Senior Center Operations and Program Evaluation (11/1/13)

Name of Center: Date opened full time:	Name of Director/Manager: e-mail address: telephone:	Date Tool Submitted: Time frame covered in the SCOPE: from (date) _____ to (date) _____ **This information determines your SCOPE year for use in this process.**
Physical Address:		County:
Mailing Address:		AAA Region:

[ ] Initial Certification [ ] Recertification	What is your center's definition of senior? [ ] 60+ [ ] 55+ [ ] Other _____
What is your average number of participants per day, including satellites? _____	Name of governing body/umbrella agency (if applicable)?
For initial and recertification: Has someone currently on your staff taken the senior center certification training within the last three years? If so, who? On what date?	Have you attached: [ ] Directions to the center?　　　[ ] Training Plans? [ ] Organizational chart?　　　[ ] Survey forms?

I have reviewed the completed version of this tool according to the gray scoring sections and the corresponding documentation. I have also reviewed the "Instructions for Completing the SCOPE and the Documentation."

Senior Center Director	AAA Representative

If your center has satellites, please list them here and complete the table. (See "Policies and Procedures for Senior Center Certification" for the definition of a satellite center.)

Name of Satellite	Hours Open (days of the week and hours per day)	How many staff members?	How many FTEs*?	Purpose of the satellite (e.g., to serve an isolated community, a special population, or some other reason; please give a brief rationale)

*FTE (Full-time equivalent). For example, one full-time worker is 1 FTE (37.5 hrs/wk minimum). Two 3/4 time workers make 1.5 FTE (.75 FTE + .75 FTE).
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For Centers Applying for Recertification

If the center is applying for recertification, please list any recommendations that were included in the letter accompanying the certificate, and indicate what the center has done to address each one (*required* for recertification).

Recommendation	How we addressed it

1. Services, Publicity, and Marketing

A. Information and Referral/Case Assistance

1a. Having an organized procedure for connecting center participants with services and following up with them to learn whether their needs were met makes the difference between Information and Referral (marked in column C in question 3) and Information and Assistance (marked in column B). Please describe the tools you use (e.g., client tracking software; on-line tools; log sheets that include client's name, contact information, problem, action, and follow-up) and your procedure for providing case assistance.

1b. If your center publicizes many services in the same way(s), for all services listed in columns A and B, describe how participants are informed about them and how to access them. In column E in the table, add any other clarifying information about when and how the service is offered, and if it is publicized in additional or different ways.

2a. How do you provide information and referral?

[ ] Computer database searchable by participant or staff members/volunteers
[ ] Computer database searchable by I&R staff members/volunteers but not by participants
[ ] Notebooks or files available for participants or staff members/volunteers
[ ] Notebooks or files available for staff members/volunteers but not to participants
[ ] Other. Specify _____

2b. How do you provide referral information about regional or national services, especially those for which there is no equivalent local service?

B. Services

3. All centers should provide some type of access to the following services unless they are not available in your area. For each service area listed here, check the most appropriate box. **Although the expectation is that services have been on-going throughout the certification or recertification period, it is only necessary to document the current SCOPE year**. Services for which participants can enroll at the center or those sponsored or co-sponsored by the center in a different location may be listed in Column A under most circumstances. Please see "Instructions for Completing the SCOPE and Documentation" for more information and examples.

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Please read these definitions of the headings and mark this grid accordingly for services offered in the past SCOPE year. For further information see the *"Instructions for Completing the SCOPE and Documentation"*.

Column A: ON SITE. The center, parent organization, or other organization provides this service or registers people for it on site.

    1) Explain how services are provided or how people can register on site.

    2) Explain how often they are available.

Column B: I&A. The center can provide information and assistance if needed, as described in Question 1.

    1) Information and assistance must be available through the I&A system described in Question 1. No further explanation is needed here.

    2) Explain how often they are available.

Column C: I&R. The center provides information and referral only.

Column D: NO SERVICE. This service is not available in the area.

Column E: Use this space as indicated for explanations above and to clarify any additional or different ways of publicity not listed in 1b above.

Services (current SCOPE year only)	A ON SITE	B I&A	C I&R	D NO SERVICE	E Use the space in this column to add any additional information as needed. Please be brief.
These three services are required of all centers (Column A)					
a. Health screenings					
b. Fitness and health promotion					
c. Counseling about Insurance					
These two services are required of all centers in either Column A or B					
d. Tax preparation/counseling					
e. Legal services					

Services (current SCOPE year only)	A ON SITE	B I&A	C I&R	D NO SERVICE	E Use the space in this column to add any additional information as needed. Please be brief.
f. General transportation					
g. Medical transportation					
h. Support groups or classes for caregivers or others facing challenges					
i. Housing assistance such as counseling on housing options, help with finding housing, etc.					
j. One-on-one reverse mortgage counseling by a state-certified, non-commercial counselor					
k. Home repair/modification					
l. Home health services					
m. In-home aide services					
n. Medicaid benefits					
o. Medicare A & B Enrollment (available on site, Column A, only if SSA comes to the center to enroll)					
p. Medicare Part D					
q. Social Security benefits					
r. Job training					
s. Job placement					
t. Congregate meals					
u. Home-delivered meals					
v. Adult day care/day health					
w. Mental health					
x. Disaster preparedness training,					

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	disaster assistance planning, or disaster assistance to older adults					
y.	Durable medical equipment/assistive devices					
z.	Hospice care					
aa.	Long-term care facilities/ AAA Ombudsman					
bb.	Rehabilitation services					
cc.	Report suspected abuse, neglect, or exploitation					
dd.	Respite					
ee.	Senior Games					
ff.	Telephone reassurance					
gg.	Energy assistance (such as LIEAP, fan program, etc.)					
hh.	Food distribution (e.g., food pantry, commodities, Ensure, etc.)					
Total in each column						

Total Services in Columns A and B: _____

If all the services are available to people living in your area, your total should be 29 (85%) or higher.

C. Publicity for the Center and Its Services and Activities

4. Which of these things do you use regularly to publicize the center? Please list and document one or two examples from the past SCOPE year for each publicity type you use.

Publicity Type	How, When, and Where We Have Used It
[ ] Brochure	
[ ] Calendar of events that is circulated rather than only posted in the center. *If the calendar is distributed only in the newsletter, this should count as only one product/activity.*	

Publicity Type	How, When, and Where We Have Used It
[ ] Newsletter	
[ ] Advertisements/notices in local or regional papers (including supplements)	
[ ] Stories in local or regional papers	
[ ] Spots or interviews on local TV or radio	
[ ] Web page	
[ ] Social media (please specify)	
[ ] Other (please specify)	

D. Marketing to Special Populations and the Community

5. Please describe special ongoing publicity efforts targeting people in the following groups. If you do not have ongoing efforts, single efforts must occur at least once a SCOPE year.

