

PART ONE:



ORGANIZATIONAL STANDARDS

The CSBG organizational standards provide a standard foundation of organizational capacity for all CSBG Eligible Entities (CEEs) across the United States. The Federal Office of Community Services' Information Memorandum (IM) 138 provides direction to States and CEEs on establishing organizational standards and includes the final wording of the standards developed by the OCS-funded organizational standards Center of Excellence (COE).

The COE-developed organizational standards are comprehensive and were developed for the CSBG Network by the CSBG Working Group. The organizational standards work together to characterize an effective and healthy organization while reflecting the vision and values of Community Action and the requirements of the CSBG Act.

MAXIMUM FEASIBLE PARTICIPATION

Category 1: Consumer Input + Involvement

Standard 1.1

The organization demonstrates low-income individuals' participation in its activities.

Guidance:

- The voices of low-income individuals currently living in the geographic service area must be heard throughout the development, planning, implementation, and evaluation process.⁶⁴
- Providing services to low-income people does not qualify as including low-income individuals in agency activities.²³
- Provide for regular participation of the poor and the affected area residents in the implementation of the programs.⁵⁴

Timeframe: During monitoring period

Agency Self-Assessment:

Summary: How the agency is involving low-income individuals within the agency in program planning, implementation, and evaluation.

Documentation Examples:

- Sign-in sheets from activities
- Meeting minutes (e.g., governing board and advisory councils)
- Volunteer hours list
- Surveys/focus groups
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 1.2

The organization analyzes information collected directly from low-income individuals as part of the community assessment.

Guidance:

- This information can be, but does not need to be, agency customers only.²³
- Community assessment must analyze this data to identify what low-income community members perceive to be the highest needs in their area.

Timeframe: Every three (3) years from the previously completed CNA date

Agency Self-Assessment:

Summary: How low-income individuals were consulted directly, and the data was collected and analyzed as part of the community needs assessment process.

Documentation Examples:

- Community needs assessment
- Any related appendices or methodology section that details the analysis of customer data
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 1.3

The organization has a systematic approach for collecting, analyzing, and reporting customer satisfaction data to the governing board.

Guidance:

- Comment boxes, focus groups, interviews, community forums, customer surveys (paper/electronic), post cards, etc. are common examples of methods used to collect data directly from low-income individuals.
- The board must be provided with the customer satisfaction information they need to effectively plan and evaluate.⁶⁴
- Reporting to the governing board may be via written or verbal forms³⁷ but must be documented in the meeting minutes or data provided in the board packet(s).⁶¹

Timeframe: During monitoring period, at least once

Agency Self-Assessment:

Summary: Customer satisfaction data collection methods utilized, evidence the data was reviewed and analyzed, and how/when provided to the governing board.

Documentation Examples:

- Documented discussion and/or subsequent reports, examples:
 - Governing board meeting minutes
 - Annual reports
 - Charts/graphs/spreadsheets/summaries reflecting analysis
- Description(verbal) of how data is collected
- Customer satisfaction policy/procedures
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Category 2: Community Engagement

Standard 2.1

The organization has documented or demonstrated partnerships across the community, for specifically identified purposes; partnerships include other anti-poverty organizations in the area.

Guidance:

- Documented or demonstrated partnerships may be relationships that are formalized through an MOU/MOA, contract, coalition membership, etc.³⁷
- Partnerships must include providers of services to low-income people or anti-poverty organizations.^{63,66}
 - Partnerships may include business, labor, and other private groups and organizations as well as public officials and agencies.⁵⁴
- It is not necessary to document “one off” meetings, ongoing but minor exchanges, or exploratory meetings that do not lead to significant activities.²⁴

Timeframe: During monitoring period

Agency Self-Assessment:

Summary: Agency documents or demonstrates current partnerships and their purposes across the community.

Documentation Examples:

- Agency-wide partnership list
- MOU/MOAs
- Contracts/agreements
- Verbal descriptions of partnership purposes
- Memberships
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 2.2

The organization utilizes information gathered from key sectors of the community in assessing needs and resources during the community assessment process or other times. These sectors would include at minimum: community-based organizations, faith-based organizations, private sector, public sector, and educational institutions.

Guidance:

- Demonstrate activity in each of the five key sectors (noted above) over the agency's entire service area, e.g., partnerships, representing the agency on various community groups, etc.
- Demonstrate how that information is used to assess needs and resources.²⁴
- Determine the amount and effectiveness of the assistance being provided to deal with the problems and causes of poverty in the community.⁵⁴
- This may but does not have to be done as part of the Community Needs Assessment

Timeframe: During monitoring period

Agency Self-Assessment:

Summary: Be able to describe how the agency utilizes information from different sectors to identify and address community needs.

Documentation Examples:

- Agency-wide partnership or stakeholders list (with sector representation)
- Community Needs Assessment (data collection methods and analysis sections)
- Agency reports on needs and resources produced by the agency
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 2.3

The organization communicates its activities and its results to the community.

Guidance:

- Demonstrates the agency's ability to deliver performance results/outcomes and/or to "tell the organization's success stories" to the community.
- To be successful at this standard, an agency must not only promote the organization's programs, but also inform the community about the results of its programs.

Timeframe: During monitoring period

Agency Self-Assessment:

Summary: Various methods used by the agency to communicate its message and share its results with the community.

Documentation Examples:

- Shared agency-wide results: annual report, community action plan, assessments, etc.
- Annual event/ gala
- Social media: Facebook, Twitter, blogs, LinkedIn, etc.
- Print media: Brochures, Newsletters, Newspaper articles, etc.
- Broadcast media: Television, Radio, etc.
- Press releases
- Website
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 2.4

The organization documents the number of volunteers and hours mobilized in support of its activities.

Guidance:

- There is no requirement to utilize volunteers, only to document their number and hours, if utilized.²⁴
- This can be an agency-wide list, or if kept by program, a cumulative representation of the total number of volunteers/hours documented.⁶¹
 - At a minimum, this must include documentation of governing board and committee activities.

Timeframe: Annually, during the monitoring period

Agency Self-Assessment:

Summary: The total number of volunteers and hours mobilized in support of the agency's activities for each program that utilizes volunteers.

Documentation Examples:

- Agency-wide or program-by-program list of volunteers and service hours
- Governing board attendance matrix
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Category 3: Community Assessment

42 USC 9908(b)(11), of the CSBG Act states "...that includes a community needs assessment for the community served, which may be coordinated with community needs assessments conducted for other programs...". Therefore, IHEDA recognizes that other agency program needs assessments, such as for HUD or Head Start, may be used to meet these standards if all the details outlined in Standards 3.2-3.4 (below) are completed and appropriately demonstrated.

