2. When multiple case management providers exist:

   a. A primary case manager is identified.
   b. There is coordination to:
      (1) Facilitate continuity of care.
      (2) Reduce duplication of services.

B. As allowed per Title 43A O.S. Section 3-318, case management services shall be offered to all consumers who have substance-related disorders and to their family members, if applicable, to ensure access to needed services.

C. Case management shall be co-occurring disorder capable.

D. Case management services shall be planned referral, linkage, monitoring and support and advocacy assistance provided in partnership with a consumer to support that consumer in self-sufficiency and community tenure.

Activities include:

1. Outreach to encourage the participation of the persons served.

2. Completion of strengths based assessment for the purpose of individual plan of care development, which shall include evidence that the following were evaluated:
   a. Consumer's level of functioning within the community;
   b. Consumer's job skills and potential; and/or educational needs;
   c. Consumer's strengths and resources;
   d. Consumer's financial needs;
   e. Consumer's legal needs;
   f. Consumer's present living situation and support system;
   g. Consumer's use of substances and orientation to changes related to substance use;
   h. Consumer's medical and health status;
   i. Consumer's needs or problems which interfere with the ability to successfully function in the community; and
   j. Consumer's goals.

3. Development of case management care plan which can be reflected as a part of the comprehensive service plan.

4. Referral, linkage and advocacy to assist with gaining access to appropriate community resources.

5. Contacts with other individuals and organizations that influence the recipient's relationship with the community, i.e. family members, law enforcement, personnel, landlords, etc.

   a. The Case Manager/Counselor will meet with the consumer during the intake process where the client will determine if there are any immediate needs as listed, but not limited to: i.e. calls and/or letters written to verify to DHS, court, Probation and Parole and/or family that she/he is currently in treatment, appointments with physician, dentist, or mental health services; clothes, toiletries; family or legal matters that demand immediate attention. The Case Manager/Counselor will need a signed "Release of Information" form from the consumer before contact is made with any provider, organization or family/friend.

   b. With the permission of the persons served, personnel provide advocacy by sharing feedback regarding the services received with the agencies and organizations providing the services.

6. Monitoring and support related to the individual plan of care to reassess goals and objectives and assess progress and/or barriers to progress.

7. Follow-up contact with the consumer if they miss any scheduled appointments (including physician/medication, therapy, rehabilitation or other supportive service appointments as delineated on the service plan).

8. Crisis diversion (unanticipated, unscheduled situation requiring supportive assistance, face-to-face or telephone, to resolve immediate problems before they become overwhelming and severely impair the \ individual's ability to function or maintain in the community) to assist consumer(s) from progression to a higher level of care.

   a. The Case Manager will work with the Primary Counselor and Clinical Director/Supervisor to determine the immediacy of consumer's request (if any). If it is determined the consumer has a request requiring immediate attention, the Case Manager will assist the consumer to see that the request is met. If the Case Manager is not available and the need is immediate, then the Primary Counselor will assist the consumer in the request.

9. In collaboration with the person served, identifies the person's natural supports and assists the person to develop and utilize his or her natural supports.

E. Within the first seven (7) days, or prior to completion of the Comprehensive Treatment Plan, the Case Manager will meet with the Consumer to complete a Case Management Assessment (see forms section). The Case Management Needs Assessment/Referral will include, but is not limited to the following:

1. Medical, dental, pharmaceutical and other health care status/services;
2. Psychiatric and Psychological Services;
3. Violence and domestic violence services;
4. Family and significant other counseling services;
5. Educational services/needs, including vocational rehabilitation services
6. Employment services;
7. Social Services, including supplemental income and food and public housing;
8. Legal services;
9. Recovery self-help fellowships;
10. Parenting and child development education;
11. Continuing substance abuse treatment at a lesser level of care;
12. Smoking cessation assistance

F. The intensity of case management is based on the needs of the person as identified in his/her person-centered plan.

G. The Case Manager will provide linkage, referral, monitoring and support, and advocacy to assist the consumer during the treatment process to assure all above needs are met during treatment and before discharge and to support consumer in self sufficiency and community tenure.

H. The Case Manager will have posted hours each week for availability to consumers.

I. Assistance is provided with securing safe housing that is reflective of the needs, abilities and preferences of persons served.

J. Case management services include the provision of, or linkage to, skill development services needed to enable the person served to perform daily living activities, including, but not limited to budgeting, meal planning, personal care, housekeeping and home maintenance and other identified needs:

K. The Case Manager will meet with the Consumer within 7 days of discharge and develop an aftercare plan and make all necessary referrals to local community agencies. The Case Manager will work with Community Providers and Organizations throughout the community and counties to assist consumers in meeting all their needs.

L. The Case Manager/Counselor will be responsible to document case management services in the progress notes and treatment records when services are provided will be documented on case management form.

M. Peer support is available through AA/NA meetings held. A list of meetings will be provide to clients.

Lift Community Action Agency

5-00-01

LIFT CAA employees providing case management services shall meet requirements pursuant to OAC, Title 450, Chapter 50.

Procedure:

A. Individuals providing case management services shall be an LBHP, Licensure Candidate, CADC or certified as a behavioral health case manager.

B. Documentation shall be filed in personnel records.

C. Personnel providing services have a working knowledge of the:

1. Services that are appropriate for the needs of the persons served.

2. Support systems that are relevant to the lives of the persons served.

Lift Community Action Agency

4-00-02

LIFT CAA. shall provide individualized service planning as an ongoing process by which a clinician and the consumer identify problems, established agreed upon goals, and decide on the treatment process and/or methods and resources to be utilized. All programs, services, and opportunities shall be provided without discrimination based on race, creed, national origin, sexual orientation or religion.

PROCEDURES:

1. Service Planning

B. The consumer will meet with an assigned counselor no later than the four (4th) visit for Outpatient Programs to develop and implement an individualized service plan. The service plan is performed with the active participation of the consumer and a support person or advocate, if requested by the consumer. The service plan shall address the following:

1. **Presenting challenges, problems and diagnosis**
2. **Strengths, needs, abilities, and preferences of the consumer**
3. **Goals for treatment with specific, measurable, attainable, realistic and time limited objectives**
4. **Type and frequency of services to be provided**
5. **List primary person (s) responsible for providing services**
6. **Description of consumer's involvement in, and responses to, the service plan and his/her signature and date.**
7. **Individualized discharge criteria, and beyond that which may be stated in the ASAM criteria**
8. **Projected date for a planned service plan review/update**
9. **Barriers that impact treatment**
10. **Readiness to change**
11. **Expected date of discharge.**

C. The service plan is developed after and based on information obtained in the assessment and includes the evaluation of the assessment information by the clinician and the consumer, said evaluation considering the consumer's presenting problems and/or diagnosis, desires, strengths, needs, abilities, and preferences, intake assessments, Biopsychosocial Assessment, and expectations of the consumer's recovery.

D. Individualized service plans will have problem formulations, long-term goals and measurable objectives, which are time-framed, consumer's strengths and needs, discharge criteria, and plans to meet post-treatment needs. It is focused on the integration and inclusion of the person served into their community, the family when appropriate and other needed services. It must have an overall general focus on recovery which may include goals like employment, independent living, volunteer work or training.

Lift Community Action Agency

E. The interpretive summary is used in the assessment process. It is based on the assessment data, identifies co-occurring disabilities, co-morbidities, and/or disorders and is used in development of the person- centered plan.

F. **The service plan will be dated and signed by the responsible Licensed Mental Health Professional, consumer and other treatment team members.**

G. The service plan is communicated to consumer and family, if requested, in a manner that is understandable and involves the family/legal guardian of the person served, when applicable or permitted.

1. A welcome letter is provided to consumers, strongly encouraging family therapy/education.

H. Each consumer may be given the service plan without regard for consents.

I. The following components shall be included in the person-centered plan:

1. Goals that are:
   a. Expressed in the words of the persons served
   b. Reflective of the informed choice of the person served or parent/guardian
   c. Appropriate to the person's culture and ethnicity
2. It shall contain specific service or treatment objectives that are:
   a. Reflective of the expectations of:
      1. The person served
      2. The treatment team
   b. Reflective of the person's development
   c. Responsive to the person's disabilities/disorders or concerns
   d. Appropriate to the treatment setting
3. Identification of specific treatment interventions, modalities and or services to be used.
4. Frequency of specific treatment interventions, modalities and or services.
5. When applicable, information on, or conditions for:
   a. Transition to other community services.
   b. Community-based service options available for persons in long-term residential support programs.
   c. Any needs beyond the scope of the program.
   d. Referrals for additional services.
   e. Available aftercare options, when needed.
6. When applicable, identification of:
   a. Legal requirements, appointments, sanctions and/or court notifications
   b. Legally imposed fees

J. When assessment identifies a potential risk for dangerous behaviors, a personal safety plan:

1. Is completed:
   (a) With the person served
   (b) As soon as possible after admission

2. Includes:
   (a) Triggers
   (b) Current coping skills
   (c) Warning signs
   (d) Preferred interventions necessary for:
      (1) Personal safety
      (2) Public safety
   (e) Advance directives, when available.

K. When the person served has concurrent disorders or disabilities and/or co-morbidities:

1. The person-centered plan specifically addresses these conditions in an integrated manner.
2. Services are provided by personnel, either within the organization or by referral, who are qualified to provide services for persons with concurrent disabilities and/or disorders.
   (a) Carl Albert Mental Health.

L. If services are provided to persons who have intensive medical needs:

1. The person-centered plan specifically addresses how services will be provided in a manner that ensures the safety of the person served.
2. Services are provided in accordance with all regulatory requirements.
   (a) Medicaid rules

2. Treatment Team Staffing

A. Meet with participants monthly (more often if necessary) and document the attendance of participants and results of meetings.
B. Review progress, or lack of, toward objectives/goals.
C. Address new problems.
D. Discuss satisfaction and/or problems with program

3. Team members, in response to the needs of the persons served:

A. Help empower each person served to actively participate with the team to promote recovery, progress or well-being.
B. Provide services that are consistent with the needs of each person served through direct interaction with that person and/or with individuals identified by that person.
C. Are culturally and linguistically competent.

4. ASI Lite

A. Conducted or obtained with each person leaving treatment to monitor progress since admission.
B. Reassessments are conducted or obtained every 6 months or more often, on an as needed basis.

Lift Community Action Agency

4-00-03

LIFT CAA adheres to time frames for completion of service plans from the date and time of admission.

PROCEDURES:

A. Comprehensive service plans shall be completed according to the time frames outlined below:

1. Outpatient services, sixth (4^{th}) visit
2. Outpatient service plan updates should occur at a minimum of every six (6) months

Lift Community Action Agency

4-00-04

18-7-101

LIFT CAA LLC shall maintain case records containing written progress notes documenting all treatment and services provided; outcomes of the treatment and services; and other pertinent information regarding the consumer's observed conditions or changes in condition.

PROCEDURES:

A. The case record shall contain chronologically recorded progress notes describing the services provided, the consumers response to the services provided and the consumer's progress in treatment.

B. Progress notes, unless defined otherwise by level of care, shall address the following:

1) Specific service plan needs, goals and/objectives addressed during session and any new needs, goals and/or objectives identified during the session.
2) Service provided to address needs, goals and/or objectives, and outcome.
3) Consumer/family response, if applicable.
4) Other information as judged appropriate.
5) Types of therapy models used (for individual counseling only).
6) Assessment and planning.
7) Interventions.
8) Movement to other levels of care
9) Significant events or changes in life of person served
10) Delivery and outcome of services & specific interventions that support the person-centered plan
11) Progress or barriers to progress made in treatment as it relates to goals and/or objectives.

B. Legible, dated and signed entries by individual counselors, consultations and follow-up reports are incorporated into the progress notes. The progress notes shall include family involvement/response, when appropriate. The progress notes shall reflect any changes in the current treatment plan through a treatment plan update note explaining any changes. The progress notes will also document transfers to a different level of care, progress or lack of, and any other information as deemed necessary by the clinician.

C. Records (Progress Notes) shall document the start and stop time, frequency and the amount of time spent providing each treatment service.

D. Progress notes shall be signed and dated, include consumer's name, name of the service provider and credentials of service provider.

E. All Clinical Staff (Primary Counselors, Intake Staff, and Clinical Supervisor) are responsible to record progress notes in all areas of services, i.e., individual therapy, group therapy, educational groups, family sessions, individual rehab, group rehab and Quarterly Staff Treatment Team Meetings and etc.

F. All progress notes are to be turned in for filing within twenty-four (24) hours of group or session held.

G. Progress notes in the consumer's records shall clearly reflect case management assessments, plans, post-treatment arrangements and implementation of plans, community resources and assistance in accessing those resources, and implementation of the treatment plan and services provided, in addition to the consumer's response to treatment and case management follow-up.

H. Documentation that each consumer has received a minimum of required therapeutic services for that specific program each week or reflected on treatment plan. If client is absent from session information only note should document reason for not attending :

1) Outpatient Program hours are computed as deemed by the individuals treatment plan.

I. Outpatient groups and individual sessions should include minutes of the session with start and stop time, and consumer staff ratio.

J. All outpatient visits or transactions require documentation, including missed appointments and except for assessment completion or service plan development.

Lift Community Action Agency

4-00-05
450:18-7-121
POLICY:

LIFT CAA LLC begins discharge planning at admission and uses The Treatment Plan/Discharge Assessment Form to determine consumer's ASAM Patient Placement Criteria dimensional continued need for treatment services and developing a plan to address ongoing consumer recovery needs.

PROCEDURE

After the admission criteria for a given level of care have been met, the criteria for discharge or transfer from that level of care is as follows: It is appropriate to transfer or discharge the consumer from the present level of care if he or she meets the following criteria:

____1. The patient has achieved the goals articulated in his or her individualized treatment plan, thus resolving the problem(s) that justified admission to the present level of care: OR

____2. The patient has been unable to resolve the problem(s) that justified admission to the present level of care, despite amendments to the treatment plan. Treatment at another level of care or type of service therefore is indicated; OR

____3. The patient has demonstrated a lack of capacity to resolve his or her problem(s). treatment at another level of care or type of service therefore is indicated; OR

____4. The patient has experienced an intensification of his or her problem(s), or has developed a new problem(s) and can be treated effectively only at a more intensive level of care.

To document and communicate the patient's readiness for discharge or need for transfer to another level of care, each consumer shall be assessed using current ASAM criteria that includes a list of symptoms for all six dimensions and each of the levels of care to determine a clinically appropriate placement in the least restrictive level of care. This organized process involves a professional determination for appropriate placement to a specific level of care based on the consumer's severity of symptoms and current situations. EACH OF THE SIX DIMENSIONS MUST BE REVIEWED. If the criteria apply to the patient's existing or new problem(s), the patient should be discharged or transferred, as appropriate. If not, refer to Continued Service Criteria.

Lift Community Action Agency

4-00-06
18-7-122
18-7-123
LIFT CAA begins discharge planning at admission; and uses the ASAM Placement Criteria for discharge to assess if the consumer is ready for discharge. All consumers will have a continuing care plan completed within 7 days of being discharged.

PROCEDURES:

I. LIFT CAA shall assist consumers obtain services that are needed, but not available within the agency, and/or in transitioning from one level of care to another, and/or discharging from a facility. The written transition plan is prepared or updated to ensure a seamless transition when a person served is transferred to another level of care or an aftercare program and prepares for a planned discharge.

(a) A written plan of recommendations and specific referrals for implementation of continuing care services, shall be prepared for each consumer. These plans are developed with the knowledge and input of the consumer. The consumer's response to the continuing care plan shall be noted in the plan, or a note shall be made that the consumer was not available and why. When clinically indicated transition planning is initiated with the person served at the earliest possible point in the individual planning in the service delivery process. This plan:

(1) Identifies the person's current:
   a. Progress in his/her own recovery or move toward well-being.
   b. Gains achieved during program participation.
   c. Strengths
   d. Needs
   e. Abilities
   f. Preferences

(2) Is developed with the input and participation of:
   a. The person served
   b. Family or legal guardian when permitted or applicable
   c. A legally authorized representative when appropriate.
   d. Personnel, team members
   e. The referral source when appropriate and permitted
   f. Other community services when appropriate and permitted.

(Individuals who participate in the development of the continuing care plan may receive a copy of the plan, when beneficial to the person served and when permitted.)

(3) Includes medication information when applicable.
(4) Includes referral source information such as contact name, telephone number, locations, hours and days of service, when applicable.
(5) Includes communication of information on options available if symptoms recur or additional services are needed.

(b) The discharge plan is formulated with the consumer within 4 visits for the outpatient consumers and is a part of the consumer's treatment plan. No more than 7 days prior to discharge, a continuing care plan is completed on each consumer where they receive case management for appropriate referrals, if needed, and are linked with these referrals, if so desired. LIFT CAA will ensure, as appropriate, consumers are provided with information to ensure they have options and can make informed decisions to move to community-integrated settings, if desired. The discharge summary shall be entered in each consumer's record within fifteen (15) days of discharge and the consumer will be provided with a copy of the continuing care plan.

(c) The discharge summary shall minimally include, but is not limited to, the following:

(1) Date of admission;
(2) Identified needs, at intake;
(3) Initial condition and condition of consumer at discharge;
(4) Medication summary, when appropriate;

(5) Describes extent to which established goals and objectives were achieved;
(6) Treatment and services provided, and a summary of treatment outcomes and results;
(7) The continuing care plan, identifying the person's need for support systems or other types of services that will assist in continuing his or her recovery or well being, including recommendations and referrals
(8) The final assessment; (treatment summary);
(9) Primary Counselor completing the summary and Clinical Supervisor's signature and date;
(10) ASAM discharge criteria;
(11) Consumer's response to Continuing Care Plan or reason for lack of response and consumer's signature and date; and
(12) Identifies the person's current:
  a. Progress in his/her own recovery or move toward well-being.
  b. Gains achieved during program participation.
  c. Strengths
  d. Needs
  e. Abilities
  f. Preferences
(14) Reasons for discharge.
(15) Date of discharge from the program.

(d) To facilitate seamless service delivery, LIFT CAA:
(1) Identifies resources for ongoing care of the person served.
(2) Engages and integrates referral resources into the program.

(e) When a person is transferred or discharged, the program identifies:
(1) A process to ensure coordination
(2) The person responsible for coordinating the transfer or discharge.

(f) The Primary Counselor or Case Manager will assist the consumer in developing the Continuing Care Plan and it will be recorded in the Discharge Summary. The Continuing Care Plan will include placement referral for continued care, identification of goals to be obtained, recommendations for services, i.e., substance abuse program, AA/NA, mental health services, vocation, employment, financial problems, legal services, sponsorship, and any other services deemed necessary.

(g) The consumer will give a response to the Continuing Care Plan, in which they developed with the assistance of the Primary Counselor/Case Manager. The consumer will sign and date.

(h) In the event of death of a consumer or if a consumer goes AWOL or leaves against counselor's advice, a summary statement including above information shall be documented in the summary

(i) Each consumer shall be given a copy of the discharge plan, which shall include scheduled appointments for the consumer, including the name of agency, address, the referral counselor who scheduled the appointment, the date of the appointment, and the time. The original plan will be placed in the consumer record and a copy will be sent to the referral agency with a Consent to Release Form signed and dated by the consumer and witnessed by the Primary Counselor/Case Manager.

(j) Prior to discharge each adult consumer will be given an Adult Severity Index Lite assessment or any other measurement assessments to measure progress made during treatment and services.

(k) Upon discharge the Primary Counselor will meet with the Treatment Team to review level of care, make recommendations and, assess consumer's progress.

(l) If a consumer appears to meet criteria for discharge to treatment completion, the Treatment Team will attempt to identify an appropriate referral and the Primary Counselor/Case Manager will assist the consumer in contacting the referral agency and arrange for transfer; or

(m) If the Treatment Team decides the consumer does not meet criteria for discharge then alternatives

will be discussed with the consumer. If the consumer and Team decide more treatment is needed, then the consumer and her Primary Counselor will complete a treatment plan/update. Referrals to another agency will be recommended for a different level of care. The Primary Counselor will assist the consumer in contacting the referral agency and arrange for transfer.

(n) When an unplanned discharge occurs, follow-up is conducted when possible.

1) Determine with the person served whether further services are needed.
2) Offer or refer to needed services, when possible.
3) Follow up should be documented in the consumer's file
4) To provide necessary notifications
5) Within 72 hrs.
6) Clarify reasons for the unplanned discharge

(o) When a person is discharged or removed from the program for rule violations or aggressive and/or assaultive behavior, follow-up occurs:

1) To ensure linkage to appropriate care.
2) Within 72 hours post discharge.

Under no circumstances will access to alternative services be hindered when a person is discharged or removed from the program for rule violation and/or aggressive/assaultive treatment.

(p) Unanticipated service modification, reduction, or exits/transitions precipitated by funding or other resource issues are addressed by:

1) Advocating for consumer with a request for an extension of treatment time from consumer's funding source. (ODMHSAS, DOC, Drug Court, Private Pay)
2) Continuing Care Plan, with referral to needed services, when possible, i.e. sober living, AA/NA, mental health services, outpatient, legal services, sponsorship, and other services as needed and available.

Lift Community Action Agency

4-00-07
18-7-141

Policy:

It shall be the policy of LIFT CAA to respond to the needs and expectations of clients and families and to provide the most competent service providers possible. To ensure the competence of certain services provided by LIFT CAA staff, consultants may be utilized as needed.

Procedure:

a. The consumer record shall contain copies of all consultation reports concerning the consumer.

b. When it is deemed necessary to utilize consultant services, a licensed, qualified person will be selected and a written agreement entered into prior to any service being provided.

c. Consultant fees will be determined by taking into consideration the nature of the services being provided, the qualifications of the consultant and the consultant's normal charges.

Lift Community Action Agency

4-00-08
18-7-142

Policy:
Consumer records shall contain a copy of written reports describing test results and implications or recommendations for treatment.

Procedure:

a. When psychometric or psychological testing is done, the consumer record shall contain a copy of a written report describing the test results and implications or recommendations for treatment.

Lift Community Action Agency

4-00-09
18-7-143

Policy:

LIFT CAA maintains consumer records in a confidential and privileged manner and information is not released except as allowed by applicable state and federal law.

Procedure:

a. The consumer record shall contain any additional information relating to the consumer, which has been secured from sources outside the approved treatment facility. The information obtained shall be confidential and privileged and may not be released except as allowed by applicable state and federal laws.