   This is **not** about publicizing specific activities or facilities for special populations, but publicizing the senior center in general to the required target populations. Examples include distributing the newsletter or brochure to specific locations or agencies that serve the target group or making presentations to specific target groups.

   All centers must make special efforts to publicize the center to people with low income and minority seniors unless they represent less than 5% of older adults in the community.

Older Adults	Targeted Marketing Efforts	None or few in community
[ ] with low income		
[ ] in rural areas		
[ ] from ethnic minority groups (which ones?)		
[ ] with physical or cognitive impairments (which ones?)		
[ ] whose primary language is not English (which ones?)		
EXAMPLE: Older people from ethnic minority groups	*We distributed senior center newsletters and calendars each month at all nine of the*	

Older Adults	Targeted Marketing Efforts	None or few in community
1. African Americans	*African American churches in the community.*	

6. **(For Excellence Only.)** Please list training events within the most recent SCOPE year (initial) or 5 years (recertification) designed to educate some portion of the non-senior community about the needs, interests, or contributions of older adults. This includes, but is not limited to, *aging-related training* to professionals in other agencies (excluding your own), service providers, student interns, children, caregivers, or other groups that may include seniors but were not formed specifically for seniors. Speaking to public groups about the center and what the center does is publicity, not training, and does not count for this question; it should be listed in Question 4 (marketing). Training that is part of the center's programming for its participants does not count for this question, even if an invitation was extended to a wider audience. The training event should be planned specifically for a younger target audience and held at a convenient time for that audience (e.g., working baby boomers are not likely to come at 10 a.m. on a weekday). You should be able to demonstrate how you advertised the event to the target audience.

Reminder to site team: SCOPE Year is _____ (month) to _____ (month)

Date (mm/yy)	Type of Training/ Your Center's Role	To What Group?	How did you publicize the activity to that group?
SCOPE Year 1			
SCOPE Year 2			
SCOPE Year 3			
SCOPE Year 4			
SCOPE			

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Year 5			
Example:			
1/13	*Getting ready for retirement (We provided space, publicity, and volunteers to work the registration table. The trainers came from Cooperative Extension.)*	*Baby Boomers*	*We worked through the human resources department of the three largest employers in town to encourage participation by people who will retire in the next 15 years. Notices on the bulletin boards of the local home improvement stores and farmers' market.*

Scoring for Section 1	For Merit	For Excellence	Comments
Question 1			
1a. The center should have an **information and assistance system that includes screening, help with contacting a service provider, and follow-up with the individual,** as well as some sort of case assistance tool for all services for which Column B is checked. The form should include client's name, contact information, problem, action, and follow-up. 1b. The center must have a way to inform participants about the services the center offers on site or through I&A.			
Question 2			
2a. Is it clear how the center provides referral information? 2b. Is it clear how the center provides information about regional and national services?			
Question 3			
These three things are required for both Merit and Excellence: Information and Referral or better (Columns A, B and C) must be available for			

Scoring for Section 1	For Merit	For Excellence	Comments
all services listed except those not available in the area.			
Information and Assistance or better (Columns A and B) must be available for 85% of the services available to people in the center's area. If all services are available, 85% is 29 services.			

These three services must be provided on site (column A must be checked).
 	
    a. Health screenings
    b. Fitness and health promotion
    c. Counseling about insurance			

These two services must be provided on site or with I & A (column A or B must be checked).
 	
    d. Tax preparation/counseling
    e. Legal services			

(For Excellence Only) Services f. through s.
Centers must offer one or more services (or enrollment for services) on site (column A) from at least 3 of the following categories:
 	
    [ ] General transportation or Medical transportation (f. or g.)
    [ ] Support groups or classes for caregivers or others facing challenges (h.)
    [ ] Housing assistance or Reverse mortgage counseling or Home repair
        (i., j., or k.)
    [ ] Home health or In-home aide services (l. or m.)
    [ ] Medicaid benefits (n.)
    [ ] Medicare benefits, Parts A & B (o.)
    [ ] Medicare benefits, Part D (p.)
    [ ] Social Security benefits (q.)
    [ ] Job training or Job placement (r. or s.)			

Question 4			

Centers should have at least **two** of these marketing products/activities:
 	
    [ ] a brochure
    [ ] a calendar of events that is circulated rather than only posted in the center.
       If the calendar is distributed only in the newsletter, this should count as
       only one product/activity.			

Scoring for Section 1	For Merit	For Excellence	Comments
[ ] a newsletter that is available in some way besides a paid subscription [ ] advertisements/notices in local or regional papers (including supplements) [ ] stories in local or regional papers [ ] spots or interviews on local TV or radio [ ] a Web page [ ] social media [ ] other			
Question 5			

All centers must make special efforts to publicize the center to people with **low income** and **minority** seniors unless they represent less than 5% of older adults in the community.
 	
For Merit, in addition to the above, centers must make special efforts to publicize the center to one other group listed below.
 	
For Excellence, in addition to the above, centers must make special efforts to publicize the center to all three remaining groups listed below.
 	
Ongoing efforts are preferable, **but single efforts must occur at least once a SCOPE year.**
 	
*For initial certification***:**
 	
For *Merit*, center must have efforts to advertise to:
 	
[ ] low income elders
 	
[ ] from ethnic minority groups (which ones?)
 	
[ ] one other group listed below:
 	
    [ ] in rural areas
    [ ] with physical or cognitive impairments (which ones?)
    [ ] whose primary language is not English (which ones?)
 	
For *Excellence*, center must have efforts to advertise to:
[ ] low income
[ ] from ethnic minority groups (which ones?)
[ ] in rural areas			

Scoring for Section 1	For Merit	For Excellence	Comments
[ ] with physical or cognitive impairments (which ones?) [ ] whose primary language is not English (which ones?)			

For recertification:

For *Merit*, center must have efforts to advertise to:

	On-going	1	2	3	4	5
	Single Efforts by SCOPE Yr.					
[ ] Low-income						
[ ] From ethic minority groups						
One other group below:						
[ ] In rural areas						
[ ] With physical or cognitive impairments						
[ ] Whose primary language is not English						

For *Excellence,* center must have efforts to advertise to **all** of these groups:

	On-going	1	2	3	4	5
	Single Efforts by SCOPE Yr.					
[ ] Low-income						
[ ] From ethic minority groups						
[ ] In rural areas						
[ ] With physical or cognitive impairments						
[ ] Whose primary language is not English						

	For Merit	For Excellence	Comments
Question 6 (For Excellence Only)			
For initial certification, there should be 2 instances in the most recent SCOPE			

Scoring for Section 1	For Merit	For Excellence	Comments
year of training on aging issues for a non-senior audience. For recertification, there should be 10 instances of training, 2 of which should have taken place in the most recent SCOPE year.			
Please see the Site Visit Activities section following Section 6 at the back of this SCOPE tool for items to be checked on site.			

