

ASSET

REFERENCE MANUAL FOR VOLUNTEERS AND AGENCIES

Approved

www.storycountyasset.org

Sponsoring Organizations:

City of Ames
Story County
United Way of Story County
ISU Student Government

TABLE OF CONTENTS

DIVISION I.....	3
Sponsoring Organizations.....	1
ASSET OVERVIEW.....	4
DIVISION II.....	5
GENERAL GUIDELINES.....	5
A. THE ALLOCATION RECOMMENDATION PROCESS.....	5
B. ASSIGNMENTS.....	5
C. DECISION-MAKING LATITUDE.....	5
D. OPEN MEETINGS/RECORDS.....	5
E. CONFLICT OF INTEREST.....	5
F. CONFIDENTIALITY.....	6
G. ANNUAL AGENCY HEARINGS.....	6
H. WORK SESSIONS.....	6
I. ALLOCATION FORMAT.....	6
J. APPROVAL OF RECOMMENDATIONS & APPEALS PROCESS.....	7
K. POSTING OF ASSET RECOMMENDATIONS.....	7
L. FUNDERS CONSIDERATION OF ASSET RECOMMENDATIONS.....	7
M. PLANNING PROCESS.....	7
DIVISION III.....	8
VOLUNTEER (LIAISON) RESPONSIBILITIES.....	8
A. LEAD LIAISONS.....	8
B. AGENCY VISIT.....	8
C. BOARD OF DIRECTORS MEETING.....	8
D. LIAISON REPORTS.....	8
E. BUDGET REVIEW.....	9
DIVISION IV.....	10
ASSET Budget Forms (ABFs).....	10
BUDGET PREPARATION BY AGENCIES.....	10
GENERAL INFORMATION AND HELPFUL HINTS ON ASSET BUDGET FORMS (ABFs)....	10
PREPARATION AND REVIEW OF INDIVIDUAL BUDGET FORMS.....	11
DESCRIPTION OF REVENUE & EXPENSE CATEGORIES ON BUDGET FORMS.....	15
1. Revenue.....	15
2. Expenses.....	16
3. Service Statistics (only on the ABF-5 spreadsheets).....	18
DIVISION V.....	20
CLEAR IMPACT SCORECARD.....	20
DIVISION VI.....	22
Fillable Form Is on the ASSET Website.....	22
LIAISON REPORT.....	22
APPENDICES.....	23
A. SERVICE CODES.....	23
B. SERVICE CODE DESCRIPTIONS.....	25
C. INDEX OF AGENCIES/SERVICES.....	29
D. ASSET Glossary of Acronyms and Terms.....	32

DIVISION I

ASSET HISTORY

In 1985, the City of Ames, Iowa State University Government of the Student Body, the Iowa Department of Human Services, Story County, and United Way of Story County, herein referred to as Funders, joined together to address the complexities of human services funding. The Funders recognized that by partnering they could better serve the people of Story County and leverage the available funds that were systematically shrinking. The Funders agreed to a process that utilized Story County residents in conjunction with a staff member from each of the Funders working together to provide funding recommendations that maximized support of the human service needs in Story County.

Under the original agreement, each of the five Funders were to appoint three volunteers that represented the respective Funders and one staff member to serve as part of a team that "promotes the coordination of human services funding or allocation recommendations to any funding sponsor requesting such assistance." To that end, the Analysis of Social Services Evaluation Team (ASSET) was formed and has dealt with the allocation recommendations ever since. The number of Volunteers from each Funder has increased over the years due to the larger number of agencies and services involved in the ASSET process.

Over time, Funders have joined and withdrawn from the ASSET process. The Iowa Department of Human Services withdrew in July 2016 due to a statewide restructuring of the Department of Human Services Regions. In July 2020, Central Iowa Community Services withdrew from the ASSET process because of statutory requirements that focused funding on the development of the children's mental health system.

The current 28E Agreement includes the following partners: City of Ames, Story County, United Way of Story County, and ISU Student Government.

To help promote a cooperative environment to deliberate the allocation process, the ASSET Agencies were invited to select non-voting panel representatives to meet regularly with the ASSET Board. These representatives were free to participate in most discussions and other ASSET activities except for the panel work sessions where funding recommendations were discussed and voted on. In September 2019, the Human Services Council disbanded as a formal council, and the appointment of panel representatives ceased.

ASSET OVERVIEW

The ASSET process includes the submission of standardized program data through Clear Impact Scorecard and financial information, conducts annual visits with agencies, and holds annual hearings for review of agency budget requests. The chronological order of the ASSET process is as follows:

- A. Orienting new Volunteers by Funder Staff (ongoing as needed)
- B. Training Agency staff (August)
- C. Reporting Funder priorities (August)
- D. Conducting annual Volunteer visits with agencies (September - November)
- E. Reviewing Agency budget requests (September/October)
- F. Preparing and Submitting Liaison Reports (November)
- G. Reporting available funding through the ASSET process (December)
- H. Conducting Agency hearings (January)
- I. Conducting work sessions to develop allocation recommendations (January)
- J. Meeting of entire ASSET Board to discuss and approve recommendations (January)
- K. Submitting recommendations to Funders (January–February)
- L. Individual Funders develop annual agreements/contracts with agencies for funding services (March - June)

To make the process manageable, services are assigned to one of three focus areas: Education, Financial Stability, or Health. Each volunteer is assigned to one focus area work team. Following the agency hearings, each work team reviews the budget requests for the services within its focus area and formulates a funding recommendation. Following the work sessions, the entire ASSET Board meets to decide on the final allocation recommendations.

ASSET meetings also deal with coordination of services, expansion of existing services, acceptance of new services and approval of new agencies into the process. As Funders have their own service priorities, their funds may have restrictions on them. These restrictions are intended to provide direction in the allocation process and rarely preclude flexibility. These restrictions usually serve as guidelines rather than as constraints. ASSET meets regularly with Funders as specified in the Policies and Procedures.

The ASSET process provides opportunities to communicate with agency staff members or Volunteers. Constructive open discussions on human service needs within the agencies' budget requests are welcome during ASSET meetings. Volunteers shall not champion a specific service or allocation recommendation and must sign confidentiality and conflict-of-interest statements to that effect. (See Forms in Policies and Procedures.) Through the ASSET process, Volunteers develop an in-depth knowledge of the agencies' services and funding requests in their focus area and have a general knowledge of all the agencies' programs and funding requests. At the ASSET meeting following the work sessions, all the Volunteers vote on all allocation recommendation decisions. Although the goal is to reach consensus on community needs, in the end, a majority vote will decide the ASSET recommendations to the Funders. Recommendations should respond to Story County community needs, tie to Funders' priorities and be justified by the information gathered during the ASSET process.

The ASSET process strives to produce recommendations on human service funding allocations that are free from individual bias. The Funders have the authority to accept or modify the ASSET allocation recommendations.

DIVISION II **GENERAL GUIDELINES**

A. THE ALLOCATION RECOMMENDATION PROCESS

The allocation recommendation process depends on Volunteers to establish a plan for the use of UWSC, City of Ames, Story County, and ISU Student Government funds for the coming year. In this process, agencies request funds to operate their programs and must follow the process as outlined in this Reference Manual. Volunteers study budget requests from agencies and recommend the amount of funding to be allocated for specific programs. ASSET funding is neither meant to cover the entire costs of any one program, nor should it represent the majority of an agency's budget.

All human service agencies receiving funding from one or more of the Funders through the ASSET process shall be reviewed annually by Volunteers of ASSET. The Volunteers are assigned to one or more agencies as a liaison. Volunteers are also referred to as Liaisons. The Volunteers can be assisted by additional reviewers appointed by the Funders or recruited by ASSET if support is needed.

B. ASSIGNMENTS

Each Volunteer will be assigned to a focus area work team. Each Volunteer should study the materials submitted by all agencies and programs covered by the focus area.

Each agency program is assigned to one of the three focus areas. The agency may have programs in more than one focus area.

C. DECISION-MAKING LATITUDE

Each work team has broad latitude in which to make recommendations: (1) increasing, decreasing, withholding, or terminating allocations for specific programs and/or agencies; (2) identifying perceived issues in programs, management, or financial operations of an agency; (3) recommending that an agency undergo a thorough review to determine if continued funding is warranted.

