



2025 SCBC Participation Form

First Name: _____ Last Name: _____ DOB: ____/____/____

Phone# _____ Email: _____ Male: _ Female: _ Other: _ Veteran: _

Address: _____
Street City State Zip

Emergency Contact: _____ Phone: _____

Relation to you: _____ DO YOU LIVE ALONE? YES NO

Have you read the ADSD Notice of Privacy ? yes no HAVE YOU READ THE CODE OF CONDUCT ON BACK OF FORM

ETHNICITY: Hispanic or Latino
Non-Hispanic or Latino

What is your total Nutritional Score? _____
(This can be determined with the "Determine Your Nutritional Health" Work sheet given on the back of this form)

RACE: American Indian / Alaskan Native
Asian
Black/ African American
Hispanic
Native Hawaiian or Pacific Islander
White
Other

Is your household AT or BELOW Poverty? YES or NO

(1 person household \$ 1,073.33 or 2 person household \$ 1,451.67 per month)

Activities of daily living (ADLS) –

WITHOUT ASSISTANCE, I am Unable to:

Bathing Getting Dressed
Eating Using the Bathroom
Maintain Continence Transfer In/Out of a Bed or Chair

None- I can perform these activities

Instrumental Activities of Daily Living (IADLS)-

WITHOUT ASSISTANCE, I am Unable to:

Prepare Meals Manage Medication
Do Housework Do Laundry
Manage Money Use the Telephone
Shop Use Transportation Services

None- I can perform these activities

Are you interested in volunteering with the Senior Center of Boulder City? Yes No

Has your address or phone number changed in the past year? Yes No

How did you hear about us? _____

Participation Signature _____ Date _____

By Signing this for I acknowledge I have received the ADSD Notice of Privacy Practices and THE PROPER CONDUCT GUIDE on the back of the form.

OFFICE USE ONLY		OFFICE USE ONLY		OFFICE USE ONLY		OFFICE USE ONLY	
	2025 Membership	Volunteer	Congregate Meals	MOW	HMSR	Pantry	

Check Services Requested							NR
SAMS Reviewed & Entered	N/A	N/A					ADL
SCDB Reviewed & Entered							IADL
File Folder Updated							

PROPER CONDUCT GUIDE RULES OF CONDUCT FOR PATRONS AND GUESTS:

- Activities that infringe on the rights of Center participants or staff
- Destruction of materials, equipment, furniture, and property. Vandalism or littering in the Center or on the grounds.
- Violation of any Federal, State, County, or City laws and ordinances
- Possession of weapons on the premises
- Racial, religious, or sexual harassment of Center participants or staff
- Inappropriate behavior or language use
- Inappropriate cleanliness or dress that disturbs other Center participants.
- Bathing, tooth brushing, changing of clothing or using the restrooms in any inappropriate manner will not be tolerated.
- Smoking is prohibited inside the Center. Smoking is permitted outside only at designated locations.
- Possession, use or sale of controlled substances. Persons who are under the influence of alcohol or a controlled substance are not allowed to be on the Center's premises.
- Inconsiderate or discourteous behaviors toward Center Participants or staff.
 - Infractions pertaining to loitering, sales, or solicitations:
- Sleeping in the Center or on the premises is prohibited.
- No one may solicit spare change or loans. No panhandling on premises.

- No luggage, sleeping bags or carts may be brought onto the premises.

Any other behavior that the Senior Center of Boulder City staff finds to be inappropriate or offensive.

