



CENTER FOR COMMUNITY SERVICES DIRECTIVE

Title: Organizational Standards
Directive #: C2018-07
Effective: October 1, 2018

To: Community Services Block Grant Subgrantees

From: Lynette Praster, Director – Center for Community Services

A handwritten signature in black ink, appearing to read 'Lynette Praster', written over the printed name.

1.0 Purpose

The purpose of this directive is to reinforce the required implementation of the Community Services Block Grant (CSBG) Organizational Standards and to provide guidance to CSBG eligible entities (CEE) about compliance with Organizational Standards.

2.0 Revision History

This CSBG Directive is effective October 1, 2018 and replaces C2016-07.

3.0 Policy

The Organizational Standards Center of Excellence (COE) was developed to assist states and local CEEs set and meet organizational expectations across the CSBG network. The COE was called upon to develop the standards with input from all key stakeholders, and to create tools for organizational assessment used by states and CEEs to set, achieve, and maintain high-quality organizational expectations and to enhance accountability. COE Organizational Standards were developed in collaboration with the federal Department of Health and Human Services (HHS) Office of Community Services (OCS), national Community Action Partnership (CAP), state CSBG lead agencies, state CSBG associations, and community action agencies across the nation.

The purpose of the Organizational Standards is to ensure that all eligible entities have appropriate organizational capacity, not only in the critical financial and administrative areas important to all nonprofit and public human service agencies, but also in areas of unique importance for CEEs. Accordingly, in Pennsylvania all CEEs are required to identify and report compliance with the standards.

Organizational Standards work together to characterize an effective and healthy organization. Some standards have direct linkage to the federal CSBG Act, while others have direct linkage to federal Office of Management and Budget (OMB) guidance. In their entirety, the standards reflect requirements of the

CSBG Act, applicable federal laws and regulations, good management practices, and most importantly the values of the community action network.

As part of Pennsylvania's continuing implementation of and compliance with the Organizational Standards, all CEEs are required to routinely review, update, and substantiate the Organizational Standards on an ongoing basis. The Community Organization Planning and Outcomes System (COPOS) is the official system of record for CEEs to report compliance with Organizational Standards.

There are 58 Organizational Standards for private, non-profit CEEs, and 50 Organizational Standards for public CEEs. The Organizational Standards are organized into three thematic groups comprising nine categories associated with the following areas of CEE operations:

1. Maximum Feasible Participation
 - Consumer Input and Involvement
 - Community Engagement
 - Community Assessment
2. Vision and Direction
 - Organizational Leadership
 - Board Governance
 - Strategic Planning
3. Operations and Accountability
 - Human Resource Management
 - Financial Operations and Oversight
 - Data and Analysis

Agency executive directors must approve Organizational Standards in COPOS. Refer to CSBG Directive C2018-05 for additional information about CSBG reporting requirements.

As the CSBG State Lead Agency responsible for oversight of CSBG, the Department's Center for Community Services is responsible for monitoring to assure CEE compliance with the requirements of the CSBG Act, including Organizational Standards. The Department assesses the status of standards among all CEEs, including annual reporting to OCS in the CSBG Annual Report. Assessment of Organizational Standards compliance is conducted routinely throughout the year, and as part of annual CEE monitoring. This routine and consistent monitoring ensures the Department meets its requirement to independently verify CEE compliance with Organizational Standard requirements.

As a result of monitoring, if the Department finds a CEE to be non-compliant with a standard or set of standards, the necessary corrective actions will depend on the circumstances. For any Organizational Standard that the agency is non-compliant, corrective action should be taken to achieve compliance in a minimal amount of time. In cases where the CEE may be able to meet the standard in a reasonable timeframe contingent on targeted technical assistance, the Department may require the CEE to develop a Technical Assistance Plan (TAP) that identifies and targets training and technical assistance resources and specifies a timeframe for the CEE to meet the standards. When appropriate in serious or persistent situations, the Department may initiate action in accordance with section 687C of the CSBG Act to establish a Quality Improvement Plan (QIP) with clear, specific timelines and benchmarks to identify progress toward compliance.

The failure of a CEE to consistently meet Organizational Standards may reflect deeper organizational

challenges and risks. In these instances, the Department must determine whether it is necessary to take additional actions including reduction or termination of funding in consultation with OCS.

Attachment A outlines acceptable documentation for public CEEs that should be uploaded into COPOS to substantiate compliance with the Organizational Standards. Attachment B outlines acceptable documentation for private, non-profit CEEs that should be uploaded into COPOS to substantiate compliance with the Organizational Standards. CEEs have the ability and are encouraged to add narrative statements in COPOS to support or clarify documents intended to demonstrate compliance with standards.

4.0 Effective Date

This directive takes effect October 1, 2018 and replaces C2016-07. It will remain in effect, in its entirety, until it is amended, replaced, superseded, or nullified. Only a directive from the Department's Center for Community Services or its equivalent may countermand any statement herein contained.

5.0 Attachments

Attachment A – Organizational Standards for Private Organizations

Attachment B – Organizational Standards for Public Organizations

cc: Center for Community Services Staff
Fiscal Management Center, DCED

Organizational Standards for Private Organizations

To validate compliance with Organizational Standards, specific documentation must be uploaded into COPOS and approved by the executive director. COPOS documentation is reviewed routinely and as part of annual monitoring. To expedite the review process and to substantiate your achievements, please identify or highlight any portion of board meeting minutes that pertain to the standard. If a document or form is not self-explanatory, please enter a note in COPOS to explain how the document supports your compliance with the standard.