D. OPEN MEETINGS/RECORDS

Agencies must submit complete budget, program, and personnel information to ASSET for review purposes only. Volunteers and staff are entrusted with this information to make program decisions and write the liaison reports. **These materials are public records and ASSET meetings are open, public meetings under Iowa Code Chapters 21 and 22.**

E. CONFLICT OF INTEREST

To encourage fair decisions affecting the agencies affiliated with ASSET, Volunteers should observe the following guidelines:

1. Volunteers or staff with an agency affiliation should not serve on the work team to which that agency is assigned. If this does occur, the Volunteer should request reassignment to another work team.
2. Agency affiliation is intended to include the following relationships:
 - (1) past or present employment of the person or close relative by the agency.
 - (2) current or periodic business between the person or a close relative and the agency;
 - (3) present service by the person or their immediate family on the Board of Directors of the agency;
 - (4) services of the agency given to the person or their

- immediate family.
3. Each person is expected to exercise good faith and prudent judgment in acknowledging and communicating a conflict of interest.
 4. ASSET's voting members and the staff agree to the Conflict-of-Interest policy and annually sign a form stating their adherence to the policy.

F. CONFIDENTIALITY

Each year, ASSET Volunteers are required to sign the Volunteer Confidentiality Agreement. Confidential information includes, but is not limited to:

1. Information relevant to funders that is not open to the public;
2. Individual ASSET-Funded agency data (Clear Impact Scorecard);
3. Non-public information concerning Story County ASSET's affairs;
4. Information relating to ASSET Agency program participants, including names, contact information, and any personal information.

G. ANNUAL AGENCY HEARINGS

Each year, agencies will be assigned a hearing time. Each agency is expected to attend their hearing at the scheduled time. Due to the difficulty of rescheduling, switching of times will not be allowed. Agencies should plan no more than a 5-minute budget presentation followed by a 10-minute question and answer period. A maximum of three people will be allowed to present, and introductions will only be made for those presenting. These time limits will be strictly adhered to. Agency presentations should only cover services funded through the ASSET process, funding priorities, significant changes, new services, or other things that need further explanation.

H. WORK SESSIONS

At the work session, each work team will discuss and agree on the allocation recommendations and special conditions or requirements, if needed, for each service. The work team will consider information on the recommendations for each service. Decisions should be based on the Funder priorities, liaison reports, outcomes reported in Clear Impact Scorecard, agency budgets, and information provided during the hearings. Input of the Volunteers is critical at this point, and they should not be reluctant to express it.

I. ALLOCATION FORMAT

As allocation recommendations are made, the following points should be kept in mind:

1. Is the service critical to Story County residents?
2. Does the service meet Funder priorities?
3. Is the service duplicated by another agency?
4. If there is duplication, is duplication in this service area necessary?
5. If ASSET funding were reduced for this service, how would it impact the client and the community?
6. What would be the result of the loss of this service?
7. Does the service demonstrate a positive outcome for the residents of Story County? Have the outcomes been clearly documented through Clear Impact Scorecard?
8. Does this service provide the "best possible use" of ASSET funds?
9. Is the agency managed effectively by the board and leadership?
10. Is the agency fiscally responsible?

J. APPROVAL OF RECOMMENDATIONS & APPEALS PROCESS

Each work team's recommendations for funding of services will be reviewed by the entire ASSET Board. The ASSET Board will act on final recommendations for each Funder, and the recommendations will be posted as described in the section below.

Any appeals of recommendations shall go directly to the respective Funder. Each Funder has its own criteria under which it considers appeals. After appeals are considered, Staff will notify ASSET of the results.

K. POSTING OF ASSET RECOMMENDATIONS

All funding recommendations will be posted at the Ames City Hall, the Story County Administration Building, and on the ASSET website by the date stated on the yearly ASSET calendar. The ASSET Administrative Assistant will notify agencies by email that recommendations are available.

L. FUNDERS CONSIDERATION OF ASSET RECOMMENDATIONS

The Funders have the authority to accept or modify the ASSET allocation recommendations. Once decisions are made, Funders will enter agreements/contracts for services with each agency. Each Funder has specific requirements for purchasing services that agencies must follow. Questions on this part of the process should be directed to the specific Funder.

M. PLANNING PROCESS

It is ASSET's function not only to analyze human service funding requests and provide funding recommendations but to function as a coordinating mechanism for Story County human services regardless of funding source.

ASSET shall provide a community forum to work constructively and cooperatively in addressing human services concerns. This may be achieved by, but is not limited to:

- Participating in studies and developing strategies that enhance the delivery of human services within the County.
- Collecting and evaluating facts that provide valid data for decisions on service needs and effectiveness of current delivery.
- Evaluate the need for new or modified services and/or duplication of services.
- Promote and encourage collaboration among agencies for efficiency.
- Review agency updates and reports on services as documented through Clear Impact Scorecard and other reporting documents.

DIVISION III

VOLUNTEER (LIAISON) RESPONSIBILITIES

In the role as a Liaison for agencies, the goal for Volunteers is to gather the most current information and changes about the agency(ies) they are assigned to. This information gathering is done by using the Liaison Report form and communicating that information to other Volunteers and staff.

Any questions or concerns agencies have about the Volunteer's role as a Liaison should be directed to the ASSET Administrative Team.

During the months of September through November, Volunteers are to visit assigned agencies. Volunteers should plan to make at least one visit to each assigned agency before the Liaison Reports are due (due dates are designated on the yearly ASSET calendar). If an agency has more than one Volunteer assigned, they should attempt to coordinate the agency visit together. Volunteers should call the executive director or designee to schedule a meeting time. Volunteers should also attend a meeting with the Board of Directors by scheduling this through the agency executive director or designee.

A. LEAD LIAISONS

Agencies may have more than one Volunteer assigned as their Liaison. To make the process work more smoothly when multiple Liaisons are assigned to an agency, a lead Liaison shall be assigned. The lead Liaison (Volunteer) shall coordinate with other Volunteers assigned to the same agency to make sure the report is completed in a timely manner and agreeable to all Liaisons for that agency. The lead liaison will also be the person that an agency may contact if it wants to get information for the meeting and report to all its Liaisons. The lead Liaison shall then forward the information on to the other Volunteers in a timely manner.

B. AGENCY VISIT

Time needed for this visit will be 1-2 hours depending on the agency. Discussion should be guided by the Liaison Report Form, and Volunteers should ask direct questions to be able to create a thorough and useful report. Volunteers shall also remain objective throughout the course of the visit.

C. BOARD OF DIRECTORS MEETING

Visits to an agency's Board of Directors meetings will allow Volunteers to assess the role of the Board in managing the agency, as well as give insights into current problems the agency may be facing. The Volunteers will be there only as observers and should not be expected to make a presentation. Any questions that arise during this meeting should be communicated with the Volunteer's Funder staff representative.

D. LIAISON REPORTS

Following individual liaison visits to agencies, and before the assigned date, Volunteers are to submit a brief Liaison Report. The questions are included in this manual under Division VI and the fillable Forms are under the Forms and Resources tab on the ASSET website (www.storycountyasset.org).

Liaison Reports are to be submitted to the ASSET Administrative Assistant (storycountyasset@gmail.com) by the due date listed on the yearly ASSET calendar. Liaison

Reports are public documents and will be distributed to ASSET volunteers, staff, respective agencies and are available to the public upon request . Volunteers should review Liaison Reports prior to the hearings.

E. BUDGET REVIEW

Volunteers should review the ASSET budget forms and data available through Clear Impact Scorecard submitted by agencies before the budget hearings, so they understand the requests and can determine if there are questions that need to be raised with the agency during the hearings.