Lift Community Action Agency

1-00-07
18-9-2

LIFT CAA recognizes Clinical Supervision is a vital component of the provision of quality of substance abuse treatment. Clinical Supervision shall be an organized process by which knowledgeable and skilled supervisors systematically and routinely provide ongoing and in-depth review of direct service provider staff that addresses issues of ethics, legal aspects of clinical practices, and professional standards. Clinical Supervision will monitor counselor and consumer interaction and provide therapeutic techniques and theories to assist the counselor in meeting individual needs of each consumer. The Clinical Director will examine evidence-supporting diagnosis, offer resolutions for perplexing situations, monitor appropriate paper procedures for accuracy and content. Clinical supervision will be provided for therapeutic and educational groups regularly.

PROCEDURES:

A. Clinical supervision shall be provided for those delivering direct services and shall be provided by persons knowledgeable of clinical services. A Clinical Director must be licensed as Licensed Professional Counselor or Licensed Clinical Social Work, or Licensed Alcohol and Drug Counselor. The LIFT CAA Director is currently licensed in the clinical area(s) for which certification is granted.

   1. If both substance use disorder treatment and mental health treatment services are provided, the Director shall have evidence of dual license or additional training in the area for which they are not currently licensed.

   2. LIFT CAA's Director is employed to serve as Director a minimum of ten (10) hours per week.

B. The Director will coordinate Treatment Team Meetings to review consumers' progress for each program, at least weekly.

C. The Clinical Director and each Treatment Team Member will provide written and/or verbal information on observed behaviors of each consumer who is having a monthly and/or quarterly review and/or any consumer who is having problems or who have had successes. The consumer will be given opportunity to voice their concerns.

D. The Clinical Director will co-facilitate a therapeutic and/or educational group, and documentation thereof, for all direct treatment and service staff monthly in an ongoing clinical or direct service supervision which address the following:
   1. The appropriateness of treatment selected for the consumer;
   2. Treatment effectiveness as reflected by the consumers meeting their individual goals;
   3. The provision of feedback that enhances the clinical skills of direct service providers.
   4. Therapeutic techniques - ability to use them well and appropriately to help members work through conflicts and concerns.
   5. Empathy – demonstrate ability to adopt the internal frame of reference of a group member and communicate ability of being understood.
   6. Interpretation - ability to explain the meaning of behavior patterns within the framework of a theoretical system.
   7. Ethical Awareness – demonstrating awareness of and sensitivity to the demands of professional responsibility, legal aspects of clinical practice and professional standards, including boundaries.
   8. Cultural Awareness – understanding and being sensitive to consumer's ethnical heritage.
   9. Confrontation – measure the degrees to which counselor are able to confront members when they are engaging in behavior that is inconsistent with what they are saying. Use of respect and dignity.
   10. Modeling – ability to demonstrate behaviors that he/she wishes members to emulate and practice both during and after the session.
   11. Role direction – the ability to direct members to enact specific roles in role-playing.
   12. Perceptivity and insight - – the ability to sensitively and accurately extract the core meaning from verbal and nonverbal communication.
   13. Initiation – the skills to get interaction going among member or between leader and member.

14. Facilitation – the capability to help members clarify their own goals and take steps to reach these goals.
15. Diagnosis – the skill to identify specific areas of struggle and conflict within each member.
16. Expression – the ability to express thoughts and feelings directly and clearly to members.
17. Risk taking – able to risk making mistakes and to profit from mistakes.
18. Originality – the capability to have synthesized a personal approach from a variety of approaches to group leadership.
19. Group dynamics – the skill to help a group of people work together effectively.
20. Value Awareness – what degree is the group leader aware of his/her value system, aware of the members' value systems, and able to avoid imposing his/her values on the members.
21. Caring – the ability to communicate an attitude of genuine caring and concern for members.
22. Flexibility – the skills to change approaches to modify style and technique to adapt to each unique working situation.
23. Content orientation – capability to help members focus on specific themes in a structured group experience.
24. Cooperation as a co-leader – the ability to work cooperatively with a co-leader.
25. Respect – the skill to communicate an attitude of respect for the dignity and autonomy of members.
26. Awareness of self – what degree is the leader aware of his/her own needs, motivations, and problems, and to what degree does the leader avoid exploiting or manipulating members to satisfy these needs.
27. Application of theory to practice – the group leader should be able to appropriately apply a given theory to an actual group situation.
28. Active listening – the skill to actively and fully listen and to hear the subtle messages communicated by group members.
29. Assignment – the ability to direct the members to improve on existing behavior patterns or to develop new behaviors before the next group session.
30. Accuracy of assessment and referral skills.
31. Clinical documentation issues identified through ongoing compliance review.

E. The Clinical Director (Licensed Credentials) uses the "Clinical Supervision Form" to note observations. The Clinical Director will supervise one individual, educational or group therapy session per counselor each month.

F. The Clinical Director will complete the "Clinical Supervision Form" and meet with the Primary Counselor within a week of the observed group or session. The supervisory meeting is used to support and guide counselors in areas of strengths and weaknesses.

G. If improvement in areas of weaknesses is not shown, disciplinary action may be taken.

H. The ratio for Counselor-to-Consumer will be adequate to meet the needs of the persons served and achieve the outcomes predicted for each person served. When 35 persons are on caseload, referral will be made (see 3-01-00 for referral process) or additional staff will be hired or clinical supervisor will carry caseload until additional staff is hired.

I. In the absence of the Clinical Supervisor the Executive Director will perform weekly staff meetings, which address clinical matters.

J. Peer Reviews are conducted quarterly by the peer Review Committee. The Peer Review Committee is comprised of Director, Clinical Director, and other counselors.

K. The supervision of direct service personnel includes:
   a. Staff members
   b. Volunteers
   c. Trainees
   d. Interns
   e. Contractors
   f. The provision of feedback to enhance skills

L. Dealing with unplanned absences of direct personnel to ensure continuity of direct supports may be through
   1. Supervisor's participation in treatment planning meetings
   2. One on one meetings with supervisor and personnel

Lift Community Action Agency

6-00-00
18-11-1
18-11-3

Policy:

LIFT CAA is committed to protect and promote the rights of the persons served. LIFT CAA's objective is to assure that the persons served have a clear understanding of their rights, and that the organization communicates and shares these rights in a manner that is understandable to the persons served. Our commitment is a guide to delivery of services and ongoing interactions with the persons served.

Here at LIFT CAA all staff, volunteers, consumers, visitors, and the liaison with community and provider partners shall be under the jurisdiction of federal confidentiality regulations according to "Confidentiality of Alcohol and Drug Abuse Patient Records" (42 CFR, Part 2) and Federal HIPPA regulations. This policy will govern sets of records and data collection/processing information relative to alcohol/drug abuse here at Lift CAA. Confidentiality information is defined as personal facts or conditions pertaining to the consumer's life which the Consumers has communicated to staff of the facility, including the fact that the consumer has requested services or is participating in the program. LIFT CAA and other organizations relating to the program, acting in the scope and course of their duties, shall not divulge, nor shall they be required to provide, any specific information concerning Consumers being treated. Should any person or organization breach confidentiality; such information and any product thereof shall not be admissible as evidence to be considered in any criminal proceeding.

In addition, LIFT CAA is committed to promoting consumers confidentiality of information, privacy and freedom from abuse, exploitation, retaliation, humiliation, neglect as outlined below. It is LIFT CAA's responsibility to assure that our consumers are always treated with the highest respect and dignity to assure successful recovery.

II. Procedure:

1. General rights statement:

- **a. Consumers at LIFT CAA who receive mental health or drug or alcohol abuse services shall retain all rights, benefits and privileges guaranteed by the laws and Constitution of the State of Oklahoma and the United States of America, except those specifically lost through due process of law.**
- **b. Each consumer has the right to be treated with respect and dignity. This shall be construed to protect and promote human dignity and respect for individual dignity.**
- **c. Each consumer has the right to a safe, sanitary, and humane living environment.**
- **d. Each consumer has the right to a humane psychological environment protecting him or her from harm, abuse, and neglect.**
- **e. In addition to the rights described above, all persons receiving services from LIFT CAA through the Department of Mental Health and Drug or Alcohol Abuse Services shall have the same guarantee as above, that is referred to as the Mental Health and Drug or Alcohol Abuse Services Bill of Rights, unless an exception is specifically authorized by an order of a court of competent jurisdiction.**

2. Notification of the Bill of Rights:
   - **a. Each consumer, upon admission to LIFT CAA's program shall be notified of his/her rights. If the consumer is a minor, his/her parent or legal guardian shall also be informed. If the consumer has a court ordered guardian, the guardian shall be informed.**

b. The consumer and/or guardian will be provided with a synopsis as set forth in OAC 450:15-3-27 and, if requested the full Mental Health and Drug or Alcohol Abuse Services Bill of Rights, OAC 450:15-3-6 through 450:15-3-25. If the consumer cannot understand the language in the synopsis, an oral explanation of the synopsis shall be given in a language/cultural the person can understand, and the provision of the Mental health and Drug or Alcohol Abuse Services Bill of Rights shall be documented in the consumer's record and signed by the person giving the synopsis or explanation, and posting the synopsis of, or the full Mental Health and Drug or Alcohol Abuse Services Bill of Rights, in a conspicuous place in each consumer living area, and in area(s) of the facility receiving consumers, visitors and the public. LIFT CAA has postings of the synopsis and/or explanation of rights as listed in the Mental Health and Drug or Alcohol Abuse Services Bill of Rights on the consumer's bulletin board, in the living area, visitors and public rooms.

c. LIFT CAA does not have internal operating procedures more restrictive than the Department of Mental Health and Drug or Alcohol Abuse Services Bill of Rights. Every consumer shall be notified of LIFT CAA's and unit procedures with which he/she is expected to comply, and consequences for non-compliance.

d. Employees and volunteers shall be oriented regarding consumers' rights and the constraints of this Part.

e. Programs providing treatment or services without the physical custody or where consumers do not remain for round-the-clock support or care, or where the facility does not have immediate control over the setting where a consumer resides, shall support and protect the fundamental human, civil, and constitutional rights of the individual consumer. Each consumer has the right to be treated with respect and dignity and will be provided the synopsis of the Bill of Rights as listed below.

CONSUMER RIGHTS

Each consumer has the right to be treated with respect and dignity.

Furthermore:

Each consumer shall retain all rights, benefits, and privileges guaranteed by law except those lost through due process of law.

Each consumer has the right to receive services suited to his or her condition in a safe, sanitary and humane treatment environment regardless of race, religion, gender, ethnicity, age, degree of disability, handicapping condition or sexual orientation.

No consumer shall be neglected or sexually, physically, verbally, or otherwise abused.

Each consumer shall be provided with prompt, competent, and appropriate treatment; and an individualized treatment plan. A consumer shall participate in his or her treatment programs and may consent or refuse to consent to the proposed treatment. The right to consent or refuse to consent may be abridged for those consumers adjudged incompetent by a court of competent jurisdiction and in emergency situations as defined by law. Additionally, each consumer shall have the right to the following:

Allow other individuals of the consumer's choice participate in the consumer's treatment and with the consumer's consent;

To be free from unnecessary, inappropriate, or excessive treatment; To participate in consumer's own treatment planning;

To receive treatment for co-occurring disorders if present;

To not be subject to unnecessary, inappropriate, or unsafe termination from treatment; and

To not be discharged for displaying symptoms of the consumer's disorder.

Every consumer's record shall be treated in a confidential manner.

No consumer shall be required to participate in any research project or medical experiment without his or her informed consent as defined by law. Refusal to participate shall not affect the services available to the consumer.

A consumer shall have the right to assert grievances with respect to an alleged infringement on his or her rights.

Each consumer has the right to request the opinion of an outside medical or psychiatric consultant at his or her own expense or a right to an internal consultation upon request at no expense.

No consumer shall be retaliated against or subjected to any adverse change of conditions or treatment because the consumer asserted his or her rights.

ODMHSAS Office of Consumer Advocacy and ODMHSAS Inspector General E-Mail: AdvocacyDivision@odmhsas.org and InspectorGeneral@odmhsas.org Local: (405) 248-9037 Toll Free: (866) 699-6605 Reachout Hotline (800) 522-9054

3. Consumer Responsibilities:

    a. **Persons served have the responsibility to treat other persons served and employees with courtesy.**

    b. **Persons served have the responsibility to behave in such a way as to protect themselves and others from exposure to or transmission of any infectious or communicable disease, including diseases that are sexually transmitted.**

    c. **Person served have the responsibility to make their concerns known to LIFT CAA's staff and to ask questions when they require information from staff.**

    d. **Persons served have the responsibility to follow all of LIFT CAA's safety rules and posted signs.**

    e. **Persons served have the responsibility to keep scheduled appointments.**

Lift Community Action Agency

f. Persons served have the responsibility to attend services without the use of alcohol or illicit drugs.

WHAT ARE MY RIGHTS AND RESPONSIBILITIES?

As a consumer of services you have the right to:

- Be treated with respect
- Receive services in a safe & clean place
- Receive services regardless of your ability to pay
- Receive services no matter what your age, race, religion, sex, or disability
- Expect the people working with you to never physically or sexually abuse you or say hurtful things to or about you
- Have a treatment plan, made by you and the clinician that you agree to work on
- Refuse to participate in any kinds of survey or research
- Expect all information to be kept confidential unless you agree to release it
- Have your opinions about care heard and used to improve our services
- Receive help if you do not believe you are being treated fairly

As a consumer of LIFT CAA you have a responsibility to:

- Be courteous to other consumers and staff
- Relate your strengths, needs, abilities and preferences to your clinician as honestly and completely as possible
- Ask questions about anything you don't understand
- Inform your clinician should you have any special needs
- Actively participate in your treatment and in meeting your goals
- Inform your clinician if you wish to discontinue therapy
- Attend services alcohol and drug free

4. LIFT CAA shall provide ongoing training on the Bill of Rights and Consumer Responsibilities and the training will be documented and filed in the staff's file annually.

5. To ensure all consumers take every opportunity to enjoy their rights, we examine individual's diversity of culture, age, gender, sexual orientation, spiritual beliefs, socioeconomic status and language, and shall present the Bill of Rights considering the consumer's diversity and use methods of communication as follows, but not limited to, large print, verbal presentation, use of a representative for the person served, and consumer handbook.

6. The ODMHSAS Office of Consumer Advocacy, in any investigation or monitoring shall have access to consumer, facility records and facility staff as set forth in OAC 450:15-7-3.

7. Right to name a Treatment Advocate:

a. All of LIFT CAA's adult consumers being served by a licensed mental health professional (LMHP) shall be informed by the LMHP that he/she has the right to designate a family member or other concerned individual as a treatment advocate.

b. The consumer during the intake process and/or during any time of his/her treatment may appoint a Treatment Advocate and shall not be coerced, directly or indirectly, into naming or not naming a Treatment Advocate or choice of Treatment Advocate or level of involvement of the Treatment Advocate.

c. LIFT CAA shall not set any limitation on a consumer's right to communicate with his/her Treatment Advocate, accept to the extent that reasonable times and places will be established between the consumer, the counselor, and the Team Advocate.

d. The consumer will be given a Treatment Advocate Designation Form during intake or when requested by the consumer at any time during his/her treatment process to appoint a Treatment Advocate. The Treatment Advocate Designation Form includes the following:

   1) The consumer's choice to name or not a Treatment Advocate;
   2) Identify any specifically named person;
   3) Indicate the level of involvement the identified Treatment Advocate shall have.

   4) A space where the Treatment Advocate can indicate his/her intention of serving according to the consumer's specifications;
   5) An agreement that the Treatment Advocate will comply with all standards of confidentiality; and
   6) Both the signature of the consumer, consumer's counselor, and the Treatment Advocate.

e. LIFT CAA will accept verbal confirmation of the written information the proposal until such time as the Treatment Advocate can be present to sign the designated form.

f. The consumer may make changes or revoke the designation of a Treatment Advocate at any time and for any reason.

g. The original form will be filed in the consumer's chart and a copy given to the consumer and the Treatment Advocate.

h. The Treatment Advocate form shall be reviewed with the consumer during his/her treatment plan update/review to afford the consumer an opportunity for review and amendment.

8. Consumer grievance policy and procedures:

a. Grievance process for Outpatient consumers is as follows:

   1) All formal grievances will be presented in written form.
   2) Dionne Frankum, LCSW is the facility's local Grievance Advocate. Dionne Frankum is the decision maker for resolution of the grievance. The consumer shall complete and present the Grievance and Resolution Form and applicable attachment(s) to the Grievance Advocate, by handing the grievance to the Grievance Advocate, placing it in the locked box available for submitting grievances or mailing through USPS.
   3) If the Grievance Advocate is the subject of the grievance, then the consumer shall hand or mail the completed form to the ODMHSAS, who will act as Grievance Advocate in this instance and decision maker.
   4) The Grievance Advocate will have five (5) working days following the receipt of the grievance to initiate investigate, respond and offer resolution.
   5) If the grievance is resolved at this point, the grievance is filed in the Consumer Grievance chart kept in the Executive Assistant's Office and a copy of the written resolution is given to the consumer.

6) If a grievance cannot be resolved at the Grievance Advocate level, it may be presented to ODMHSAS for appeal and resolution within 24 hours of receipt.
7) The grievance process should take no longer than14 days following receipt of the grievance and written documentation presented to the client within twenty-four (24) hours of the final determination.
8) Grievances will be filed in the office of the Executive Assistant.

e. The Grievance Advocate is responsible for ongoing coordinating and monitoring the grievance procedure and advocating on behalf of the person filing the grievance to the decision maker for resolution of the grievance. Findings will be reported by the performance committee quarterly and annually to assist in quality improvement and to look at problem areas and help develop resolutions. The Director will review the trends in complaints and areas needing performance improvement.

f. Complaint resolution information will be provided to persons and/or families (if applicable) receiving services in a manner that is understandable to them, whether it be verbal explanation, language, large print, etc. Client will be advised that he/she also have the right to make a complaint directly or appeal to ODMHSAS Consumer Advocacy Division, at any time, through the Orientation Packet and posters throughout the building.

g. This policy shall be reviewed annually and revised as needed for improvement and copies of updated policy and procedure information provided to the Office of Consumer Advocacy when requested.

h. The designated local advocate shall be responsible for coordinating and monitoring the facility's advocacy activities and contacts with the ODMHSAS Office of Consumer Advocacy. Duties of the facility's local advocate shall include, but is not limited to:

A. Serve as the on-site advocate for consumers being treated or under the care of the program or facility and act as a liaison to the ODMHSAS Office of the Consumer Advocacy. Such activities may include:

1. Assist consumers in filing grievances;
2. Serve as resource for consumers for questions or information dissemination about the facility, admission and discharge processes or other basic human needs while in treatment; and
3. Make contact with consumers involved in or who witness Critical Incidents or Sentinel Events while in treatment to ensure needs are being met.

9. Right to access designated record set from LIFT CAA:

a. A consumer or the consumer's legally authorized representative has the right to access his/her health information in the designated record at LIFT CAA.

b. The process for a consumer or the consumer's legally authorized representative to request access to read or request copies of his/her record set is as follows:

1. The consumer shall obtain a "Consent for Release of Confidential Information Form" from the Records Clerk Officer. If the consumer request copies, then LIFT CAA will charge a fee of twenty-five (25) cents per page copied. The form is to be filled out in its entirety and submitted to the Records Clerk Officer.
2. If LIFT CAA does not possess the information the consumer requests but know where it is maintained, the Records Clerk Officer shall inform the consumer where to direct the request.
3. The Records Clerk Officer shall coordinate the request for access to the designated record set with the person in charge of the care and treatment of the consumer.

10. Denial of access to the designated record set from LIFT CAA:

    a. LIFT CAA may deny, in whole or in part, the designated record set under certain conditions. Some denials provide the consumer with a right to a review of the denial while others do not.

    b. The consumer does not have a right of review for a denial of access if the denial is made on the following bases:

        1. If LIFT CAA or other facility operated by ODMHSAS is acting under the direction of a correctional institution, and access to a copy of the information in the designated record set would jeopardize the health, safety, security, custody or rehabilitation of the consumer or other inmates, or the safety of any officer, employee or other person at the correctional institution or responsible for the transporting of the consumer.
        2. The information in the designated record set was obtained by LIFT CAA in the course of research that includes treatment of the research participants, while such research is in progress, provided the consumer has agreed to the denial of access in conjunction with the consumer's consent to participate in the research and LIFT CAA has informed the consumer the right of access will be reinstated upon completion of the research.
        3. The information in the designated record set was obtained under a promise of confidentiality from someone other than a health care provider and such access would be reasonably likely to reveal the source of the information.

    c. The consumer has a right of review for a denial of access if the denial is made on the following bases:

        1. A licensed mental health professional has determined, in the exercise of professional judgment, that access to the designated record set by the consumer is reasonably likely to endanger the life or physical safety of the consumer or another person;
        2. The requested designated record set makes reference to another person unless such other person is a health care provider and a licensed mental health professional has determined, in the exercise of professional judgment, that the access requested is reasonably likely to cause substantial harm to such other person; or
        3. The request for access is made by the consumer's personal representative and a licensed mental health professional has determined, in the exercise of professional judgment, that the provision of access to such personal representative is reasonably likely to cause substantial harm to the consumer or another person.

    d. In lieu of providing access to the designated record set, the facility may provide the consumer with a summary of the requested information, if the consumer agrees in advance to such a summary.

11. ODMHSAS action on consumer's request for access to the designated record set from LIFT CAA.

    a. ODMHSAS shall act on the request for access to the designated record set within the following periods:

        1. If the requested information from the designated record set is readily available, the

        Records Officer shall within thirty (30) days of the receipt of the request, inform the consumer of the approval or denial of the request, and if approved, provide the access to the designated record set; or

        2. If the requested information is not stored on LIFT CAA's premises, the Records Clerk Officer shall within sixty (60) days from receipt of request, inform the consumer of the approval or denial of the request, and if approved, provide the access to the designated record set.

b. If the Records Clerk Officer is unable to provide response within these timeframes, he/she shall send a letter to the consumer, which shall inform the consumer of the delay and state the date by which a response to the request will be provided. The deadline can be extended for no more than thirty (3) additional days and LIFT CAA may extend the deadline once per request for access.

c. If a decision is made to deny the request for access, the Records Clerk Officer shall send the consumer a letter stating the basis of the denial and, if applicable, providing a statement of the consumer's right for review of the denial and how to exercise such review of rights. The letter must also include a description of how the consumer may complain to the ODMHSAS Office of Consumer Advocacy or the U.S. Secretary of the Department of Health and Human Services.

