

Form Approved  
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## **Community Services Block Grant (CSBG) Model State Plan**

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**Section 1**  
**CSBG Administrative Information**

1.1. Identify whether this is a one-year or a two-year plan.     One-Year     Two-Year

1.1a. Provide the federal fiscal years this plan covers:    Year One  Year Two

**GUIDANCE:** If a state indicates "One-Year" under 1.1., they will only have to provide a response for "Year One"

1.2. **Lead Agency:** Update the following information in relation to the lead agency designated to administer CSBG in the state, as required by Section 676(a) of the CSBG Act. Information should reflect the responses provided in the Application for Federal Assistance, SF-424M.

Has information in regards to the state lead agency changed since the last submission of the state plan?     Yes     No

If yes, provide the date of change and select the fields that have been updated    **[Date Picker and Check all the apply]**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Lead Agency                    | <input type="checkbox"/> Department Type | <input type="checkbox"/> Department Name |
| <input checked="" type="checkbox"/> Authorized Official | <input type="checkbox"/> Street Address  | <input type="checkbox"/> City            |
| <input type="checkbox"/> Zip Code                       | <input type="checkbox"/> Office Number   | <input type="checkbox"/> Fax Number      |
| <input type="checkbox"/> Email Address                  | <input type="checkbox"/> Website         |  |

1.2a. Lead agency **[Narrative, 150 Characters]**

**GUIDANCE:** This should only include the exact name of the lead agency and an acronym (as applicable).

**EXAMPLE:** Office of Community Services (OCS)

1.2b. Cabinet or administrative department of this lead agency **[Check One and narrative where applicable]**

- Community Affairs Department
- Community Services Department
- Governor's Office
- Health Department
- Housing Department
- Human Services Department
- Social Services Department
- Other, describe: **[Narrative, 100 characters]**

1.2c. **Cabinet or Administrative Department Name:** Provide the name of the cabinet or administrative department of the CSBG authorized official **[Narrative, 100 Characters]**

**1.2d.** Authorized official of the lead agency. The authorized official could be the director, secretary, commissioner etc. as assigned in the designation letter (attached under item 1.3.). The authorized official is the person indicated as authorized representative on the SF-424M. **[Narrative, 50 Characters each]**

Name **Marshall Vogts** Title **Director, Community Development Service**

**1.2e.** Street Address **[Narrative, 200 characters]** **900 N. Stiles Ave**

**1.2f.** City **[Narrative, 50 characters]** **Oklahoma City**

**1.2g.** State **[Dropdown]** **Oklahoma**

**1.2h.** Zip Code **[Numerical Response, 5 digits]** **73104**

**1.2i.** Work Telephone Number and Extension (if applicable) **[Numerical Response, 10 – 15 digits to include extensions]** **(405) 815-5339**

**1.2j.** Fax Number **[Numerical Response, 10 digits]** **405-815-5344**

**1.2k.** Email Address **[Narrative, 150 characters]** **marshall.vogts@okcommerce.gov**

**1.2l.** Lead Agency Website **[Narrative, 200 characters]** **okcommerce.gov**

**Note:** Item 1.2. pre-populates the Annual Report, Module 1, Item A.1.

**1.3. Designation Letter:** Attach the state’s official CSBG designation letter. A new designation letter is required if the chief executive officer of the state and/or designated agency has changed. **[Attach a document.]**

**GUIDANCE:** The designation letter should be updated whenever there is a change to the designee.

**Instructional Note:** The letter should be from the chief executive officer of the state and include, at minimum, the designated state CSBG lead agency and title of the authorized official of the lead agency who is to administer the CSBG grant award.

**1.4. CSBG Point of Contact:** Provide the following information in relation to the designated state CSBG point of contact. The state CSBG point of contact should be the person that will be the main point of contact for CSBG within the state.

Has information regarding to the state point of contact changed since the last submission of the state plan?  Yes  No

If yes, provide the date of change and select the fields that have been updated **[Date Picker and Check all the apply]**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Agency Name   | <input type="checkbox"/> Point of Contact | <input type="checkbox"/> Street Address |
| <input type="checkbox"/> City          | <input type="checkbox"/> State            | <input type="checkbox"/> Zip Code       |
| <input type="checkbox"/> Office Number | <input type="checkbox"/> Fax Number       | <input type="checkbox"/> Email Address  |
| <input type="checkbox"/> Website       |   |   |

- 1.4a. Agency Name [Narrative, 150 characters] Oklahoma Department of Commerce
- 1.4b. Point of Contact Name [Narrative, 50 characters each]  
Name Rhonda Harding-Hill Title Director of Programs - Planning
- 1.4c. Street Address [Narrative, 200 characters] 900 N. Stiles Ave.
- 1.4d. City [Narrative, 50 characters] Oklahoma City
- 1.4e. State [Dropdown] Oklahoma
- 1.4f. Zip Code [Numerical Response, 5 digits] 73104
- 1.4g. Office Telephone Number [Numerical Response, 10 – 15 digits to include extensions] (405) 815-5126
- 1.4h. Fax Number [Numerical Response, 10 digits] (405) 815-5344
- 1.4i. Email Address [Narrative, 150 characters] Rhonda.Harding-Hill@okcommerce.gov
- 1.4j. Agency Website [Narrative, 200 characters] okcommerce.gov

1.5. Provide the following information in relation to the State Community Action Association.

There is currently a state Community Action Association within the state.  Yes  No

Has information in regards to the state Community Action Association changed since the last submission of the state plan?  Yes  No

If yes, provide the date of change and select the fields that have been updated. [Date Picker and Check all the apply]

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Agency Name   | <input type="checkbox"/> Executive Director | <input type="checkbox"/> Street Address |
| <input type="checkbox"/> City          | <input type="checkbox"/> State              | <input type="checkbox"/> Zip Code       |
| <input type="checkbox"/> Office Number | <input type="checkbox"/> Fax Number         | <input type="checkbox"/> Email Address  |
| <input type="checkbox"/> Website       | <input type="checkbox"/> RPIC Lead          |   |

1.5a. Agency name [Narrative, 150 characters] Oklahoma Association of Community Action Agencies

1.5b. Executive Director or Point of Contact [Narrative, 50 characters each]

Name Michael Jones Title Executive Director

- 1.5c. Street Address [Narrative, 200 characters] 605 Centennial Blvd.
- 1.5d. City [Narrative, 50 characters] Edmond
- 1.5e. State [Dropdown] Oklahoma
- 1.5f. Zip Code [Numerical Response, 5 digits] 73013
- 1.5g. Telephone Number [Numerical Response, 10 – 15 digits to include extensions] (405) 949-1495
- 1.5h. Fax Number [Numerical Response, 10 digits] (405) 509-2712
- 1.5i. Email Address [Narrative, 150 characters] michaeljones@okacaa.org
- 1.5j. State Association Website [Narrative, 200 characters] okacaa.org
- 1.5k. State Association currently serves as the Regional Performance Innovation Consortia (RPIC) lead  Yes  No

**Section 2**  
**State Legislation and Regulation**

- 2.1. **CSBG State Legislation:** State has a statute authorizing CSBG.  Yes  No
- 2.2. **CSBG State Regulation:** State has regulations for CSBG.  Yes  No
- 2.3. **Legislation/Regulation Document:** Attach the legislation and/or regulations or provide a hyperlink(s) to the documents indicated under Items 2.1. and/or Item 2.2. **[Attach a document and/or provide a link, 1500 characters]**  
<http://www.oar.state.ok.us/oar/codedoc02.nsf/All/3413904F2680C8FA86257DA40061D844?OpenDocument>

**GUIDANCE:** The labeling of all attachments should include the question number for which the document provides supplementary information, the question heading, and the type of document provided. As an example, a state statutory document could be labeled as:  
2.3. Legislation/Regulation Document, Washington D.C. Statute

- 2.4. **State Authority:** Select a response for each of the following items about the state statute and/or regulations authorizing CSBG:
- 2.4a. **Authorizing Legislation:** State legislature enacts authorizing legislation or amendments to an existing authorizing statute last federal fiscal year.  Yes  No
- 2.4b. **Regulation Amendments:** State established or amended regulations for CSBG last federal fiscal year.  Yes  No
- 2.4c. **Designation:** State statutory or regulatory authority designates the bureau, division, or office in the state government that is to be the state administering agency.  Yes  No

### Section 3

#### State Plan Development and Statewide Goals

- 3.1. CSBG Lead Agency Mission and Responsibilities:** Briefly describe the mission and responsibilities of the state agency that serves as the CSBG lead agency. **[Narrative, 2500 characters]**

The Oklahoma Department of Commerce is the primary economic development entity in the state. Its mission is to create and deliver high-impact solutions that lead to prosperous lives and communities for all Oklahomans.

We recruit new businesses to the state by promoting the great assets we have for businesses to succeed. We work to foster an entrepreneurial culture and infrastructure in Oklahoma to encourage the start-up of new businesses and partner with communities to ensure existing businesses grow and prosper.

We partner with city and county elected officials and community leaders to help raise incomes, improve the quality of life for local residents, and help local businesses to thrive. Through federal funding, we oversee vital infrastructure and human services investments that help position communities as favorable for business attraction.

- 3.2. State Plan Goals:** Describe the state's CSBG-specific goals for state administration of CSBG under this State Plan. **[Narrative, 3000 characters]**

The goals of the State CSBG office are:

1. Timely distribution of funds to eligible entities
2. Monitoring of eligible entities
3. Providing training and technical assistance to assist eligible entities in complying with CSBG program objectives, ROMA and Organizational Standards

**GUIDANCE:** States should take into account feedback from OCS, their eligible entities, and the ACSI survey completed by eligible entities when creating their state plan goals.

**Instructional Note:** For examples of "goals," see State Accountability Measure 1Sa(i).

**Note:** This information is associated with State Accountability Measure 1Sa(i) and pre-populates the state's Annual Report, Module 1, Item B.1.

- 3.3. State Plan Development:** Indicate the information and input the state accessed to develop this State Plan.

- 3.3a. Analysis of state-level tools [Check all that applies and narrative where applicable]**

- State Performance Indicators and/or National Performance Indicators (NPIs)
- U.S. Census data

State performance management data (e.g., accountability measures, ACSI survey information, and/or other information from annual reports)

Monitoring Visits/Assessments

Tools not identified above (specify) [Narrative, 500 characters]

**3.3b. Analysis of local-level tools [Check all that applies and narrative where applicable]**

Eligible entity community needs assessments

Eligible entity community action plans

Public Hearings/Workshops

Tools not identified above (e.g., state required reports) [specify] [Narrative, 500 characters]

**3.3c. Consultation with [Check all that applies and narrative where applicable]**

Eligible entities (e.g., meetings, conferences, webinars; not including the public hearing)

State Association

National Association for State Community Services Programs (NASCSPP)

Community Action Partnership (The Partnership)

Community Action Program Legal Services (CAPLAW)

CSBG Tribal Training and Technical Assistance (T/TA) provider

Regional Performance Innovation Consortium (RPIC)

Association for Nationally Certified ROMA Trainers (ANCRT)

Federal CSBG Office

Organizations not identified above (specify) [Narrative, 500 characters]

**3.4. Eligible Entity Involvement**

**3.4a. Describe the specific steps the state took in developing the State Plan to involve the eligible entities. [Narrative, 3000 Characters]**

Members of the Board of Directors of the State Association developed, and the Board as a whole voted to support, a funding distribution plan that uses more current census data while lessening the impact on the budgets of those eligible entities whose proportional share of funds would decrease as the result of population changes within the service areas.

The State referred to the Community Action Plans submitted by the eligible entities with their current funding applications to assist with the completion of the plan.

The State provided the eligible entities opportunity to review and comment on the plan draft prior to it being made available for public inspection, and held the public hearing on the same day of the State Association's Board of Director's meeting so that it would be easier for the Executive Directors of the Eligible Entities to participate.

**Note:** This information is associated with State Accountability Measures 1Sa(ii) and may pre-populate the state’s annual report form.

- 3.4b. Performance Management Adjustment:** Describe how the state has adjusted its State Plan development procedures under this State Plan, as compared to previous plans, in order to 1) encourage eligible entity participation and 2) ensure the State Plan reflects input from eligible entities? Any adjustment should be based on the state’s analysis of past performance in these areas, and should consider feedback from eligible entities, OCS, and other sources, such as the public hearing. If the state is not making any adjustments, provide further detail. **[Narrative, 3000 Characters]**

Based upon feedback from the 2017 ACSI survey, the state is making a change in the time available for comments to be received on the state plan. In addition to the eligible entities receiving the draft state plan prior to it being made public, as was done in prior years, the state is extending the date the draft plan is available for public comment by a week prior to and by 2 days after the public hearing.

**Note:** This information is associated with State Accountability Measures 1Sb(i) and (ii) and pre-populate the Annual Report, Module 1, Item B.1.

- 3.5. Eligible Entity Overall Satisfaction:** Provide the state’s target for eligible entity Overall Satisfaction during the performance period. **Year One** \_\_\_\_ **Year Two** \_\_\_\_ **[Numerical, 3 digits]**

**Instructional Note:** The state’s target score will indicate improvement or maintenance of the states’ Overall Satisfaction score from the most recent American Customer Survey Index (ACSI) survey of the state’s eligible entities.

**Note:** Item 3.5 is associated with State Accountability Measure 8S and may pre-populate the state’s annual report form.

**GUIDANCE:** The targets reported here should match the future target set in the Annual Report, Section B, Table B.2.

**GUIDANCE:** Review the [ACSI IM](#) about setting targets for your eligible entity overall satisfaction that are realistic, reasonable, attainable, and possible.

**Section 4**  
**CSBG Hearing Requirements**

- 4.1. Public Inspection:** Describe the steps taken by the state to disseminate this State Plan to the public for review and comments prior to the public hearing, as required under Section 676(e)(2) of the Act. **[Narrative, 2500 Characters]**

Three weeks prior to the public hearing the plan was made available on the State CSBG office’s website and a press release was issued to its statewide media distribution list. The website included an email address where comments could be sent and the time and location of the public hearing. The website link was emailed to the eligible entity executive directors and the executive director of the state association. Copies of the plan were also available at the hearing.

**GUIDANCE:** Under this question, detail how the state provided the State Plan to the public, including providing sufficient time (ideally no fewer than 30 days) for the public to provide feedback prior to the public hearing. Distribution to the public should include distribution directly to the eligible entities (e.g. via email or publication on a public website with specific notification to the eligible entities) in the state as well as any other interested parties.

- 4.2. Public Notice/Hearing:** Describe how the state ensured there was sufficient time and statewide distribution of notice of the public hearing(s) to allow the public to comment on the State Plan, as required under 676(a)(2)(B) of the CSBG Act. **[Narrative, 2500 Characters]**

Three weeks prior to the public hearing the plan was made available on the State CSBG office’s website and a press release was issued to its statewide media distribution list. The website included an email address where comments could be sent and the time and location of the public hearing. The website link was emailed to the eligible entity executive directors and the executive director of the state association. Copies of the plan were also available at the hearing.

- 4.3. Public and Legislative Hearings:** In the table below, specify the date(s) and location(s) of the public and legislative hearing(s) held by the designated lead agency for this State Plan, as required under Section 676(a)(2)(B) and Section 676(a)(3) of the Act.

**Instructional Note: A public hearing is required for each new submission of the State Plan.** The date(s) for the public hearing(s) must have occurred in the year prior to the first federal fiscal year covered by this plan. Legislative hearings are held at least every three years, and must have occurred within the last three years prior to the first federal fiscal year covered by this plan.

08/21/2019	Oklahoma Assn of Community Action Agencies	Public	605 Centennial Blvd, Edmond, OK 73013
05/16/2017	Oklahoma Capitol Building		

Legislative

Date	Location	Type of Hearing [Select an option]	If a Combined Hearing was held confirm that the public was invited.
[Select a date]	[Narrative, Facility and City, 100 characters]	<input type="radio"/> Public <input type="radio"/> Legislative <input type="radio"/> Combined	<input type="checkbox"/>
<b>ADD a ROW function</b> Note: States will be able to add as needed for each additional hearing.			

**GUIDANCE:** A combined hearing refers to having one joint public and legislative hearing.

**4.4.** Attach supporting documentation or a hyperlink for the public and legislative hearings.  
**[Attach supporting documentation or provide a hyperlink(s), 500 characters]**

Public – press release, web-site link, sign-in sheet, comments from hearing – TO BE UPLOADED

Legislative – Agenda –TO BE UPLOADED

**GUIDANCE:** Supporting documentation may include, but is not limited to, agendas, sign-in sheets, transcripts, and notices/advertisements of the hearings. All attachments should include the question number, question heading, type of document and the date of the hearing/meeting (as applicable).

**EXAMPLE:** An agenda would be named: 4.4. Public and Legislative Hearings Agenda 062117

## Section 5 CSBG Eligible Entities

**5.1. CSBG Eligible Entities:** In the table below, indicate whether eligible entity in the state public or private, the type(s) of entity, and the geographical area served by the entity.

CSBG Eligible Entity	Geographical Area Served (by county) [Provide all counties]	Public or Nonprofit	Type of Entity (choose all that apply)
[READ-ONLY]	[READ-ONLY]	[READ-ONLY]	<ul style="list-style-type: none"> <li>• Community Action Agency</li> <li>• Limited Purpose Agency</li> <li>• Migrant or Seasonal Farmworker Organization</li> <li>• Tribe or Tribal Organization</li> </ul>
THE ADD-A-ROW FUNCTION WILL NOT BE AVAILABLE ON THIS TABLE. ANY ADDITIONS/DELETIONS TO THE ELIGIBLE ENTITY LIST SHOULD BE MADE WITHIN THE MASTER LIST.			

**Note:** Table 5.1. pre-populates the Annual Report, Module 1, Table C.1.

Big Five Community Services	Bryan, Carter, Coal, Love, Pontotoc	Non-Profit	CAA
CAP Tulsa	Tulsa	Non-Profit	CAA
Central Oklahoma Community Action Agency	Cleveland, Lincoln, Logan, Payne, Pottawatomie, Seminole	Non-Profit	CAA
Community Action Agency of Oklahoma City and Oklahoma and Canadian Counties	Oklahoma, Canadian	Non-Profit	CAA
Community Action Development Corporation	Beckham, Cotton, Jefferson, Kiowa, Roger Mills, Tillman, Washita	Non-Profit	CAA
Community Action Resource & Development	Mayes, Nowata, Rogers, Wagoner, Washington	Non-Profit	CAA
Community Development Support Association	Garfield, Grant	Non-Profit	CAA

Deep Fork Community Action Foundation	Hughes, McIntosh, Okfuskee, Okmulgee	Non-Profit	CAA
Delta Community Action Foundation	Garvin, McClain, Stephens	Non-Profit	CAA
Great Plains Improvement Foundation	Comanche	Non-Profit	CAA
INCA Community Services	Atoka, Johnston, Marshall, Murray	Non-Profit	CAA
KI BOIS Community Action Foundation	Haskell, Latimer, LeFlore, Muskogee, Pittsburg, Sequoyah	Non-Profit	CAA
Little Dixie Community Action Agency	Choctaw, McCurtain, Pushmataha	Non-Profit	CAA
Northeast Oklahoma Community Action Agency	Adair, Cherokee, Craig, Delaware, Ottawa	Non-Profit	CAA
Opportunities, Inc.	Alfalfa, Beaver, Blaine, Cimarron, Custer, Dewey, Ellis, Harper, Kingfisher, Major, Texas, Woods, Woodward	Non-Profit	CAA
Southwest Oklahoma Community Action Group	Greer, Harmon, Jackson	Non-Profit	CAA
United Community Action Program	Creek, Kay, Noble, Osage, Pawnee	Non-Profit	CAA
Washita Valley Community Action Council	Caddo, Grady	Non-Profit	CAA

**GUIDANCE:** Under *Type of Entity*, select more than one type by holding down the CTRL key while making selections.

**Note:** Whether nonprofit or public, entities that receive CSBG funds are generally considered to be Community Action Agencies for the purpose of administering CSBG. The only specific exceptions outlined in the CSBG Act are Limited Purpose Agencies, Migrant and Seasonal Farmworker organizations, and Tribes and Tribal Organizations

**Instructional Note: Limited Purpose Agency** refers to an eligible entity that was designated as a limited purpose agency under Title II of the Economic Opportunity Act of 1964 for fiscal year 1981, that served the general purposes of a community action agency under Title II of the Economic Opportunity Act, that did not lose its designation as a limited purpose agency under Title II of the Economic Opportunity Act as a result of failure to comply with that Act and that has not lost its designation as an eligible entity under the CSBG Act.

**Instructional Note: 90 percent funds** are the funds a state provides to eligible entities to carry out the purposes of the CSBG Act, as described under Section 675C of the CSBG Act. A state must provide “no less than 90 percent” of their CSBG allocation, under Section 675B, to the eligible entities.

5.2. Total number of CSBG eligible entities: **18** [This will automatically update based on Table 5.1.]

5.3. **Changes to Eligible Entities List:** Within the tables below, describe any changes that have occurred to the Eligible Entities within the state since the last federal fiscal Year (FFY), as applicable.

One or more of the following changes were made to the eligible entity list: [Check all that apply].

- Designation and/or Re-Designation
- De-designations and/or Voluntary Relinquishments
- Mergers
- No Changes to Eligible Entities List

**GUIDANCE:** The following three questions will only need to be answered based on your response to 5.3.

5.3a. **Designation and Re-Designation:** Identify any new entities that have been designated as eligible entities, as defined under Section 676A of the Act, since the last federal fiscal year. Include any eligible entities designated to serve an area previously not served by CSBG as well as any entities designated to replace another eligible entity that was terminated (de-designated) or that voluntarily relinquished its status as a CSBG eligible entity. **N/A**

CSBG Eligible Entity	Type	Start Date	Geographical Area Served
	[Dropdown: • Designation • Permanent Re-Designation • Interim Re-Designation]	[Date Picker]	[Narrative, 550 characters]

CSBG Eligible Entity	Type	Start Date	Geographical Area Served
<b>ADD-A-ROW FUNCTION.</b> Note: States will be able to add a row as needed.			