Section 1.	Commendations, Recommendations, and Suggestions
[ ] Passes at the Level of Excellence	
[ ] Passes at the Level of Merit	
[ ] Fails	

2. Activities, Volunteer Opportunities, Advocacy, and Transportation

A. Activities

7. Please list classes or other ***regularly scheduled group activities*** such as movies and day trips (daily, weekly, monthly) offered in the center for *any consecutive 3 months in the past 12-month period*. Be sure to indicate each one's *frequency, duration, and estimated average attendance*. Also on this table, record activities at your satellites or off-site locations, which count in the total for this section. ***Remember that activities associated with services you have listed in Section 1 (e.g., blood pressure check, vision screening, flu shots) should not be listed here.***

Which 3-month period are you using? From ___/___/___ to ___/___/___.

Activity	Days/ times	Avg. Attend-ance	Once or more per week (1)	Less than weekly: Times per Month 1 (.25)	2 (.5)	3 (.75)
Totals						

For more space, add rows to this table or photocopy this page.

8. Please list seasonal, quarterly, semiannual, annual, and one-time events offered in the center each SCOPE year (1 year for initial certification, 5 years for recertification) These can include such things as special trips, parties, fairs, short courses, or special guest speakers. This should not include any activities listed in Question 7. **Remember that activities associated with services you have listed in Section 1 (e.g., blood pressure check, vision screening, Medicare Part D counseling) should not be listed here.** Indicate the date and estimated attendance. Record activities at your satellites or at off-site locations, which count in the total for this section. Please list events in chronological order by **SCOPE year**, even if the event repeats each year.

Activity	Month/ Year	Estimated Attendance
SCOPE Year 1		
SCOPE Year 2		

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Activity	Month/Year	Estimated Attendance
SCOPE Year 3		
SCOPE Year 4		
SCOPE Year 5		

Activity	Month/Year	Estimated Attendance
Totals		

For more space, add rows to this table or photocopy this page.

9. Please list drop-in activities that are available for participants' use outside planned classes and events (e.g., fitness center, computers, games, puzzles, pool table, bocce or shuffleboard court, walking trail). Tell when they are available and how many people use them daily, on average. Record drop-in activities at your satellites, which count in the total for this section.

Drop-in Activity/Equipment	Hours available	Average no. of daily users
Totals		

What is the total number of average daily users for the drop-in activities you listed here?	
What is your average daily attendance at the center?	
Divide the number of daily users by the average attendance and multiply the result by 100. If less than 10% please explain:	%

10. Describe how the activities and facilities described in Questions 7, 8, and 9 meet the needs of a diverse group of seniors (for example, both men and women, people of different ethnic groups, different educational levels, and different abilities). (The blank will expand to accommodate your answer.)

B. Opportunities for Volunteers

11. How many total volunteers? _____

    How many volunteers meet your definition of senior? _____

    For Merit and Excellence, volunteers must be engaged in at least one activity for the center and one for the community.

Volunteering at the center	Yes	No	Volunteering in the community through the center	Yes	No
a. Office work (e.g., typing/computer use, filing, keeping books)			i. Delivering home-delivered meals		
b. Planning/coordinating special events			j. Friendly visiting		
c. Reception/welcome desk			k. Providing respite/sitter services		
d. Serving congregate meals			l. Telephone reassurance		
e. Setting up rooms/equipment for classes and events			m. Transportation		
f. Speaking to groups about the center (marketing)			n. Working in a hospital, library, etc.		
g. Teaching classes			o. Mentoring children		
h. Working on the newsletter			Other (specify):		
Other (specify):					

12. Please list and describe how you recognized all the center's volunteers in the most current SCOPE year (initial) or in each of the past 5 SCOPE years (recertification). (These could include events, sending them thank-you cards or some other token, or acknowledging them in the newspaper, for example. Indicate how many were honored.)

Activity	Date	Comments/Description	How many?

Example: Volunteer Dinner	*April 1, 2013*	*Annual volunteer recognition held at Southstreet Station with entertainment and dinner and awards recognizing outstanding contributions.*	*200*

13. (**For Excellence Only).** Do you have a single written volunteer plan document that covers all of the following materials? (See the "Instructions for Completing the SCOPE and Documentation."*)*

	Yes	No
a. needs of the center or tasks for which volunteers are desired, and the number of volunteers needed for each		
b. procedure for recruiting, orienting, training, and keeping them involved		
c. a way of informing people in the community of volunteer opportunities at the center		
d. a way to notify people in the center of volunteer opportunities in the community		

C. Advocacy

14. List instances in the current SCOPE year (initial) or 5 years (recertification) in which the center has advocated for rights for older adults and/or facilitated individual self-advocacy or self-advocacy by groups of older adults. Add boxes (electronic) or use additional sheets (hard copy) as needed. See advocacy in the *"Instructions for Completing the SCOPE and Documentation."*

Date	Name and description of advocacy activity	What did the senior center do?	Who was advocating? (e.g., older adults, center manager, etc.)	Purpose	What group or individual benefited?
SCOPE Year 1					
SCOPE Year 2					
SCOPE Year 3					

Date	Name and description of advocacy activity	What did the senior center do?	Who was advocating? (e.g., older adults, center manager, etc.)	Purpose	What group or individual benefited?
SCOPE Year 4					
SCOPE Year 5					
Example: 2/2013	*Meet your legislators day in Raleigh*	*Center coordinated and publicized the event, provided transportation and talking points document.*	*Older adults, center manager, other center staff*	*To give individuals and a group of elders a chance to ask questions and express their concerns and interests to their representatives.*	*The seniors in our city and county.*

D. Transportation to the Center

15. Please check all the forms of transportation used to **bring participants to your center** for activities, and provide a brief description of each (e.g., cost to consumers, who provides it, number of vans, number of days/week or number of trips/day). **This does not include transportation for special trips.**

Type of Service	Description
[ ] Van service provided by the center	
[ ] Shared van service/county van	
[ ] Public transit stop at/near center	
[ ] Car pool sign-up at center	
[ ] Other (describe all)	

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16. (**For Excellence Only.**) Describe how your center is working with the Community Transportation Services Plan (CTSP), the Locally Coordinated Plan (LCP), Human Services Transit System, or any other efforts to improve transportation for older adults in your county.