Standard 3.1

The organization conducted a community assessment and issued a report to the community within the past three (3) years.

Guidance:

- This is also called a Community Needs Assessment (CNA).
- Assessment must include a clear description of the geographic location (CSBG counties) that the agency is funded to serve.⁷⁶
 - Assessment must include at least all the CSBG counties served but may include other counties served by the agency.
 - Assessment must not overlook pockets of poverty in areas that receive fewer services.²⁵
- The data utilized must be as current as possible.²⁵
- CNA results must be shared with the community, which may include partner organizations, other sectors, and the community at large.²⁵
 - Presenting only to staff or at a governing board meeting, while open to the public, does not meet the requirements of the standard.⁶¹

Timeframe: CNA: Every three (3) years from the previously completed CNA date (with a two (2)-month buffer); public release thereafter

Agency Self-Assessment:

Summary: The current CNA was completed in the last three years and findings have been communicated to the public.

Documentation Examples:

- Current CNA
- Documentation illustrating how and when the results were communicated to the public:
 - Agency website
 - Agency social media
 - Community forum
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 3.2

As part of the community assessment, the organization collects and includes current data specific to poverty and its prevalence related to gender, age, and race/ethnicity for their service area(s).

Guidance:

- A CNA provides information about poverty for all three (3) categories of demographic data [gender, age, race/ethnicity].²⁵

Timeframe: Every three (3) years from the previously completed CNA date

Agency Self-Assessment:

Summary: The CNA provides data describing the interaction between poverty level and the following four demographic categories: gender, age, race, and ethnicity.

Documentation Examples:

- CNA and any needed appendices
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 3.3

The organization collects and analyzes both qualitative and quantitative data on its geographic service area(s) in the community assessment.

Guidance:

- The CNA must include both qualitative and quantitative data⁷⁶:
 - Qualitative: Descriptive or narrative data (primary data) collected directly from community members via interviews, focus groups, community workshops, or surveys.
 - Methodology includes gathering information from a variety of points of view (i.e., low-income population, clients, governing board members, community leaders, partner agencies/companies).
 - Findings are represented in the actual words of the respondent.

- Quantitative: Statistical or numerical data that will help understand the scope of the needs in the community.
 - Primary data may include information from the agency’s own programs such as client demographics, or how clients interact with (i.e., are or are not served by) programs addressing key community needs, and/or
 - Secondary data may include and compare National, State and Local sources from a variety of different agencies/departments.
- The CNA must include data analysis that:
 - includes a review of the similarities/differences between findings by topic from the different types of data sources, and
 - provides meaningful conclusions based on the data reported in the CNA.

Timeframe: Every three (3) years from the previously completed CNA date

Agency Self-Assessment:

Summary: The CNA uses well-sourced qualitative and quantitative data that are analyzed to make conclusions about the needs of low-income individuals in the service area.

Documentation Examples:

- CNA and any needed appendices
- Methodology descriptions
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 3.4

The community assessment includes key findings on the causes and conditions of poverty and the needs of the communities assessed.

Guidance:

- Key findings in the CNA must focus on how the causes and conditions of poverty relate to the community’s documented needs.
- For each key finding identified in the CNA, analysis should consider how the issue manifests at the family, agency, or community level.⁷⁶ This consideration must be apparent in the key findings, but it is **not** required that each level be identified for each key finding:
 - Family (how does the need concern individuals and families who have identified things in their own life that are lacking)
 - Agency (did the data identify areas where the agency does not have resources or capacity to respond to an identified need)
 - Community (does the issue impact the community as a whole, not just customers or potential customers of the agency).

Timeframe: Every three (3) years from the previously completed CNA date

Agency Self-Assessment:

Summary: Outline/Specify/List the CNA's key findings about the causes and conditions of poverty, and how they relate to the community's documented needs.

Documentation Examples:

- CNA and any needed appendices
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 3.5

The governing board formally accepts the completed community assessment.

Guidance:

- Within sixty (60) calendar days of completion, the full current assessment must be formally accepted by governing board motion, and the vote must be recorded in meeting minutes.⁶¹

Timeframe: Within (60) calendar days of the most recently completed CNA date

Agency Self-Assessment:

Summary: Governing board has voted to approve the completed CNA within the appropriate timeframe.

Documentation Examples:

- Governing board meeting minutes
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

VISION AND DIRECTION

Category 4: Organizational Leadership

Standard 4.1

The governing board has reviewed the organization's mission statement within the past five (5) years and assured that: 1. The mission addresses poverty, 2. The organization's programs and services are in alignment with the mission.

Guidance:

- Review of whether programs and services are in line with the mission could be completed by either a Board of Directors or staff leadership, as reflected in meeting minutes or other documentation.⁶¹
- The mission statement does not have to use the word poverty but must address the issue of poverty in some way. Phrases that demonstrate this may include: "increase self-sufficiency", "economic security", "ladders of opportunity", "low-income," "economically disadvantaged, etc." ^{26, 61}

Timeframe: Five (5) years prior to your upcoming monitoring session date.

Agency Self-Assessment:

Summary: Documented discussion of the mission statement by the governing board, within the past five years, it addresses poverty, and conclusions by the governing board and/or staff that programs are/are not in alignment.

Documentation Examples:

- Current organization mission statement
- Governing board meeting minutes
- Retreat notes indicating discussion of the mission statement and program alignments
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 4.2

The organization's Community Action Plan (CAP) is outcome-based, anti-poverty focused, and ties directly to the community assessment.

Guidance:

- Compliance is based upon acceptance of the annual CAP by IHCD.

Timeframe: Annually, during the monitoring period

Agency Self-Assessment:

Summary: Annually submit a complete CAP to IHCD and have it accepted by IHCD staff.

Documentation Examples:

- Annual CAP submission (in IHCD's files)

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 4.3

The organization's community action plan and strategic plan document the continuous use of the full Results Orientated Management and Accountability (ROMA) cycle or comparable system (assessment, planning, implementation, achievement of results, and evaluation). In addition, the organization documents having used the services of a ROMA-certified trainer (or equivalent) to assist in implementation.

