LOUISIANA WORKFORCE COMMISSION

Community Services Block Grant Organizational Standards Handbook

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Introduction

The Louisiana Workforce Commission's Office of Workforce Development, Community Services Block Grant State Office (hereinafter referred to as the State Office) seeks to provide support, guidance and technical assistance to the State's forty-two designated eligible entities, also known as Community Action Agencies (CAAs) funded through the CSBG Act (42 U.S.C. § 9901 et seq.) The CSBG's mission is to provide assistance to States and local communities, working through a network of community action agencies and other neighborhood-based organizations, for the reduction of poverty, the revitalization of low-income communities, and the empowerment of low-income families and individuals in rural and urban areas to become fully self-sufficient

The U.S. Department of Health and Human Services (DHH), Office of Community Services (OCS) administers and monitors CSBG on the federal level. The department is vested with the authority to facilitate the development of a model performance measurement system which may be used by States and by eligible entities to measure their performance in carrying out the requirements of the CSBG Act and in achieving the goals of their community action plans (Sec. 678E). Effective FY 2016, OCS requires States to establish and report on their organizational standards for CSBG eligible entities as part of an enhanced system for accountability and performance management across the CSBG Network.

Purpose

OCS worked with the Center of Excellence (COE) to develop and disseminate a comprehensive set of Organizational Standards to assess the ability of CSBG eligible entities to provide high quality services to low-income individuals and communities. The purpose of the organizational standards is to ensure that all eligible entities have appropriate organizational capacity, not only in the critical financial and administrative areas important to all nonprofit and public human service agencies, but also in areas of unique importance for CAAs. The standards reflect many of the requirements of the CSBG Act, applicable Federal laws and regulations, good management practices, and the values of Community Action. The State of Louisiana has adopted the Organizational Standards as promulgated by OCS and COE. This Manual will serve as a guiding resource for Louisiana's forty-two Community Action Agencies, internal training, and as an informative document for the public at large.

Monitoring Authority

Under Section 678B of the CSBG Act (42 U.S.C. § 9914) the State Office has the authority to establish and monitor goals, standards and requirements that assure an appropriate level of accountability and quality among the State's CAAs, in addition to being a good business practice. States are responsible for ensuring that the eligible entities meet all State-established organizational standards. Some standards (i.e. strategic planning, developing an agency-wide budget, etc.) may take several years for eligible entities to meet, but every entity must make steady progress toward the goal of meeting all standards. The State Office will report to OCS, using the CSBG Annual Report, the "actual" Organizational Standards performance achieved by each CAA. The reported progress indicators will indicate the number of agencies that meet 70-79%, 80-89%, 90-99% and 100% of the standards. The percentage of CAAs meeting Organizational Standards by category will also be provided. The "target" performance established by OCS Information Memorandum 138 is 100%.

Overview

This Organizational Standards Manual covers the standards for both Private/Nonprofit CAAs and Public/Governmental Entity CAAs. Private/Nonprofit CAAs are 501 (c)(3) organizations serving local communities that are eligible to receive CSBG funding. These nonprofit entities are governed by a tripartite board of directors, run operationally by an Executive Director or CEO, and may receive funding from a variety of public and private sources. Public CAAs are units of local governmental entities, such as a parish or city government, eligible to receive CSBG funding. Many Public CAAs operate programs directly out of the government/municipal department while others subcontract to nonprofits in their communities to provide services. Unlike their private/nonprofit counterparts, Public CAAs are not governed, but are only advised, by a tripartite board/advisory body. The organizational standards are similar in nature for both entities. However, there are distinct differences, requirements, and additional standards for Private CAAs. There are three sections of standards that cover nine categories. Public CAAs have 50 standards, while Private CAAs have 58.

This Manual outlines each standard**,** provides guidance and suggestions on the documents a CAA can present to show that the standard is met and advises how frequently the standard should be reviewed. Some have a specific time frame (annually, 2 years, 3 years, 5 years), some are done routinely (as needed) and others are statements that should always be true if an agency is in compliance (maintained). The same documentation can be used to meet several different standards. The document list is not intended to be exhaustive, nor does an agency need to have all of the sample documentation in place. The list is only meant to provide examples of ways that CAAs can demonstrate and record how they meet individual standards.

Organizational Standards for Community Action Agencies

MAXIMUM FEASIBLE PARTICIPATION

CATEGORY ONE: *Consumer Input and Involvement*

Research shows that through engagement in community activities such as board governance, peer-to-peer leadership, advisory bodies, volunteering, and other participatory means, low-income individuals build personal networks and increase their social capital so that they are able to move themselves and their families out of poverty. Community Action is grounded in helping families and communities build this social capital for movement to self-sufficiency.