12. Consumer's request for review of denial of access to the designated record set from LIFT CAA **.**

a. If LIFT CAA denies a request for access to the designated record set on the basis of one of the grounds for denial for which review is available, the consumer may initiate the review process by making a request for review of the denial in writing an submitting it to the ODMHSAS Office of Consumer Advocacy and ODMHSAS Inspector General E-Mail: AdvocacyDivision@odmhsas.org and InspectorGeneral@odmhsas.org Local: (405) 248-9037 Toll Free: (866) 699-6605.

b. The ODMHSAS Privacy Officer or designee shall select a licensed mental health professional, who did not participate in the original decision to deny access, to review the denial. This reviewer will complete the review within a reasonable period of time and forward his/her findings to the ODMHSAS Privacy Officer or designee. The reviewer's decision is final.

c. The Privacy Officer shall promptly inform the consumer by letter of the outcome of the review.

1) **If a decision is made to grant access, the letter will explain the process to fulfill the request for access.**
2) **If a decision is made to uphold the denial of access, the letter shall state the reason for denial.**

13. Right to request amendment of designated record set from LIFT CAA**.**

a. Except as provided herein, a consumer has a right to request an amendment of his/her health information in the designated record set from LIFT CAA operated by ODMHSAS for as long as LIFT CAA maintains the information (seven (7) years).

b. A consumer shall request the amendment in writing to the Records Clerk Officer and provide a reason to support the requested amendment.

c. **LIFT CAA shall have sixty (60) days to act on the request to amend the information, unless LIFT CAA sends the consumer a letter within the initial sixty (60) day period stating the time period will be extended up to an additional thirty (30) days, explaining the need and reasons for delay and providing a date by which the consumer can expect a decision**.

d. If LIFT CAA agree to the requested amendment, in whole or in part, it must:

1) **Make the amendment by, at minimum, identifying the affected records and appending or otherwise providing a link to the location of the amendment;**
2) **Timely inform the consumer the amendment is accepted;**
3) **Obtain the consumer's agreement to have the facility with which the amendment needs to be share. Relevant persons include:**

   (i) **Persons identified by the consumer as needing the amendment;**
   (ii) **Persons LIFT CAA identifies as having relied or could foresee ably rely on the un-amended information previously provided to them.**

4) **Make reasonable efforts to inform and timely provide the amendment to those persons.**

e. LIFT CAA may deny a request for amendment if it determines that one of the following reasons exists:

5) **The information that is the subject of the request was not created by the facility, unless the consumer can provide a reasonable basis to believe that the originator of the information is no longer available to act on the requested amendment.**
6) **The information that is the subject of the request is not party of the designated record set:**
7) **The information that is the subject of the request is accurate and complete.**

b. If LIFT CAA denies the amendment, in whole or part, it must:

1) **Provide the consumer with a timely denial, written in plain language and including:**

   (i) **The basis for denial;**
   (ii) **Notice of the consumer's right to submit a written statement of disagreement; and instructions on how to file the statement;**
   (iii) **A statement that if the consumer does not submit a statement of disagreement, the consumer may request LIFT CAA provide the consumer's request for amendment and the denial with any future disclosures of the designated record set;**
   (iv) **Notice that the consumer may complain about the decision to the ODMHSAS Office of Consumer Advocacy or the U.S. Secretary of the Department of Health and Human Services;**

2) **Permit the consumer to submit a one (1) page statement of disagreement;**
3) **Provide a copy of any rebuttal prepared to the consumer;**
4) **As appropriate, identify the part of the record subject to the disputed amendment and append or otherwise link the request, the denial, and any statement of disagreement or rebuttal to the record.**

5) For future disclosures of the designated record set, include any statement of disagreement or, in response to the consumer's request, the amendment request and the denial (or an accurate summary of either of the foregoing).

c. If LIFT CAA is informed by a healthcare provider or health plan, such as an insurance company, about an amendment to a consumer's information in the designated record set, LIFT CAA must amend the information in its record by, at a minimum, identifying the affected records and appending or otherwise providing a link to the location of the amendment.

d. LIFT CAA must document the titles of the persons of offices responsible for receiving and processing requests for amendments and maintain the list of a period of six (6) years.

1) In case of a satisfactory settlement is not reached, then the consumer may appeal the decision of the Board of directors by contacting the Office of Consumer Advocacy and ODMHSAS Inspector General E-Mail: AdvocacyDivision@odmhsas.org and InspectorGeneral@odmhsas.org Local: (405) 248-9037 Toll Free: (866) 699-6605. The consumer is presented with the Advocacy Division and phone number during the orientation process.

14. Right to request confidential communications from facilities operated by ODMHSAS**:**

a. LIFT CAA operated by ODMHSAS shall accommodate reasonable requests by a consumer to receive confidential communications from LIFT CAA by alternative means or at alternative locations.

b. Alternative means may include contacting the consumer by telephone.

c. Alternative locations may include an alternative address other than the consumer's home address.

d. To request alternative communication, the consumer must provide CDS with the request in writing and specify the alternative means or location.

15. Right to an accounting of disclosures from LIFT CAA as operated by ODMHSAS**:**

a. LIFT CAA, as operated by ODMHSAS does provide to consumers upon request, an accounting of disclosures of health information in the designated record set as provided below:

1) The consumer must make a written request to the Records Clerk Officer or ODMHSAS Privacy Officer.

2) LIFT CAA will provide an accounting disclosures made of the consumer's designated record set during a time period specified up

to six (6) years prior to the date of the request for an accounting except for disclosures:

(i) To carry out treatment, payment or health care operations as permitted under law;
(ii) To the consumer about his or her own information;
(iii) Authorized by the consumer;
(iv) To person involved in the consumer's care or other notification purposes permitted

under law;

(v) For national security or intelligence purposes;

(vi) To corrections officials or law enforcement officials as permitted under law; or

That are a part of a limited data set;

(vii) That are merely incidental to another permissible use or disclosure;

(viii) Which were made before April 14, 2003;

(ix) **In certain circumstances involving health oversight, LIFT CAA temporarily suspends the consumer's right to receive an accounting of disclosures.**

3) The accounting for disclosure must contain the following information for each disclosure:

(i) Date of disclosure;
(ii) Name of entity or person who received the information, and, if known, the address of such entity or person;
(iii) A brief description f the information from the designated record set disclosed; and
(iv) The purpose for which the disclosure was made;

2. If during the time period for the accounting, multiple disclosures have been made to the same person or entity for a single purpose, or pursuant to a single authorization, the accounting may provide information as set forth above for the first disclosure, and then summarize the frequency, periodicity, or number of disclosures made during the accounting period and the date of the last such disclosure during the accounting period.

3. LIFT CAA shall have sixty (60) days to act on the request for accounting of disclosures, unless the facility sends the consumer a letter within the initial sixty (60) day period extending the period for no more than an additional thirty (30) days.

The letter shall explain the reasons for delay and the date on which the accounting will be provided.

4. **The first accounting in any twelve (12) month period must be provided to the consumer without charge. A reasonable, cost-based fee may be charged for additional accountings within the twelve (12) month period, provided the consumer is informed in advance of the fee, and is permitted an opportunity to withdraw or amend the request.**

5. **LIFT CAA must document the following:**
   - **(i) All information required to be included in an accounting of disclosures of information from the designated record set;**
   - **(ii) All written accountings provided to consumers, and;**
   - **(iii) Titles of persons or offices responsible for receiving and processing requests for an accounting from consumers.**

16. **LIFT CAA shall provide ongoing training on the Bill of Rights and Consumer Responsibilities and the training will be documented and filed in the staff's file annually.**

17. **To ensure all consumers take every opportunity to enjoy their rights, we examine individuals diversity of culture, age, gender, sexual orientation, spiritual beliefs, socioeconomic status and language, and shall present the Bill of Rights taking into account the consumers diversity and use methods of communication as follows, but not limited to, large print, verbal presentation, use of a representative for the person served, and consumer handbook.**

18. The ODMHSAS Office or Consumer Advocacy and Inspector General, in any investigation or monitoring shall have access to consumer, facility records and facility staff as set forth in OAC 450:15-7-3.

19. Resident right to fee information:

   a. **To ensure that the residents have access to the information pertaining to LIFT CAA, a fee schedule is included in clients' intake packet. The Client completes an income verification form during intake. The Client is given a description of LIFT CAA's program in their handbooks, and LIFT CAA does not charge resident different rates for services and/or special programs. LIFT CAA obtains written consent from the Client, before accrual of costs.**

   b. **A Client or potential Client has the right to know why services are refused; and will be given a written explanation upon request, concerning the reason he/she was refused certain services.**

20. Procedures for treatment information at LIFT CAA:

a. LIFT CAA limits access to mental health and drug or alcohol abuse treatment information to only those persons or agencies (Court Ordered) actively engaged in the treatment of the consumer to the minimum amount of information necessary to carry out the purpose for the consumer.

b. Maintaining confidentiality of Consumers participation or request for services:

1) **The presence of a Consumer in treatment may be given only upon informed consent and written request of the consumer, specifying the person or agency to which the information is to be given. This consent is to be time-limited, content-specific and signed by the consumer and witness and signed by a staff member. A copy will be placed in the consumers chart and the consumer will be given a copy.**
2) **All staff shall be trained in" Confidentiality of Alcohol and Drug Abuse Patient Records" (42 CFR, Part 2) and HIPPA Privacy Act annually.**
3) **All staff shall sign a Statement of confidentiality following training on (42 CFR, Part 2).**
4) **All persons entering LIFT CAA will be required to read and sign a visitors "Statement of Confidentiality Form" (see form section).**
5) **All communication between a consumer and a psychotherapist and/or physician is privileged and confidential and will not be released without the written consent of the consumer or the consumers legally authorized representative.**

c. Access to confidential records:

1) **Consumer's records shall be maintained in locked filed cabinets within the locked office of the records room in the building at 17 S Central**
2) **Records removed from the secured area will require the staff's signature and the ICIS number of chart taken and shall be returned during the same day.**
3) **Records shall not be removed from the primary agency without written notification being provided to, and approval received from, the agency's Director. The staff person must notify the Director or designee upon the return of the records.**
4) **Current therapeutic staff of the agency shall have access to confidential records. All other staff shall have access only on a "need to know basis" approved by the Assistant Director.**
5) **Funding source monitors requiring pertinent program evaluation data upon showing proof of identification relating to their job capacity and binding to the oath of confidentiality monitoring.**
6) **Agency interns and/or practicum students may have access with supervisory approval and monitoring.**

7) **Consumers may have access to their particular case. Only information pertaining to that individual will be provided. No information received from other sources will be release. Personal access of present or former consumer to their records will be restricted in a manner conforming to 43A O.S. § 1-109, 3-422 and 3-343.**
8) **Referring agencies may have access with proper release of information.**
9) **Medical personnel in response to a medical emergency may have access.**

d. Disclosure of confidential records:

1) **Confidentiality may be waived by the consumers, providing such waiver is freely and voluntarily made, and with full prior knowledge as to the consequences thereof. The disclosure of confidential information shall be restricted to information, which is necessary to fulfill the specific need for the disclosure (see Consent for Release of Confidential Information form).**
2) **Upon informed consent and written request of the consumers, specifying the person or agency to which the information is to be given. This request is to be time-limited, content specific, and signed by the consumer.**

3) The consumer shall be informed that treatment services are no contingent upon, or influenced by, his/her decision to permit the information release. A copy will be given to the consumer and placed in their treatment chart.

4) Upon informed consent and written request of the consumer, disclosure may be made to other agencies that are involved in providing services to the consumer. This request is also to be time-limited, content-specific, and signed by the consumer. A copy will be given to the consumer and placed in their treatment chart.

5) Disclosure shall be made to appropriate agencies or persons when it is determined that there is a clear and present danger to the consumer or others and/or there is child abuse or neglect (10 O.S., § 7005 (1.7) and abuse of elderly or incapacitated adults (43 A O.S., §§ 7005 (1.1) through 7005 (1.3); or

6) Upon receipt of a court order signed by a presiding judge of a court of competent jurisdiction; or

7) Holders of contracts with ODMHSAS having signed a qualified service agreement (43A O.S., § 1-109 (A) (2), as provided by said contract. These facilities shall have policy and procedures to permit transmittal of records and information regarding the care and treatment of a specific consumer as necessary and appropriate between them and/or the ODMHSAS, and/or another contracted holder of a qualified service agreement.

8) Disclosure shall be made pursuant to a crime at the treatment program or against program personnel.

9) Disclosure shall be made pursuant to a crime at the treatment program or against program personnel.

10) No initial response will be made over the telephone, in person, or in writing that indicates the consumer is involved with the program until the appropriate written consents are in place.

11) In the event information is released without the consumer's consent when such release is proper and mandatory through the courts, the consumer will be informed in writing that such a disclosure has occurred and the reasons for such disclosure explained.

12) Any document release will be stamped with confidentiality from reading; "This information has been disclosed to you from records protected by Federal Confidentiality rules (42 CFR Part 2). The Federal rules prohibit you from making any further disclosure of this information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by (42 CFR Part 2). A general authorization for the release of medical or other information is NOT sufficient for this purpose. This information authorized for release may include records, which may indicate the presence of a communicable, or venereal disease, gonorrhea, and human immunodeficiency virus, also known as acquired immune deficiency syndrome (AIDS). The Federal rules restrict any use of the information to criminally investigate or prosecute any alcohol or drug abuse patient"

e. Federal Regulations:

1) With respect to drug and alcohol rehabilitation, education, and treatment, Federal law allows consent to disclosure to be given to a minor and does not require his parent or guardian's consent or authority to act on his behalf when, under state law, the minor child could apply for and obtain services.

2) A minor child 13 years or younger may not give his own consent to have his records divulged and requires his parent's or legal guardian's signature to execute the consent form in order that his records could be divulged.

3) Federal law and regulations do not protect any information about a crime committed by a consumer whether at the program or against any person who works for the program or about any threat to commit such a crime.

4) Federal regulations do not protect any information about suspected child abuse or neglect from being reported under state law to appropriate state or local authorities.

5) A woman has the right to control the release of confidential records and information pertaining to her infant or child (except as above, in case of child abuse, neglect, or commitment of any other crime). Release of confidential records requires written informed consent of

the parent or legal guardian and must meet all previously stated legal requirements.

f. The following information shall appear on the consent to release confidential information form (see form section):

1) **The name and address of the facility making the disclosure of information, and the name and title of the person completing the disclosure.**
2) **The name of the person, title (if any), and the name of the organization (if any) to which the information is begin supplied.**
3) **The name of the consumer and ICIS number.**
4) **The exact extent of information being disclosed.**
5) **The length of time the consent will remain valid unless otherwise revoked, in writing, by the consumer.**
6) **Signature of the consumer, or legal guardian, and the date of such signature.**
7) **For consumers who have been referred from the criminal justice system, the following shall be applicable:**
8) **The name and address of the facility making the disclosure of information, and the name and title of the person completing the information disclosure.**
9) **The name of the person, title (if any), and the organization to which the information is being disclosed.**
10) **The name of the consumer and ICIS number.**
11) **Date on which consent was signed**
12) **Statement that the consent is subject to revocation at any time except to the extent that the program has already acted on it.**
13) **The purpose and/or need for the disclosure.**
14) **The specific reason for the disclosure**
15) **LIFT CAA makes available to the consumer a statement of the right of the consumer, or the consumer's legally authorized representative, to revoke the consent to release in writing and a description of how the patient may do so (HIPPA)**
16) **LIFT CAA provides confidentiality notice which complies with state and federal law (HIPPA)**
17) **The extent, how much, and type of information being disclosed.**
18) **State a specified time, or the occurrence of a specified event, the consent, is revoked. In no event may this date be later than the final disposition of the criminal proceeding.**
19) **On each page of information released, in bold face type, shall be stamped, "The information disclosed may only be re-disclosed to carry out the recipient's official duties with regard to the consumers criminal proceeding in reference to which the consent to release confidential information was made by the consumer."**
20) **In bold face type, the statement, "The information authorized for release may include records which may indicate the presence of a communicable or venereal disease which may include, but is not limited to, hepatitis, syphilis, gonorrhea, and the human**

immunodeficiency virus, also known as acquired immune deficiency syndrome (AIDS) {63 O.S. § 1-1502 (B)}.

21) **The date on which the consent was signed.**
22) **The signature of the consumer or legal guardian.**

g. LIFT CAA adheres to strict policy and procedures protecting the confidential and privileged nature of mental health and drug or alcohol abuse treatment information in compliance with state and federal law and which contain at a minimum:

2) **LIFT CAA acknowledges that all mental health and drug or alcohol abuse treatment information, whether recorded or not, and all communications between a physician or psychotherapist and a consumer are both privileged and confidential and will not be released without the written consent of the consumer or the consumer's legally authorized representative;**
3) **LIFT CAA abides that the identity of a consumer who has received or is receiving mental health or drug or alcohol abuse treatment services is both confidential and privileged and will not be released without the written consent of the consumer or the consumer's legally authorized representative;**
4) **LIFT CAA limits access to mental health and drug or alcohol abuse treatment information to only those persons or agencies (Court Ordered) actively engaged in the treatment of the consumer to the minimum amount of information necessary to carry out the purpose for the release;**
5) **The consumer's legally authorized representative, may access the consumer's mental health and drug or alcohol abuse treatment information**

Lift Community Action Agency

6-00-01
18-13-02
Policy: LIFT CAA provides or refers for Human Immunodeficiency Virus (HIV), Sexually Transmitted Diseases (STD), and Acquired Immunodeficiency Syndrome (AIDS); education, testing and counseling services for drug dependent persons and their identified significant others.

Procedure:

A. LIFT CAA shall provide or refer for Human Immunodeficiency Virus (HIV), Sexually Transmitted Diseases (STD), and Acquired Immunodeficiency Syndrome (AIDS); education, testing, and counseling services for drug dependent shall:

1. Provide or refer for educational sessions regarding HIV/STD/AIDS to consumers and the significant other(s) of the consumer. Information is provided for clients and offered to significant others during, but not limited to, the following:

a. Upon screening for admission, unless refused
b. Upon admission to the facility
c. During intake
c. Regularly during Life Skills
d. Upon request
e. Other

2. Provide or refer all drug dependent persons, and their identified significant others for HIV/STD/AIDS testing and counseling. Available counseling and testing information is provided to clients for themselves and significant others. (See No. 1 above)

3. Provide documentation of services described in 1 and 2 above, including refusal of these services. Documentation may be found in:

a. Consumer records
b. Orientation Packet
c. Life Skill curriculum
d. Group notes

4. Maintain all test results in the confidential manner prescribed by applicable state or federal statutes or regulations.

Lift Community Action Agency

7-00-00
18-13-21
LIFT CAA shall provide outpatient services for men and women to provide professional diagnostic and primary alcohol and other drug abuse treatment services for consumers, and their families and significant others.

Procedure:

(a) LIFT CAA's outpatient services for men and women shall be organized non-residential services with scheduled treatment sessions that accommodate employed and parenting consumers' schedules, and offer treatment services during the day, evening, and weekends. Services shall be designed to provide a variety of professional diagnostic and primary substance-related and/or addictive disorder treatment services for consumers, and their families and significant others, whose emotional and physical status allows them to function in their usual environment. These services shall be designed either for consumers who do not require more restrictive levels of care or those consumers who require continuing services following more intensive treatment regimens.

(b) LIFT CAA shall maintain written programmatic descriptions and operational methods that addresses the following:

(1) Environment:

(A) LIFT CAA shall be publicly accessible and accommodate office space; individual and group counseling space, secure records storage, protect consumer confidentiality, and provide a safe, welcoming culturally, and age appropriate environment.
(B) Hours of operation shall be during regularly scheduled times in which services are accessible to consumers and the general public, including those employed between the hours of 8:00 a.m. and 5:00 p.m., Monday through Friday
(C) LIFT CAA provides services in locations that meet the needs of the persons served, at times and on days that meet the needs of persons served.
(D) LIFT CAA hours of operation are conspicuously displayed on the outside of the building on the door's entrance, with a twenty-four (24) hours service phone number in case of emergencies.

(2) **Support system**:

(A) LIFT CAA has an emergency preparedness plan (approved and signed by a physician for medical emergences; and an emergency medical number shall be posted for use by staff), and available specialized professional consultation or professional supervision. The emergency preparedness plan includes, but is not limited to the following:

(1) LIFT CAA employees will be trained in First Aid and CPR by an agency or individual certified to instruct individuals to provide said services. Employees will receive continuing training as necessary to maintain certification in First Aid and CPR. In addition, medical emergency telephone numbers (911) are posted in each office, corridor, bulletin boards, group rooms, and main entrances.

(2) All medical emergency training shall be documented in each employee's personnel record. Training shall be done on an annual basis unless otherwise indicated by the specific certification requirement.

(3) LIFT CAA has written documented annual service agreements, which include more intensive level of care for referrals and community resources, to be reviewed and updated annually. All service agreements will be reviewed and approved by the Executive Director and/or designee annually. Additional service agreements will be completed as additional service needs are identified. Service agreements will be

physically located in a file in the Executive Directors office. Copies of the service agreements and/or information necessary to initiate and provide services described in the service agreement will be available at LIFT CAA.

(3) Staff:

(A) LIFT CAA shall maintain documentation that service providers are knowledgeable regarding biopsychosocial dimensions of substance-related and addictive disorders, evidenced based practices, cultural, age and gender specific issues, and co-occurring disorder issues and service providers shall possess one of the following:

(1) Behavioral Health Case Manager (BHCM);
(2) Behavioral Health Rehabilitation Specialist (BHRS);
(3) Certified Alcohol and Drug Counselor (CADC);
(4) Licensed Behavioral Health Professional (LBHP);
(4) Licensed Mental Health Professional (LMHP);
(5) Licensed Physician;
(6) Licensed Practical Nurse;
(7) Psychiatrist;
(8) Recovery Support Specialist (RSS);
(9) Registered Nurse;

(B) The professional treatment staff shall have training in cultural-specific, age-specific, and gender-specific issues and evidenced based practices, co-occurring disorders, counseling techniques, lethality, code of ethics, domestic violence and child abuse, direct observed therapy, blood pathogen and exposure control, health and safety, confidentiality, and all staff should be knowledgeable regarding LIFT CAA's education and policies.

(C) Staff shall be, at least, eighteen (18) years old; and

(D) LIFT CAA shall document in personnel records all education, training, and experience stated above prior to service providers providing direct care services.

(4) **Treatment Services:**

(A) Substance-related and addictive disorder treatment services shall be provided to assess and address the individual needs of each consumer. These services shall include, but are not limited to, therapy, rehabilitation services, Peer Recovery services educational group, case management services, crisis intervention, individual, group, substance abuse education, family services, relapse prevention and life-skills training. Families are encouraged to participate in educational programs offered by LIFT CAA and are invited to participate in clinical programs or services with the persons served, with consent or legal right.

(B) The frequency of services shall be determined by a mutual agreement between a LIFT CAA professional and the consumer, as indicated by the individualized Treatment plan.

(C) When appropriate, and with consumer consent, the treatment program coordinates with other treatment providers that the consumer is currently utilizing.

