Virginia Organizational Standards Documentation

A Resource for Public Virginia Community Action Agencies

Virginia Office of Economic Opportunity

Updated 11/2024

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Introduction:

The **CSBG Organizational Standards** are a comprehensive set of guidelines developed with input from the entire CSBG Network, following a three-year, multi-phase process led by the Center of Excellence. These standards were officially introduced in January 2015 through the Office of Community Services (OCS) release of Information Memorandum (IM) 138, which directed states to establish Organizational Standards for CSBG-eligible entities by fiscal year 2016.

The standards are grouped into three thematic areas, covering nine categories and totaling **58 standards for private, nonprofit entities** and **50 standards for public entities**. The purpose of these standards is to ensure that all Community Action agencies possess the necessary organizational capacity in critical areas, including financial management, administration, and other areas vital to the mission of the Community Action Network.

In Virginia, the **Office of Economic Opportunity** has been assessing agency adherence to these standards annually since 2016. Our goal is to support all agencies in the state in meeting the intent of the Organizational Standards and ensuring that they are in full alignment.

This document includes a variety of tools designed to assist your agency in meeting the CSBG Organizational Standards, providing guidance and resources to strengthen your organization's capacity and effectiveness.

Definitions:

Unmet Standards: These are standards that have never been met since the Organizational Standards process started in 2016. These are also standards that have been marked as needing attention for more than one year.
Needing Attention: These are standards that have been met in the past but need updated information in order to marked met again. For standards that have a deadline, they will be due at their specified time. For those that do not have a deadline within the standard the expectation is that updated information will be submitted at least every 3 years or sooner as available.
Met standards: These are standards that the documentation provided is up to date and accurately shows the agency is completing the requirement.

The standards that are due annually will be reviewed October, agencies should submit documentation for standards due annually in September.

Each Standard is categorized into one of six categories below:
1. Annually
2. Every 2 years
3. Every 3 years
4. Every 5 years
5. Due every 3 years with monitoring visit
6. No documentation needed

Standards in bold below require board action.

Due Annually

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

- **7.4 The department follows local government procedures for performance appraisal of the department head.**
- **7.5 The compensation of the department head is made available according to local government procedure.**
- 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.
- **8.2 The department follows local government procedures in addressing any audit findings related to CSBG funding.**
- **8.3 The department's tripartite board/advisory body is notified of the availability of the local government audit.**
- **8.4 The department's tripartite board/advisory body is notified of any findings related to CSBG funding.**
- **8.6 Not Applicable**
- **8.9 The tripartite board/advisory body has input as allowed by local governmental procedure into the CSBG budget process.**
- **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.**

Due Every 2 years

- **4.6 The department complies with its local government's risk assessment policies and procedures.**
- **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.**
- **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**
- **5.8 Tripartite board/advisory body members have been provided with training on their duties and responsibilities within the past 2 years.**
- 8.10 Not applicable

Due Every 3 years

- 1.2 The department analyzes information collected directly from low-income individuals as part of the community assessment.
- 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.
- 3.1 The department conducted or was engaged in a community assessment and issued a report within the past 3 years, if no other report exists.
- 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).
- 3.3 The department 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 tripartite board/advisory body formally accepts the completed community assessment.**

Due Every 5 years

- **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.**
- 5.3 Not applicable
- **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.**
- 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.
- 6.3 The approved strategic plan, or comparable planning document, 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, or comparable planning process.
- **7.1 Not applicable**
- 7.3 The department has written job descriptions for all positions. Updates may be outside of the purview of the department.
- 8.5 Not Applicable.
- **8.11 Not Applicable.**

Maintain/ As Needed – new documentation should be uploaded at least every 3 years when monitored