STANDARD 1.1

The department/organization demonstrates low-income individuals' participation in its activities.

The objective is to demonstrate low-income individuals' participation in CAA activities.

Documentation can include at least 2 of the following items:

- ☐ Participation/ Volunteer lists, or board minutes from agency advisory bodies, or tracking/ sign in documents
- ☐ Other

> ❖ *It is recommended that low-income persons' 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 to have on-going, verifiable activity.***

Frequency: *Maintained on an ongoing basis.*

Standard 1.2

The department/organization 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 and/ or notes from community forums or focus groups

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

☐ Client Surveys

(3) The department analyzed the collected information.

Documentation should include at least one of the following, in more detail than just raw data, to demonstrate that actual analysis by the assessment team occurred:

☐ Minutes from a meeting where the analysis of data collected from low-income individuals were discussed

ALL ELEMENTS <u>MUST</u> CONNECT TO THE COMMUNITY NEEDS ASSESSMENT

Frequency: *Every 3 years.*

Standard 1.3

The department/organization has a systematic approach for collecting, analyzing, and reporting customer satisfaction data to the tripartite board/advisory body/governing board (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.

(2) The data is collected and analyzed

Collected= Data collection instruments (survey, focus group questions, etc.) and summary data (reports, data collection schedules)

Analyzed=Policies and procedures documents describing how data is analyzed (written reports, scorecards, dashboards, 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.

(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

Frequency: *Maintained on an ongoing basis.*

****There are several other standards that relate to consumer input and involvement that can be met if the level of input and involvement was satisfactory. These include: 2.3, 2.4, 3.3, 5.2, 6.4 and 9.1.**

CATEGORY TWO: *Community Engagement*

No CSBG eligible entity can meet all of a community's needs independently. Through formal and informal partnerships, ongoing community planning, advocacy, and engagement of people with low incomes, partners ranging from community and faith-based organizations, educational institutions, government, and business work together with Community Action Agencies and other CSBG eligible entities to successfully move families out of poverty and revitalize communities.

Standard 2.1

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

These partnerships are formalized relationships in which EACH entity contributes and receives time, effort, expertise, and/or resources.

Three types of documentation to assist in meeting this standard may include:

- ☐ CAP Referral Page

- ☐ Partnership Documentation: agreements, emails, MOUs and MOAs
- ☐ Summary document with list of partnerships and purposes

****Best practice is to maintain one single document with all the information and update it annually ****

Frequency: *Maintained on an ongoing basis.*

Standard 2.2

The department/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 a minimum: community-based organizations, faith-based organizations, private sector, public sector, and educational institutions.

Two types of documentation should show that the CAA:

(1) Gathered information 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.

- ☐ Community Needs Assessment

☐ Backup documents example: surveys and meeting minutes

(2) Used the information to assess needs and resources.
☐ Needs assessment raw data

☐ Summary reports on the data shared at board meetings or board committees

****Best practice is to provide 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)****

Frequency: *Every 3 years.*

Standard 2.3

The department/organization communicates its activities and its results to the community.

The CAA must 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 and/or news release copies

☐ Community event information; and

☐ Communication plan and other documents

Frequency: *Maintained on an ongoing basis.*

Standard 2.4

The department/organization 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-in sheets and registration lists from activities and events
- ☐ Database records that track volunteers
- ☐ Board roster and minutes

(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.

**** Documentation must be submitted for **at least** <u>two</u> separate events. ****

Frequency: *Maintained on an ongoing basis.*

CATEGORY THREE: *Community Assessment*

Local control of Federal CSBG resources is predicated on regular comprehensive community assessments that take into account the breadth of community needs as well as the partners and resources available in a community to meet these needs. Regular assessment of needs and resources at the community level is the foundation of Community Action and a vital management and leadership tool that is used across the organization and utilized by the community to set the course for both CSBG and all agency resources.

Standard 3.1

The department/organization 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 and documentation that confirms it has been issued.

☐ 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)

☐ Confirmation of the date the report was issued (e.g. press release, board minutes, email or web page time stamp).

Frequency: *Every 3 years*.