Guidance:

- Agency must show thoughtful assessment of needs, planning to meet those needs, implementation of programs and services designed to meet those needs, collection of data, and an analysis of this data.²⁷
- A ROMA trainer must be involved in agency activities, but it is up to the organization to determine the manner of his/her involvement: such as strategic planning meetings, consultation on implementation, etc.³⁷
- This Standard is not about training on ROMA (or requiring each CAA to have a ROMA trainer on staff) but implementing ROMA principles on a continuous basis.²⁶

Timeframe: During the monitoring period

Agency Self-Assessment:

Summary: Demonstrate that the CAA is incorporating/using the ROMA cycle. Provide evidence of assistance by a Nationally Certified ROMA Trainer or Implementer, or comparable.

Documentation Examples:

- Strategic planning notes
- ROMA Implementation Checklist
- A brief narrative speaking to the agency's use of each step of the ROMA cycle
- Meeting minutes, written communication, invoice, contract, etc., of a ROMA professional's involvement
- Execution of other CAR Standards assist in documenting the agencies use of the ROMA cycle.
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 4.4

The governing board receives an annual update on the success of specific strategies included in the Community Action Plan (CAP).

Guidance:

- Updates can be written or verbal, as long as they are noted in the minutes/board packet. This update may be a written report or staff presentation followed by board discussion.²⁶

Timeframe: Annually, during the monitoring period

Agency Self-Assessment:

Summary: The governing board received an update on and discussed the CAP.

Documentation Examples:

- Governing board minutes, or packet, or similar
- Annual report results
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 4.5

The organization has a written succession plan in place for its CEO/Executive Director, approved by the governing board, which contains procedures for covering an emergency/unplanned, short-term absence of 3 months or less, as well as outlines the process for filling a permanent vacancy.

Guidance:

- Succession plan must contain these basic elements: 1) covers the CEO/ED position; 2) approved by the governing board; 3) covers an emergency/unplanned absence; 4) covers a short-term absence of 3 months or less; and 5.) includes a process for filling a permanent vacancy.
- For long-term vacancies, succession plan must include 1) who will sit on a search committee or transition team, 2) an overview of the selection process, and 3) a brief list of key skills/abilities required by a CEO/ED for the agency.⁶¹

- The plan must be reviewed, at least by Leadership Staff, during the monitoring period, and approved by the governing board if changes are made.⁶¹
- A public agency must adhere to its local government policies and procedures around interim appointments and processes for filling a vacancy.⁶⁹

Timeframe: At least once during the monitoring period

Agency Self-Assessment:

Summary: The current succession plan is in place for the Executive Director position, and demonstrates all required elements, including documentation of agency staff review.

Documentation Examples:

- Governing board minutes, or packet, or similar
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 4.6

An organization-wide comprehensive risk assessment has been completed within the past two (2) years and reported to the governing board.

Guidance:

- It is acceptable to assemble several assessments or tools as long as once collected they meet the time frame of every two years and the definitions of “agency-wide” (not just particular programs) and “comprehensive” (covering all pertinent aspects of operations).²⁶
- While there is no mandatory format; the assessment should include such potential risk factors as: governance, human resources, technology, communication, insurance coverage, transportation, facilities, staffing, service delivery, property, finances & financial management, competition, resources, contracts & procurement, etc.
 - Appropriately using the Nonprofit Risk Management Center (NRMC) link on the NCAP website (Tools & Resources/Online Tools) for Community Action Organizational Assessment and Risk Resources
 - , meets all necessary requirements of this standard.
- Public agencies may need to draw from multiple government documents to make up a typical risk assessment used by the non-public agencies.

Timeframe: Two (2) years prior to your upcoming monitoring session date

Agency Self-Assessment:

Summary: Comprehensive (agency-wide) risk assessment with completion date and governing board meeting minutes reflecting review or discussion.

Documentation Examples:

- Risk assessment(s) and:
- Governing board meeting minutes
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Category 5: Board Governance

Standard 5.1

The organization's governing board is structured in compliance with the CSBG Act:

1. At least one third democratically selected representative of the low-income community
2. One-third local elected (public) officials (or their representatives)
3. The remaining membership from major groups and interests in the community (private)

Guidance:

- Agency's governing board approved bylaws that are structured in compliance with the CSBG Act (see above) and Indiana State law.
 - The bylaws may only have a range of community action governing board members between 15 and 51 members.⁵²
 - Indiana Code requires both public and private Community Action Agencies to adhere to the full tripartite board structure as described in this standard.
- When governing board composition is not divisible by three:
 - No group number can ever be higher than the low-income representatives.
 - The public representative ratio must be rounded up to be a whole number.⁶¹
 - Low-income community representatives will make up greater than a third of the governing board.
- Agency follows its governing board approved Bylaw policies for tripartite structure and board membership levels.
 - Each new member must be voted onto the governing board¹², following the appropriate selection process^{64,88}, and meets qualifications for service.
 - When governing board positions are filled, they are filled with an individual/representative from the correct sector of representation.

- A public official or representative only serve on the governing board as such while they (or their principals) are in office.⁶⁴
 - A public representative or public body cannot appoint more than one individual to represent them on the governing board.⁶¹
 - After their service as a public official or representative, an individual may remain on the governing board if they are reclassified to another sector of representation.⁶¹

Timeframe: Annually, during monitoring period

Agency Self-Assessment:

Summary: Tripartite compliance is documented in the bylaws and maintained.

Documentation Examples:

- The Indiana (IHCDA) CAA Board Governance Management Tool (or IHCDA-approved alternate)
- Current governing board roster
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 5.2

The organization’s governing board has written procedures that document its democratic selection process for low-income board members adequate to assure that they are representative of the low-income community.

Guidance:

- The written democratic selection process/procedures (e.g., direct election, public forum, representative of service or community organization, etc.) aligns with CSBG requirements and has been approved by the governing board.
 - Low-income members must either 1) personally income-qualify for CSBG services or 2) be democratically selected (not the same as being elected) to serve on behalf of low-income individuals.
 - Low-income people in the community, served by the CAA, must have input prior to the candidate rising to the governing board.
 - A low-income representative may NOT be selected by a CAA staff member or by the Executive Director of another organization in the community.¹²
 - A low-income representative may NOT be chosen by or voted directly onto the CAA tripartite board solely by the governing board or nominating committee vote.⁴

- If during their term as a board member, an individual who personally qualified for CSBG services increases their earnings such that they no longer qualify for CSBG services, they may remain on the board as a low-income representative.
- The agency follows their approved democratic selection process when seating low-income individuals/representatives on their governing board.

Timeframe: During the monitoring period.

Agency Self-Assessment:

Summary: Agency’s democratic selection process is adequate, and board approved, and all low-income individual/representatives were seated using the democratic selection process.