<i>Category One – Consumer Input and Involvement</i>		
1.1	The agency demonstrates low-income individuals’ participation in its activities.	Maintain on an ongoing basis.
<ul style="list-style-type: none"> ✓ Participation lists, group documents, and minutes from agency advisory bodies; ✓ Volunteer recruitment materials, and tracking/sign-in documents or accompanying forms; ✓ Tripartite board recruitment documents, including solicitation materials, and final board membership list; ✓ Tripartite board minutes documenting conversations about recruitment and the involvement of low-income individuals in activities; ✓ Client Advisory Board Meeting Agendas i.e. Head Start Parent Advisory Group Agendas/Minutes; ✓ Documentation of low-income individual’s participation in the development of services, or in the needs assessment process, or assistance at agency events. 		
1.2	The agency analyzes information collected directly from low-income individuals as part of the community assessment.	At least every three (3) years.
<ul style="list-style-type: none"> ✓ Transcripts from interviews with low-income clients or community members during the assessment process; ✓ Notes from community forums or focus groups that included low-income individuals; ✓ Methodology section of the assessment report that details the processes to include low-income individuals in data collection; ✓ Samples of surveys from low-income individuals; ✓ Minutes of meeting where the data was analyzed for the community assessment; 		
1.3	The agency has a systematic approach for collecting, analyzing, and reporting customer satisfaction data to the tripartite board/governing body, which may be met through broader local government processes.	Maintain on an ongoing basis.
<ul style="list-style-type: none"> ✓ Agency’s customer satisfaction policy and/or procedures; ✓ Schedule for customer satisfaction data collection; ✓ Report that analyzes the customer satisfaction data to be shared with the agency’s leadership, the board, or the community; ✓ Board meeting minutes identifying distribution and review of customer satisfaction information. 		
<i>Category Two – Community Engagement</i>		
2.1	The agency has documented or demonstrated partnerships across the community, for specifically identified purposes;	Maintain on an ongoing basis.

	partnerships include other anti-poverty agency's in the area.	
	<ul style="list-style-type: none"> ✓ A list of the agencies or primary partnerships with samples of documents such as MOUs, contracts, and agreements that document the partnerships. 	
2.2	The agency 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 agencies, faith-based agencies, private sector, public sector, and educational institutions.	At least once every three (3) years.
	<ul style="list-style-type: none"> ✓ Information gathered during the community needs assessment from all five sectors listed in the standard; ✓ Summary of the the data in the community assessment or its appendices. 	
2.3	The agency communicates its activities and its results to the community.	Maintain on an ongoing basis.
	<ul style="list-style-type: none"> ✓ CAA annual report; ✓ Social media activity (Facebook page, Twitter account, etc.); ✓ News release copies; ✓ Community event information. 	
2.4	The agency documents the number of volunteers and hours mobilized in support of its activities.	Maintain on an ongoing basis.
	<ul style="list-style-type: none"> ✓ Volunteer sign-up sheets from activities and events; ✓ Board roster and minutes; ✓ Sign in sheets. 	

Category Three – Community Assessment		
3.1	The agency conducted a community assessment and issued a report within the past 3 years.	At least once every three (3) years.
	<ul style="list-style-type: none"> ✓ An electronic copy of the report. 	
3.2	As part of the community assessment, the agency collects and includes current data specific to poverty and its prevalence related to gender, age, and race/ethnicity for their service area(s).	At least once every three (3) years.
	<ul style="list-style-type: none"> ✓ Documentation that demonstrates collection of poverty data regarding gender, age, and race/ethnicity (all three demographics). 	
3.3	The agency collects and analyzes both qualitative and quantitative data on its geographic service area(s) in the community assessment.	At least once every three (3) years.
Data collection procedures: <ul style="list-style-type: none"> ✓ A list of all data collection methods used in the needs assessment; ✓ Descriptions of the processes used to collect the data collected; ✓ Links to or copies of the raw data collected. 		
Data analysis procedures:		

<ul style="list-style-type: none"> ✓ Descriptions of the processes used to analyze the data; ✓ The primary sections of the needs assessment that include data analysis. <p>Quantitative and qualitative data:</p> <ul style="list-style-type: none"> ✓ A list of all data sources collected for the needs assessment divided into qualitative, quantitative, and mixed methods categories; ✓ Links to or copies of the raw data collected. 		
3.4	The community assessment includes key findings on the causes and conditions of poverty and the needs of the communities assessed.	At least once every three (3) years.
<ul style="list-style-type: none"> ✓ Executive summary or other documentation that outlines the key findings of the needs assessment; ✓ Board meeting minutes that demonstrate discussion about the key findings of the needs assessment. 		
3.5	The tripartite board formally accepts the completed community assessment.	At least once every three (3) years.
<ul style="list-style-type: none"> ✓ Board meeting minutes demonstrating acceptance of the assessment. 		