Standard 3.2

As part of the community assessment, the department/organization 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 suffice:

(1) Documentation that confirms collection of poverty data regarding gender, age, and race & ethnicity (all 4 categories)

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

The U.S. Census Bureau considers race and ethnicity to be two separate and distinct concepts. *What is race?* The Census Bureau defines race as a person's self-identification with one or more social groups. An individual can rep ort as White, Black or African American, Asian, American Indian and Alaska Native, Native Hawaiian and Other Pacific Islander, or some other race. Survey respondents may report multiple races. *What is ethnicity?* Ethnicity determines whether a person is of Hispanic origin or not. For this reason, ethnicity is broken out in two categories, Hispanic or Latino and Not Hispanic or Latino. Hispanics may report as any race.

Frequency: *Every 3 years*.

Standard 3.3

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

Two types of documentation required:

(1) Data collection and analysis 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 and analyze the data
- ☐ Links to or copies of the raw data collected.

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

- ☐ A copy of the needs assessment;

Frequency: *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 CNA includes both a description of the conditions of poverty in the service area (i.e. how poverty manifests itself across different demographic categories and geographical areas) and an analysis of its underlying causes. An analysis of the data should be conducted, not just a recitation of the symptoms.

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

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.

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.

Frequency: *Every 3 years.*

Standard 3.5

The governing board/tripartite board/advisory board formally accepts the completed community assessment.

Documentation includes:

- ☐ Tripartite board/advisory board minutes with the motion, action and acceptance of the CNA clearly delineated with results of the vote noted.

Frequency: *Every 3 years.*

*****There are several other standards that relate to the community needs assessment that can be met if the assessment addresses all that it should. These include: 1.1, 1.2, 2.2, 2.4 and 6.4.**

VISION AND DIRECTION

CATEGORY FOUR: *Organizational Leadership*

Community Action leadership is exemplified at all levels across the organization and starts with a mission that clarifies Community Action's work on poverty. A well-functioning board, and a focused chief executive officer (CEO)/executive director, well-trained and dedicated staff, and volunteers giving of themselves to help others will establish Community Action as the cornerstone and leverage point to address poverty across the community. Ensuring strong leadership both for today and into the future is critical.

Standard 4.1

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

There are three requirements for this standard: the tripartite board/advisory board has reviewed the mission statement within the past 5 years, the mission statement addresses poverty and the services of the agency are aligned with its mission

The documentation should include (mission statement should have ROMA components):

- ☐ Minutes from a board meeting or board retreat occurring within 5 years of assessment showing that the mission statement was reviewed.
- ☐ The mission statement itself with Board review date noted.

Frequency: *Every 5 years*.

Standard 4.2

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

Community Action Plan needs to be based on outcomes (focused on lasting change), must have an anti-poverty focus and must tie directly into the community assessment (identifying the top 5 needs).

Documentation should be:

- ☐ Approved Community Action Plan (CAP)

Frequency: *Assessed on an ongoing basis.*

Standard 4.3

The department's/organization's Community Action Plan and strategic plan document the continuous use of the full Results Oriented Management and Accountability (ROMA) cycle (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 should include:

- ☐ Evidence that all steps in the ROMA cycle (assessment, planning, implementation, achievement and evaluation) were carried out in the Community Action Plan (CAP) and Strategic Plan (SP), with the involvement of a ROMA Trainer/Implementer.

Types of documentation to submit can include but is not limited to:

- ☐ 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

Frequency: *Maintained on an ongoing basis.*

Standard 4.4

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

The documentation should include of the following:

- ☐ Board minutes showing when the update was given to the board with results providing the Community Action Plan outcomes and results.

Frequency: *Annually*.

Standard 4.5 - PUBLIC ENTITIES

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 related to filling temporary and permanent vacancies, and

(2) Department-approved succession plan/policy.

Frequency: *Maintained on an ongoing basis.*

Standard 4.5 - PRIVATE ENTITIES

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 three months or less, as well as outlines the process for filling a permanent vacancy.

There are multiple requirements so documentation should include:

(1) The succession plan/policy with the required elements and procedures for:
   a. An emergency/unplanned, short term absence of three months or less, and,
   b. The process for filling a permanent vacancy.

(2) Board meeting minutes showing that the succession plan was approved by the governing board.

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.

Frequency: *Maintained on an ongoing basis.*

Standard 4.6 - PUBLIC ENTITIES

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

*Risk assessment-a systematic process of evaluating the potential risks that may be involved in a projected activity or undertaking***.**

There are **two requirements**:

(1) A dated copy of local government policies and procedures related to risk assessment, and
(2) Board minutes showing it was approved.

FREQUENCY: *Every 2 years.*

STANDARD 4.6 – PRIVATE ENTITIES

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

*Risk assessment-a systematic process of evaluating the potential risks that may be involved in a projected activity or undertaking***.**

There are two requirements:

(1) That an agency-wide and comprehensive risk assessment be conducted within the prescribed time frame.