- 1.1 The department demonstrates low-income individuals' participation in its activities.
- 1.3 The department has a systematic approach for collecting, analyzing, and reporting customer satisfaction data to the tripartite board/advisory body, which may be met through broader local government processes.
- 2.1 The department has documented or demonstrated partnerships across the community, for specifically identified purposes; partnerships include other antipoverty organizations in the area.
- 2.3 The department communicates its activities and its results to the community.
- 4.3 The department's Community Action plan and strategic plan document the continuous use of the full Result Oriented Management and Accountability (ROMA) cycle or comparable system (assessment, planning, implementation, achievement of results, and evaluation). In addition, the department documents having used the services of a ROMA-certified trainer (or equivalent) to assist in implementation.
- **4.5 The department adheres to its local government's policies and procedures around interim appointments and processes for filling a permanent vacancy.**
- **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.**
- **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.**
- **5.7 The department has a process to provide a structured orientation for tripartite board/advisory body members within 6 months of being seated.**
- **5.9 The department's tripartite board/advisory body receives programmatic reports at each regular board/advisory meeting.**
- 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.

- 7.6 The department follows local governmental policies for regular written evaluation of employees by their supervisors.
- **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.**
- 7.8 The department follows local governmental policies for new employee orientation.
- 7.9 The department conducts or makes available staff development/training (including ROMA) on an ongoing basis.
- **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.**
- 8.8 not applicable.
- 8.12 not applicable.
- 8.13 The department follows local governmental policies for document retention and destruction.

Standards that do not need documentation:

The following standards will be met by submitting the CAP plan and quarterly reports in CSBG Reporter. No documentation will need to be uploaded.

- 2.4 The department documents the number of volunteers and hours mobilized in support of its activities.
- 4.2 The department's Community Action plan is outcome-based, anti-poverty focused, and ties directly to the community assessment.
- 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.
- 9.1 The department has a system or systems in place to track and report client demographics and services customers receive.
- 9.2 The department has a system or systems in place to track family, agency, and/or community outcomes.
- 9.4 The department submits its annual CSBG Information Survey data report and it reflects client demographics and CSBG-funded outcomes.

Helpful Resources:

- NCAP – Organizational Standards Resource Portal
- Calendar of Board Actions
- CAPLAW – Organizational Standards Resource Guide
- CSBG Reporter User Guide

Documentation Chart

The chart below details each standard, along with the criteria for classification as unsatisfactory, satisfactory, or beyond compliance. It also specifies the documentation that will be reviewed to assess whether the standard is met. We hope your agency can utilize this chart as you are reviewing and preparing to upload your organizational standards.

	Unsatisfactory	Satisfactory	Beyond Compliance	Documentation Used
Category 1: Consumer Input & Involvement				
1.1	My department has no low-income participation on the tripartite board/advisory body and has very limited participation in activities (e.g. in only one activity once a year)	**The department demonstrates low-income individuals' participation in its activities.**	My department has a recruitment strategy for engaging low-income individuals in organizational activities and events. There are opportunities for capacity building of low income individuals that are advertised and encouraged (e.g. trainings, meeting facilitation, event planning).	• Board recruitment documents, including solicitation materials, and final Board membership list • Board minutes documenting conversations about recruitment and the involvement of low-income individuals in activities • Participation lists, group documents, and minutes from agency advisory bodies • Volunteer recruitment materials, and tracking/sign-in documents or accompanying forms
1.2	My department utilizes client data and outcomes in the community assessment, but does not engage or seek input directly from low-income individuals in the community during the assessment process.	**The department analyzes information collected directly from low-income individuals as part of the community assessment.**	My department analyzes information from low income clients and other low-income individuals in the community and compares that data with historical feedback for inclusion in the final assessment report.	1. Low-income individuals were consulted directly • Transcripts from interviews with low-income clients or community members • Notes from community forums or focus groups that included low-income individuals • Methodology section of report that details process to include low-income individuals 2. This was a part of the community assessment process • The community assessment report with methodology on inclusion of low-income individuals, appendices of notes from when low-income people were consulted • Dates on forum, focus group, interview, and analysis notes that are within the timeframe of the community assessment process for the agency 3. The information collected was analyzed • 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
1.3	My department collects customer satisfaction data and infrequently provides the raw data to the tripartite board/advisory body.	**The department has a systematic approach for collecting, analyzing, and reporting customer satisfaction data to the tripartite board/advisory body, which may be met through broader local government processes.**	My department continuously collects and analyzes customer satisfaction data and provides a formal report inclusive of recommendations to the tripartite board/advisory body.	1. There is a system and strategy in place • Customer satisfaction policy and/or procedures. (timing of collection, staff responsible, level of analysis, and process for reporting) • Schedule for customer satisfaction data collection. (dates of dissemination, projected return dates, time scheduled for analysis, and date for presentation to the Board) 2. The data is collected and analyzed • Customer satisfaction instruments e.g., survey, form, postcard etc. • Report that analyzes the customer satisfaction data to be shared with the organization's leadership, the Board, or the community. 3. The data is reported to the governing board

