

Organizational Standards for Public Organizations

This document identifies the documentation necessary to meet the Organizational Standards required by USHHS. For each standard there is a list of documents; however, simply submitting one of the documents alone may not be sufficient to satisfy compliance with that particular standard. Therefore, it may be necessary to submit several of the identified documents.

Standard 1.1 - The department demonstrates low-income individuals' participation in its activities.

Submitted documentation must demonstrate low income individuals participation. Documentation can include one or more of the following items:

- Participation lists, group documents, and minutes from agency advisory bodies
- Volunteer recruitment materials, and tracking/sign-in documents or accompanying forms
- Tripartite board/advisory body recruitment documents, including solicitation materials, and final board membership list
- Tripartite board/advisory body minutes documenting conversations about recruitment and the involvement of low-income individuals in activities
- Client Advisory Board Meeting Agendas (if agency has) Head Start Parent Advisory Group Agendas/Minutes
- Advisory group documents
- Documentation of low-income individual's participation in the development of services, or in the needs assessment process, or assistance at agency events

It is recommended low-income person's participation in agency activities be included in the Community Needs Assessment and Strategic Plan.

Low income board members can be counted, but not their representatives. The goal is for on-going activity.

Maintained: Maintain on an ongoing basis, not to exceed one year from time of effective date

Standard 1.2 - The department analyzes information collected directly from low-income individuals as part of the community assessment.

Need to demonstrate *all three* of the following:

(1) Low-income individuals were consulted directly

- 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.

And

2) Participation of low-income individuals in the community assessment process

- The community assessment report describes the on inclusion of low-income individuals, Participation of low-income individuals in the notes from assessment processes where low-income people were consulted
- Dates on forums, focus groups, interviews, and analysis notes that are within the timeframe of the community assessment process for the agency
- Community Needs Assessment has description of how raw data on low-income participation was weighted in the final evaluation and ranking of needs.

And

(3) The department analyzed the collected information.

Documentation should include at least one of the following and must go beyond just including data, to demonstrate that analysis by the assessment team, program staff, program committee of the board, or tripartite board/advisory body occurred (the information collected was analyzed). Some examples might include:

- The key findings or recommendations of the final community assessment report as noted in Standard 3.4
- Minutes from a meeting where the analysis of data collected from low-income individuals was discussed
- An addendum to the larger public agency's community assessment that includes analysis of data collected from low-income individuals conducted by the department if not included in the original assessment.
- Summary description of data analysis and methodology for final ranking of needs

Maintained: Every 3 years

Standard 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.

Need to demonstrate *all three* of the following:

(1) There is a *system* and strategy in place (Policy and procedure document describing operations of the customer satisfaction process)

- Copy of the department or its parent public agency's customer satisfaction policy and/or procedures. This may include notes as to the timing of collection, staff responsible, level of analysis, and process for reporting on the data.

- Schedule for customer satisfaction data collection. This may include dates of dissemination, projected return dates, time scheduled for analysis, and date for presentation to the tripartite board/advisory body.

And

(2) The data is *collected* and analyzed

Collected: Data collection instruments (survey, focus group questions, etc) & summary data (reports, data collection schedules)

Analyzed: Policies and procedures documents describing how data is analyzed (reports, scorecards, dashboards, written reports and recommendations)

- Customer satisfaction instruments e.g., survey, form, postcard etc.
- A copy of the report that analyzes the customer satisfaction data to be shared with the organization’s leadership, the board, or the community.

And

(3) The data is *reported* to the governing board. (Policies and procedures documents describing reporting procedures (written reports, scorecards, etc. submitted to the board) – board minutes indicating reporting of data.

- A copy of the tripartite board/advisory body minutes where the customer satisfaction report was shared and discussed and the materials that were presented to the board

Maintained: Maintain on an ongoing basis, not to exceed one year from time of effective date

Standards Related to 1.1-1.3

Standard 2.3 - The organization communicates its activities and its results to the community.

Standard 2.4 - The organization documents the number of volunteers and hours mobilized in support of its activities.

Standard 3.3 - The organization collects and analyzes both qualitative and quantitative data on its geographic service area(s) in the community assessment.

Standard 5.2 - The organization’s governing 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.

Standard 6.4 - Customer satisfaction data and customer input, collected as part of the community assessment, is included in the strategic planning process.

Standard 9.1 - The organization has a system or systems in place to track and report client demographics and services customers receive.

Category 2: Community Engagement

Standard 2.1: The department has documented or demonstrated partnerships across the community, for specifically identified purposes; partnerships include other anti-poverty organizations in the area.

This standard relates to partnerships only. A partnership is a mutually beneficial arrangement in which EACH entity contributes and receives time, effort, expertise, and/or resources.

Three types of documentation include:

1) A list of the agencies primary partnerships such as MOUs, contracts, and agreements that document the partnerships

- Across the community – by sectors: nonprofit, public, private
- By geography – partnerships across your service area
- Partnerships must include other anti-poverty organizations

And

2) A description of the purpose of each of those partnerships,

And

3) Proof of partnerships with other anti-poverty organizations in their service area.