- ✓ Organization wide risk assessment report(s), risk assessment policies and procedures, and a listing of the elements covered in the risk assessment process. (Included in the report or as a separate document).

(2) That it has been reported to the governing board.

- ✓ Board meeting minutes showing both the date and that the risk assessment was discussed.

Frequency: *Every 2 years.*

CATEGORY FIVE: *Board Governance*

Community Action boards are uniquely structured to ensure maximum feasible participation by the entire community, including those the network serves. By law, Community Action boards are comprised of at least 1/3 low-income consumers (or their representatives), 1/3 elected officials (or their appointees), and the remainder private-sector community members. To make this structure work as intended, CAAs must recruit board members thoughtfully, work within communities to promote opportunities for board service, and orient, train, and support them in their oversight role. Boards are foundational to good organizational performance and the time invested to keep them healthy and active is significant, but necessary.

Standard 5.1 - PUBLIC ENTITIES

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

Selecting the board members as follows:

(1) At least one third are democratically-selected representatives of the low-income community;

(2) One-third are local elected officials (or their representatives); and

(3) The remaining members are from major groups and interests in the community.

(OR)

(4) 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 should include bylaws and board membership list/matrix.

FREQUENCY: *Maintained on an ongoing basis.*

STANDARD 5.1 - PRIVATE ENTITIES

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.

Documentation should include bylaws and board membership list/matrix.

Frequency: *Maintained on an ongoing basis.*

STANDARD 5.2 – PUBLIC ENTITIES

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.

*Note that IM 82 suggests a minimum of 1/3 of tripartite board membership of Public CAAs be comprised of representatives of low-income individuals and families who reside in the areas served.

Documentation should include the bylaws or board policy and procedure manual

Frequency: *Maintained on an ongoing basis***.**

STANDARD 5.2 – PRIVATE ENTITIES

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.

Documentation should include the bylaws or board policy and procedure manual

Frequency: *Maintained on an ongoing basis.*

STANDARD 5.3 – PUBLIC ENTITIES

Not applicable.

STANDARD 5.3 – PRIVATE ENTITIES

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

Documentation must evidence that licensed attorney has provided the board with assurances that the bylaws comply with current applicable laws and should include at least one of the following and be dated within the past five years:

- ☐ A copy of the invoice for review services
- ☐ A letter from the attorney stating a review was completed
- ☐ A copy of the review from the attorney (optional) since the review itself is a private document

Frequency: *Every five years.*

STANDARD 5.4

The department/organization documents that each tripartite board/advisory body member/governing board member has received a copy of the governing documents/bylaws, within the past 2 years.

Documentation should include evidence that each board member actually received the governing documents/bylaws within the past 2 years, even if said receipt occurred at different times for different members.

- ☐ Sign-in list completed when Bylaws are distributed at a board/advisory body meeting.
- ☐ Email/certified mail confirmation of receipt of governing documents/bylaws by each member.
- ☐ Board minutes documenting their distribution and noting those board members in attendance.
- ☐ Any other documentation acknowledging the governing board has received a copy of the governing documents/bylaws in the past 2 years.

Frequency: *Every 2 years.*

STANDARD 5.5

The department's tripartite board/advisory body/organization's governing board meets in accordance with the frequency and quorum requirements and fills board vacancies as set out in its governing documents/bylaws.

The organization must demonstrate that it abides by its governing documents as it relates to the number of times the board meets, the minimum number of members required to be in attendance in order for official action to be taken and the manner in which board vacancies are filled. Documentation should include the following:

- ☐ Board minutes (To prove quorum at each meeting)
- ☐ Board meeting schedule
- ☐ Board bylaws

Frequency: *As needed/More frequent than annually.*

STANDARD 5.6

<u>Each</u> tripartite board/advisory body member/governing board member has signed a conflict of interest policy, or comparable local government document, within the past 2 years.

The organization should have a written policy defining conflicts of interest and providing the method by which a board or staff member would acknowledge or identify that a conflict exists. Documentation should include:

- ☐ 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.

Frequency: *Every 2 years.*

STANDARD 5.7

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

This can be documented by submitting **<u>all</u>** of the following:

- ☐ A copy of the curriculum/tools used for orientation.
- ☐ A signed and dated new board member statement that such orientation was received or a dated sign-in sheet from the orientation.
- ☐ Board matrix with term dates.