**GUIDANCE:** A designation refers to an entity that was not receiving funding in the previous federal fiscal year(s) and/or was not included in the previous CSBG State Plan. Re-designation refers to an entity that is already designated/receiving funds but is now receiving funds to serve an additional geographic area previously served by another entity. A permanent re-designation **must be conducted consistent with procedures outlined in Section 676A of the CSBG Act.** An interim re-designation may be noted when an entity has been identified to provide services after a voluntary relinquishment pending official designation of a permanent entity consistent with the requirements of Section 676A. See CSBG Act 676A, *Designation and Redesignation...*, for more information.

**5.3b. De-Designations and Voluntary Relinquishments:** Identify any entities that are no longer receiving CSBG funding. Include any eligible entities have been terminated (de-designated) as defined under Section 676(c) and Section 676C of the Act, or voluntarily relinquished their CSBG eligible entity status since the last federal fiscal year. **N/A**

CSBG Eligible Entity	Reason
[Narrative, 150 characters]	[Dropdown: • Termination/De-designation • Voluntary Relinquished]
<b>ADD-A-ROW FUNCTION.</b> Note: States will be able to add a row as needed.	

**5.3c. Mergers:** In the table below, provide information about any mergers or other combinations of two or more eligible entities that were each listed in the prior year state plan. **N/A**

Original CSBG Eligible Entities	Surviving CSBG Eligible Entity	New Name (as applicable)	DUNS No.
[Narrative, 500 characters]  <i>List and number all entities involved.</i>	[Narrative, 150 characters]	[Narrative, 150 characters]	[Narrative, 150 characters]
<b>ADD-A-ROW FUNCTION.</b> Note: States will be able to add a row as needed.			

**GUIDANCE:** This question refers to the merger of two or more existing CSBG eligible entities only. If an organization that was not previously a CSBG eligible entity merges is the surviving organization in a merger with a CSBG eligible entity, the new entity should be listed under 5.3a. as a new designation, while the previously funded CSBG eligible entity should be included under 5.3b.

## Section 6 Organizational Standards for Eligible Entities

**Note:** Reference IM 138, *State Establishment of Organizational Standards for CSBG Eligible Entities*, for more information on Organizational Standards. Click [HERE](#) for IM 138.

**6.1. Choice of Standards:** Confirm whether the state will implement the CSBG Organizational Standards Center of Excellence (COE) organizational standards (as described in IM 138) or an alternative set during the federal fiscal year(s) of this planning period. **[Select one]**

- COE CSBG Organizational Standards
- Modified version of COE CSBG Organizational Standards
- Alternative set of organizational standards

**Note:** Item 6.1. pre-populates the Annual Report, Module 1, Item D.1.

**6.1a. Modified Organizational Standards:** In the case that the state is requesting to use modified COE-developed organizational standards, provide the proposed modification for the FFY of this planning period including the rationale.

**[Narrative, 2500 characters] N/A**

**6.1b. Alternative Organizational Standards:** If using an alternative set of organizational standards, attach the complete list of alternative organizational standards. **[Attachment (as applicable)] N/A**

**6.1c. Alternative Organizational Standards:** If using an alternative set of organizational standards: 1) provide any changes from the last set provided during the previous State Plan submission; 2) describe the reasons for using alternative standards; and 3) describe how they are at least as rigorous as the COE-developed standards. **N/A**

There were no changes from the previous State Plan submission **[Narrative, 2500 characters if not selected] N/A**

Provide reason for using alternative standards **[Narrative, 2500 characters] N/A**

Describe rigor compared to COE-developed Standards **[Narrative, 2500 characters] N/A**

**6.2. Implementation:** Check the box that best describes how the state officially adopted organizational standards for eligible entities in the state in a manner consistent with the state's administrative procedures act. If "Other" is selected, provide a timeline and additional information, as necessary. **[Check all that applies and narrative (as applicable)]**

- Regulation
- Policy
- Contracts with eligible entities
- Other, describe: **[Narrative, 5000 characters]**

**6.3. Organizational Standards Assessment:** Describe how the state will assess eligible entities against organizational standards this federal fiscal year(s). **[Check all that apply]**

- Peer-to-peer review (with validation by the state or state-authorized third party)
- Self-assessment (with validation by the state or state-authorized third party)
- Self-assessment/peer review with state risk analysis
- State-authorized third party validation
- Regular, on-site CSBG monitoring
- Other

**6.3a. Assessment Process:** Describe the planned assessment process. **[Narrative, 5000 characters]**

Oklahoma Eligible Entities upload documentation supporting organizational standards compliance to the State's on-line organizational standards documentation management system. The documentation is reviewed and validated by state monitors through desktop and on-site monitoring visits.

The State's on-line organizational standards documentation management system is a new process implemented in 2019 that increases efficiency and consistency of assessments. The software allows for the entities to routinely provide supporting documentation as it occurs or is due and allows the state monitors to review and validate the documentation throughout the year without having review all documentation onsite.

**GUIDANCE:** Descriptions should also include improvements to the process made since the previous year including any new processes to increase efficiency or consistency of assessments.

**6.4. Eligible Entity Exemptions:** Will the state make exceptions in applying the organizational standards for certain eligible entities due to special circumstances or organizational characteristics (as described in IM 138)?  Yes  No

**GUIDANCE:** The following question will only need to be answered based on your response to 6.4.

**6.4a.** Provide the specific eligible entities the state will exempt from meeting organizational standards, and provide a description and a justification for each exemption. Total Number of Exempt Entities: **[Auto – calculated] N/A**

CSBG Eligible Entity	Exemption Provided	Description/Justification
[Narrative, 150 characters]	[Select Yes or No]	[If Yes is selected, provide a narrative, 2500 characters]
<b>ADD a ROW function</b> Note: Rows will be able to be added for each additional exception.		

**6.5. Performance Target:** Provide the percentage of eligible entities that the state expects to meet all the state-adopted organizational standards for the FFY(s) of this planning

period. **[Insert a percentage]**

**Year One 50% Year Two 55%**

**Note:** Item 6.5. is associated with State Accountability Measures 6Sa and pre-populate the Annual Report, Module 1, Table D.2.

**GUIDANCE:** Prior to setting the target, states should review [IM 138](#), review previous performance, and collaborate with the eligible entities and state association in identifying targets.

**SECTION 7  
State Use of Funds**

**Eligible Entity Allocation (90 Percent Funds)** [Section 675C(a) of the CSBG Act]

**7.1. Formula:** Select the method (formula) that best describes the current practice for allocating CSBG funds to eligible entities. **[Check one and narrative where applicable]**

- Historic
- Base + Formula
- Formula Alone
- Formula with Variables
- Hold Harmless + Formula
- Other

**7.1a. Formula Description:** Describe the current practice for allocating CSBG funds to eligible entities. **[Narrative, 5000 characters]**

Eligible Entities are awarded a base amount of \$10,000 per county within their service area. The remaining funds are allocated by a formula based on the poverty population, elderly population and the total square miles per county. Effective in Federal fiscal year 2015, the State Association Board of Directors proposed to the state office that the difference between 2000 and 2010 census data in the formula be allocated at 10% each year. This allows for entities with an increase population to receive additional funds while at the same time decreasing funds to those with a decrease in population without drastically impacting their budgets.

**7.1b. Statute:** Does a state statutory or regulatory authority specify the formula for allocating "not less than 90 percent" funds among eligible entities?  Yes  No

**7.2. Planned Allocation:** Specify the percentage of your CSBG planned allocation that will be funded to eligible entities and "not less than 90 percent funds" as described under Section 675C(a) of the CSBG Act. In the table, provide the planned allocation for each eligible entity receiving funds for the fiscal year(s) covered by this plan.

Year One 90 \_\_\_\_\_ % Year Two 90 \_\_\_\_\_ %

Planned CSBG 90 Percent Funds – Year One	
CSBG Eligible Entity	Funding Amount \$
Pre-populates from the CSBG Eligible Entity Master List	Enter the dollar amount for each eligible entity for the first FFY covered by this plan
<b>Total</b>	Auto-calculated
Big Five Community Services	350,330
CAP Tulsa	928,972
Central Oklahoma Community Action Agency	862,368
Community Action Agency of Oklahoma City and Oklahoma and Canadian Counties	1,435,998

Community Action Development Corporation	224,210
Community Action Resource & Development	390,522
Community Development Support Association	139,116
Deep Fork Community Action Foundation	259,602
Delta Community Action Foundation	201,006
Great Plains Improvement Foundation	236,420
INCA Community Services	158,660
KI BOIS Community Action Foundation	588,904
Little Dixie Community Action Agency	226,638
Northeast Oklahoma Community Action Agency	440,384
Opportunities, Inc.	380,696
Southwest Oklahoma Community Action Group	113,724
United Community Action Program	398,222
Washita Valley Community Action Council	186,516

Planned CSBG 90 Percent Funds – Year Two	
CSBG Eligible Entity	Funding Amount \$
Pre-populates from the CSBG Eligible Entity Master List	Enter the dollar amount for each eligible entity for the second FFY covered by this plan
<b>Total</b>	Auto-calculated

Big Five Community Services	350,330
CAP Tulsa	928,972
Central Oklahoma Community Action Agency	862,368
Community Action Agency of Oklahoma City and Oklahoma and Canadian Counties	1,435,998
Community Action Development Corporation	224,210
Community Action Resource & Development	390,522
Community Development Support Association	139,116
Deep Fork Community Action Foundation	259,602
Delta Community Action Foundation	201,006
Great Plains Improvement Foundation	236,420
INCA Community Services	158,660
KI BOIS Community Action Foundation	588,904
Little Dixie Community Action Agency	226,638
Northeast Oklahoma Community Action Agency	440,384
Opportunities, Inc.	380,696
Southwest Oklahoma Community Action Group	113,724

United Community Action Program	398,222
Washita Valley Community Action Council	186,516

**Note:** This information pre-populates the state’s Annual Report, Module 1, Table E.2.

**7.3. Distribution Process:** Describe the specific steps in the state’s process for distributing 90 percent funds to the eligible entities and include the number of days each step is expected to take; include information about state legislative approval or other types of administrative approval (such as approval by a board or commission). **[Narrative, 5000 characters]**

Upon receipt of the current allocation Grant Award the State distributes funds to eligible entities as follows:

- The State applies formula to allocation to determine each eligible entity’s distribution amount – not more than 5 workdays
- The State prepares a funding list and routes for approval to Service Director thru Director of Programs and Programs Manager – not more than 5 workdays
- The State prepares award letters and distributes to eligible entities – not more than 5 workdays

**7.4. Distribution Timeframe:** Does the state plan to make funds available to eligible entities no later than 30 calendar days after OCS distributes the federal award?  Yes  No

**7.4a. Distribution Consistency:** If no, describe state procedures to ensure funds are made available to eligible entities consistently and without interruption. **[Narrative, 5000 Characters]**

Funds are made available to eligible entities no later than 30 days after receipt of the current allocation Grant Award with two exceptions. Contracts with eligible entities begin on the calendar year and run 21 months, so the first allocation is not available until January. This process is consistently followed every grant year. The second exception is when a small allocation is received we may opt to hold it and distribute it in combination with the remaining, larger allocation for that quarter when it is received.

**Note:** Item 7.4 is associated with State Accountability Measure 2Sa and may pre-populate the state’s annual report form.

**7.5. Performance Management Adjustment:** Describe the state’s strategy for improving grant and/or contract administration procedures under this State Plan as compared to past plans. Any improvements should be based on analysis of past performance, and should consider feedback from eligible entities, OCS, and other sources, such as the public hearing. If the state is not making any improvements, provide further detail. **[Narrative, 5000 Characters]**

The State has a high ACSI rating for its grant award process and based upon feedback from the eligible entities the state is not planning changes to its process at this time.

**Note:** This information is associated with State Accountability Measure 2Sb and may pre-populate the state’s annual report form.

**Administrative Funds** [Section 675C(b)(2) of the CSBG Act]

**7.6. Allocated Funds:** Specify the percentage of your CSBG planned allocation for administrative activities for the FFY(s) covered by this State Plan.

Year One 5 %      Year Two 5 %      [Numeric response, specify %]

**Note:** This information pre-populates the state’s Annual Report, Module 1, Table E.4.

**7.7. State Staff:** Provide the number of state staff positions to be funded in whole or in part with CSBG funds for the FFY(s) covered by this State Plan.

Year One 13      Year Two 13      [Numeric response, 0.00 – 99.99]

**7.8. State FTEs:** Provide the number of state Full Time Equivalents (FTEs) to be funded with CSBG funds for the FFY(s) covered by this State Plan?

Year One 3      Year Two 3      [Numeric response, 0.00 – 99.99]

**Use of Remainder/Discretionary Funds** [Section 675C(b) of the CSBG Act]

**7.9. Remainder/Discretionary Funds Use:** Does the state have remainder/discretionary funds, as described in Section 675C(b) of the CSBG Act?       Yes       No

**GUIDANCE:** “No” should only be selected if the percentages provided under 7.2. and 7.6. equal to 100%.

If yes, provide the allocated percentage and describe the use of the remainder/discretionary funds in the table below. Year One 5 % Year Two 5 %

**Note:** This response will link to the corresponding assurance, Item 14.2.

**Instructional Note:** The assurance under 676(b)(2) of the Act (Item 14.2 of this State Plan) specifically requires a description of how the state intends to use remainder/discretionary funds to “support innovative community and neighborhood-based initiatives related to the purposes of [the CSBG Act].” Include this description in Item 7.9f of the table below and/or attach the information.

If a funded activity fits under more than one category in the table, allocate the funds among the categories. For example, if the state provides funds under a contract with the State Community Action association to provide training and technical assistance to eligible entities and to create a statewide data system, the funds for that contract should be allocated appropriately between Items 7.9a. – 7.9c. If allocation is not possible, the state may allocate the funds to the main category with which the activity is associated.

**Note:** This information is associated with State Accountability Measures 3Sa and pre-populates the Annual Report, Module 1, Table E.7.

<b>Use of Remainder/Discretionary Funds – Year One</b>		
<b>Remainder/Discretionary Fund Uses</b> (See 675C(b)(1) of the CSBG Act)	<b>Planned \$</b>	<b>Brief Description of Services and/or Activities</b>
7.9a. Training/technical assistance to eligible entities	<b>Enter either a planned \$ for each item listed for the first FFY that this plan covers.</b>	These planned services/activities will be described in State Plan Item 8.1 <b>[Read Only]</b>
7.9b. Coordination of State-operated programs and/or local programs		These planned services/activities will be described in State Plan Section 9, State Linkages and Communication <b>[Read Only]</b>
7.9c. Statewide coordination and communication among eligible entities		These planned services/activities will be described in State Plan Section 9, State Linkages and Communication <b>[Read Only]</b>
7.9d. Analysis of distribution of CSBG funds to determine if targeting greatest need		<b>[Narrative, 5000 characters]</b>
7.9e. Asset-building programs		<b>[Narrative, 5000 characters]</b>
7.9f. Innovation programs/activities by eligible entities or other neighborhood group		Describe here. <b>[Narrative, 5000 characters]</b>
7.9g. State charity tax credits		<b>[Narrative, 5000 characters]</b>
7.9h. Other activities [Specify under Column 4]		Specify the other activities funded through discretionary funds here. <b>[Narrative, 5000 characters]</b>
<b>Totals</b>	<b>Auto-calculated</b>	
7.9a. Training/technical assistance to eligible entities	\$50,000	State Assn. for T&TA to EEs = \$35,000 Conference Travel for EEs - \$15,000
7.9c. Statewide coordination and communication among eligible entities	\$40,000	State Assn for operational support
7.9e. Asset-building programs	90,000	Asset Development Program
7.9f. Innovation programs/activities by eligible entities or other neighborhood group	\$125,804	Eligible Entities - these funds are made available to the eligible entities upon submission of a request by the entity or network for pilot programs, projects or other activities. Examples of past programs have been a healthy foods initiative, support for a New Teacher Career Track, a reintegration Pilot Project, an Early Childhood Pilot Program and development of an Organizational Standards document management system
7.9h. Other activities [Specify under Column 4]	112,100	CAPTAIN on-line data collection system = \$102,100 CNA on-line survey tool and survey data collection system maintenance = \$5,000 Organizational Standards on-line documentation management system maintenance = \$5,000

<b>Use of Remainder/Discretionary Funds – Year Two (as applicable)</b>		
<b>Remainder/Discretionary Fund Uses (See 675C(b)(1) of the CSBG Act)</b>	<b>Planned \$</b>	<b>Brief Description of Services and/or Activities</b>
7.9a. Training/technical assistance to eligible entities	<b>Enter either a planned \$ or % for each item listed for the first FFY that this plan covers.</b>	These planned services/activities will be described in State Plan Item 8.1 <b>[Read Only]</b>
7.9b. Coordination of State-operated programs and/or local programs		These planned services/activities will be described in State Plan section 9, State Linkages and Communication <b>[Read Only]</b>
7.9c. Statewide coordination and communication among eligible entities		These planned services/activities will be described in State Plan section 9, State Linkages and Communication <b>[Read Only]</b>
7.9d. Analysis of distribution of CSBG funds to determine if targeting greatest need		<b>[Narrative, 5000 characters]</b>
7.9e. Asset-building programs		<b>[Narrative, 5000 characters]</b>
7.9f. Innovation programs/activities by eligible entities or other neighborhood group		Describe here. <b>[Narrative, 5000 characters]</b>
7.9g. State charity tax credits		<b>[Narrative, 5000 characters]</b>
7.9h. Other activities [Specify under Column 4]		Specify the other activities funded through discretionary funds here. <b>[Narrative, 2500 characters]</b>
<b>Totals</b>	<b>Auto-calculated</b>	
7.9a. Training/technical assistance to eligible entities	\$50,000	State Assn. for T&TA to EEs = \$35,000 Conference Travel for EEs - \$15,000
7.9c. Statewide coordination and communication among eligible entities	\$40,000	State Assn for operational support
7.9e. Asset-building programs	90,000	Asset Development Program
7.9f. Innovation programs/activities by eligible entities or other neighborhood group	\$125,804	Eligible Entities - these funds are made available to the eligible entities upon submission of a request by the entity or network for pilot programs, projects or other activities. Examples of past programs have been a healthy foods initiative, support for a New Teacher Career Track, a reintegration Pilot Project, an Early Childhood Pilot Program and development of an Organizational Standards document management system
7.9h. Other activities [Specify under Column 4]	112,100	CAPTAIN on-line data collection system = \$102,100 CNA on-line survey tool and survey data collection system maintenance = \$5,000 Organizational Standards on-line documentation management system maintenance = \$5,000

**GUIDANCE:** If the percentages provided under 7.2. and 7.6. do not equal 100%, the remaining percentage should be reported under 7.9. If the state does not have any remainder/discretionary fund activities (as listed in 7.9a. – 7.9g.), the remainder should be described in 7.9h.

**7.10. Remainder/Discretionary Funds Partnerships:** Select the types of organizations, if any, the state plans to work with (by grant or contract using remainder/discretionary funds) to carry out some or all of the activities in Table 7.9. **[Check all that apply and narrative where applicable]**

- The state directly carries out all activities (No Partnerships)
- The state does not have remainder/discretionary funds
- The state partially carries out some activities
- CSBG eligible entities (if checked, include the expected number of CSBG eligible entities to receive funds) **[Numeric response, 0 – 100] 18**
- Other community-based organizations
- State Community Action association
- Regional CSBG technical assistance provider(s)
- National technical assistance provider(s)
- Individual consultant(s)
- Tribes and Tribal Organizations
- Other **[Narrative, 2500 characters]**

**Note:** This response will link to the corresponding CSBG assurance in Item 14.2.

**7.11. Performance Management Adjustment:** Describe any adjustments the state will make to the use of remainder/discretionary funds under this State Plan as compared to past plans? Any adjustment should be based on the state’s analysis of past performance, and should consider feedback from eligible entities, OCS, and other sources, such as the public hearing. If the state is not making any adjustments, provide further detail. **[Narrative, 5000 Characters]**

The State is not adjusting the use of remainder/discretionary funds under this State Plan. However, based on feedback from the EEs, the state will provide a reminder about the availability of funds at each Board of Director’s meeting.

**Note:** This information is associated with State Accountability Measures 3Sb, and may pre-populate the state’s annual report form.

**SECTION 8**  
**State Training and Technical Assistance**

**8.1. Training and Technical Assistance Plan:** Describe the state’s plan for delivering CSBG-funded training and technical assistance to eligible entities under this State Plan by completing the table below. Add a row for each activity: indicate the timeframe; whether it is training, technical assistance or both; and the topic. (CSBG funding used for this activity is referenced under item 7.9a., Use of Remainder/Discretionary Funds. States should also describe training and technical assistance activities performed directly by state staff, regardless of whether these activities are funded with remainder/discretionary funds.)

**Note:** This information is associated with State Accountability Measure 3Sc and pre-populates the Annual Report, Module 1, Table F.1.

**GUIDANCE:** Table 8.1. should only include the trainings that are being paid for using state discretionary training and technical assistance funds as noted under 7.9a.