				• Board or appropriate committee meeting minutes where the customer satisfaction report was shared and discussed.
Category 2: Community Engagement				
2.1	Our department has a list of partners but no documentation that shows what these partnerships entail or achieved	**The department has documented or demonstrated partnerships across the community, for specifically identified purposes; partnerships include other anti-poverty organizations in the areas.**	Our department has documented partnerships across the community, for specifically identified purposes; partners continue to provide services independently, but also are engaged in some joint activities that are coordinated and designed for specific populations. If our department contracts with other service providers, it encourages them to develop and document key partnerships.	• MOUs, contracts, and agreements with documented outcomes • Coalition membership(s) information
2.2	Our department does not utilize information gathered from key sectors of the community in assessing needs and resources, during the community assessment process or other times.	**The department utilizes information gathered from key sectors of the community in assessing needs and resources, during the community assessment process or other times.**	Our department utilizes information gathered from key sectors of the community to set goals and objectives set by discussion and agreement of majority of partners; our targets are specific and measurable.	• Summarizing the data in the community assessment or its appendices, for example, listing of all stakeholders engaged by sector in community needs assessment • Documentation of phone calls, surveys, interviews, focus groups in CAA files (hard copy or electronic) • Documentation in planning team minutes • Summary reports on the data shared at board meetings or board committees; and • Reports from key partners (online/written)
2.3	Our department does not communicate its activities nor our results to the community.	**The department communicates its activities and its results to the community.**	Our department has a communication strategy in place (or works with parent agency communications department) to consistently communicate its activities and its results to the community.	• CAA annual report • Website • Documentation of social media activity (Facebook page, Twitter account, etc…) • Media files of stories published • New release copies • Community event information • Communication plan
2.4	Our department does not document the number of volunteers and hours mobilized in support of our activities.	**The department documents the number of volunteers and hours mobilized in support of its activities.**	Our department documents the number of volunteers and hours mobilized in support of our activities and includes the program areas supported by volunteer support. If our department contracts with other service providers, we require them to document the number of volunteers and hours mobilized	No Documentation Needed – Volunteer Hours should be documented on the annual 4th quarter report.