Frequency: *As needed/More frequent than annually.*

STANDARD 5.8

Tripartite board/advisory body members/governing board 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 should include at least **one** of the following:

- ☐ Dated 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.

Frequency: *Every 2 years***.**

STANDARD 5.9

The department's tripartite board/advisory body/organization's governing board receives programmatic reports at each regular board/advisory meeting.

The CSBG Act requires a tripartite board that fully participates in the development, planning, implementation and evaluation of the program. Documentation should include the following:

- ☐ Board minutes for all regularly held board meetings within the past 12 months which reflect that programmatic reports have been provided and received by the full board.

Programmatic reporting may be in writing and/or be presented verbally, but copies of presentations and or reports must be provided.

Frequency: *As needed/More frequent than annually.*

CATEGORY SIX: *Strategic Planning*

Establishing the vision for a Community Action Agency is a big task and setting the course to reach it through strategic planning is serious business. CSBG eligible entities take on this task by looking both at internal functioning and at the community's needs. An efficient organization knows where it is headed, how the board and staff fit into that future, and how it will measure its success in achieving what it has set out to do. This agency-wide process is board-led and ongoing. A "living, breathing" strategic plan with measurable outcomes is the goal, rather than a plan that gets written but sits on a shelf and stagnates. Often set with an ambitious vision, strategic plans set the tone for the staff and board and are a key leadership and management tool for the organization.

STANDARD 6.1

The department has a strategic plan (or comparable planning document) or the organization has an agency-wide strategic plan in place that has been reviewed and accepted by the tripartite board/advisory body/governing board within the past 5 years. If the department does not have a plan, the tripartite board/advisory body must demonstrate that it is developing a strategic plan. A strategic plan sets the goals for the full agency over a defined period of time.

Documentation should include both of the following:

- ☐ A copy of a department-wide strategic plan dated within the past five years,
- ☐ Board minutes indicating that the full *board has formally approved* the strategic plan.

Frequency: *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.

These are the very goals of the CSBG Act. The strategic plan must show how these goals are addressed by the organization. Documentation must include a copy of the strategic plan (goals, strategies, and key measures) that *explicitly* incorporates:

- ☐ Poverty;
- ☐ Revitalization of low-income communities; and

☐ Empowerment of people with low income to become more self-sufficient.

Frequency: *Every 5 years*.

STANDARD 6.3

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

Documentation should include:

☐ 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.

****A good reference tool to develop goals in the three areas would be National Performance Indicators (NPIs). ****

Frequency: *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 can be met with two types of documentation:

(1) Evidence that customer satisfaction and input is gathered as part of the community needs assessment (usually through a compilation of customer satisfaction surveys, etc.)

(2) Illustration of how customer satisfaction and input is included in the strategic planning process which can include:

☐ 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).

Frequency: *Every 5 years.*

STANDARD 6.5

The tripartite board/advisory body/governing board has been updated 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 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.

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

Frequency: *Ongoing/More frequent than annually***.**

OPERATIONS & ACCOUNTABILITY

CATEGORY SEVEN: *Human Resources Management*

The human element of Community Action's work is evident at all levels of the organization and the relationship an organization has with its staff often reflects the organization's values and mission. Oversight of the chief executive officer (CEO)/ executive director and maintaining a strong human resources infrastructure are key responsibilities of board oversight. Attention to organizational elements such as policies and procedures, performance appraisals, and training lead to strong organizations with the capacity to deliver high quality services in low-income communities.

STANDARD 7.1 – PUBLIC ENTITIES

Not applicable.

- 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 7.1 – PRIVATE ENTITIES

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

The organization must have a tangible set of guidelines to manage its employees. Documentation should demonstrate three things:

(1) Personnel Policies that include review/edit dates and approval dates from an attorney (may include a Whistleblower Policy);

(2) A statement or invoice from the attorney reflecting the review;

(3) Documentation that confirms the governing board has formally considered and approved the Personnel Policies within the past five years.

- ☐ Board meeting minutes
- ☐ Invoice from an attorney outlining services rendered, including his/her bar roll number.

Frequency: *Every five years.*

STANDARD 7.2

The department/organization follows local governmental policies/written personnel 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.

Policies that direct the conduct of employees and the activities of the department/organization, provide general expectations and a description of available benefits must be readily available in tangible or electronic form. Documentation must include ***all*** of the following four things:

- ☐ A physical or electronic copy of Personnel Policies (or Employee Handbook)
- ☐ An identified process for notifying staff of updates (interoffice memos, etc.)
- ☐ Evidence that a sample group of employees (not less than 10% of those working in CSBG) have received personnel policies
- ☐ Documentation of the location and availability of the Personnel Policies

    - ✓ Can be a link to a website if it contains the required information.