Training and Technical Assistance – Year One			
Planned Timeframe	Training, Technical Assistance, or Both	Topic	Brief Description of “Other”
<b>Dropdown Options:</b> <ul style="list-style-type: none"> <li>• FY1 Q1</li> <li>• FY1 Q2</li> <li>• FY1 Q3</li> <li>• FY1 Q4</li> <li>• Ongoing/Multiple Quarters</li> <li>• All quarters</li> </ul> <p>[Select one dropdown per row]</p>	<b>Toggle Options:</b> <ul style="list-style-type: none"> <li>• Training</li> <li>• Technical Assistance</li> <li>• Both</li> </ul> <p>[Select one dropdown per row]</p>	<b>Dropdown Options:</b> <ul style="list-style-type: none"> <li>• Fiscal</li> <li>• Governance/Tripartite Boards</li> <li>• Organizational Standards – General</li> <li>• Organizational Standards – for eligible entities with unmet TAPs or QIPs</li> <li>• Correcting Significant Deficiencies Among Eligible Entities</li> <li>• Reporting</li> <li>• ROMA</li> <li>• Community Assessment</li> <li>• Strategic Planning</li> <li>• Monitoring</li> <li>• Communication</li> <li>• Technology</li> <li>• Other</li> </ul> <p>[Select one dropdown per row]</p>	<p>If other is selected in column 3, describe in this column</p> <p>Attendance for EE staff at National Conferences</p> <p>[Narrative, 500 characters]</p>
<b>ADD A ROW function</b> Note: Rows will be able to be added for each additional training			

Training and Technical Assistance – Year Two			
Planned Timeframe	Training, Technical Assistance, or Both	Topic	Brief Description of "Other"
<b>Dropdown Options:</b> <ul style="list-style-type: none"> <li>• FY2 Q1</li> <li>• FY2 Q2</li> <li>• FY2 Q3</li> <li>• FY2 Q4</li> <li>• Ongoing/Multiple Quarters</li> <li>• All quarters</li> </ul> [Select one dropdown per row]	<b>Toggle Options:</b> <ul style="list-style-type: none"> <li>• Training</li> <li>• Technical Assistance</li> <li>• Both</li> </ul> [Select one dropdown per row]	<b>Dropdown Options:</b> <ul style="list-style-type: none"> <li>• Fiscal</li> <li>• Governance/Tripartite Boards</li> <li>• Organizational Standards – General</li> <li>• Organizational Standards – for eligible entities with unmet TAPs or QIPs</li> <li>• Correcting Significant Deficiencies Among Eligible Entities</li> <li>• Reporting</li> <li>• ROMA</li> <li>• Community Assessment</li> <li>• Strategic Planning</li> <li>• Monitoring</li> <li>• Communication</li> <li>• Technology</li> <li>• Other</li> </ul> [Select one dropdown per row]	If other is selected in column 3, describe in this column  Attendance for EE staff at National Conferences  [Narrative, 500 characters]
<b>ADD A ROW function</b> Note: Rows will be able to be added for each additional training			

**8.1a. Training and Technical Assistance Budget:** The planned budget for the training and technical assistance plan (as indicated in the Remainder/Discretionary Funds table in item 7.9):

Year One \$50,000 Year Two \$50,000

[Prepopulated with the budget allocation for years one and two under 7.9a]

**8.1b. Training and Technical Assistance Collaboration:** Describe how the state will collaborate with the State Association and other stakeholders in the planning and delivery of training and technical assistance. [Narrative, 2500 characters]

**8.2. TAPs and QIPs:** Does the state have Technical Assistance Plans (TAPs) and/or Quality Improvement Plans (QIPs) in place for all eligible entities with unmet organizational standards, if appropriate? [Select one]  Yes  No

**Note:** 8.2 is associated with State Accountability Measure 6Sb. QIPs are described in Section 678C(a)(4) of the CSBG Act. If the state, according to their corrective action procedures, does not plan to put a QIP in place for an eligible entity with one or more unmet organizational standards, the state should put a TAP in place to support the entity in meeting the standard(s).

**8.2a. Address Unmet Organizational Standards:** Describe the state’s plan to provide T/TA to eligible entities to ensure they address unmet Organizational Standards. [Narrative, 2500 characters]

Organizational Standards compliance data is used to determine training and technical

assistance needs for the network. When several agencies are out of compliance with a standard, the state and the state association work together to provide appropriate training, most often at one of the two state association conferences. Technical assistance to individual agencies that struggle to comply with a specific standard is provided by state office monitors or other staff. The state will also seek outside assistance for the agency from our federal partners or other subject matter experts, as needed.

**8.3. Training and Technical Assistance Organizations:** Indicate the types of organizations through which the state plans to provide training and/or technical assistance as described in Item 8.1, and briefly describe their involvement. (Check all that apply.) **[Check all that applies and narrative where applicable]**

- CSBG eligible entities (if checked, provide the expected number of CSBG eligible entities to receive funds) **[Numeric response, 0 – 100]**
- Other community-based organizations
  - State Community Action association – The State Association is the primary provider/coordinator of T&TA to our EEs. The Association holds 2 conferences each year to provide training to the EEs, as well as, as needed/requested training or technical assistance. In addition, the Association employs an NCRT. The State provides funds for training and operational support to the Association.
- Regional CSBG technical assistance provider(s)
  - National technical assistance provider(s) – We plan to utilize the Association of Nationally Certified ROMA Trainers, NASCSP, CAPLAW and/or the Community Action Partnership to provide some training.
  - Individual consultant(s) – We have one NCRT consultant who we may contract with to provide training and/or technical assistance to eligible entities.
- Tribes and Tribal Organizations
- Other **[Narrative, 1000 characters]** – The State office has one NCRT on staff that provides TA to both EEs and State office staff.

**8.4. Performance Management Adjustment:** Describe adjustments the state made to the training and technical assistance plan under this State Plan as compared to past plans. Any adjustment should be based on the state’s analysis of past performance, and should consider feedback from eligible entities, OCS, and other sources, such as the public hearing. If the state is not making any adjustments, provide further detail. **[Narrative, 2500 Characters]**

The State is not adjusting the training and technical assistance plan under this State Plan. The State is working with our State Association to develop a coordinated State training and technical assistance plan for FY 2020, which includes a survey of the EEs. The State will continue to participate with them to provide any specific T&TA needs addressed as part of that process.

**Note:** This information is associated with State Accountability Measures 3Sd and may pre-populate the state’s annual report form.

## SECTION 9 State Linkages and Communication

**Note:** This section describes activities that the state may support with CSBG remainder/discretionary funds, described under Section 675C(b)(1) of the CSBG Act. The state may indicate planned use of remainder/discretionary funds for linkage/communication activities in Section 7, State Use of Funds, items 7.9(b) and (c).

- 9.1. State Linkages and Coordination at the State Level:** Describe the linkages and coordination at the state level that the state intends to create or maintain to ensure increased access to CSBG services to low-income people and communities under this State Plan and avoid duplication of services (as required by the assurance under Section 676(b)(5)). Describe additional information as needed. **[Check all that apply from the list below and provide a Narrative, 5000 Characters]**

**Note:** This response will link to the corresponding CSBG assurance, Item 14.5. In addition, this information is associated with State Accountability Measure 7Sa and pre-populates the Annual Report, Module 1, Item G.1.

- State Low Income Home Energy Assistance Program (LIHEAP) office
- State Weatherization office
- State Temporary Assistance for Needy Families (TANF) office
- State Head Start office
- State public health office
- State education department
- State Workforce Innovation and Opportunity Act (WIOA) agency
- State budget office
- Supplemental Nutrition Assistance Program (SNAP)
- State child welfare office
- State housing office
- Other

- 9.2. State Linkages and Coordination at the Local Level:** Describe the linkages and coordination at the local level that the state intends to create or maintain with governmental and other social services, especially antipoverty programs, to assure the effective delivery of and coordination of CSBG services to low-income people and communities and avoid duplication of services (as required by assurances under Section 676(b)(5) – (6)). **[Narrative, 5000 Characters]**

**State linkages and coordination occur at the state level. Eligible entities create and maintain linkages and partnerships at the local level.**

**Note:** This response will link to the corresponding CSBG assurances, Items 14.5 and 14.6, and pre-populates the Annual Report, Module 1, Item G.2.

### 9.3. Eligible Entity Linkages and Coordination

**9.3a. State Assurance of Eligible Entity Linkages and Coordination:** Describe how the state will assure that eligible entities will coordinate and establish linkages to assure the effective delivery of and coordination of CSBG services to low-income people and communities and avoid duplication of services (as required by the assurance under Section 676(b)(5)). **[Narrative, 5000 Characters]**

Each eligible entity is required to develop an outcome-based Community Action Plan that ties to the results of the entity's community needs assessment and describes the community-wide approach it will take when making decisions on the anti-poverty programs to be administered by the agency. The Plan must include a description of the current service delivery system targeted to low-income individuals and families in the service area including services offered by the entity and services provided by other agencies, a description of how the agency has coordinated and/or partnered with other local agencies to address gaps in services, and a description of how CSBG funds will be coordinated with other public and private resources. The plan is reviewed by a state monitor in conjunction with review and execution of the entity's annual funding award and by the CSBG planner in preparation of state plans and annual reports.

**Note:** This response will link to the corresponding CSBG assurance, Item 14.5. and pre-populates the Annual Report, Module 1, Item G.3a.

**9.3b. State Assurance of Eligible Entity Linkages to Fill Service Gaps:** Describe how the eligible entities will develop linkages to fill identified gaps in the services, through the provision of information, referrals, case management, and follow-up consultations, according to the assurance under Section 676(b)(3)(B) of the CSBG Act. **[Narrative, 5000 Characters]**

**Note:** This response will link to the corresponding CSBG assurance, Item 14.3b. and pre-populates the Annual Report, Module 1, Item G.3b.

Eligible entities will coordinate, and establish linkages between, governmental and other social services programs to assure the effective delivery of services to low-income individuals and families by conducting a comprehensive intake assessment and through an individualized referral and case management process unique to each organization. Through this individualized process for each community action program, the eligible entities will identify gaps in services for individuals and families.

Eligible entities use several methods by which they develop linkages to fill identified gaps in services. Examples include establishing additional linkages with current partner's organizations, knowledge of available community resources obtained by serving on other community service provider committees or groups, peer agency collaboration and professional and/or personal networking.

In addition, during annual program planning, eligible entities will brainstorm ways to fill identified gaps and identify strategies for developing linkages and/or the coordination of community partnerships to assure effective service delivery and avoid duplication of

services. Eligible entities address linkages in their annual Community Action Plan and their needs assessment summary that is submitted with their annual funding application.

**9.4. Workforce Innovation and Opportunity Act (WIOA) Employment and Training**

**Activities:** Does the state intend to include CSBG employment and training activities as part of a WIOA Combined State Plan, as allowed under the Workforce Innovation and Opportunity Act (as required by the assurance under Section 676(b)(5) of the CSBG Act)?

Yes  No

**Note:** This response will link to the corresponding CSBG assurance, Item 14.5.

**9.4a. WIOA Combined Plan:** If the state selected yes under Item 9.4, provide the CSBG-specific information included in the state's WIOA Combined Plan. This information includes a description of how the state and the eligible entities will coordinate the provision of employment and training activities through statewide and local WIOA workforce development systems. This information may also include examples of innovative employment and training programs and activities conducted by community action agencies or other neighborhood-based organizations as part of a community antipoverty strategy. **[Narrative, 5000 Characters]** N/A

**9.4b. Employment and Training Activities:** If the state selected no under Item 9.4, describe the coordination of employment and training activities, as defined in Section 3 of WIOA, by the state and by eligible entities providing activities through the WIOA system. **[Narrative, 5000 Characters]**

In addition to eligible entities making referrals to local WIOA agencies, some partner with their local Workforce agencies by co-locating, sharing resources to reduce costs of operation while making it easier for customers to access services. Others partner to develop innovative ways to leverage existing resources and to develop pilot programs. Some also partner to place WIOA clients at eligible entity offices and/or service locations for job training.

A State office staff person serves as a member of the Systems Oversight Subcommittee, which is a part of the Governor's Council on Workforce and Economic Development. This subcommittee helps shape WIOA implementation policy for Oklahoma. As such, they act as a voice for the CSBG eligible entities to make sure they are included in local strategic plans and their resources and interests are considered when drafting state plans. At committee meetings, they make sure state level decisions are made with CSBG in mind, but also ensures that local decisions are kept at the local level between CSBG eligible entities and their WIOA partners. The sub-committee meets roughly every month.

**9.5. Emergency Energy Crisis Intervention:** Describe how the State will assure, where appropriate, that emergency energy crisis intervention programs under title XXVI (relating to Low-Income Home Energy Assistance) are conducted in each community in the State, as required by the assurance under Section 676(b)(6) of the CSBG Act).

[Narrative, 5000 Characters]

**Note:** This response will link to the corresponding CSBG assurance, Item 14.6.

The state CSBG office receives LIHEAP funds from the Oklahoma State Department of Health and Human Services (DHS). In turn, the state CSBG office provides those LIHEAP funds to eligible entities to provide weatherization services. DHS uses their retained LIHEAP funds to provide emergency energy crisis intervention services through their local county offices. Eligible entities receive county DHS LIHEAP client data to use for recruitment of weatherization program clients as needed.

- 9.6. **Faith-based Organizations, Charitable Groups, Community Organizations:** Describe how the state will assure local eligible entities will coordinate and form partnerships with other organizations, including faith-based organizations, charitable groups, and community organizations, according to the state's assurance under Section 676(b)(9) of the CSBG Act. [Narrative, 5000 characters]

**Note:** this response will link to the corresponding assurance, Item 14.9

Each eligible entity is required to develop an outcome-based Community Action Plan that ties to the results of the entity's community needs assessment, and describes the community wide approach it will take when making decisions on the anti-poverty programs to be administered by the agency. The Plan must include a description of the current service delivery system targeted to low-income individuals and families in the service area including services offered by the entity and services provided by other agencies, a description of how the agency has coordinated and/or partnered with other local agencies, including faith-based, charitable and community organizations, to address gaps in services, and a description of how CSBG funds will be coordinated with other public and private resources. The plan is reviewed by a state monitor in conjunction with review and execution of the entity's annual funding award and by the CSBG planner in preparation of state plans and annual reports.

- 9.7. **Coordination of Eligible Entity 90 Percent Funds with Public/Private Resources:** Describe how the eligible entities will coordinate CSBG 90 percent funds with other public and private resources, according to the assurance under Section 676(b)(3)(C) of the CSBG Act. [Narrative, 5000 Characters]

**Note:** This response will link to the corresponding assurance, Item 14.3c.

CSBG funding forms the nucleus of the eligible entities administrative capacity. It supports the planning and program design functions and enables the agency to pursue other public and private resources to address the needs of low-income citizens. Its presence has provided eligible entities the recognition as a stable force in their communities. This measure of stability is their main asset for leveraging other program resources.

Very often, CSBG funds provide the catalyst for obtaining other funding by helping

provide the staffing resources needed to develop partnerships and linkages to design and implement new or expanded services.

The use of CSBG funds is critical to the eligible entities. It plays an important role in the agency’s ability to evaluate, plan for and meet community needs. Additionally, CSBG funds provide support for staff salaries for many of the programs and services offered by the eligible entities such as emergency assistance services, housing development and rehabilitation, weatherization, homebuyer education, and asset development.

Eligible entities address coordination of funds in their annual Community Action Plan and needs assessment summary that is submitted with their annual funding application that is reviewed by a state monitor in conjunction with review and execution of the entity’s annual funding award and by the CSBG planner in preparation of state plans and annual reports.

**9.8. Coordination among Eligible Entities and State Community Action Association:**

Describe state activities for supporting coordination among the eligible entities and the State Community Action Association. [Narrative, 5000 Characters]

**Note:** This information will pre-populate the Annual Report, Module 1, Item G.5.

The State is regularly involved in many activities that support coordination among eligible entities and the State Association such as the Oklahoma Weatherization and Housing Advisory Council, the Continuum of Care, the Governor’s Council on Homelessness, the Region VI Regional Performance and Innovation Consortia and Head Start Collaboration. In addition, the State provides operational funding to the State Association, presents at the Association’s monthly Executive Director’s meetings, participates at Association conferences. The State office also works with the State Association to develop an annual coordinated Training and Technical Assistance Plan.

**9.9. Communication with Eligible Entities and the State Community Action Association:**

In the table below, detail how the state intends to communicate with eligible entities, the State Community Action Association, and other partners identified under this State Plan on the topics listed below.

For any topic that is not applicable, select *Not Applicable* under Expected Frequency.

Communication Plan			
Subject Matter	Expected Frequency	Format	Brief Description of “Other”
Upcoming Public and/or Legislative Hearings – As needed – Email, Website, Public Notice	[Dropdown Options: • Daily • Weekly • Twice-Monthly	[Select All That Apply: • Newsletters • Mailing • Meetings/Presentations	If “Other” is selected in Columns 3, describe in this column.
State Plan Development --			

Communication Plan						
Subject Matter	Expected Frequency	Format	Brief Description of "Other"			
Biannual – Email	<ul style="list-style-type: none"> <li>• Monthly</li> <li>• Quarterly</li> <li>• Semi-Annually</li> <li>• Annually</li> <li>• Biannual</li> <li>• Triennial</li> <li>• As needed</li> <li>• Upon Request</li> <li>• Not Applicable]</li> </ul>	<ul style="list-style-type: none"> <li>• Blog</li> <li>• Email</li> <li>• Website</li> <li>• Social Media</li> <li>• Webinar</li> <li>• 1:1</li> <li>• Phone Calls</li> <li>• Public Notice</li> <li>• Letters/Hard Copies</li> <li>• Other]</li> </ul>	[Narrative, 250 characters]			
Organizational Standards Progress - As needed – Email, 1:1, Phone Calls						
State Accountability Measures Progress – As needed – Meeting/Presentation						
Community Needs Assessments/Community Action Plans – Progress - As needed – Email, 1:1, Phone Calls						
State Monitoring Plans and Policies – Annually – Email, Letter						
Training and Technical Assistance (T/TA) Plans – As needed, Email, 1:1, Phone calls						
ROMA and Performance Management – – As needed, Email, 1:1, Phone calls						
State Interagency Coordination – N/A						
CSBG Legislative/Programmatic Updates – As needed - email						
Tripartite Board Requirements – As needed – Email, 1:1, Phone calls						
<b>ADD A ROW function Note:</b> Rows will be able to be added for each additional training						
Assn Board of Directors Meetings				Monthly	Meeting/Presentation	
On-line CAA Program Implementation Manual	As needed	Website, Email				
Monitoring Visits	Annually	1:1				
Technical Assistance	As needed	Email, Phone, 1:1				
Oklahoma Weatherization & Housing Advisory Council	Monthly	Meeting/Presentation				
DHS - LIHEAP	Quarterly	Email				

Communication Plan			
Subject Matter	Expected Frequency	Format	Brief Description of "Other"
Continuum of Care	Other	Meeting/Presentation	The Continuum of Care meets bi-monthly
The Governor's Council on Homelessness	Other	Meeting/Presentation	The Governor's Council on Homelessness meets bi-monthly
Annual Continuum of Care Focus Group Meetings	Annual	Meeting/Presentation	Each Continuum of Care regional meeting is visited once a year to consult with membership
Head Start Collaboration	Other	Meeting/Presentation	Head Start Collaboration meets three times per year
Region VI Regional Performance and Innovation Consortia	Monthly	Webinar	
Governor's Oklahoma United We Ride Council	Bi-Monthly	Meeting/Presentation	

**9.10. Feedback to Eligible Entities and State Community Action Association:** Describe how the state will provide information to local entities and State Community Action Associations regarding performance on State Accountability Measures. **[Narrative, 5000 Characters]**

When received, the State will provide feedback to local entities and the State Association regarding performance on State Accountability Measures by presenting them at a State Association's Executive Directors meeting.

**Note:** This information is associated with State Accountability Measure 5S(iii) and will pre-populate the Annual Report, Module 1, Item G.6.

**GUIDANCE:** Under this question, include how the state will provide information to local entities and state associations within 60 days of receiving feedback from OCS.

**9.11. Performance Management Adjustment:** Describe any adjustments the state made to the Communication Plan in this State Plan as compared to past plans. Any adjustment

should be based on the state's analysis of past performance, and should consider feedback from eligible entities, OCS, and other sources, such as the public hearing. If the state is not making any adjustments, provide further detail. **[Narrative, 5000 Characters]**

There has been no feedback on the State's communication plan, therefore the state will not be making any adjustments at this time.

**Note:** This information is associated with State Accountability Measures 7Sb; this response may pre-populate the state's annual report form.

**SECTION 10**  
**Monitoring, Corrective Action, and Fiscal Controls**

**Monitoring of Eligible Entities** (Section 678B(a) of the CSBG Act)

**10.1.** Specify the proposed schedule for planned monitoring visits including: full on-site reviews; on-site reviews of newly designated entities; follow-up reviews – including return visits to entities that failed to meet state goals, standards, and requirements; and other reviews as appropriate.

This is an estimated schedule to assist states in planning. States may indicate “no review” for entities the state does not plan to monitor in the performance period.

**Note:** This information is associated with State Accountability Measure 4Sa(i); this response pre-populates the Annual Report, Module 1, Table H.1.