Sanctions imposed will be decided on the basis of individual offenses as needed, up to and including permanent expulsion from the Center of Boulder City

Name: _____ Date: _____

Determine Your Nutritional Health

Circle each that applies to your nutritional habits.	YES
1. I have an illness or conditioned that made me change the kind and/or food I eats	2 Points
2. I eat fewer than 2 meals per day	3 Points
3. I eat few fruits, vegetables, or milk products	2 Points
4. I have 3 or more drinks of beer, liquor, or wine almost every day	2 Points
5. I have tooth or mouth problems that make it had for me to eat	2 Points
6. I don't always have enough money to buy the food I need	4 Points
7. I eat alone most of the time	1 Point
8. I take 3 or more different prescribed or over-the-counter drugs a day	1 Point
9. Without wanting to, I have lost or gained 10 pounds in the last 6 months	2 Points
10. I am not always physically able to shop, cook, and/or feed myself	2 Points
Total your Nutritional Score	

If your score is:

0-2 Good! Recheck score in 6 months

If it's

3-5 You are at moderate nutritional risk.

See what can be don't to improve your eating habits and lifestyles. Refer to the attached handout for helpful tips. Recheck your nutritional score in 3 months

6 or more You are at high nutritional risk

Bring this checklist the next time you see your doctor, dietitian or other qualified health or social service professional. Talk with them about any problems you may have. Ask for help to improve your nutritional health.



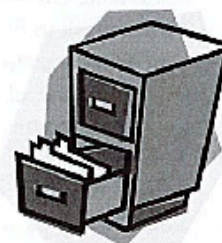
State of Nevada – Department of Health and Human Services

Aging & Disability Services Division

Notice of Privacy Practices

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE READ IT CAREFULLY.

Your health information is personal and private. The law says that we (the Aging & Disability Services Division) must protect this information. When you first asked for our help or services, you gave us information that helped us decide if you qualified. It became part of your file, which we keep in our offices. Also in your file is information that is given to us by hospitals, doctors and other people who treat you. A federal law says that we must give you this notice to help you understand what our legal duties are and how we will protect your health information.



When is it okay for us to share your health information?

If you sign a special form that tells us it is okay to share your health information with someone, then we will share it. You can cancel this at any time by notifying us in writing except if we have already shared the information.

Your information can be shared without your okay when we need to approve or pay for services. We can also share it when we review our programs and try to make them better. Under the law, these uses are called treatment, payment and health care operations.

The law says that there are some other situations when we may need to share information without your okay. Here are some examples.

For your medical treatment and payment

- ✓ When you need emergency care
- ✓ To tell you about treatment choices
- ✓ To remind you about appointments
- ✓ To help our business partners do their work
- ✓ To help review program quality

For your personal reasons

- ✓ To tell your family and others who help with your care things they need to know
- ✓ To be listed in a patient directory
- ✓ For workers compensation
- ✓ To tell a funeral director of your death
- ✓ If you have signed organ donation papers, to make sure your organs are donated according to your wishes

For public health reasons

- ✓ To help researchers study health problems
- ✓ To help public health officials stop the spread of disease or prevent an injury
- ✓ To protect you or another person if we think that you are in danger

Other special uses

- ✓ To help the police, courts and other people who enforce the law
- ✓ To obey laws about reporting abuse and neglect
- ✓ To report information to the military
- ✓ To help government agencies review our work and investigate problems
- ✓ To obey court orders

What are your rights?

- You can ask us not to share your information in some situations. However, the law says that we do not always have to agree with you.
- If you are reading this notice on the Internet or on a bulletin board, you can ask for a paper copy of your own.
- You can ask to look at your health information and get a copy of it. You may be charged a fee for the copies based on Division policy. However, you need to remember that we do not have a complete medical record about you. If you want a copy of your complete medical record, you should ask your doctor or provider of health care. If you think that something is missing or is wrong in your health record that we have, you can ask us to make changes.
- You can ask to have a copy of your health information provided in electronic format if it is available.
- You can ask us to give you a list of the times (after April 14, 2003) that we have shared your health information with someone else. This will not include the times we have shared your information for the purposes of treatment, payment or health care operations.
- You may ask to restrict the release of your health information to a health plan when you have paid out of pocket in full for items or services.
- You can ask us to mail health information to an address that is different from your usual address or to deliver the information to you in another way.



What if you have a complaint?

If you think that we have not kept our promise to protect your health information, you may complain to us or to the Department of Health and Human Services. Nothing will happen to you if you complain.