Category Four – Organizational Leadership		
4.1	The tripartite board has reviewed the agency’s mission statement within the past 5 years and assured that the mission addresses poverty and the CSBG programs and services are in alignment with the mission.	At least once every five (5) years.
<ul style="list-style-type: none"> ✓ Board minutes; ✓ A copy of the Strategic Plan that includes the mission statement. 		
4.2	The agency’s Work Plan is outcome-based, anti- poverty focused, and ties directly to the community needs assessment.	Maintain on an ongoing basis.
<ul style="list-style-type: none"> ✓ A copy of the work plan. 		
4.3	The agency’s Work Plan and Strategic Plan document the continuous use of the full Results Oriented Management and Accountability (ROMA) cycle or comparable system (assessment, planning, implementation, achievement of results, and evaluation). In addition, the agency documents having used the services of a ROMA-certified trainer (or equivalent) to assist in implementation.	Maintain on an ongoing basis.
<ul style="list-style-type: none"> ✓ Evidence that all steps in the ROMA cycle (assessment, planning, implementation, achievement and evaluation) were carried out in the Work plan and Strategic Plan, e.g. a logic model; ✓ Evidence indicating involvement of ROMA trainer/implementer or equivalent in implementation of ROMA principles in the Work plan and Strategic Plan, e.g. staff persons ROMA NCRT/I certificate. 		
4.4	The tripartite board receives an annual update on the success of specific strategies included in the Work Plan.	At least once annually, not to exceed one (1) year

		from effective date.
	<ul style="list-style-type: none"> ✓ Board meeting minutes identifying receipt of annual update. 	
4.5	The agency has a written succession plan in place for the CEO/ED, approved by the tripartite 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.	Maintain on an ongoing basis.
	<ul style="list-style-type: none"> ✓ The succession plan; ✓ Board meeting minutes showing that the succession plan was approved by the board. 	
4.6	An agency-wide, comprehensive risk assessment has been completed within the past 2 years and reported to the tripartite board.	At least once every two (2) years.
	<ul style="list-style-type: none"> ✓ Risk assessment instrument and results; ✓ Board Meeting minutes showing the risk assessment was discussed and accepted by the board. 	

<i>Category Five – Board Governance</i>		
5.1	The organization's tripartite board is structured in compliance with the CSBG Act.	Maintain on an ongoing basis.
	<ul style="list-style-type: none"> ✓ Board bylaws; ✓ Board Membership Module complete and updated in COPOS. 	
5.2	The organization's tripartite board has written procedures that document a democratic selection process for low-income board members adequate to assure that they are representative of the low-income community.	Maintain on an ongoing basis.
	<ul style="list-style-type: none"> ✓ Board policy and procedure manual; ✓ Board by-laws. 	
5.3	The Agency's bylaws have been reviewed by an attorney within the past 5 years.	At least once every five (5) years.
	<ul style="list-style-type: none"> ✓ A letter from the attorney stating a review was completed; ✓ A copy of the results of the review. 	
5.4	The agency documents that each tripartite board member has received a copy of the bylaws within the past 2 years.	At least once every two (2) years.
	<ul style="list-style-type: none"> ✓ Board meeting minutes; ✓ Signature log. 	
5.5	The agency's tripartite board meets in accordance with the frequency and quorum requirements and fills board vacancies as set out in its bylaws.	As needed, more frequently than annually.
	<ul style="list-style-type: none"> ✓ Board minutes; ✓ Board bylaws; ✓ Board attendance sheet for the past 12 months. 	

5.6	Each tripartite board member has signed a conflict of interest policy within the past 2 years.	At least once every two (2) years.
<ul style="list-style-type: none"> ✓ A conflict of interest document; ✓ Evidence of signature forms available for DCED review upon on request. 		
5.7	The agency has a process to provide a structured orientation for tripartite board members within 6 months of being seated.	As needed, more frequently than annually.
<ul style="list-style-type: none"> ✓ The board policy and procedure manual; ✓ A list of the curriculum/tools used for orientation; ✓ A signed board member statement that such orientation was offered; ✓ Sign-in sheet from the orientation; ✓ Board roster with term dates identified in COPOS. 		
5.8	Tripartite board members have been provided with training on their duties and responsibilities within the past 2 years.	At least once every two (2) years.
<ul style="list-style-type: none"> ✓ Sign-in sheet and list of the curriculum used for training; ✓ Board meeting minutes documenting training occurred with names of attendees. 		
5.9	The agency’s tripartite board receives programmatic reports at each regular board/advisory meeting.	As needed, more frequently than annually.
<ul style="list-style-type: none"> ✓ Board meeting minutes. 		

Category Six – Strategic Planning		
6.1	The agency has an agency-wide strategic plan in place that has been approved by the tripartite board within the past 5 years.	At least once every five (5) years.
<ul style="list-style-type: none"> ✓ A copy of the completed strategic plan; ✓ Board minutes that reflect formal approval of the completed strategic plan by the full board. 		
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.	At least once every five (5) years.
<ul style="list-style-type: none"> ✓ A copy of the strategic plan. 		
6.3	The approved strategic plan, or comparable planning document, contains family, agency, and/or community goals.	At least once every five (5) years.
<ul style="list-style-type: none"> ✓ A copy of the strategic plan. 		
6.4	Customer satisfaction data and customer input, collected as part of the community assessment, is included in the strategic planning process, or comparable planning process.	At least once every five (5) years.
<ul style="list-style-type: none"> ✓ A section of the strategic plan or summary that describes how the customer feedback data was used; ✓ Customer satisfaction survey. 		
6.5	The tripartite board has received an update(s) on progress meeting the goals of the strategic plan/comparable planning	At least once annually, not to

	document within the past 12 months.	exceed one (1) year from effective date.
✓	Board meeting minutes.	