DIVISION IV

ASSET Budget Forms (ABFs)

BUDGET PREPARATION BY AGENCIES

GENERAL INFORMATION AND HELPFUL HINTS ON ASSET BUDGET FORMS (ABFs)

1. The Administrative Assistant will prepare appropriate budget request forms and make these forms available to be downloaded from the ASSET website.
2. **In addition to the instructions included in the Reference Manual, there are abbreviated instructions on each request form in the Excel workbook. To complete the budget request, please refer to both sets of instructions. If you have questions about the form, please email the Administrative Assistant.**
3. Completed forms should be submitted electronically to the Administrative Assistant at storycountyasset@gmail.com on or before the budget deadline as stated in the ASSET calendar.
4. To scroll quickly from one tab to the tabs marked ABF-7A/7B, hit the control key (Ctrl) on your keyboard at the same time you click on the arrow at the bottom near the tabs.
5. All budget forms will be printed from the electronic documents submitted. Documents must be submitted electronically.
 - a) The budget forms must be submitted on the form provided.
 - b) **DO NOT CHANGE THE FORMS!** It is important that forms from all agencies are consistent, and that the Agency name appears at the top of each page.
 - c) Limit narrative to the space provided on the forms. Do not expand space on the form or attach additional sheets.
6. Do not attach any of your own forms except for the ABF-6 and sliding fee scales. If you have a similar balance sheet prepared by a financial professional, please name it "AFB-6" and include it in your submission. Make sure your information is accurate. If you have corrections to your budget after the budget book has gone to the printer, you will have until the date stated on the ASSET calendar to turn in corrections to the Administrative Assistant.
7. Services and service codes listed on ABF-5 must be precisely those services listed under your agency heading in the Index of Agencies/Services in the back of this manual. Selecting the correct service code on each ABF-5 will keep program names/services and unit of service consistent for everyone. Do not add, substitute, or delete. Arrange ABF-5s in numerical order by service code.
8. Agencies shall provide financial reports (annual audits and 990s) to the ASSET Administrative Assistant within six months of the end of their fiscal year. Failure to meet this requirement may delay ASSET funds being distributed by each Funder. Consequences for non-compliance will be managed by individual Funders.
 - a) Agencies with an annual budget below \$250,000 must submit an electronic copy of IRS Form 990 and a balance sheet prepared externally and independently. (ABF-6)
 - b) Agencies with an annual budget of \$250,000 or more must submit an electronic copy of their full comparative audit, IRS Form 990, and a balance sheet prepared externally and independently. (ABF-6)
9. Please provide an electronic copy of your agency's strategic plan or an update to the Administrative Assistant.
10. The budget books will usually not be printed before the liaison visits by the Volunteers; therefore, the agency should be prepared to supply and discuss the budget information that was included in the budget forms during the liaison visit.
11. Using the tabs at the bottom of the workbook, or the links at the bottom of the

instruction sheet, complete the ASSET Budget Forms (ABFs) in sequential order, starting with ABF-1 and ending with ABF-7B. Some information entered in the first forms will automatically fill in on other forms.

12. Information may only be entered in the boxes underlined by red or surrounded by a red border.
13. **Do not delete any of the ABFs even if they are unused.**
14. Once you believe you are done, go to the Checklist tab to see if there are any error messages that might require your attention.

PREPARATION AND REVIEW OF INDIVIDUAL BUDGET FORMS

ABF-1 AGENCY SUMMARY

1. Select your Agency name from the pull-down menu on this form, and it will auto-fill to all other forms.
2. Fill in your contact information.
3. Select the agency fiscal year from the pull-down menu. If your agency's fiscal year is not listed, you can type it in.
4. In the large box under 1), follow the on-sheet instructions to describe the agency and its mission.

ABF-2 AGENCY CLIENT STATISTICS

THIS FORM HAS BEEN DELETED FROM THE WORKBOOK AS OF AUGUST 2023

The information previously recorded here is now part of the agency's Scorecard. Please upload the information on all client data for the entire agency.

Report actual figures from the prior fiscal year and enter in the "Actual Value" column. These should not be estimates.

Unduplicated Count of Clients - Information would include:

- Age Group;
- Race/Ethnicity;
- Location of Residence (Please note ISU students should not be double counted as Ames, Story County, or outside Story County residents.)
- Income Level - (Poverty level guidelines are shown below;
To view the current Department of Health and Human Services Poverty Guidelines, click on the link below:
<https://www.healthcare.gov/glossary/federal-poverty-level-fpl/>)
- Client Statistics marked "Other" – provide information including disabilities and clients covered by government agencies fees.

ABF-3 AGENCY STAFFING LEVELS, SALARIES & VOLUNTEERS

1. The ABF-3 includes the percentage (%) of Full Time Equivalent (FTE). One FTE equals 2,080 hours annually of staff time. If the information for the Proposed FY is unknown or unavailable, provide the most recent available actual salaries.
2. List the position titles of your agency's staff. You may group positions with similar tasks/duties as follows: CEO/VP Level; Supervisor Level; Direct Service; Administrative Supports.
3. Include the total annual compensation for each position, including salary, bonuses,

- incentives, or other monetary compensation. Do not include the cost of benefits such as insurance.
4. For each position or position group, note the percentage of that position's time that is allocated to services in Story County.
 5. The amount for personnel at the bottom of the page should match line 22 on ABF-7A. There is a formula in the workbook that will automatically populate onto the ABF-7A.

As of 2022, the "Volunteer Usage," should now be reported on Clear Impact Scorecard and should include (1) the number of unduplicated volunteers serving Story County programs used in the most recent actual year; and (2) the number of volunteer hours (supporting Story County programs) for the same year. Enter these in the "Actual Value" column.

ABF-4 NON-ASSET FUNDED SERVICES

1. List ALL services offered by your agency that are not funded through the ASSET process, for the proposed fiscal year. This should include ALL services outside Story County and any services in Story County that are not funded by ASSET. This is needed so that your entire agency budget is reported on the ABF-7B.
2. Name of Service should be listed in the first column. For example, Counseling; Preschool; or Emergency Shelter (this should not be the funding source).
3. In the second column, list the Source of Funds for each service. (e.g., private donations, Medicaid, federal grant, state grant).
4. The total Revenue amount listed on this page should match the Total Revenue listed on ABF-7B under "Non-ASSET Funded Services." There is a formula in the workbook that will automatically populate onto the ABF-7A.
5. In the last column, plug in the percentage (%) of the resources applicable to Story County.

ABF-5 ASSET FUNDED INDIVIDUAL PROGRAM BUDGETS

1. An ABF-5 must be completed for each service. Each ABF-5 will correspond to a unique column on the ABF-7B, starting with column 9 and going up from there. For agencies with more than one service, complete the next ABF-5 in the workbook by clicking on the next ABF-5 tab. Do not place data in any ABF-5s that will not be used. Information entered in the ABF- 5s will be automatically placed into the ABF-7B (beginning in column 9 and will be labeled to match the corresponding ABF-5).
2. **DO NOT DELETE ANY ABF-5 PAGES, EVEN IF THEY ARE UNUSED.**
3. This form should show the Actual, Adopted and Proposed revenues and expenses for each ASSET-funded service the agency delivers. Revenue and expenses for the service area should be actual amounts for the past two fiscal years, along with actual units of service provided and cost per unit.
4. For the Adopted FY, use the closest projections for these numbers.
5. **FIRST** select the Service Code from the **drop-down list** at the top of the form on the right-hand side. This will populate other fields with standardized information found in the Reference Manual, ASSET Services can be found in Appendix B – Service Code Descriptions.
6. Just under the ASSET Service line is "Program Name," which is the name your organization uses for the program and must be manually entered.
7. Below the Service Code and to the right of "Source of Funds" and in the shaded area, place an "X" in the box if this budget reflects a Story County only expenditure. If the budget reflects a multi-county program, list the percentage of the budget you have entered that you are requesting ASSET funds for. There must be something in one of

- these two boxes. The ABF-5 should contain only the Story County portion of the program or the Story County percentage of a larger program.
8. The prior fiscal year's contract amounts and dollars used from each Funder. If a Funder approved to move Dollars **Contracted** and were **reallocated** from one ASSET **service** to another ASSET **service** they will be recorded in the Actual Column where the funds were used. Because of this it is possible to have the Contracted amount be less than the Actual amount. **If you have questions about any of these amounts, contact the appropriate Funder for further clarification.**
 9. Donor designations received from a United Way, including from United Way of Story County, should be entered in Self-Generated Revenues.
 10. Agencies that receive Central IA Community Services (CICS) MH/DS funds should show those amounts in the Other Gov't Funds (CICS) section.
 11. Any grant or other non-ASSET amount received from a United Way, including United Way of Story County, should be entered in Other United Ways.
 12. In each column, revenues should equal expenses unless you have had a revenue excess or loss for that program.
 13. For a new program or programs which have been approved by ASSET, previous year's income, expenses, and service statistics will be blank. Under the Proposed column, please include income, expenses, and service statistics for the new service.
 14. Complete the fields under Source of Funds, Expenses, and Service Statistics.
 15. Service Statistics must be completed. Units of Service is the number this program has provided (Actual) or the number estimated/proposed (Adopted/Proposed). **The Cost Per Unit is automatically calculated based on the expenses included and the number of units projected for the upcoming FY (Expenses divided by # Units = Unit \$ Rate).**
 16. Unduplicated Participants/Total should be the number of total participants served.
 17. Unduplicated Participants/Story County should reflect only the number served in Story County. These numbers would be the same if the program was only in Story County. The Unduplicated Participants/Total for Actual FY number should match the number entered in Clear Impact Scorecard.
 18. Licensed capacity does not apply to every program. If not applicable for the program, simply enter N/A. If the program is licensed, such as a daycare, enter the number only.
 19. Issues/Factors Affecting the Budget: In this narrative section at the bottom of the ABF-5, describe any outside impacts or changes that might affect this service in the upcoming year. Also detail how your agency is planning to address these issues/factors.
 20. In 2021, the form ABF-5(O) was removed from the ASSET budget forms. Agencies are required to enter – or update - the following information in Scorecard **for each funded program annually.**
Click on the funded program name, beside the blue "P." Annually review and update if needed:
 - **What We Do** – Service description
 - **Who We Serve** – In this section, please discuss your target population. Note if any eligible clients were turned away and, if so, please provide an explanation.
 - **How We Impact** – This is the purpose description: Consider, what are the need(s) or issues the program is intended to address?
 21. To scroll quickly from one tab to the tabs marked ABF 7A/7B hit the Control Key (Ctrl) on your keyboard at the same time you click on the arrow at the bottom near the tabs.