Documentation Examples:

- Agency's written democratic selection process/policy
- Governing board approval for the policy (i.e., governing board meeting minutes)
- Documentation showing democratic selection process was followed for all low-income members seated:
 - Ballots/results
 - Advertisement of position and election details
 - Letters from partner organizations
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 5.3

The organization’s bylaws have been reviewed by an attorney within the past five (5) years.

Guidance:

- The review must be independently submitted to the agency for consideration; if reviewer is a governing board member, voting on the bylaws as part of their regular board role is not sufficient to meet this standard.
 - The reviewing attorney must be practicing⁶¹ but is not required to have a specific area of expertise.²⁸
 - The reviewing attorney is not required to be paid for their work (may be a volunteer).²⁸
- The attorney must review the full agency bylaws and not just specific changes.⁶¹
- Not applicable to public agencies.⁶⁹

Timeframe: Five (5) years prior to your upcoming monitoring session date

Agency Self-Assessment:

Summary: Evidence of a practicing attorney’s review of the organization’s full bylaws.

Documentation Examples:

- Invoice, letter/email, meeting, or
- Committee minutes discussing full review (if attorney is a governing board member)
- Proof individual is a practicing attorney, if requested
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 5.4

The organization documents that each governing board member has received a copy of the bylaws within the past two (2) years.

Guidance:

- All active governing board members must have received a copy of the bylaws either in hard copy or electronically.²⁸
 - Making a current version of the bylaws continually accessible to governing board members on the agency website, intranet, or other governing board secured area is sufficient to meet this standard.⁶¹

Timeframe: Two (2) years prior to your upcoming monitoring session date

Agency Self-Assessment:

Summary: Governing board members had access to, or were provided, the bylaws.

Documentation Examples:

- Governing board minutes documenting their distribution
- Individual or group signed and dated acknowledgement of receipt
- Email to all governing board members reflecting attached bylaws
- Posting the bylaws on a governing board-accessible website
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 5.5

The organization's governing board meets in accordance with the frequency and quorum requirements and fills board vacancies as set out in the bylaws.

Guidance:

- Bylaws must include policies for meeting frequency, quorum, and filling vacancies.
 - The full governing board must meet at least 6 times per year; the Annual Meeting may be included as one of the six meetings.⁶¹
 - The bylaws may not authorize a quorum of fewer than One-third (1/3) of the number of directors in office.⁵⁷
- Agency follows its governing board approved policy.
 - The governing board must fill vacant board positions within the timeframe in the bylaws (no longer than ninety (90) calendar days).³⁶
 - Organizations must abide by any additional governing board representation rules in their bylaws, such as representation from geographic areas.⁵²

Timeframe: Annually, during the monitoring period

Agency Self-Assessment:

Summary: Bylaws contain appropriate policies for meeting frequency, quorum, and filling vacancies and the agency follows their policy.

Documentation Examples:

- Bylaws
- The governing board attendance matrix
- Governing board meeting minutes
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 5.6

Each governing board member has signed a conflict-of-interest form within the past two (2) years.

Guidance:

- Governing board members are cognizant of their conflicts and honor the board's conflict of interest policy when actual (real) or potential conflicts arise.
- There is no particular template to follow. However, the form must include⁶¹:
 - What actions board members are expected to take should a conflict arise.
 - A full written disclosure of actual (real) or potential conflicts (e.g., places to list conflicts)

- A signature and date line
- Every “active” member must have a current conflict of interest form on file with the agency.⁶¹
 - Each form must be fully executed (signed and dated) by the governing board member, within the past 2 years, to be valid.⁶¹
- Public agencies must have each advisory board member fulfil this requirement.⁶¹

Timeframe: Two (2) years prior to your upcoming monitoring session date

Agency Self-Assessment:

Summary: All active governing board members have signed/dated a COI statement that includes a list of any potential conflicts of interest.

Documentation Examples:

- Most recently signed conflict of interest statement from each active board member
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 5.7

The organization has a process to provide a structured orientation for governing board members within six (6) months of being seated.

Guidance:

- All governing board members, regardless of experience or past board participation, must be provided with a structured orientation within six (6) months of being seated (becoming “active”).⁶¹
 - “There is no specific curricula requirement, training methodology”²⁸, or delivery method for board orientation, except that it must be structured and documented.
 - An organization may choose to provide an abridged orientation to returning governing board members.
 - An additional orientation is not required for a board member continuing for an additional term(s) with no interruption in service.
- The governing board member orientation must be documented, e.g., sign-in sheets, individually signed acknowledgement, email acknowledgement, etc.⁶¹

Timeframe: During the monitoring period

Agency Self-Assessment:

Summary: All governing board members have received a structured orientation within six (6) months (from the date voted onto the board) of being seated.

Documentation Examples:

- Document outlining the full structured orientation process
- Curriculum for the full structured orientation process
- Governing board matrix
- Signed orientation checklist
- Other documented proof of orientation for each seated governing board member
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 5.8

Governing board members have been provided with training on their duties and responsibilities within the past two (2) years.

Guidance:

- The majority of governing board members must participate in at least one training about their responsibilities every two years.⁶¹
- The organization needs to have documentation that the training occurred (including content) as well as documentation that each governing board member has been provided with training opportunities.²⁸
- There is no specific curricula requirement, or training methodology required.²⁸ The following types of governing board training topics are sufficient to fulfill this standard:
 - CSBG Act requirements relevant to the agency
 - Fiduciary Responsibilities
 - Duty of Care (Oversight)
 - Duty of Loyalty
 - Duty of Obedience
 - General Board Roles and Responsibilities
 - Assessments, Planning, Risk Mitigation, and Fundraising
 - Governing Board Recruitment
 - Financial Oversight
 - Oversight and Roles/Responsibilities of the Executive Director
- Agency program reports and ROMA trainings are not considered trainings about governing board responsibilities.⁶¹

Timeframe: Two (2) years prior to your upcoming monitoring session date

Agency Self-Assessment:

Summary: Governing board members have received/participated in training about board member duties and responsibilities (as many as possible, but at least a majority participated).

Documentation Examples:

- Training agendas/content
- Training materials, presenter(s) and documentation of governing board members attendance (i.e., sign in sheets)
- Governing board meeting minutes
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 5.9

The organization’s governing board receives programmatic reports at each regular board meeting.