Category Seven – Human Resources Management

7.1	The agency has written personnel policies that have been reviewed by an attorney and approved by the tripartite board within the past 5 years.	At least once every five (5) years.
✓	Personnel policies that include review/edit dates and approval dates from an attorney;	
✓	Board meeting minutes that confirm the board formally approved the personnel policies.	
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.	As needed, more frequently than annually.
✓	Personnel policies or employee handbook;	
✓	Documentation that personnel policies have been made available to employees.	
7.3	The agency has written job descriptions for all positions which have been updated within the past 5 years.	At least once every five (5) years.
✓	Agency job descriptions;	
✓	Documentation noting the descriptions were updated.	
7.4	The tripartite board conducts a performance appraisal of the CEO/executive director within each calendar year.	At least once annually, not to exceed one (1) year from effective date.
✓	Policy or procedures pertaining to performance appraisals;	
✓	Sample appraisal document;	
✓	Actual appraisal document available upon request.	
7.5	The tripartite board reviews and approves CEO/executive director compensation within every calendar year.	At least once annually, not to exceed one (1) year from effective date.
✓	Policy or procedures document;	
✓	Board meeting minutes.	
7.6	The agency has a policy in place for regular written evaluation of employees by their supervisors.	Maintain on an ongoing basis.
✓	Policy or procedures document;	
✓	Sample evaluation document.	
7.7	The agency has a whistleblower policy that has been approved by the tripartite board.	Maintain on an ongoing basis.
✓	Whistleblower policy;	

<ul style="list-style-type: none"> ✓ Board meeting minutes. 		
7.8	All staff participate in a new employee orientation within 60 days of hire.	As needed, more frequently than annually.
<ul style="list-style-type: none"> ✓ Personnel policies or employee handbook; ✓ Documentation that demonstrates orientation is conducted for new hires. 		
7.9	The agency conducts or makes available staff development/training (including ROMA) on an ongoing basis.	As needed, more frequently than annually.
<ul style="list-style-type: none"> ✓ Agency training and technical assistance plan; ✓ Schedule of training; ✓ Documentation of presentations or evaluations; ✓ Attendee rosters (including ROMA training); ✓ Documentation of attendance at off-site training, events, conferences, etc., including sign in sheets, certificates of attendance, receipts, registration confirmation, etc. 		

Category Eight – Financial Operations and Oversight

8.1	The Agency’s annual audit (or audited financial statements) is completed by a Certified Public Accountant on time in accordance with Title 2 of the Code of Federal Regulations, Uniform Administration Requirements, Cost Principles, and Audit Requirement (if applicable) and/or State audit threshold requirements.	At least once annually, not to exceed one (1) year from effective date.
<ul style="list-style-type: none"> ✓ Documentation of audit completion; ✓ Audit report and related information; ✓ Confirmation of timely filing; ✓ Documentation from the Federal Clearinghouse showing the date the audit report was submitted. 		
8.2	All findings from the prior year’s annual audit have been assessed by the agency and addressed where the tripartite board has deemed it appropriate.	At least once annually, not to exceed one (1) year from effective date.
<ul style="list-style-type: none"> ✓ Documentation of corrective action plans prepared in response audit findings; ✓ Board meeting minutes approving response to audit findings. 		
8.3	The agency’s auditor presents the audit to the tripartite board.	At least once annually, not to exceed one (1) year from effective date.
<ul style="list-style-type: none"> ✓ Board meeting minutes that identify presentation of audit results. 		
8.4	The tripartite board formally receives and accepts the audit.	At least once annually, not to exceed one (1) year

		from effective date.
	<ul style="list-style-type: none"> ✓ Board meeting minutes that identify formal receipt and acceptance. 	
8.5	The agency has solicited bids for its audit within the past five (5) years.	At least once every five (5) years.
	<ul style="list-style-type: none"> ✓ Request for proposals (RFP) or other solicitation document; ✓ Listing of firms that responded to the solicitation; ✓ Scoring rubric or evaluation documents to demonstrate the review of the proposals. 	
8.6	The IRS Form 990 is completed annually and made available to the tripartite board for review.	At least once annually, not to exceed one (1) year from effective date.
	<ul style="list-style-type: none"> ✓ Completed IRS Form 990; ✓ Board meeting minutes that identify board review. 	
8.7	The tripartite board receives financial reports at each regular meeting that include the following: agency-wide report on revenue and expenditures that compares budget to actual, categorized by program; and balance sheet/statement of financial position.	As needed, more frequently than annually.
	<ul style="list-style-type: none"> ✓ Board meeting minutes that demonstrate routine and consistent review. 	
8.8	All required filings and payments related to payroll withholdings are completed on time.	As needed, more frequently than annually.
	<ul style="list-style-type: none"> ✓ Payroll tax withholding documentation. 	
8.9	The tripartite board annually approves an agency-wide budget.	At least once annually, not to exceed one (1) year from effective date.
	<ul style="list-style-type: none"> ✓ Board meeting minutes that demonstrate review and approval of the agency-wide budget. 	
8.10	The fiscal policies have been reviewed by staff within the past 2 years, updated as necessary, with changes approved by the tripartite board.	At least once every two (2) years.
	<ul style="list-style-type: none"> ✓ Policy manual with date reviewed by staff; ✓ Documentation that confirms that staff has reviewed within the past two years and updated as necessary; ✓ Documentation explaining process and date of staff review of fiscal policies; ✓ Board meeting minutes identifying the review and approval. 	
8.11	A written procurement policy is in place and has been reviewed by the tripartite board within the past 5 years.	At least once every five (5) years.