Scoring for Section 2	For Merit	For Excellence	Comments
Question 7			
For Merit, centers should have at least 9 regular group activities. For Excellence, centers should have at least 15 regular group activities. Activities at satellite centers or those regularly scheduled at locations away from the center may be counted.			
Question 8			
For Merit Initial certification: 6 special events in the most recent SCOPE year. Recertification: 30 total events over the 5-year period, with 5 in the most recent SCOPE year. For Excellence Initial certification: 10 events in the most recent SCOPE year. Recertification: 50 total events over the 5-year period, with 8 in the most recent SCOPE year. Activities at satellite centers or at locations away from the center may be counted.			
Question 9			
For Merit and Excellence, centers should offer at least 3 drop-in activities that together are used by 10% or more of the average number of daily participants. If the number is less than 10%, the center must provide a justification, such as having a very large number of regularly scheduled activities that leave little or			

Scoring for Section 2	For Merit	For Excellence	Comments
no time or space for drop-in activities. Activities at satellite centers or at locations away from the center may be counted.			
Questions 7, 8, and 9			
For Merit and Excellence, for Questions 7, 8 and 9 combined, centers should offer at least two activities in each of the four activity types: a. Recreation/social stimulation (Social) b. Education/intellectual stimulation (Educ.) c. Health promotion/wellness (HP/DP) d. Culture/creativity (Arts) **This will be determined by the site team**.			
Question 10			
The description should illustrate how activities and facilities are planned to meet the needs of a diverse group of seniors.			
Question 11			
For Merit and Excellence, volunteers should be engaged in at least one activity that benefits the center (a. through h. and "Other") and one that benefits the community (i. through o. and "Other").			
Question 12			
For Merit and Excellence, all the center's volunteers should be recognized in some way at least once every SCOPE year. (See the "Instructions for Completing the SCOPE and Documentation" for more detail.)			
Question 13 (For Excellence Only)			
The center should have a single volunteer plan document that covers all four things: [ ] a. a listing or description of the volunteer opportunities at the center and			

Scoring for Section 2	For Merit	For Excellence	Comments
how many people are needed [ ] b. a procedure for recruitment, orientation, training, and retention [ ] c. how volunteers are solicited for the center [ ] d. how center participants are made aware of volunteer opportunities in the community.			
Question 14			
For initial certification, for Merit and Excellence, centers must engage in at least 3 advocacy activities in the most recent SCOPE year. For recertification, for Merit and Excellence, there should be at least 15 advocacy activities in the past 5 years, at least 3 of which have occurred in the most recent SCOPE year.			
Question 15			
At least 1 means of transportation to the center must be available to people who do not drive their own cars.			
Question 16 (For Excellence Only)			
The center (or its parent organization) should be working with the CTSP, LCP, Human Services Transit system or otherwise participating in planning for transportation for seniors in their area.			
Please see the Site Visit Activities section following Section 6 of this SCOPE tool for items to be checked on site.			

Section 2.	Commendations, Recommendations, and Suggestions
[ ] Passes at the Level of Excellence	
[ ] Passes at the Level of Merit	
[ ] Fails	

3. Planning, Evaluation, and Input from Older Adults

A. Governance

17. ***Please attach a copy of your mission statement or write it in the box below.*** Also briefly describe below how you assure that employees, volunteers, and center participants know the mission statement.

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Consult the *"Instructions for Completing the SCOPE and Documentation"* for clarification about senior center advisory bodies. In the questions that follow, such bodies will be called "planning/advisory bodies," but yours may have a different name. If your parent organization has a board over which your center has no control, do *not* include its members here.

18. Please list the members of your senior center advisory body in the grid below. Mark which ones meet your center's definition of "older adult" (55+, 60+, other, as you have indicated on the first page of this tool), when they began their term of service, and when they received orientation.

Reminder to Site Visit Team: This center's definition of "older adult" is [ ] 55+ [ ] 60+ [ ] Other ____	**Meets center definition of older adult?**		**Date member began term of service**	**Date of first orientation**
Name of group:				
Member's name	**Yes**	**No**	**mm/yy**	**mm/yy**
			__/__	__/__
			__/__	__/__
			__/__	__/__
			__/__	__/__
			__/__	__/__
			__/__	__/__
			__/__	__/__
			__/__	__/__
			__/__	__/__

Reminder to Site Visit Team: This center's definition of "older adult" is [ ] 55+ [ ] 60+ [ ] Other ____	Meets center definition of older adult?		Date member began term of service	Date of first orientation
Name of group:				
Member's name	**Yes**	**No**	**mm/yy**	**mm/yy**
			__/__	__/__
			__/__	__/__
			__/__	__/__
			__/__	__/__

19. Centers must offer at least two hours of orientation to advisory committee members *within two months of their beginning service*. This orientation can be tailored to the needs and functions of this group, but topics must include:

[ ] the philosophy of the center (for example, discussion of the mission and purpose of the center)
[ ] legal issues (for example, liability, confidentiality)
[ ] policy (for example, advisory body by-laws, center's handbook)
[ ] the political environment in which the center operates (for example, how the center as an organization fits in the community, relationships with other governing boards, chain of command for decision making)
[ ] financial environment in which it operates (for example, authorization, funding)

*Please have available for the site team a copy of the orientation agenda and additional materials such as handouts, PowerPoint presentations, and/or a detailed descriptio*n *of the material covered in the advisory body orientation.*

B. Input from Older Adults

20. Indicate the method(s) you have used to learn the service and activities needs of older adults (participants and non-participants) and to assess the participants' **satisfaction** with the center as a whole. Enter one method of getting input per line. Please do not include surveys that only ask about specific programs (e.g., nutrition site or classes) or events (e.g., health fairs and trips). See "Instructions for Completing the SCOPE and Documentation" for further information on how to complete this section and a sample survey questionnaire for additional guidance. Please attach applicable blank surveys and include with your SCOPE submission.

Please remind the team of your SCOPE year (month to month): _____

(To add more rows, highlight and copy one row, insert a new row and highlight it, then paste the copied row into the new row.)