What are our responsibilities?

- Under the law, we must keep your health information private except in situations like the ones listed in this notice.
- We must give you this notice that explains our legal duties about privacy.
- We must follow what we have told you in this notice.
- We must agree when you make reasonable requests to send your health information to a different address or to deliver it in a way other than regular mail.
- We must notify you if there is a breach of your unsecured health information.
- We will only use or share the minimum amount of your health information necessary to perform our duties.
- We must tell you if we cannot agree when you ask us to limit how your information is shared.

Contact Information

If you have any questions or complaints about our privacy rules, please contact us at: Aging & Disability Services Division Privacy Officer c/o DHCFP 1100 East William Street, Suite 101 Carson City, NV 89701 (775) 684-3600	Or contact the Dept. of Health and Human Services at: Office for Civil Rights 90 7 th Street, Suite 4-100 San Francisco, CA 94103 (415) 437-8310; (415) 437-8311 (TDD) (415) 437-8329 FAX
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The Aging & Disability Services Division has the right to change this notice and change the way your health information is protected. If that happens, we will make corrections and send a new notice to you by mail and we will post it in our offices and on our web site at: <http://aging.state.nv.us>



NUTRITIONAL HEALTH TIPS

The following tips are designed to provide you with suggestions for improving your nutritional health, if you answered "Yes" to any of the statements on the "DETERMINE YOUR NUTRITIONAL HEALTH" checklist.



1. I have an illness or condition that made me change the kind and/or amount of food I eat.

Changes in your eating habits make it difficult for you to get all the nutrients you need. Good nutrition helps the body resist diseases and recover more quickly if illness does strike.

- Avoid using vitamin and mineral supplements without medical advice.
- Use medications as directed.
- Drink 6 to 8 glasses of water every day, even if you're not thirsty.
- Try to stay near your healthy body weight.
- Stay physically active.



2. I eat fewer than two meals per day.

Eating only once a day makes it almost impossible to get the variety of foods and nutrients you need to stay healthy.

- Try not to snack all day so you will be hungry at mealtime.
- Eat at usual times since hunger pangs may not come. If necessary, set an alarm to remind you to eat.

- Eat with friends or in a cheerful environment.
- Cook meals ahead so that when you are too tired to cook, you only need to defrost or reheat your meal.
- Keep easy-to-fix items (fruits, milk or yogurt, cereals, soups, cheese and crackers, peanut butter and whole wheat bread) on hand.



3. I eat few fruits or vegetables, or milk products.

Fruits and vegetables provide many important vitamins and minerals plus dietary fiber, which is important for proper bowel function. Here are some tips to help you add fruits and vegetables to your daily diet.

- Choose fruits for snacks between meals.
- Use fresh or canned fruit slices as a colorful garnish.
- Eat fresh fruits topped with yogurt or cottage cheese and sprinkled with cinnamon.
- Blend fresh, frozen or canned fruit with milk for a fruit shake.
- Top angel food cake with fresh, frozen or canned fruit.
- Bake or broil apples, pears or bananas with cinnamon and nutmeg; fruit tastes even sweeter when eaten while warm.
- Add vegetables to soups, stews or casseroles.
- Mix several kinds of vegetables for an interesting medley.

- Buy frozen vegetables in bags. You can use them as needed and store the rest for later.
- Use herbs and lemon juice to season vegetables.

Milk products provide a variety of nutrients including calcium. A diet low in calcium may lead to osteoporosis, which weakens bones and often leads to painful and disabling fractures. Below are some tips to help you increase the amount of milk products in your daily diet.

- Add non-fat dry milk to soups, stews and casseroles.
- Eat low-fat yogurt and cottage cheese as a snack or with meals.
- Prepare canned soup with milk instead of water.
- For calcium-rich desserts, select ice milk, frozen yogurt, custards and puddings made with milk.
- If you are unable to drink milk, consult with a physician or dietitian about your need for additional calcium.