Documentation:

- Memorandums of understanding/agreement
- Summary document with list of partnerships and purposes

****Best practice is to have one single document with all the information and update it annually; which can reduce time collecting information ****

Maintained: Maintain on an ongoing basis, not to exceed one year from time of effective date

Standard 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.

Two types of documentation required:

(1) Information gathered during the community needs assessment or at other times from all five sectors listed in the standard

- Summarizing the data in the community assessment or its appendices. For example, a list of stakeholders organized by sector from which information was gathered on needs and resources during the community needs assessment with a brief summary of the data collection process or a list of stakeholders organized by sector from which

information was gathered on needs and resources at other times with a brief summary of the data collection process (e.g. during the strategic planning process, through advisory bodies)

These sectors include at least one of each:

Community-based organizations—United Way, Salvation Army or other multi-services nonprofits

Faith-based organizations—Local churches, synagogues, mosques, interfaith service organizations

Private Sector—Chambers of Commerce, local business improvement districts

Public Sector—Department of social services, public health departments and

Educational Institutions—Local school boards, universities, community colleges, trade schools.

And

(2) Used the information to assess needs and resources. Examples of potential documentation include:

- Documentation of phone calls, surveys, interviews, focus groups (hard copy or electronic) such as:
 - Needs assessment raw data
 - Needs assessment report sections – description of methodology (should include sectors and stakeholders consulted)
 - Meeting notes describing data analysis
 - Summary reports on the data shared at board meetings or board committees
- Examples of how the information gathered was used to assess needs and resources (e.g. the data collection methods and analysis section of the community needs assessment, pertinent reports on needs and resources produced by the agency and/or partnerships with stakeholders from other sectors in which it participates)

Maintained: Every 3 years

Standard 2.3: The department communicates its activities and its results to the community.

The department needs to communicate **BOTH** activities and results.

The following serve as documentation:

- CAA annual report
- Documentation of social media activity (Facebook page, Twitter account, etc....)
- Media files of stories published
- News release copies
- Community event information; and
- Communication plan and other documents

Additional Documentation for Activities:

- Community needs assessment
- Community Action plan
- Strategic plan
- Program and Services brochure/flyer
- Meeting and community events announcements
- Volunteer opportunity advertisements

Additional Documentation for Results:

- Needs assessment data
- Strategic plan updates
- Program activities and outcomes
- Return on investment reports
- Agency fact sheet/impact report
- Op-eds that connect the work of the agency to the activities of the broader Community Action Network

Maintained: Maintain on an ongoing basis, not to exceed one year from time of effective date

Standard 2.4: The department documents the number of volunteers and hours mobilized in support of its activities.

Two types of documentation required:

(1) The number of volunteers

- Volunteer sign-up sheets from activities and events
- Database records that track volunteers
- Board roster and minutes
- Sign in sheets
- Registration lists

And

(2) The number of hours those volunteers provided in support of its activities. Examples of documentation include:

- Agendas, minutes, schedules, and logs from activities and events to document or estimate the number of hours involved.
- Project/activity report
- Summary report of volunteer activity- can submit summary, but have documentation available for monitors

Maintained: Maintain on an ongoing basis, not to exceed one year from time of effective date

Category 3: Community Assessment

Standard 3.1 - The department conducted a community assessment and issued a report within the past 3 years.

Two types of documentation required:

(1) Documentation that confirms a department has completed a community needs assessment in the last three years,

- A physical or electronic copy of the report; ***with*** confirmation of the date the CNA was completed (e.g. press release, board minutes, email or web page time stamp)

And

(2) Documentation that confirms it has issued a report.

- Notation of the *date the report was issued*.
- A physical or electronic copy of an executive summary or similar condensed version of the CNA that would qualify as a report
- Recording of a webinar or radio show discussing CNA results, minutes from a community meeting where the assessment was released, or newsletter/newspaper article that would qualify as a report
- Confirmation of the date the report was issued (e.g. press release, board minutes, email or web page time stamp)

Maintained: Every 3 years

Standard 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).

Three types of documentation required:

(1) Documentation that confirms collection of poverty data regarding gender, age, and race/ethnicity (all 3 demographics)

- Data in the CNA denoting poverty among different genders, age groups, and race/ethnicities

And

(2) Documentation that confirms the included data is current, (within the past year)

- A footnote citation or in text citation in parenthesis noting where the statistics or quotes came from and what year, for example (American Community Survey, 2012) or (Collected from May 15, 2015 focus group).

And

(3) Documentation that confirms the collected data is representative of the *entire* service area (Cumulative and by county).

- Data shown on maps (Geographic Information Systems) that specifically outline the geographic service area of the agency
- Tables showing the poverty demographic statistics specifically broken out by county or
- Highlighted comparisons between state or national statistics and regional or city/county level statistics.

Maintained: Every 3 years

Standard 3.3 - The department collects and analyzes both qualitative and quantitative data on its geographic service area(s) in the community assessment.

Four types of documentation required:

(1) Data collection procedures, (methodology of needs assessment)

- 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.

And

(2) Data analysis procedures, (methodology of needs assessment)

- Descriptions of the processes used to analyze the data;
- The primary sections of the needs assessment that include data analysis;
- Additional notes or analysis not included in the needs assessment.