Date of Effort	Input Type (Check only one.)	Whose Input?	Briefly Describe Where (e.g., "gave out survey in center's lobby," "tea with director in dining room," "box by reception desk")	How Many People Responded? (If a survey, also tell how many were given out.)	What did you learn? How did you document it? How do you use the information in your planning?
SCOPE Year 1					
	[ ] Survey [ ] Focus group [ ] Food with director [ ] Suggestion Box [ ] Oral Suggestions [ ] Other	[ ] Participants [ ] Non-participants [ ] Both			
	[ ] Survey [ ] Focus group [ ] Food with director [ ] Suggestion Box [ ] Oral Suggestions [ ] Other	[ ] Participants [ ] Non-participants [ ] Both			
	[ ] Survey [ ] Focus group [ ] Food with director [ ] Suggestion Box [ ] Oral Suggestions [ ] Other	[ ] Participants [ ] Non-Participants [ ] Both			

Date of Effort	Input Type (Check only one.)	Whose Input?	Briefly Describe Where (e.g., "gave out survey in center's lobby," "tea with director in dining room," "box by reception desk")	How Many People Responded? (If a survey, also tell how many were given out.)	What did you learn? How did you document it? How do you use the information in your planning?
SCOPE Year 2					
	[ ] Survey [ ] Focus group [ ] Food with director [ ] Suggestion Box [ ] Oral Suggestions [ ] Other	[ ] Participants [ ] Non-participants [ ] Both			
	[ ] Survey [ ] Focus group [ ] Food with director [ ] Suggestion Box [ ] Oral Suggestions [ ] Other	[ ] Participants [ ] Non-participants [ ] Both			
	[ ] Survey [ ] Focus group [ ] Food with director [ ] Suggestion Box [ ] Oral Suggestions [ ] Other	[ ] Participants [ ] Non-Participants [ ] Both			
SCOPE Year 3					
	[ ] Survey [ ] Focus group [ ] Food with director [ ] Suggestion Box [ ] Oral Suggestions [ ] Other	[ ] Participants [ ] Non-participants [ ] Both			

Date of Effort	Input Type (Check only one.)	Whose Input?	Briefly Describe Where (e.g., "gave out survey in center's lobby," "tea with director in dining room," "box by reception desk")	How Many People Responded? (If a survey, also tell how many were given out.)	What did you learn? How did you document it? How do you use the information in your planning?
	[ ] Survey [ ] Focus group [ ] Food with director [ ] Suggestion Box [ ] Oral Suggestions [ ] Other	[ ] Participants [ ] Non-participants [ ] Both			
	[ ] Survey [ ] Focus group [ ] Food with director [ ] Suggestion Box [ ] Oral Suggestions [ ] Other	[ ] Participants [ ] Non-Participants [ ] Both			
SCOPE Year 4					
	[ ] Survey [ ] Focus group [ ] Food with director [ ] Suggestion Box [ ] Oral Suggestions [ ] Other	[ ] Participants [ ] Non-participants [ ] Both			
	[ ] Survey [ ] Focus group [ ] Food with director [ ] Suggestion Box [ ] Oral Suggestions [ ] Other	[ ] Participants [ ] Non-participants [ ] Both			
	[ ] Survey [ ] Focus group	[ ] Participants [ ] Non-Participants			

Date of Effort	Input Type (Check only one.)	Whose Input?	Briefly Describe Where (e.g., "gave out survey in center's lobby," "tea with director in dining room," "box by reception desk")	How Many People Responded? (If a survey, also tell how many were given out.)	What did you learn? How did you document it? How do you use the information in your planning?
	[ ] Food with director [ ] Suggestion Box [ ] Oral Suggestions [ ] Other	[ ] Both			
SCOPE Year 5					
	[ ] Survey [ ] Focus group [ ] Food with director [ ] Suggestion Box [ ] Oral Suggestions [ ] Other	[ ] Participants [ ] Non-participants [ ] Both			
	[ ] Survey [ ] Focus group [ ] Food with director [ ] Suggestion Box [ ] Oral Suggestions [ ] Other	[ ] Participants [ ] Non-participants [ ] Both			
	[ ] Survey [ ] Focus group [ ] Food with director [ ] Suggestion Box [ ] Oral Suggestions [ ] Other	[ ] Participants [ ] Non-Participants [ ] Both			

Examples:

SCOPE Year 1					
May	*[x] Survey* *[ ] Focus group* *[ ] Food with director* *[ ] Suggestion Box* *[ ] Oral Suggestions* *[ ] Other*	*[ ] Participants* *[ ] Non-Participants* *[x] Both*	*Distributed in the senior center gym during flu shots*	*300 surveys were distributed and 213 were returned*	*For participants, almost all rated the center as excellent or very good in all categories and 95% of participants said they were satisfied or very satisfied with the center. Several suggested more evening dances. For non-participants the main reason for not participating is that they are still working.* *We compiled all answers on a tally sheet.* *We will look into the possibility of more dances. We will continue to advertise the center to those people who are still working so they will be aware of the center once they are not working.*
Sept.	*[ ] Survey* *[ ] Focus group* *[ ] Food with director* *[ ] Suggestion Box* *[x] Oral Suggestions* *[ ] Other*	*[x] Participants* *[ ] Non-Participants* *[ ] Both*	*Every third Friday of the month the director sits down with participants and listens to their suggestions and comments.*	*An average of 10 people participate monthly.*	*Learned that most are satisfied with the center's activities and trips. Almost everyone agreed that they would like to see more parking.* *The Director keeps a notebook with the suggestions and comments. If an action is taken it is also recorded in the notebook.* *Will use the information to continue to offer what is doing well. Will use the information to try and advocate for more parking.*

21. **(For Excellence Only)** Describe any methods **other than input from older adults** that you use to make decisions about planning for your center (such as input from other agencies, your staff or parent agency, or by reviewing your administrative data).

[blank box]

C. Planning

22. **(For Excellence Only)** Describe the planning process. For example, who develops your plans; who approves them; and what information, materials, and sources of ideas are used to develop them? Be sure to include the role of your advisory body.

[blank box]

23. (**For Excellence Only**) List the principal short- and long-term goals toward which you are currently working.

Goal: What will change?	On what basis was this goal selected?	How much change will you see? How will you measure it?	Who will work on this goal?	When did you begin work? When will you evaluate it?