			for all CSBG funded programs and services.	
Category 3: Community Assessments				
3.1	My department has completed a needs assessment in the last three years but has not issued a report or we have not completed a needs assessment in the last three years and not making adequate progress on the needs assessment currently underway.	**The department conducted a community assessment and issued a report within the past 3 years.**	My department has completed a Community Assessment that compares department data to assessment data, integrates across issue areas, matches causes and conditions, and presents to the tripartite board/advisory body for analysis and discussion.	• A physical or electronic copy of the report • Confirmation of the date the CNA was completed (e.g. press release, board minutes, email or web page time stamp)
3.2	My department includes current data specific to poverty and its prevalence only on one or two of the following areas: gender, age, and race/ethnicity.	**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).**	As part of the community assessment, my department compares our data on client gender, age, and race/ethnicity characteristics with those of the assessment data.	• Documentation that confirms collection of poverty data regarding gender, age, and race/ethnicity • Documentation that confirms the data is current • Documentation that confirms the data is from the entire service area • Refer to your agencies equity plan and show evidence of discussions on how equity influences the delivery of programs and services.
3.3	My department has either qualitative or quantitative data in the needs assessment but not both and limited data analysis.	**The department collects and analyzes both qualitative and quantitative data on its geographic service area(s) in the community assessment.**	Our department collects current qualitative and quantitative data across the annual report categories and has begun to integrate and analyze between issue categories and across data sources.	• Data collection procedures • Data analysis procedures • Quantitative and qualitative data • Coverage of the service area
3.4	Our community assessment includes key findings summarizing the conditions of poverty, but does not comment on the associated causes.	**The community assessment includes key findings on the causes and conditions of poverty and the needs of the communities assessed.**	Our community assessment includes key findings and matches the causes of poverty with their according conditions in the communities assessed.	• Key findings section
3.5	Our tripartite board/advisory body discussed or reviewed the completed community assessment but did not take formal action or did not document that formal action in its minutes.	**The tripartite board/advisory body formally accepts the completed community assessment.**	Our tripartite board/advisory body formally accepts the completed community assessment after analysis and discussion.	• Board approval in minutes • Board Pre-Meeting Materials/Packet
Category 4: Organizational Leadership				

4.1	Our department has a mission statement, but it does not include both elements and/or documentation of review within the past five years is not available.	**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.**	Our tripartite board/advisory body routinely reviews and applies the mission in making decisions about development of the Strategic Plan.	• Minutes from a board meeting or board retreat that shows that the tripartite board/advisory body reviewed the mission statement and that the Standard's requirements were met. • A Strategic Plan that includes the mission statement, the process of review and other comments. • The mission statement itself with Board review date noted.
4.2	Our Community Action Plan does not include at least one of the three required elements.	**The department's Community Action Plan is outcome-based, antipoverty focused, and ties directly to the community assessment.**	Our department develops its Community Action Plan utilizing updated data in years that the full Community Assessment is not conducted.	No documentation is needed, this standard is assessed through conversations with the agency and through review of the Community Action Plan.
4.3	ROMA or equivalent cycle is not used in our department, or is not evident in our department's materials.	**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 organization documents having used the services of a ROMA certified trainer (or equivalent) to assist in implementation.**	Our department has a ROMA trainer on staff to continuously provide support for incorporating the ROMA cycle into activities.	• Documentation tool or other narrative speaking to the full ROMA cycle and the involvement of a certified ROMA trainer
4.4	Our tripartite board/advisory body received an update on the Community Action Plan, but not each year and/or the documentation in the minutes is not present.	**The tripartite board/advisory body receives an annual update on the success of specific strategies included in the Community Action Plan.**	Our tripartite board/advisory body receives updates on the success of strategies included in the Community Action Plan more frequently than annually.	• Board minutes showing the date that the update was given to the board • Board packet with any reports, materials given, or time on the agenda for updates • Report or update document
4.5	Our department adheres to some, but not all, of local government policies and procedures around interim appointments and processes for filling a permanent vacancy. The department adheres to its local government's policies and procedures around interim appointments and processes for filling a p	**The department adheres to its local government's policies and procedures around interim appointments and processes for filling a permanent vacancy.**	Our department adheres to local government policies and procedures and also has succession plans in place for other management positions and board officers.	• A copy of the local government policies and procedures related to filling temporary and permanent vacancies in the department's executive function; and • A brief narrative on how the department adheres to the policies and procedures along with any necessary documentation (e.g. required planning documents).
4.6	Our department adheres to some, but not all, of local government policies and	**The department complies with its local government's risk**	Our department has written procedures for how issues raised	• A copy of the local government policies and procedures related to risk assessment

	procedures around risk assessment.	**assessment policies and procedures.**	by the risk assessment will be followed up on and addressed.	• 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).
Category 5: Board Governance				
5.1	Our bylaws/governance documents reference the tri-partite structure but the board does not reflect this.	**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.**	Our low income board seats are filled with people living in low-income communities, standing committees that have the power to act on behalf of the board (such as the executive committee) have a tripartite structure.	No documentation is needed, this standard is assessed through the board roster that is entered into CSBG Reporter. Please keep the roster updated.
5.2	We do not have a written democratic selection process but the board is seated with 1/3 being representatives of the low income community. The low income representatives do not live in the service area.	**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.**	Our written procedure for selection is followed and reviewed by the board (or appropriate committee) every five years to assess its success and modified as needed.	• Board policies and procedures • Board Minutes • Board Governing Documents/ Bylaws