ABF-6 STATEMENT OF AGENCY FINANCIAL POSITION (BALANCE SHEET)

There is no specific form for the ABF-6. Attach an agency balance sheet with the budget submittal, identified as ABF-6.

ABF-SLIDING FEE SCALE

1. If your agency has sliding fee scales, please insert them following the ABF-6 or send them separately when budget forms are submitted.
2. The sliding fee scale should be the one used for the Adopted Fiscal Year for ASSET-funded services only.
3. Label this submission in the upper right-hand corner "ABF-SLIDING FEE SCALE."
4. Indicate the number of clients utilizing each step in the past year.

ABF-7A ACTUAL, ADOPTED & PROPOSED AGENCY BUDGETS

1. This sheet is the budget for the entire agency including ASSET-funded and non-ASSET-funded programs.
2. The Salaries/Wages portion of Expenditures for the Adopted fiscal year is automatically generated from your ABF-3 total. This cell is highlighted in blue.
3. ABF 7A will need to be completed manually, although the totals, highlighted in gray, are automatically calculated.
4. The "Proposed" column and the "Apply to Story County" column amounts may be the same. For larger agencies, these will be different because the agency's total budget is greater than the amount of Story County/ASSET-funded programs.
5. The figures in the "Proposed" column must match the figures on ABF-7B, "Total All Services" marked column #7 (E).

ABF-7B PROPOSED AGENCY & ASSET FUNDED PROGRAM BUDGETS

1. Much of this form will be automatically completed from the information filled in each of the ABF-5 forms.
2. The only information that must be entered directly on this form is on column #8 (F) "Non- ASSET Funded Services." Since the totals for Revenue and Expenses are already calculated, you must double check to be sure the figures added here match with the totals automatically inserted for both revenue and expenses. This column DOES NOT CALCULATE THE TOTAL.
3. Column #7 (E) formula totals each row from Column #9 (G) through Column #27 (Y). The only way to change totals is to change figures on an ABF-5, or on Column #8.
4. All the Rows on Column #7 (E) on the ABF-7B must match all the rows on Column #4 (G) PROPOSED FY on the ABF-7A. If these do not match you will have "Error" listed on the ABF-7B. Consider printing out the complete ABF-7A to double check with ABF-7B if you have errors.

CHECKLIST TAB

On the Excel budget workbook, the second tab is the Checklist. After completing the ABFs use the list on this page to identify any errors in entries. If you cannot correct the error, please email the Administrative Assistant for help. Once the errors have been corrected, please **save**, and submit the budget request.

DESCRIPTION OF REVENUE & EXPENSE CATEGORIES ON BUDGET FORMS

The following information applies to the ASSET Budget Forms – ABF-5; ABF-7A; ABF-7B. If you have questions about where to report a specific revenue or expense item, please email the Administrative Assistant for clarification. The reference to **the line numbers** below are what is included on the worksheet and not part of Excel.

1. Revenue

a) Self-Generated Revenues (Line #1)

This account includes Contributions - Special Events, Sales to Public, or funds carried over from the previous year. Contributions include only amounts for which the donor receives no direct private benefits. They are to be carefully distinguished from membership dues and service fees, which represent payment made in return for direct, private benefit. This category is to be used to report all legacies and bequests. They should be reflected in the accounts of the organization at the time that the court had established an unassailable right to the gift and the proceeds are measurable in amount. All contributions received directly from individual donors and organizations and not resulting from a federated fund-raising campaign are to be included in this classification. All donor **designations** received from a United Way, including United Way of Story County, are to be included in this classification.

Examples of sources of support: Individuals, Bequests of non-endowment type, Corporations and businesses, Contributions/solicitations conducted by agency itself, Foundations and trusts, Fraternal, civic, social, and other unrelated groups

b) Membership Dues (Line #2)

This option is to be reserved for amounts received by any organization for personal memberships that procure directly for the member private benefits commensurate in value with the amount of the dues. When the benefits are not of a value related to the fee charged, the payment should be reported under contributions.

c) Program Service Fees (Line #3)

This classification includes fee payments received for services furnished by the organization (e.g., medical, psychiatric therapy, day care). Whether an agency uses schedules of fees for different services or merely requests clients to pay what they feel they can afford, any payments solicited, suggested, or accepted as a contribution in return for an agency's professional services belong in this classification. Also included in this classification is income from third party payment such as Title XIX and insurance reimbursement.

d) Investment Income (Line #4)

A not-for-profit organization may earn income from a variety of investments, from securities held for long-term investment or from short-term investments of temporarily idle cash to real estate and patents acquired through bequests and left unchanged for a period of years. In form, investment income may include interest, dividends, rentals, royalties, and even net earnings from activities. Do not include principal.

e) Grants (Private Sector) (Line #5)

This account group is reserved to reflect all support and revenue that an agency receives from any non-governmental grant. These grants are normally restricted to specific services.

f) State and Federal Funds (Line #6)

Grants, purchase of service, or other income from State or Federal funding.

g) IA Department of Health & Human Services (Line #7)

h) State (DECAT) Decategorization (Line #8)

i) State (Early Childhood Iowa (ECI)) (Line #9)

- j) **ISU Funds (Iowa State University) (Line#10)**
This account is to be used for support received from ISU including any in-kind revenue from the university. It **does not** include support from ISU Student Government/ASSET (line 18).
- k) **Other Government Funds (Local) (Line #11)**
This account is to be used for other cities/counties and any other anticipated government funding including COVID-19, CARES, and/or American Rescue Plan Act (ARPA) funds.
- l) **Other Government Funds- (CICS (Line #12)**
CICS (Central Iowa Community Services) dollars fund only mental health and disability services.
- m) **Other United Ways (Line #13)**
This account is to be used for United Way funding (grants, gifts) including United Way of Story County grants. Please do not put donor designations from United Way organizations here.
- n) **Miscellaneous Revenue (REFUNDS/ADJUST) (Line #14)**
If the revenue of an agency/program has been properly classified, very little should be shown as Miscellaneous.
- o) **ASSET – Story County (Line #15)**
This account is to be used for General Fund dollars requested from Story County.
- p) **ASSET – County Local Option (Line #16)**
This account is to be used for Story County Local Option funding. To be considered for Local Option funding, an agency must be providing services to residents living in the unincorporated or rural areas of the County.
- q) **ASSET – United Way of Story County (Line #17)**
This account is to be used for United Way of Story County request.
- r) **ASSET – ISU Student Government (Line #18)**
This account is to be used for ISU Student Government request.
- s) **ASSET – City of Ames (Line #19)**
This account is to be used for the request from the City of Ames.
- t) A subtotal will automatically be calculated for ASSET Funders.
- u) A total will automatically be calculated for Support & Revenue – All Sources.