**GUIDANCE:** Monitoring that is specific to organizational standards should be referenced within Section 6, Item 6.3a.

Monitoring Schedule – Year One						
CSBG Eligible Entity	Monitoring Type	Review Type	Target Quarter	Start Date of Last Full Onsite Review	End Date of Last Full Onsite Review	Brief Description of “Other”
Narrative, 150 characters	[Dropdown Options: • Full On-Site • Newly Designated • Follow-up • Other • No Review]	[Dropdown Options: • Onsite Review • Desk Review]	[Dropdown Options: • FY1 Q1 • FY1 Q2 • FY1 Q3 • FY1 Q4]	Select a Date	Select a Date	If “Other” is selected in Column 2, describe in this column  [Narrative, 500 characters]

Big Five	Other	Desk Review	FY1 Q4	09/25/2018	09/28/2018	Desk Review
COCAA	Other	Desk Review	FY1 Q4	08/6/2019	08/15/2019	Desk Review
OKC	Other	Desk Review	FY1 Q4	09/2019	09/2019	Desk Review
CADC	Other	Desk Review	FY1 Q2	03/12/2018	03/20/2018	Desk Review
CARD	Full On-Site	On-Site	FY1 Q4	07/24/2018	08/01/2018	
CDSA	Other	Desk Review	FY1 Q1	10/09/2018	10/11/2018	Desk Review

Deep Fork	Full On-Site	On-Site	FY1 Q3	04/24/2018	05/04/2018	
Delta	Full On-Site	On-Site	FY1 Q4	09/11/2018	09/14/2018	
Great Plains	Other	Desk Review	FY1 Q4	07/09/2019	07/12/2019	Desk Review
INCA	Other	Desk Review	FY1 Q4	07/30/2019	08/09/2019	Desk Review
KI BOIS	Full On-Site	On-Site	FY1 Q3	04/23/2018	04/27/2018	
Little Dixie	Other	Desk Review	FY1 Q4	07/10/2018	07/17/2018	Desk Review
Northeast	Other	Desk Review	FY1 Q4	06/18/2019	06/28/2019	Desk Review
Opportunities	Full On-Site	On-Site	FY1 Q3	05/21/2018	05/24/2018	
Southwest	Full On-Site	On-Site	FY1 Q3	06/11/2019	06/14/2019	
Tulsa	Other	Desk Review	FY1 Q1	06/12/2018	06/15/2018	Desk Review
United	Other	Desk Review	FY1 Q1	11/06/2018	11/09/2018	Desk Review
Washita Valley	Other	Desk Review	FY1 Q4	08/21/2018	08/24/2018	Desk Review

**Monitoring Schedule – Year Two**

CSBG Eligible Entity	Monitoring Type	Review Type	Target Quarter	Start Date of Last Full Onsite Review	End Date of Last Full Onsite Review	Brief Description of "Other"
<b>This column will auto-populate from the CSBG Eligible Entity Master List</b>	<b>[Dropdown Options:</b> <ul style="list-style-type: none"> <li>• Full On-Site</li> <li>• Newly Designated</li> <li>• Follow-up</li> <li>• Other</li> <li>• No Review]</li> </ul>	<b>[Dropdown Options:</b> <ul style="list-style-type: none"> <li>• Onsite Review</li> <li>• Desk Review]</li> </ul>	<b>[Dropdown Options:</b> <ul style="list-style-type: none"> <li>• FY2 Q1</li> <li>• FY2 Q2</li> <li>• FY2 Q3</li> <li>• FY2 Q4]</li> </ul>	Select a Date	Select a Date	If "Other" is selected in Column 2, describe in this column  <b>[Narrative, 500 characters]</b>

**GUIDANCE:** Comprehensive monitoring includes a review of program, administrative, fiscal and organizational standards.

If you are monitoring an entity as a follow up to an issue with another program this can be listed under "Other."

When providing the date of your last full onsite review – this could be for any type of review that took place onsite. No dates for desk reviews should be provided here.

Big Five	Full On-Site	On-Site	FY2 Q4	09/25/2018	09/28/2018	
COCAA	Other	Desk Review	FY2 Q4	08/6/2019	08/15/2019	Desk Review
OKC	Other	Desk Review	FY2 Q4	09/2019	09/2019	Desk Review
CADC	Full On-Site	On-Site	FY2 Q2	03/12/2018	03/20/2018	
CARD	Other	Desk Review	FY2 Q4	07/24/2018	08/01/2018	Desk Review
CDSA	Other	Desk Review	FY2 Q1	10/09/2018	10/11/2018	Desk Review
Deep Fork	Other	Desk Review	FY2 Q3	04/24/2018	05/04/2018	Desk Review
Delta	Other	Desk Review	FY2 Q4	09/11/2018	09/14/2018	Desk Review
Great Plains	Other	Desk Review	FY2 Q4	07/09/2019	07/12/2019	Desk Review
INCA	Other	Desk Review	FY2 Q4	07/30/2018	08/08/2019	Desk Review
KI BOIS	Other	Desk Review	FY2 Q3	04/23/2018	04/27/2018	Desk Review
Little Dixie	Full On-Site	On-Site	FY2 Q4	07/10/2018	07/17/2018	
Northeast	Other	Desk Review	FY2 Q4	06/18/2019	06/21/2019	Desk Review
Opportunities	Other	Desk Review	FY2 Q3	05/21/2018	05/24/2018	Desk Review
Southwest	Other	Desk Review	FY2 Q3	06/11/2019	06/14/2019	Desk Review
Tulsa	Full On-Site	On-Site	FY2 Q1	06/12/2018	06/15/2018	
United	Full On-Site	On-Site	FY2 Q1	11/06/2018	11/09/2018	
Washita Valley	Full On-Site	On-Site	FY2 Q4	08/21/2018	08/24/2018	

**10.2. Monitoring Policies:** Provide a copy of state monitoring policies and procedures by attaching and/or providing a hyperlink. [Attach a document or add a link]

## The Monitoring Manual – Citizen Empowerment Team

### Liaison Monitoring Mission

The mission of the ODOC liaisons is to support agency (grantee) health and stability, ensure proper program implementation, safeguard the expenditure of state and federal funds and facilitate efforts toward poverty alleviation through diligent, thorough and constructive monitoring as well as technical assistance.

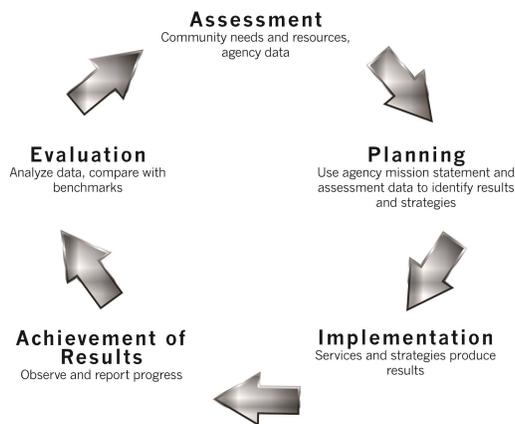
The guiding principles to monitoring the overall health of an agency have evolved into a multi-faceted approach. In January 2016, the CSBG Organizational Standards (OS) were implemented across the network. These requirements provide a standard foundation for organizational capacity for all agencies to follow. Any areas that are Unmet in the organizational Standards are addressed and tracked through a separate Technical Assistance Plan (TAP). The OS address the following categories:

1. Consumer Input and Involvement
2. Community Engagement
3. Community Assessment
4. Organizational Leadership
5. Board Governance
6. Strategic Planning
7. Human Resource Management
8. Financial Operations and Oversight
9. Data and Analysis

Results Oriented Management and Accountability (ROMA) is a complete management framework that focuses on results and continuous improvement within the agency. While not new to the network, an emphasis has been placed on the incorporation of the ROMA process into each agency and all sub-grantees (CAAs) are now required to adopt and use the ROMA framework in all agency programs.

Commented [J11]: Capital O?

### The Results Oriented Management and Accountability Cycle



Through regular monitoring, risk assessments, ROMA and the organizational standards, measures have

been put in place to ensure that agencies are successful, are serving the low-income population and are a wise steward of the public funds they receive.

#### **The Monitoring Team**

The Citizen Empowerment Team (CET) is comprised of four monitors. Three of those monitors are assigned to the Community Action Network and Monitor the following programs:

1. CSBG and CSBG Discretionary Contracts (CSBG)
2. State Appropriated Community Action Agency (SAF/CAA)
3. State Appropriated Community Action Agency –Head Start (SAF/CAA-HS)
4. Depart of Energy (DOE)
5. Department of Human Services LIHEAP Weatherization Contracts (DHS)
6. RX for Oklahoma Prescription Assistance Contract (PDP)

The fourth monitor is assigned to the following CET programs:

1. The Emergency Solutions grant (ESG)
2. Oklahoma Association of Community Action Agency Contracts (HC)
3. Monitoring support to the CDBG Team for REAP, CENA and Substate contracts.

#### **Monitoring Reviews**

The following monitoring reviews are conducted within the CET team:

1. CSBG Desktop/Annual Review – yearly review.
2. CSBG Annual Site Visits for Organizational Standards pertaining to Human Resource and Board file review – yearly review.
3. CSBG On-site Comprehensive/Three-year review and new agency assignments
4. Emergency Solutions Grant Onsite Review - yearly
5. Weatherization Programmatic Review – Onsite yearly review
  - a. Client Files
  - b. Financial Review
  - c. Programmatic Review including overall compliance with all Quality Assurance Reviews\*
6. RX for Oklahoma – Onsite yearly review
7. Organizational Standards – Desktop and onsite yearly review
8. State Association of Community Action Agencies – Onsite yearly Review

\*Quality Assurance Reviews are conducted by contractors outside of ODOC. Liaisons process cover letters for these reports which are then submitted to the agencies in OKGrants.

#### **Monitoring Tools and Timelines**

At the start of the contract process for any contract funded with federal funds, a pre-award risk assessment is conducted to determine the overall risk for the agency. Based on the final risk assessment score, the appropriate monitoring schedule is used. A letter that is signed by the Director of Programs-Monitoring is sent out within the timelines noted below. The following is the timelines for each monitoring review:

1. **CSBG Desktop/Annual Review** – The tool is maintained by the CSBG Monitoring Team.

##### **Low Risk Agency (Thriving)**

An annual desktop monitoring review will be conducted; An on-site monitoring review will be conducted at least once every three (3) years.

##### **Medium Risk Agency (Stable)**

An annual desktop monitoring review will be conducted during the first 6 months of contract period; An on-site monitoring review will be conducted at least once every three

(3) years. Additional requirements are outlined in the risk assessment.

Monitoring Protocol for Annual/Desktop Review – Low/Medium Risk

1. Upon completion of the Risk Assessment, ODOC will email the Risk Assessment to each agency and notify them of the Annual/Desktop Review.
  2. Thirty (30) days prior to the start of the review, or on a date mutually agreed upon, ODOC will notify the agency when the Annual/Desktop review will begin. The review will take place as close to the prior year's monitoring date as possible.
  3. Once the review has been completed, the tool will be completed and a letter will be emailed to the agency closing the review or a report will be attached with corrective actions. Like the comprehensive review, ODOC will give the agency 30-days to respond to the corrective actions. Their response can fix the issue or provide a plan to fix the issue. It is important that the corrective actions are addressed in a timely manner and not go on for multiple months.
  4. The Annual/Desktop Review will also address the status of the agency's compliance with the Org. Standards.
  5. The SAF/CAA and SAF/CAA-HS contracts will be monitored yearly. ODOC will contact the agency during the review period to request the monthly/expanded general ledgers.
  6. If the agency is deemed to be a medium risk, the desktop review must be conducted during the first six months of the CSBG contract period. Technical assistance will also be required of the agency and can be documented through emails, reports from on-site visits.
2. **CSBG On-site Comprehensive/Three-year review/new agency assignments/High Risk Agencies** – The Tool is maintained by the CSBG Monitoring Team. A monitoring notification is sent 60-days prior to the actual monitoring.

High Risk Agency Monitoring Schedule – The high risk (Vulnerable or In Crisis) monitoring protocol includes multiple phases of contact with the agency during the contract period. Below is an outline for the special monitoring requirements/activities. Other reporting requirements are also outlined in the Risk Assessment.

- Liaison staff completing the assessment will identify factors that contributed to the risk score.
- Technical assistance will be provided to the subrecipient due to the "High" risk status.
- Liaison will conduct a comprehensive on-site monitoring review *within the first six month of contract period* and prepare/distribute a report that outlines non-compliance issues and areas that require improvement.
- Monthly phone conference meetings may be scheduled to update ODOC on the subrecipient's actions or the agency may be required to submit monthly progress reports detailing progress with its corrective action plan
- Additional on-site visits will be scheduled as needed.

Low-Risk (Thriving Agency) –

- An on-site comprehensive monitoring review will be conducted at least once every three (3) years.

New Agency Assignments – Each year upon receiving a new agency, a comprehensive monitoring will be scheduled for the new agency. A monitoring notification is sent out 60-days prior to the monitoring review.

3. **CSBG Annual Site Visits for Human Resource and Board file Review** – A monitoring notification is sent out 30-days prior to the actual monitoring; however, since this is a short 1-2 day visit, if the agency requests or chooses a sooner date, that works for both them and ODOC, that is also acceptable.

□ Because these items are based off of organizational standard requirements, this is done yearly for all agencies, regardless of risk. Upon completion of the monitoring, copies of the monitoring tool are provided to the agency so they may upload them into the CAPTAIN system for to document compliance.

4. **Weatherization Programmatic Onsite Review** – This is an onsite yearly review or possibly more if high risk. A monitoring notification is sent out within 60-days of the actual monitoring; however, since this is a short 1-2 day visit, if the agency requests or chooses a sooner date, that works for both them and ODOC, that is also acceptable. High or medium risk agencies will have multiple contacts made throughout the contract period and only one letter is required to start the process. The tool is maintained by the CSBG/WX monitoring team.
5. **RX for Oklahoma Onsite Review** – This is a yearly monitoring review for the five Prime Contractors awarded an RX for Oklahoma Contract. A monitoring notification is sent out within 60-days of the actual monitoring; however, since this is a short 1-2 day visit, if the agency requests or chooses a sooner date that works for both them and ODOC, that is also acceptable. The tool is maintained by the CSBG monitoring team.
6. **Organizational Standards** – The Organizational Standards provide standard organizational foundation for all Community Action Agencies. Through the CAPTAIN reporting system, agencies upload documents that support compliance with the 58 required standards. Each Organizational Standard has a due date in the system, which agencies must meet to ensure compliance. This review is an ongoing desk review; however, Human Resource and Board documentation contain confidential documentation that is not uploaded to the system and does require a brief one-day visit to the agency. A report is not issued for these onsite visits. ODOC provides each agency with documentation that is to be uploaded by the agency into the system for ODOC review. Any areas of non-compliance are documented through a Technical Assistance Plan (TAP) in the Organizational Tracking Software. The overall monitoring process for this is ongoing throughout the year.
7. **ESG Monitoring Review** – The Emergency Solutions Grant contracts are a competitive program and are desk-monitored yearly with an onsite review done every three years. If the agency is new or high risk, an on-site review is required. These contracts are awarded to both CAA and non-CAA entities so a separate monitoring tool and implementation manual are maintained by the ESG planner/monitor.
8. **State Association of Community Action Agencies** – The State Association (OKACAA) is awarded ODOC contracts under various funding sources. Because the purpose of their funds is for different activities than typical CAA contracts, a separate monitoring tool is maintained by the OKACAA monitor. These contracts are monitored yearly.

Once the agency’s executive director has been contacted to establish a date for the monitoring, a formal monitoring letter is sent to the agency that outlines the contracts to be monitored, times of entrance and exit interviews, specific items which will need to be reviewed and a confirmation of any other items that were discussed with the executive director.

#### **Preparing for the monitoring**

The Citizen Empowerment programs are monitored utilizing specialized monitoring tools for the particular level of monitoring need. The tools contains all the information that will be needed to verify

**Commented [J12]:** Onsite review at least once every three years, desktop review yearly if not doing an onsite monitoring. If the agency is new or high-risk on the risk assessment, it is an automatic onsite review.

**Commented [J13]:** The ESG Implementation Manual is actually maintained by the ESG Planner with lots of input from the monitor.

program and/or financial information during the visit.

During period prior to the visit, preparation work is conducted on all items that have already been submitted either through the CONFAX submission process (CAA Manual Requirement 114), Organizational Standard uploads or through requested documentation. These pre-monitoring activities can include a review of all CONFAX items, applications/RFAs, agency policy manuals and other items that the agency has submitted throughout the year as well as a review of any issues or problems the agency faced during the year.

Prior to the monitoring visit, it is crucial to review the agency's prior year's monitoring report. The problems listed in the report will key the monitor in on what items will need to be reviewed in addition to the items in the monitoring tool. If any corrective actions or discussion points have not been addressed over the course of the past year, more stringent corrective actions may be required.

Review the agency's program applications to familiarize yourself with their goals and objectives of the each program. It is helpful to keep notes while you are reading the applications. During the monitoring, visit with the program staff to ensure the goals are being met, purchases are in line with what was requested and that the proper staff are being charged to the grant.

It is also important to obtain and review monitoring reports from other funders that have visited the agency during the past year. Numerous instances across multiple funding sources can indicate a systemic, agency-wide problem. These, along with any instance of pending litigation against the agency should be noted in the monitoring report.

As part of the Organization Standards, agencies must upload their annual audit to the OS system each year. The audits can be also found under the "My Financials" section in OKGrants or as an upload to each program's RFA. Review the audit and look for findings or questioned costs that were noted and look at specific ODOC programs. Check to make sure that all ODOC programs are listed. What is the agency's cash balance? What were the total net assets and liabilities? Did they increase or decrease significantly over the past year? Was the audit completed in a timely manner? Look for anything that seems excessively high or low. This is a good tool to use in discussions with the CFO regarding the financial status of the agency. These issues should be noted in the monitoring report. The Organizational Standards also address key management issues with the agency audit as well. Any issues tied to the Organizational Standards are addressed through a separate TAP.

Each year community action agencies are required to submit 990 tax documents through the OS reporting system. ODOC staff can also access these documents at [www.guidestar.org](http://www.guidestar.org) utilizing the Advanced Search feature. Free sign-up to the Web site is required to obtain the information. If there are problems using the website, a copy of the 990 can be requested directly from the agency.

Keep in mind that a third party posts this information so there may be a time lag. If the most current information is not posted on the site, request those documents from the agency. This information will give you an idea of the financial health of the agency. If they cannot produce the documents, this may be a financial red flag. Some key things to review are:

1. Executive Staff pay
2. Current Officer Information
3. Program Expenses
4. Compensation of Highest Paid Staff Members
5. Land, Building, and Equipment Information
6. Net assets and liabilities

By reviewing the above items, a monitor can be better prepared to address possible service or management gaps and to provide guidance to staff to ensure full compliance in the future. It is important to understand that a monitoring review is not a technical assistance visit. While some assistance can be provided during the review, the purpose of the monitoring visit is to document compliance and deficiencies as well as program successes and best practice. Based on corrective actions documented during the review, technical assistance can be scheduled and provided later. These technical assistance visits are also used during times when the agency is at a higher risk and requires additional oversight by ODOC. These additional requirements are listed in each pre-award risk assessment.

The entrance interview is conducted before any monitoring activities take place. It will typically include all management staff, program directors, and staff members that are deemed necessary. It is strongly suggested that a member of the Board, if possible attend (it is a requirement for the exit interview).

During the entrance interview, the ODOC monitor will provide an outline of the monitoring activities and request any necessary documentation needed for the review. Board member interviews are also scheduled at this time.

As a courtesy, it is also beneficial to ask staff of pressing or urgent needs that may have arisen for them in order to work around. Generally the staff are all aware of the monitoring and will be available for you but unforeseen family events, sickness, or emergency meetings do arise.

Typically, at the entrance interview you will request:

1. Financial files
2. A list of all agency employees by division (to keep). This also will provide the number of agency employees.
3. Weatherization files (the number of files you pull will be determined by the size of the agency) – include any specific files you would like to see.
4. Board files
5. Insurance Information
6. Agency bank accounts/name of bank
7. Copies of current leases (building or property)
8. Procurement procedures
9. Monitoring reports from other funding sources

During the monitoring visit you will be interacting with many staff members. Listen to what they have to say. More often than not, you will get a great deal of information about the agency management and program issues just through informal conversations. Do the staff members complain about things? What are the staff work habits like? Does there appear to be inadequate supervision? Micromanagement? How do the staff interact with each other? Note anything you see or hear that seems out of the ordinary. One or two comments may not mean much, but if comments are consistently being made or you observe many instances of these occurrences, this may indicate an overall bigger problem.

During the first week of the monitoring activities, the financial and administrative review is conducted. This consists of review of the financial files, Board files, insurance documents, human resource files, and programmatic issues.

### **The Monitoring Tools**

The CSBG items below are based on a full three-year comprehensive monitoring review. The desktop/Annual tool is an abbreviated tool that contains a portion of the comprehensive items that need to

be reviewed annually. The Weatherization, RX for Oklahoma and ESG tools are separate, independent tools to be used as a program-specific monitoring.

The comprehensive and Desktop/Annual CSBG monitoring tools are broken out into multiple documents that will need to be reviewed during the onsite and/or desktop reviews.

1. ROMA – Requirement 101 of the Implementation Manual
2. Personnel Policies and Procedures - Requirement 102 and OS Section 7 (Annual and Comprehensive.)
3. Affirmative Action - Requirement 103 ( Annual and Comprehensive)
4. Client Appeals and Complaint/Grievance Procedures – Requirement 104
5. Board Governance and Organizational Leadership – Requirement 113 and OS Sections 4 and 5 (Annual and Comprehensive)
6. CONFAX – Requirement 114
7. Financial Management – Requirement 109 and OS Section 8 (Annual and Comprehensive)
8. Programmatic Reporting – Requirement 112

Program Specific Monitoring Tools include:

1. Weatherization Assistance Program – Section 3 of the Community Action Implementation Manual
2. RX for Oklahoma – RFA and RX Implementation Manual
3. Head Start Monitoring – RFA and Section 4 of the Community Action Implementation Manual

### **CSBG Monitoring Tool (Three year Comprehensive)**

#### **ROMA**

As an ODOC monitoring, you will be required to attend an 8-hour Intro to ROMA training session. During this session, you will learn all phases of ROMA and how they should be incorporated into an agency.

ROMA is a key concept of community action and is a *form of management practice* that incorporates the use of outcomes or results into the administration, management, and operation of an organization. Successful implementation of ROMA originates from a conceptual framework established by the organization. The ROMA cycle is a **continuous process** of assessment, planning and evaluating results. Results are measured in changed lives and changed conditions for individuals and families living in poverty.

A strong and thriving agency fully integrates ROMA throughout the agency. Staff are aware of the concept and utilize it regularly. The executive director and program directors support the use of ROMA in their agencies. All staff and Board are aware of the importance of ROMA and the agency's outcomes. An agency in crisis does not meet any of the reporting requirements and are totally unaware of the importance of agency planning and outcomes/results. The executive director and staff are not committed to ROMA and are not results driven. The Board is totally unaware of the concept and do not use agency data and outcomes in its decision-making.

