National Association for State Community Services Programs



Organization Standards, Fitting Together

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MN Dept. of Human Services

Minnesota Overview

Community Action programs are delivered by a statewide network of **24** Community Action Agencies and **11** tribal governments that serve all counties in Minnesota.

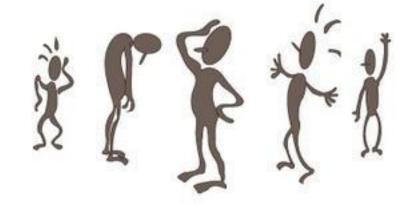
- \$6.3 Million in Federal CSBG
- \$3.9 in State MN Community Action

Funds are used to focus local, state, private and federal resources on supporting families and individuals with low incomes to attain the skills, knowledge and motivation to become economically secure.



MN Standards Rollout - Timeline

- Notification, September 2015
 - Letter, Organizational Standards Guidebook
- Preliminary Self-Assessment, November 2015
- Final Self-Assessment, July 2016
- Demonstration of Achievement, September 2016
 - Documentation submission due January, 2017
- Agency Feedback and Statewide Summary, June 2017







State of Minnesota Organizational Standards Summary:

| | Number of | |
|---------------|-----------|-----------|
| Percentage of | Standards | Number of |
| Standards Met | Met | Agencies |
| 100% | 58 | 2 |
| 90-99% | 52-57 | 12 |
| 80-89% | 46-51 | 6 |
| 70-79% | 40-45 | 2 |
| 0-69% | 0-39 | 4 |
| | TOTAL | 24 |

Table 1: Number of CAAs in CSBG Organizational Standards Reporting Categories, Statewide

Table 2: Averages, per agency, for all Organizational Standards, Statewide:

| | Average number of standards in each category, |
|-------------|---|
| Category | per agency |
| Met | 48.3 |
| In Progress | 7.1 |
| Unmet | 2.6 |
| | |
| Met | 48.3 |
| Not Met* | 9.7 |

Table 3: Highest percent of Organizational Standards Not Met, Statewide:

| Standard | Percentage Not Met (both In Progress and Unmet) | Description of Standard | | |
|----------|---|--|--|--|
| 5.7 | 46% | The organization has a process to provide a structured orientation for governing board members within 6 months of being seated. | | |
| 6.5 | 46% | The governing board has received an update(s) on progress meeting the goals of the strategic plan within the past 12 months. | | |
| 4.6 | 46% | An organization-wide, comprehensive risk assessment has been completed within the past 2 years and reported to the governing board. | | |
| 1.3 | 42% | The organization has a systematic approach for collecting, analyzing, and reporting customer satisfaction data to the governing board. | | |

TAP and QIP

- July 2017- training and technical assistance survey
 - Results will feed MN's Statewide TAP
- Documentation can be resubmitted in December 2017
- In Progress: Updated monitoring tools
- One QIP in process: a result of a combined monitoring concerns and low organization standards scoring





QIP Steps

- Notice of Deficiency
 - This letter serves as notification that the Minnesota Department of Human Services
 (DHS) Office of Economic Opportunity (OEO) has determined xxx to have performance
 deficiencies in the following areas of Community Services Block Grant (CSBG)
 Organizational Standards, as well as additional deficiencies identified through
 monitoring that require corrective action. The scope and nature of these deficiencies
 have gone beyond those typically addressed in a Community Action Technical Assistance
 Plan and have instead been included in the attached Quality Improvement Plan (QIP).
 Below is a summary of the areas of deficiency and required next steps.
 - CSBG Standard Areas of Deficiency

XX XXX

Additional Areas of Deficiency Identified Through Monitoring







Example

| Maximum Feasible Participation – Category 1: Consumer Input and Involvement | | | TO BE COMPLETED BY AGENCY | | | | |
|--|--|---|--------------------------------------|------------------------------------|------------|----------------------|--|
| CSBG Organizational Standard | Evidence of Deficiency | Outcome(s) to be achieved | Proposed Steps to Resolve Deficiency | Documents to Show Compliance | Completion | Responsible Party(s) | |
| 1.3 The organization has a systematic approach for collecting, analyzing, and reporting customer satisfaction data to the governing board. | Information submitted showed that customer satisfaction data was collected as part of the CNA, but not as part of an on-going, systematic process for all programs, reported regularly to the governing board. | An agency-wide process for collecting customer satisfaction data from all programs, with aggregate results reported regularly to the governing board. | | | | | |

Thank You

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Monitoring for the Org. Standards

Katie Castern

Wisconsin Dept. of Children and Families

CSBG in Wisconsin





1 contract manager, in the Dept. of Children and Families, within the bureau that manages the state's TANF program



Two Steps for Monitoring for the Org. Standards



Regular onsite monitoring visits



Annual desk audit with emailed documentation





Annual Org. Standards Desk Audit

- Agencies get desk audit forms by August 1, must complete them by October 1.
- Individualized forms carry information over from year-to-year as appropriate.
- The goal is to minimize the burden on agencies by not requiring them to share the same information more than once.