2. Expenses

- a) **Salaries/Wages (Line #22)**
This account includes all salary and wage expenses—e.g., executive, professional, clerical, technician, maintenance, temporary help, and other staff either full or part-time. (It does not include consultants or others on a contract basis.)
- b) **Employee Benefits (Line #23)**
This expense account group is reserved for amounts paid and accrued by an agency under its own or other (private) employee health and retirement benefit plans, including voluntary employee termination or retirement payments outside a formal plan, as well as for other types of benefits and allowances.
Examples: Life insurance premiums, Monthly travel allotments or allowances, Accident insurance premiums, Free day care, Medical and hospital plan premiums, Employment termination expenses, Pension, or retirement plan premiums
- c) **Taxes (Line #24)**
Employers reserve this expense account group for the employer's share of Social Security taxes, Worker's Compensation Insurance premiums, and other taxes payable under Federal, State, or Local laws.
Examples: FICA (Employer's share), Unemployment Insurance, Disability Insurance Premiums, Worker's Compensation Insurance

- d) **Telephone/Communication (Line #25)**
This expense account group is reserved for the cost of all telephone, fax, teleprocessing, and similar communication expenses.
- e) **Occupancy (Line #26)**
This expense account group is reserved for all costs arising from an agency's occupancy and use of owned or leased land, buildings, and offices.
Examples: office rent, care of buildings and grounds, utilities, property taxes, building and grounds maintenance supplies
NOTE: Depreciation on buildings and equipment should be listed on line 41.
- f) **Supplies (Line #27)**
This expense account group is reserved for the cost of materials, appliances, and other supplies used by an agency. (Supplies used for building maintenance are included in line 27.) Please use this category for participant field trips, such as tickets or passes.
Examples: recreational, vocational, and craft supplies; food and beverages; laundry, linen, and housekeeping supplies; office supplies; paper, ink, and other printing and duplicating materials
- g) **Postage (Line #28)**
This expense account group is reserved for the cost of postage, parcel post, commercial trucking, and other delivery expenses, such as shipping and shipping materials, incurred in the operation of an agency.
Examples: postage and parcel post, freight, messenger/delivery service
- h) **Repairs/Expendable Equipment (Line #29)**
This account includes the purchase of all equipment with an estimated useful life of less than one year. It also includes the cost to the agency of all rentals, repairs, and maintenance of all equipment such as computers, equipment for maintaining the buildings and grounds, used by the agency in conducting its service and/or support functions. This category includes leases of equipment if the result is not ownership.
Examples: cost of repairing and maintaining agency owned vehicles, repair, or purchase of furniture, recreational and office equipment
- i) **Equipment/Fixed ASSETS (Line #30)**
This expense account includes the cost of all equipment and other assets acquired or used by an agency that has an estimated useful life beyond one year.
- j) **Subscriptions/Books (Line #31)**
This expense account group is reserved for the cost of subscriptions and reference material purchased by the reporting agency for use by its staff or for loan use by others but not for distribution. It includes the cost of purchase of various publications essential to the agency and staff in conducting its service and/or support function.
- k) **Fees and Contract Service (Line #32)**
This expense account group is reserved for fees and charges of professional practitioners, technical consultants, or semi- professional technicians who are not employees of the agency and are engaged as independent contractors for specified services on a fee or individual contract basis. (It does not include costs of janitorial or other building maintenance contracts.)
Examples: medical services purchased, psychiatric or psychological services purchased, auditing and accounting fees
- l) **Printing and Artwork (Line #33)**
This expense account group is reserved for the costs of printing charges of commercial artists and suppliers for artwork, proofs, service brochure literature, photographs, and other costs of leaflets, videos, and other informational material produced outside the reporting agency.

m) **Local Transportation (Line #34)**

This expense account group is reserved for the expenses of travel and transportation for staff or clients of the reporting agency within the perimeters of its regular service activity.

Examples: mileage reimbursement payments, agency vehicles- operating expense, or contracted bus service

n) **Conferences/Conventions (Line #35)**

This expense account group is reserved for the expenses of conducting or of agency staff attendance at meetings related to an agency's activities and associated travel related thereto.

Examples: staff development and training, equipment rentals, annual meeting costs, related printing costs, business conferences, conference registration fees, meeting space, travel/lodging costs

o) **Assistance to Individuals (Line #36)**

This expense account group is reserved for the costs to the reporting agency of specific materials, appliances, services, and any other assistance rendered by individuals or agencies other than agency staff, purchased at the expense of the agency, for a particular client or patient.

Examples: medical fees, medicines, transportation, recreation service, hospital fees, testing fees, rent and utility assistance

p) **Organization Dues (Line #37)**

This expense account group is reserved for the expenses for bona fide memberships in other organizations which provide, in turn, benefits such as regular services, publications, materials, or have legitimate interest and activities in the promotion, provision or planning of human service programs. This account includes National Parent Organization Dues/Support. This includes costs for allocations to agencies by Federated Fund-Raising Organizations and for dues, quota payments, and other formula- based payments by an agency to its affiliate (the national affiliate) to sustain, aid, maintain, assist, or support the service and support functions of that organization.

q) **Insurance/Liability (Line #38)**

This expense account group is reserved for all insurance paid by an agency but would not include Workman's Comp or insurance considered as an employee benefit (health/dental).

Examples: liability insurance, property insurance, bonding insurance, vehicle insurance, malpractice insurance

r) **Miscellaneous (Line #39)**

This expense account group is reserved for the cost of expenses not reportable in any other account classification. If the expenses for the agency/program have been properly classified, little should be shown as Miscellaneous.

s) **Extra line to be used if needed (Line #40)**

This is only used if an expense is outside general categories, otherwise leave blank.

t) **Depreciation Building and Equipment (Line #41)**

This account is used to accumulate depreciation expenses for equipment and buildings, whether you accumulate dollars or simply show a book value entry.

u) **Total Expenses (Line #42)**

A total will automatically be calculated for expenses.

3. **Service Statistics (only on the ABF-5 spreadsheets)**

a) **Units of Services**

Plug in the number of units in each of the columns - Actual, Adopted or Proposed. The unit is tied to the ASSET Service (see Reference Manual and/or top of ABF-5 after the Service Code is identified). An example of a unit would be 1 Client Hour.

b) **Cost Per Unit**

Cost per unit is automatically calculated based on the total of the expenses included and the number of units (Expenses divided by #Units = Unit \$ Rate). If expenses total \$50,000 and the number of units = 100 then the rate \$50,000 divided by 100 = \$500 (unit rate)

c) **Unduplicated Participants/Total**

Unduplicated Participants/Total should reflect only the number served.

d) **Unduplicated Participants/Story Co.**

Unduplicated Participants/Story County should reflect only the number served in the county. These numbers would be the same if the program were only in Story County. The Unduplicated Participants/Total for Actual FY number should match the number entered in Clear Impact Scorecard.

e) **Licensed Capacity**

Licensed capacity does not apply to every program. If not applicable for the program, simply enter N/A. If the program is licensed, such as a daycare, enter the number only.

4. **Issues/Factors Affecting the Budget:**

In this narrative section at the bottom of the ABF-5, describe any outside impacts or changes that might affect this service in the upcoming year. Also detail how your agency is planning to address these issues/factors. Please keep responses in the area provided. If additional explanations are needed, consider sharing this information with the assigned Liaison during the visit.

DIVISION V

CLEAR IMPACT SCORECARD

ASSET uses the online data management platform, Clear Impact Scorecard, to collect data from funded agencies. Each funded agency is given one username and password to access this platform. Log-in at <https://app.resultsscorecard.com>. For more information, see www.uwstory.org/toolkit-partner-agencies.

ANNUAL OUTCOMES AND PROGRAM DESCRIPTIONS

In 2021, the form ABF-5(O) has been removed from the ASSET budget forms. Agencies are now required to enter – or update – the following information in Scorecard **for each funded program. Note: Scorecard data is due July 31 annually. The exception to this is summer programs that cross fiscal years (June and July). The due date for Scorecard data for these programs is the September budget submission deadline stated in the ASSET calendar.**

Click on the funded program name, beside the blue “P.” Annually review and update if needed:

1. **What We Do** – Service description
2. **Who We Serve** – In this section, please discuss your target population. Note if any eligible clients were turned away and, if so, please provide an explanation.
3. **How We Impact** – This is the purpose description: Consider, what are the need(s) or issues the program is intended to address?

For detailed instructions on how to enter outcomes annually, view the toolkit Remember:

4. **Outcomes** – When submitting your annual ASSET budgets, please ensure that all data is entered and correct. If there are any notable increases or decreases, please use the “Story Behind the Curve” section under the performance measure to detail the reasons for these changes. If action is planned to affect the outcomes, please discuss this in the “Action Plan” section under the performance measure.