(D) LIFT CAA offers education on wellness, recovery and resiliency.
1. Group sessions
2. Activities

(5) Assessment and treatment plan review:

(A) Individual biopsychosocial assessments (addendums to the ASI) will be completed on all consumers within the fourth (4) visit.

(B) Individualized treatment plans shall be completed on all consumers within the 4th visit, and is an ongoing process by which a clinician and the consumer identify and rank problems, establish agreed-upon goals, and decide on the treatment process and resources to be utilized. treatment plans shall include, but are not limited to, the following information;

1. Presenting problems
2. Strengths/needs, abilities and preferences of the consumer;
3. Goals for treatment with specific, measurable attainable, realistic and time limited objectives;
4. Type and frequency of services to be provided;
5. Primary person(s) responsible for providing services;
6. Description of consumer's involvement in and responses to, the treatment plan, and his or her signature and date;
7. Discharge criteria, other than the discharge criteria required by the level of care; and
8. Specific date for each planned treatment plan review and update,

(C) Treatment plan reviews shall be conducted as specified in the individual treatment plan and/or as required by accrediting or licensing bodies and the ASAM Placement Criteria for continuing care will be completed before treatment reviews/update and/or when the Counselor and/or Treatment Team suspect level of care change. It is appropriate to retain the consumer at the present level of care if one of the three following criteria is met:

(1) The consumer is making progress, but has not yet achieved the goals articulated in the individualized treatment plan. Continued treatment at the present level of care assessed as necessary to permit the consumer to continue to work toward her treatment goals; and/or

(2) The consumer is not yet making progress, but has the capacity to resolve his/ her problems. He or she is actively working toward the goals articulated in the individualized treatment plan. Continued treatment at the present level of care is assessed as necessary to permit the consumer to continue to work toward his or her treatment goals; and/or

(3) New problems have been identified that are appropriately treated at the present level of care. This level is the least intensive at which the consumer's new problems can be addressed effectively.

(D) To document and communicate the consumer's need for continued care at this level, each of the six (6) dimensions of the current ASAM criteria should be reviewed. If most or all of the criteria apply to the consumer's existing or new problem(s), she/he should continue in treatment at the present level of care.

(6) **Documentation:**

(A) Progress notes shall clearly reflect implementation of the treatment plan, the consumer's response to treatment, and the outcome of services;

(B) Consumer records shall document each service provided and all missed appointments and reason for missed appointments (for all levels of care); and

(C) Records shall document the start and stop time each service provided.

Lift Community Action Agency

7-00-01
18-13-23

POLICY:

LIFT CAA's discharge from its outpatient program is based on the individual discharge criteria and the ASAM PPC-2R discharge criteria for Level 1.

PROCEDURE

An ongoing review of the client's treatment plan is conducted to determine when the client is ready to be discharged or transferred to another level of care. The criteria for discharge or transfer is as follows: It is appropriate to transfer or discharge the consumer from the present level of care if he or she meets the following criteria:

____1. The patient has achieved the goals articulated in his or her individualized treatment plan, thus resolving the problem(s) that justified admission to the present level of care: OR

____2. The patient has been unable to resolve the problem(s) that justified admission to the present level of care, despite amendments to the treatment plan. Treatment at another level of care or type of service therefore is indicated; OR

____3. The patient has demonstrated a lack of capacity to resolve his or her problem(s). treatment at another level of care or type of service therefore is indicated; OR

____4. The patient has experienced an intensification of his or her problem(s), or has developed a new problem(s) and can be treated effectively only at a more intensive level of care.

To document and communicate the patient's readiness for discharge or need for transfer to another level of care, each consumer shall be assessed using current ASAM criteria that includes a list of symptoms for all six dimensions and each of the levels of care to determine a clinically appropriate placement in the least restrictive level of care. This organized process involves a professional determination for appropriate placement to a specific level of care based on the consumer's severity of symptoms and current situations. EACH OF THE SIX DIMENSIONS MUST BE REVIEWED. If the criteria apply to the patient's existing or new problem(s), the patient should be discharged or transferred, as appropriate. If not, refer to Continued Service Criteria.

Prior to discharge each adult consumer will be given an Addiction Severity Index Lite (ASI Lite) assessment, and other assessment tools if deemed appropriate, to measure progress made during treatment and services.

Lift Community Action Agency

7-00-02
18-13-22
Policy**:**

LIFT CAA LLC's outpatient services shall be limited to those persons who meet the applicable ASAM Patient Placement Criteria, Level I.

Procedure:

I. An Addiction Severity Index (ASI) and University of Rhode Island Change Assessment (URICA) will be administered and scored on each individual, prior to admission to the program. LIFT CAA will limit access of outpatient services to those persons who meet the current ASAM Placement Criteria. The ASAM Placement Criteria is used as a tool during the admission process and treatment update/review to assure the consumer is eligible for that level of care. An assessment will be completed during the admission process to assure all consumers meet the criteria for level one outpatient services.

II. LIFT CAA's procedure for gambling disorder treatment is as follows:

a. LIFT CAA does not provide gambling disorder treatment.
b. LIFT CAA does a SOGS gambling order assessment on all clients at intake.
c. Referrals are made to Kiamichi Council or other certified professionals for gambling disorder treatment.

Lift Community Action Agency

5-00-02
18-13-222
18-13-223
It is the policy of LIFT CAA to employee Peer Recovery Support Specialists (PRSS) to facilitate the recovery process for the consumer that are provided services at the agency.

Qualifications include but are not limited to:

A) Possess a High School Diploma or General Equivalency Diploma (GED);
B) Have demonstrated recovery from a mental illness, substance abuse disorder or both;
C) Be at least 18 years of age;
D) Be willing to self disclose about their own recovery;
E) Be employed by or volunteer with the state, a behavioral service provider or an advocacy agency contracting with the state to provide behavioral health services.
F) Possess good moral character;
G) Pass an examination based on ODMHSAS standards
H) Not be engaged in any practice or conduct which would be grounds for denying, revoking, or suspending certification.

Training Requirements:
It is the policy of LIFT CAA that all PRSS complete the required training for certification through ODMHSAS as listed below:

A) Must complete fulfill the certification training requirements and must attend and complete a forty hour PRSS training block covering various aspects of recovery, ethics, and/or boundaries, mental health and substance abuse.
B) After completing the training block- they must take and successfully complete the exam.

Continuing Education Requirements:

A) Must complete 12 hours of continuing education annually with 3 hours of these being in ethics.

Scope of practice would include the following:

A) Utilizing their knowledge, skills and abilities the PRSS will:
B) Teach and mentor the value of every individual's recovery experience;
C) Model effective coping techniques and self-help strategies;
D) Assist service recipients in articulating personal goals for recovery;
D Assist service recipients in determining the objectives needed to reach his/her recovery goals;
E) Utilizing ongoing training the PRSS may:
F) Proactively engage consumers and possess communication skills / ability to transfer new concepts, ideas, and insight to others;
G) Facilitate peer support groups;
H) Assist in setting up and sustaining self-help (mutual support) groups;
I) Support consumers in using a WRAP - Wellness Recovery Action Plan;
J) Assist in creating a crisis plan/ Psychiatric Advanced Directive as instructed in the PRSS Training;
K) Utilize and teach problem solving techniques with consumers.

L) Teach consumers how to identify and combat negative self-talk and fears;
M) Support the vocational choices of consumers and assist him/her in overcoming job-related anxiety;
N) Assist in building social skills in the community that will enhance quality of life. Support the development of natural support systems;
O) Assist other staff in identifying program and service environments that are conducive to recovery;
(P) Attend treatment team and program development meetings to ensure the presence of the consumer voice and to promote the use of self-directed recovery tools.
Q) Possess knowledge about various behavioral health settings and ancillary services (i.e. Social Security, housing services, advocacy organizations

Locale and Frequency

Peer support services can be provided in any location. The majority of contacts should be face-to-face, however, services may be provided over the telephone as necessary to help the consumer achieve his or her goals.

Lift Community Action Agency

1-00-07
18-5-12

POLICY: Lift Community Action Agency are committed to complying fully with the Americans with Disabilities Act (ADA) and ensuring equal opportunity in employment for qualified Individual with disabilities. All employment practices and activities are conducted on a non-discriminatory basis.

Under Titles 11 and 111 of the ADA, LIFT CAA shall comply with the "Accessibility Guidelines for Buildings and Facilities (ADAAG) for alterations and new construction." United States government facilities are exempt for the ADA as they shall comply with the "Uniform Federal Accessibility Standards (UFAS)", effective August 7, 1984.

In assuring quality design and accessibility, LIFT CAA will also utilize the American National Stands Institute (ANSI) A117.1 "American National Standard for Accessible and Usable Buildings and Facilities" as well as state and local standards for accessibility and usability of buildings and facilities.

PROCEDURES:
Hiring procedures have been reviewed and provide Individual with disabilities meaningful employment opportunities. Upon request, job applications are available in alternative, accessible formats, as is assistance in completing the application. Pre-employment inquiries are made only regarding an applicant's ability to perform the duties of the position.

Reasonable accommodation is available to all disabled employees, where their disability affects the performance of job functions. All employment decisions are based on the merits of the situation in accordance with defined criteria, not the disability of the individual.

Qualified individuals with disabilities are entitled to equal pay and other forms of compensation (or changes in compensation) as well as in job assignments, classifications, organizational structures, position descriptions, lines of progression and seniority lists. Leave of all types will be available to all employees on an equal basis.

LIFT CAA is also committed to not discriminating against any qualified employees or applicants because they are related to or associated with a person with a disability. LIFT CAA will follow any state or local law that provides individuals with disabilities greater protection than the ADA.

LIFT CAA is also committed to following ADA guidelines by providing or arranging for services for persons who fall under the protection of the Americans With Disabilities Act of 1990 and provide documentation of compliance with applicable Federal, state, and local requirements.

Reasonable accommodation form is available for consumers to complete if the provision or arrangement of services is needed due to disability.

Assistive Technology can be provided to any employee and/or consumer who may request through reasonable accommodations as for mentioned.

LIFT CAA will use the recommended reference "Americans With Disabilities Handbook" published in the U.S. Equal Employment Opportunities Commission and the U.S. Department of Justice to ensure compliance.

This policy is neither exhaustive nor exclusive. LIFT CAA is committed to taking all other actions necessary to ensure equal employment opportunity for Individual with disabilities in accordance with the ADA and all other applicable federal, state, and local laws.

Lift Community Action Agency

Lift Community Action Agency
EMERGENCY ACTION PLAN

Introduction

This Emergency Action Plan (EAP) establishes guidelines for all reasonably foreseeable workplace emergencies so that all facility resources are prepared and have the capacity to preserve life and health of those affected (consumers, visitors and staff) so that the agency can mitigate the severity and impact of a potential emergency, respond rapidly to an emergency and recover the ability to return to normal operation and shall comply with municipal, county, state and federal government guidelines. Because each emergency situation involves unique circumstances, the guidelines provide general guidance only. Thoughtful actions based on situation assessment are always required when responding to an emergency. It is also important to note that emergency guidelines do not necessarily represent sequential series of steps.

Safety and health are the overriding priorities in all emergency situations.
Think before you act and. . .if you see something, say something!

Emergencies can be identified as Medical, Fire, Severe Weather, Bomb Threats, Chemical Spills, Terrorist Attacks, Criminal Acts, Extended Power Loss, etc. Personnel should identify these emergencies and report them to the Executive Director and **Call 911 or 580-326-2550 to alert Police, or other Emergency Numbers as applicable:**

Police: 911

Sheriff: 580-326-5600

Oklahoma State Highway Patrol: 580-924-2600

Fire: 580-326-7106

Poison Control: 800-222-1222

Oklahoma Natural Gas: 800-458-4251 (gas leak or emergency)

Public Service (electricity): 888-216-3523

Ambulance: 580-326-2634

Water Dept. – 580 326 5616 ext. 228

The person calling should give the LOCATION and TYPE of DISASTER/EMERGENCY.

Lift Community Action Agency

QUICK REFERENCE CHART

1. An Emergency Preparedness Evacuation/Safety Plan shall be placed at the front breakroom and in the
policy book.

2. Evacuation Routes shall be posted on bathroom, breakroom and hall of facility and in the common area.

CHAIN OF COMMAND

1. Executive Director
2. Clinical Director or Clinical Coordinator
3. Safety Officer

In the event it is determined that employee recall is necessary, it is the responsibility of the above staff to notify employees under their supervision to return to duty.

COMMAND POST

1. Clinical Director's Office
2. Outpatient Area

GENERAL INSTRUCTIONS FOR REPORTING EMERGENCIES

When summoning emergency assistance be prepared to provide the following information:

- Your name and location
- Phone number from where the call is being made (580-286-5184)
- Location of the emergency, including facility name and address (17 S Central Idabel, OK)
- Type of Emergency
    - Medical
    - Fire
    - Confined Space Rescue
    - Hazardous Material
    - Criminal Act
    - Bomb Threat
- Other important information
    - Number and condition of victims
    - Location and extent of situation, hazard, fire, etc.
    - Involvement of hazardous materials (as available, give product name and/or describe any markings, labels or placards.)
- What is needed

DO NOT HANG UP FIRST. Let emergency personnel hang up first.

After the call, station someone to direct Emergency Response personnel to the scene of the emergency.

MEDICAL EMERGENCY

Survey the scene; evaluate personal safety issues.

Request assistance (Shout for Help or call if you have a cell phone on you-depending on situation)

Call medical emergency phone number: Ambulance, Fire Department, or other.

Provide the following information:

- Nature of medical emergency
- Number and location of victim(s)
- Hazards involved
- Name and number from where you are calling

Alert employees trained in CPR and First Aid to respond to the victim's location and bring a first aid kit.

Location of First Aid Kits: Breakroom and Bathroom

Procedures:

- Only trained responders should provide first aid assistance.
- Do not move victim unless the victim's location is unsafe.
- Take "universal precautions" to prevent contact with body fluids and exposure to bloodborne pathogens.
- Meet (or have someone meet) the ambulance at the nearest entrance or emergency access point and direct them to the victim(s).

Lift Community Action Agency

FIRE EMERGENCY

I. REPORTING A FIRE

When fire is discovered:

1. Activate the nearest fire alarm.

2. If an alarm sounds, the employee nearest to the fire alarm information panel (located behind the tech desk) is to observe the location of the alarm as indicated on the panel. That person should immediately disarm the exit doors and proceed to the general area of the alarm and observe the area to determine if a fire, in fact, exists or if a false alarm has occurred.

3. If a fire exists, call the **Fire Department – 911 or 580-326-7106**

4. Notify the Executive Director or if she is not available, notify the Safety Officer or Clinical Coordinator – when safe to do so.

II. EVACUATION OF BUILDING OCCUPANTS

1. Occupants must leave the building using the designated evacuation routes, or the nearest SAFE exit. (Evacuation routes are posted throughout the building)

2. Staff members (if present) shall ensure their area is immediately evacuated.

3. Proceed to outside in front of the building at a safe distance. Wait for the all clear from the designated authority before returning to the building.

III. FIRE CONTROL

1. Fight the fire ONLY if:
   a) The Fire Department has been notified.
   b) The fire is small and is not spreading to other areas.
   c) Escaping the area is possible by backing up to the nearest exit.
   d) The fire extinguisher is in working condition and personnel are trained to use it.
   e) Doors and windows should be closed as building is evacuated in order to retard spread of smoke and fire.
   f) Staff shall cease all attempts to extinguish fire and exit the building if unsure of their personal safety.

Lift Community Action Agency

IV. PROCEDURES TO FOLLOW AT ALL TIMES

- ✓ Doors must not be held open or blocked with articles, carts, mops, trays, etc.
- ✓ Hallways must not be blocked with items such as furniture, etc.
- ✓ Doors of the smoke barrier must be free and in working order at all times. They are a most important part of the facility's evacuation plan.
- ✓ Never allow an exit door to remain locked. People must be able to enter and exit during emergencies.
- ✓ All exit signs must be in place and exit lighting in proper operating condition

V. DOCUMENTING PROCEDURE

1. All Life Safety incidents will be documented and reported on a Confidential Critical Incident Report.

EXTENDED POWER LOSS

In the event of an extended power loss to a facility certain precautionary measures should be taken:

- Unnecessary electrical equipment and appliances should be turned off in the event that power restoration would surge causing damage to electronics and effecting sensitive equipment.
- If temperatures are freezing, turn off and drain the following lines in the event of a long term power loss.
  1) Fire sprinkler system
  2) Water lines
  3) Toilets
- Add propylene-glycol to drains to prevent traps from freezing
- Equipment that contain fluids that may freeze due to long term exposure to freezing temperatures should be moved to heated areas, drained of liquids, or provided with auxiliary heat sources.

<u>Upon Restoration of Heat and Power</u>:

- Electronic equipment should be brought up to ambient temperatures before energizing to prevent condensate from forming on circuitry.
- Fire sprinklers and water piping should be checked for leaks from freeze damage after the heat has been restored to the facility and water turned back on.

Lift Community Action Agency

BIOHAZARDOUS WASTE HANDLING

1. In the event a bio-hazardous situation exists, Lift CAA's safety officer (or the director) will call the Choctaw County Health Department for recommendations on proper disposal and shall follow those recommendations.

2. Always use Latex or Nitrile gloves when cleaning up spills that may be bio-hazardous.

3. Goggles should be worn if there is a risk of splashing.

4. To decontaminate surfaces/items coming in contact with blood or potentially infectious materials:
   a. Use a freshly prepared bleach solution diluted 1:10 with water or other EPA registered tuberculocidal disinfectant.
   b. Wear gloves and other personal protective equipment, as necessary.
   c. Cover the spill with paper towels or rags, gently pouring the disinfectant over the towels, and let it set at least 10 minutes.

5. Infectious waste shall be placed in containers that are leak proof, closable, puncture resistant and labeled with universal biohazard label.

Lift Community Action Agency

ACTIVE SHOOTER

Profile of an Active Shooter

An Active Shooter is an individual actively engaged in killing or attempting to kill people in a confined and populated area, typically through the use of firearms.

How to respond when an Active Shooter is in your vicinity

1. Evacuate	2. Hide Out	3. Take Action
• Have an escape route & plan in mind. • Leave your belongings behind • Keep your hands visible	• Hide in an area out of the active shooters view • Block entry to your hiding place & lock doors	• As a last resort & only when your life is in imminent danger • Attempt to incapacitate the active shooter • Act with physical aggression and throw items at the active shooter
Call 911 or Police 580-326-5600 WHEN IT IS SAFE TO DO SO		

How to respond when Law Enforcement arrives on the scene

How you should react when Law Enforcement Arrives	
• Remain calm & follow officers instructions • Immediately raise hands & spread fingers • Avoid making quick movements towards officers such as attempting to hold on to them for safety	• Avoid pointing, screaming, and/or yelling • Do not stop to ask officers for help or directions when evacuating. Just proceed in the direction from which the officers entered the premises.

Information you should provide to Law Enforcement	
• Location of active shooter • Number of shooters, if more than one • Physical description of shooter(s)	• Number and type of weapon(s) • Number of potential victims at the location

Lift Community Action Agency

WORKPLACE VIOLENCE

It is the policy of Dragonfly Counseling Services LLC to respond to threatening or violent behavior by calling the appropriate law enforcement, safety, or other emergency service provider.

If a situation arises in which a client does not respond to de-escalation, mediation, self-protection, or time out to reduce aggressive behavior, and the client is at risk of harm to self or others, staff members shall:

- Call 911 or **580-326-5600** and ask the police for help
- Call and inform the counselor-on-call of the situation
- Remove consumers from the area by asking them to disperse from the area until the situation is resolved.
- Complete a Confidential Critical Incident Report
- Document the incident in the client's shift notes and/or progress notes.

Lift Community Action Agency

BOMB THREATS

1. The person receiving a bomb threat should remain calm, recording in detail the sex, possible age, type of speech, any exact words, etc. Stay calm - do not alarm others.

2. Attempt to keep the caller on the line as long as possible. Ask him/her to repeat the message and attempt to record every work spoken by the caller.

3. If the caller doesn't indicate the location of the bomb and the time of possible detonation, the person receiving the call should ask the caller for this information.

4. Inform the caller the building is occupied and the detonation would result in death or serious injury to many innocent people.

5. Listen closely to the voice (male, female) the voice quality (calm, excited) accents or speech impediment, or other identifiable quality of speech.

6. Immediately after the caller hangs up, report to the Director (or next in command-see chain of command at front of this EAP). The local Police Department should also be notified immediately.

7. Decision to evacuate will be based on evaluation of available information. If evacuating, proceed to the front of building.

8. A bomb search will be conducted in each Unit by local law enforcement. Personnel in each Unit should be familiar with their area and should report any item or unusual circumstances that do not belong in the area.

9. During a search, it is imperative to not remove, jar or touch any object or anything attached thereto which appears suspicious in nature.

10. Do not use a cell phone if a bomb is suspected in the building.

Lift Community Action Agency

BOMB THREAT TELEPHONE CALL CHECK LIST
KEEP THE CALLER TALKING!!

Employees who frequently answer the telephone should be familiar with this form and ready to use it should a caller threaten a bomb.

ASK questions in a calm voice, such as: "Where is the bomb? What kind of bomb is it? What does it look like?"

LISTEN to the caller's voice and background noise for particulars that can be identified. If possible, without alerting the caller, WRITE "Bomb Threat-Call 911" on a piece of paper and give it to another staff member. The other staff member should dial 911, but NOT on a cell phone, telling them a bomb threat is in progress on telephone # (give # the bomb threat caller is on).The administration receptionist knows the numbers of each line.

Don't panic & keep the caller talking as long as possible.

Time:_____ Date: _____

Where is the bomb?_____

What kind of bomb? Explosive_____ Fire Bomb_____

What time will it detonate?_____

What does it look like? *Paper Bag, Shoe Box, Lunch Box, Box tied with string, Other*

_____

Background Noises: Explain Specific Sounds. *Traffic, Train, Music, Other*

_____

Accent or Speech Peculiarity: *Foreigner, European, Asian, New England, Southern, Spanish*

_____

Speech Impediment (stutter, lisp, slur, etc.)_____

Find out why bomb was planted: Grievance with a staff member_____

Grievance with DOC or ODMHSAS_____

Grievance with others:_____

Find out who the caller is: Ask "Who is calling please? What is your name?"_____

Call came in on which line? _____ Telephone number of that line: _____

_____ _____
Print name of person receiving call Signature of person receiving call

DO NOT USE CELL PHONES
Under no circumstances, not even to call 911, should any employee use a cell phone when a bomb threat has been identified. There is a possibility that the use of a cell phone could detonate some types of bombs.