And

(3) Quantitative and qualitative data, (needs assessment) and

- A copy of the needs assessment;
- 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.

And

(4) Coverage of the service area.

- A list of data sources or types that cover the entire service area.

Maintained: Every 3 years

Standard 3.4 - The community assessment includes key findings on the causes and conditions of poverty and the needs of the communities assessed.

The intention of this Standard is to ensure that the CNA includes both a description of the conditions of poverty in the department's service area (i.e. how poverty manifests itself across different demographic categories and geographical areas) and an analysis of its underlying causes.

An analysis must be conducted of data (Surveys, interviews, focus groups, etc.) and data from Community Commons to determine the cause of poverty (multi-generational poverty; lack of education; lack of job skills; single parent households, etc.), not the symptoms or conditions and also to obtain data to describe the conditions of poverty (lack of healthcare, lack of food availability; substandard housing, etc.).

In order to document compliance with Standard 3.4, a CAA should include a section in the final CNA report titled "key findings". This section should outline the prioritized needs as documented and analyzed in the remainder of the report, the level of need (family/agency/community), as well as causes associated with the needs.

A section in the CNA that addresses three areas:

1) Causes

- The causes should encompass social, economic, and political factors contributing to poverty and barriers that exist in the service area

And

2) Conditions of poverty

- The condition should be a description of how poverty manifests itself. For example, lack of education, lack of employment skills, etc.

And

3) Needs

- Outline the prioritized needs as documented and analyzed in the remainder of the report, the level of need (family/agency/community), as well as causes associated with the needs.

Further documentation could include:

- CNA committee or team minutes reflecting a discussion and analysis of the poverty statistics and conditions.

Maintained: Every 3 years

Standard 3.5 - The tripartite board/advisory board formally accepts the completed community assessment.

Documentation includes:

- Tripartite board/advisory board minutes with the action item to accept the CNA clearly delineated with motion and results of the vote noted.

Maintained: Every 3 years

There are several other standards that relate to the community needs assessment that the evaluation team should consider to coordinate with work on other categories of the Organizational Standards. These include:

- Standard 1.1** - The organization demonstrates low-income individuals’ participation in its activities.
- Standard 1.2** - The organization analyzes information collected directly from low-income individuals as part of the community assessment.
- 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.
- Standard 2.4** - The organization documents the number of volunteers and hours mobilized in support of its activities.
- Standard 6.4** - Customer satisfaction data and customer input, collected as part of the community assessment, is included in the strategic planning process.

Category 4: Organizational Leadership

Standard 4.1 - The tripartite board/advisory body has reviewed the department’s mission statement within the past 5 years and assured that:

- 1. The mission addresses poverty; and**
- 2. The CSBG programs and services are in alignment with the mission.**

There are three requirements: The tripartite board/advisory board has reviewed the mission statement
1) Within the past 5 years

And

- 2) Assure mission statement addresses poverty
 - “Addresses poverty” does not require using the specific word poverty but needs to address the issue of poverty
 - Language such as, but not limited to, low-income, self-sufficiency, economic security, etc. are possible terms that can be used to address poverty

And

- 3) The services offered are in alignment with the mission.

The documentation includes:

- Minutes from a board meeting or board retreat that shows that the tripartite board/advisory board reviewed the mission statement and that the Standard's requirements were met
- Strategic Plan that includes the mission statement, the process of review and other comments
- The mission statement itself with Board review date noted

It is the board that determines if the programs and services are in alignment with the mission.

Maintained: Every 5 years

Standard 4.2 - The department's Community Action Plan is outcome-based, anti-poverty focused, and ties directly to the community assessment.

Community Action Plan needs to contain the following three elements:

1) Outcome-based

And

2) Anti-poverty focused

And

3) Ties directly to the community assessment and identify the top 5 needs

Maintained: Maintain on an ongoing basis, not to exceed one year from time of effective date

Standard 4.3 - The department's Community Action 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 department documents having used the services of a ROMA-certified trainer (or equivalent) to assist in implementation.

Documentation includes:

- Documentation that all steps in the ROMA cycle (assessment, planning, implementation, achievement and evaluation) were carried out in the Community Action Plan and Strategic Plan
- And**
- Documentation indicating involvement of ROMA trainer/implementer or equivalent in implementation of ROMA principles in the Community Action Plan and Strategic Plan

Areas in ROMA cycle requiring involvement of ROMA Implementer/Trainer

- Assessment (review of mission statement, needs assessment, evaluate current services and effectiveness)
- Planning (identifying top 5 needs based on NA, identify services to provide to meet needs, develop strategies, performance measures and outcomes for CAP and SP, develop system to track achievement of outcomes, update CAP and SP outcomes and strategies)
- Implementation (implement CAP and SP, monitor implementation, determine frequency of evaluation & timeline and system to report progress)
- Achievement of Results (achieve and measure results)
- Evaluation (evaluate and analyze data and compare to targets, review data on population served, adjust performance goals and revise strategies, review NA process as needed)

Types of documentation to submit can include but not limited to (documentation needs to address *both* requirements of the standard):

- Simple table to document use of each step of the ROMA cycle and form to document interaction with ROMA trainer
- Documentation from ROMA trainer/implementer related to their involvement with the five phases of the ROMA cycle

Maintained: Maintain on an ongoing basis, not to exceed one year from time of effective date

Standard 4.4 - The tripartite board/advisory body receives an annual update on the success of specific strategies included in the Community Action Plan.