<ul style="list-style-type: none"> ✓ Procurement policy or procedures document; ✓ Board meeting minutes identifying the review. 		
8.12	The agency documents how it allocates shared costs through an indirect cost rate or through a written cost allocation plan.	Maintain on an ongoing basis.
<ul style="list-style-type: none"> ✓ For negotiated Federal cost rate, an approval letter from cognizant agency responsible to negotiate the rate with the entity; ✓ The letter and the parts of the plan that identify indirect costs; ✓ For cost allocation, an updated cost allocation plan identifying the methodology for accounting indirect costs; ✓ A copy of the cost allocation plan; ✓ For de minimus indirect cost rate, documentation of grant forms received from the funding agencies. 		
8.13	The agency has a written policy in place for record retention and destruction.	Maintain on an ongoing basis.
<ul style="list-style-type: none"> ✓ Policy or procedures document. 		

<i>Category Nine – Data and Analysis</i>		
9.1	The agency has a system or systems in place to track and report client demographics and services customers receive.	Maintain on an ongoing basis.
<ul style="list-style-type: none"> ✓ Executive summary or other documentation that provides an overview of the agency’s tracking mechanism; ✓ Examples from either the information technology (IT) system or from the tracking mechanism. 		
9.2	The agency has a system or systems in place to track family, agency, and/or community outcomes.	Maintain on an ongoing basis.
<ul style="list-style-type: none"> ✓ Executive summary or other documentation that provides an overview of the agency’s tracking mechanism; ✓ Examples from either the information technology (IT) system or from the tracking mechanism. 		
9.3	The agency has presented to the tripartite board for review or action, at least within the past 12 months, an analysis of the agency’s outcomes and any operational or strategic program adjustments and improvements identified as necessary.	At least once annually, not to exceed one (1) year from effective date.
<ul style="list-style-type: none"> ✓ Board meeting minutes. 		
9.4	The agency submits its CSBG Annual Report and it reflects client demographics and agency-wide outcomes.	At least once annually, not to exceed one (1) year from effective date.
<ul style="list-style-type: none"> ✓ Copy of COPOS email confirming submission of CSBG Annual Report. 		

Organizational Standards for Public Organizations

To validate compliance with Organizational Standards, specific documentation must be uploaded into COPOS and approved by the executive director. COPOS documentation is reviewed routinely and as part of annual monitoring. To expedite the review process and to substantiate your achievements, please identify or highlight any portion of board meeting minutes that pertain to the standard. If a document or form is not self-explanatory, please enter a note in COPOS to explain how the document supports your compliance with the standard.

<i>Category One – Consumer Input and Involvement</i>		
1.1	The department demonstrates low-income individuals' participation in its activities.	Maintain on an ongoing basis.
<ul style="list-style-type: none"> ✓ Participation lists, group documents, and minutes from department advisory bodies; ✓ Volunteer recruitment materials, and tracking/sign-in documents or accompanying forms; ✓ Tripartite board recruitment documents, including solicitation materials, and final board membership list; ✓ Tripartite board minutes documenting conversations about recruitment and the involvement of low-income individuals in activities; ✓ Client Advisory Board Meeting Agendas i.e. Head Start Parent Advisory Group Agendas/Minutes; ✓ Documentation of low-income individual's participation in the development of services, or in the needs assessment process, or assistance at department events. 		
1.2	The department analyzes information collected directly from low-income individuals as part of the community assessment.	At least once every three (3) years.
<ul style="list-style-type: none"> ✓ Transcripts from interviews with low-income clients or community members during the assessment process; ✓ Notes from community forums or focus groups that included low-income individuals; ✓ Methodology section of the assessment report that details the processes to include low-income individuals in data collection; ✓ Samples of surveys from low-income individuals; ✓ Minutes of meeting where the data was analyzed for the community assessment; 		
1.3	The department has a systematic approach for collecting, analyzing, and reporting customer satisfaction data to the tripartite board/governing body, which may be met through broader local government processes.	Maintain on an ongoing basis.
<ul style="list-style-type: none"> ✓ Department's customer satisfaction policy and/or procedures; ✓ Schedule for customer satisfaction data collection; ✓ Report that analyzes the customer satisfaction data to be shared with the department's leadership, the board, or the community; ✓ Board meeting minutes identifying distribution and review of customer satisfaction information. 		