SEVERE WEATHER AND NATURAL DISASTERS

TORNADO

Tornado Watch:

Conditions may generate a tornado. Identify clients with special needs, make sure hallways are unobstructed and make only necessary phone calls.

The Director and/or the Safety Officer will monitor weather changes during tornado watch conditions.
A local radio station will be tuned in to monitor weather developments for the surrounding area. The Inpatient television will be tuned to a station that monitors weather activity in Southeastern Oklahoma.

Tornado Warning:

Close all doors, windows, blinds and drapes. Turn off unnecessary electrical equipment. Use telephones for emergencies only. Secure valuables and discontinue outdoor activities.

Take Cover:

Move consumers to designated safe areas and instruct staff, clients, and visitors to crouch down or sit on the floor with their head down and arms covering their head. Make sure everyone is away from doors and windows. Remain in safe area until all clear is sounded. (*Safe areas are shown on evacuation floor plan*.)

Things To Remember During Tornado Weather Conditions:

1. If a warning call is received from the Civil Defense, the staff person receiving the call will immediately notify the Director or the Safety Officer. Department Supervisors will be notified to direct occupants or their respective areas to designated safe locations.

2. Safe areas are noted on the Evacuation Map.

3. Remain calm!!! Excitement results in poor judgment and creates danger for yourself and others. Stay away from windows. If a tornado strikes, shattered glass forced by strong winds can cause injury.

Lift Community Action Agency

EARTHQUAKE

- Stay calm and await instructions from the Director or designated official.
- Keep away from overhead fixtures, windows, filing cabinets & electrical power.
- Assist people with disabilities in finding a safe place.
- Evacuate as instructed by the Director or designated official.

FLOOD

If indoors:

- Be ready to evacuate as directed by the Director or designated official.
- Follow the recommended evacuation routes.

If outdoors:

- Avoid walking or driving through flood water.
- If transporting and car stalls, abandon it immediately and climb to higher ground.

ICE STORM

If the whole area experiences power loss during a freezing storm and residents must remain in the building for a period of time:

- Stay calm and await instructions from the Emergency Coordinator or designated official.
- Stay indoors.
- If there is no heat:
    - Close off unneeded rooms or areas
    - Stuff towels or rags in cracks under doors
    - Cover windows at night
- Eat and drink. Food provides the body with energy and heat. Fluids prevent dehydration.
- Wear layers of loose-fitting, light-weight, warm clothing, if available.

If stranded while transporting in a vehicle:

- Stay in the vehicle (call the facility if possible)
- Run the motor about 10 minutes each hour. Open windows a little for fresh air to avoid carbon monoxide poisoning. Make sure exhaust pipe is not blocked.
- Make yourself visible to rescuers
    - Tie a colored cloth to your antenna or door.
    - Raise the hood after the snow stops falling.
- Exercise to keep blood circulating and to keep warm.

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INTERNAL DISASTER EMERGENCY PROCEDURE

In the event of an internal disaster within the boundaries of Lift Community Action Agency, the person(s) discovering the disaster/emergency shall notify the Executive Director, stating exact location, extent and severity of the disaster, emergency, violent or other threatening situation.

Personnel: The Director or designee shall assume all facets of the operation and will assign persons to report to the scene.

Scene Management: The Director or Safety Officer shall command all facets at the scene of the disaster. The Clinical Director/Coordinator shall assist and provide back up as needed.

Care for the Injured: The lobby area will be used for emergency medical care. The Director will direct the receiving of injured. The Clinical Director/Coordinator may be assigned to assist. The Director will assign treatment to injured persons and initiate transfer to Choctaw Memorial Hospital, if needed.

Evacuation and Transportation: All staff will assist in the evacuation of consumers and provide for accommodation of consumers. Those individuals who are injured and can be moved without jeopardizing their condition will be relocated to the outpatient area for medical attention. Non-injured clients and staff will be relocated to sections of the building not affected by the disaster or emergency.

DOCUMENTATION: Document and report all Life Safety incidents on a Critical Incident Report

Lift Community Action Agency

SHELTER IN PLACE

In some cases, it may be safer to "shelter in place" than it is to leave a building, e.g., smoke or fire immediately outside your room, live electrical wires obstruct access to the exit, etc. In some cases
authorities may direct you to shelter in place instead of evacuate. Shelter in place procedures vary depending on the type of hazard.

Violent Criminal Action:

- Lock and barricade doors.
- Move away from outside doors and windows.
- Close window shades and turn off lights.
- If there are injured persons or you have information about the assailant(s) call the police.
- ***See active shooter section of this EAP.***

Severe Weather Incident:

- Move away from outside windows and doors as well as large glass objects.
- Avoid being underneath heavier objects that may fall.
- Help direct people with special needs to a safe place if necessary.
- *Go to safe areas as designated on evacuation route maps.*

Airborne Chemical Hazard:

- Close all outside doors and windows.
- If safe to do so, turn off A/C and air handling systems.
- Move away from outside windows and doors, as well as air ducts and ventilation systems.

Fire or Smoke and You Cannot Evacuate:

- If possible:
  1) Disable exterior doors.
  2) Pull fire alarm if alarm is not sounding already.
  3) Turn off air/heat systems.
- If an interior door feels hot, do not open it.
- If it is not hot, brace the door with your foot and open the door. Be prepared to close it quickly.
- Determine if the hall is smoke filled. If so, stay in your room. Place a wet towel under the door before opening the window.

Local Police: 911 or 580-326-2550

Sheriff: 580-326-5600

Oklahoma State Highway Patrol: 580-924-2600

Fire: 580-326-7106

Memorandum Agreement
Between Zen Gee Counseling and
LIFT Community Action Agency, Inc.
Head Start/Early Head Start/Early Head Start – Child Care

This agreement, made and entered into this 1st day of September, 2024 by and between Zen Gee Counseling, hereinafter referred to as the Zen Gee Counseling and LIFT Community Action Agency, Inc. – Head Start/Early Head Start/Early Head Start-Child Care, hereinafter referred to as "LCAA HS/EHS/EHS-CC" in consideration of the mutual covenants and stipulations herein set forth, the parties agree as follows:

Zen Gee Counseling agrees to:

A. Provide one (1) hour of visitation and observation to each of the LCAA HS/EHS/EHS-CC classrooms during the 2024/2025 school year:
   1. Observe the children with reported behavioral problems in a classroom. Children served under this agreement will be identified and referred to directly by LCAA HS/EHS/EHS-CC.
   2. Observe children for potential behavioral problems and offer recommendations to assist Head Start staff with methods to optimize classroom behavioral health practices. Such recommendations will be included in a written visit report forwarded to the LIFT Disability/Mental Health Specialist within seven business days.

B. Assist in planning for referrals to outside mental health providers as necessary.

C. Provide follow up on the progress of children identified during the screening process using reports provided by the teacher.
   1. Submit a written progress report regarding the follow-up conversation within seven business days.

D. Assist in locating local/non-local resources for services and assist in arranging for diagnostic evaluations for children enrolled in the LCAA HS/EHS/EHS-CC programs needing evaluation. The cost of such evaluations is not included in this agreement.

E. Be available at LCAA HS/EHS/EHS-CC Pre-Service and In-Service training and by appointment for consultation concerning methods to optimize the mental health of children attending LCAA HS/EHS/EHS-CC programs. Other staff and/or group meetings may also be scheduled by mutual agreement of Zen Gee Counseling and LCAA HS/EHS/EHS-CC.

F. Be available for scheduled monthly consultative visits at the Hugo Head Start administrative office with LCAA HS/EHS/EHS-CC.

G. Bill for monthly services delivered to that date beginning October 1, 2024.

H. Identify a person/person(s) who will be a liaison for LCAA HS/EHS/EHSCC in carrying out this contract's provisions.

I. Zen Gee Counseling will secure consent for treatment services and consent for the release of information as indicated from parents and/or legal guardians of children referred for services.

J. Consideration and cost of services:

Service:	**Fee:**	**Fee Billed to In-Kind Contribution:**	**LCAA HS/ EHS/EHS-CC:**
On-site Consultation	$125. per 1 hr.	$25. per 1 hr.	$100. per 1 hr.
Observations	$125. per 1 hr.	$25. per 1 hr.	$100. per 1 hr.
Trainings/ Meetings	$125. per 1 hr.	$25. per 1 hr.	$100. per 1 hr.

* Fees include actual time spent during consultations, on-site observations, and training/meetings. Fees will not be charged for driving to and from Head Start/Early Head Start/Early Head Start-Child Care centers or Head Start Central office or telephone conversations.

K. This contract is subject to federal HIPAA Laws, Oklahoma Laws, Zen Gee Counseling and LCAA HS/EHS/EHS-CC rules and regulations concerning confidentiality.

L. LCAA HS/EHS/EHS-CC will reimburse Zen Gee Counseling monthly after the provision of said service and receipt of appropriate invoices and reports.

M. Services provided for Medicaid eligible children must meet all applicable Medicaid guidelines and regulations. Reimbursement for services provided to Medicaid eligible children shall be the responsibility of Zen Gee Counseling. LCAA HS/EHS/EHS-CC shall not be responsible for these services regardless of the amount of reimbursement provided by the Medicaid program.

N. This contract shall become effective on the first day of September 2024. The term of this contract shall be one year from the effective date and will be jointly evaluated during the last 30 days of said term.

O. This contract may be validated with 30 days' notice, or altered, amended, or otherwise modified by a written or signed agreement executed by both parties.

APPROVED:

_____ _____

Rebecca Porter Date
LIFT CA Executive Director

_____ _____

Zen Gee Date
Zen Gee Counseling

_____ _____

Darla Galyon Date
LIFT Head Start Director

_____ _____

Ashley Stinson Date
LIFT Disabilities/Mental Health
Specialist

LIFT Community Action Agency, Inc.

Head Start/Early Head Start Training and Technical Assistance Plan

July 2024 – June 2025

Conferences

Content Area	Training Strategies	Trainer/ Responsible Staff	Date	Cost	Outcome	Evaluation
Family & Community Partnership 1302.53	Family Advocates will attend local Family & Community Partnership Trainings	Applicable Staff	As conferences are planned	$500.00 mileage for appropriate staff	Family Advocates will be better prepared to work with families to prepare Family Service Assessments & Family Partnership Agreements reflecting the needs addressed	Family Partnership Tracking Forms
Family & Community Partnership	Applicable Family Advocates will attend classes to obtain the Family Development Credential	Applicable Staff	Enrollment based on hire	$995 per staff X 3 Staff = $2,985	Family Advocates will be more equipped to work with families enrolled in the program	Obtainment of FDC Credential

Head Start/Early Head Start Director Meetings & Head Start Staff Meetings

Content Area	Training Strategies	Trainer/ Responsible Staff	Date	Cost	Outcome	Evaluation
Administration	The Director & Specialists will have bi-monthly staff meetings as appropriate	Director & Specialists & other staff as needed	Bi-monthly	$0	Director & Specialists will be able to coordinate & plan for program services & initiatives & be proactive regarding issues or concerns	Improved overall agency performance & coordination
Administration	The Head Start/Early Head Start/EHS-CC Director will attend	Head Start/Early Head Start/Early	Monthly	$150.00 per trip x 6	The Director will be brought abreast of important details &	Performance Evaluations &

	monthly director meetings in Oklahoma City	Head Start Child Care Director		trips = $900.00	policy movements at the state & national level	day-to-day operations

Child Folder Reviews

Content Area	Training Strategies	Trainer/ Responsible Staff	Date	Cost	Outcome	Evaluation
All Components 1304.-1305	Each Head Start classroom & children's records will be observed & reviewed once per semester to measure compliance with Performance Standards, state & local policies & best practices. Feedback & support are provided to staff	All Specialists	Once per semester with follow up visits as needed	$3,000 Mileage for applicable staff	Staff will continually increase their understanding of the program requirements relating to the Performance Standards & best practices	Component Folder/Center Checks once per semester
All Components 1304.-1305	Each EHS classroom & children's records will be observed & reviewed once each semester to measure compliance with Performance Standards, state & local policies & best practices. Feedback & support are provided to staff along with a plan to enhance performance skills if necessary	All Specialists	Once per semester with follow up visits as needed	$1,765 Mileage for applicable staff	Staff will continually increase their understanding of the program requirements relating to the Performance Standards & best practices	Component Folder/Center Checks once per semester

Integrated Services Policy

Content Area	Training Strategies	Trainer/ Responsible Staff	Date	Cost	Outcome	Evaluation

All components	The Integrated Services Policy has been created to show how program procedures are followed in accordance with the Head Start Performance Standards in all component areas	Appropriate staff person	Annually in June	$0	Policies and Procedures followed by the program will be easily accessible and encompass the program and component areas as a whole	Federal Review and Self-Assessment

Policy Council & Governing Board Training

Content Area	Training Strategies	Trainer/ Responsible Staff	Date	Cost	Outcome	Evaluation
Administration 1301.2	The Governing Board & Policy Council will receive periodic training on regulations through lecture, PowerPoint, handouts &governing board training/resource manual	Director &All Specialists	Monthly as Appropriate	$0	The Governing Board & Policy Council will be able to carry out their program responsibilities effectively	Self-Assessment
Administration 1301.3	The Policy Council will receive training on: (1) Leadership, Parent Participation and Recruitment (2) School Readiness & Child Outcome Report	Professional Development Specialist; Early Childhood Development & Curriculum Coach	July 2024	$100	Policy Council Members will learn leadership skills, along with portraying what they have accomplished during their term	Self-Assessment
Administration 1301.3	New parents will observe past parents conducting meeting before they are seated. The Policy Council will receive training on: 1. Orientation Part, including Roberts Rules of Order; 2. Roles & Responsibilities; 3. Policy Council Operating Procedures	PD Specialist	September 2024	$100	Policy Council Members will learn what is expected during their term	Self- Assessment

Administration 1301.3	The Policy Council will receive training on: 1. Recognizing and Reporting Child Abuse 2. Activities to Support the Active Engagement of Families in the Program	FCE Specialist	October 2024	$100	Policy Council Members will gain knowledge relating to child abuse awareness. Members will be presented with ideas to take back to Parent Meetings to promote parent involvement.	Self- Assessment
Administration 1031.3	The Policy Council will receive training on: 1. The Open Meeting Act 2. Mission, Vision, and Values 3. School Readiness Training	PD Specialist & Edu/Curriculum Coach	November 2024	$100	Policy Council Members will become familiar with The Open Meeting Act, & the Mission Vision & Values. Members will receive information relating to school readiness and their involvement.	Self- Assessment
Administration 1301.3	The Policy Council will receive training on: 1. Linking Our Voices 2. Leadership Skills 3. Child Outcomes Report	PD Specialist	December 2024	$100	Policy Council Members will watch a video showing other policy council members across the country. Members will be presented with basic leadership skills to share at their Parent Meeting.	Self- Assessment
Administration 1301.3	The Policy Council will receive training on: 1. Activities to Support the Active Engagement of Families in the Program 2. ERSEA	FCE Specialist/ ERSEA Specialist	January 2025	$100	Policy Council Members will be presented with information to share at Parent Meetings. Members will also receive training relating to ERSEA information within the program.	Self- Assessment
Administration 1301.3	The Policy Council will receive training on: 1. Impasse Policy and Conflict Resolution Policy 2. Activities to Support the Active	PD Specialist/ FCE Specialist	February 2025	$100	Policy Council Members will gain knowledge relating to agency Impasse and Conflict Resolution Polices	Self-Assessment

	Engagement of Families in the Program					
Administration 1301.3	The Policy Council will receive: 1. Overview of Self-Assessment	HS/EHS/EHS-CC Director/Assistant Director	March 2025	$100	Policy Council Members will receive information relating to the program's annual self-assessment	Self- Assessment
Administration 1303.1	The Policy Council will receive training on: 1. Re-energizing the Parent Committee 2. Leadership Skills 3. School Readiness & Child Outcome Report & Transitioning	PD Specialist/ Edu/Curriculum Specialist/ Disability/Mental Health, Transition Specialist	April 2025	$100	Policy Council Members will learn leadership skills, how to set goals for their children to be ready for the next school year & how to help them achieve those goals	
Administration 1301.3	The Policy Council will receive training on: 1. Family Interactions and Activities to Do with Your Child During the Summer	PD Specialist/FCE Specialist	May 2025	$100	Policy Council Members will learn new activities to do with their children while at home during the summer	

Entry Level Training

Content Area	Training Strategies	Trainer/ Responsible Staff	Date	Cost	Outcome	Evaluation
All Components	New employees will receive an overview of Head Start/Early Head Start's daily operations/expectations. In addition to viewing videos on blood borne pathogens, OKDHS licensing requirements, & sexual harassment**. New employees will understand that a physical exam is required within 30 days**	Lori Henry, Program Secretary	Date of Hire	$1,000	Staff will be well prepared to perform their daily job in a manner that meets Performance Standards & Licensing requirements	Performance Evaluations; Self-Assessment

	of employment and thereafter, annually to remain employed.					
Education, Health & Disabilities	New Employees will receive 20 hours of ELCCT Training involving classroom techniques, disabilities, and child abuse and confidentiality within 90 days. Employees will also receive CPR and First Aid within 90 days.	EC Development & Curriculum Coach, Health Spec., PD Spec. & Mental Health/Disabilities Specialist	New employees within 90 days of employment	Approx. $125 per person x 10 = $1,250 for mileage	Will meet State licensing requirements as well as train staff to respond to physical & dental emergencies & to provide first aid &CPR until emergency services arrive	Individual Development Plans &performance reviews. Staff certified in CPR & First Aid
Professional Development	New employees will receive one-on-one assistance in creating a written Professional Development Plan	Professional Development Specialist	On day of hire	$0	Staff will gain an understanding of how to execute their PD Plan	Measurement of growth by evaluation and observation
Transportation	New employees will receive orientation training on proper bus monitoring procedures	Transportation Specialist	On day of hire	$0	Staff will gain an understanding of proper bus monitoring procedures, including but not limited to: Child boarding & exiting procedures; Child Restraints; documentation; Emergency/Evacuation Procedures; Use of Special Equipment; Pick-up & release procedures	
Transportation	New bus drivers will receive appropriate training on the proper operation of a bus	Transportation Specialist; Transit	Prior to operating bus	Varies	Potential bus drivers will be trained in various capacities including but not limited to: Online courses, mentor training with licensed CDL, transit training. These trainings ensure bus drivers will learn how to operate the bus in a safe & efficient manner, safely run a fixed route, loading and unloading	Measurement of growth by observation

					children, stopping at rail road crossings, administer basic 1st aid; emergency/evacuation procedures; operating special equipment; daily pre & post safety checks; routine maintenance, proper documentation	

On-Going Mentor Training

Content Area	Training Strategies	Trainer/ Responsible Staff	Date	Cost	Outcome	Evaluation
All Components	Staff will be provided with appropriate coaching relating to skill level, education, experience, self-assessments, performance evaluations, and personal growth reflections	Training Staff/ Mentor Coach	On-going	$7,665 travel to provide coaching, applicable training including travel, hotel, and per diem	Staff will obtain increased knowledge of classroom management, organization, CLASS, ITERS, child development, and school readiness outcomes	Performance Evaluations; Self-Assessment

On-Going Professional Development Training

Content Area	Training Strategies	Trainer/ Responsible Staff	Date	Cost	Outcome	Evaluation
Professional Development	Staff working towards Baccalaureate & Associate degrees will continue to enroll in college courses	Professional Development Specialist	On-going classes are available that meet the	$6,000 for class fees	Staff will obtain Associates or Baccalaureate degrees	Through Individual Development Plans,

			degree requirements			performance reviews, grade reports and conferences
Professional Development	HS/EHS Staff seeking or lacking CDA credentials will receive training in required component areas and make application for CDA credential in order to meet requirements and standards	Professional Development Specialist	On-going with defined staff	$9,000 for books and testing fees	Staff will be knowledgeable of CDA requirements & process. Staff will obtain CDA Credential through the CDA Council	Through Individual Development Plans and performance reviews

Component Area Specialist Trainings

Content Area	Training Strategies	Trainer/ Responsible Staff	Date	Cost	Outcome	Evaluation
Nutrition 1304.23	Nutrition Specialist/ and or Assistant Directors will receive training regarding mandated regulations through lectures & handouts	USDA/CACFP Staff	September 2023	$300 for mileage	Nutrition Specialist will have sufficient knowledge of the CACFP regulations & requirements to train HS/EHS staff	USDA/CACFP Audit
Human Resources	Applicable staff will attend CLASS training to become "reliable"	Applicable Staff	As available	$1,650 for mileage, hotel, and registration	Staff will be deemed as "reliable" to observe classrooms using the CLASS tool	Certificate of reliability

Round Tables
2024-2025

Content Area	Training Strategies	Trainer/ Responsible Staff	Date	Cost	Outcome	Evaluation

All Components	Head Start Teacher/Teacher Assistant Roundtables	HS/EHS/EHS-CC Director & other Specialists as needed	As needed when an in-service is not scheduled	$1,000 for mileage for applicable staff	Teaching staff will receive answers & direction on any concerns they may have regarding their center operation. Staff will also receive training on topics as data is analyzed.	Federal Review Report; Staff Feedback
All Components	Early Head Start Director Roundtables	HS/EHS/EHS-CC Director & other Specialists as needed	As needed	$375 for mileage	Teaching staff will receive answers & direction on any concerns they may have regarding their center operation	Federal Review Report; Staff Feedback

Pre-Service Trainings
2024

Content Area	Training Strategies	Trainer/ Responsible Staff	Date	Cost	Outcome	Evaluation
Mental Health	HS/EHS staff will received training on Conscious Discipline	Oklahoma Early Childhood Program presenters	June/July 2024	$16,070	Staff will feel better equipped to face day-to-day challenges presented by their profession. Staff will feel supported by the program.	Teacher Feedback
Mental Health	Head Start Staff will receive training in mental health and services offered	Disabilities/Mental Health Specialist	June/July 2024	See above	Staff will learn the importance of early identification of potential problems	Anecdotal notes and ongoing observations and referrals if applicable
Human Resources (Professional Development)	HS/EHS staff will receive training in creating professional development plans	Professional Development Specialist	June/July 2024	See above	Staff will gain an understanding of how a professional development plan should flow to produce outcomes	Center checks, Performance Evaluations, Class Scores

Disabilities	HS/EHS staff will receive training on disabilities, Mental Health & Transition	Disabilities/Mental Health Specialist	June/July 2024	See above	Staff will learn the required process involved in referrals and using the component plan as a working document	Folder Checks and Reports
Child Health and Safety	Head Start/Early Head Start Staff will receive training on Fire Safety	Health Specialist	June/July 2024	See above	Staff will be taught the methods of extinguishing fires of various natures and knowledge of fire safety and precautions	Fire drills and reporting and site observations
Health	Head Start/Early Head Start staff will receive training regarding workplace safety	Safety Consultant	June/July 2024	See above	Staff will gain an awareness of hazards in the workplace and how to avoid them	Fewer incident reporting
Health	HS staff will receive Training on Blood Borne Pathogens	Safety Consultant	June/July 2024	See above	Staff will be provided with information necessary to ensure children are properly attended to during illness while protecting staff health	Staff will be able to identify medical concerns, and protect against infections
ERSEA	HS/EHS staff will receive training on using Child Plus for various tracking tools such as Time and Attendance	ERSEA Specialist	June/July 2024	See above	Staff will have the information & tools necessary track children's progress in the program	Specialists check Child Plus regularly and run reports
ERSEA	HS Staff will receive training on Completing Child Enrollment, and Completing Parent interviews	ERSEA Specialist	July 2024	See above	Staff will be better prepared for the enrollment process	Annual folder checks
Family & Community Engagement	Staff will receive training in the roles and responsibilities of their work in connecting with families	Family and Community Engagement Specialist	June/July 2024	See above	Staff will better understand the requirements and expectations of their work	Case by case situations
Child Health & Safety	HS Staff will receive training on how to properly administer medication	Health Specialist	June/July 2024	See above	Staff will be provided with information necessary to ensure they can properly administer medication	Observations and review of medication forms

Nutrition	EHS/EHS-CC/HS staff and cooks will receive up to 1 hour's training on CACFP 2019-2020 Updates to Meal Patterns	Nutrition Specialist	June/July 2024	See above	Staff will learn CACFP 2022-2023 meal patterns updates	Ongoing Monitoring
Transportation	Head Start Staff will receive transportation procedure-related training	ERSEA Specialist	June/July 2024	See above	Staff will know the procedures of the transportation component, including but not limited to: Child boarding & exiting procedures; Child Restraints; documentation; Emergency/Evacuation Procedures; Use of Special Equipment; Pick-up & release procedures	On board observation.