The documentation includes both of the following:

- Board minutes showing the date that the update was given to the board

And

- Board packet with any reports, materials given, or written report that was given to the board.

Maintained: Annually

Standard 4.5 - The department adheres to its local government policies and procedures around interim appointments and processes for filling a permanent vacancy.

The department needs two components to show it is in compliance:

(1) Local government policies and procedures,

- A copy of the local government policies and procedures related to filling temporary and permanent vacancies in the department's executive function;

And

(2) Evidence that it complies with them.

- A brief narrative on how the department adheres to the policies and procedures along with any necessary documentation (e.g. required planning documents).

Once the succession plan is in place it may be kept on file and no updates or further board action is required unless there are changes.

Maintained: Maintain on an ongoing basis;

Standard 4.6 - The department complies with its local government's risk assessment policies and procedures.

There are two requirements:

(1) Local government policies and procedures,

- A copy of the local government policies and procedures related to risk assessment;

And

(2) Evidence that it complies with them.

- A brief narrative on how the department adheres to the policies and procedures along with any necessary documentation (e.g. results of a risk assessment process).

Maintained: Every 2 years

Category 5: Board Governance

Standard 5.1 - The department's tripartite board/advisory body is structured in compliance with the CSBG Act, by either:

1. Selecting the board members as follows:

- **At least one third are democratically-selected representatives of the low-income community;**
- **One-third are local elected officials (or their representatives); and**
- **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.

Documentation must include at least both of the following:

- Bylaws

And

- Board Membership List

Maintained: Maintain on an ongoing basis

Standard 5.2 - The department's tripartite board/advisory body either has:

- 1. 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, 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.**

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.

Documentation must include at least one of the following:

- the written board policy itself

Or

- board policy/procedure manual/By-laws

Maintained: Maintain on an ongoing basis

Standard 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.

Standard 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.

Documentation must include at least one of the following and be dated within the past 5 years:

- Sign-in list completed when Bylaws are distributed at a board/advisory body meeting **or**
- Email confirmation of receipt **or**
- Board minutes documenting their distribution and noting those in attendance **or**
- Some other documentation acknowledging the governing board has received a copy of the bylaws in the past 2 years.

Maintained: Every 2 years

Standard 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.

****Need to make sure that documentation addresses frequency, quorum requirements and fills board vacancies as set out in its bylaws****

Documentation includes all of the following:

- Board minutes (To prove quorum at each)

And

- Board rosters

And

- Board bylaws

And

- Board attendance sheet for the past 12 months

Maintained: As needed/More frequent than annually

Standard 5.6 - Each tripartite board/advisory body member has signed a conflict of interest policy, or comparable local government document, within the past 2 years.

Documentation includes:

- A signed conflict of interest document that allows for board members to list real or potential known conflicts that is collected, reviewed and stored by the CAA.

Maintained: Every 2 years

Standard 5.7 - The department has a process to provide a structured orientation for tripartite board/advisory body members within 6 months of being seated.

This documentation consists of *all* of the following:

- The board policy and procedure manual

And

- A copy of the curriculum/tools used for orientation.

And

- A signed board member statement that such orientation was offered or a sign-in sheet from the orientation are other examples of documentation.

And

- Board roster with term dates.

Maintained: As needed/More frequent than annually

Standard 5.8 - Tripartite board/advisory body members have been provided with training on their duties and responsibilities within the past 2 years.

The organization needs to have documentation that the training occurred (including content) as well as documentation that each board member has been provided with training opportunities **that cover the board's duties and responsibilities.**

Documentation includes at least one of the following:

- Sign-in sheet and copy of the curriculum used for training,
- board minutes documenting that training occurred with the names of those attending,
- registration and training materials from a conference that board members attended,
- Links to recorded webinars the board viewed with an email from a board member stating they viewed the presentation that covered duties and responsibilities.

Maintained: Every 2 years

Standard 5.9 - The department's tripartite board/advisory body receives programmatic reports at each regular board/advisory meeting.

- Board minutes for all regularly held board meetings within the past 12 months that reflect that programmatic reports have been provided and received by the full board
- Programmatic reporting may be in writing (reports, dashboards) and/or be presented verbally (copies of presentation and or reports must be provided).

Maintained: As needed/More frequent than annually

Category 6: Strategic Planning

Standard 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 5 years. If the department does not have a plan, the tripartite board/advisory body will develop the plan.

Documentation must include both of the following:

- (1) Completion of a department-wide strategic plan within the past five years,
 - A copy of the completed strategic plan, including its date of completion

And

- (2) That the full *board has formally approved* the strategic plan.
 - Board minutes that reflect formal approval of the completed strategic plan by the full board.

Maintained: Every 5 years

Standard 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.

A strategic plan that is composed of goals that do not directly involve the programs, services, and related activities an agency uses to achieve its anti-poverty mission risks failing to comply with this Standard.