Guidance:

- It is **not** required that there be a report on **each** program at every board meeting; however, it does call for some level of programmatic reporting at every board meeting.²⁸
- There is no specific delivery format required for these programmatic reports (e.g., verbal or in writing)

Timeframe: Annually, during the monitoring period

Agency Self-Assessment:

Summary: Program reports, of some level, are presented at each board meeting.

Documentation Examples:

- Governing board pre-meeting packet(s)
- Governing board meeting minutes
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Category 6: Strategic Planning

Standard 6.1

The organization has an agency-wide strategic plan in place that has been approved by the governing board within the past five (5) years.

Guidance:

- The strategic plan must be agency-wide, not for one or more individual programs²⁹ nor a list of just individual program³⁷, or agency goals.⁶¹
- If the current plan will expire within three (3) months of the monitoring visit, the agency must be able to show evidence that a new plan is underway.⁶¹
- The full governing board must formally approve the completed strategic plan and not a committee of the board.²⁹
 - The governing board must approve the full plan, not just changes/modifications.⁶¹

Timeframe: Five (5) years prior to your upcoming monitoring session date

Agency Self-Assessment:

Summary: Strategic plan, the plan's effective dates, and approval date by the governing board.

Documentation Examples:

- Strategic plan
- Governing board meeting minutes
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 6.2

The approved strategic plan addresses “reduction of poverty”, “revitalization of low-income communities”, and/or “empowerment of people with low incomes to become more self-sufficient”.

Guidance:

- This standard does not explicitly require an agency to formally list all three of the stated objectives in the strategic plan. As long as one (or more) of the objectives is shown.
- The plan demonstrates at least one of the following methods:
 - A direct connection from the strategic plan goals to CSBG ACT objectives identified above.⁶¹
 - A short section that clearly links one or more of the three objectives (identified in the standard) and explains how they are addressed ²⁹ or,
 - A Compliance Summary Page explaining how the plan meets the requirements.

Timeframe: Five (5) years prior to your upcoming monitoring session date

Agency Self-Assessment:

Summary: Strategic plan with goals that explicitly connect to one or more of the three objectives.

Documentation Examples:

- Strategic plan with goals
- Strategic plan summary page or section, if applicable
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 6.3

The approved strategic plan contains “family”, “agency” and/or “community” goals.

Guidance:

- For each goal, objective or action step in the strategic plan, the agency must clearly indicate which of the three categories (family, agency, or community) it primarily links to.²⁹
 - This may be done in the strategic plan itself or in a crosswalk document.
- There is no requirement to address all three types of goals.²⁹
- The strategic plan must include at least one family or community goal.
 - The family or community goal must refer to an external anticipated change in outcome for individuals, families, or communities the agency serves.

Timeframe: Five (5) years prior to your upcoming monitoring session date

Agency Self-Assessment:

Summary: Each objective is clearly linked to family, agency, or community and the plan demonstrates at least one external goal.

Documentation Examples:

- Strategic plan
- Crosswalk of strategic plan to goal type
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 6.4

Customer satisfaction data and customer input, collected as part of the community needs assessment, is included in the strategic planning process.

Guidance:

- During the strategic planning process, organization must review and discuss customer satisfaction data and data from the community needs assessment.
 - Customer satisfaction data is information collected through surveys or comment cards, etc., about the effectiveness of their interactions with your agency.

Customer input is collected through the Community Needs Assessment, Focus Groups, etc., and provides information about customer's opinions about gaps in services or issue areas the agency is trying to address.

Timeframe: Five (5) years prior to your upcoming monitoring session date

Agency Self-Assessment:

Summary: Customer satisfaction and customer input data were included in the strategic planning process.

Documentation Examples:

- Strategic plan appendices/reference list/methodology
- Notes from strategic planning session
- Strategic planning process description
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 6.5

The governing board has received update(s) on progress towards meeting the goals in the strategic plan within the past twelve (12) months.

Guidance:

- Governing board must receive either a single report that reviews all strategic goals or periodic reports on specific goals that add up to a full review of all goals each year.²⁹
- All updates contributing to the "full report" on strategic plan progress must be provided to the full governing board, not a committee or subcommittee.²⁹

Timeframe: Annually, during the monitoring period

Agency Self-Assessment:

Summary: The governing board received a "full report" on strategic plan progress each year.

Documentation Examples:

- Strategic plan scorecard, presentation, or similar mechanism; and
- Governing board meeting minutes
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

OPERATIONS AND ACCOUNTABILITY

Category 7: Human Resources Management (HRM)

Standard 7.1

The organization has written personnel policies that have been reviewed by an attorney and approved by the governing board within the past five (5) years.

Guidance:

- Written personnel policies may be in the form of an employee handbook or manual.
- The full review must occur by an attorney **and** the governing board must approve the reviewed policies.
 - There is no requirement that the reviewing attorney be paid.³⁰
 - The reviewing attorney “must be a currently practicing attorney.”³⁰
 - This review may **not** be completed by an agency employee who is an attorney (e.g., the agency’s staff attorney), but may be completed by a governing board member who is an attorney.⁶¹
- Updating individual policies and/or procedures do not qualify as compliance with this standard.³⁰
- Not applicable to public agencies,⁶⁹ unless the public agency has developed their own employee handbook.⁶¹

Timeframe: Five (5) years prior to your upcoming monitoring session date

Agency Self-Assessment:

Summary: The date(s) when the full personnel policies were reviewed by an attorney and approved by the governing board.

Documentation Examples:

- Invoice, statement for services, or email correspondence and;
- Governing board meeting minutes
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 7.2

The organization makes available the employee handbook (or personnel policies in cases without a handbook) to all staff and notifies staff of any changes.

Guidance:

- All staff must receive a written or electronic copy³⁰ of the full policy.
 - Posting the handbook to an employee-accessible website or HR portal and informing employees of its location, and major changes will fulfill this standard.
- All staff must receive notification of any specific changes when they occur.⁶¹
- Public agencies follow local government policies in making handbook available and notifying of changes,⁶⁹ unless the public agency has developed their own employee handbook.⁶¹

Timeframe: During the staff member's employment for full handbook, and during the monitoring period for changes.

Agency Self-Assessment:

Summary: Employees receives a handbook and/or changes were made available to all staff.

Documentation Examples:

- New employee orientation checklist
- Signed acknowledgement of receipt
- Posting on employee-accessible website or portal
- Email to staff
- Email (or similar) notification of a policy change
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 7.3

The organization has written job descriptions for all positions, which have been updated within the past five (5) years.