<i>Category Two – Community Engagement</i>		
2.1	The department has documented or demonstrated	Maintain on an

	partnerships across the community, for specifically identified purposes; partnerships include other antipoverty organizations in the area	ongoing basis.
	<ul style="list-style-type: none"> ✓ A list of the agencies or primary partnerships with samples of documents such as MOUs, contracts, and agreements that document the partnerships. 	
2.2	The department 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.	At least once every three (3) years.
	<ul style="list-style-type: none"> ✓ Information gathered during the community needs assessment from all five sectors listed in the standard; ✓ Summary of the the data in the community assessment or its appendices. 	
2.3	The department communicates its activities and its results to the community.	Maintain on an ongoing basis.
	<ul style="list-style-type: none"> ✓ CAA annual report; ✓ Social media activity (Facebook page, Twitter account, etc.); ✓ News release copies; ✓ Community event information. 	
2.4	The department documents the number of volunteers and hours mobilized in support of its activities.	Maintain on an ongoing basis.
	<ul style="list-style-type: none"> ✓ Volunteer sign-up sheets from activities and events; ✓ Board roster and minutes; ✓ Sign in sheets. 	

Category Three – Community Assessment		
3.1	The department conducted or was engaged in a community assessment and issued a report within the past 3 years, if no other report exists.	At least once every three (3) years.
	<ul style="list-style-type: none"> ✓ An electronic copy of the report. 	
3.2	As part of the community assessment, the department collects and includes current data specific to poverty and its prevalence related to gender, age, and race/ethnicity for their service area(s).	At least once every three (3) years.
	<ul style="list-style-type: none"> ✓ Documentation that demonstrates collection of poverty data regarding gender, age, and race/ethnicity (all three demographics). 	
3.3	The department collects and analyzes both qualitative and quantitative data on its geographic service area(s) in the community assessment.	At least once every three (3) years.
Data collection procedures:		
	<ul style="list-style-type: none"> ✓ A list of all data collection methods used in the needs assessment; 	

<ul style="list-style-type: none"> ✓ Descriptions of the processes used to collect the data collected; ✓ Links to or copies of the raw data collected. <p>Data analysis procedures:</p> <ul style="list-style-type: none"> ✓ Descriptions of the processes used to analyze the data; ✓ The primary sections of the needs assessment that include data analysis. <p>Quantitative and qualitative data:</p> <ul style="list-style-type: none"> ✓ A list of all data sources collected for the needs assessment divided into qualitative, quantitative, and mixed methods categories; ✓ Links to or copies of the raw data collected. 		
3.4	The community assessment includes key findings on the causes and conditions of poverty and the needs of the communities assessed.	At least once every three (3) years.
<ul style="list-style-type: none"> ✓ Executive summary or other documentation that outlines the key findings of the needs assessment; ✓ Board meeting minutes that demonstrate discussion about the key findings of the needs assessment. 		
3.5	The tripartite board formally accepts the completed community assessment.	At least once every three (3) years.
<ul style="list-style-type: none"> ✓ Board meeting minutes. 		

<i>Category Four – Organizational Leadership</i>		
4.1	The tripartite board/advisory body has reviewed the department’s mission statement within the past five (5) years and assured that: 1. The mission addresses poverty; and 2. The CSBG programs and services are in alignment with the mission	At least once every five (5) years.
<ul style="list-style-type: none"> ✓ Board minutes; ✓ A copy of the Strategic Plan that includes the mission statement. 		
4.2	The department’s Community Action plan is outcome-based, anti-poverty focused, and ties directly to the community assessment.	Maintain on an ongoing basis.
<ul style="list-style-type: none"> ✓ A copy of the work plan. 		
4.3	The department’s Community Action plan and strategic plan document the continuous use of the full Result Oriented Management and Accountability (ROMA) cycle or comparable system (assessment, planning, implementation, achievement of results, and evaluation). In addition, the department documents having used the services of a ROMA-certified trainer (or equivalent) to assist in implementation.	Maintain on an ongoing basis.
<ul style="list-style-type: none"> ✓ Evidence that all steps in the ROMA cycle (assessment, planning, implementation, achievement and evaluation) were carried out in the Work plan and Strategic Plan, e.g. a logic model; ✓ Evidence indicating involvement of ROMA trainer/implementer or equivalent in implementation of ROMA principles in the Work plan and Strategic Plan, e.g. staff persons ROMA NCRT/I certificate. 		
4.4	The tripartite board/advisory body receives an annual	At least once

	update on the success of specific strategies included in the Community Action plan.	annually, not to exceed one (1) year from effective date.
✓ Board meeting minutes identifying receipt of annual update.		
4.5	The department adheres to its local government’s policies and procedures around interim appointments and processes for filling a permanent vacancy.	Maintain on an ongoing basis.
✓ The department’s succession plan; ✓ Local government’s policies and procedures.		
4.6	The department complies with its local government’s risk assessment policies and procedures.	At least once every two (2) years.
✓ Risk assessment instrument and results; ✓ Board Meeting minutes showing the risk assessment was discussed and accepted by the board.		

Category Five – Board Governance

5.1	The department’s tripartite board/advisory body is structured in compliance with the CSBG Act, by either: <ol style="list-style-type: none"> 1. Selecting the board members as follows: <ul style="list-style-type: none"> • At least one third are democratically-selected representatives of the low-income community; • One-third are local elected officials (or their representatives); and <ul style="list-style-type: none"> • The remaining members are from major groups and interests in the community; or 2. Selecting the board through another mechanism specified by the State to assure decision-making and participation by low-income individuals in the development, planning, implementation, and evaluation of programs. 	Maintain on an ongoing basis.
✓ Board bylaws; ✓ Board Membership Module complete and updated in COPOS.		
5.2	The department’s tripartite board/advisory body either has: <ol style="list-style-type: none"> 1. Written procedures that document a democratic selection process for lowincome board members adequate to assure that they are representative of the lowincome community, or 2. Another mechanism specified by the State to assure decision-making and participation by low-income individuals in the development, planning, implementation, and evaluation of programs. 	Maintain on an ongoing basis.