Documentation must include a copy of the strategic plan (goals, strategies, and key measures) that *explicitly* incorporates at least one or more of the three objectives listed below (There must be at least one of the three):

- poverty
- revitalization of low-income communities, and
- empowerment of people with low income to become more self-sufficient

***At a minimum, poverty and self sufficiency should be addressed. Ideally, all three of these should be incorporated into your Strategic Plan. ***

Maintained: Every 5 years

Standard 6.3 - The approved strategic plan, or comparable planning document, contains family, agency, and/or community goals.

Documentation includes:

- A copy of or link to the strategic plan which has goals, objectives, strategies and measures that *explicitly address* family, agency, and/or community goals.

The strategic plan's goals, objectives, and strategies and measures in the three areas would encompass family in regards to agency programs, services and activities; agency would relate to agency development or improvement of staff, board and organization; and, community would address community improvement and revitalization, community quality of life and assets and community engagement.

The strategic plan should address the following elements, related to family, agency and community agency's plan of action:

- Goals – A broad statement identifying what the organization hopes to achieve/desired result
- Objectives – The quantifiable milestones (how much, by when) that will assist with reaching your goals
- Strategies – The actions used to achieve your objectives
- Measures – Data which evaluates progress at meeting goals, objectives, and strategies throughout the process

****A good reference tool to develop goals in the three areas would be NPI's. ****

Maintained: Every 5 years

Standard 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.

This standard requires two types of documentation:

(1) Evidence that customer satisfaction and input is gathered as part of the community needs assessment

- The appropriate section from the needs assessment that includes customer feedback data;
 - Customer Satisfaction Data (Copy of customer satisfaction survey and results of customer satisfaction surveys) ***and***
 - Customer Input (list of methods used to gather customer input and/or samples of customer input)

And

(2) Illustration of how customer satisfaction and input is included in the strategic planning process.

- A section of the strategic plan (e.g. a process description) or brief summary that describes how the customer feedback data was used.
 - Use of customer satisfaction data and input during the strategic planning process (agendas of strategic planning committee meetings, highlighted sections of strategic plan that have addressed customer feedback & satisfaction and/or narrative description)

Maintained: Every 5 years

Standard 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 12 months.

This standard requires two types of documentation:

(1) Confirmation that progress on **all** strategic plan goals was received by the board. Provide copy of the materials presented and/or provided to the board.

- Provide a copy of the materials presented and/or provided to the board. The update must include progress on meeting **all** goals in the strategic plan
- Items addressed by the update that show progress towards the strategic plan goals was provided.

And

(2) Board meeting minutes that reflect the update to the full board within the past year.

Maintained: Annually

Category 7: Human Resources Management

Standard 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.

Due to the nature of public agencies, the tripartite board likely does not have authority over personnel policies, what they contain, or when they are reviewed. Therefore Standard 7.1 does not apply.

Standard 7.2 - The department follows local governmental policies in making available the employee handbook (or personnel policies in cases without a handbook) to all staff and in notifying staff of any changes.

Documentation must include all of the following four things:

(1) Personnel Policies (or Employee Handbook) a physical or electronic copy of the Personnel Policies

And

- (2) An identified process for notifying staff of updates;
- A process or procedure document for staff communication (may be included with the handbook/policies)
 - Samples of agency communication of policy change notification to staff

And

(3) Include sample (10% of CSBG employees) documentation that personnel policies have been made available to employees

And

- (4) Documentation of the location and availability of the Personnel Policies
- Can be a link to a website if it contains the required information

Maintained: As needed/More frequent than annually

Standard 7.3 - The department has written job descriptions for all positions. Updates may be outside of the purview of the department.

Documentation must include the following three things:

- (1) "All positions" can be identified in an Organizational chart(s) *or* Staff list with role titles

And

- (2) The agency's job descriptions
- Sample job descriptions (minimum of 10% CSBG employees)

And

(3) Dated documentation noting that the descriptions have been updated within the past 5 years.

Maintained: Every 5 years

Standard 7.4 - The department follows local government procedures for performance appraisal of the department head.

Documentation should show:

- 1) That a policy/procedure is in place by the parent agency or municipality
- Policy/procedures pertaining to performance appraisals

And

2) That the department followed that procedure.

- Performance appraisal sign-off
- An official email/memo/letter stating the appraisal was completed according to policy

Maintained: Annually

Standard 7.5 - The compensation of the department head is made available according to local government procedure.

Documentation should show:

- 1) That a policy/procedure is in place by the parent agency or municipality
 - Performance appraisal sign-off

And

- 2) That the department followed that procedure.
 - Where salary information is posted

Maintained: Annually

Standard 7.6 - The department follows local governmental policies for regular written evaluation of employees by their supervisors.

Documentation must show the local procedure and evidence that the department follows it.

Maintained: Maintain on an ongoing basis

Standard 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.

Documentation must include both of the following:

- (1) The Whistleblower Policy (May be found in the agency's Personnel Policies or Employee Handbook) which includes anti-retaliation language.
 - Whistleblower policy

And

- (2) That the tripartite board/advisory body was provided with a copy of an existing whistleblower policy
 - Board minutes

And

(2) That this occurred as part of the orientation process and might include:

- Board pre-meeting materials/packet
- Completed orientation packet/agenda/checklist
- Sign-ins or acknowledgement page from orientation

Once the policy is in place it may be kept on file and no updates or further board action is required.