#### **Effective ROMA Management:**

##### ***Assessment***

1. The agency has a clear anti-poverty mission reviewed by the board every 5 years
2. The agency conducts a Community Needs every three years using Oklahoma's standardized survey and report format
3. The agency uses the CNA to identify results, at the *family, agency, and/or community* levels to be achieved in their communities

##### ***Planning***

4. The agency has a Community Action Plan (CAP) that
  - a.  Is anti-poverty focused
  - b.  Is directly tied to the needs assessments
  - c.  Includes measureable performance goals/outcomes
  - d.  Includes services that match the level of need
  - e.  Contains outcome indicators
  - f.  Identifies performance targets
  - g.  Identifies the measurement tools, data, and frequency
5. The agency identifies clear links between indicators being measured and the three national goals (NPIs).
6. The agency has a strategic plan
7. Both plans (Community Action Plan & the Strategic Plan) document the full use of the ROMA cycle.

***Implementation***

8. The agency has implemented a system to track client services and outcomes throughout the year, for all ODOC and non-ODOC funded programs (CAPTAIN unless approved by ODOC).
9. Data for ALL services is entered by the 20<sup>th</sup> of each month
10. Data is reviewed periodically by agency management

***Achievement of Results***

11. The agency measures their results (outcomes for ALL services).
12. The agency compare results with outcome indicators and projected performance goals outlined in CAP
13. The agency submits their Annual Report data in a timely, complete and accurate manner

***Evaluation***

14. The agency uses the information gathered throughout the ROMA cycle to evaluate the effectiveness of the agency's programs, strategic plan, community partnerships and advocacy efforts and updates their Community Action Plan each year
15. The agency adjusts their performance goals as needed to reflect achievable targets as evidenced by actual performance achieved
16. The agency revises or discontinues strategies and services that are found not be consistent with achieving desired outcomes

**Personnel Policies and Procedures – Human Resources**

Requirement 102 of the Community Action Implementation manual outlines the requirements for the Personnel Policies and Procedures Section of the monitoring tool. As with the other documents, these procedures are to be submitted upon any modification being made to the document. The items listed in the monitoring tool must be fully addressed. Many of the requirements are rather subjective in nature. ODOC may make suggestions to the executive director and Board but unless the CAA manual specifically states a policy, the agency may make their own policy. The important part is that the agency HAS a policy that is in compliance with Requirement 102 and the Organizational Standards and that they govern by that policy.

It is important to review the relationship between the Board and the Executive Director. Information Memorandum 82 (IM 82) explains this relationship. The board has one employee and that is the executive director. There must be some accountability by the executive director to the Board. ODOC does not specifically state what that accountability must say, but rather we want to see that there is indeed a policy in place. The main thing is that the Board is aware that any unlawful or unallowable action performed by the executive director is the direct responsibility of the Board.

Because the Human Resource files also include payroll documentation, they should be reviewed in

conjunction with the financial review. A sampling of HR files should be requested from staff based on a list of agency employees for review. It is important that files are selected from all ODOC funded programs and should always include the Executive Director's file. These files should be in compliance with both ODOC policies and general agency human resource policies. The agency's personnel policies and procedures contain a required list of items to be in each employee file. ODOC requirements include:

1. The employee's resume or application
2. IRS W-4
3. Current job description
4. Personnel actions – these include raises, promotions, demotions, plans of improvement, etc.
5. Updated performance evaluations (make sure this adheres to the timeline listed in the agency's Personnel Policies and Procedures)
6. Time sheets – these are often kept in a payroll file separate from the HR file. That is fine, as long as they can be provided upon request.

Any missing information must be documented in a corrective action in the monitoring report. It is always important to keep documents that contain confidential information in a secure location. Do not leave them sitting out for others to see. Return them immediately to the appropriate staff member when finished. If a number of employee files are missing documentation this may be a red flag that there could be problems in the HR area.

When the agency submits information for the corrective action, it is important that information such as the employee's social security information be removed/redacted.

#### Affirmative Action Plan

Requirements for the agency's Affirmative Action Plan are outlined in Requirement 103 of Community Action Implementation Manual. If one or more of the items listed above are missing, it becomes a problem/corrective action in the monitoring report. The agency's Affirmative Action plan contains items that must be updated and Board-approved yearly. The following are items reviewed during the monitoring process:

1. Date of current plan
2. Equal employment policy
3. Responsibility for implementation
4. Evaluation of previous goals
5. Establish new goals and timetables
6. Procedures for dissemination of the plan
7. Internal evaluation procedures
8. Grievance Procedures
9. Identification of the Equal Employment Opportunity Officer

#### Client Appeals

All agencies are required to maintain an applicant appeal procedure to ensure equal access to services and resources available under programs funded by ODOC. The appeals process does not require an annual update, but it should be reviewed annually to ensure any changes that have been made still fall within the guidelines in Requirement 104.

#### By-Laws, Board Governance and Organizational Leadership

This review consists of By-Law requirements, Board Member documentation and the Open Meeting Act Requirements. It is important to note that while each agency's By-laws are different, the key requirements set forth in the CSBG Act must be the same. The breakout is also outlined in Requirement

113.

The agency's By-Laws typically will not change regularly. It is important to review the By-Laws during the desk monitoring and compare them with the Board Roster to ensure the roster contains the proper number of Board members. If the agency does not reflect a full Board or a Board member is shown to be seated past their term limit, a clarification must be obtained and a corrective action could be implemented. The By-Laws also outline the required number of meetings to be held in a 12-month period. Corrective actions could also be implemented in the required number of meetings has not been met.

Agencies are encouraged to fill any vacancy as soon as possible, preferably within two months. Since there is no written policy regarding a time limit to fill vacancies, we can only encourage the agencies to fill the seat(s) as quickly as possible.

Prior to the monitoring, review IM82. This will help clarify many issues you may note during the monitoring. The agency is required to keep a file on each Board member who is currently seated on their Board of Directors. Although the monitoring tool only requires that two board files be reviewed for each sector, the files are not that big and can all be reviewed in a reasonable amount of time. The sectors each have different selection documentation requirements so it is important to review the documents closely to ensure that the information in the files is consistent with the sector the member represents. For example, a low-income sector member cannot have a letter of appointment since that does not allude to a democratic selection process. The following items should be obtained and reviewed in order to ensure compliance with ODOC regulations:

1. A current Board Roster
2. A copy of the agency's By-Laws. The By-Laws should specifically outline:
  - a. Overall Term limits of members
  - b. Three-Year Term
  - c. Number of Board Members
  - d. Seating and re/seating of members (particularly the public sector representatives).
  - e. Specific agency seating procedures

Does the Board reflect compliance with the overall term limits, three-year term limit, and number of Board members listed in the By-Laws? Are the members seated and resealed in the manner listed in the agency's

By-Laws? Some agencies do not require public sector representatives to be removed and resealed after the three-year term is completed. However, OCS/ODOC policies require all members, including public sector members, be removed and resealed after each three-year term has been completed. IM provides clarification to may Board related items. If questions regarding the Board arise, it's a beneficial document to have with you during the monitoring visit.

#### Board Documentation

The monitoring tool requires the review of all Board member files. Prior to the start of the review, request the agency's most recent Board Roster. This will verify compliance with the CONFAX requirement and will also ensure that all members have a Board file and that the list is current at the time of monitoring.

The information below must be present for both new and re-seated members and must be present in each sector representative's file:

#### Low-Income Sector

At least 1/3 of the Board should represent the Low-Income and must be seated through a democratic selection process. Documents must be present that show this method was conducted. It does not necessarily have to be via an election, although many agencies have elections

complete with ballots. Other documentation can include the agenda for a public meeting, Board meeting minutes or a public notice in a newspaper. There should be a letter from the agency to the entity requesting a Board member, a letter from the organization that is providing the Board Member stating that this member was chosen to be on the Board (again, make sure the documentation is provided showing the democratic selection process). Watch closely for the word appointment in any Board file that is for a low-income seat. Appointment does not allude to a democratic selection process. The Agency Board does not have to formally accept the member since this member is selected by the low-income population.

#### Public Sector

One-third of the Board must represent the Public Sector. The public officials who fill these seats are:

1. Elected public officials that are a duly elected representative of a municipality, county, tribal government or State political subdivision. Typically most CAA's utilize their County Commissioners for this purpose. Other examples would be city mayors or their local legislators.
2. Employees of public agencies and members of boards and commissions established under State and/or local law who have responsibility and authority to determine and implement the policies of those agencies, boards or commissions. These are considered appointed officials.

An elected or appointed public official may designate another person to represent them on the Board. It is important to note that this person must have the authority to act on their behalf with regard to business of the Board (i.e. they can cast a vote for this official).

The files for these members must include a written request from the agency asking the official to be a member of their Board, correspondence from the official accepting the position and Board minutes showing the acceptance of the Board member.

#### Private Sector

The Private Sector will one-third or the remainder of the Board members. This sector can have less than one-third only if the low-income sector has more than one-third. The files for these members must include a written request from the agency asking the entity to provide a member to their Board, correspondence from the entity accepting the position and/or designating a person to serve in their place and agency Board minutes accepting the member.

It's also important to review the Board minutes to ensure the Board has voted to accept the new member(s). The member can't just "show-up" as a new Board member without the Board voting to accept them as a new member. Copies of the minutes must be each Public/Private member's file.

The agency should be submitting these regularly throughout the year in the OS software for review. If not, this will become an Unmet standard in the OS tracking system.

Often times the agencies will have other required documents in the file. If this is an internal procedure, make sure they are following these procedures. The By-Laws contain the rules for the Board of Directors. Be familiar with the By-Laws before reviewing the Board files to ensure the following:

1. The Board is fully seated with the correct number of Board members
2. The number of meetings outlined in the By-Laws have been held
3. That each members is within their term limits
4. Alternates are or are not permitted

Review the Board Roster and compare with the Board files to ensure the sector information for each member matches what is reflected on the Board Roster? If the agency allows alternates, review the process on how alternates are selected. Even though it is allowable, alternates on a Board can be detrimental. For those instances when an alternate steps-in in place of the member, they are often not well informed of the issues they could be voting on. In other instances, alternates attend meetings in place of the actual member.

Why is the member not coming? What are the policies that outline attendance for members? This should be outlined in the agency's By-Laws. Evaluate the usage of alternates and make an appropriate recommendation based on the information provided.

If the Board Roster has been modified to add/delete new members over the course of the year and has not been submitted to ODOC, this is a violation of the CONFAX requirements that state "All CONFAX items should be updated at least annually or as revised."

#### Board Member Interviews

During the monitoring visit, typically during the first week, Board Member interviews are conducted with one member from each sector. It is a good idea to give the Executive Director as much advanced notice as possible to schedule these meetings. These meetings can be requested with letter scheduling the interview followed up by a reminder email just prior to the monitoring or scheduling can also be done during the entrance interview. It's always best to be as flexible as possible when you're scheduling these meetings.

Some Board members can only come during their lunch hour or after work. In some cases, if trips are already scheduled to outreach offices in other counties, meetings can be scheduled at those offices later in the week or even the second week. This is especially helpful for those members who live three or four (or more) counties away from the main office. If possible, have the ED schedule meetings with a Board member who is very new and one that has been on the Board for some time. Based on the answers you get, this will help you provide recommendation new member training. As a last resort, phone interviews can also be conducted. In this case, make sure you get a mutually agreeable time to call so there will be enough time to finish the entire interview.

The monitoring tool has a list of questions that are asked to each Board member. It is important to ask the same questions to all Board members. The Board is a major component of community action and if they are not aware of their responsibilities, how can they do their job? Does the Board as a whole need training, or just new members? Has the agency adhered to their training plan submitted with the CSBG application? It is also important to recommend any training that would address issues noted during the review.

The staff must present all information to the Board in a clear, concise manner. The Board needs all possible information to make the best decisions they can. If the information is not understandable, they are in danger of making decisions based on incomplete or inaccurate views. If the packets and handouts are not adequate, a recommendation to the executive director may be to re-evaluate the information to the Board. If necessary provide TA to the agency staff as to what could be done different or what you see as inadequate. You will get a feeling of the Board's strength during the interviews.

#### Board/Executive Director Oversight

IM 82 from the Office of Community Services states that the Board has only one employee, and that is the executive director. What is the relationship between the Board and the ED? Who runs the show? Is the executive director accountable to the Board? The ED should adhere to the same rules as the agency staff.

Is evidence of this present? Many of these items will be noted when the Executive Director's file is reviewed. Is a Board member signing the ED's leave and time sheets? Is the ED accountable for their travel? What is the approval process for ED travel? The Board must have a policy in place that outlines the oversight between the Board and ED. If unallowable charges are incurred by the ED, the Board is responsible for those unallowable charges.

#### CONFAX

The CONFAX is list of documents that contains information about the agency. ODOC requires that these documents be kept current at all times. Effective dates shall be included on all documents. These documents are crucial to the monitoring process since the all agency policies and procedures are governed by these documents. Required items and timelines in the CONFAX include:

**Submit with annual CSBG application and as updated:**

- Board Membership Roster
- Organization Chart
- By-Laws

**Submit annually and as updated:**

- Affirmative Action Plan
- Equipment Inventory List (purchased with ODOC funds)

**Submit as updated:**

- Articles of Incorporation
- Board Committee Membership Lists
- List of all satellite offices, including address and telephone number

#### Financial Management

The financial section requires the monitor to review information from OKGrants (print or download the PDF's for review prior to arriving at the agency). The documents needed for review include the payment requests and expenditure reports for the federal programs and the reimbursement claims for the State funded programs. Under the View/Edit/Complete field, all application documents as well as the contract can be found. Under Examine Related Items, all monthly financial documents can be found. It is important to review the applications to ensure funds are being spent as outlined in the application and that appropriate staff are being paid with contract funds.

These documents are then attached to or uploaded with the transaction forms located in the monitoring tool. The first page of the transaction forms is to ensure that the monthly general ledgers on file at the agency match the monthly totals that are reported in OKGrants for the contract period. The second part is to document the specific information regarding the source documents that were reviewed.

If monthly ledgers do not match the totals submitted in OKGrants, ask the CFO/Finance Officer for an explanation. Often, it can be explained and corrected/updated ledgers can be provided. In the case that it cannot, it becomes a corrective action.

When reviewing source documentation, the following items must be checked and verified:

1. The expense is allowable under the contract.
2. The Purchase Order is prior to the date of the expense.
3. The expenses are within the contract period.
4. The source documents are defaced with "PAID", the check number and date paid.

5. No interest, penalties, entertainment costs or late fees are charged to the contracts.
6. Cost allocated expenses are charged per their Cost Allocation Plan.\*
7. Indirect costs are reported correctly based on their approved percentages.\*
8. There is a copy of the check stub attached the purchase documentation.
9. Procurement thresholds/requirements are being met (Requirement 108)
10. Adjusting Journal Entries (AJE) have adequate source documentation attached and can be tracked to the original expense.

\*The CFO should be able to provide the calculations on how each allocated expense was calculated and charged.

Inventory control is also part of the financial review. During this process you will select a sampling of items purchased with ODOC funds and staff must physically show you each item. Check to ensure the agency tag/serial number/model number/description of the item matches the description on their inventory list. The inventory process should also be evaluated to ensure that an inventory review is conducted yearly and by multiple staff members (Requirement 108).

Insurance information, specifically Bonding/Employee Dishonesty/Professional Liability; General Liability, Workers Compensation and Director and Officer's plans should be reviewed to ensure all are current and adequate coverage is being maintained. If the agency has building/property leases, those should also be reviewed to ensure all are current. Any outdated documents will be documented as a problem.

State and federal payroll should be reviewed to ensure the agency is current on all tax payments. This is done via the OS tracking system through quarterly uploads. Agencies that have not paid these taxes are placed on the debarred/suspended list and cannot be awarded contracts until they have been cleared. The SAM database can be checked to ensure compliance – [www.sam.gov](http://www.sam.gov). Any late payments or non-payment will be marked as Unmet and addressed with at TAP.

Obtain the agency's cash and/or bank balance as well as their unrestricted fund balance. A low balance could indicate financial trouble within the agency. Have the CFO or ED complete the Internal Controls page in the tool. No one person should be doing all functions. The more people assigned to financial functions, the stronger the internal controls will be. These balances are also used to address risk in many of ODOC's pre-award risk assessments for federal contracts.

Because the financial review process is a multi-step process that typically includes numerous staff members, it is best to start here. Each financial file should include the month-end journal and a detailed journal log. Each contract's month-end journal should be reviewed first to ensure they match with ODOC. If the balances match, source documentation may then be selected for review. If they do not match, you will need to meet with the appropriate staff member to determine why.

Once it has been determined that the balances match, source documentation should be selected for review. The agency will provide you with their copies of the detailed ledger, but it is best to ask for a copy to keep with the ODOC records (it's best to request this at the entrance interview to give the agency sufficient time to print them). By doing so, ODOC will have records of all expenses charged to the contracts and can be written on.

Once the detailed ledger has been provided, review the line items carefully. It is important to look for the following items.

1. Are the items charged to the correct line item? For instance, are there charges to Wal-Mart listed under Salary? Do Utilities charges have an individual's name instead of a company name listed?

2. Do the charges seem reasonable? Is there a \$10,000 copier lease? Are there numerous charges to one company? Select anything that may appear questionable. Pay close attention to those business where unallowable items maybe also be purchased from (i.e. Wal-Mart).

3. Pull high dollar purchases as well as smaller purchases. By pulling higher dollar purchases, you will have the opportunity to verify the agency is adhering to the purchasing requirements of the agency and ODOC. Were informal bids enough or was the formal bid process required? Did each item have some sort of cost comparison conducted? Was the lowest bid selected? Are all bids available for review?

4. Are the charges listed consistent with what the agency has listed in the program application? Compare notes taken during the pre-monitoring review with what was actually charged.

5. Are the charges allowable under the contract? For example, did the Weatherization program purchase food for the crew (not allowable)? Were administrative expenses incurred and charged to other lines items for programs that do not allow administrative costs?

6. Is the cost allocation plan being properly administered? Sit with the CFO or Financial Director and have them explain their cost allocation. Compare with the charges you are seeing. Are they consistent?

a. Can the CFO explain the plan? If not, this is a red flag. If they cannot explain the plan, how can use it properly?

7. Are required program/contract conditions being adhered to? Some contracts may have special conditions attached to them. It is very important to review those conditions and make sure that the agency is or has fulfilled them.

Keep the above items in mind when reviewing the detailed information. If anything looks suspicious or out-of-line, choose it for review. Also, choose some vendors that the agency uses frequently (i.e. Wal-Mart, Lowes, Home Depot). More often than not, you will get a whole month's worth of purchases for numerous programs. Make sure the expense you've selected can be located in the stack of receipts. This also provides the opportunity to ensure the agency is utilizing their procurement process agency-wide. Once the source documents have been selected for review, the agency staff will begin to pull them.

Depending on how many documents have been selected, this could take some time. This is also a good time to review the agency's HR list that was requested at the entrance meeting. Select one or two employees from each department. Also, always pull the file for the Executive Director. The HR Director can pull these so they will be ready for review as soon as you are ready. Always have the HR director keep them in their office until you are ready as these files contain confidential employee information. While staff members are doing this, you can go on to another part of the monitoring such as reviewing Board files or insurance information. It keeps the down time to a minimum.

Once the source documentation has been given to you, you will need to review it to ensure it contains the appropriate information. It is important to be familiar with the agency's procurement policies. First, do they adhere to ODOC's purchasing guidelines? And second, do they adhere to the agency's policies? Do the purchases contain:

1. Date of Purchase
2. Copy of Check
3. Check Number and Amount
4. Payee/Vendor

5. Requisition or Purchase Order
6. Invoice or Statement
  - a. Keep in mind, if an invoice is present, there must also be receipts or an itemized invoice attached. Without the itemized document, there is no way to know what the purchase was for.

Again, it is a good idea to be aware of the agency purchasing system. Some agencies allow blanket purchase orders for some vendors and some do not. If all information is not provided, question the financial staff as to why. If all information is not present the missing information becomes a problem in the monitoring report. Numerous missing items are a red flag that there could be significant financial and/or management issues.

Certain contracts have different rules and regulations. For instance, financial files may require additional source documentation on top of what is listed above. The Emergency Solutions Grants (ESG) and the Homeless Assistance Program (ODOCHP) provide funds for prevention activities. These activities also require the financial file to contain the client's application and an eviction notice/cut-off notice from the landlord or utility company. Many CAAs also require agency forms such as landlord/tenant agreements to be included in the files.

When reviewing the monthly detailed journals for CSBG, it is important to note if the employees being charged to the contract are listed in the agency's CSBG Budget Salary Support Sheet that is submitted with the initial application and also with each contract modification. Any employee salaries listed on the ledger but not in the support sheet may be required to be credited back and debited from another funding source. After you have reviewed the source documents, you will be able to answer many of the questions outlined in the monitoring tool regarding financial compliance.

This is also a good time to visit with agency fiscal staff about their procedures. The monitoring tool also includes a checklist that outlines which staff members are responsible for certain duties. Typically the agency will fill this out prior to the end of the financial review. This is a good time to go over this document with the staff. The tool will show if one person is performing duties that could put the agency at risk for fiscal mismanagement (i.e. theft or falsification of records). The tool should reveal the duties performed by a number of different staff members. This will help ensure that adequate internal controls are in place to avoid the mismanagement of funds.

The above items will provide the required information in the monitoring tool. By this time, you've seen the general journals, source documentation, procurement and payroll areas of the agency. Based on the information found during this part of the monitoring, other questions to ask or documentation to ask for may include:

1. Balance Sheet – Can the agency provide you with a current one?
2. Aging of Accounts Payable – Can they produce this for you?
3. Credit Cards – Is the agency paying them off monthly? If not, where is the interest being charged to?
4. Line of Credit (outside of agency credit cards). Does the agency have a line of credit? If so:
  - a. How much is it?
  - b. How long (months/years) is the payment on these lines?
  - c. How much interest was paid on them and where is it paid from?
5. How is the month closed out? Is there a deadline for receipts?
6. On average, how many journal entries are made each month? Is this the main method for moving funds around?
  - a. Obtain journal entry back-up for five journal entries.