5.3	Not Applicable to publics	Not Applicable to publics	Not Applicable to publics	•

5.4	Our board members received a copy at the start of their board services but have not received a copy in the past 2 years.	**The department documents that each tripartite board/advisory body member has received a copy of the governing documents, within the past 2 years.**	All board members received a copy of our bylaws/governing documents within the past two years and a board committee has reviewed them.	• In order to meet Organizational Standard 5.4, board members need to receive a copy of the CAA's governing document/bylaws at least every two years. This can be in hard copy format or distributed electronically.
				• Acknowledgement of receipt can be done in several ways including but not limited to:
				  • Sign in list completed when documents are distributed at a board/advisory body meeting
				  • Email confirmation of receipt
				  • Meeting minutes documenting their distribution and noting those in attendance

5.5	Our board/advisory body met fewer times than required in the bylaws/governing documents and/or our board filled vacancies, but outside of the length of time needed to fill them as outlined in our bylaws.	**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.**	Our board/advisory body's standing committees met periodically throughout the year. Vacancies were filled in a timely manner.	• Board minutes • Board rosters • Bylaws
5.6	Our board/advisory body members have signed a conflict of interest policy or comparable document but not in the past 2 years	**Each tripartite board/advisory body member has signed a conflict of interest policy, or comparable local government document, within the past 2 years.**	Our board/advisory body members sign a conflict of interest policy (or other comparable document) annually and engages in discussion on real and perceived conflicts.	• Collect signed copies, keep on file at CAA • Review CAPLAW's Tools for Top-Notch CAAs for key provisions of a good policy • See also, IM 82 for guidance
5.7	Our CAA has a process for new board/advisory body orientation but there is no time period specified, or it is longer than 6 months of being seated	**The department has a process to provide a structured orientation for tripartite board/advisory body members within 6 months of being seated**	Our CAA has implemented the board/advisory body orientation process as described for all new board member and all new members (in the past year) have attended.	• Board orientation should include information on the agency, roles of board members and CSBG. • New board members need to be informed of the orientation and attend the orientation.
5.8	Training has been provided to our board/advisory body but not in the past two years.	**Tripartite board/advisory body members have been provided with training on their duties and responsibilities within the past 2 years.**	Training has been provided in the past year. Our board/advisory body members are given an opportunity to access training annually.	• Public CAAs at times may be required to provide ethics or other mandated training to board/advisory body members as per the requirements of the local governmental unit. Provision of such training may be used to meet the requirements of this Standard. • 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. Options would include but not be limited to: 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.
5.9	Our board/advisory body received programmatic reports periodically but not at each board meeting.	**The department's tripartite board/advisory body receives programmatic reports at each regular board/advisory meeting.**	Our board/advisory body has received programmatic reports, addressing outcomes achieved, that have been thoroughly discussed in a program committee (or equivalent) meeting.	• Organizational Standard 5.9 does not require a report on each program at every board meeting; however it does call for some level of programmatic reporting at every board meeting. Organizations determine their own process to report programs to the board. For example, some organizations may cycle through their programs semi-annually, others may do so on a quarterly basis, and yet others may do a brief summary at every board meeting. • Board minutes that reflect that programmatic reports have been provided and received by the full board would suffice as documentation. Programmatic reporting may be in writing (reports, dashboards) and/or be presented verbally.
Category 6: Strategic Planning				
6.1	Our department/parent agency has a strategic plan in place but it does not specifically address CSBG funded programs, the strategic plan is not approved by the governing board, and/or the strategic plan has not been approved by the tripartite board/advisory body within the past five years.	**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.**	Our department/parent agency conducts a strategic planning process every three years, involves the tripartite board/advisory body throughout the process, and engages other public agencies and/or its contractors as part of the process	• A copy of the completed strategic plan, including its date of completion; and • Tripartite board/advisory body minutes that reflect formal approval of the completed strategic plan by the full board.
6.2	Our department has a strategic plan in place, but it does not address reduction of poverty, revitalization of low-income communities, or empowerment of people with low incomes to become more self sufficient.	**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.**	The approved strategic plan connects the findings of the Community Assessment to the goals stated in the strategic plan related to reduction of poverty, revitalization of low-income communities, and/or empowerment of people with low incomes to become more self-sufficient.	• A copy of the strategic plan with goals that explicitly incorporate one or more of the three objectives listed in Standard 6.2; or • A short section in the strategic plan or a similar summary statement that clearly explains how one or more of the strategic plan goals directly addresses one or more of the three objectives
6.3	Our department has a strategic plan in place, but does, but it does not include family, agency, and/or community goals.	**The approved strategic plan, or comparable planning document, contains family, agency, and/or community goals.**	Our departments approved strategic plan addresses all three elements: family, agency, and community.	• Highlighted sections of the strategic plan that directly address one or more of the three goals • Brief narrative that explains how the strategic plan addresses one or more of the three goals and a copy of the strategic plan
6.4	Our department collects some customer satisfaction data and customer input, but does not include it as part of the data	**Customer satisfaction data and customer input, collected as part of the community assessment, is included in the**	Our department board can demonstrate how customer satisfaction data impacted the strategic planning process.	• Customer satisfaction data --Copy of customer satisfaction survey --Results of customer satisfaction surveys • Customer input --List of methods used to gather customer input --Samples of customer input