Maintained: Maintain on an ongoing basis

Standard 7.8 - The department follows local governmental policies for new employee orientation.

Documentation must include at least *two* of the following:

(1) Policy related to orientation;

- Personnel Policies or Employee Handbook

And

(2) Dated documentation in HR files noting attendance.

- Sampling of HR/personnel documentation of hire date and completion of orientation (10% sample of employees).

Or

- List of employees (10% sample of employees) with date of hire and date of completion of orientation.

Maintained: As needed/More frequent than annually

Standard 7.9 - The department conducts or makes available staff development/training (including ROMA) on an ongoing basis.

Documentation must include at least one of the following:

- Documentation of trainings: presentations, evaluations, attendee lists (Including ROMA training).
- Documentation of attendance at off-site training/events/conferences such as sign in sheet, certificate of attendance, receipt, registration confirmation, etc.

Maintained: As needed/More frequent than annually

Category 8: Financial Operations and Oversight

Standard 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.

Documentation includes both:

- (1) Documentation that confirms an agency has completed an audit (Must be by licensed CPA)
- A physical or electronic copy of the audit report and related information

And

- (2) Documentation that confirms the agency has filed the report in a timely manner.
- An electronic “receipt” from the Federal Clearinghouse showing the date the audit report was submitted was within the nine month deadline,

Or

- A screen shot from the Federal Audit Clearinghouse website showing submission.

The Federal Audit Clearinghouse data collection form (Form SF-SAC) is not an acceptable submission to fulfill this standard.

Maintained: Annually

Standard 8.2 - The department follows local government procedures in addressing any audit findings related to CSBG funding.

Two types of documentation required:

- (1) Documentation of the local government process to address audit findings,
- A physical or electronic copy of the local government procedures to address audit findings

And

- (2) Documentation that confirms the department has followed the process.
- Certification by the parent agency or other local government authority that the department has followed procedures

Maintained: Annually

Standard 8.3 - The department’s tripartite board/advisory body is notified of the availability of the local government audit.

Verification includes documentation evidencing that the tripartite board/advisory body was notified that the local government audit results were available:

- Board meeting minutes indicating notification of audit availability
Or
- An email to all board members notifying them of audit availability.

Maintained: Annually

Standard 8.4 - The department's tripartite board/advisory body is notified of any findings related to CSBG funding.

Required documentation includes:

- Board minutes indicating notification of all audit findings with CSBG funding,
or
- A formal communication (e.g. email, letter) to the board notifying them of all audit findings with CSBG funding.

****Need to document receipt for each board member. Can have note in minutes that each board member has received audit report prior to accepting audit report****

Maintained: Annually

Standard 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.

Standard 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.

Standard 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.

Nonprofit and public agencies must provide the following documentation for *every regular* tripartite board meeting within the last 12 months:

- Board minutes reflecting review of organization-wide report on revenue and expenditures that compares budget to actual and categorized by program.

And

- Minutes should also reflect review of organization wide financial reports and balance sheets/statement of financial position.

Maintained: As needed/More frequent than annually

Standard 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.

Standard 8.9 - The tripartite board/advisory body has input as allowed by local governmental procedure into the CSBG budget process.

The two types of documentation required include:

(1) The local government procedure for tripartite board/advisory body participation in the CSBG budget process,

- A copy of the local government procedures for tripartite board/advisory body participation in the CSBG budget process.

And

(2) Evidence that the board was allowed to participate as required.

- Formal communication from the board that it participated as allowed

Or

- Documentation of board participation in the budget process as allowed (e.g. board budget recommendations submitted to the local government, board meeting minutes noting formal participation)

Maintained: Annually

Standard 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.

Standard 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.

Standard 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.

Standard 8.13 - The department follows local governmental policies for document retention and destruction.

The documentation required includes:

- (1) The local government policy on document retention and destruction,
- a copy of the local government policy on document retention and destruction

And

- (2) Evidence that demonstrates compliance with the policy.
- Record of compliance provided by the parent agency (e.g. certification by compliance staff)
- Or**
- Records demonstrating compliance (e.g. records demonstrating consistent destruction of documents)

Maintained: Maintain on an ongoing basis

The Organizational Standards that deal with the audit are:

Standard 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.

Standard 8.2: The department follows local government procedures in addressing any audit findings related to CSBG funding.

Standard 8.3: The department's tripartite board/advisory body is notified of the availability of the local government audit.

Standard 8.4: The department's tripartite board/advisory body is notified of any findings related to CSBG funding.

Standard 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.

Standards that deal with Governmental requirements are:

Standard 8.6: The IRS Form 990 is completed annually and made available to the governing board for review.

Standard 8.8: All required filings and payments related to payroll withholdings are completed on time.

Standards 8.7 and 8.9 cover the role of the tripartite board/advisory body in oversight of the department's budget.

Standard 8.9: The tripartite board/advisory body has input as allowed by local governmental procedure into the CSBG budget process.

