

**COMMUNITY SERVICES BLOCK GRANT
INFORMATION SYSTEM
(CSBG IS)
SURVEY**

of

**FISCAL YEAR 2016
COMMUNITY SERVICES BLOCK GRANT**

by

THE NATIONAL ASSOCIATION FOR STATE COMMUNITY SERVICES PROGRAMS

NAME OF AGENCY:

NAME OF PERSON COMPLETING REPORT:

TELEPHONE NUMBER:

ADDRESS:

PLEASE RETURN BY _____ TO: _____

Section A. State Use of CSBG Funds

1. State Reporting Period (month/day/year)

From: To:

2. Total CSBG funds expended in FY 2016 for:

	Planned	Actual
a. Eligible Entities	<input type="text"/>	<input type="text"/>
b. State Administrative Costs	<input type="text"/>	<input type="text"/>
c. Discretionary Projects	<input type="text"/>	<input type="text"/>
d. Total Funds	<input style="border: 2px solid black;" type="text"/>	<input style="border: 2px solid black;" type="text"/>

3. Of the total in 2d, how much represents carryover funding from the previous fiscal year?

4. Carry-forward of FY 2016 funds to FY 2017 programs

5. State CSBG funds (expended)

6. TOTAL CSBG funds expended by State in FY 2016

Section B. General Information on Local CSBG Agencies

1. Eligible entities receiving FY 2016 funds:

(Please attach a list of eligible entities, their addresses, and their award amounts.)

- a. Number of Community Action Agencies (CAAs) among eligible entities
- b. Number of Limited Purpose Agencies (LPAs) among eligible entities
- c. Number of organizations serving migrant or seasonal farmworkers
- d. Number of these also counted in a or b
- e. Number of tribal organizations
- f. Number of these also counted in a, b, or c
- g. Number of units of local government
- h. Number of these also counted in a, b, c, or e
- i. Others designated eligible by statute
- j. Number of these also counted in a, b, c, e, or g
- k. Total unduplicated number of eligible entities

2. Were previously funded eligible entities dropped in FY 2016?

(If yes, indicate number and reason.) Yes No

Number:

Reason:

3. State allocation method:

(Please select the method that best describes the current practice for allocations within the state.)

- Historic Hold Harmless + Formula
- Base + Formula Other (please specify):
- Formula Alone
- Formula with variables

Section B. General Information on Local CSBG Agencies

4. Coverage of counties

- a. Percent of state's counties receiving CSBG services at year end from local CSBG operators. **a.**
- b. Number of counties newly receiving CSBG services in FY 2016 (if any). **b.**
- c. Name of newly served county(ies) in FY 2016:

5. Uses of Discretionary Project Funds (if listed in Section A, Item 2.c)

- a. What types of organizations received the awards?
1. Indian Tribes or tribal organizations **1.**
 2. Migrant or farmworker organizations **2.**
 3. State subgrantee associations **3.**
 4. Eligible entities **4.**
 5. Other (please specify below):
 5.
- Total Discretionary Funds Expended **Total a.**
- b. For what purposes were the awards given?
1. Awards to local agencies for expansion to new areas **1.**
 2. Grants for exemplary or demonstration programs **2.**
 3. Competitive grants for exemplary or demonstration programs **3.**
 4. Training or technical assistance for local agencies **4.**
 5. Statewide programs **5.**
 6. General support **6.**
 7. Other (please specify below):
 7.
- Total Discretionary Funds Expended **Total b.**

The totals of a. and b. should match both each other and Item 2.c. in Section A.

Section C. General Information on State CSBG Office

1. Please identify the cabinet or administrative department of your state CSBG office.

<input type="checkbox"/> Community Services Department	<input type="checkbox"/> Governor's Office
<input type="checkbox"/> Human Services Department	<input type="checkbox"/> Community Affairs Department
<input type="checkbox"/> Social Services Department	<input type="checkbox"/> Other (please specify):
	<input type="text"/>

2. What is the division, bureau, or office of the CSBG Administrator?

3. Other programs directed by the CSBG Administrator in FY 2016

a. Does the CSBG Administrator also direct DOE Weatherization?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
b. Does the CSBG Administrator also direct part or all of the Low Income Home Energy Assistance Program (LIHEAP) bill payment and/or crisis assistance programs?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
1) If yes, does the CSBG Administrator also direct the LIHEAP energy conservation program?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
c. Does the CSBG Administrator also direct USDA programs? If yes, please list titles.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<input type="text"/>		
d. Does the CSBG Administrator also direct HUD programs? If yes, please list below:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<input type="text"/>		
e. Does the CSBG Administrator also direct any other federal programs for the homeless?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
f. How many federal or state programs not listed above are also directed by the CSBG Administrator? (List titles of other programs below, including Head Start):	<input type="text"/>	
<input type="text"/>		