	gathered during the community needs assessment.	**strategic planning process, or comparable planning process.**		• Use of customer satisfaction data and input in strategic planning process --Agendas of strategic planning committee meetings --Highlighted sections of strategic plan --Narrative description
6.5	Our tripartite board/advisory body has received a partial update on the progress of meeting the goals of the strategic plan/comparable planning document by only updating particular domains and/or not meeting the time frame of the past 12 months.	**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.**	Our tripartite board/advisory body receives quarterly updates on progress meeting all the goals of the strategic plan.	• Copies of presentation made to the board on progress towards meeting the goals of the strategic plan • Board minutes reflecting review of the update
Category 7: Human Resource Management				
7.1	Not Applicable for Publics	Not Applicable for Publics	Not Applicable for Publics	•
7.2	My department has not been found out of compliance with local government procedure regarding availability and notification of changes to the employee handbook but we can't produce the procedure and/or provide evidence that we follow it.	**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.**	In addition to making available the employee handbook and notifying staff of any changes, my department provides regular and consistent communication on policy interpretation.	• A physical or electronic copy of the Personnel Policies, including the signatory page • A process or procedure document for staff communication (which may be included with the handbook/policies) • Documentation of location and availability of the Personnel Policies • Samples of agency communication of policy change notification to staff
7.3	My department has job descriptions, but not for all positions within the department. The department has written job descriptions for all positions. Updates may be outside of the purview o	**The department has written job descriptions for all positions. Updates may be outside of the purview of the department..**	My department has written job descriptions for all positions, which have been reviewed and updated within the past 5 years and whenever a position changes significantly.	• Organizational chart(s) • Staff lists with role titles • Standard job description template • Alternative job description templates • Sample job descriptions (or all job descriptions, depending on the state)
7.4	My department has not been found out of compliance with local government procedures regarding the appraisal of the department head, but we can't produce the procedure and/or provide evidence that we follow it.	**The department follows local government procedures for performance appraisal of the department head.**	My tripartite board/advisory body provides a supplement to the appraisal criteria of the department head to reflect the department's strategic vision and goals.	• Policy/procedures pertaining to performance appraisals • Performance appraisal sign-off • Blank appraisal forms • Where salary information is posted
7.5	My department has not been found out of compliance with local government procedures regarding making available	**The compensation of the department head is made available according to local government procedure.**	My tripartite board/advisory body discusses the department head's compensation package as part of	• Policy/procedures pertaining to performance appraisals • Performance appraisal sign-off • Blank appraisal forms