Standard 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.

Standards that deal with Policies and Procedures are:

Standard 8.10: The fiscal policies have been reviewed by staff within the past 2 years, updated as necessary, with changes approved by the governing board.

Standard 8.11: A written procurement policy is in place and has been reviewed by the governing board within the past 5 years.

Standard 8.12: The organization documents how it allocates shared costs through an indirect cost rate or through a written cost allocation plan.

Standard 8.13: The organization has a written policy in place for record retention and destruction.

Category 9: Data and Analysis

Standard 9.1 - The department has a system or systems in place to track and report client demographics and services customers receive.

This is a system of tracking client demographics and services customers receive and requires all of the following:

(1) Data collection and reporting system or systems

- A narrative description of the system or systems in place that includes software, hardware, and data collection policies and procedures.

And

(2) Client demographics

- Reports that include client demographic data (preferably ones that include data for all programs and services)

And

(3) Services customers receive.

- Reports that include documentation of services received by customers must be “unduplicated count” of customers and the services they received

Maintained: Maintain on an ongoing basis

Standard 9.2 - The department has a system or systems in place to track family, agency, and/or community outcomes.

Need at least one of the following:

- Describe the system used and provide electronic and/or hard copy of reports which include family, agency and/or community outcomes for all programs.

Or

- A description of system and screen shots of data collection

Maintained: Maintain on an ongoing basis

Standard 9.3 - The department has presented to the tripartite board/advisory body 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.

Documentation:

- Documentation in board minutes of the review done of the report and the suggestions for action discussed and approved

Or

- Tripartite board/advisory body minutes reflecting a motion or resolution with vote results noted to accept the analysis and suggestions for improvement/change at a regular tripartite board/advisory body meeting.

Maintained: Annually

Standard 9.4 - The department submits its annual CSBG Information Survey data report and it reflects client demographics and CSBG-funded outcomes.

Documentation includes:

- Electronic and/or hard copy of the Information Survey report submission

Maintained: Annually

Standards that involve Data Collection and Analysis

Standard 1.1 - The organization demonstrates low-income individuals' participation in its activities.

Standard 1.3 - The organization has a systematic approach for collecting, analyzing, and reporting customer satisfaction data to the governing board.

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.

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.

Standard 2.3 - The organization communicates its activities and its results to the community.

Standard 2.4 - The organization documents the number of volunteers and hours mobilized in support of its activities.

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).

Standard 3.3 - The organization collects and analyzes both qualitative and quantitative data on its geographic service area(s) in the community assessment.

Standard 4.3 - The organization's Community Action 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 organization documents having used the services of a ROMA-certified trainer (or equivalent) to assist in implementation.

Standard 6.4 - Customer satisfaction data and customer input, collected as part of the community assessment, is included in the strategic planning process.

CATEGORIZATION OF STANDARDS BY TOPIC

STANDARDS RELATED TO CNA:

- 1.1 The organization demonstrates low-income individuals' participation in its activities.
- 1.2 The organization analyzes information collected directly from low-income individuals as part of the community assessment.
- 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.
- 2.4 The organization documents the number of volunteers and hours mobilized in support of its activities.
- 3.1 The organization conducted a community assessment and issued a report within the past 3 years.
- 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).

- 3.3 The organization collects and analyzes both qualitative and quantitative data on its geographic service area(s) in the community assessment.
- 3.4 The community assessment includes key findings on the causes and conditions of poverty and the needs of the communities assessed.
- 3.5 The governing board formally accepts the completed community assessment.
- 6.4 The customer satisfaction data and customer input, collected as part of the community assessment, is included in the strategic planning process.

CNA STANDARDS RELATED TO THE GOVERNING BOARD

- 1.2 The organization analyzes information collected directly from low-income individuals as part of the community assessment
- 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.
- 3.5 The governing board formally accepts the completed community assessment.
- 4.2 The organization’s community action plan is outcome-based, anti-poverty focused, and ties directly to the community assessment.
- 4.3 The organization’s community action 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 organization documents having used the services of a ROMA-certified trainer (or equivalent) to assist in implementation.
- 6.4 Customer satisfaction data and customer input, collected as part of the community assessment, is included in the strategic planning process.

STANDARDS RELATED TO THE STRATEGIC PLAN

- Standard 1.1 - The organization demonstrates low-income individuals’ participation in its activities.
- Standard 1.2 - The organization analyzes information collected directly from low-income individuals as part of the community assessment.
- Standard 1.3 - The organization has a systematic approach for collecting, analyzing, and reporting customer satisfaction data to the governing board.
- Standard 4.1 - The governing board has reviewed the organization’s mission statement within the past 5 years and assured that: 1) the mission addresses poverty; and 2) The organization’s programs and services are in alignment with the mission.
- Standard 4.3 - The organization’s Community Action 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 organization documents having used the services of a ROMA-certified trainer (or equivalent) to assist in implementation.

Standard 6.1 - The organization has an agency-wide strategic plan in place that has been approved by the governing board within the past 5 years.

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.

Standard 6.3 - The approved strategic plan contains family, agency, and/or community goals.

Standard 6.4 - Customer satisfaction data and customer input, collected as part of the community assessment, is included in the strategic planning process.