Goal: What will change?	On what basis was this goal selected?	How much change will you see? How will you measure it?	Who will work on this goal?	When did you begin work? When will you evaluate it?
Example: More African American seniors will participate in senior center activities	*20% of the seniors in the area around the center are African American yet only 12% of our participants are.*	*We would like at least 15% of participants to be African American. We will select a day at random for each month for the next year, count participants in our programs and activities, and note their race and gender.*	*Center volunteers will collect the data and tabulate it, and the director will review it.*	*Began 6/08 Evaluate 6/09*

Scoring for Section 3	For Merit	For Excellence	Comments
Question 17			
For Merit and Excellence, is there a mechanism for ensuring that employees, volunteers, and participants know the center's mission?			
Question 18			
For Merit and Excellence, do at least 60% of the advisory body members meet the definition for older adult?			
Question 19			
For Merit and Excellence, have all of the advisory body members been oriented within two months of beginning service.			
For Merit and Excellence, do the orientation materials cover the topics below? [ ] the philosophy of the center (for example, discussion of the mission and purpose of the center) [ ] legal issues (for example, liability, confidentiality) [ ] policy (for example, advisory body by-laws, center's handbook) [ ] the political environment in which the center operates (for example, how the center as an organization fits in the community, relationships with other governing boards, chain of command for decision making) [ ] financial environment in which it operates (for example, authorization, funding)			

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Scoring for Section 3	For Merit	For Excellence	Comments
Does the agenda for the orientation seem sufficient to cover the materials?			
Question 20			
For initial certification: For *Merit*, centers must have [ ] One annual measure of participants' satisfaction (this can be a written survey, one or more questions on a general interest survey, telephone survey, or focus group) [ ] One source of input during the past 3 years* from older adults who do not participate at the center * with exception of 5-year planning cycle by parent organization			
For *Excellence*, centers must have [ ] One annual measure of participants' satisfaction (written survey, one or more questions on a general interest survey, telephone survey, or focus group) [ ] One other annual method of getting input from participants. [ ] One annual source of input during the past year from older adults who do not participate at the center.			
For recertification: For *Merit*, centers must have:			

Scope Year

	1	2	3	4	5
One annual measure of participants' satisfaction					
One method of gaining information from nonparticipants at least every 3 years*					

* This means that the center will need to conduct a survey or use another method only once in some 5 yr. recertification periods, but will have to do so twice

Scoring for Section 3	For Merit	For Excellence	Comments
in others.) Centers should provide the date of the most recent collection in the *previous* certification period			
Date of last non-participant survey in previous certification period:_____			
Years in which efforts are needed:_____ ,_____			
Years in which efforts were conducted:_____,_____			
(5 measures for participants and 1-2 measures for nonparticipants.)			

For *Excellence*, centers must have:

SCOPE YEAR

	1	2	3	4	5
One annual measure of participants' satisfaction					
One other annual method of gaining information from participants					
One annual method of gaining information from nonparticipants					

(10 total measures for participants and 5 total measures for nonparticipants.)

	For Merit	For Excellence	Comments
Question 21 (For Excellence Only)			
Centers should have at least one method of gaining information for planning other than feedback from any group of older adults. It may include analysis of program usage data (attendance sheets, waiting lists, etc.).			
Question 22 (For Excellence Only)			
Centers should have a clear procedure by which planning is done.			

Scoring for Section 3	For Merit	For Excellence	Comments
Question 23 (For Excellence Only)			
Review the list of goals. Are they specific, measurable, attainable, realistic, and time-limited?			
Please see the Site Visit Activities section following Section 6 at the back of this SCOPE tool for items to be checked on site.			

Section 3	Commendations, Suggestions, Recommendations
[ ] Passes at the Level of Excellence	
[ ] Passes at the Level of Merit	
[ ] Fails	

4. Staff

A. General Personnel Practices

24. Each center (or its parent organization) must have a written personnel policy that includes such information as leave, retirement, and benefits. Each employee must be provided with a copy (either as a separate document or as part of an employee handbook or guide) or otherwise have an opportunity to read and understand the policy. Briefly describe here how this is done at your center and how you document that it has been done. Include copies of orientation materials for new employees in your documentation.

25. Has the center had a paid full-time director/manager for the full certification period? (This position must be full-time at the center being certified and may not be shared by two or more part-time employees) [ ] Yes [ ] No (If no, the center can't be certified at this time.)

B. Individual Training and Professional Development Planning

Please see "Instructions for Completing the SCOPE and Documentation" for guidelines about who "your employees" are, as well as for exemptions to the staff training requirements. Also, please attach the following information:
[ ] organizational chart
[ ] training plans (for Excellence only)

List all of your center's paid employees here. Do **not** include Title V or Senior Aide employees. For recertification, be sure to include people employed at the center in the past five years, whether or not they are current employees.

Complete Question 26 for each paid employee who worked during this certification period, **including those who are no longer employed**. Either the employee him- or herself or someone who handles personnel records should complete the information to reflect each employee's training. Please list all the training (with month and year) taken in the most current SCOPE year (initial certification) or the past 5 SCOPE years (recertification). Fill in the type of training (e.g., in-service, workshop, conference, professional association meeting, college/university classes, etc.), training requirement met by the event (topic on aging, job-specific, safety), and the contact hours (hours actually in sessions/classes). Add rows electronically or use additional sheets as necessary. Please list events by year, from earliest to most recent.

Name	Position	Dates of Employment	Hours/week worked	Hours needed	Requirement Met					Topic Distri-bution?
					SCOPE Yr 1	SCOPE Yr 2	SCOPE Yr 3	SCOPE Yr 4	SCOPE Yr 5	

Example: Jane Doe	*Director*	*2/1/10 - present*	*40*	*15*	*16.5*						*Y*

One method for prorating the requirement (another in the **"Instructions for Completing the SCOPE and Documentation"**)*: Part-time: 15 times the number of hours per week, then divide by 40. Recent hire: 15 times the number of months on the job, then divide by 12 for the partial year and 15 per year for entire years of service. Do not prorate if full time is considered 37.5 hours.

26. Individual Staff Training Review Sheet

Name _____					
Date (dd/mm/yy)	**Title of Training and Short Description of Topic**	**Training Provider (e.g., AAA, DSS, Matt Smith, CPA)**	**Training Method (conference, webinar, in-service, etc.)**	**Category (Topics on Aging, Job Specific or Safety)**	**Contact Hours**
Scope Year 1					
Scope Year 2					
Scope Year 3					
Scope Year 4					
Scope Year 5					
Example: 2-8-13	*"Feeling Your Oats" Planning healthy meals for older adults*	*Cooperative Extension Service*	*Senior center program*	*Aging*	*1*

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27. (**For Excellence Only**) Initial certification: Attach written training plans for each employee for the most recent SCOPE year and the upcoming SCOPE year following this certification period. Recertification: Attach written training plans for each employee the past 5 SCOPE years and the upcoming SCOPE year following this certification period.