4. I have 3 or more drinks of beer, liquor or wine almost every day.

Many health problems become worse if you drink more than one or two alcoholic beverages per day. These problems may:

- Lead to malnutrition because you are replacing food with alcohol,
- Increase your risk of falls and accidents,
- Cause permanent damage to the brain and central nervous system and to the liver, heart, kidneys and stomach,
- Make it difficult for your doctor to diagnose certain medical problems,

- Mask pain that may otherwise serve as a warning sign of a medical problem such as a heart attack,
- Cause problems similar to dementia and confusion,
- Cause undesirable side effects when mixed with prescription and over-the-counter drugs.

If you think alcohol may be a problem for you, seek help from a state or local social services agency.



5. I have tooth or mouth problems that make it hard for me to eat.

A healthy mouth, teeth and gums are necessary for eating. Missing, loose or rotten teeth, or dentures that don't fit well or cause mouth sores, make it hard to eat.

- Have regular dental checkups whether you have natural teeth or dentures.
- Brush your teeth thoroughly at least twice daily.
- Floss your teeth at least once daily.
- Brush all denture surfaces with a denture care product each day.
- To relieve dry mouth, drink extra water and avoid sugary snacks, caffeinated beverages, tobacco, and alcohol.

If you have difficulty chewing:

- Cook meat slowly in broth to make it tender.
- Cut or chop meat into small pieces before you cook it.
- Try softer meat substitutes such as beans, eggs, cottage cheese, or cheese.
- Try steaming vegetables so they are tender.
- Chop vegetables so your teeth have less work to do.
- Try putting vegetables in the blender or mashing them with a potato masher.



6. I don't always have enough money to buy the food I need.

To stay healthy, you need to eat nutritious, wholesome foods. It is possible to buy such foods and not spend a lot of money by following some basic rules.

- Decide what foods you need **before** shopping, make a list.
- Check the newspaper for "specials."
- Compare ads and clip coupons.
- Compare prices between brands.
- Loose-pack frozen fruits and vegetables allow you to remove a serving and return the unused portion to the freezer.
- Buy whole chickens or roasts, which are usually cheaper, and cut them up yourself.
- Take advantage of "economy" packs of meat, poultry and fish. Wrap these in individual-size servings and freeze.
- Shop with a friend. Share a head of lettuce or bunch of broccoli instead of letting it spoil in your refrigerator.



7. I eat alone most of the time.

It is important that eating alone does not become an excuse for eating poorly.

- Take turns eating with other single friends.
- Prepare full recipes for casseroles or other dishes; freeze individual portions for later use.
- Eat a meal or two at a community center for good

food and companionship.

- Eat near a window or with television, radio or reading material to enhance your meal.
- Attend church or benefit dinners.
- Ask your pastor for names of shut-ins who may enjoy company at meals.
- Offer to help at a hospital or nursing home. Volunteers often receive meals for the services.
- Treat yourself well. Would you be eating the same foods if you were cooking for a family?

8. I take 3 or more different prescribed or over-the-counter drugs a day.

Medications can cause dangerous drug and food interactions.

- Always tell the doctor about past problems with drugs.
- When starting to take a new drug, ask the doctor or pharmacist about the side effects that may occur.
- Take the exact amount of any drugs prescribed by the doctor and follow the dosage schedule as closely as possible.
- Ask your pharmacist or dietitian if you should avoid certain foods and beverages when taking any medications.
- Never take drugs prescribed for someone else.
- If you use more than one pharmacy, take all of your medications to one pharmacist to evaluate possible interactions.
- Discard outdated medicines.



9. Without wanting to, I have lost or gained 10 pounds in the last 6 months.

Being overweight or underweight increase your chance of health complications. A sudden weight change may signal a health problem. You should seek immediate medical attention.

10. I am not always physically able to shop, cook and/or feed myself.

Impaired functional abilities may increase your risk for malnutrition.

- If shopping is a problem, order foods from the local market by phone and have them delivered.
- Call your local senior center or State Agency on Aging for information about home-delivered meal services.



Aging and Disability Services Division

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