Head Start/Early Head Start/EHS-CC Cooks
Pre-Service Training 2024

Content Area	Training Strategies	Trainer/ Responsible Staff	Date	Cost	Outcome	Evaluation
Nutrition	HS/EHS cooks will receive up to 1 hour of training on purchasing procedures/truck orders	Nutrition Specialist	June/July 2024	See above	Cooks will receive training and information to better understand CACFP responsibilities and required documentation	Ongoing Monitoring
Nutrition	HS/EHS cooks will receive up to 1 hour on HS Performance Standard 1304.23	Nutrition Specialist	June/July 2024	See above	HS/EHS cooks will know &implement HS Performance Standard 1304.23	Ongoing Monitoring
Nutrition	HS/EHS cooks will receive up to 1.5 hours training on kitchen/dining organization & an	Nutrition Specialist	June/July 2024	See above	HS/EHS cooks will receive training in a more organized & user-friendly work space & an	Observations & Site Visits with folder checks

	overview of CACFP menu revisions				overview of new CACFP changes	

In-Service Trainings
2024-2025

Content Area	Training Strategies	Trainer/ Responsible Staff	Date	Cost	Outcome	Evaluation
Family & Community Partnerships	All staff will receive up to 2.5 hours' training in identifying & reporting suspected child abuse & neglect	Department of Human Services/ Management members	October 2024	$1,500.00 Mileage and presenters	Staff will be alert to signs of suspected abuse & know how to report it in a timely manner	Child staffing s, folder reviews, & consultations
Family & Community Engagement	HS/EHS staff will receive up to 45 minutes training regarding various policies on parental involvement in the classroom, child abuse and community engagement	FCE Specialist	October 2024	See above	Staff will know how to handle cases of suspected child abuse and will have increased knowledge of how to involve parents in their classroom	Case by case situations, monthly reporting & center/folder checks
Nutrition	Staff will receive training relating to menu planning	Nutrition Specialist	February 2025	$0	Staff will receive and re-evaluate menus to meet the needs of children and CACFP regulations	Parent and Staff feedback
ERSEA 1305.1-1305-10	Staff will receive training on ERSEA Plans, updates/review & recruitment activities & ideas	ERSEA Specialist	February 2025	$1,500.00 for mileage and presenters	Staff will have the information & tools necessary to promote the recruitment of children & families	Component center checks 1x per year & enrollment of children & maintenance of a waiting list
Personnel	All staff will receive updated information on insurance options	Insurance Representative	February 2025	$0	Staff will have current knowledge of personal & family insurance options	Staff will be informed of insurance planning options

Professional Development	All staff will receive training on meeting the required staff educational guidelines	Professional Development Specialist	February 2025	$0	Staff will have a renewed motivation for keeping credentials current and meeting guidelines	Tracking sheet review
Education	All staff will receive up to 1.5 hours of training on Developmentally Appropriate Practices or a current educational topic	EC Development & Curriculum Coach	February 2025	$0	Staff will have up to date info in the education field to better prepare students for school readiness	Classroom observations
Staff Development	Staff will be provided with an inspirational keynote from a speaker to build employee morale as well as a specialized trainer to offer 2 hours of Cultural diversity and Ethics Training	Applicable Presenters	May 2025	$1,800 for trainers	Staff will be inspired to continue on their journey of impacting on the lives of Head Start eligible families as well	Overall employee wellness

T/TA Total Costs: $59,260
Head Start: $39,956 EHS $19,304

*All in-person conferences are subject to change based on unforeseen cancellations and LIFT Community Action Agency travel restrictions.

Category 8 Standards

Standard 8.1 The Organization's annual audit (or audited financial statements) is completed by a Certified Public Accountant on time in accordance with Title 2 of the Code of Federal Regulations, Uniform Administration Requirements, Cost Principles, and Audit Requirement (if applicable) and/or State audit threshold requirements.

Standard 8.2 All findings from the prior year's annual audit have been assessed by the organization and addressed where the governing board has deemed it appropriate.

Standard 8.3 The organization's auditor presents the audit to the governing board.

Standard 8.4 The governing board formally receives and accepts the audit.

Standard 8.5 The organization has solicited bids for its audit within the past 5 years.

Standard 8.6 The IRS Form 990 is completed annually and made available to the governing board for review.

Standard 8.7 The governing board receives financial reports at each regular meeting that include the following:
1. Organization-wide report on revenue and expenditures that compares budget to actual, categorized by program; and
2. Balance sheet/statement of financial position.

Standard 8.8 All required filings and payments related to payroll withholdings are completed on time.

Standard 8.9 The governing board annually approves an organization-wide budget.

Standard 8.10 The fiscal policies have been reviewed by staff within the past 2 years, updated as necessary, with changes approved by the governing board.

Standard 8.11 A written procurement policy is in place and has been reviewed by the governing board within the past 5 years.

Standard 8.12 The organization documents how it allocates shared costs through an indirect cost rate or through a written cost allocation plan.

Standard 8.13 The organization has a written policy in place for record retention and destruction.

Transit Advisory Council

Meeting Minutes

June 11, 2024

1005 S. 5th Street

Hugo, OK 74743

Jeannie McMillin, Transit Director, provided the Board with the Transportation Advisory Council Report. The Transportation Advisory Council was established during the April 2021 Board Meeting for the Transit Program with regards to funding received from the Kiamichi Economic Development District of Oklahoma's Area Agency on Aging Division.

These KEDDO funds help to fill a gap in transportation services for older Americans (60 years of age or older) who do not qualify for Medicaid, Tribal, or other free transportation services.

The Transportation Advisory Council regularly convenes each quarter, with a primary purpose to inform agency leadership of the transportation needs of older Americans within their communities, and will serve an essential function in helping to identify and address transportation barriers, challenges, and resources.

During the twelfth meeting, held on June 11, 2024 at 9:45 a.m., Advisory Council members were advised that the service was continuing to grow as new drivers were brought on board. Advisory council members were also asked to report on any new or additional identified gaps in transportation needs in their communities; no such gaps were reported.

LIFT C.A.A., Inc.
Head Start/Early Head Start/Early Head Start-Child Care
Policy Council
1005 South 5th Street
Hugo, OK 74743

August 20, 2024
MINUTES

LIFT Community Action Agency's Head Start/Early Head Start/EHS-CC Policy Council met on Tuesday, August 20, 2024 at 10:30 a.m. at 1005 S. 5th Street in Hugo, Oklahoma. Notice of time, place and agenda of meeting was posted within prominent view at 1005 S 5th Street, Hugo, Oklahoma twenty-four (24) hours prior to the meeting.

A quorum was met, members present were, Shelbie Reese; Antlers EHS, Teaha Crow; Boswell II, Key'Osha Jone; Cabbage Patch, Steve Woldanski; Hugo EHS, Lindsey Kent; Idabel III, and Clinton Crawley; Community Representative.

HS/EHS/EHS-CC staff present included: Darla Galyon; HS/EHS/EHS-CC Director, Jordan Mack; HS/EHS/EHS-CC Assistant Director, Mattie McKee; HS/EHS/EHS-CC Assistant Director, Lori Henry; HS/EHS/EHS-CC Secretary, Ronda Spear; Health Assistant, Lauren Barger; Nutrition Specialist, Johonna House, Nutrition Assistant; Susie Mashburn; Education Specialist, Sommer Springfield; Assistant Education Specialist, Sara Moore; Professional Development Specialist, Brittany Bailey; ERSEA Specialist, Brianna Nelson; ERSEA Assistant, Christina Merritt; FCE/Disability/Mental Health Assistant, Tori Williams; Health Specialist, Ashley Gaddy; Outreach Specialist and Lisa Heady Mentor Coach.

Consideration, Discussion and Vote to Accept the minutes from the June 18, 2024 and July 16, 2024 Meeting(s): Copies of the minutes were provided to the council for review. Lindsey Kent made a motion to approve as written the June 18, 2024 and July 16, 2024 minutes. Steve Woldanski seconded the motion, the motion carried.

Consideration, Discussion, and Vote to Enter into Executive Session to Discuss the employment, transfer, hiring, appointment, promotion, demotion or disciplining of employees: Brittney Hawkins-Antlers EHS Caregiver; Sydnee Browning-Valliant Teacher Aide, Krayton Mills-Broken Bow III Cook, Katie Bailey-Antlers Head Start Teacher Aide, Brittany Dover-Valliant Cook, Lisa Heady- HS/EHS/EHS-CC Mentor Coach, Sarah Makerney-Hugo EHS Caregiver, Tianigwa "Tia" Miller-Idabel EHS Caregiver, Savannah Long from Antlers EHS Cook to Antlers Head Start Cook; Melissa Murray from Hugo EHS Caregiver to Head Start Family advocate; Vanessa Hill from Antlers I SNA to Antlers EHS Caregiver Aide; Chrissa Landreth from Idabel III Teacher Aide to Rattan II & III Teacher Aide; and Taryn Creasman from FCE Specialist to Idabel Family Advocate/Site Supervisor, Deborah Rebik from Haworth SNA to Haworth Teacher Aide, Misty Smith from Broken Bow LEC Substitute to Idabel III Teacher Aide and Melisa Greenlee from Substitute to Idabel Custodian/Bus Monitor, pursuant LIFT, CAA Okla. Stat. title 25§ 307 (b) (1). No motion was made, therefore no executive session.

Consideration, Discussion, and Vote to Adjourn Out of the Executive Session and the Regular Board Meeting Be Reconvened. Did not enter into Executive Session, therefore no vote was needed.

Consideration, Discussion and Vote to Approve New Hires, Transfers and Terminations Recommended by the Personnel Committee. Lindsey Kent made a motion to approve and Key'Osha Jones seconded the motion. The motion carried.

Consideration, Discussion and Vote to Approve Submission of the FY 2025 Head Start/Early Head Start Program Grant Application (Continuation) to Administration for Children and Families, Office of Head Start- $4,614,531: Darla Galyon, HS/EHS/EHS-CC Director explained to the council that this was the annual renewal of the Head Start/Early Head Start program application that is due to the Office of Head Start by September 1, 2024. Mrs. Galyon explained that this application is for Program Operations and Training and Technical Assistance. The program plan budgets for Head Start and Early Head Start were provided and reviewed in depth with the council. Teaha Crow made a motion to approve submission and Clinton Crawley seconded the motion. The motion carried.

Consideration, Discussion, and Vote to Approve Acceptance of FY 2024 Head Start/Early Head Start Program Supplement Grant Award (Cost-of-Living Adjustment) from Administration for Children and Families, Office of Head Start-$104,591: Darla Galyon, HS/EHS/EHS-CC Director explained that this funding will be used to provide Head Start/Early Head Staff with a 2.35% COLA increase. The COLA will serve to increase salaries and fringe benefits in an effort to ensure retention of experienced, qualified staff and maintain overall program quality. The COLA funds have been divided between Personnel Salaries, Fringe Benefits, and Indirect Costs associated with staff salaries, along with allocations under the Contractual and other categories. Mrs. Gaylon stated that the 2.35% will reflect an increase in the hourly rate of pay for each employee and a permanent increase of 2.35% in Head Start/Early Head Start/Early Head Start-Child Care pay scale. Lindsey Kent made a motion to accept and Steve Woldanski seconded the motion. The motion carried.

Consideration, Discussion, and Vote to Approve Acceptance of the FY 2024 Early Head Start-Child Care Partnership Program Grant Award (New/Baseline & Cost-of-Living Adjustment) from Administration for Children and Families, Office of Head Start-$2,267,81 (Non-Federal Share Waiver Total: $463,842.75): Darla Galyon, HS/EHS/EHS-CC Director, explained that this funding is for the operation of the Early Head Start-Child Care Program for the project period of 8/1/2024-7/31/2029. This action awards $2,224,968 for operations and $42,863 for training and technical assistance for the budget period of 8/1/2024-7/31/2025. This funding also approves a waiver of the non-federal match requirement. This action reduces the amount of matching funds from $556,958 to $103,115 for the 8/1/2024-7/31/2025 budget period. This funding also awards $51,086 for the Cost-Of-Living adjustment increase for the Early Head Start-Child Care program operations. Lindsey Kent made a motion to accept and Steve Woldanski seconded the motion. The motion carried.

Consideration, Discussion and Vote to Approve the Head Start/EHS/EHS-CC Program Menus for the 2024-2025 School Year: Lauren Barger, Nutrition Specialist provide copies and

an overview of the 2024-2025 menus which operate on a 6-week rotation cycle, no major changes were made to the menus this school year. Teaha Crow made a motion to approve and Lindsey Kent seconded the motion. The motion carried.

Consideration, Discussion and Vote to Approve the 2023-2024 HS/EHS/EHS-CC Self-Assessment Plan: Jordan Mack, HS/EHS/EHS Assistant Director provided copies along with an overview of the annual Self-Assessment plan geared toward reviewing and understanding program data. Information was shared on areas where the program saw room for improvement on the ongoing data tracking of information to drive program goals. It was shared that progress has been made in all areas which saw room for additional improvement. Key'Osha Jones made a motion to approve and Lindsey Kent seconded the motion. The motion carried.

Consideration, Discussion and Vote to Approve the 2024 HS/EHS/EHS-CC Community Assessment: Jordan Mack, HS/EHS/EHS-CC Assistant Director provided an overview of the Community Assessment, and explained how the data was collected along with a copy of the Community Assessment for members to review and answered all questions that were asked. Teaha Crow made a motion to approve and Clinton Crawley seconded the motion. The motion carried.

Consideration, Discussion and Vote to Approve the Updated HS/EHS/EHS-CC Pay Scale: Darla Galyon, HS/EHS/EHS-CC Director provide copies and an overview of the updated Pay Scale stating that the update was due to the 2.35% COLA (Cost-Of-Living-Adjustment) that HS/EHS/EHS-CC will receive. Steve Woldanski made a motion to approve and Key'Ohsa Jones seconded the motion. The motion carried.

Consideration, Discussion and Vote to Approve the HS, EHS, SAF, Community Facilities, OECP, USDA, and Non-Fed May, 2024 Financial Statements and Credit Card Distribution Reports: Darla Galyon, HS/EHS/EHS-CC Director provided copies and an overview of the May, 2024 financial statements and Credit Card Distribution Report for the Council and it was reviewed and recommend by the Finance Committee to vote for approval. Lindsey Kent made a motion to recommend for full Policy Council approval and Steve Woldanski seconded the motion. The motion carried.

Consideration, Discussion and Vote to Approve the HS, EHS, SAF, Community Facilities, OECP, USDA, and Non-Fed June, 2024 Financial Statements and Credit Card Distribution Reports: Darla Galyon, HS/EHS/EHS-CC Director provided copies and an overview of the June, 2024 financial statements and Credit Card Distribution Report for the Council and it was reviewed and recommend by the Finance Committee to vote for approval. Lindsey Kent made a motion to recommend for full Policy Council approval and Clinton Crawley seconded the motion. The motion carried.

Presentation of July, 2024 Financial Statements and Credit Card Distribution Reports for September Consideration and Vote: Darla Galyon, HS/EHS/EHS-CC Director presented the July, 2024 Financial Statements and Credit card Distribution Reports and gave an overview of them along with an explanation of where non-fed monies come from for members present to

review and vote on at the September 17, 2024 meeting. Copies will be mailed to members not present.

Other Reports/Announcements:

Recruitment & Enrollment Update/Enrollment and Attendance Report-Brittany Bailey, ERSEA Specialist: Brittany Bailey reported that as of today, 8/20//2024 238 children are currently enrolled in Head Start for the 2024-2025 School Year. Applications are an ongoing process and are still be accepted and processed. Early Head Start currently has 45 children enrolled and attendance was 79.8%. Early Head Start-CC currently has 95 children enrolled and attendance was 81.4%.

Governing Board Report: Mattie McKee- Mattie McKee, HS/EHS/EHS-CC Assistant Director stated that the Governing Board Met on August 13, 2024. An Agenda was provided along with an overview of the meeting for council members present. She stated that all HS/EHS/EHS-CC items had been approved

USDA Meals and Snack Report-Lauren Barger, Lauren Barger, Nutrition Specialist provided a copy and an overview summary of meals and snacks served for July, 2024.

Data Analysis-Jordan Mack-Jordan Mack gave an overview of the data assessed for June, 2024

OHS Communications and Guidance-Darla Galyon presented and reviewed all OHS Communications and Guidance received since the last council meeting.

P**rogram Summary Report-Darla Galyon** presented the HS/EHS/EHS-CC Program Summary for the council to review.

OHS Focus Area 1 Monitoring Review Update: Darla Galyon provide a letter stating that the program would receive a Focus Area 1 (FA 1) monitoring review in the Fiscal Year 2025. The program will received additional information regarding the review, including the assigned Review Lead and review dates, approximately 45 days prior to the event.

Consideration, Discussion, and Vote on New Business (Not known about or which could not have been reasonably foreseen prior to time of posting the agenda. Okla. Stat. Title 25 § 311): There was none.

There being no other business to come before the board, Steve Woldanski made a motion to adjourn and Clinton Crawley seconded the motion. The motion carried and the meeting ended at 11:20am.

_____

Lindsey Kent-Chairperson
Key'Osha Jones-Vice-Chairperson
Titeuna Mitchell-Secretary

Community Action Agency

Employee of the Month Nomination

Please place an X beside all of the qualities that apply to the person you are nominating, and then write a few words about how each characteristic applies to the person being nominated.

Example: X --Has good customer service-Mary always smiles and says hi to everyone who comes in the office.

Not all qualities will apply to every person. You may also add additional good qualities that the person has in the "other" blanks on the back side of this form. If you would like to elaborate, you can use the empty square on the second page of this form to provide more details of the good work habits of the person you are nominating. Or, you can use the empty space to describe something really good that the person has done.

Date: 9/3/2024

Name of Person being nominated for Employee of the Month: Kenesha Coleman

Name of Person submitting the nomination: Jeannie McMillin

X	Is a hard worker	Kenesha helps with any tasks that need to be done.
X	Respects others	Kenesha treats everyone with courtesy.
	Is on time	
X	Is organized	Kenesha supervises a busy office and meets required deadlines
X	Keeps a positive attitude	Kenesha looks for the good in all things
X	Encourages other people	Kenesha is quick with a kind word for others
X	Is willing to help others	Kenesha sees the need to help and will assist
X	Makes a good first impression	Kenesha has a friendly personality
X	Follows all workplace rules	
X	Uses resources wisely	Kenesha has learned some new things to help the program become more efficient.
X	Has good work attendance	Kenesha rarely misses work.
X	Represents the agency well	Kenesha is well-liked in the community.
X	Is a loyal employee	Kenesha values the services the agency provides.
X	Handles crisis well	Kenesha manages crisis by staying calm and working for a resolution.
X	Goes above and beyond the call of duty	Will give her own money and time to help others.
X	Works well with others (team player)	Kenesha helps other staff without being asked.

LIFT Community Action Agency, Inc.
209 North 4th Street, Hugo, OK 74743
Telephone (580) 326-3351 Fax (580) 326-2305
www.liftca.org

Community Action Agency

_____ Is creative _____

_____ Likes to learn new things _____

X Is a good listener People confide in Kenesha because they know she has a kind heart and truly cares.

_____ Communicates well_____

X Dependable Kenesha takes care of her work and meets required deadlines.

X Respectful, considerate of others Kenesha treats everyone with courtesy

_____ Safety conscious _____

X Good problem solving skills Kenesha will find a solution to every problem.

_____ Other _____

_____ Other _____

_____ Other _____

Use this space if you have anything additional that you would like to say about the person being nominated.

Kenesha is well-known in the community as someone who helps with activities and supports fundraising for a range of good causes. Kenesha represents what LIFT is all about even away from work. Several times she has seen people who ride the bus walking during the times the office is closed. Kenesha has transported them in her own vehicle and reminded them to call in for rides during the times the office is open. Kenesha has taken food to her neighbors when she knew they didn't have anything. She would give her last dollar with no hesitation to help someone else.

Submit nominations by the 30th of the month for consideration. Submit nominations to Kathy James at the Administration Office, by mail (209 N. 4th St., Hugo, OK 74743), by fax (580-326-2305), or by email (kathy.james@liftca.org). Nominations are judged by a five-member committee. If the person you nominate is not selected, it is okay to nominate that person again the following month if you feel he/she is deserving of the award.

Program Summary
Head Start/Early Head Start/Early Head Start-Child Care Programs
August 2024

Eligibility, Recruitment, Selection, Enrollment & Attendance

During the month of June there were 44 children, age birth to 3, that were provided services in the Early Head Start centers and 106 children served, age birth to 3, in the Early Head Start – Child Care locations. Services were provided for 0 children, age 3 to 4 years old in the Head Start centers within the tri-county service area due to summer vacation.