Scoring for Section 4	For Merit	For Excellence	Comments
Question 24			
For Merit and Excellence, there should be a mechanism for ensuring that employees receive and have an opportunity to review a written personnel policy containing information on leave, benefits, retirement, and other issues relating to employment.			
Question 25			
Each center must have a paid full-time director/manager.			
Question 26			
a. There should be a completed form for each paid employee. *(Please see "Instructions" for exemptions.)* b. Required training hours may be prorated by length of service and/or part-time status. Please note that if full time is 37.5 hours it is not pro-rated. **For initial certification:** For *Merit and Excellence* full-time employees must have 15 hours for the most recent SCOPE year. **For recertification**: For *Merit and Excellence*, full-time employees must have 75 hours total, with at least 12 hours in the most recent SCOPE year. Requirements are pro-rated for part-time and employees who worked less than a full year. c. For initial certification or for employees with a year or less of service, training must fall into two of the three categories: Topics on Aging, Job-Specific, or Safety Issues. For recertification, employees must have training in all three categories. d. The director or manager must begin the Ann Johnson Institute for Senior Center Management offered by the NC DAAS during the first year of			

Scoring for Section 4	For Merit	For Excellence	Comments
employment and participation in future modules should appear in his or her training plan. If the center is unable to meet this requirement, please contact DAAS to discuss.			
Question 27 (For Excellence Only)			

Each employee must have a written training plan for the most current SCOPE year (initial) or 5 years (recertification) and for the year to come. This plan should be signed by the employee and supervisor. *Note to site team members*: Take into account the planning schedule of the agency and the date of the visit. The aim of this requirement is that employees participate in an ongoing annual process of planning continuing professional training.

For initial certification:
Centers must have:

	Current Year	Year to come
Written Training Plans		

For recertification:
Month of Agency Training Plan Review: _____

For *Excellence*, centers must have:

	Agency Review Years					
	1	2	3	4	5	Year to come
Written Training Plans						

Section 4.	Commendations, Suggestions, Recommendations:
[ ] Passes at the Level of Excellence	
[ ] Passes at the Level of Merit	
[ ] Fails	

5. Other Operational Issues

28. Please describe your collaborations with other agencies and organizations in your community, for the most recent SCOPE year for initial certification, and for the past 5 SCOPE years for recertification. These collaborations are agreements to work together toward a specific mutual goal and **not** contractual relationships involving payment for products or services. For Merit, document these with evidence of collaboration. For Excellence, provide formal documentation (Memoranda of Understanding/Agreement or letters outlining the responsibilities of both parties).

Agency/Organization	Purpose/Nature of Collaboration	Time Period	Have all parties signed the agreement?

29. Please list your regularly scheduled days and hours. If you have a day or days with longer or shorter hours, list it on the second line. Count only the hours the center is open for center-sponsored activities, not those for events sponsored by other groups using the center's facilities. A minimum of 40 hours per week is required for Merit. For Excellence, extended hours beyond 40 per week are required unless the center has extenuating circumstances (see Scoring section).

Days of the Week	Hours
Example: Monday to Friday	*9:00 am to 4:30 pm*
Saturday	*9:00 am to noon*

30. (**For Excellence Only**) If your hours do not include any before 8 a.m. or after 5:00 p.m., weekend hours, or other special extended hours, does your center have current plans for experimenting with center-sponsored activities (excluding special trips) during special extended hours?

[ ] N/A. We already have some special extended hours for center-sponsored activities (excluding special trips).	[ ] No (Please explain why not.)	[ ] Yes (Please describe your plan here.)

31. Please be prepared to show the site visitors posted indicators or documentation of your **current compliance** with all local codes such as current fire inspection, elevator inspection, and sanitation (if food is served).

32. Describe the plan for the upkeep of the center and grounds to assure safety and neat appearance.

33. Describe the features that make your center accessible to people with disabilities (e.g., ramps, parking, bathrooms, width of doorways and halls).

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34. What is the size of the center? _____ square feet. This is the square footage of the main center only.

35. How much space does the center use for programs and activities? Auxiliary facilities such as bathrooms and storage that are used primarily by center participants count, while such facilities that are used only or primarily by staff do not. Kitchens and nutrition facilities may be included if they are also used for center activities. Square footage may be counted where off-site programming is conducted. (For more information about square footage see "Instructions for Completing the SCOPE and Documentation.")

_____ Square feet at the senior center

_____ Square feet for off-site programming at (list sites) _____

_____ Total square footage for programs and activities

36. Please describe the primary sign(s) identifying the center. Include the dimensions, location, position, lighting, and other relevant features. (You may submit a photograph in lieu of a description, if desired. However, the scale of the sign must be obvious from the photo.) Also describe how the center's hours (including regular extended hours for Excellence) are posted on the sign and/or are visible from outside the building's entrance.

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Example: There is a four by six foot sign on the lawn between the road and the center driveway sitting perpendicular to the center. It is lettered on both sides in 8-inch tall, black letters on a white signboard. The name of the center and center hours are also painted in 3-inch black letters on the glass of the main entrance.

37a. Please describe your activities to raise additional resources for the center. List any fundraisers here. If you are not allowed to hold fundraisers, use this space to list in-kind contributions you have obtained (See second example below). Create additional rows as needed.

Date of Activity	Describe What the Center Did	Purpose	Amount Raised
SCOPE Year 1			

Date of Activity	Describe What the Center Did	Purpose	Amount Raised
SCOPE Year 2			
SCOPE Year 3			
SCOPE Year 4			
SCOPE Year 5			
Examples: *June 3, 2013*	*Center organized, hosted and publicized a silent auction event.*	*The purpose was to raise funds to purchase a new treadmill and art supplies.*	*$2,000*
December 2, 2013	*We asked local home and garden store to donate poinsettias or other holiday plants.*	*Reduced the cost of our winter holiday party by providing decorations and door prizes.*	*18 poinsettias and three small rosemary plants decorated as Christmas trees.*

37b. Please describe any grant proposals you have submitted in the past year (initial) or 5 years (recertification), **whether or not the proposal was funded**. Note that Home and Community Block Grant (HCCBG), state funding, and routine requests for Area Agency on Aging (AAA) and local funding (to the town or county commissioners, for example) should not be listed here. Create additional rows as needed.

Date of Grant	Potential Funder	Purpose	Funded?

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EXAMPLE: *June 13, 2013*	*Medtronic Foundation*	*To purchase a new blood pressure cuff with digital readout.*	*Yes, $100*

See **"Instructions for Completing the SCOPE and Documentation"** *for more information about financial reports and audits.*

38. (**For Excellence Only.**) Do you or your parent organization produce an annual financial report? [ ]Yes [ ] No

39. (**For Excellence Only.**) Does your report include (or stem from) an independent audit (see "Instructions for Completing the SCOPE and Documentation" for exemptions)?
    [ ] Yes   [ ] No

40. (**For Excellence Only.**) How do you notify center consumers that your financial report is available and how they can access it?