	<i>Please note under IM 82 for Public Entities the law also requires that a minimum of 1/3 of tripartite board membership be comprised of representatives of low-income individuals and families who reside in areas served</i>	
	<ul style="list-style-type: none"> ✓ Board policy and procedure manual; ✓ Board by-laws. 	
5.3	Not applicable: Review of bylaws by an attorney is outside of the purview of the department and the tripartite board/advisory body, therefore this standard does not apply to public entities.	Not applicable.
	✓ Not applicable	
5.4	The department documents that each tripartite board/advisory body member has received a copy of the governing documents, within the past 2 years.	At least once every two (2) years.
	<ul style="list-style-type: none"> ✓ Board meeting minutes; ✓ Signature log. 	
5.5	The department's tripartite board/advisory body meets in accordance with the frequency and quorum requirements and fills board vacancies as set out in its governing documents.	As needed, more frequently than annually.
	<ul style="list-style-type: none"> ✓ Board minutes; ✓ Board bylaws; ✓ Board attendance sheet for the past 12 months. 	
5.6	Each tripartite board/advisory body member has signed a conflict of interest policy, or comparable local government document, within the past two (2) years.	At least once every two (2) years.
	<ul style="list-style-type: none"> ✓ A conflict of interest document; ✓ Evidence of signature forms available for DCED review upon on request. 	
5.7	The department has a process to provide a structured orientation for tripartite board/advisory body members within six (6) months of being seated.	As needed, more frequently than annually.
	<ul style="list-style-type: none"> ✓ The board policy and procedure manual; ✓ A list of the curriculum/tools used for orientation; ✓ A signed board member statement that such orientation was offered; ✓ Sign-in sheet from the orientation; ✓ Board roster with term dates identified in COPOS. 	
5.8	Tripartite board/advisory body members have been provided with training on their duties and responsibilities within the past two (2) years.	At least once every two (2) years.
	✓ Sign-in sheet and list of the curriculum used for training;	

✓ Board meeting minutes documenting training occurred with names of attendees.		
5.9	The department’s tripartite board/advisory body receives programmatic reports at each regular board/advisory meeting.	As needed, more frequently than annually.
✓ Board meeting minutes.		

Category Six – Strategic Planning

6.1	The department has a strategic plan, or comparable planning document, in place that has been reviewed and accepted by the tripartite board/advisory body within the past five (5) years. If the department does not have a plan, the tripartite board/advisory body will develop the plan.	At least once every five (5) years.
✓ A copy of the completed strategic plan; ✓ Board minutes that reflect formal approval of the completed strategic plan by the full board.		
6.2	The approved strategic plan, or comparable planning document, addresses reduction of poverty, revitalization of low-income communities, and/or empowerment of people with low incomes to become more self-sufficient.	At least once every five (5) years.
✓ A copy of the strategic plan.		
6.3	The approved strategic plan, or comparable planning document, contains family, agency, and/or community goals.	At least once every five (5) years.
✓ A copy of the strategic plan.		
6.4	Customer satisfaction data and customer input, collected as part of the community assessment, is included in the strategic planning process, or comparable planning process.	At least once every five (5) years.
✓ A section of the strategic plan or summary that describes how the customer feedback data was used; ✓ Customer satisfaction survey.		
6.5	The tripartite board/advisory body has received an update(s) on progress meeting the goals of the strategic plan/comparable planning document within the past twelve (12) months.	At least once annually, not to exceed one (1) year from effective date.
✓ Board meeting minutes.		

Category Seven – Human Resources Management

7.1	Not applicable: Local governmental personnel policies are outside of the purview of the department and the tripartite board/ advisory body, therefore this standard does not apply to public entities.	Not applicable
✓ Not applicable		
7.2	The department follows local governmental policies in making	As needed, more

	available the employee handbook (or personnel policies in cases without a handbook) to all staff and in notifying staff of any changes.	frequently than annually.
	<ul style="list-style-type: none"> ✓ Personnel policies or employee handbook; ✓ Documentation that personnel policies have been made available to employees. 	
7.3	The department has written job descriptions for all positions. Updates may be outside of the purview of the department.	At least once every five (5) years.
	<ul style="list-style-type: none"> ✓ Department job descriptions; ✓ Documentation noting the descriptions were updated. 	
7.4	The department follows local government procedures for performance appraisal of the department head.	At least once annually, not to exceed one (1) year from effective date.
	<ul style="list-style-type: none"> ✓ Policy or procedures pertaining to performance appraisals; ✓ Sample appraisal document; ✓ Actual appraisal document available upon request. 	
7.5	The compensation of the department head is made available according to local government procedure.	At least once annually, not to exceed one (1) year from effective date.
	<ul style="list-style-type: none"> ✓ Policy or procedures document; ✓ Board meeting minutes. 	
7.6	The department follows local governmental policies for regular written evaluation of employees by their supervisors.	Maintain on an ongoing basis.
	<ul style="list-style-type: none"> ✓ Policy or procedures document; ✓ Sample evaluation document. 	
7.7	The department provides a copy of any existing local government whistleblower policy to members of the tripartite board/advisory body at the time of orientation.	Maintain on an ongoing basis.
	<ul style="list-style-type: none"> ✓ Whistleblower policy; ✓ Board meeting minutes. 	
7.8	The department follows local governmental policies for new employee orientation.	As needed, more frequently than annually.
	<ul style="list-style-type: none"> ✓ Personnel policies or employee handbook; ✓ Documentation that demonstrates orientation is conducted for new hires. 	
7.9	The department conducts or makes available staff development/training (including ROMA) on an ongoing basis.	As needed, more frequently than annually.
	<ul style="list-style-type: none"> ✓ Department training and technical assistance plan; ✓ Schedule of training; 	