Frequency: *As needed/More frequent than annually***.**

STANDARD 7.3 – PUBLIC ENTITIES

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

Documentation should include the following three things:

- ☐ All positions can be identified in an Organizational chart or Staff list with role titles.
- ☐ The agency's job descriptions.
- ☐ Dated documentation noting that the descriptions have been reviewed within the past 5 years.

Frequency: *Every 5 years***.**

STANDARD 7.3 – PRIVATE ENTITIES

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

- ☐ All positions can be identified in an Organizational chart or Staff list with role titles.
- ☐ The agency's job descriptions.

- ☐ Dated documentation noting that the descriptions have been reviewed within the past 5 years.

Frequency: *Every 5 years*.

STANDARD 7.4 – PUBLIC ENTITIES

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

Documentation should show:

(1) That a specific job appraisal policy/procedure is in place by the parent agency or municipality.

(2) Documentation showing that the department head appraisal was completed.

Frequency: *Annually*.

STANDARD 7.4 – PRIVATE ENTITIES

The governing board conducts a performance appraisal of the CEO/Executive Director within each calendar year.

Documentation should show that an annual opportunity to formally review the employee's performance in their position occurs in writing and can include:

- ☐ Board minutes reflective of the performance appraisal of the CEO/Executive Director.

Frequency: *Annually*.

STANDARD 7.5 – PUBLIC ENTITIES

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 stating how salary and benefits packages are made available to the public
(2) That the department followed that procedure.

- ❖ Documentation should clearly reflect where salary information is posted and that the public has access to it.

FREQUENCY: *Annually.*

STANDARD 7.5 – PRIVATE ENTITIES

The governing board conducts a review and approves compensation for the CEO/executive director within each calendar year.

Documentation should include the following:

- ☐ Board minutes with motion and vote regarding compensation for the executive director within the current calendar year.
- ☐ For a new hire, the ED/CEO contract or compensation package signed by the ED/CFO and the board chair (and dated within the calendar year)

Frequency: *Annually***.**

STANDARD 7.6

The department follows local governmental policies/ organization has a policy in place for regular written evaluation of employees by their supervisors.

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

- ☐ A copy of the policy and procedures regarding employee evaluations.

Frequency: *Maintained on an ongoing basis.*

STANDARD 7.7 – PUBLIC ENTITIES

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.

Written policy must protect and encourage employees and volunteers to report credible information regarding illegal practices and violations, inclusive of anti-retaliation language. Documentation should include both of the following:

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

(2) Evidence that the tripartite board/advisory body was provided with a copy of the existing whistleblower policy

(3) 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.*

FREQUENCY: *Maintained on an ongoing basis.*

STANDARD 7.7 – PRIVATE ENTITIES

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

Documentation should include **both** of the following:

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

☐ Board minutes indicating governing board approval of policy.

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

Frequency: *Maintained on an ongoing basis.*

STANDARD 7.8 – PUBLIC ENTITIES

The department follows local governmental policies for new employee orientation.

There must be a process whereby the organization provides an overview of the expectations of staff. Documentation should include at least **two** of the following:

(A) Policy related to orientation;

(B) Personnel Policies or Employee Handbook

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

Frequency: *Assessed as needed/More frequent than annually***.**

STANDARD 7.8 – PRIVATE ENTITIES

All staff participate in a new employee orientation within 60 days of hire. The required documentation is the same as those listed for the above Public Entities.

Frequency: *Assessed as needed/More frequent than annually***.**

STANDARD 7.9

The department/organization conducts or makes available staff development and/or 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.

Frequency: *As needed/More frequent than annually.*

CATEGORY EIGHT: *Financial Operations and Oversight*

The fiscal bottom line of Community Action is not isolated from the mission, it is a joint consideration. Community Action boards and staff maintain a high level of fiscal accountability through audits, monitoring by State and Federal agencies, and compliance with Federal Office of Management Budget circulars. The management of Federal funds is taken seriously by CSBG eligible entities and the Standards specifically reflect the board's oversight role as well as the day-to-day operational functions.

**Several of the standards in this category do not apply to public CAAs because the information is outside the purview of advisory boards and is handled by the municipality at large.

STANDARD 8.1 – PUBLIC ENTITIES

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) A completed audit by a licensed CPA.