The Outreach Specialist prepared and sent out radio ads that reached across our service area. Our ad was included on local restaurant menus. Daily social media posts are also made on our LIFTCA Facebook page.

Family Advocates and other Head Start, Early Head Start, and Early Head Start Child Care staff have been placing recruitment flyers, recruitment apple signs, recruitment cards and other recruitment items in and around various businesses within the tri-county service area, along with placing recruitment items online, to ensure all enrollment opportunities are filled as they occur. Partnering childcare facilities are also actively recruiting children for the program.

Family & Community Engagement

For the Month of July, we had 28 parents that participated in Parent Meetings. Family Advocates are wrapping up goals with families through the Family Partnership Agreement's. The centers continued to invite parents and community members in to participate in Parent Ready to Read by having a story time with the children; there were 19 participants, with 6 of them being father figures.

Father Involvement

The dad's day activities for the month of July were various flag and star crafts. For July's Dad's Day, there were 27 people that participated in dads day activities with 14 being father figures. In addition, 4 dads/father figures participated in parent meetings for July. Since the beginning of the 2023-2024 school year, we have had 1,148 father figures participate in family engagement activities.

Nutrition

In the month of August, the nutrition team kicked off the new school year by getting a jump start on ordering food trucks, and getting our HS kitchens set back up for the new school year. The food allergies are an abundant amount starting off with red dye allergies, dairy, and even diabetes type 1. We are continuing to get ready for 2024-2025 school year, as the food allergies are still rolling in. We are still collecting updated paperwork for our CACFP (Child and Adult Care Food Program).

Health

During the month of August employee physical tracking continued with reminder phone calls and emails to staff on past dues and upcoming. Monthly reports are due to Jordan Mack by the 15th of

each month. Two CPR classes were held. PIR for Health report for EHS, EHS/CC, and HS for 2023-2024 was compiled and turned in to Mattie McKee. We continue to receive updates for immunizations, dentals and physicals for entry into Child Plus on a daily basis. An update of past due and due health requirements was emailed to CC/ELC, EHS, & HS centers and called to inform them of the screenings that are due.

Education

Head Start classes began anywhere from August 5 to August 14th. This month has been extremely busy with getting online classroom programs set up and more importantly making sure our staff are ready for students. We have assisted many new teachers with online programs, developmental screenings, classroom schedules, and lesson plans. Sommer and I have been out to visit several EHS, EHS-Child Care, and Head Start classrooms

Professional Development

During the month of August, the Professional Development Specialist scheduled CPR/First Aid classes taught by LIFT CPR Instructors Tori Williams/Taryn Creasman/Ronda Spear, where several LIFT employees received or renewed their Adult and Infant CPR and First Aid certifications. Also, with the help of the Professional Development Specialist, several staff members renewed their Professional Development Ladders and/or Oklahoma Director's Credentials in September.

The Professional Development Specialist has been busy ensuring that all staff members are on track to meet any education requirements in the proper timeframe. Staff members have been making progress and are on track to be completed within requirement deadlines.

We have been working to ensure all new staff meet requirements for the programs they work for including trainings as well. We strive for excellence and want to make staff as well seasoned and informed as possible.

Disabilities/Mental Health/Transition

Sooner Start has an online process for referrals that goes directly to the Oklahoma State Department of Education. This process has streamlined the referral process. In Early Head Start, two children who have an IFSP and three others have been referred to Sooner Start through the online process.

In the EHS-Child Care program, there are two children that have been identified to receive Sooner Start services and five others are in the referral process.

In Head Start for the school year 2023-2024, fifty-eight students were evaluated and had an IEP and received special education services from the staff/consultants from the public schools.
Early Head Start-Child Care Center Staff and the Early Head Start Center staff have been providing transition activities for children ages 2 ½ to 3 years old to promote a smoother transition to the next level. In the month of May our Head Start 4-year-olds completed transition visits to their next school setting.

Recruitment/Outreach

The following recruitment and outreach strategies/activities were implemented or held during the month of August 2024.

Radio Ad:

Attention: Choctaw, McCurtain and Pushmataha Counties!
The 2024-2025 school year is here! Don't delay, get your application for PRE-SCHOOL submitted today! Our mission at LIFT Head Start is to help prepare children to be kindergarten-ready! Full day, pre-school services for Head Start are offered in Antlers, Battiest, Boswell, Broken Bow, Clayton, Forest Grove, Fort Towson, Haworth, Hugo, Idabel, Rattan, Soper, and Valliant. We target a child's development in the following areas: social emotional, nutrition, health, and education. We provide ALL school supplies, meals and snacks! There is NO COST to families for pre-school services. Do you receive SNAP benefits? If so, that makes you automatically eligible to apply for our program! You can apply online at www.liftca.org or pick up an application at any LIFT Community Action Head Start Center! You can also call to have an application sent by mail. For more information you may call the LIFT Head Start Administration Office at 580-326-7581

Community Partner Meetings

The Outreach Specialist attended monthly partner meetings to bring awareness of our HS/EHS/EHS-CC programs, while also learning about other resources to help our Head Start families.

Help Me Grow Newsletter



Choctaw County Sheriff Magnet

We purchased an ad for the Choctaw County Sheriff Magnet distributed to all residents in Choctaw County. We will also receive promotional calendars with our information on them.



Guide



2025 Calendar

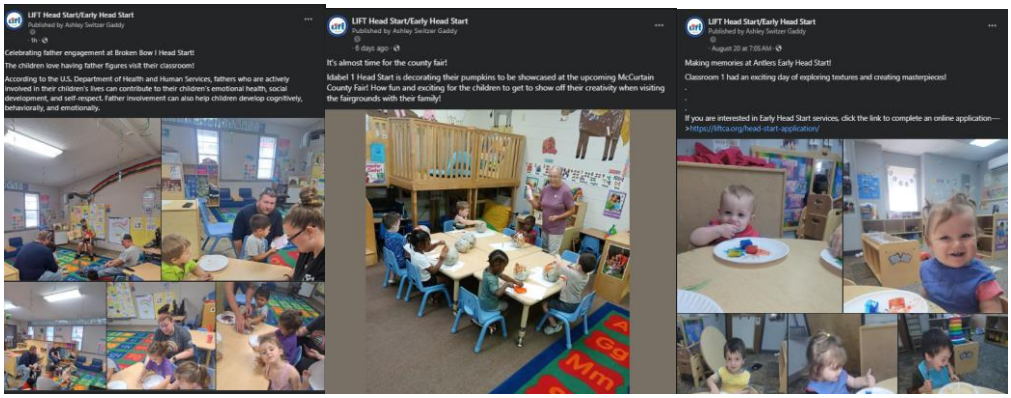
Social Media Impact

Due to school starting back up, August is always a little slower due to a lack of community events and everyone gearing up for the fall season. A focus was put on social media and highlighting the following:

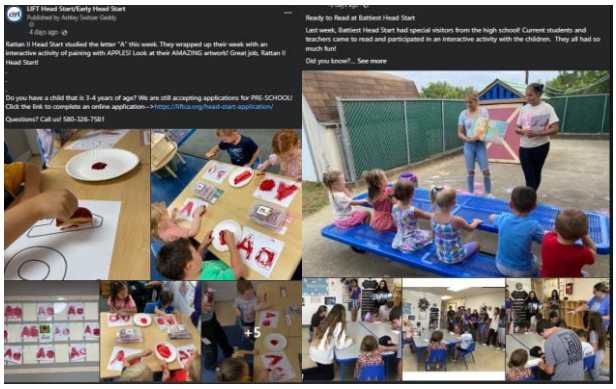
- Classroom activities to help drive enrollment
- Conscious Discipline information for teachers and support staff
- Job Highlights
- Policy Council information,
- Importance of classroom attendance

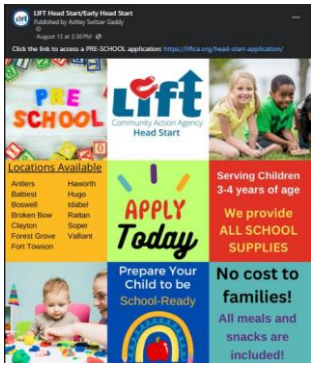
Enrollment Posts/Highlighting Classroom Activities

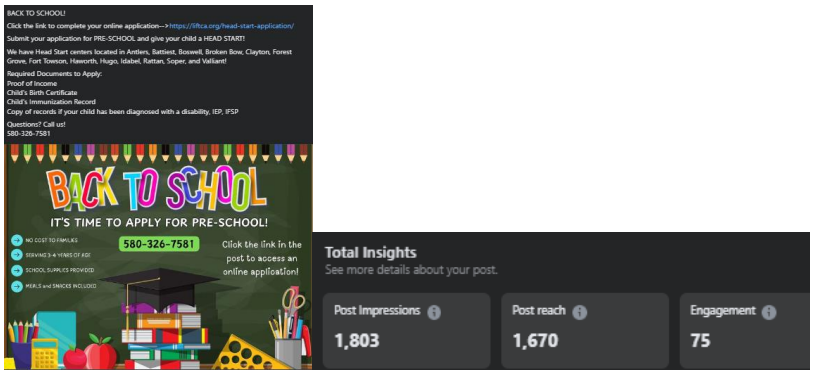
- The goal of highlighting classroom activities is to showcase the amazing work happening in our HS/EHS/CC classrooms. This allows other parents and members of our community to have a glimpse of what to expect in a preschool classroom. Our hope is that family and friends share and comment on the post, bringing more awareness to the services that we provide, which will encourage a parent to complete an application for their child/family.



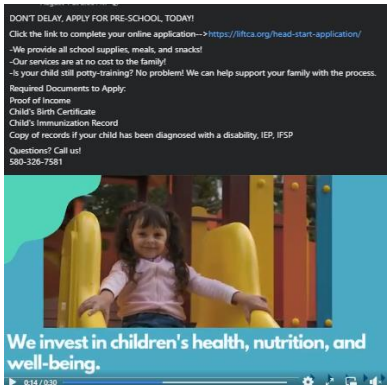




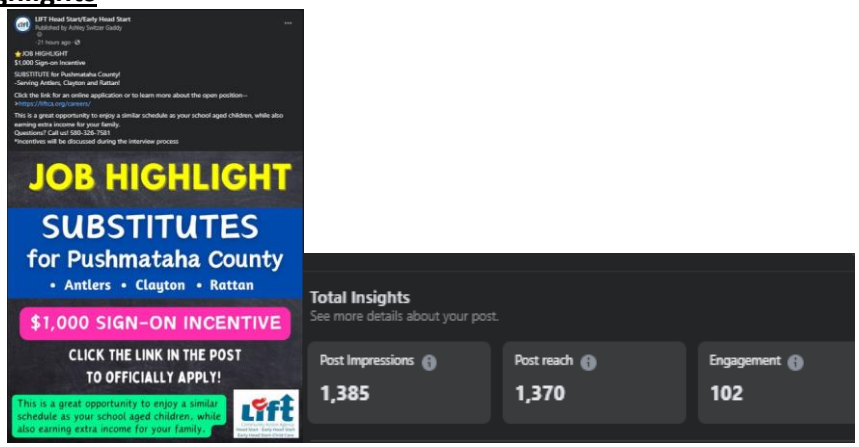
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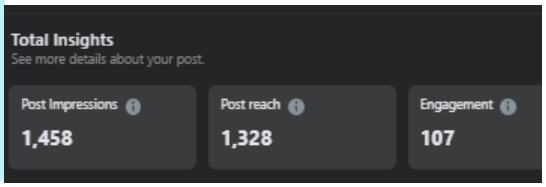
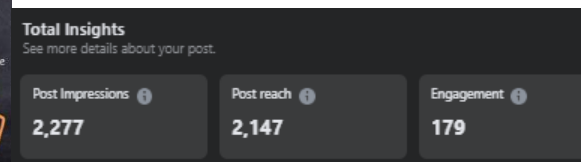
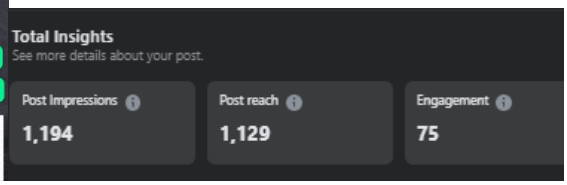
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- A short reel/video was shared on our page to show the benefits of our pre-school services.

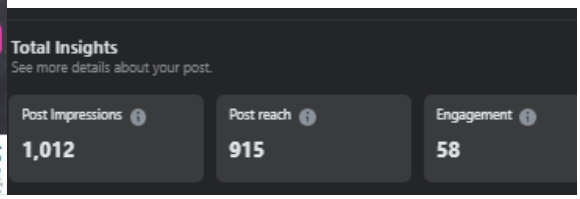


Job Highlights

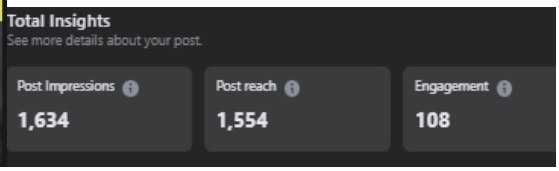
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Check out our updated available job positions!
Click the link for an online application-->https://liftca.org/careers/
Full-time employees receive:
-Retirement Plan
-Accrued Sick Leave
-Employee Assistance Program
-Health, Dental & Vision Insurance
Questions? Call us! 580-326-7581
*Incentives will be discussed during the interview process
WE ARE HIRING!
CHECK OUT OUR SIGN-ON INCENTIVES!
We are seeking motivated and dependable individuals who will provide a warm and nurturing environment for our early learners to grow and thrive!
• $1,000-HS/EHS SUBSTITUTE PART-TIME
• $1,200-SPECIAL NEEDS AIDE - ALL SITES
• $1,200-SPECIAL NEEDS AIDE - HAWORTH
• $1,200-SPECIAL NEEDS AIDE - BROKEN BOW
• $1,200-SPECIAL NEEDS AIDE - FOREST GROVE
• $2,000-HS/EHS/EHS-CC PROCUREMENT CLERK
• $1,500-EARLY HEAD START COOK - ANTLERS
• $2,500-EARLY HEAD START CAREGIVER – IDABEL
• $2,000-FAMILY & COMMUNITY ENGAGEMENT SPECIALIST
• $1,500-HEAD START TEACHER ASSISTANT TA-1 VALLIANT
SCAN THE QR CODE TO APPLY OR VISIT WWW.LIFTCA.ORG

Total Insights
See more details about your post.
Post Impressions
1,458
Post reach
1,328
Engagement
107
- 
LIFT Head Start/Early Head Start
Published by Ashley Switzer Gaddy
JOB HIGHLIGHT
Family and Community Engagement Specialist
$2,000 Sign-on Incentive
Click the link for an online application or to learn more about the open position--
>https://liftca.org/careers/
Full-time employees receive:
-Retirement Plan
-Accrued Sick Leave
-Employee Assistance Program
-Health, Dental & Vision Insurance
Questions? Call us! 580-326-7581
*Incentives will be discussed during the interview process
JOB HIGHLIGHT
$2,000 SIGN-ON INCENTIVE
Family and Community Engagement Specialist
Annual Pay: $39,662.55
• Retirement Plan
• Accrued Sick Leave
• Employee Assistance Program
• Health, Dental & Vision Insurance
Come join our Head Start Administration Team!
Questions?
580-326-7581
Apply Now!

Total Insights
See more details about your post.
Post Impressions
2,277
Post reach
2,147
Engagement
179
- 
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JOB HIGHLIGHT
$1,200 Sign-on Incentive
Special Needs Aide
-Clatyon
-Fort Towson
-Forest Grove
-Hugo
Click the link for an online application or to learn more about the open position--
>https://liftca.org/careers/
This is a great opportunity to enjoy a similar schedule as your school aged children, while also earning extra income for your family.
Questions? Call us! 580-326-7581
*Incentives will be discussed during the interview process
JOB HIGHLIGHT
Special Needs Aide
$1,200 SIGN-ON INCENTIVE
Available Positions:
• Clayton
• Forest Grove
• Fort Towson
• Hugo
Click the link in the post to officially apply!
ENTRY LEVEL POSITION WITH ADVANCEMENT OPPORTUNITIES

Total Insights
See more details about your post.
Post Impressions
1,194
Post reach
1,129
Engagement
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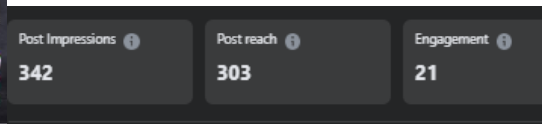
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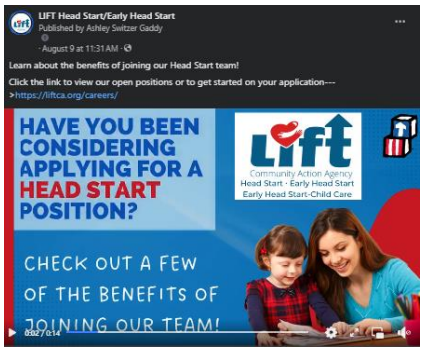
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- A short reel/video was posted on our page, highlighting the benefits of joining our Head Start team.



Administration for Children & Families | Office of Head Start

Office of Head Start

Explore content posted to the **Early Childhood Learning and Knowledge Center (ECLKC)** throughout the month of August. These email announcements and resources are helpful for Head Start programs and other early childhood staff. Find information and tools related to your work with the children and families you support daily. Select the links below to get started. Use the **Español button** on each ECLKC page to see its Spanish translation.

News from OHS

- ACF-OHS-PI-24-05 Final Rule on Supporting the Head Start Workforce and Consistent Quality Programming
  - Available in Spanish (español)
- Building a Culture of Safety Campaign
- Director's Letter: New Fellows Selected for National Head Start Fellowship Program (email)
  - Available in Spanish (español)
- Easy Ways to Share Your Feedback with OHS on the ECLKC (email)
- Final Rule Supporting the Head Start Workforce and Consistent Quality Programming
  - Overview Fact Sheet
  - Supporting the Head Start Workforce and Consistent Quality Programming (video)
  - Timeline for Compliance with Updated Performance Standard Requirements
- Get to Know Your Head Start Collaboration Office (video)
- Home at Head Start with Director Garvin — Reserving Slots (video)

Training and Technical Assistance Resources

Early Childhood Development, Teaching, and Learning

- Highly Individualized Teaching with Infants and Toddlers (video)
- Plan, Observe, Tinker, and Teach in Preschool (video)
- Responding in the Moment to Behaviors That Challenge Adults (video)
- Supporting Preschool Learning with American Sign Language (video)
- Supporting Early Learning with American Sign Language (video)

Health, Behavioral Health, and Safety

- Health Manager Orientation Guide: Community Health Partnerships
  - Considerations for Infants and Toddlers
  - Examples of Community Health and Behavioral Health Partnerships
  - Health Services Advisory Committee
  - Memorandum of Understanding (MOU)
  - Sharing Information About Community Partnerships

Parent, Family, and Community Engagement

- Equity Drivers to Strengthen Parent, Family, and Community Engagement
  - Equitable PFCE That Leads with Race
  - Drivers for Integrating Equity in PFCE

    - Be Open to the Many Ways Families May Want to Engage in Head Start Programs
    - Discover and Uplift Family Strengths
    - Recognize Families as Partners and Honor Their Contributions
    - Understand and Challenge Biases
    - Use Power Responsibly
- Goal-setting with Families Course

Program Management and Fiscal Operations

- Increase Employee Engagement and Retention with Stay Tools
- Preparing Head Start Facilities for Natural Disasters (videos)
    - Adhere to Federal, State, and Local Regulations
    - Implement Short-term Disaster Management Measures
    - Practice Disaster Response Drills

Newsletters

- Disabilities Services Newsletter Issue No. 82
- Play the Head Start Way Newsletter Issue No. 4
- Resources to Make You Smile! Issue No. 42
    - Available in Spanish (español)
- Sesame Street in Communities Issue No. 35
    - Available in Spanish (español)

Subscribe now to get all your favorite newsletters direct to your inbox.

Head Start Careers

- Accountant *Pico Rivera, CA*
- Head Start Program Deputy Director *San Juan/Juncos, PR*
- Program Director *Charlottesville, VA*

Find more **Head Start program employment opportunities** in the ECLKC Job Center.

Upcoming Events for September

- Wednesday, Sept. 4: Emotional Skills for Young Children [in Spanish]
- Thursday, Sept. 12: MyPeers Orientation for Home Visitors
- Monday, Sept. 16: Applying for a CDA Assessment in Another Language
- Tuesday, Sept. 17–20: 40th Annual International Conference on Young Children with Disabilities and Their Families
- Thursday, Sept. 19: Playground Safety Tips for Early Childhood Programs
- Friday, Sept. 20: 10 Tips for Creating Supportive Environments That Can Prevent Behavioral Concerns
- Monday, Sept. 23: Infant and Early Childhood Mental Health Consultation National Office Hours
- Tuesday, Sept. 24
    - Medical Statements, Milk Substitutions, and Special Diet
    - My Peers Orientation for Family Services Staff

Visit the ECLKC for a full list of **upcoming events**.

Stay connected! Follow the Office of Head Start on X, Facebook, and Instagram. Visit the Family Room blog to learn more about the activities of the Administration for Children and Families (ACF).

View the web version Go to ECLKC

U.S. Department of Health & Human Services & Administration for Children & Families

OFFICE OF HEAD START

ACF Administration for Children and Families	U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES	
	1. Log No. ACF-OHS-PI-24-05	2. Issuance Date: 08/21/2024
	3. Originating Office: Office of Head Start	
	4. Key Words: Head Start Workforce; Wages; Benefits; Mental Health; Quality Improvement	

PROGRAM INSTRUCTION

TO: All Head Start Preschool and Early Head Start Grant Recipients

SUBJECT: Final Rule on Supporting the Head Start Workforce and Consistent Quality Programming

INSTRUCTION:

On August 21, 2024, the Administration for Children and Families (ACF) published a final rule in the Federal Register, **Supporting the Head Start Workforce and Consistent Quality Programming**. The rule updates the Head Start Program Performance Standards (the Performance Standards) to increase support and stability for the Head Start workforce. The changes also improve the quality of services Head Start programs provide to children and families.

The Office of Head Start (OHS) first proposed these changes in a notice of proposed rulemaking (NPRM), published on November 20, 2023. During the NPRM comment period, OHS received approximately 1,300 public comments, including from Head Start programs; national, regional, and state Head Start associations, labor unions; research organizations; individual Head Start staff and families; and members of the U.S. Congress. The final rule takes into consideration and is responsive to the public comments.