<ul style="list-style-type: none"> ✓ Documentation of presentations or evaluations; ✓ Attendee rosters (including ROMA training); ✓ Documentation of attendance at off-site training, events, conferences, etc., including sign in sheets, certificates of attendance, receipts, registration confirmation, etc.

Category Eight – Financial Operations and Oversight

8.1	The department’s annual audit is completed through the local governmental process in accordance with Title 2 of the Code of Federal Regulations, Uniform Administrative Requirements, Cost Principles, and Audit Requirement (if applicable) and/or State audit threshold requirements. This may be included in the municipal entity’s full audit.	At least once annually, not to exceed one (1) year from effective date.
<ul style="list-style-type: none"> ✓ Documentation of audit completion; ✓ Audit report and related information; ✓ Confirmation of timely filing; ✓ Documentation from the Federal Clearinghouse showing the date the audit report was submitted. 		
8.2	The department follows local government procedures in addressing any audit findings related to CSBG funding.	At least once annually, not to exceed one (1) year from effective date.
<ul style="list-style-type: none"> ✓ Documentation of corrective action plans prepared in response audit findings; ✓ Board meeting minutes approving response to audit findings. 		
8.3	The department’s tripartite board/advisory body is notified of the availability of the local government audit.	At least once annually, not to exceed one (1) year from effective date.
<ul style="list-style-type: none"> ✓ Board meeting minutes that identify presentation of audit results. 		
8.4	The department’s tripartite board/advisory body is notified of any findings related to CSBG funding.	At least once annually, not to exceed one (1) year from effective date.
<ul style="list-style-type: none"> ✓ Board meeting minutes that identify formal receipt and acceptance. 		
8.5	Not applicable: The audit bid process is outside of the purview of tripartite board/advisory body therefore this standard does not apply to public entities.	Not applicable.
<ul style="list-style-type: none"> ✓ Not applicable. 		
8.6	Not applicable: The Federal tax reporting process for local governments is outside of the purview of tripartite board/advisory body therefore this standard does not apply to public entities.	Not applicable.

✓ Not applicable.		
8.7	The tripartite board/advisory body receives financial reports at each regular meeting, for those program(s) the body advises, as allowed by local government procedure.	As needed, more frequently than annually.
✓ Board meeting minutes that demonstrate routine and consistent review.		
8.8	Not applicable: The payroll withholding process for local governments is outside of the purview of the department, therefore this standard does not apply to public entities.	Not applicable.
✓ Not applicable.		
8.9	The tripartite board/advisory body has input as allowed by local governmental procedure into the CSBG budget process.	At least once annually, not to exceed one (1) year from effective date.
✓ Board meeting minutes that demonstrate review and approval of the department-wide budget.		
8.10	Not applicable: The fiscal policies for local governments are outside of the purview of the department and the tripartite board/advisory body, therefore this standard does not apply to public entities.	Not applicable.
✓ Not applicable.		
8.11	Not applicable: Local governmental procurement policies are outside of the purview of the department and the tripartite board/advisory body, therefore this standard does not apply to public entities.	Not applicable.
✓ Not applicable.		
8.12	Not applicable: A written cost allocation plan is outside of the purview of the department and the tripartite board/advisory body, therefore this standard does not apply to public entities.	Not applicable.
✓ Not applicable.		
8.13	The department follows local governmental policies for document retention and destruction.	Maintain on an ongoing basis.
✓ Policy or procedures document.		

Category Nine – Data and Analysis

9.1	The department has a system or systems in place to track and report client demographics and services customers receive.	Maintain on an ongoing basis.
<ul style="list-style-type: none"> ✓ Executive summary or other documentation that provides an overview of the department’s tracking mechanism; ✓ Examples from either the information technology (IT) system or from the tracking mechanism. 		

9.2	The department has a system or systems in place to track family, agency, and/or community outcomes.	Maintain on an ongoing basis.
	<ul style="list-style-type: none"> ✓ Executive summary or other documentation that provides an overview of the department's tracking mechanism; ✓ Examples from either the information technology (IT) system or from the tracking mechanism. 	
9.3	The department has presented to the tripartite board/advisory body 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.	At least once annually, not to exceed one (1) year from effective date.
	<ul style="list-style-type: none"> ✓ Board meeting minutes. 	
9.4	The department submits its annual CSBG Information Survey data report and it reflects client demographics and CSBG-funded outcomes.	At least once annually, not to exceed one (1) year from effective date.
	<ul style="list-style-type: none"> ✓ Copy of COPOS email confirming submission of CSBG Annual Report. 	