Section C. General Information on State CSBG Office

4. Was the state CSBG office subject to a reorganization in FY 2016, such as an expansion or contraction of programs, or a transfer of the CSBG office to a different division or department? Yes No

If yes, please describe the change (attach an extra page if necessary):

5. State statute regarding CSBG:

a. Does your state have a statute authorizing Community Services programs? (If yes, please attach.)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
b. Did your state legislature enact authorizing legislation, or amendments to an existing authorizing statute during FY 2016?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<i>Please check those items which describe provisions of the current statute.</i>		
1) What is the termination date of the current statute?	<input type="text"/>	
2) Does it "grandfather" CAAs?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
3) Does it specify the terms, or formula, for allotting 90% pass-through funds among eligible entities?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4) Does it require local grantees to match CSBG funds?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
5) Does it provide for the designation of new eligible entities?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
6) Does it provide for the de-designation of eligible entities?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
7) Does it specify a process the state CSBG agency must follow to re-designate an existing eligible entity?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
8) Does it designate the bureau, division, or office in state government that is to be the state administering agency?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
9) If it has other provisions, please list them:	<input type="text"/>	

6. a. Did it cost more in FY 2016 than the federally allowed limit in your state's CSBG allocation for your state to effectively administer the range of services and activities required by the CSBG Act? Yes No
- b. If yes, what was the amount of these extra costs?
- c. If yes, were state funds used to supplement federal administrative expenditures? Yes No
- d. If yes, what was the amount of the supplemental state funds?
7. a. How many state positions were funded in whole or in part by CSBG funds?
- b. How many Full Time Equivalent (FTEs) were funded with CSBG funds?
8. a. How many National peer-to-peer ROMA trained staff work in the State Office?
- b. How many Certified Community Action Professionals (CCAPs) work in the State Office?

Section D: Accomplishments and Coordination of Funds

➤ Please do not use acronyms, and submit responses on a separate sheet.

1. Strategic Thinking for Long-Term Solutions

- a. Please describe an agency strategy which addresses a long-term solution to a persistent problem affecting members of the low-income community. Address the following questions:
 - i. How did the agency identify the community need?
 - ii. How were CSBG funds used to plan, manage, and/or develop the approach?
 - iii. What local partners were involved, and how did each contribute to the program?
 - iv. What outcome indicators did the agency use to measure success?
 - v. What outcomes have resulted in FY 2016? If no outcomes yet, when?

2. Delivering High-Quality, Accessible, and Well-Managed Services

- a. Please describe what you consider to be the top management accomplishment achieved by your State CSBG office during FY 2016. Show how responsible, informed leadership led to effective and efficient management of CSBG.

Top State Management Accomplishment:

- b. Please describe what you consider to be the top three management accomplishments achieved by your agencies during FY 2016. Show how responsible, informed leadership and effective, efficient processes led to high-quality, accessible, and well-managed services.

Top *Three* Agency Management Accomplishments:

- 1.
- 2.
- 3.

Section D: Accomplishments and Coordination of Funds

3. Mobilizing Resources to Support Innovative Solutions

- a. Please describe how your agency addressed a cause or condition of poverty in the community using an innovative or creative approach. Showcase how your agency relied on mobilization and coordination of resources to help reach interim and final outcomes. Demonstrate how CSBG “works” as it funds staff activities, investments, or services to meet a community need. Include the following elements:
- i. Agency name (no acronyms please)
 - ii. Program name
 - iii. CSBG service category
 - iv. Description of program (capacity, duration, targeted population, etc.)
 - v. How was the agency’s approach innovative or creative? Please be specific.
 - vi. Outcomes achieved (include the number of people enrolled and areas affected)
 - vii. How were CSBG funds used? Please be specific.
 - viii. What local partners were involved, and how did each contribute to the program?

4. Providing Positive Results for Vulnerable Populations

- b. Please describe one youth-focused initiative that illustrates how CSBG funding was used and coordinated with other programs and resources. Include the following elements:
- i. Description of initiative
 - ii. What local partners were involved, and how did each contribute to the program?
 - iii. Outcomes achieved (include the number of people enrolled and areas affected)
 - iv. How were CSBG funds used? Please be specific.
- c. Please describe one senior-focused initiative that illustrates how CSBG funding was used and coordinated with other programs and resources. Include the following elements:
- i. Description of initiative
 - ii. What local partners were involved, and how did each contribute to the program?
 - iii. Outcomes achieved (include the number of people enrolled and areas affected)
 - iv. How were CSBG funds used? Please be specific.