Scoring for Section 5	For Merit	For Excellence	Comments
Question 28			
For Merit, there should be documentation of ongoing collaboration or specific collaboration within the most current SCOPE year (initial) or past 5 years (recertification) with at least 3 other organizations. This does not include contracts with other entities involving payment for products or services. However, it is possible to have a collaboration with an entity with which the center also has a contract for payment for a different service. For example, they could have a contract with a local college to provide a computer instructor, but they could have a collaboration with a department in that same college for the placement of student interns. For Excellence, there should be at least 3 *examples per SCOPE year* of signed Memoranda of Understanding or letters of agreement between the collaborating organizations. These should spell out the roles and			

		SCOPE Year		
1	2	3	4	5

Scoring for Section 5	For Merit	For Excellence	Comments
expectations of both parties. If the center has an on-going, multi-year agreement with the same organization, this can count as one agreement per year as long as the inclusive years are spelled out in the agreement (e.g., "this agreement is valid from January 2008 through December 2011 at which time it may be re-evaluated and renewed.")			

SCOPE Year				
1	2	3	4	5

Scoring for Section 5	For Merit	For Excellence	Comments
Question 29			
For Merit and Excellence, the center must be open at least 40 hours per week.			
Question 30 (For Excellence Only)			
Centers should have extended hours beyond 40 hours per week unless they are prevented from offering them because of the rules of the facility where they are located, inadequate staff to cover the hours, or *evidence* of lack of interest on the part of participants. For example, the center might open early or late on some weekdays, it might offer regular weekend hours.			
Question 31			
For Merit and Excellence, centers must be able to show current compliance with local codes (fire inspection, elevator inspection, and sanitation if food is served). On a case-by-case basis, centers may be given a waiver if they have done everything possible to resolve a problem and there is no threat to the health and safety of older adults using the facilities. For recertification, you only need the current compliance documentation, not one for each year.			
Question 32			
For Merit and Excellence, there should be a plan for how to finance upkeep, how often specific upkeep activities (such as painting or gutter work) will occur, and how work will be done (e.g., collect bids, provided by county, done by volunteers).			

Scoring for Section 5	For Merit	For Excellence	Comments
Question 33			
For Merit and Excellence, this should describe an accessible center with parking, ramps, and all space designed or adapted to meet the needs of people with disabilities and the normal changes that may come with aging.			
Question 34			
All centers must be at least 4,000 square feet, unless the Division of Aging and Adult Services has granted a waiver. (See "Certification Policies and Procedures" and "Instructions for Completing the SCOPE and Documentation.")			
Question 35			
All centers must make at least 3,200 feet available for center activities (i.e., not used as office space).			
Question 36			
For Merit and Excellence, the center should be clearly marked. Hours, including regular extended hours, should be posted on the sign and/or visible from outside the building's entrance, unless this conflicts with the rules governing the use of the building.			
Question 37a and 37b			
For initial certification: For Merit and Excellence, centers must engage in at least 2 fundraising and/or grant activities in the most recent SCOPE year. *For recertification:* For Merit and Excellence, centers must have engaged in at least 10 fundraising and/or grant activities in the past 5 years, of which at least 1 has occurred in the most recent SCOPE year. Submitting a grant application counts toward this requirement even if it was not			

Scoring for Section 5	For Merit	For Excellence	Comments
funded. If a center is part of county or municipal government and the county or municipal policy does not allow it to have fundraising projects per se, the center should show evidence of working to improve funding in permitted ways, such as petitions to the board and seeking in-kind contributions in the community.			

SCOPE Years				
1	2	3	4	5

	For Merit	For Excellence	Comments
Questions 38, 39, and 40 (For Excellence Only)			
Centers must produce an annual financial report or be included in the annual financial report of the parent organizations. (Centers that are a part of county government may be included in the county financial report.) If the center is not exempt from having to undergo an audit (see "Instructions for Completing the SCOPE and Documentation" for guidelines), this financial report should be based on an independent audit, which is usually accompanied by a letter from the auditor.) Centers must also have a means of letting participants know how to get access to the center's annual financial report (not necessarily the audit), and whenever possible, make a copy of the report available at the center. There should be a clear plan for providing a copy to those that request it.			
Please see the Site Visit Activities section following Section 6 at the back of this SCOPE tool for items to be checked on site.			

Section 5	Commendations, Suggestions, and Recommendations
[ ] Passes at the Level of Excellence	
[ ] Passes at the Level of Merit	
[ ] Fails	

6. The Extra Mile (additional questions required for Centers of Excellence)

41. Describe any special projects your center has undertaken in the most current SCOPE year (initial) or past five SCOPE years (recertification). For example, these might include research projects, innovations your center has undertaken, intergenerational programming, disaster preparedness training and planning, special efforts to make the center and its programs accessible to people with disabilities, to name just a few. See "Instructions for Completing the SCOPE and Documentation" for more information.

42. Describe any mentoring/technical assistance your center has provided to another center in the most current SCOPE year (initial) or past five SCOPE years (recertification), including serving on a certification site visit team.

43. Briefly describe the strongest reasons that you believe your center should be considered a Center of Excellence.

Scoring for Section 6 (For Excellence Only)	For Merit	For Excellence	Comments
Questions 41 and 42 (For Excellence Only)			
Are the activities/projects listed in at least one of these two questions appropriate?			
Question 43 (For Excellence Only)			
The answer to this question should highlight the value of the senior center within the community.			

Section 6	Commendations, Suggestions, and Recommendations
[ ] Passes at the Level of Excellence	
[ ] Fails	

Site Visit Activities

Site Visit Activities for Section 1	Meets	Does Not Meet
For Merit and Excellence		
• Check for posting of services available on site or off-site with assistance (Columns A and B), as listed in Question 3.		
Site Visit Activities for Section 2		
For Excellence		
• Observe whether the group in the center at the time of the visit appears diverse. (Question 10)		
• If possible, observe the transportation (e.g., arrival of vans, public transit, etc.). Is it as described? (Question 15)		
Site Visit Activities for Section 3		
For Merit and Excellence		
Check that the mission statement is displayed in prominent places in the center or other mechanisms are in place to make visitors and participants aware of the mission, as described in Question 17.		
Site Visit Activities for Section 5		
For Merit and Excellence		
• Check for current compliance with state and local codes (fire, health, sanitation), as appropriate (Question 31). • Do the center and grounds appear well maintained? (Question 32) • Check for accessibility features described in Question 33. Major walkways should be at least 6 feet wide. Outdoor walkways should be sufficiently wide for people with wheelchairs, walkers, etc. Check for adequate lighting and nonslip surfaces. Check for clearly marked drop-off points, adequate parking, wheelchair access from bus stop/shelter to center. • Check that signs at the center are consistent with the description in Question 36.		