Standard 6.5 - The governing board has received an update(s) on progress meeting the goals of the strategic plan within the past 12 months.

Standard 9.3 - The organization has presented to the governing 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.

MAINTENANCE SCHEDULES

CALENDAR OF REQUIRED ACTIONS FOR GOVERNING BOARD

Maintain

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

4.5 The organization has a written succession plan in place for the CEO/ED, 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.

5.1 The organization's governing board is structured in compliance with the CSBG Act: 1. At least one third democratically-selected representatives of the low-income community; 2. One-third local elected

officials (or their representatives); and 3. The remaining membership from major groups and interests in the community.

5.2 The organization's governing 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.

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

As Needed/More Frequent than Annually

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

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

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

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.

Annually

4.4 The governing board receives an annual update on the success of specific strategies included in the Community Action plan.

6.5 The governing board has received an update(s) on progress meeting the goals of the strategic plan within the past 12 months.

7.4 The governing board conducts a performance appraisal of the CEO/executive director within each calendar year.

7.5 The governing board reviews and approves CEO/executive director compensation within every calendar year.

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.

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

8.4 The governing board formally receives and accepts the audit.

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

8.9 The governing board annually approves an organization-wide budget.

9.3 The organization has presented to the governing 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.

Every 2 Years

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

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

5.6 Each governing board member has signed a conflict of interest policy within the past 2 years.

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

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

Every 3 Years

3.5 The governing board formally accepts the completed community assessment.

Every 5 Years

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

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

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

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

Related Standards

These are standards that do not specifically call on the governing board in the standard itself to perform an action, but are part of a larger organizational process that involves the governing board (such as the required elements in an approved strategic plan or community assessment).

- 3.1 The organization conducted a community assessment and issued a report within the past 3 years.
- 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).
- 3.3 The organization collects and analyzes both qualitative and quantitative data on its geographic service area(s) in the community assessment.
- 3.4 The community assessment includes key findings on the causes and conditions of poverty and the needs of the communities assessed.
- 4.2 The organization's Community Action plan is outcome-based, anti-poverty focused, and ties directly to the community assessment.
- 4.3 The organization's Community Action 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 organization documents having used the services of a ROMA-certified trainer (or equivalent) to assist in implementation.
- 5.3 The organization's bylaws have been reviewed by an attorney within the past 5 years.
- 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.
- 6.3 The approved strategic plan contains family, agency, and/or community goals.
- 6.4 Customer satisfaction data and customer input, collected as part of the community assessment, is included in the strategic planning process.

CALENDAR OF REQUIRED ACTIONS FOR ALL COMMUNITY ACTION AGENCIES

Maintain

- 1.1** - The organization demonstrates low-income individuals' participation in its activities.
- 1.3** - The organization has a systematic approach for collecting, analyzing, and reporting customer satisfaction data to the governing board.
- 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.

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

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

4.2 - The organization's Community Action plan is outcome-based, anti-poverty focused, and ties directly to the community assessment.

4.3 - The organization's Community Action 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 organization documents having used the services of a ROMA-certified trainer (or equivalent) to assist in implementation.

4.5 - The organization has a written succession plan in place for the CEO/ED, 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.

5.1 - The organization's governing board is structured in compliance with the CSBG Act: 1. At least one third democratically-selected representatives of the low-income community; 2. One-third local elected officials (or their representatives); and 3. The remaining membership from major groups and interests in the community.

5.2 - The organization's governing 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.

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

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

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

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

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

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

As Needed/More Frequent than Annually

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

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

5.9 - The organization's governing board receives programmatic reports at each regular board meeting.

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.

7.8 - All staff participate in a new employee orientation within 60 days of hire.

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

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.

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

Annually

4.4 - The governing board receives an annual update on the success of specific strategies included in the Community Action plan.

6.5 - The governing board has received an update(s) on progress meeting the goals of the strategic plan within the past 12 months.

7.4 - The governing board conducts a performance appraisal of the CEO/executive director within each calendar year.

7.5 - The governing board reviews and approves CEO/executive director compensation within every calendar year.

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 Administration Requirements, Cost Principles, and Audit Requirement (if applicable) and/or State audit threshold requirements.

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.

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

8.4 - The governing board formally receives and accepts the audit.

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

8.9 - The governing board annually approves an organization-wide budget.

9.3 - The organization has presented to the governing 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.

9.4 - The organization submits its annual CSBG Information Survey data report and it reflects client demographics and organization-wide outcomes.

Every 2 Years

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

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

5.6 - Each governing board member has signed a conflict of interest policy within the past 2 years.

5.8 - Governing board members have been provided with training on their duties and responsibilities within the past 2 years.

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

Every 3 Years

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

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.

3.1 - The organization conducted a community assessment and issued a report within the past 3 years.

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).

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

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

3.5 - The governing board formally accepts the completed community assessment.

Every 5 Years

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

5.3 - The organization's bylaws have been reviewed by an attorney within the past 5 years.

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

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.

6.3 - The approved strategic plan contains family, agency, and/or community goals.

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

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

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

8.5 - The organization has solicited bids for its audit within the past 5 years.

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