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7. Is cross-training conducted among employees?
8. Does the agency have an agency wide budget?
9. Are there numerous purchases at the end of contracts?
10. How is the agency tracking annual leave?
11. Is the agency current on their health insurance payments?
12. Obtain copies of the financial documents provided to the Board of Directors.
13. What is your current cash balance?

Once these items are all completed, this generally takes care of the fiscal portion of the monitoring. Through the required information on the monitoring tool and the above questions, a relatively clear picture of the agency's overall financial health can be obtained.

### **Specific Contract Monitoring Reviews – Weatherization, RX, ESG, Org. Standards**

#### Weatherization

Weatherization monitoring activities are divided among two sets of monitors. Programmatic and financial reviews are conducted annually by the agency liaison. Technical monitoring is conducted by contracted Quality Assurance (QA) monitors at various times throughout the year and is based on a formula and their production schedule. It is important for these two monitors to work closely together to ensure that the agency is in full compliance.

Each agency that has a weatherization program has a pre-award risk assessment conducted each year prior to their award/contract. High risk agencies will have more stringent programmatic and technical monitoring requirements than a low or medium risk agency. The monitoring protocols for each risk level are outlined in the pre-award risk assessment.

During programmatic review, the agency liaisons will review the financial process and documents in the same manner as for the CSBG monitoring. Because the same financial requirements pertain to both CSBG and weatherization, corrective actions for non-compliance are also handled in the same manner.

Programmatic compliance items pertaining to DOE/DHS guidelines that are reviewed by ODOC liaisons are broken out into the following areas.

1. Production - based off the agency's management plan - RFA
2. Client file review/compliance – Based off the Client file review sheet – Requirement 304
3. Programmatic Review – This an overall review of the agency's compliance with various areas of DOE/DHS regulations and addresses the following:
  - a. Production
  - b. Average Cost Per Unit (ACPU)
  - c. Internal WX procedures
  - d. Waiting lists and deferrals
  - e. Marketing
  - f. Specific DHS requirements
  - g. Home assessment processes
  - h. Program Management
  - i. Health and Safety Compliance
  - j. NEAT/MHEA Compliance
4. Training/staffing compliance - RFA

#### Production – Ongoing/Desktop/Onsite

During the application process, the agency is required to complete a management plan in OKGrants. The

management plan shows how many homes in each county they plan to do each month and is calculated on a monthly basis. Each month, the agency will submit a monthly progress report in OKGrants that shows how many homes were completed during that month. If any agency falls short, the liaison will contact the agency to follow up on their plan to catch up. Multiple months of incomplete production will require the agency to provide additional information on their plan to catch up and ultimately a formal productivity plan if they cannot immediately catch up. This issue is also part of the risk assessment that will outline the various monitoring protocol for the agency. High and medium risk agencies will have additional monitoring requirements to follow.

#### Client File Review - Onsite

This is done on-site by ODOC staff at least yearly. High/medium risk may call for additional reviews. Requirement 304 outlines all forms that each agency must maintain in a client file for all clients served under the DOE and/or DHS programs. The Client File Review sheet is based off the required forms and is used to monitor this requirement.

Each form in the client's file must be completed in its entirety. While ODOC staff are not technical monitors, the review must ensure that all forms are in the file and completed. Contracted QA monitors will look at the technical aspect of each form during their on-site review and issue a separate report that will address any technical issues found during their review. This is where it is important that both ODOC and QA monitors work together to ensure a thorough monitoring is conducted for the agency. The liaison's report should also outline systemic problems noted in the QA reports. This will help to provide the full pictures of the program's overall compliance.

Key areas that should be reviewed by the liaisons are:

1. All clients have a completed application that include a job number in accordance with Requirement 304.
2. Income documents are present and fall within each program's guidelines for the number of household residents.
3. If no income is present, Form 34 has been completed.
4. Photos are present per Requirement 304
5. All information is provided on the BWR. Be sure to key in on the following:
  - a. The start/finish dates on the home were within the contract period;
  - b. The correct contract dates are noted; and
  - c. The items outlined on the form match the NEAT/MHEA audit and the invoices.
6. The QCI has signed Form 44
7. Materials receipts are present and match expenses that coincide with the work recommended on the NEAT/MHEA audit and are full outlined on the BWR. Review receipts to ensure all purchases are within the contract period and allowable under each program.
8. Homes that are 45 years old at the time of application have been addressed per SHPO requirements - Requirement 308A.
9. If the lead testing on the home shows positive (this will be noted on Form 42), lead safe weatherization practices were conducted per RRP rules and documented with the appropriate photographic documentation.

#### Programmatic Review – Desktop/Onsite

During this portion of the review, the liaison will review and document the overall compliance with the following:

1. Did they exceed the established average cost per unit?
2. Did the agency exceed the Health and Safety limit?

3. Did they meet their overall management plan?
4. Do staff utilize SWS, the Field Guides and the CAA implementation manual to ensure compliance?
5. Does the agency properly maintain their equipment and document the maintenance for the required items?
6. Is the agency complying with all Health and Safety Regulations? This includes:
  - a. Correctly addressing unvented primary heaters and unsafe secondary heaters?
  - b. Have high Carbon Monoxide (CO) levels been addressed?
7. Has the agency adhered to all NEAT/MHEA guidelines? Requirement 309

#### Staff Training and Staffing Compliance

Agency staff are required to complete various levels of training based on their job duties. Each contract year, the agency submits a staff training verification form that outlines each staff weatherization member, their trainings, when the trainings expire and their upcoming training needs. During the monitoring review, the liaison will verify that all staff are current on the required trainings and/or have registered for any required training that will be needed.

#### RX for Oklahoma

The RX for Oklahoma monitoring follows the same guiding principles as the CSBG monitoring process. It is important to address all the questions on the tool. Because all five regions are currently managed by a Community Action, some items on the tool can be addressed through the regular submissions in the OS Reporting system. This will help in asking for items that have already been submitted. However, it is important to keep in mind that there could possibly be a non-CAA entity managing a Region at some point in time and all questions will have to be addressed during the onsite review. All RX monitoring reviews are conducted yearly and must be completed by June 30 of each year.

#### Emergency Solutions Grant (ESG)

Because the Emergency Solutions Grant is awarded to both CAA and non-CAA entities, the monitor must obtain all necessary documents on-site as many of the sub-grantees do not have access to the OS tracking system. The monitoring process for ESG is fully documented through the OKGrants reporting system. All correspondence is sent, submitted and documented in OKGrants. As noted above, all sub-grantees will have an onsite monitoring at least once every three years or an annual desktop monitoring. If they are new or high risk, an on-site visit required.

#### Organizational Standards (OS)

With the inception of the Organizational Standards, specific areas of overall agency management are also fully reviewed and determined to be “Met” or “Unmet.” These standards are reviewed monthly by ODOC through the CAPTAIN Reporting system. Each standard has a standardized timeline for the agencies to upload documentation to the system. These timelines range from monthly to every five years. The OS standards address the following areas:

1. Consumer Input and Involvement
2. Community Engagement
3. Community Assessment
4. Organizational Leadership
5. Board Governance

6. Strategic Planning
7. Human Resource Management
8. Financial Operations and Oversight
9. Data and Analysis

Throughout the month, the liaison will review all uploads by their assigned agencies in CAPTAIN. Each agency should notify ODOC once the standards are uploaded; however, this is not always the case so it is important to check the upload status of each agency regularly.

There are three levels to the system. Level 1 is responsible for uploading the documentation to the system. Level 2 is the approving authority at the agency. Once Level 2 approves the upload, it is then ready for ODOC – Level 3 - to review and approve the documentation.

By clicking on the View button, all uploaded documentation can be seen. If the documentation meets the criteria outlined for each standard, the standard can be marked as met. If not, the liaison must contact the agency and ask for further uploads and/or clarification.

If the agency is able to immediately provide the documentation, Level 2 must “unapprove” the standard, Level 1 will upload the new documentation and then Level 2 can re-approve the new documentation. ODOC can then mark the Standard as “Met.” If what is needed to document at the standard has not been done or cannot be provided in a timely manner, then the standard is marked as “Not Met” and a TAP is created to track the standard until it is met.

This process is done almost entirely at a desk monitoring level; however, Board and Human Resource documentation is not uploaded to the system due to the confidential nature of the items. These two areas are reviewed during an onsite review at the agency. Upon completion of this review, ODOC will provide the Community Action Agency with a dated and signed copy of the review tool. The agency will then upload those pages to the OS system to document compliance/non-compliance with the Standard.

ODOC will try and schedule these site reviews in conjunction with another review such as Weatherization or RX visits. If this cannot be done, the liaison will contact the agency to schedule a review for just these two Organizational Standards.

#### **Exit Interview**

The exit interview is the venue where all problems, concerns and praise (make sure the good things are discussed, too!) are discussed. All program and management staff are required to attend as well as a Board

Member. It is always a good idea to maintain a good line of communication with the agency throughout the monitoring. If you find something that appears to be out-of-compliance or may be an issue, discuss it with the appropriate staff member.

Many times the problem can be explained or other documentation can be acquired to clear up any issues. However, you may also find some concerns or questions that will require clarification by staff at ODOC. If you are unsure of something, try to get clarification from ODOC staff prior to discussing it with agency staff. If you are unable to get clarification prior to the exit interview, explain to the staff that you have questions regarding Program A or B that you want to get clarification on before listing it as a problem. In general, there should be nothing in the report that wasn't addressed with staff at the exit interview.

#### **Monitoring Wrap-Up**

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Once the monitoring has been completed, the final portion of the monitoring tool can be completed. The information you obtained at the agency over the course of the monitoring will now tie in with the information that was listed at the beginning in the seven agency status areas.

The Agency Status Scales at the end of the monitoring tool are the method in which the agency's health is determined. Each area is broken-up into a rating and given a numeric value. Determine what area fits your observations. These values are then averaged and the final status is determined.

#### **Determining the overall health of the agency**

After the review, the liaison will take into account what was noted during the review. It is important to note that ODOC not only wants to track problems/areas for improvement, but also successes, best practices innovative ideas and programs that have been implemented by the agency.

While CSBG is one contract, it has an overall bearing on the agency. Since CSBG gives the agency its designation, ODOC looks at the overall health of the entire agency. In doing so, we can summarize the health status through seven key agency areas.

1. Financial Management
2. Agency Management
3. Programs and Services
4. Human Resources
5. Community Relations
6. Board of Directors
7. ROMA

It should be noted that all CAPs are different but the key factors that determine health are the same. ODOC utilizes a status scale which incorporates seven key areas of community action. By assessing these areas of the scale, we can closely determine the overall health of the agency.

The agencies are rated on a sliding scale that include five ratings. These areas are found in the back of the monitoring tool and contain thresholds to rate each agency by. The categories are:

1. Thriving
2. Safe
3. Stable
4. Vulnerable
5. In-Crisis

#### **Agency Management/Organizational Leadership**

Overall agency management is an area where there are not many black and white areas. Areas that can readily be assessed are areas such as timely submission of reports, reporting (data is/isn't entered regularly into Captain and OKGrants), as well as the submission and implementation of program Requests for Application (RFAs). Agency management, in reality, touches all seven areas that fall under the Agency Status scale. The organizational standards also provide standards that work on strengthening these areas.

Typically, strong management will lead to all of the other six areas being strong; however, it is important that all areas be evaluated and assessed. With a strong agency you will see creative staff and have little turnover, the agency will have many partnerships and will often collaborate with the communities in their service area to address the issues of poverty. The agency's Board is strong and will be a key factor in the

success of the agency. Accountability by the Executive Director to the Board is mandatory for a strong agency. The Board members are aware of the needs of their community and set the direction for the agency.

Agencies that have fully incorporated the ROMA process into the agency will have a greater chance of being more successful. Through awareness of the community's needs, planning, implementation of those plans, measuring those results, and through an evaluation and adjustment process, the agency can gauge their success. This will allow the agency to grow both financially (by seeking out new funding sources to support the needed programs) and program wise (by bringing on new programs to address the identified needs of low-income individuals).

Poor management can lead to high staff turnover, poor community perception and relations, a weak board, misrepresentation of services and poorly executed programs. In some cases corruption will be found in agencies that have reached this status. The Board will generally be a "rubber-stamp" board. The executive director will hand-feed the board reports and information. The Board does not/will not ask for verification or reports to back-up what is being reported to them. The agency will often ignore feedback from staff, service counts will fall – hence clients are not being served. When clients cannot be provided needed services, complaints are made and in some cases media attention is brought in. At this point, the agency's overall reputation is put in jeopardy.

As part of ODOC's risk assessment process, points are given for turnover in key areas within the agency. In most cases where an agency reaches a failure/In-crisis stage, the downturn happens very quickly so it's important that ODOC closes watches agencies who are in this transition process.

#### Financial Management

The overall health of financial management is determined by reviewing a number of different items during the monitoring process. Monthly journal ledgers, transactions, source documentation, internal controls, funding streams, unrestricted income, outstanding loan balances and monthly reporting are key items to review during the monitoring process. The monitoring tool specifically outlines the required areas to review. Keep in mind, even though the items listed are required, other documentation can be requested when any information reviewed is unclear or appears questionable.

Procurement records are generally maintained in the agency's Financial Policies and Procedures and are an important part of the review process. Do purchases made by the agency follow their procurement procedures? Is proper approval obtained? Are items with a purchase value of \$500 or more maintained on the agency's inventory records? Although many funds are procured with federal funds, ODOC's thresholds is more restrictive than federal requirements so it's important to ensure agencies are following ODOC policy. What is their disposition policy? Agencies should grant approval from ODOC prior to the disposition of any item purchased with ODOC contract funds.

The audit is also a key piece of information in determining the overall financial status of the agency. The audit will give the status of the agency's contracts, cash balance, reserves (both unrestricted and temporarily restricted), and a number of other pertinent details. The audit is reviewed by both ODOC's Administrative Services Department and by the liaison as part of the monitoring process. Any findings noted in the audit should be closely evaluated, discussed with the agency, addressed by policies to correct the findings and prevent future findings. The Administrative Services Division will provide guidance on any findings/questioned costs that will required a payback and will also work with the liaison to ensure funds are paid back as required by the audit finding. In some cases, a poor audit could also result in a contract being held until the issues are fully addressed.

Thriving agencies have knowledgeable staff, a highly diverse funding base and adequate reserves to cover

the agency in unforeseen gaps in funding. The controls the agency utilizes to ensure accountability are in place and utilized. The audit shows no questioned costs or findings. Monthly ledgers and payments fully reconcile with reports to ODOC and no questionable charges are noted.

An agency that is in-crisis may have many issues that prevent accountability from either the financial staff, management and Board. Often, the agency will borrow funds from one program to pay for those in another. CSBG can be used to support programs but it cannot be used to temporarily bankroll the agency. This is often noted in journal entries (AJEs) or through odd or unusual entries into the ledgers.

Agencies in crisis may also have significant outstanding loan balances, high and/or unpaid credit card balances and unpaid bills. It is important to review source documentation to ensure the agency is not paying late fees and interest expenses with contract funds. If these are noted in a review of source documentation, it is important to determine what funds are paying these fees.

The payroll process is also part of the financial review. Any contract with salaries charged should be reviewed to ensure that proper staff are charged to the contract. This is done by comparing the budget salary support sheet (CSBG) or RFA's from other contracts with those staff actually paid by the agency. Discrepancies could result in the reclassification of staff costs or in some cases a payback. It is also important to ensure all monthly/quarterly payroll tax reports and insurance payments are made in a timely manner.

Poor financial management often comes from lack of program funds, poorly trained financial staff, or in some cases questionable financial and agency management practices. This will be noted via journal entries or in some cases specific line items in their detailed journals. Funds may be spent for purposes other than what is allowed. There are no controls to ensure accountability and if there are controls present, they are weak and not being followed. Numerous journal entries that have no back-up documentation are noted as well as the lack of source documentation for purchases. Time sheets are not be properly addressed and in some cases payroll taxes are not paid which will lead to debarment or suspension.

#### Programs and Services

While many Community Action Agencies offer the same programs such as Head Start and Weatherization, no two agencies are identical. Each year, the agency submits their annual Community Services Block Grant application (CSBG) to ODOC for review. CSBG is an umbrella program that gives each agency the designation as a community action agency. CSBG funds can be used to create and/or support the agency's services and programs as well as to support the agency's administrative functions.

Through this designation as a community action agency, agencies are then qualified to apply yearly for other ODOC programs such as the WAP (Weatherization Assistance Program – referred to as DOE), the Low Income Heating and Energy Assistance Program (LIHEAP), State Appropriated Head Start (SAF/CAA-HS) funds and the State Appropriated Funds – Community Action Agency funds (SAF/CAA). CSBG also maintains an additional set of funds that can be used by agencies to help create innovative programs that address needs in their communities. These funds also support the agency's CAPTAIN reporting program.

The Programs and Services offered by each agency can be reviewed/evaluated in different ways and include:

1. A review of the Performance Management Outcomes Report will show all the programs the agency offers.
2. Annual Reports created by the agency each year to share outcomes (not all agencies do this but it is a best practice.)
3. The agency's annual audit.

4. The agency's Annual Report submitted to ODOC (formerly the IS).
5. Logic Models

Each agency submits a CSBG application yearly that includes their Community Action Plan. This plan is created from data that comes directly from their needs assessment which is conducted every three years. The information in the needs assessment provides the agency with data based on feedback from all community sectors in their service area. This data is then used by the agency and its board to determine what services could be implemented or improved to address the needs of their community. These needs are then further broken down into family, agency and community needs.

Through ROMA, the Organizational Standards and specific reporting requirements, all agency programs are required to be tracked and the outcomes reported to ODOC yearly in the Annual Report (formerly called the Information Survey or IS).

The ROMA cycle provides a framework for the agency to assess, plan, implement and evaluate their program's successes and areas for improvement. Further training will be provided on the ROMA process.

Thriving agencies will have Innovative Programs – they think outside the box. Their programs are evaluated and assessed regularly and improvements are always sought. The programs offered clearly address the priorities addressed in the needs assessment and the program data is consistent and/or shows growth from month to month. Staff are knowledgeable and passionate about their programs, can clearly address their duties and can provide information regarding their programs.

Agencies who are in crisis are not providing services to the clients. Program data is minimal because the data is not tracked and/or the clients are not getting served. The program directors cannot plan because they are reacting to the myriad of problems that are present and are not provided with the fiscal status of their program(s). No guidance or support is provided from management which can cause the programs to go stagnant which ultimately results in the loss or cuts from funding sources.

#### Human Resources

Human resources play an integral role in the quality of services provided by the agency though the staff it hires. When reviewing human resources documents and processes, there are many factors to look at. Does the agency have hiring practices in place? If so, are they followed? Do they do background checks on potential employees? Who hires and fires? What about the grievance procedures? Are they utilized and how often? Staff turnover is also a key factor in the assessment. A high turnover rate may show poor training, no orientation, and possibly show the right people are not hired for the right job. A high turnover rate in departments such as weatherization will determine the program's viability. During the review, visit with a number of staff – either informally or formally – during the monitoring visit. This will give a good insight into the strength of the agency's HR department.

Successful agencies will have a number of long-time staff members. Often these staff members will attend all training activities provided by ODOC and/or the Association. Employees are often sent to outside trainings that pertain to their jobs. In discussions with the employees, they will be excited about their job and duties, and will show respect for their supervisors and management.

Agencies that are in-crisis will have a high turnover rate among employees. This can be noted from both daily interactions with the agencies and during the monitoring process. Does the point of contact remain the same or does it change frequently? Does the agency send few to no employees to Association or ODOC trainings? What kind of information is shared between management and program staff? A combination of one or more of these will show a weakness in this area.

### Community Relations

Community relations are a very important part of community action. It is imperative that these relationships be strong in order to form strong partnerships and collaborations among various service providers in the area. A strong community action agency will have numerous partnerships throughout all areas of their communities. Professional staff such as doctors, lawyers, and bankers can play key supportive rolls in the agency either by partnering with the agency's programs or by sitting on the Board of Directors.

Partnerships with local service providers are a fundamental part of community action. For services the agency cannot directly provide, referrals to partners play a vital role in serving those clients. A positive image in the community equates to substantial donations and community assistance.

A strong and thriving agency will have numerous partnerships in the community. They are well known among other providers. They have a strong relationship with media entities who provide PR services for the agency at little or no charge. The agency has a strong networking capabilities and is sought out for assistance in solutions involving low-income individuals. The agency is seen as a resource to help people and is provided with donations for its programs.

An agency that is in crisis has no regular contact with the communities in its area. They are not part of solutions to local problems and are often seen as incompetent or even corrupt and not trustworthy. Because of this lack of trust, it becomes difficult for the agency to obtain private donations or additional funding from outside resources.

### Board of Directors

The Board of Directors is the governing body of the community action agency. The Board has one employee and that is the Executive Director. The Board of Directors is an Advocate for the agency and its mission. Some of the responsibilities of the Board include appointing and evaluating the executive director, determining rules, regulations and policies for the agency as well as programmatic and financial oversight.

A thriving Board will take all information provided to them by the executive director and/or staff and through discussion among each other, determine the best course of action for the agency. The Board is active and knows and accepts all the responsibilities associated with being a member. A thriving Board asks questions, requests verification and attends all meetings. A quorum is always achieved.

An in-crisis Board does not attend meetings and regularly does not have a quorum. The Board may tend to

Micro-manage the agency and/or rely solely on the executive director for answers. There is often no discussion on agenda items and little or no verification is requested on items presented to them. Decisions always tend to be yes or totally unanimous. They are unable to read a financial report and therefore often make blind decisions on agency expenditures. The Board members are not aware of their community's needs and the end result is lack of service to low-income clients.