Example 2017 Desk Audit Form

| Agency Name: NCCAP | Date of Last Onsite CSBG Monitoring Visit: July 30 and 31, 2015 | | | | |
|--|---|---|--|--|--|
| | | Date of Completion: | | | |
| | | Contact Person: | | | |
| Maximum Feasible Participation – Category 1: Consumer Input and Involvement | Is the agency meeting this Standard? | Description of how the agency is meeting this Standard. | Documentation provided by the agency to demonstrate compliance with the Standard | | |
| 1.1) The organization demonstrates low-income participation in its activities. | Yes | Participation in Board of Directors Low- | Board Roster. Survey Tool | | |
| 1.2) The organization analyzes information collected directly from low-income individuals as part of its triennial community needs assessment. | Yes | The Community Needs Assessment included a survey of low-income community members. | 2016 Community Needs Assessment | | |
| 1.3) The organization has a systematic approach for collecting, analyzing, and reporting customer satisfaction data to the governing board. | | | | | |
| Maximum Feasible Participation – Category 2: Community Engagement | Is the agency meeting this Standard? | Description of how the agency is meeting this Standard. | Documentation provided by the agency to demonstrate compliance with the 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. | Yes | NCCAP participates in numerous collaborations | Coalition Rosters and minutes. | | |
| 2.2) The organization utilizes information gathered from key sectors of the community in assessing needs and resources. This would include at minimum: community-based organizations, faith-based organizations, private sector, public sector, and educational institutions. | Yes | Community Partner Surveys | Survey Results (online) | | |
| 2.3) The organization communicates its activities and its results to the community. | Yes | Annual Reports | Agency website, 2015 Annual Report | | |
| 2.4) The organization documents the number of volunteers and hours mobilized in support of its activities. | Yes | DCF has observed that the agency is meeting this standard. | 2016 IS Survey | | |

Technical Assistance Plans

Each agency must complete a Technical Assistance Plan (TAP) to describe its plans and set a timeline for complying with any Standards it is not meeting at the time of the Desk Audit.

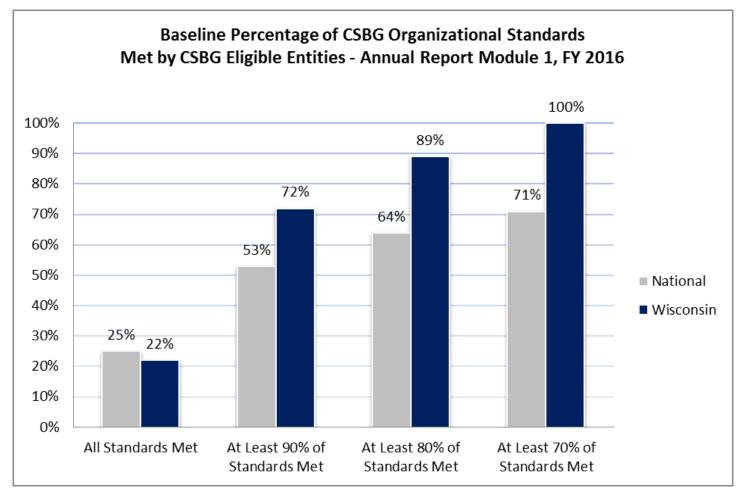




Example Technical Assistance Plan

| | CSBG Organization | nal Stand | ards Technical Assi | stance | Plan | | |
|--------------------------------|---|-----------------------------------|---|------------------|-------------------------------------|-----------|---|
| | Agency Name: | CAP Services | res Date: 1- | | 1-Ma | Лау-17 | |
| Unmet CSBG | | | | Action Status | | | |
| Organizational Standard Number | Performance Improvement Deliverable | Anticipated Completion Date | Agency's actions taken to date | Not Corrected | Corrective Action in Progress | Corrected | Comments - Updates |
| 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). | 4.3.2017 | CAP Services' staff will complete an amendment to the Community Needs Survey report that includes gender, age, ethnicity/race for the service area and present it to the Board of Directors at its March meeting. CAP will also incorporate this in future assessments. | | | x | Agency provided a copy of the amendment and March 2017 board minutes document the amendment presentation. |
| 8.9 | The governing board annually approves an organization-wide budget. | 4.3.2017 | CAP services' will prepare an organization-wide budget for presentation and approval by its Board at the March 2017 meeting. | | | х | Agency provided March 2017 board minutes that document board approval of the organization-wide budget. |

Year 1 Results - 2016





Positive Results

- 28 of the Org. Standards (almost half) were met by 100% of the agencies in 2016.
- Agencies have made many improvements to their operations in order to meet the Org. Standards:
 - ✓ Boards are receiving better information
 - ✓ New strategic planning activities
 - ✓ More consistent employee and CEO performance evaluations



Org. Standards with lowest "met" rates in Year 1

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



Challenges



Staying organized! (State office)



Staying on top of standards that require annual action (CAAs)



Documenting actions related to the Org Standards clearly in board minutes (CAAs)