MID-YEAR UPDATE

Agencies must complete a Mid-Year Update. This update requires the following information be included **for each funded program** through Clear Impact Scorecard **by December 15th each year:**

Narrative portions (click on the funded program name beside the blue “P”)

1. Service Delivery – Were you able to deliver your services as planned? Yes or No. If not, please elaborate on why not.
2. Outcomes Measurement Status: Have you been able to conduct planned data collection to date (ex/pre-tests, surveys)? If not, what is your plan of action to remedy this and what support is needed?

Numeric portions (click on the orange “PM” and “add data values”)

1. # of Story County clients served July 1-November 30
2. # of Story County clients turned away July 1-November 30

VOLUNTEER USAGE

As of 2022, the “Volunteer Usage,” should now be reported on Clear Impact Scorecard and should include (1) the number of unduplicated volunteers used in the most recent fiscal year; and (2) the number of volunteer hours for the same year. Data should be for Story County. **For 2022** this should be completed by September 28, 2022. In future years, this information should be updated at the same time as the Annual Outcomes (July 31).

AGENCY CLIENT STATISTICS (Previously ABF-2)

As of 2022, the information previously recorded on ABF-2 is now part of the agency's Clear Impact Scorecard. Please upload the information on all client data for the entire agency. In future years, this information should be updated at the same time as the Annual Outcomes (July 31).

Report actual figures from the prior fiscal year. These should not be estimates.

Unduplicated Count of Clients – Information would include:

- Age Group;
- Race/Ethnicity;
- Location of Residence (Please note ISU students should not be double counted as Ames, Story County, or outside Story County residents.
- Income Level – (Poverty level guidelines are shown below.
To view the current Department of Health and Human Services Poverty Guidelines, click on the link below:
<https://www.healthcare.gov/glossary/federal-poverty-level-fpl/>)
- Last Client Statistics marked “Other”

DIVISION VI

Fillable Form Is on the ASSET Website

LIAISON REPORT

AGENCY: _____ LIAISON: _____

1. **Agency Snapshot.**
 - a) Provide an overview of significant agency changes since the last Liaison visit one year ago.

2. **Agency Strengths.**
 - a) What are two to four strengths that contribute most to the program/service outcomes?
 - b) For each strength, list your observations and/or refer to supporting material provided to you during the Liaison visit. (Do not list everything that is satisfactory. It will be assumed that things not mentioned are okay).

3. **Financial Outlook.**
 - a) Are there current funding concerns and what are the agency's plans to address them?
 - b) Are there any changes in services which impact the need for ASSET funding?
 - c) What new and/or additional ways is the agency diversifying revenue sources (i.e., grants, fund raising, raising program fees)?

4. **Internal Management Practices.**
 - a) **Role of Board of Directors**
 - How is the agency's Board of Directors selected to represent the community it serves?
 - Is there evidence that this agency's Board of Directors meets regularly, determines policy, and is equipped to provide effective oversight of the agency?
 - Is membership of the Board stable and is tenure guided by a particular process?
 - b) **Agency Management**
 - How does the organizational structure support effective delivery of services and sound administration of the agency?
 - What is the staff turnover rate and how is it being addressed?
 - How does the agency ensure staff training and continuing education are provided?

5. **Agency Comments**
 - a) How does the agency's work align with the Funder priorities and the most recent community needs assessment?
 - b) Does the agency have questions or concerns about the ASSET process? If so, please specify.

APPENDICES

A. SERVICE CODES

Service Code	Service Code Name	Unit of Service	Focus Area	Status
1.01	Supported Employment for Mental Health or Developmentally Disabled	1 Staff Hour	Education	Active
1.02	Advocacy for Social Development	1 Staff Hour	Education	Active
1.03	Resource Development	1 Staff Hour	Education	Not Active
1.04	Informal Education for Self-Improvement and Self-Enrichment	1 Client Contact	Education	Not Active
1.05	Enclave Services	15 minutes	Education	Not Active
1.06	Preschool	1 Partial Day	Education	Active
1.07	Youth Development and Social Adjustment	1 Client Contact/Day	Education	Active
1.08	Employment Assistance for Youth	1 Staff Hour	Education	Active
1.09	Out of School Program	1 Partial Day (3 hours)	Education	Active
1.10	Family Development / Education	1 Client Hour	Education	Active
1.11	Volunteer Management	1 Volunteer Hour	Education	Active
1.12	Public Education and Awareness	1 Staff Hour	Education	Active
2.01	Emergency Assistance for Basic Material Needs	1 Client Contact	Financial Stability	Active
2.02	Day Care – Infant	1 Full Day	Financial Stability	Active
2.03	Day Care – Children	1 Full Day	Financial Stability	Active
2.04	Day Care – School Age	1 Partial Day	Financial Stability	Active
2.05	Childcare for Mildly Ill Children	1 Partial Day	Financial Stability	Not Active
2.06	Separated Families	1 Client Contact	Financial Stability	Not Active
2.07	Transitional Living Services	1 day	Financial Stability	Active
2.08	Emergency Shelter	1 24-Hour Period of Shelter and Food	Financial Stability	Active
2.09	Correctional Services	1 Client Hour	Financial Stability	Active

Service Code	Service Code Name	Unit of Service	Focus Area	Status
2.10	Legal Aid – Civil	1 Staff Hour	Financial Stability	Active
2.11	Clothing, Furnishing and Other Assistance	1 Client Contact	Financial Stability	Active
2.12	Disaster Services	1 Staff Hour	Financial Stability	Active
2.13	Transportation	One Way Trip	Financial Stability	Active
2.14	Budget / Credit Counseling	1 Client Contact	Financial Stability	Active
2.15	Supportive Housing	1 day	Financial Stability	NEW
3.01	Community Clinics	1 Clinic Hour	Health	Active
3.02	Day Care – Adults	1 Day	Health	Active
3.03	In-Home Health Monitoring	1 person monitored per month	Health	Not Active
3.04	Homemaker/Home Health Assistance	1 Client Hour	Health	Active
3.05	Home Delivered Meals	1 Meal	Health	Active
3.06	Congregate Meals	1 Meal	Health	Active
3.07	Domestic Abuse Crisis and Support	1 Staff Hour	Health	Active
3.08	Sexual Abuse Crisis and Support	1 Staff Hour	Health	Active
3.09	Crisis Intervention	1 Contact	Health	Active
3.10	Court Watch	1 Staff Hour	Health	Active
3.11	Respite Care	1 Client Hour	Health	Not Active
3.12	In Home Nursing	1 Visit	Health	Active
3.13	Service Coordination	1 Client Hour	Health	Active
3.14	Activity and Resource Center	1 Client Hour	Health	Active
3.15	In Home Hospice	1 Day (24 hours)	Health	Active
3.16	Substance Use Disorder Outpatient Treatment	1 Client Hour	Health	Active
3.17	Mental Health Outpatient Treatment	1 Client Hour	Health	Active
3.18	Supported Community Living Services	15 minutes or up to 1 24-Hour Day	Health	Not Active
3.19	Special Recreation	1 participant per hour	Health	Active
3.20	Day Habilitation Services	15 minutes or 1 Day	Health	Not Active
3.21	Peer Support Services	1 Client Contact	Health	Not Active