### ROMA/Data Reporting

ROMA is a complete management framework that focuses on results and continuous improvement within the agency. ROMA includes set of performance indicators that are intended to help community action agencies better organize and report ROMA outcomes that constitute community action performance.

Reporting of these indicators is a crucial component of the broader community action initiative to use results-focused management principles to revitalize and strengthen the Community Services Network. While ROMA is an ongoing management tool, the monitoring process should ensure that the agency is

adhering to their ROMA Implementation Plan (submitted with the CSBG application), ROMA staff training plan, and to ensure outputs/outcomes for ALL agency programs are being entered into Captain, the State's data reporting system. Poor ROMA implementation could result in broader, agency-issues.

A strong and thriving agency fully integrates ROMA throughout the agency. Staff are aware of the concept and utilize it regularly. The executive director and program directors support the use of ROMA in their agencies. All staff and Board are aware of the importance of ROMA and its outcomes.

An agency in crisis does not meet any of the reporting requirements and are totally unaware of the importance of it. The executive director and staff are not committed to ROMA. The Board is unaware of the concept.

The monitoring process also includes a review of the agency's data management/reporting practices. It is imperative that all program data is entered into Captain, reviewed by program staff/management for accuracy and shared with agency staff, management and Board members. It is also important that the agency is meeting reporting deadlines for monthly, quarterly and annual reporting requirements.

It is important to note that an agency can have an almost perfect rating of 4.2 and still have an area that is in-crisis. Generally this does not happen; however, it could be a sign that a good agency is going bad. If the rating for everything but ROMA is a 4 or 5, you will need to work with the agency on strengthening ROMA in the agency. If you arrive at a 2 or 3 average, it is a sign that the agency is having issues agency-wide and may require closer observation. Anything in the 1 or 2 areas will require extensive technical assistance and ODOC intervention.

Through your discussions and document review, you will have already obtained a list of problems, concerns recommendations and questioned costs. When writing the review, any item that was incorrect, had missing information, etc., is listed as a problem. Each problem has a corrective action. You may find it necessary to address issues in ways other than a problem. Questioned costs should outline the costs in questions and what you would like from the agency to clarify the costs. Concerns should outline the concerns you observed during your visit. Unless you specify an action, problems and questioned costs are generally the only thing the agency must respond to. Concerns are not yet a problem and recommendations are just that – a recommendation. The agency can choose to act on it or not.

It is important to document concerns and recommendations. These arise for a reason and over time, they can turn into problems. By raising these concerns in a formal report, the concern has been documented and should be revisited in future monitoring visits.

Per the CET policy, the official monitoring report must be issued within 30 days from the exit interview. The reports are addressed to the Executive Director and copies are generally sent to the Board President. All corrective actions must be at least addressed with a correction action or a timeline for a corrective action within 30 days of the receipt of the report.

Once the report has been written, the document will be saved on the I/Drive at: I/CommDev/CitizenEmpowermentTeam/Agency Files. Once that has been done, submit it to the Senior Program Monitor for review. Feedback and suggestions may be given. Once that has been done, submit the report to the Director of Programs-Monitoring for the final review and signature of the letter.

The agency must submit all corrective actions to the liaison in electronic format via email or in cases where documentation/uploads are too big, through StorCloud. The liaison will copy all submissions to the agency's file on the I/ drive for storage.

Once all corrective actions have been accepted and other information has been submitted and approved, the monitoring can be closed. This letter is also addressed to the Executive Director and states that all corrective actions have been accepted and the monitoring has been closed. Normally a copy of this letter also goes to the Board president.

**10.3. Initial Monitoring Reports:** According to the state’s procedures, by how many calendar days must the state disseminate initial monitoring reports to local entities? **[Insert a number from 1 – 100]** **30**

**Note:** This item is associated with State Accountability Measure 4Sa(ii) and may pre-populate the state’s annual report form.

**Corrective Action, Termination and Reduction of Funding and Assurance Requirements (Section 678C of the Act)**

**10.4. Closing Findings:** Are state procedures for addressing eligible entity findings/deficiencies, and the documenting closure of findings included in the state monitoring protocols attached above?  **Yes**  No

**10.4a. Closing Findings Procedures:** If no, describe state procedures for addressing eligible entity findings/deficiencies, and the documenting closure of findings. **[Narrative, 2500 characters]**

**10.5. Quality Improvement Plans (QIPs):** Provide the number of eligible entities currently on QIPs, if applicable. **[Numeric Response, 0 – 100]** **0**

**Note:** The QIP information is associated with State Accountability Measures 4Sc.

**10.6. Reporting of QIPs:** Describe the state’s process for reporting eligible entities on QIPs to the Office of Community Services within 30 calendar days of the state approving a QIP? **[Narrative, 5000 characters]**

**Within 30 calendar days of its approval of a QIP the State will notify its Office of Community Services assigned Program Specialist by email.**

**Note:** This item is associated with State Accountability Measure 4Sa(iii)).

**10.7. Assurance on Funding Reduction or Termination:** The state assure that “any eligible entity that received CSBG funding the previous fiscal year will not have its funding terminated or reduced below the proportional share of funding the entity received in the previous fiscal year unless, after providing notice and an opportunity for a hearing on the record, the state determines that cause exists for such termination or such reduction, subject to review by the Secretary as provided in Section 678C(b)” per Section 676(b)(8) of the CSBG Act.  **Yes**  No

**Note:** This response will link with the corresponding assurance under item 14.8.

**Policies on Eligible Entity Designation, De-designation, and Re-designation**

**10.8. Eligible Entity Designation:** Do the state CSBG statute and/or regulations provide for the designation of new eligible entities?  Yes  No

**10.8a. New Designation Citation:** If yes, provide the citation(s) of the law and/or regulation. [Narrative, 2500 Characters]

**10.8b. New Designation Procedures:** If no, describe state procedures for the designation of new eligible entities and how the procedures were made available to eligible entities and the public. [Narrative, 5000 Characters]

Our process for designating CAAs is not in writing but is based upon the goal of providing services to clients as quickly as possible. It is done on a case by case basis in conjunction with and with guidance from OCS.

**10.9. Eligible Entity Termination:** Do state CSBG statute and/or regulations provide for termination of eligible entities?  Yes  No

**10.9a. Termination Citation:** If yes, provide the citation(s) of the law and/or regulation. [Narrative, 2500 characters]

§74-5036. Community action agency defined - Evaluation of service areas and agencies.

A community action agency shall be defined as a public or private nonprofit agency, designated by the Oklahoma Department of Commerce.

The Oklahoma Department of Commerce shall have the right to evaluate existing service areas and community action agencies and, as may be necessary, modify boundaries of the service areas or rescind designation in accordance with the provisions outlined in Section 45 of this act so that services will be adequately and efficiently provided.

**10.9b. Termination Procedures:** If no, describe state procedures for termination of new eligible entities and how the procedures were made available to eligible entities and the public. [Narrative, 5000 characters]

**10.10. Eligible Entity Re-Designation:** Do the state CSBG statute and/or regulations provide for re-designation of an existing eligible entity?  Yes  No

**10.10a. Re-Designation Citation:** If yes, provide the citation(s) of the law and/or regulation. [Narrative, 2500 Characters]

§74-5039. Rescission of designation of community action agency.

A. Prior to rescission of designation of a community action agency, the Oklahoma Department of Commerce shall:

1. Determine whether the existing or proposed community action agency is in compliance with Sections 41, 42 and 43 of this act;
2. Evaluate the existing or proposed community action agency service area, and, as may be necessary, modify the boundaries of the service area so that services will be adequately and efficiently provided;

3. Provide a written notice containing the reasons for the anticipated action to the chairman of the board of the existing or proposed community action agency

B. The Oklahoma Department of Commerce may rescind the designation of a community action agency if it is found that the community action agency is not in compliance with any or all of the provisions of Sections 41, 42 and 43 of this act.

Any agency whose designation is rescinded pursuant to this section may appeal the order of rescission in accordance with existing state and federal law. The Oklahoma Department of Commerce shall consider a community action agency or agencies for the assumption of all or a portion of the service area of a community action agency with contiguous borders whose designation may be rescinded.

**10.10b. Re-Designation Procedures:** If no, describe state procedures for re-designation of existing eligible entities and how the procedures were made available to eligible entities and the public. **[Narrative, 5000 Characters]**

**GUIDANCE:** Re-designation implies that an entity that is already designated/receiving funds is now performing the duties and receiving funds that were previously designated to another entity, in addition to the funding that they are already receiving. This is different from a merger as an entity is not absorbing another entity. This re-designation may be permanent (**requires a formula redistribution**) or temporary while the state has officially designated a new entity and has completed a formula redistribution. See CSBG Act 676A, *Designation and Redesignation...*, for more information.

#### **Fiscal Controls and Audits and Cooperation Assurance**

**10.11. Fiscal Controls and Accounting:** Describe how the state's fiscal controls and accounting procedures will a) permit preparation of the SF-425 Federal fiscal reports (FFR) and b) permit the tracing of expenditures adequate to ensure funds have been used appropriately under the block grant, as required by Block Grant regulations applicable to CSBG at 45 CFR 96.30(a). **[Narrative, 5000 Characters]**

The State uses an accounting system that allows for tracking of federal funds by program year in addition to a grant management system that tracks the draws and expenditure information for sub-recipients of federal funds. The systems provide reports by program year as well as account codes such as salary & fringe, supplies, etc. both at the state and sub-recipient levels. The accounting records are regularly reconciled back to the federal draw system. Expenditures are reviewed and approved by program staff prior to submission to the accounting department. Financial staff also review to ensure the expenses were incurred during the grant's period of performance and are in compliance with OMB grant guidance.

**10.12. Single Audit Management Decisions:** Describe state procedures for issuing

management decisions for eligible entity single audits, as required by Block Grant regulations applicable to CSBG at 45 CFR 75.521. **[Narrative, 5000 Characters]**

An Audit Report Checklist is completed and verified by the audit staff. An Audit Review form containing the decision is uploaded into the State CSBG office's online grants management system. The contractor receives an email notification if an audit response is required and when the audit is closed.

**Note:** This information is associated with State Accountability Measure 4Sd.

- 10.13. Assurance on Federal Investigations:** The state will "permit and cooperate with Federal investigations undertaken in accordance with Section 678D" of the CSBG Act, as required by the assurance under Section 676(b)(7) of the CSBG Act.  Yes  No

**Note:** This response will link with the corresponding assurance, Item 14.7

- 10.14. Performance Management Adjustment:** Describe any adjustments the state made to monitoring procedures in this State Plan as compared to past plans? Any adjustment should be based on the state's analysis of past performance, and should consider feedback from eligible entities, OCS, and other sources, such as the public hearing. If the state is not making any adjustments, provide further detail. **[Narrative, 2500 Characters]**

Upon the implementation of pre-award risk assessments, and the need to more efficiently focus its resources due to fewer staff and less funding, the State is adjusting its on-site monitoring schedule. Previously the State monitored each eligible entity annually. The frequency of monitoring activities, including the on-site visit will be determined by how the agency is ranked by the entity's pre-award risk assessment. Each eligible entity will have an on-site monitoring at least once each three years. Monitoring procedures used on-site will not change.

**Note:** This item is associated with State Accountability Measure 4Sb and may pre-populate the state's annual report form.

**SECTION 11**  
**Eligible Entity Tripartite Board**

**11.1. Tripartite Board Verification:** Verify which of the following measures are taken to ensure that the state verifies CSBG Eligible Entities are meeting Tripartite Board requirements under Section 676B(a)(2) of the CSBG Act. **[Check all that applies and narrative where applicable]**

- Attend Board meetings
- Organizational Standards Assessment
- Monitoring
- Review copies of Board meeting minutes
- Track Board vacancies/composition
- Other **[Narrative, 2500 characters]**

**11.2. Tripartite Board Updates:** Provide how often the state requires eligible entities (which are not on TAPs or QIPs) to provide updates regarding their Tripartite Boards. This includes but is not limited to copies of meeting minutes, vacancy alerts, changes to bylaws, low-income member selection process, etc. **[Select one and narrative where applicable]**

- Annually
- Semiannually
- Quarterly
- Monthly
- As It Occurs
- Other **[Narrative, 2500 characters]**

The Board Membership Roster and By-Laws are submitted annually and as updated. Board Committee Membership lists are submitted as updated; and Board packets and approved board minutes are to be submitted within 30 days after the board meeting.

**11.3. Tripartite Board Representation Assurance:** Describe how the states will verify that eligible entities have policies and procedures by which individuals or organizations can petition for adequate representation on an eligible entity's Tripartite Board as required by the assurance under Section 676(b)(10) of the CSBG Act. **[Narrative, 2500 Characters]**

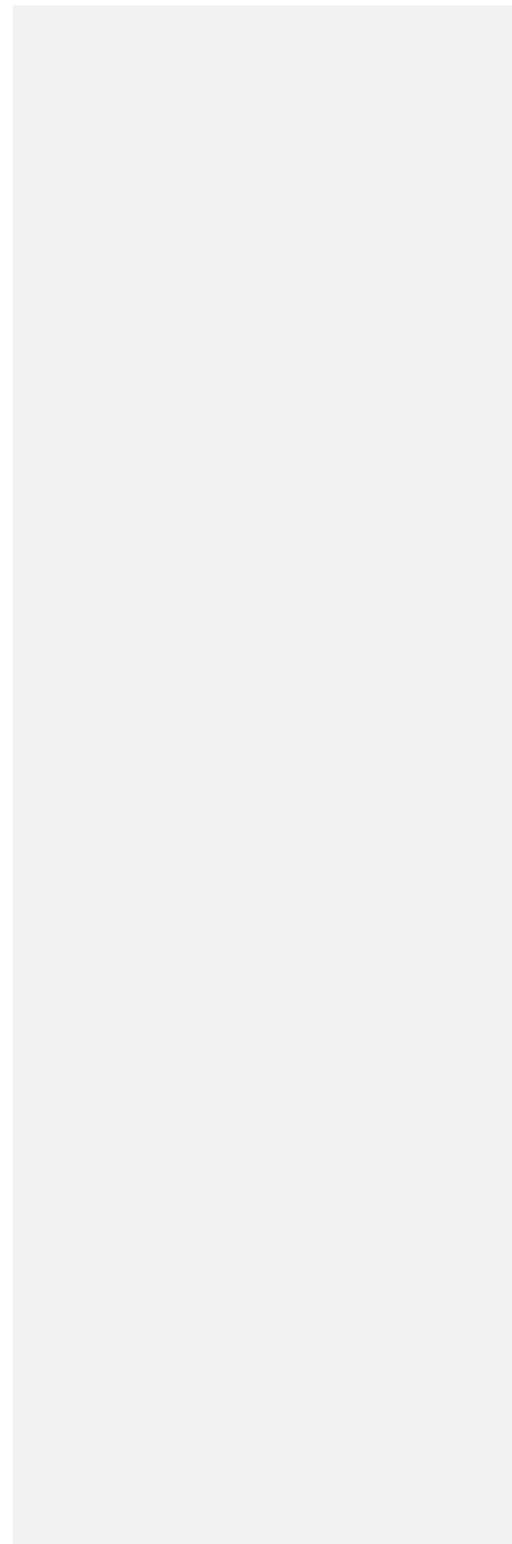
The state reviews the eligible entities policies and procedures. In addition, board files are reviewed as part of the state's on-site monitoring visits. Documentation in the Board member files is reviewed to determine the process by which the members were elected to the board.

**Note:** This response will link with the corresponding assurance, Item 14.10.

**11.4. Tripartite Board Alternative Representation:** Does the state permit public eligible

entities to use, as an alternative to a Tripartite Board, “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” as allowed under Section 676B(b)(2) of the CSBG Act?  Yes  No

**11.4a.** If yes, describe the mechanism used by public eligible entities as an alternative to a Tripartite Board. **[Narrative, 2500 Characters]**



## Section 12 Individual and Community Income Eligibility Requirements

**12.1. Required Income Eligibility:** Provide the income eligibility threshold for services in the state. [Select one item below and numeric response where applicable.]

- 125% of the HHS poverty line
- X % of the HHS poverty line (fill in the threshold): \_\_\_\_\_% [Numeric response]
- Varies by eligible entity [Narrative, 5000 characters]

**GUIDANCE:** Under *Varies by eligible entity*, provide the threshold and the reason that it varies by entity.

**12.1a.** Describe any state policy and/or procedures for income eligibility, such as treatment of income and family/household composition. [Narrative, 5000 Characters]

The State requires that eligible entities have policies/procedures in place to assure compliance with income eligibility requirements for the programs they administer. As part of the state's on-site monitoring, the eligible entity's policies/procedures are reviewed to ensure that the agency is servicing low-income individuals. In addition, client files are reviewed for documentation of household numbers and income verification.

**12.2. Income Eligibility for General/Short Term Services:** Describe how the state ensures eligible entities generally verify income eligibility for those services with limited in-take procedures (where individual income verification is not possible or practical). An example of these services is emergency food assistance. [Narrative, 5000 Characters]

As a part of the onsite monitoring of eligible entities the state reviews income verification on a sampling of clients for both ODOC funded programs and non-ODOC funded programs and ensures the agencies have policies and procedures in place that are used to ensure low-income populations are served.

**12.3. Community-targeted Services:** Describe how the state ensures eligible entities' services target and benefit low-income communities for those services that provide a community-wide benefit (e.g., development of community assets/facilities, building partnerships with other organizations). [Narrative, 5000 Characters]

Each eligible entity is required to develop an outcome-based Community Action Plan that ties to the results of the entity's community needs assessment and describes the community-wide approach the eligible entity will take when making decisions on the anti-poverty programs to be administered by the eligible entity. The Community Action Plan must include a description of the current service delivery system targeted to low-income individuals and families in the service area including services offered by the

eligible entity and services provided by other agencies. This plan is reviewed by a state monitor in conjunction with review and execution of the entity's annual funding award and by the CSBG planner in preparation of state plans and annual reports.

In addition, as a part of onsite monitoring of eligible entities the state reviews income verification on a sampling of clients, for both ODOC funded programs and non-ODOC funded programs and ensures the agencies have policies and procedures in place that are used to ensure low-income populations are served. Also, each program year eligible entities are required to complete and submit an agency program chart that ties the programs to the FNPIs/ROMA outcomes.

## SECTION 13

### Results Oriented Management and Accountability (ROMA) System

- 13.1. Performance Measurement System:** Identify the performance measurement system that the state and all eligible entities use, as required by Section 678E(a) of the CSBG Act and the assurance under Section 676(b)(12) of the CSBG Act. **[Select one]**

**Note:** This response will also link to the corresponding assurance, Item 14.12. and will pre-populate the Annual Report, Module 1, Item I.1.

- The Results Oriented Management and Accountability (ROMA) System
- Another performance management system that meets the requirements of Section 678E(b) of the CSBG Act
- An alternative system for measuring performance and results

**13.1a. ROMA Description:** If ROMA was chosen in Item 13.1, describe the state's written policies, procedures, or guidance documents on ROMA. **[Narrative, 5000 characters]** **Attach ROMA Requirement from CAA Implementation Manual**

**13.1b. Alternative System Description:** If an alternative system was chosen in Item 13.1, describe the system the state will use for performance measurement. **[Narrative, 5000 characters]**

- 13.2. Outcome Measures:** Indicate and describe the outcome measures the state will use to measure eligible entity performance in promoting self-sufficiency, family stability, and community revitalization, as required under Section 676(b)(12) of the CSBG Act. **[Select one and Narrative, 5000 characters]**

**Note:** This response will also link to the corresponding assurance, Item 14.12.

- CSBG National Performance Indicators (NPIs)
- NPIs and others
- Others

- 13.3. Eligible Entity Support:** Describe how the state supports the eligible entities in using ROMA or an alternative performance management system. **[Narrative, 5000 characters]**

The state has 4 Nationally Certified ROMA Trainers (NCRT) and 5 Nationally Certified ROMA Implementers (NCRI), for a total of 9 Nationally Certified ROMA Professionals (NCRP). There is one NCRT at the local agency level, a National Certified Master ROMA Trainer (NCMRT) at the State Association, and an NCMRT candidate at the State office. The fourth NCRT is active within our CAA network, although she is now working as a private consultant.

NCRTs provide on-going training & technical assistance to the eligible entities and participate in Intro to ROMA trainings offered as needed at our State Association. NCRIs offer training & technical assistance to their own agencies, but often work as a resource to the entire state as well. All NCRPs have quarterly meetings at the State Association to

discuss Oklahoma ROMA Implementation in the state, and to offer peer to peer support to each other.

NCRPs have worked together on the following projects: assisting with implementation of a standardized Community Needs Assessment reporting process and software system; standardizing a risk assessment client intake scale in our statewide online data collection system; supporting others going through an NCRT/NCRI candidacy process; and creating an Oklahoma Theory of Change (still in development).

In addition, the state offers an on-line data collection system (software user fees and on-going technical assistance provided by the software company). The system (CAPTAIN) currently tracks outcomes by FNPI services by service codes. It also has the capability to track outcomes on scales and matrices. With the same software company, ODOC also has implemented a standardized CNA Survey Tool (which allows clients to answer CNA questions online and allows agencies to create other surveys as needed), an Organizational Standards software, and is supporting the creation of a ROMA Implementation software program.

**Note:** The activities described under Item 13.3 may include activities listed in “Section 8: Training and Technical Assistance.” If so, mention briefly, and/or cross-reference as needed. This response will also link to the corresponding assurance, Item 14.12.

- 13.4. Eligible Entity Use of Data:** Describe how the state plans to validate that the eligible entities are using data to improve service delivery. **[Narrative, 5000 characters]**

The state provides funds to eligible entities for user fees for an online data collection system. The system currently tracks outcomes by FNPI. Eligible entities currently use the system to report outcomes and demographics for the individuals and families they serve throughout the year. The system is used by the eligible entities to review progress with CSBG goals and to complete their annual reports. State monitors review the eligible entities use of the data during the on-site monitoring visit.