The updated Performance Standards respond to structural concerns affecting the sustainability of Head Start programs. They provide clear federal requirements for:

- Wages and benefits to support the Head Start workforce
- Better integration of mental health across all aspects of Head Start programming
- Quality improvement and clarity of requirements in other topic areas

The final rule is effective immediately. Programs are expected to comply with some of the updated requirements 60 days after the rule is published (October 21, 2024). Programs are granted more time to comply with several requirements, including new wage and benefit requirements, as noted in the Effective and Compliance Dates section of the rule.

Workforce

This rule supports Head Start programs in maintaining a diverse and well-qualified workforce by ensuring staff are more fairly compensated, which in turn promotes more stable, higher-quality services for enrolled children and families. Previously, the Performance Standards did not include any specific requirements for staff wages or benefits, which has generally led to low compensation for staff and high staff turnover rates for programs.

Staff Wages

The updated Performance Standards require programs to provide competitive wages for staff by August 1, 2031. Specifically, the rule will require programs to establish or update a pay scale for all positions. It will also require programs to pay Head Start educators annual salaries that are comparable to public school preschool teachers or 90% of public kindergarten teachers, accounting for responsibilities, qualifications, experience, and work schedule. The updated Performance Standards will also require programs to pay all staff a wage sufficient to cover basic costs of living and to ensure wages are comparable across Head Start Preschool and Early Head Start programs.

The final rule includes a small agency exemption for Head Start agencies with fewer than 200 funded slots. These small agencies must develop a pay scale for all employees and make measurable improvements in wages for staff over time. However, small agencies are not required to pay wages that are comparable to public school preschool teachers (or 90% of public kindergarten teachers), nor are they required to comply with the pay floor policy described above.

The final rule includes flexibility for the Secretary of the Department of Health and Human Services to establish in 2028 a waiver process for most of the rule's wage requirements, if needed, due to low appropriations over the prior four years. The waiver would be for programs that are already meeting quality benchmarks and would otherwise have to reduce enrolled Head Start slots to implement these requirements.

Staff Benefits

By August 1, 2028, the updated Performance Standards will require programs to provide or facilitate access to high-quality affordable health care coverage; offer paid leave; and offer access to short-term, free or minimal-cost behavioral health services for fulltime staff. For part-time staff, programs will be required to facilitate access to high-quality, affordable health care coverage. Programs will also be required to facilitate access to affordable child care and to the Public Service Loan Forgiveness program or other applicable student loan debt relief programs for any eligible staff members.

The final rule also includes flexibility for small agencies with 200 or fewer funded slots. As with wages, these small agencies must still make measurable improvements in benefits for Head Start staff over time.

Staff Wellness

The updated Performance Standards require programs to cultivate a culture of wellness that empowers staff as professionals and supports them to effectively accomplish daily job responsibilities in a high-quality manner. As part of this larger effort to promote the wellness of Head Start staff, by August 1, 2027, programs must provide each staff member with regular breaks during their work shifts that are of adequate length based on hours worked.

Mental Health

In the updated Performance Standards, mental health is integrated more intentionally and consistently across program systems to better support children, families, and staff. Programs are required to take a multidisciplinary approach to foster a program-wide culture of wellness. The Performance Standards also clarify the role and responsibilities of mental health consultants, and allow for behavioral health support specialists to be used in coordination with a mental health consultant. These changes address workforce shortages while maintaining a focus on high-quality, integrated mental health supports.

Other Quality Improvements

The updated Performance Standards enhance and clarify requirements in other topic areas to promote consistent high-quality services and support child well-being. These changes include:

- More reasonable caseloads for family service workers
- Promoting child safety in Head Start programs
- Preventing and addressing lead exposure in the water and paint of Head Start facilities
- Updates to the community assessment process
- Enhanced services for expectant families
- Requirements for programs to identify barriers to program enrollment and attendance, such as lack of transportation

Finally, the changes include some clarifications to promote better transparency and clarity of understanding for recipients.

Members of the Head Start community are urged to take the time to read the final rule in its entirety, including the section-by-section discussion of public comments. OHS will continue to provide **direction, guidance, and resources** that support our shared mission to prepare Head Start children and families for school and beyond.

Thank you for the work you do on behalf of children and families.

Sincerely,

/ Khari M. Garvin /

Khari M. Garvin
Director
Office of Head Start

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Office of Head Start (OHS) | 330 C Street, SW | 4th Floor Mary E. Switzer Building | Washington, DC 20201
https://eclkc.ohs.acf.hhs.gov | 1-866-763-6481 | Contact Us

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HEAD START | ECLKC
Early Childhood Learning & Knowledge Center

Overview Fact Sheet

eclkc.ohs.acf.hhs.gov/policy/article/overview-fact-sheet

The Head Start program is the national leader in providing high-quality early education and services, especially for children who are furthest from opportunity. The Administration for Children and Families (ACF) published a final rule, Supporting the Head Start Workforce and Consistent Quality Programming, making significant changes to the Head Start Program Performance Standards (the Performance Standards) to stabilize the Head Start workforce and to improve the quality of the comprehensive services on which Head Start families rely.

The final rule in the Federal Register contains a complete description of the changes. The preamble of the final rule provides the reasoning and research that supports the finalized changes, including how ACF incorporated feedback from public comments in the final rule.

The changes to the Performance Standards can be summarized in three categories — better compensation for Head Start staff, broad integrating mental health services, and effectively and equitably meeting the evolving needs of communities.

Significantly increase compensation for many Head Start staff.

Head Start program staff are the cornerstone of the Head Start mission to provide high-quality early education and comprehensive services to children and families who need them. The updated Performance Standards require that programs compensate Head Start staff to reflect the demands and educational requirements of their positions. The regulations require that Head Start staff are paid a sufficient wage based on the cost of living in their area. The updated Performance Standards will enable dedicated Head Start staff to build sustainable careers around the challenging, yet rewarding, jobs of supporting the children and families who need them. Programs will be able to hire and retain qualified and experienced staff, reversing trends of high turnover in Head Start programs across the nation.

Integrate mental health services into Head Start programming more broadly.

Several changes to the Performance Standards improve mental health supports in Head Start programs. The revised Performance Standards better integrate mental health into every aspect of program services, and strengthen the role of mental health consultation. These changes address the increasing rates of mental health concerns in children and adults in Head Start programs and facilitate a proactive, multidisciplinary approach to support the overall well-being of children, families, and staff.

Enhance services to help Head Start programs effectively meet the evolving needs of the communities they serve.

The updated Performance Standards promote consistent quality services across Head Start programs. They support core Head Start principles such as implementing enhanced comprehensive services and serving the children who are most in need. The Performance Standards now address income eligibility concerns by

accounting for excessive housing costs and reflecting recent statutory changes to income eligibility requirements for American Indian and Alaska Native (AIAN) and Migrant and Seasonal Head Start (MSHS) programs.

Major Performance Standard Changes

Highlights of the specific changes to the Head Start Program Performance Standards are summarized below. For a comprehensive list of changes, access our resource that tracks the changes from the previous Performance Standards, or read the full Final Rule Federal Register notice.

Workforce Supports

To improve staff wages, the Performance Standards include the following:

- Head Start programs must pay staff competitive wages with an updated salary scale or pay structure that applies to all positions.
- Most programs must pay annual salaries to these staff that are at least the same as preschool teachers in public school settings, or 90% of kindergarten teacher salaries, taking into account qualifications, experience, responsibilities, and hours worked.
- Wages must be comparable across Head Start Preschool and Early Head Start programs.
- Most programs must pay all staff a wage that is at least sufficient to meet basic cost of living in the local area.

Additional flexibility

- Smaller agencies (200 or fewer funded slots) are exempt from some of the wage requirements; however, they must still establish a salary scale and make measurable progress toward increasing wages over time.

To improve staff benefits, the Performance Standards include the following:

- For full-time staff, most programs must:
  - Provide or facilitate access to health care coverage
  - Offer paid leave
  - Offer access to free or low-cost short-term behavioral health services
- For part-time staff, programs must facilitate access to health care coverage.
- For any eligible staff, programs must facilitate connections to child care subsidies and public service loan forgiveness.
- Smaller agencies (200 or fewer funded slots) are exempt from some of the benefit requirements, but they must make improvements in staff benefits over time.

To enhance staff wellness and engagement, the Performance Standards include the following:

- Programs must provide each staff member with regular breaks during their work shifts that are of adequate length based on hours worked.
- Programs must cultivate a management style that positively promotes high-quality job performance.

Mental Health

Addressing mental health supports, the Performance Standards:

- Require programs to use a multidisciplinary approach to mental health and wellness supports and encourages programs to use a team-based approach.
- Clarify expectations for program-wide wellness supports.
- Require programs to provide mental health consultation services at least monthly, with flexibilities to meet this requirement in coordination with behavioral health support specialists that are credentialed and trained in their field.
- Integrate mental health into support services for families.
- Facilitate proactive screening and follow-up for children's mental health needs.
- Incorporate strengths-based language throughout the Performance Standards.
- Provide clearer requirements and definition of *suspension*.

Other Quality Improvements

To better engage with families, the Performance Standards:

- Establish a maximum caseload of 40 families per family service worker to facilitate delivery of high-quality family support services, including health, parenting, and economic support, which requires a dedicated, individualized approach.
- Provide flexibilities for programs to exceed the maximum family service worker caseload in periods of staff absence, or in emergency/recovery situations. Additionally, waivers are required when exceeding the maximum caseload on a long-term basis.
- Require the use of effective, accessible forms of communication in all interactions with families.
- Streamline enrollment processes to minimize burden on families.
- Align with recent statutory changes providing increased flexibility in eligibility requirements for AIAN and MSHS programs.

To improve child health and safety, the Performance Standards:

- Clarify which "significant" safety incidents should be reported to ACF as soon as possible but within seven days.
- Enhance prevention of safety incidents.
- Protect children from exposure to lead in water and paint through regular testing and inspection and, if needed, remediation and abatement in Head Start facilities where lead exists.

To identify and meet community needs, the Performance Standards:

- Require programs to identify and, if possible, resolve barriers to enrollment and attendance by incorporating these into the existing community assessment process.
- Streamline the process and frequency of the community assessment. Clarifies the intent and goals of the community assessment, as well as the purpose of the annual review in the community assessment process.
- Ensure responsive, high-quality services for expectant families.
- Revise definition of *income* to provide a clear, finite list of income sources that should be counted for eligibility determination.
- Allow programs to adjust a family's gross income to account for excessive housing costs in their community for eligibility determination purposes.

Regarding program structure, the Performance Standards:

- Clarify the requirements for:
    - Maximum group size in family child care settings for infants and toddlers and mixed aged preschool groupings.

- Provider qualifications in family child care settings.

Read more:

Policy

Last Updated: August 21, 2024

MEALS SERVED TO CHILDREN IN HEAD START & EARLY HEAD START 12 Month Summary Report

Children that eat 2 meals and a snack at Head Start/ Early Head Start receives 1/2 to 2/3 of their daily nutritional needs.

Month	Breakfast	Lunch	Snack	Monthly Total
August-23	2301	2327	3193	7821
September-23	3070	3091	4006	10167
October-23	3069	3074	4035	10178
November-23	2469	2362	3176	8007
December-23	1961	1913	2341	6215
January-24	2760	2832	3653	9245
February-24	2937	2901	3461	9299
March-24	2444	2428	3164	8036
April-24	3161	3175	4218	10554
May-24	2115	2072	2416	6603
June-24	464	487	440	1391
July-24	660	710	637	2007
August-24	2483	2461	3082	8026
YEARLY TOTALS	29894	29833	37822	97549

July 2024 EHS Time and Attendance

As of 7/31/24	ENROLLED			DROPPED								ATTENDANCE
CENTER	Previously Enrolled	Monthly Enrolled	YTD Enrolled	Previously Dropped	Monthly Drop	YTD Drop	Currently Enrolled	AI	30 Day Count	Date Dropped	Kid Days	Monthly ADA
Antlers	64	3	67	44		44	23	1	0		22	76.5%
Hugo	33		33	21		21	12	1	0		22	65.9%
Idabel	34		34	22		22	12	2	0		22	71.2%
TOTALS	**131**	**3**	**134**	**87**	**0**	**87**	**47**	**4**	**0**			**72.4%**

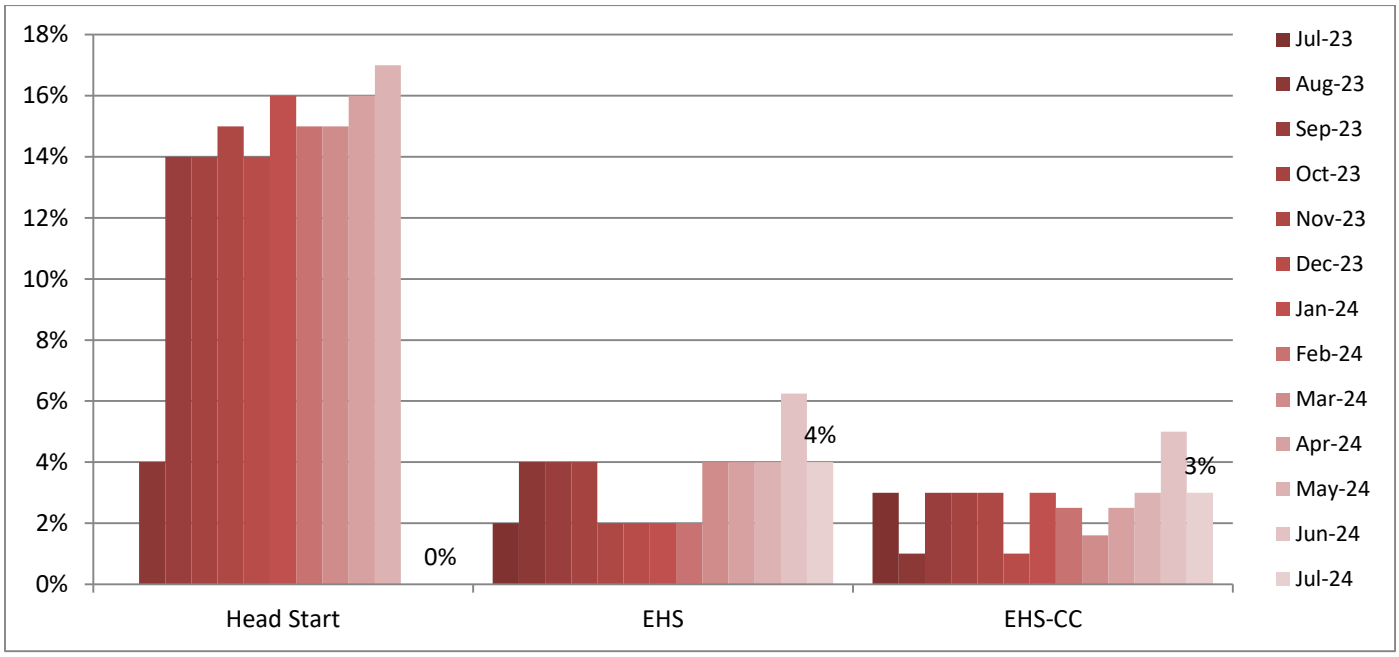
July 2024 EHS-CC Time and Attendance

As of 7/31/24	ENROLLED			DROPPED								ATTENDANCE	
CENTER	Previously Enrolled	Monthly Enrolled	YTD Enrolled	Previously Dropped	Monthly Drop	YTD Drop	Currently Enrolled	AI	30 Day Count	Date Dropped	Kid Days	Monthly ADA	
ELC-Antlers	22		22	15	1	16	6		1	7/26/2024	22	70.2%	
ELC-Broken Bow	49	4	53	35	2	37	16	1	2	7/25/2024	21	84.2%	
ELC-Hugo	20	2	22	13	2	15	7		2	7/23/2024	22	71.0%	
ELC-Idabel	45	2	47	30	4	34	13	3	4	7/22/2024	22	89.2%	
Cabbage Patch	48	3	51	24	3	27	24	4	3	7/2/2024	22	91.0%	2 of these drops are transfers
The LearningTree	92	5	97	53	4	57	40	1	4	7/4/2024	22	84.0%	
TOTALS	**276**	**16**	**292**	**170**	**16**	**186**	**106**	**9**	**16**			**80.7%**	Actual number of drops for the month is 14

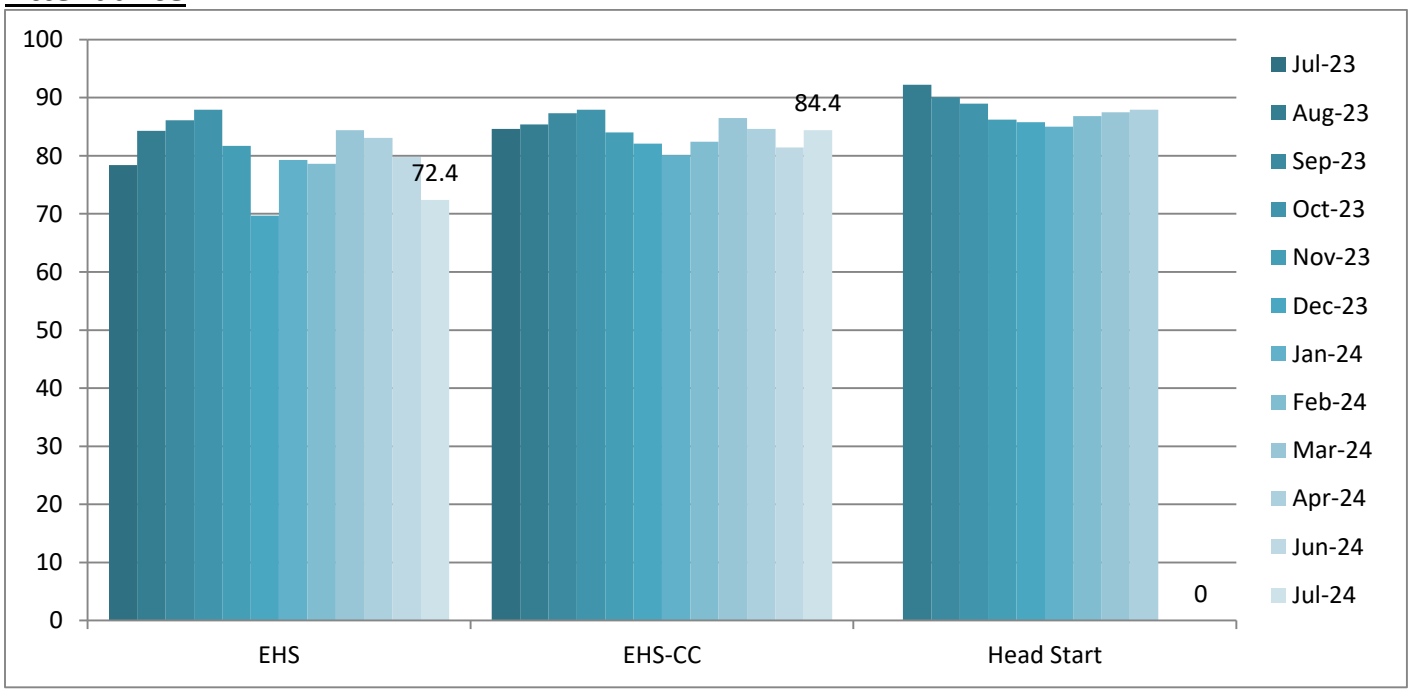
Data Analysis Report Summary
July 2024

Disabilities

IEP/IFSP –

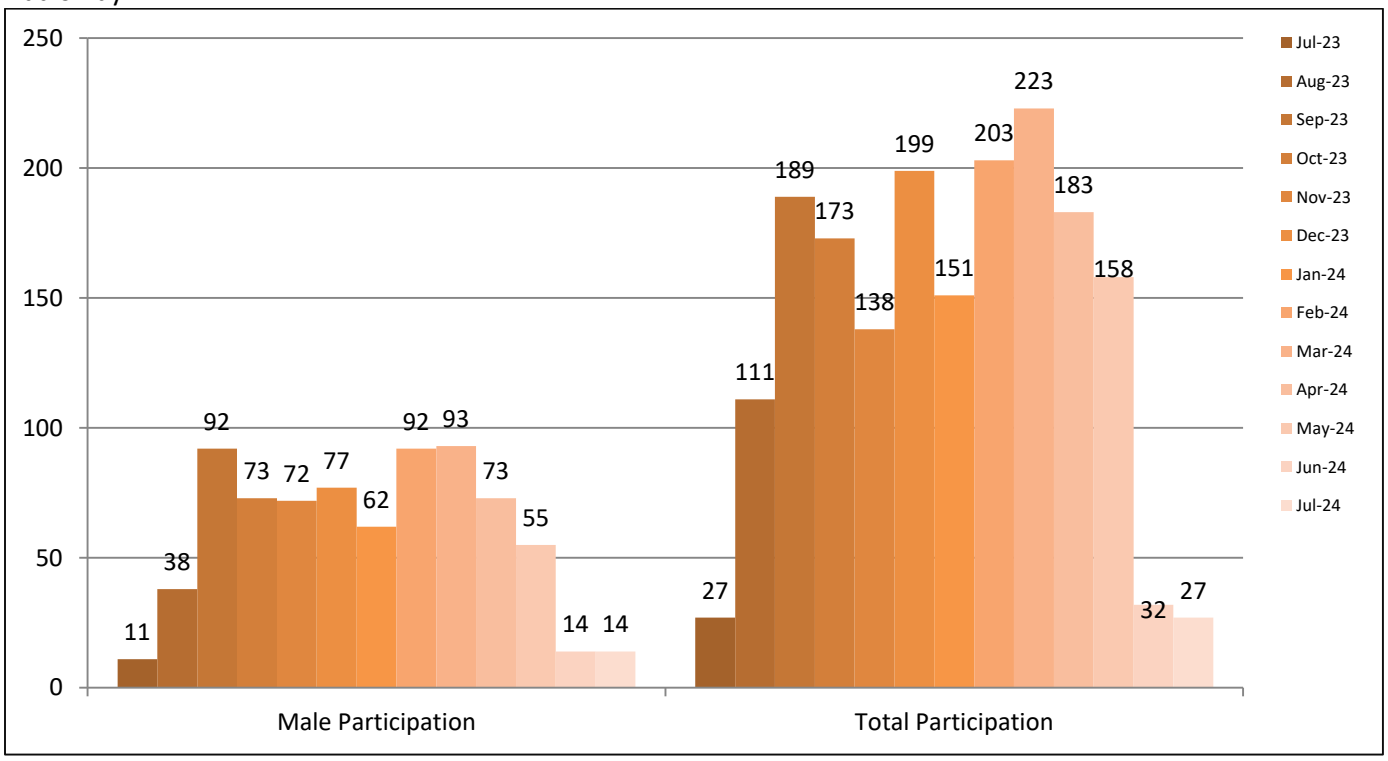


Attendance



Family & Community Engagement

Dad's Day



Parents Ready to Read