B. SERVICE CODE DESCRIPTIONS

New Service Code #	Service Code Name (Only Bolded names are currently active)	Description
1.01	Supported Employment for individuals with Mental Health or Developmental Disabilities	Individualized services associated with preparing, obtaining, and maintaining competitive paid employment for individuals. Activities include but are not limited to, educational and vocational assessment, job development, skill development, job coaching, work-related transportation, and consultation. Job placements shall be made in an integrated setting in the general workforce.
1.02	Advocacy for Social Development	Advocacy is a service designed to support or defend a cause and to assist individuals with improving the quality of their lives. In addition, advocacy work includes empowering others to advocate for themselves by teaching skills with which they can achieve their goals.
1.03	Resource Development	Resource Development is designed to develop material resources to deliver program service services pertaining to a specialized need.
1.04	Informal Education for Self-Improvement and Self-Enrichment	Informal Education provides opportunities for self-improvement, enjoyment, and self-enrichment for those who wish to take advantage of them. Examples of courses offered are arts activities; physical fitness; cooking; and gardening.
1.05	Enclave Services	Employment services associated with sustaining individuals in an employment team of no more than eight individuals with disabilities to work in an integrated, community-based job setting where most co-workers are persons without disabilities.
1.06	Preschool	Services provide educational experiences and activities and foster intellectual stimulation and development of children, ages 3 to 5. This service is provided in partnership with local school districts.
1.07	Youth Development and Social Adjustment	The service is designed to help improve self-worth through mentoring and/or group interaction/participation.
1.08	Employment Assistance for Youth	This service is designed to optimize employment opportunities for youth through an assessment of the individual and the employment opportunities in the community. Provides youth with on-the-job training.
1.09	Out of School Program	Out of School Program (not licensed childcare centers) occurs at various times when school is not in session (i.e., before and after school, school breaks, snow days, summer)
1.10	Family Development / Education	These services focus on needs relating to the social functioning of families and individuals. Services include providing parenting skills and are designed to strengthen family life that can lead to economic self-sufficiency.
1.11	Volunteer Management	Volunteer Management is designed to recruit, train, and coordinate volunteer resources to promote the public good. This service classification is meant only for agencies that have volunteer recruitment, placement, and utilization as their major primary focus.
1.12	Public Education and Awareness	Public Education and Awareness is a service to provide information to the public about a particular social issue or need. Community response may be sought to mobilize people to seek solutions to the issue.
2.01	Emergency Assistance for Basic Material Needs	Emergency Assistance service is designed to provide the minimum necessities of life on a limited, short-term basis to individuals and families, pending formulation of long-term solutions. Examples of services include food vouchers, rent assistance, utility assistance and food pantry.

New Service Code #	Service Code Name (Only Bolded names are currently active)	Description
2.02	Day Care - Infant	Day Care-Infant services are designed to provide infants, 0-24 months, with care in a group setting during a portion of a 24-hour day. The service is designed to provide supervision, care, and developmental experiences.
2.03	Day Care - Children	Day Care-Children are services designed to provide children, 24 months to 5 years, with care in a group setting during a portion of a 24-hour day. The service is designed to provide supervision, care, and developmental experiences.
2.04	Day Care - School Age	School Age daycare is a service designed to provide children with care in a group setting for a part of the day. Care may be offered before school, after school, or a combination of these options. Provision is usually made for a full-day service at such times during the school year when school is not in session.
2.05	Childcare for Mildly Ill Children	Services designed to provide children ages 6 months to 11 years with support and nursing oversight when mildly ill and unable to participate in their typical well-childcare arrangements or school.
2.06	Separated Families	Separated families unite military families to local resources and support services. This may include emergency communications, family follow-up and financial assistance.
2.07	Transitional Living Services	Transitional housing involves a temporary residence of up to 24 months with wrap-around services to help people stabilize their lives.
2.08	Emergency Shelter	Emergency shelter is designed to provide safe, temporary housing for youth, adults and/or families while more permanent solutions are determined. Length of stay will be determined when the service is first approved for consideration for ASSET funding.
2.09	Correctional Services	Correctional services are to help individuals remain in the community by providing pre-trial release, probation services, and deferred prosecution under the supervision and order of the court.
2.10	Legal Aid - Civil	Legal Aid - Civil provides legal assistance to persons with low-incomes in civil matters (e.g., Family Law, Bankruptcy, Landlord-Tenant Law).
2.11	Clothing, Furnishing and Other Assistance	This is a supportive service to provide clothing, home furnishings, and other assistance on a limited or one-time basis.
2.12	Disaster Services	Disaster Services is designed to maintain a preparedness to meet emergency needs of individuals who are victims of disaster. Services may include cooperation with governmental and local agencies in disaster planning and operations.
2.13	Transportation	Provide safe and reliable transportation to and from essential services, employment, education, and other activities.
2.14	Budget / Credit Counseling	Budget and Credit Counseling is a service designed to maximize the use of income for individuals in need of financial management and financial literacy, to ensure shelter, food, medical care, clothing, and education.
2.15	Supportive Housing	Provides long term housing and support services to help people with physical disabilities, mental impairment or substance use to secure and keep housing that is safe, affordable, and integrated into the community. Individuals and families to be served are chronically homeless and continue to be at imminent

New Service Code #	Service Code Name (Only Bolded names are currently active)	Description
		risk of becoming homeless.
3.01	Community Clinics	Community Clinics are designed to provide health services to persons in need of preventive or health maintenance care. Services are provided outside the auspices of a hospital.
3.02	Day Care - Adults	Supportive care is available to adults who need supervision and/or assistance during some portion of a 24-hour day. These services may include rehabilitation, preventative services, nutrition, personal care, and social activities. Day care is designed to enable the individual to continue to live independently and may also provide temporary relief for the primary caregiver.
3.03	In-Home Health Monitoring	In-Home Health monitoring offers services to adults who live in a home situation and are alone for most or all day.
3.04	Homemaker / Home Health Assistance	Homemaker/Home Health Assistance provides services to individuals who need assistance with basic housekeeping, food preparation, and self-care. Services are provided under the direction of a nurse.
3.05	Home Delivered Meals	Nutritious meals are delivered to the client's home. This service is designed to enable individuals to continue living independently.
3.06	Congregate Meals	Congregate Meals is a nutrition service available to senior citizens aged 60 or older. Meals are provided at a central location.
3.07	Domestic Abuse Crisis and Support	Domestic Abuse Crisis and Support is designed to provide crisis response and ongoing support and counseling to individuals impacted by domestic abuse.
3.08	Sexual Abuse Crisis and Support	Sexual Abuse Crisis and Support is designed to provide crisis response and ongoing support and counseling to individuals impacted by sexual abuse.
3.09	Crisis Intervention	Crisis Intervention provides confidential services to persons in crisis by matching their needs with available community resources.
3.10	Court Watch	Court Watch is designed to gather information on the procedures and court orders in domestic violence and sexual assault cases. Advocates then relay this information to the victims of these crimes. Advocates are available for other court systems advocacy and liaison work as needed.
3.11	Respite Care	Respite care is the temporary and periodic provision of oversight and supervision which relieve caregivers from the duties of providing continuous support and care to a dependent individual.
3.12	In Home Nursing	In Home Nursing provides professional nursing services to assist individuals having medical needs which can be met in the home. Services include injections, medication, vital signs monitoring, dressing changes and any other service ordered by a physician that can be safely and performed in the home.
3.13	Service Coordination	Assess needs, coordinate services to meet needs, and monitor service delivery to ensure client needs are met. Examples include but are not limited to budgeting, employment, housing, and referrals to medical, mental health and respite care.
3.14	Activity and Resource Center	An Activity and Resource Center is where individuals come to engage in activities that reflect their experience and skills. The center staff may also link participants with resources offered outside the center.
3.15	In Home Hospice	Hospice is a comprehensive service of care and support for the patient/family with a terminal illness continuing through the bereavement period.

New Service Code #	Service Code Name (Only Bolded names are currently active)	Description
3.16	Substance Use Disorder Outpatient Treatment	Treatment for substance use disorders may include supervision and counseling in a structured setting, individual counseling, family counseling, and/or group therapy on an outpatient basis.
3.17	Mental Health Outpatient Treatment	Mental Health Outpatient Treatment services provide immediate short-term episodic treatment for mental health needs. Treatment may include supervision and counseling in a structured setting, individual counseling, family counseling, and/or group therapy on an outpatient basis.
3.18	Supported Community Living Services	Services provided to assist individuals in maintaining suitable residential arrangements in the community. These include, but are not limited to, budgeting assistance, medication monitoring, self-care, cleaning, and shopping needs. These activities may be provided in a variety of settings ranging from minimum supervision up to 24-hour care.
3.19	Special Recreation	Special recreation for persons with physical, intellectual, or developmental disabilities designed to meet leisure, social and fitness needs of individuals. Instruction and organization are designed to accommodate a variety of ability levels.
3.20	Day Habilitation Services	Services to assist or support individuals in community integration with skill development or maintenance. Services must help or enhance an individual's intellectual functioning, physical and emotional health, language and communication skills, and behavior management.
3.21	Peer Support Services	Mental Health service is designed to provide advocacy and support as people recover from mental illness. Components of Peer Support Services include but are not limited to developing supportive relationships, teaching problem solving techniques and modeling effective coping techniques. Services are to be provided by trained peer support specialists.