(2) An electronic receipt or screen shot from the Federal Clearinghouse showing that the date the audit report was submitted was within the nine-month deadline <u>if the agency spent more than $750,000 in federal funds.</u>

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

Frequency: *Annually.*

STANDARD 8.1 – PRIVATE ENTITIES

The Organization's annual audit (or audited financial statements) is completed by a Certified Public Accountant on time in accordance with Title 2 Code of Federal Regulations, Uniform Administration Requirements, Cost Principles, and Audit Requirement (if applicable) and/or State audit threshold requirements. The required documentation is the same as those listed for the above Public Entities.

Frequency: *Annually.*

STANDARD 8.2 – PUBLIC ENTITIES

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

Two types of documentation required:

(1) A physical or electronic copy of the local government procedures to address audit findings.

(2) Documentation that confirms the department has followed the process.

Frequency: *Annually*.

STANDARD 8.2 – PRIVATE ENTITIES

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.

Two types of documentation required:

(1) A physical or electronic copy of the corrective action plan(s) that has been prepared in response to any audit findings.

(2) Highlighted copies of the official minutes of the meetings of the board indicating the response by management to the audit findings and indicating the board's acceptance of its corrective action plan(s).

Frequency: *Annually*.

STANDARD 8.3 – PUBLIC ENTITIES

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

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

Frequency: *Annually.*

STANDARD 8.3 – PRIVATE ENTITIES

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

Include documentation evidencing the discussion with auditors actually took place by including **both** of the following:

(1) Minutes from the governing board meeting with highlights of the discussion.

(2) Copies of handouts or other printed media presented to the Board or provided in the board packet.

Frequency: *Annually.*

STANDARD 8.4 – PUBLIC ENTITIES

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

Documentation should include:

- ☐ Board minutes indicating audit findings with CSBG funding were discussed,
- ☐ 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******

Frequency: *Annually***.**

STANDARD 8.4 – PRIVATE ENTITIES

The governing board formally receives and accepts the audit.

Two types of documentation required:

(1) Proof that each board member has received a copy of the audit.

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(2) Board minutes indicating receipt and acceptance of the audit.

Frequency: *Annually*.

STANDARD 8.5 – PUBLIC ENTITIES

Not applicable.

STANDARD 8.5 – PRIVATE ENTITIES

The organization has solicited bids for its audit within the past five years.

Documentation must include all the following:

(1) Documentation of the request for proposals for audit services,

(2) Responses from CPA firms to the request

Frequency: *Every five years.*

STANDARD 8.6 – PUBLIC ENTITIES

Not applicable.

STANDARD 8.6 – PRIVATE ENTITIES

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

Documentation must include the following:

(1) A physical or electronic Form 990

(2) Documentation and/ or board minutes confirming the agency has made the form available for board review.

Frequency: *Annually.*

STANDARD 8.7 – PUBLIC ENTITIES

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

Frequency: *As needed/More frequent than annually***.**

STANDARD 8.7 – PRIVATE ENTITIES

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.

Nonprofit and public agencies should provide the following documentation for every regular governing board meeting within the last twelve months:

- ☐ Board minutes reflecting review of organization-wide report on revenue and expenditures that compares budget to actual, categorized by program.
- ☐ Minutes should also reflect that the board was provided with organization wide financial reports and balance sheets/statement of financial position.

Frequency: *As needed/More frequent than annually***.**

STANDARD 8.8 – PUBLIC ENTITIES

Not applicable.

STANDARD 8.8 – PRIVATE ENTITIES

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

The documentation must evidence that federal, state and local taxes as well as insurance and retirement payments were made in accordance with the organization's payment schedules and must include at least one of the following:

- ☐ Payroll tax documentation/filings
- ☐ Copies of checks or other documentation showing that amounts due were actually paid to state, federal, insurance and retirement accounts.

Frequency: *As needed/More frequent than annually***.**

STANDARD 8.9 – PUBLIC ENTITIES

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

Two forms of documentation may be used to show the standard is met:

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

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

- ☐ Formal communication from the board that it participated as allowed.
- ☐ 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).

Frequency: *Annually.*

STANDARD 8.9 – PRIVATE ENTITIES

The governing board annually approves an organization-wide budget.

The budget should reflect all programs, funding sources and costs for the entire organization, not just CSBG. Two forms of documentation may be used to show that the standard is met:

- ☐ Evidence that the agency-wide budget is presented to the board.

☐ Minutes of the board meeting showing a motion and approval action.

Frequency: *Annually.*

STANDARD 8.10 – PUBLIC ENTITIES

Not applicable.