Guidance:

- Job descriptions are required for each type of position, not each staff person.³⁷

- Public agencies have written job descriptions for all positions⁶⁹, or updates are within the past five years if it is the responsibility of the public agency to develop their own job descriptions.⁶¹

Timeframe: Five (5) years prior to your upcoming monitoring session date

Agency Self-Assessment:

Summary: All agency job descriptions have been reviewed/updated within the last five (5) years.

Documentation Examples:

- A sample of job descriptions containing dates of last update (as requested by monitor)
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 7.4

The governing board conducts a performance appraisal of the CEO/Executive Director within each calendar year.

Guidance:

- May be accomplished through a governing board committee or by the full board.⁷⁸
- The written performance evaluations must be fully executed (signed and dated) by the Executive Director and the governing board representative. These actions provide notice that the employee was informed about their performance (not that they agree with its content) and when it occurred.⁶⁰
- There is no specific performance appraisal tool required.³⁷
- Public agencies follow procedures for performance of the department head.⁶⁹ The Executive Director is considered the Department Head.⁶¹

Timeframe: Annually, during the monitoring period

Agency Self-Assessment:

Summary: Written performance evaluation of the CEO/Executive Director has been completed, fully executed (signed, and dated) annually.

Documentation Examples:

- Executive committee and/or governing board meeting minutes reflecting completed performance evaluation.
- Onsite review of signed and dated performance evaluation (may be redacted)
- Other documentation may be used in lieu of what is listed in certain circumstances.

* Do Not Submit completed Executive Director evaluations.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 7.5

The governing board reviews and approves the CEO/Executive Director compensation within every calendar year.

Guidance:

- This includes salary, fringe, health and dental, expense/travel account, vehicle, etc.,³⁷ as applicable.
- For public agencies, the compensation of the department head is made available according to local government procedure.⁶⁹ The Executive Director is considered the Department Head.⁶¹

Timeframe: Annually, during the monitoring period

Agency Self-Assessment:

Summary: Governing board has approved executive compensation within the calendar year.

Documentation Examples:

- Governing board meeting minutes or resolutions
- Official board communication to the executive regarding compensation approval
- Executive employment contract
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 7.6

The organization has a policy in place for regular written evaluation of employees by their supervisors.

Guidance:

- This policy may be embedded within an agency-wide policy or stand-alone.
 - If this policy is not embedded in a governing board-approved document (i.e., Staff Handbook, Personnel Policy), then the stand-alone policy must be governing board-approved.⁶¹

- The policy must include at least:
 - How often, when, and by whom performance will be evaluated.³⁰
 - Appropriate plans for the retention and security of evaluation documents.
 - Performance documentation is kept in each employee's HR file and secured in the HR department or a similar restricted and secure area.³⁰
- The agency follows its written employee performance evaluation policy.
 - Evaluations must be fully executed (signed and dated) by the employee.⁶⁰
- There is no specific performance appraisal tool required.
- Public agencies must follow local government policies for regular written evaluation of employees,⁶⁹ unless the public agency has developed their own employee handbook.⁶¹

Agency Self-Assessment:

Summary: Performance evaluation policy exists; contains the appropriate criteria (e.g., frequency of evaluations, security of documents, etc.); and that the policy is being followed.

Documentation Examples:

- Employee evaluation policy(ies)
- Governing board meeting minutes showing approval of the policy (if needed)
- Onsite review of performance evaluation documents
- Other documentation may be used in lieu of what is listed in certain circumstances.

* Do Not Submit completed employee performance evaluations.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 7.7
 The organization has a whistleblower policy that has been approved by the governing board.

Guidance:

- The policy includes anti-retaliation language (i.e., harassment, punitive actions, termination) against those making reports, to conform with the Dodd-Frank Act.
- This policy may be embedded within an agency-wide policy or stand-alone.
 - If this policy is not embedded in a governing board-approved document, then the stand-alone policy must be governing board-approved.⁶¹
- The agency follows its approved whistleblower policy.
- Public CAAs are to provide a copy of any existing local government whistleblower policy to the advisory board members at the time of board orientation.⁶⁹

Timeframe: During the monitoring period.

Agency Self-Assessment:

Summary: Agency has a governing board approved whistle blower policy that includes the required information (above).

Documentation Examples:

- Whistle blower policy
- Governing board meeting minutes showing approval of the policy (if needed)
- Documentation of steps followed (if policy invoked within monitoring period)
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 7.8

All staff participates in a new employee orientation within sixty (60) calendar days of hire.

Guidance:

- There is no curricula requirement for the orientation [onboarding],³⁷ but it must be formalized such that all new employees receive the same level of basic agency information.⁶¹
- This may be met individually or in a group orientation³⁷ but must be documented.⁶¹
 - If a singular orientation document is not utilized, then employee-signatures on key agency policy documents may be used to demonstrate (add up to) that a structured orientation occurred.⁶¹
- The first day is the date of employment (hire), established on the employee I-9
- Public agencies follow local government policies for new employee orientation,⁶⁹ unless the public agency has their own hiring process.⁶¹

Timeframe: During the monitoring period.

Agency Self-Assessment:

Summary: Your agency's orientation plan and evidence that an employee orientation occurred within sixty (60) days of the new hire's date.

Documentation Examples:

- Orientation schedule, checklist, presentation/handouts, or similar
- Signed acknowledgement of orientation completion
- Notation in HR system showing completion of orientation
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 7.9

The organization conducts or makes available staff development/training (including ROMA) on an ongoing basis.

Guidance:

- There are no specific requirements for training topics or training content, with the exception of ROMA.³⁰
 - Specific training on ROMA must be made available.
- There is no specific requirement for a delivery method.⁶¹

Timeframe: During the monitoring period.

Agency Self-Assessment:

Summary: Trainings were conducted or made available, including ROMA.

Documentation Examples:

- Emails to staff showing that they were informed of upcoming opportunities.
- Documentation of trainings: agendas, presentations, evaluations, attendee lists
- Documentation of attendance at offsite training/events/conferences.
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Category 8: Financial Operations and Oversight

Standard 8.1

The organization's annual audit (or audited financial statements) is completed by a Certified Public Accountant, on time, in accordance with Title 2 of the Code of Federal Regulations, Uniform Administrative Requirements, Cost Principles and Audit Requirements and/or State audit threshold requirements.