C. INDEX OF AGENCIES/SERVICES

1. Able Up Iowa (Formerly known as Iowa Able Foundation) – did not request FY24 funding; notified of nonparticipation – June 2024
 - a. Budget/Credit Counseling (2.14)
2. All Aboard for Kids
 - a. Out of School Program (1.09)
3. American Red Cross/Lincoln Way Chapter
 - a. Disaster Services (2.12)
4. Ames Community Preschool Center (ACPC)
 - a. Day Care - Infant (2.02)
 - b. Day Care - Children (2.03)
 - c. Day Care - School Age (2.04)
5. Assault Care Center Extending Shelter & Support (ACCESS)
 - a. Public Education and Awareness (1.12)
 - b. Emergency Shelter (2.08)
 - c. Domestic Abuse Crisis and Support (3.07)
 - d. Sexual Abuse Crisis and Support (3.08)
 - e. Court Watch (3.10)
6. Boys & Girls Clubs of Story County
 - a. Out of School Program (1.09)
7. Boy Scouts of America, Mid-Iowa Council
 - a. Out of School Program (1.09)
8. Camp Fire USA, Heart of Iowa Council
 - a. Out of School Program (1.09)
9. Center for Creative Justice (CCJ)
 - a. Correctional Services (2.09)
10. Central Iowa Retired and Senior Volunteer Service (RSVP)
 - a. Volunteer Management (1.11)
 - b. Disaster Services (2.12)
 - c. Transportation (2.13)
11. ChildServe
 - a. Day Care - Infant (2.02)
 - b. Day Care - Children (2.03)
12. Friends of Iowa CASA— has not been funded & have not requested funding since FY23; notified of nonparticipation – June 2024
 - a. Volunteer Management (1.11)
13. Girl Scouts of Greater Iowa
 - a. Out of School Program (1.09)

14. Good Neighbor Emergency Assistance (GNEA)
 - a. Emergency Assistance for Basic Material Needs (Rent/Utility Assistance) (2.01)
 - b. Emergency Assistance for Basic Material Needs (Food Voucher Program) (2.01)
15. Heartland of Story County (HSC) (FKA Heartland Senior Services)
 - a. Emergency Assistance for Basic Material Needs (Supplemental Food Program) (2.01)
 - b. Day Care - Adults (3.02)
 - c. Home Delivered Meals (3.05) (includes program for under 60 years old)
 - d. Congregate Meals (3.06)
 - e. Service Coordination (Outreach) (3.13)
 - f. Activity and Resource Center (3.14)
16. HIRTA
 - a. Transportation (Story County) (2.13)
 - b. Transportation (City) (2.13)
17. Legal Aid Society of Story County
 - a. Legal Aid - Civil (2.10)
18. Lutheran Services in Iowa (LSI)
 - a. Family Development/Education (1.10)
 - b. Family Development/ Education (Parents as Teachers) (1.10)
 - c. Crisis Intervention (3.09)
19. MGMC Home Health Services (Story County Public Health)
 - a. Community Clinics (3.01)
 - b. In-Home Nursing (3.12)
 - c. In-Home Hospice (3.15)
 - d. Homemaker/Home Health Assistance (3.04)
20. MGMC Emergency Department (New for FY25)
 - a. Crisis Intervention (3.09)
21. Mid-Iowa Community Action (MICA)
 - a. Emergency Assistance for Basic Material Needs (Food Pantry) (2.01)
22. National Alliance on Mental Illness – Central Iowa (NAMI)
 - a. Advocacy for Social Development (Family and Consumer Education) (1.02)
 - b. Advocacy for Social Development (Family and Consumer Support) (1.02)
 - c. Public Education and Awareness (1.12)
 - d. Activity and Resource Center (Wellness Center) (3.14)
23. Primary Health Care (PHC)
 - a. Community Clinics (3.01)
24. Raising Readers
 - a.
 - b. Out of School Program (1.09)
 - c. Family Development/Education (1.10)

- d. Public Education and Awareness (1.12)
25. Story Time Child Care Center (STCC)
 - a. Day Care – Infant (2.02)
 - b. Day Care - Children (2.03)
 - c. Day Care - School Age (2.04)
 26. The ARC of Story County,
 - a. Special Recreation (3.19)
 - b. Respite Care (3.11)
 - c. Advocacy for Social Development (1.02)
 - d. Service Coordination (3.13)
 27. The Bridge Home – not funded for FY25
 - a. Emergency Assistance for Basic Material Needs (Rapid Rehousing) (2.01)
 - b. Emergency Shelter (2.08)
 - c. Supportive Housing (2.15) – not currently funded FY24
 - d. Service Coordination (3.13)
 28. The Community Academy
 - a. Out of School Program (1.09)
 29. The Salvation Army
 - a. Emergency Assistance for Basic Material needs (Food Pantry) (2.01)
 - b. Emergency Assistance for Basic Material needs (Rent/Utility Assistance) (2.01)
 - c. Disaster Services (2.12)
 - d. Budget/Credit Counseling (Representative Payee) (2.14)
 30. University Community Childcare (UCC)
 - a. Preschool (1.06)
 - b. Day Care - Infant (2.02)
 - c. Day Care - Children (2.03)
 - d. Day Care - School Age (2.04)
 31. Wings of Refuge (WoR) – *has not requested funding as of FY21*; notified of nonparticipation – June 2024
 32. Youth & Shelter Services (YSS)
 - a. Youth Development and Social Adjustment (Nevada) (1.07)
 - b. Youth Development and Social Adjustment (GRIP Mentoring) (1.07)
 - c. Employment Assistance for Youth (1.08)
 - d. Out of School Program (Summer Enrichment) (1.09)
 - e. Family Development/Education (1.10)
 - f. Public Education and Awareness (1.12)
 - g. Day Care – School Age (Kids Club) (2.04)
 - h. Transitional Living Services (2.07)
 - i. Emergency Shelter (2.08)
 - j. Clothing, Furnishing, and Other Assistance (2.11)
 - k. Crisis Intervention (Rosedale Crisis Line) (3.09)

- l. Service Coordination (3.13)
 - m. Substance Abuse or Co-occurring Disorder Treatment (Outpatient) (3.16)
 - n. Primary Treatment and Health Maintenance (Outpatient) (3.17)
33. YWCA Ames-ISU
- a. Advocacy for Social Development (1.02)
 - b. Informal Education for Self-Improvement and Self-Enrichment (1.04)
 - c. Youth Development and Social Adjustment (1.07)

D. ASSET Glossary of Acronyms and Terms

- ACCESS – Assault Care Center Extending Shelter & Support
- ACPC – Ames Community Preschool Center
- AmRdCr – American Red Cross
- ASSET – Analysis of Social Services Evaluation Team
- ASSET Volunteer – AKA Liaison and Board member
- BGC – Boys & Girls Clubs of Story County
- BSA – Boy Scouts of America, Mid Iowa Council
- CCJ – Center for Creative Justice
- CDBG – Community Development Block Grant
- CICS – Central Iowa Community Services
- CEO – Chief Executive Officer
- CFIRE – Camp Fire USA, Heart of Iowa Council
- CHLDSV – ChildServe
- DHHS – Iowa Department of Health and Human Services (formerly known as Iowa Department of Human Services)
- FEMA – Federal Emergency Management Agency
- FIP – Family Investment Program
- GNEA – Good Neighbor Emergency Assistance
- GSA – Girl Scouts of Greater Iowa
- HIRTA – Heart of Iowa Regional Transit Authority
- HSC – Heartland of Story County (formerly known as Heartland Senior Services)
- LASSC – Legal Aid Society of Story County
- LIHEAP – Low Income Home Energy Assistance Program
- LSI – Lutheran Services in Iowa
- MGMC – Mary Greeley Medical Center
- MH/DS – Mental Health/Disability Services
- MICA – Mid-Iowa Community Action
- NAMI-CI – National Alliance on Mental Illness - Central Iowa
- PHC – Primary Health Care
- Program – interchangeable with service
- RFP – Request for Proposal
- RR – Raising Readers in Story County
- RSVP – Central Iowa Retired and Senior Volunteer Program
- Service – interchangeable with program
- SSA – State Supplemental Assistance
- SSI – Supplemental Security Income

- STCC – Story Time Child Care Center
- ARC – The ARC of Story County
- TBH – The Bridge Home
- TCA – The Community Academy
- TSA – The Salvation Army
- UCC – University Community Childcare
- UWSC – United Way of Story County
- WIC – Women, Infants, and Children's Program
- WoR – Wings of Refuge
- YWCA – YWCA Ames-ISU
- YSS – Youth & Shelter Services