STANDARD 8.10 – PRIVATE ENTITIES

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

Three forms of documentation can be used:

(1) Fiscal policies

☐ Policy manual (physical or electronic) with approval date by the board indicated on the document cover.

(2) Documentation that the board has reviewed **and** approved the updates and changes.

☐ Board minutes

☐ Board packet and or presentation to the board including the revised fiscal policies.

Frequency: *Every two years and as needed.*

STANDARD 8.11 – PUBLIC ENTITIES

Not applicable.

STANDARD 8.11 – PRIVATE ENTITIES

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

Documentation must evidence the rules and regulations the organization utilizes to govern the process of acquiring goods and services. Two forms of documentation include:

(1) A physical or electronic copy of the procurement policy and documentation that it has been reviewed within the past five years.

(2) Board minutes reflecting review of the policy by the board (must be completed in the past five years).

Frequency: *Every five years***.**

STANDARD 8.12 – PUBLIC ENTITIES

Not applicable.

STANDARD 8.12 – PRIVATE ENTITIES

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

The cost allocation plan or approved indirect cost rate plan showing methodology used for allocating indirect costs is what is needed for this standard.

The documentation must evidence how the organization distributes expenses that may be allocated to more than one department or program that collectively share in the benefits. The documentation required depends on the methodology chosen by the entity to charge indirect expenses:

(1) If a negotiated Federal cost rate is selected, the entity should have an approval letter from the cognizant agency.

(2) If cost allocation is used, the entity should have an updated cost allocation plan laying out the methodology used for accounting for indirect costs.

☐ Provide a copy of the cost allocation plan.

(3) If the entity is using the de minimus indirect cost rate, this should be indicated on the grant forms received from the funding agencies.

☐ Provide a copy of the grant forms.

If no approved indirect cost rate is in place, the organization must have a written cost allocation plan.

Frequency: *Maintained on an ongoing basis.*

STANDARD 8.13 – PUBLIC ENTITIES

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

Documentation may include:

(1) A copy of the local government policy on document retention and destruction,

(2) Evidence that demonstrates compliance with the policy.

- ☐ 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).

Frequency: *Maintained on an ongoing basis.*

STANDARD 8.13 – PRIVATE ENTITIES

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

(1) An electronic or physical copy of the Retention and Destruction policy.

An agency that has conducted an audit as set forth herein satisfies Standards 8.1, 8.2, 8.3 and 8.4. An agency that has updated and communicated policies and procedures should easily satisfy Standards 8.10, 8.11, 8.12 and 8.13.

Frequency: *Maintained on an ongoing basis***.**

CATEGORY NINE: *Data and Analysis*

The Community Action Network moves families out of poverty every day across this country and needs to produce data that reflect the collective impact of these efforts. Individual stories are compelling when combined with quantitative data: *no data without stories and no stories without data*. Community Action needs to better document the outcomes of families, agencies, and communities achieve. The Community Services Block Grant funding confers the obligation and opportunity to tell the story of agency-wide impact and community change, and in turn the impact of the Network as a whole.

STANDARD 9.1

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

To meet this standard, agencies should provide:

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

(2) Documentation that include client demographic data (preferably ones that include data for all programs and services).

(3) Information on the service customers receive; this documentation that show an "unduplicated count" of customers and services.

Frequency: *Maintained on an ongoing basis*.

STANDARD 9.2

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

To meet this standard, the agency should be able to describe the data system used and provide electronic and/or hard copy of reports which include family, agency and/or community outcomes for all programs.

**** This may or may not be the same systems reported in standard 9.1. ****

Frequency: *Maintained on an ongoing basis.*

STANDARD 9.3

The department/organization has presented to the tripartite board/advisory body/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.

Documentation should include:

- ☐ Board minutes evidencing a review of the report and the suggestions for action discussed and approved

Frequency: *Annually*.

STANDARD 9.4

The department submits its annual CSBG Annual Report data report and it reflects client demographics and CSBG-funded outcomes.

Documentation includes:

- ☐ Copy of Annual Report submission.

Frequency: *Annually.*

- Standards that involve Data Collection and Analysis are 1.1, 1.3, 2.1, 2.2, 2.3, 2.4, 3.2, 3.3, 4.3 and 6.4.

APPENDIX

CATEGORIZATION OF STANDARDS BY TOPIC

COMMUNITY NEEDS ASSESSMENT

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). 30

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.

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.

STRATEGIC PLAN

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.

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

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.

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.

6.1 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.

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

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.

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The LWC State CSBG Office hopes CAAs find this manual helpful. For additional guidance and resources please visit www.communityactionpartnership.com or www.nascsp.org.