Guidance:

- CAAs that expend less than \$750,000 in Federal awards during the federal fiscal year must make records available for review or audit by appropriate officials of the Federal agency, pass-through entity, and Government Accountability Office.¹²¹

- CAAs that expend \$750,000 or more in Federal awards during the federal fiscal year are required to have a Single Audit.¹²¹
 - Audits must be completed by a licensed CPA that is independent of the governing board or staff association.⁶⁴
 - Single audit reports must be filed with the federal audit clearinghouse within nine months (6 months with and automatic three-month extension) of the entity's fiscal yearend, unless an additional extension is granted.

Timeframe: Annually, during the monitoring period.

Agency Self-Assessment:

Summary: Annual audit was completed on time by a Certified Public Accountant and has been uploaded to the Federal Clearinghouse.

Documentation Examples:

- Submitted audit reports
- Audited financial statements
- IHCDCA review of Federal Audit Clearinghouse
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 8.2

All findings from the prior year's annual audit have been assessed by the organization and addressed where the governing board has deemed it appropriate.

Guidance:

- The audit corrective action plan must be adequate, appropriate, and timely enough to address the prior years' audit finding(s).
 - Addressing a management decision letter alone may not satisfy this requirement.
- Agency followed its corrective action plan and completed any additional governing board required actions.

Timeframe: Annually, prior to the next audit (during the monitoring period).

Agency Self-Assessment:

Summary: Agency has created a corrective action plan in response to its audit (if necessary) and agency has followed through on any corrective action plans or governing board required actions.

Documentation Examples:

- Governing board meeting minutes
- Agency response to their audit

- Submitted corrective action plans (if applicable)
- Documentation of completion of action plan tasks (if applicable)
- Management Decision Letters, etc. (for context if applicable)
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 8.3

The organization's auditor presents the audit to the governing board.

Guidance:

- Auditor must present an overview of audit findings to the full governing board.
 - The full governing board presentation may be less detailed than what was discussed with a committee.³¹
- Public tripartite advisory boards are notified of the availability of the audit.⁶²

Timeframe: Annually, during the monitoring period.

Agency Self-Assessment:

Summary: The auditor presented the audit results to the full governing board.

Documentation Examples:

- Governing board meeting minutes
- Copies of any printed and dated materials provided by the auditor with proof that the full governing board was presented these materials.
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 8.4

The governing board formally receives and accepts the audit.

Guidance:

- Auditor's presentation (8.3) fulfills the requirement that the governing board formally receives the audit.⁶¹

- The governing board must vote to accept the audit.
- Public tripartite advisory boards are notified of any findings related to CSBG funding.⁶⁹

Timeframe: Annually, during the monitoring period.

Agency Self-Assessment:

Summary: Governing board formally voted to accept the audit.

Documentation Examples:

- Governing board meeting minutes
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 8.5

The organization has solicited bids for its audit within the past five (5) years.

Guidance:

- The agency follows its procurement policy when putting the audit out for bid.³¹
 - Procurement process must at least allow for bids from multiple vendors.³¹
 - The organization is not required to switch auditors or partners.³⁷
- The auditor reports to the board; therefore, the governing board must vote to approve auditor selection.³¹
- Not applicable to public agencies.⁶⁹

Timeframe: Five (5) years prior to your upcoming monitoring session date

Agency Self-Assessment:

Summary: Solicitation documents and governing board acceptance for the auditor within the last five years. Agency procurement policy was followed.

Documentation Examples:

- Most recent Request for Proposal (RFP)
- Bids selection documentation (i.e., bid packet, scoring grid, signed contract, etc.)
- Governing board meeting minutes
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 8.6

The IRS Form 990 is completed annually and made available to the governing board for review.

Guidance:

- The filing deadline for the form is the 15th of the fifth month following the end of the agency's fiscal year, or by date of IRS-approved extension.
- The entire governing board must receive an opportunity to review the form prior to submission.³¹
 - The standard does not require governing board acceptance or approval of the IRS Form 990.
- Not applicable to public agencies.⁶⁹

Timeframe: Annually, during the monitoring period.

Agency Self-Assessment:

Summary: The IRS Form 990 was prepared, fully executed, and submitted on time. Also, the full governing board received the document prior to submission.

Documentation Examples:

- Receipt of the fully executed IRS Form 990
- Notification of IRS-approved extension (if applicable)
- Governing board meeting minutes, email to the board, posting to board portal, etc.
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 8.7

The governing board receives financial reports at each regular meeting that include the following:

1. Organization-wide report on revenue and expenditures that compares budget to actual, categorized by program; and
2. Balance sheet/statement of financial position

Guidance:

- Financial reports must be transparent, standardized, and consistent, such that a governing board member without financial expertise can reasonably be expected to understand the agency's financial position and make financial decisions for the agency.
- Reports are not required to be provided every month, just at each regular meeting.³¹

- If the governing board misses a regular meeting, the following month (meeting) could simply include two monthly sets of reports to meet the Standard.³¹
- Public tripartite advisory boards receive financial reports for those program(s) the body advises.⁶⁹

Timeframe: During the monitoring period.

Agency Self-Assessment:

Summary: Financial reports contain, at least, revenue and expenditures that compares budget to actual, and balance sheet/statement of financial position. Governing board received a financial report at each regular meeting.

Documentation Examples:

- Governing board meeting packets
- Governing board meeting minutes
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 8.8

All required filings and payments related to payroll withholdings are completed on time.

Guidance:

- Agencies must correctly complete and submit fully executed payroll tax documentation (Form 941) on time each quarter.
- Agencies' payments related to withholdings must be completed on time.
- Not applicable to public agencies.⁶⁹

Timeframe: Quarterly, during the monitoring period.

Agency Self-Assessment:

Summary: Form 941 was correct and submitted on time, withholdings have been paid.

Documentation Examples:

- Payroll tax documentation/filings (Form 941)
- Payroll tax payment receipts or similar (e.g., electronic transfer or check)
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 8.9

The governing board annually approves an organization-wide budget.

Guidance:

- The annual budget must be approved prior to the start of the organization's fiscal year so it can guide decision-making and planning throughout the year.³⁸
- Public tripartite advisory boards must have input into the CSBG budget process⁶⁹ that is documented in the advisory board meeting minutes.⁶¹

Timeframe: Annually, during the monitoring period.

Agency Self-Assessment:

Summary: Prior to the start of each fiscal year, the governing board approved an agency-wide budget.

Documentation Examples:

- Governing board meeting minutes
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 8.10

The fiscal policies have been reviewed by staff within the past two (2) years, updated as necessary, with changes approved by the governing board.