	department head compensation, but we can't produce the procedure and/or provide evidence that we follow it.		our budgeting and planning process.	• Where salary information is posted
7.6	My department has not been found out of compliance with local government procedures regarding employee evaluations, but we can't produce the procedure and/or provide evidence that we follow it.	**The department follows local governmental policies for regular written evaluation of employees by their supervisors.**	My department trains supervisors in how to conduct employee evaluations in accordance with the local government policy.	• Physical or electronic copy of evaluation policy/process/procedure, likely found in personnel policies • Blank assessment form(s)
7.7	My organization has a whistleblower policy that has not been reviewed or approved by our governing board in the past year.	**My department has provides a copy of our existing local government whistleblower policy (or notes that none exists), but do not have documentation to show that it was part of the orientation process.**	My department provides examples and explanation of the whistleblower policy during the orientation for new tripartite board/advisory body members.	• Whistleblower policy • Board minutes • Board pre-meeting materials/packet • Orientation packet/agenda • Sign-ins or acknowledgement page from orientation
7.8	My department has not been found out of compliance with local government policies regarding new employee orientation, but we can't produce the procedure and/or provide evidence that we follow it.	**The department follows local governmental policies for new employee orientation.**	My department provides new employee orientation that is specific to the individual workplace, including handbook information and preparation for the culture and expectations of the workplace.	• Personnel Policies or Employee Handbook • Orientation checklist(s) • Orientation presentation or materials • Onboarding presentation or materials • Sampling of HR/personnel files for documentation of attendance
7.9	My department conducts or makes available staff development/training to some or all employees but it does not include ROMA theory, concepts or application.	**The department conducts or makes available staff development/training (including ROMA) on an ongoing basis.**	My department conducts and/or makes available staff development/training that includes ROMA and is specific to the individual's role and responsibilities within the organization.	• Training plan(s) • Documentation of trainings: presentations, evaluations, attendee lists • Documentation of attendance at offsite training/events/conferences
Category 8: Financial Operations & Oversight				
8.1	The department's audit was not conducted 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.	**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**	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. Audit adjustments were few or none.	• A physical copy of the audit report and related information • An electronic copy of the audit report and related information.

		may be included in the municipal entity's full audit.	The audit report had no findings or questioned costs.	
8.2	The department has addressed some, but not all of its audit findings related to CSBG funding, or is otherwise only in partial compliance with local government procedures.	**The department follows local government procedures in addressing any audit findings related to CSBG funding.**	All findings from the prior year's annual audit have been assessed by the department and addressed where the tripartite board/advisory body has deemed it appropriate. Corrective action plans for each finding have been prepared by staff and implementation of the plans have begun.	• Documentation that demonstrates that the department followed the procedure such as electronic or paper confirmation that the process that the process to address audit findings is complete.
8.3	The department has completed its audit as required by local government procedures but has not notified the tripartite board/advisory body of its availability.	**The department's tripartite board/advisory body is notified of the availability of the local government audit.**	The department leadership team or appropriate local government staff discusses the results of the audit with the tripartite board/advisory body.	• Board meeting minutes indicating notification of audit availability • An email to all board members notifying them of audit availability
8.4	The department has completed its audit as required by local government procedures but has not notified the tripartite board/advisory body of any findings related to CSBG funding.	**The department's tripartite board/advisory body is notified of any findings related to CSBG funding.**	The department leadership team or appropriate local government staff discusses the audit findings with the tripartite board/advisory body.	• Board minutes indicating notification of all audit findings with CSBG funding • A formal communication (e.g. email, letter) to the board notifying them of all audit findings with CSBG funding
8.5	Not Applicable to Publics	Not Applicable to Publics	Not Applicable to Publics	•
8.6	Not Applicable to Publics	Not Applicable to Publics	Not Applicable to Publics	•
8.7	The tripartite board/governing body receives financial reports for some but not all of the programs it advises at each regular meeting OR it receives financial reports for those programs it advises but not at each regular meeting.	**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. The governing board discusses fiscal reports**	The department provides the tripartite board/advisory body the opportunity to discuss the financial reports at each regular meeting.	• Board agenda • Board meeting packet with financial reports included • Board meeting minutes • Email to the Board members with the financial reports attached
8.8	Not Applicable to Publics	Not Applicable to Publics	Not Applicable to Publics	•
8.9	The tripartite board/advisory body is allowed input into the CSBG budget process but is prevented from fully participating by the local government as required by local government procedures.	**The governing board annually approves an organization-wide budget.**	The tripartite board/advisory body provides input as allowed by local government procedure into the CSBG budget process and works to educate the local government about funding needs for antipoverty programs.	• Recommendations submitted to the local government/parent agency • Budget meetings attended • Minutes from board meetings