Guidance:

- There is no requirement for which specific staff need to be involved in the staff-level review.³⁷
- If no changes are recommended, then the governing board is not required to act.
- Not applicable to public agencies⁶⁹ unless agency utilizes separate fiscal policies.⁶¹

Timeframe: Two (2) years prior to your upcoming monitoring session date

Agency Self-Assessment:

Summary: All fiscal policies have been reviewed, and if any changes occurred, they were approved by the governing board.

Documentation Examples:

- Documentation of staff review of all fiscal policies (i.e., leadership staff, fiscal staff, or other committee meeting minutes)
- If changes occurred, governing board meeting minutes of approval.
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 8.11

A written procurement policy is in place and has been reviewed by the governing board within the past five (5) years.

Guidance:

- The procurement policy may be found in agencies’ fiscal policies; it does not need to be a separate document.³⁷
- “Review” is for the full procurement policy, not just individual changes within the procurement policy.⁶¹
- Not applicable to public agencies⁶⁹ unless agency utilizes separate procurement policies.⁶¹
- Agency’s policy must be consistent with Federal, State, and local regulations.¹⁰⁸
- Agency’s policy must include at least:
 - Methods for Informal Procurement [micro-purchase & small purchase]
 - Methods for Formal Procurement [sealed bid, competitive proposal & non-competitive proposal].¹¹⁰
 - Provide affirmative steps to assure that small and minority businesses, women’s business enterprises, and labor surplus area firms are used when possible.¹¹¹
 - Steps for identifying potential conflicts of interest in the selection, award, and administration of contracts.^{108,59}

Timeframe: Five (5) years prior to your upcoming monitoring session date

Agency Self-Assessment:

Summary: Procurement policy and procedures are developed and meet minimum requirements. The full policy was reviewed by the governing board.

Documentation Examples:

- Dated agency procurement policy
- Procedures and governing board meeting minutes
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 8.12

The organization documents how it allocates shared costs through an indirect cost rate or through a written cost allocation plan.

Guidance:

- Cost Allocation Plan must be consistent with Federal, State, and local regulations.
- Cost Allocation Plan must specify indirect versus direct cost and the cost driver methodology used.
- Agency's policy must **not**:
 - Allocate costs based on a budget.⁷⁴
 - Allocate unallowable costs.⁷⁴
- Not applicable to public agencies,⁶⁹ unless the CAA utilizes its own cost allocation plan.⁶¹

Timeframe: During the monitoring period

Agency Self-Assessment:

Summary: Cost allocation plan documents the methodology used to account for indirect costs across agency programs.

Documentation Examples:

- Current Cost Allocation Plan
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 8.13

The organization has a written policy in place for record retention and destruction.

Guidance:

- Policy may be stand-alone or may be part of a larger set of agency policies³⁷, such as the Fiscal or Internal Controls Policy Manual.
- The policy needs to include a definition of what is considered a record.³¹
- Policy must include guidelines for electronic and physical³⁷ and voicemail.⁸⁴
- Public agencies follow local governmental policies for document records retention and destruction.⁶⁹

Timeframe: During the monitoring period.

Agency Self-Assessment:

Summary: Organization has a policy that includes a definition of “record” and contains guidelines about record retention and destruction for electronic and physical documents.

Documentation Examples:

- Current Record Retention and Destruction Policy
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Category 9: Data and Analysis

Standard 9.1

The organization has a system or systems in place to track and report client demographics and services customers receive.

Guidance:

- The agency must have a policy that defines when an individual is considered a client of the agency (and thus included in the overall service count).³²
- Data system must:
 - Be well-defined.
 - Track information for all clients.
 - Include information about client demographics.
 - Include information about services received by the client and when.
- Agency is not required to have a single system of data entry, but when multiple tracking methods are used for different programs, the agency must have a plan or policy for combining information across programs for agency-wide reporting.³²

Timeframe: During the monitoring period

Agency Self-Assessment:

Summary: The agency uses a data collection/tracking system that can at least demonstrate: 1) the number of individuals/families being served, 2) their demographic information, and 3) what services were utilized and in what time frame. The data tracking process is supported by a clear policy that includes a definition of ‘client’.

Documentation Examples:

- Client definition policy
- Demonstration of the system(s) being used (e.g., screen shots, direct observation, hard copies, etc.)
- Agency-wide data reporting SOP, Manual, or Policy

- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 9.2

The organization has a system or systems in place to track family, agency, and/or community outcomes.

Guidance:

- Agency must have a tracking system that can identify a client's change in status or condition [intake to outcome].³²
 - It is not required to demonstrate outcomes at all three levels (family, agency, and community).³²
- Agency is not required to have a single system of data entry, but when multiple tracking methods are used for different programs, the agency must have a plan or policy for combining information across programs for agency-wide reporting.³²

Timeframe: During the monitoring period

Agency Self-Assessment:

Summary: Agency uses a data collection/tracking system(s) that captures family, agency, and/or community outcomes and can combine information across programs.

Documentation Examples:

- Demonstration of the system(s) being used (e.g., screen shots, direct observation, etc.)
- Policies related to data collection
- Electronic and/or hard copy of forms used to collect outcome data (case notes, reports, surveys, etc.)
- Agency-wide data reporting SOP, Manual, or Policy
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 9.3

The organization has presented to the governing board for review or action, at least within the past twelve (12) months, an analysis of the agency's outcomes and any operational or strategic program adjustments and improvements identified as necessary.

Guidance:

- Full governing board must be provided with information concerning client outcomes.⁶⁴
 - This may be a single all-inclusive report or multiple agency reports or other documents reflecting programmatic outcomes.
- Governing board and staff are encouraged, but not required to make program adjustments as a result of the outcomes reports.

Timeframe: Annually, during the monitoring period

Agency Self-Assessment:

Summary: The governing board annually received information about program outcomes and whether improvements were identified/made based on the data.

Documentation Examples:

- Governing board meeting minutes reflecting review of outcome information
- Governing board packet(s) or copies of reports that were provided to the board
- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 9.4

The organization submits its annual CSBG Information Survey [CSBG Annual Report] data report and it reflects client demographics and organization-wide outcomes.

Guidance:

- Each agency has submitted complete, accurate, and appropriate data for the annual report to IHCDA.³²
 - First submission of Annual Report data must not require significant edits prior to submission to OCS.

Agency Self-Assessment:

Summary: Agency follows the CSBG Annual Report format.

Documentation Examples:

- IHCDA correspondence with the agency prior to OCS submission
- Agency's Annual Report

- Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

FULLY MET NOT MET

*If not met, what action steps are needed to meet the standard?