8.10	Not Applicable to Publics	Not Applicable to Publics	Not Applicable to Publics	•
8.11	Not Applicable to Publics	Not Applicable to Publics	Not Applicable to Publics	•
8.12	Not Applicable to Publics	Not Applicable to Publics	Not Applicable to Publics.	•
8.13	The department only partially follows local government policies for record retention and destruction.	**The department follows local governmental policies for document retention and destruction.**	The department follows local government policies for document retention and destruction and makes all appropriate staff aware of the requirements.	• Record of compliance provided by the parent agency (e.g. certification by compliance staff) • Records demonstrating compliance (e.g. records demonstrating consistent destruction of documents)
Category 9: Data & Analysis				
9.1	The department has a system or systems that track and report some client demographic and services, but not across all programs/contractor programs or they are unable to report them (e.g. IS data report)	**The department has a system or systems in place to track and report client demographics and services customers receive.**	The department has a system or systems that track and report client demographic and customer services across contractors, and these elements can be cross referenced and aggregated for analysis.	No Documentation Needed – Standard is assessed based on conversations with agency and ability to produce the CSBG Report.
9.2	The department has a system or systems in place to receive, track, and report family, agency, and/or community outputs but not outcomes and/or does not receive the information from all contractors.	**The department has a system or systems in place to track family, agency, and/or community outcomes.**	The department has a system or systems that track and report all outcomes on all levels, and these outcome data are able to be aggregated for analysis.	No Documentation Needed – Standard is assessed based on conversations with agency and ability to produce the CSBG Report.

9.3	The department has presented to the tripartite board/advisory body for review or action, at least within the past 12 months, information about the department's outcomes, but has not presented analysis or any operational or strategic program adjustments and improvements identified as necessary.	**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.**	The department has presented to the tripartite board/advisory body for review or action, on a semi-annual basis, an analysis of the department's outcomes and any operational or strategic program adjustments and improvements identified as necessary.	• Evidence that the agency has analyzed, drafted suggestions, shared report with the Board and identified actions:
				• Copy of analysis report submitted to the board/committee
				• Board pre-meeting materials/packet
				• Email exchanges with board
				  • Copy of analysis report submitted to the tripartite board/advisory body/committee;
				  • Tripartite board/advisory body pre-meeting materials/packet; Email exchanges with board;
				  • Documentation in board minutes of the review done of the report and the suggestions for action discussed and approved; and
				  • 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.

9.4	The department submits its annual data report, but some	**The department submits its annual CSBG data report and it**	The department collects the data for the CSBG	No Documentation Needed – Standard is assessed based on conversations with agency and ability to produce the CSBG Report.

	elements of client demographics are missing, and organization-wide outcomes are limited.	**reflects client demographics and organization-wide outcomes.**	data report on an ongoing basis and compares the data to the previous reports for use in planning and decision-making.	