**Note:** This response will also link to the corresponding assurance, Item 14.12.

#### **Community Action Plans and Needs Assessments**

- 13.5. Community Action Plan:** Describe how the state will secure a Community Action Plan from each eligible entity, as a condition of receipt of CSBG funding by each entity, as required by Section 676(b)(11) of the CSBG Act. **[Narrative, 5000 characters]**

**Note:** This response will link to the corresponding assurance, Item 14.11.

The state requires that eligible entities submit their annual Community Action Plan with their CSBG grant application each year. The plan is reviewed by a state monitor in conjunction with review and execution of the entity’s annual funding award and by the CSBG planner in preparation of state plans and annual reports.

**13.6. Community Needs Assessment:** Describe how the state will assure that each eligible entity includes a community needs assessment for the community served (which may be coordinated with community needs assessments conducted by other programs) in each entity's Community Action Plan, as required by Section 676(b)(11) of the CSBG Act. **[Narrative, 5000 characters]**

**Note:** This response will link to the corresponding assurance, Item 14.11.

The state requires that eligible entities submit a Community Needs Assessment report each year with their CSBG grant application. The summary is reviewed by a state monitor in conjunction with review and execution of the entity's funding award and by the CSBG planner in preparation of state plans and annual reports. In accordance with Organizational Standard 3.1 agencies are required to complete a CNA and report every 3 years.

**SECTION 14**  
**CSBG Programmatic Assurances and Information Narrative**  
*(Section 676(b) of the CSBG Act)*

**14.1. Use of Funds Supporting Local Activities**

**CSBG Services**

**14.1a. 676(b)(1)(A)** Describe how the state will assure “that funds made available through grant or allotment will be used –

- (A) to support activities that are designed to assist low-income families and individuals, including families and individuals receiving assistance under title IV of the Social Security Act, homeless families and individuals, migrant or seasonal farmworkers, and elderly low-income individuals and families, and a description of how such activities will enable the families and individuals--
  - (i) to remove obstacles and solve problems that block the achievement of self- sufficiency (particularly for families and individuals who are attempting to transition off a State program carried out under part A of title IV of the Social Security Act);
  - (ii) to secure and retain meaningful employment;
  - (iii) to attain an adequate education with particular attention toward improving literacy skills of the low-income families in the community, which may include family literacy initiatives;
  - (iv) to make better use of available income;
  - (v) to obtain and maintain adequate housing and a suitable living environment;
  - (vi) to obtain emergency assistance through loans, grants, or other means to meet immediate and urgent individual and family needs;
  - (vii) to achieve greater participation in the affairs of the communities involved, including the development of public and private grassroots partnerships with local law enforcement agencies, local housing authorities, private foundations, and other public and private partners to –
    - (I) document best practices based on successful grassroots intervention in urban areas, to develop methodologies for widespread replication; and
    - (II) strengthen and improve relationships with local law enforcement agencies, which may include participation in activities such as neighborhood or community policing efforts;

**[Narrative, 5000 characters]**

Each eligible entity is required to develop an outcome-based Community Action Plan that ties to the results of the entity's community needs assessment and describes the community-wide approach the eligible entity will take when making decisions on the anti-poverty programs to be administered by the eligible entity. The Community Action Plan must include a description of the current service delivery system targeted to low-income individuals and families in the service area including services offered by the agency and services provided by other agencies. This plan is reviewed by a state monitor in conjunction with review and execution of the entity's annual funding award and by the CSBG planner in preparation of state plans and annual reports.

In addition, as a part of onsite monitoring of eligible entities the state reviews income verification on a sampling of clients, for both ODOC funded programs and non-ODOC funded programs and ensures the eligible entity has policies and procedures in place that are used to ensure low-income populations are served. Also each program year eligible entities are required to submit performance management outcomes that tie programs to the FNPIs/ROMA outcomes.

#### **Needs of Youth**

- 14.1b. 676(b)(1)(B)** Describe how the state will assure "that funds made available through grant or allotment will be used –
- (B) to address the needs of youth in low-income communities through youth development programs that support the primary role of the family, give priority to the prevention of youth problems and crime, and promote increased community coordination and collaboration in meeting the needs of youth, and support development and expansion of innovative community-based youth development programs that have demonstrated success in preventing or reducing youth crime, such as--
    - (i) programs for the establishment of violence-free zones that would involve youth development and intervention models (such as models involving youth mediation, youth mentoring, life skills training, job creation, and entrepreneurship programs); and
    - (ii) after-school child care programs;

#### **[Narrative, 5000 characters]**

Each eligible entity is required to develop an outcome-based Community Action Plan that ties to the results of the entity's community needs assessment and describes the community-wide approach the contractor will take when making decisions on the anti-poverty programs to be administered by the agency. The Community Action Plan must include a detailed description of how the agency does or will address the needs of youth in low-income communities through youth development programs. This plan is reviewed by a state monitor in conjunction with review and execution of the entity's

annual funding award.

**Coordination of Other Programs**

**14.1c. 676(b)(1)(C)** Describe how the state will assure “that funds made available through grant or allotment will be used –

- (C) to make more effective use of, and to coordinate with, other programs related to the purposes of this subtitle (including State welfare reform efforts)

**[Narrative, 5000 characters]**

Each eligible entity is required to develop an outcome-based Community Action Plan that ties to the results of the entity’s community needs assessment and describes the community-wide approach the eligible entity will take when making decisions on the anti-poverty programs to be administered by the eligible entity. The Community Action Plan must include a description of the current service delivery system targeted to low-income individuals and families in the service area including services offered by the entity and services provided by other agencies, a description of how the agency has coordinated and/or partnered with other local agencies to address gaps in services, and a description of how CSBG funds will be coordinated with other public and private resources. This plan is reviewed by a state monitor in conjunction with review and execution of the entity’s annual funding award.

**State Use of Discretionary Funds**

**14.2. 676(b)(2)** Describe “how the State intends to use discretionary funds made available from the remainder of the grant or allotment described in section 675C(b) in accordance with this subtitle, including a description of how the State will support innovative community and neighborhood-based initiatives related to the purposes of this subtitle.”

**Note:** the State describes this assurance under “State Use of Funds: Remainder/Discretionary,” items 7.9 and 7.10

**[No response; links to items 7.9 and 7.10.]**

**Eligible Entity Service Delivery, Coordination, and Innovation**

**14.3. 676(b)(3)** “Based on information provided by eligible entities in the State, a description of...”

**Eligible Entity Service Delivery System**

**14.3a. 676(b)(3)(A)** Describe “the service delivery system, for services provided or coordinated with funds made available through grants made

under 675C(a), targeted to low-income individuals and families in communities within the State;”

**[Narrative, 5000 characters]**

Oklahoma has 18 eligible entities that serve all of its 77 counties. The service delivery system for the eligible entities involves two initiatives. First, the entities establish partnerships with all other agencies that can assist clients with access to services that are both related to the agency’s identified priorities and those that are not. These relationships provide a network of services and referral sources that will assist individuals and families to secure greater self-sufficiency. The second initiative involves a system of intake, assessment and eligibility for services offered by the agency. A uniform intake is completed for each client coming to the agency for services. If the intake indicates that additional services offered by the agency or by other partners would enable the client to secure services that promote self-sufficiency, the client is referred to other programs or other agencies.

***Eligible Entity Linkages – Approach to Filling Service Gaps***

**14.3b. 676(b)(3)(B)** Describe “how linkages will be developed to fill identified gaps in the services, through the provision of information, referrals, case management, and followup consultations.”

**Note:** The state describes this assurance in the State Linkages and Communication section, item 9.3b.

**[No response; links to 9.3b.]**

***Coordination of Eligible Entity Allocation 90 Percent Funds with Public/Private Resources***

**14.3c. 676(b)(3)(C)** Describe how funds made available through grants made under 675C(a) will be coordinated with other public and private resources.”

**Note:** The state describes this assurance in the State Linkages and Communication section, item 9.7.

**[No response; links to 9.7]**

***Eligible Entity Innovative Community and Neighborhood Initiatives, Including Fatherhood/Parental Responsibility***

**14.3d. 676(b)(3)(D)** Describe “how the local entity will use the funds [made available under 675C(a)] to support innovative community and neighborhood-based initiatives related to the purposes of this subtitle, which may include fatherhood initiatives and other initiatives with the goal of strengthening families and encouraging parenting.”

**Note:** The description above is about eligible entity use of 90 percent funds to support these initiatives. States may also support these types of activities at the local level using state remainder/discretionary funds, allowable under Section 675C(b)(1)(F). In this State Plan, the state indicates funds allocated for these activities under item 7.9(f).

**[Narrative, 5000 characters]**

Eligible entities support many programs and initiatives with CSBG funds that strengthen families and encourage parenting.

The Head Start program places a heavy emphasis on parent involvement in the classroom. Agencies strive to strengthen the relationship between Head Start and Early Head Start children and the important men in their lives by encouraging "Dads" to participate in the educational process of their child. Some activities for fathers include Breakfast with Buddies, Tool-boxes for Dads, and Fathers Reading Every Day" (FRED). "Raising a Reader" has been implemented to effectively develop family reading habits and by doing so helps young children enter school ready to learn.

Just a few examples of other agency initiatives include:

- The Conscious Discipline training program for parents. Conscious Discipline is a research-based program that helps adults stay calm enough to see misbehavior and upset as a signal to teach instead of punish. It is built on safety, connection and problem solving.
- Financial literacy for parents through the "Money and Me" program utilizing the Money as You Grow book club as building blocks for good financial decision making for our children and families. This program offers opportunities for families to learn key concepts through reading, play and quiet one-on-one talks.
- Parenting classes on such topics as Child Growth and Development, ages and Stages of Development, Behavior and Guidance, and Nutrition. Through a partnership with the Department of Humans Services Program and Employment Now, they may obtain employments. Single fathers can also participate in support groups. Respite and additional guidance can be offered through referral to the Foster Grandparents Program.
- The Strengthening Families Program curriculum. YouthFirst program provides case management services to at-risk youth ages 10 to 17. Youth participants receive support to become productive, law-abiding citizens. Project activities and SFP training work to strengthen the family system, protective factors, pro-social skills and parent-child communication.

The HOME Program, where eligible entities buy and renovate homes and then rent them to low-income people provides safe, low-cost housing has been shown to strengthen the family as a whole.

Some other family support initiatives are Family Advancement Services which provides parenting classes, screening for public benefits and financial coaching; family literacy

efforts that include an adult education program, ESL programs as well as weekly story time events which help teach parents literacy skills, build home libraries, and promote intergenerational literacy.

Eligible entities provide a description of how funds will support innovative community and neighborhood-based programs such as fatherhood initiatives, and other initiatives aimed at strengthening families in their annual Community Action Plan and needs assessment report that is submitted with their annual funding application.

#### Eligible Entity Emergency Food and Nutrition Services

- 14.4. 676(b)(4) Describe how the state will assure “that eligible entities in the State will provide, on an emergency basis, for the provision of such supplies and services, nutritious foods, and related services, as may be necessary to counteract conditions of starvation and malnutrition among low-income individuals.”

[Narrative, 5000 characters]

Each eligible entity is required to develop an outcome-based Community Action Plan that ties to the results of the entity’s community needs assessment and describes the community-wide approach the contractor will take when making decisions on the anti-poverty programs to be administered by the agency. The Community Action Plan must include a detailed description of the strategy to counteract conditions of starvation and malnutrition and include a description of the agency’s emergency food provisions plan-qualifications, limitations, evaluations, and coordination with other programs. This plan is reviewed by a state monitor in conjunction with review and execution of the entity’s annual funding award and by the CSBG planner in preparation of state plans and annual reports.

#### State and Eligible Entity Coordination/linkages and Workforce Innovation and Opportunity Act Employment and Training Activities

- 14.5. 676(b)(5) Describe how the state will assure “that the State and eligible entities in the State will coordinate, and establish linkages between, governmental and other social services programs to assure the effective delivery of such services, and [describe] how the State and the eligible entities will coordinate the provision of employment and training activities, as defined in section 3 of the Workforce Innovation and Opportunity Act, in the State and in communities with entities providing activities through statewide and local workforce development systems under such Act.”

**Note:** The state describes this assurance in the State Linkages and Communication section, items 9.1, 9.2, 9.3a, 9.4, 9.4a, and 9.4b.

[No response; links to items 9.1, 9.2, 9.3a, 9.4, 9.4a, and 9.4b]

#### State Coordination/Linkages and Low-income Home Energy Assistance

- 14.6. 676(b)(6) Provide “an assurance that the State will ensure coordination between antipoverty programs in each community in the State, and ensure, where appropriate, that emergency energy crisis intervention programs under title XXVI (relating to low- income home energy assistance) are conducted in such community.”

**Note:** The state describes this assurance in the State Linkages and Communication section, items 9.2 and 9.5.

[No response; links to 9.2 and 9.5]

#### Federal Investigations

- 14.7. 676(b)(7) Provide “an assurance that the State will permit and cooperate with Federal investigations undertaken in accordance with section 678D.”

**Note:** The state addresses this assurance in the Fiscal Controls and Monitoring section, item 10.13.

[No response; links to 10.13]

#### Funding Reduction or Termination

- 14.8. 676(b)(8) Provide “an assurance that any eligible entity in the State that received funding in the previous fiscal year through a community services block grant made under this subtitle will not have its funding terminated under this subtitle, or reduced below the proportional share of funding the entity received in the previous fiscal year unless, after providing notice and an opportunity for a hearing on the record, the State determines that cause exists for such termination or such reduction, subject to review by the Secretary as provided in section 678C(b).”

**Note:** The state addresses this assurance in the Fiscal Controls and Monitoring section, item 10.7.

[No response; links to 10.7]

#### Coordination with Faith-based Organizations, Charitable Groups, Community Organizations

- 14.9. 676(b)(9) Describe how the state will assure “that the State and eligible entities in the State will, to the maximum extent possible, coordinate programs with and form partnerships with other organizations serving low-income residents of the communities and members of the groups served by the State, including religious organizations, charitable groups, and community organizations.”

**Note:** The state describes this assurance in the State Linkages and Communication, item 9.6.

[No response; links to 9.6]

### Eligible Entity Tripartite Board Representation

- 14.10. 676(b)(10)** Describe how “the State will require each eligible entity in the State to establish procedures under which a low-income individual, community organization, or religious organization, or representative of low-income individuals that considers its organization, or low-income individuals, to be inadequately represented on the board (or other mechanism) of the eligible entity to petition for adequate representation.”

**Note:** The state describes this assurance under Eligible Entity Tripartite Boards, item 11.3

[No response; links to item 11.3]

### Eligible Entity Community Action Plans and Community Needs Assessments

- 14.11. 676(b)(11)** Provide “an assurance that the State will secure from each eligible entity in the State, as a condition to receipt of funding by the entity through a community services block grant made under this subtitle for a program, a community action plan (which shall be submitted to the Secretary, at the request of the Secretary, with the State plan) that includes a community-needs assessment for the community served, which may be coordinated with community-needs assessments conducted for other programs.”

[No response; links to items 13.5 and 13.6]

### State and Eligible Entity Performance Measurement: ROMA or Alternate system

- 14.12. 676(b)(12)** Provide “an assurance that the State and all eligible entities in the State will, not later than fiscal year 2001, participate in the Results Oriented Management and Accountability System, another performance measure system for which the Secretary facilitated development pursuant to section 678E(b), or an alternative system for measuring performance and results that meets the requirements of that section, and [describe] outcome measures to be used to measure eligible entity performance in promoting self-sufficiency, family stability, and community revitalization.”

**Note:** The state describes this assurance in the ROMA section, items 13.1, 13.2, 13.3, and 13.4.

[No response; links to 13.1, 13.2, 13.3, and 13.4]

### Validation for CSBG Eligible Entity Programmatic Narrative Sections

- 14.13. 676(b)(13)** Provide “information describing how the State will carry out the assurances described in this section.”

**Note:** The state provides information for each of the assurances directly in section 14 or in corresponding items throughout the State Plan, which are included as hyperlinks in section 14.

[No response for this item]

- By checking this box, the state CSBG authorized official is certifying the assurances set out above.

**SECTION 15**  
**Federal Certifications**

**The box after each certification must be checked by the State CSBG authorized official.**

**15.1. Lobbying**

***Certification for Contracts, Grants, Loans, and Cooperative Agreements***

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

***Statement for Loan Guarantees and Loan Insurance***

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

- By checking this box**, the state CSBG authorized official is providing the certification set out above.

## 15.2. Drug-Free Workplace Requirements

This certification is required by the regulations implementing the Drug-Free Workplace Act of 1988: 45 CFR Part 76, Subpart, F. Sections 76.630(c) and (d)(2) and 76.645 (a)(1) and (b) provide that a Federal agency may designate a central receipt point for STATE-WIDE AND STATE AGENCY-WIDE certifications, and for notification of criminal drug convictions. For the Department of Health and Human Services, the central point is: Division of Grants Management and Oversight, Office of Management and Acquisition, Department of Health and Human Services, Room 517-D, 200 Independence Avenue, SW Washington, DC 20201.

### ***Certification Regarding Drug-Free Workplace Requirements*** (Instructions for Certification)

- (1) By signing and/or submitting this application or grant agreement, the grantee is providing the certification set out below.
- (2) The certification set out below is a material representation of fact upon which reliance is placed when the agency awards the grant. If it is later determined that the grantee knowingly rendered a false certification, or otherwise violates the requirements of the Drug-Free Workplace Act, the agency, in addition to any other remedies available to the Federal Government, may take action authorized under the Drug-Free Workplace Act.
- (3) For grantees other than individuals, Alternate I applies.
- (4) For grantees who are individuals, Alternate II applies.
- (5) Workplaces under grants, for grantees other than individuals, need to be identified on the certification. If known, they may be identified in the grant application. If the grantee does not identify the workplaces at the time of application, or upon award, if there is no application, the grantee must keep the identity of the workplace(s) on file in its office and make the information available for Federal inspection. Failure to identify all known workplaces constitutes a violation of the grantee's drug-free workplace requirements.
- (6) Workplace identifications must include the actual address of buildings (or parts of buildings) or other sites where work under the grant takes place. Categorical descriptions may be used (e.g., all vehicles of a mass transit authority or State highway department while in operation, State employees in each local unemployment office, performers in concert halls or radio studios).
- (7) If the workplace identified to the agency changes during the performance of the grant, the grantee shall inform the agency of the change(s), if it previously identified the workplaces in question (see paragraph five).
- (8) Definitions of terms in the Nonprocurement Suspension and Debarment common rule and Drug-Free Workplace common rule apply to this certification. Grantees' attention is called, in particular, to the following definitions from these rules:

Controlled substance means a controlled substance in Schedules I through V of the Controlled Substances Act (21 U.S.C. 812) and as further defined by regulation (21 CFR 1308.11 through 1308.15);

Conviction means a finding of guilt (including a plea of nolo contendere) or imposition of

sentence, or both, by any judicial body charged with the responsibility to determine violations of the Federal or State criminal drug statutes;

Criminal drug statute means a Federal or non-Federal criminal statute involving the manufacture, distribution, dispensing, use, or possession of any controlled substance;

Employee means the employee of a grantee directly engaged in the performance of work under a grant, including: (i) All direct charge employees; (ii) All indirect charge employees unless their impact or involvement is insignificant to the performance of the grant; and, (iii) Temporary personnel and consultants who are directly engaged in the performance of work under the grant and who are on the grantee's payroll. This definition does not include workers not on the payroll of the grantee (e.g., volunteers, even if used to meet a matching requirement; consultants or independent contractors not on the grantee's payroll; or employees of subrecipients or subcontractors in covered workplaces).

#### **Certification Regarding Drug-Free Workplace Requirements**

##### Alternate I. (Grantees Other Than Individuals)

The grantee certifies that it will or will continue to provide a drug-free workplace by:

- (a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
- (b) Establishing an ongoing drug-free awareness program to inform employees about --
  - (1) The dangers of drug abuse in the workplace;
  - (2) The grantee's policy of maintaining a drug-free workplace;
  - (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
  - (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
- (c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);
- (d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will --
  - (1) Abide by the terms of the statement; and
  - (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
- (e) Notifying the agency in writing, within 10 calendar days after receiving notice under paragraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

- (f) Taking one of the following actions, within 30 calendar days of receiving notice under paragraph (d)(2), with respect to any employee who is so convicted - -
- (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
  - (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
- (g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e) and (f).

The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

Place of Performance (Street address, city, county, state, zip code) **[Narrative, 2500 characters]**

- Check if there are workplaces on file that are not identified here. Alternate II. (Grantees Who Are Individuals)
- (a) The grantee certifies that, as a condition of the grant, he or she will not engage in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance in conducting any activity with the grant;
  - (b) If convicted of a criminal drug offense resulting from a violation occurring during the conduct of any grant activity, he or she will report the conviction, in writing, within 10 calendar days of the conviction, to every grant officer or other designee, unless the Federal agency designates a central point for the receipt of such notices. When notice is made to such a central point, it shall include the identification number(s) of each affected grant.

[55 FR 21690, 21702, May 25, 1990]

- By checking this box**, the state CSBG authorized official is providing the certification set out above.

### 15.3. Debarment

#### ***CERTIFICATION REGARDING DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS***

Certification Regarding Debarment, Suspension, and Other Responsibility Matters - - Primary Covered Transactions

Instructions for Certification

- (1) By signing and submitting this proposal, the prospective primary participant is providing the certification set out below.
- (2) The inability of a person to provide the certification required below will not necessarily result in denial of participation in this covered transaction. The prospective participant shall submit an explanation of why it cannot provide the certification set out below. The certification or explanation will be considered in connection with the department or agency's determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.
- (3) The certification in this clause is a material representation of fact upon which reliance was placed when the department or agency determined to enter into this transaction. If it is later determined that the prospective primary participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.
- (4) The prospective primary participant shall provide immediate written notice to the department or agency to which this proposal is submitted if at any time the prospective primary participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
- (5) The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549. You may contact the department or agency to which this proposal is being submitted for assistance in obtaining a copy of those regulations.
- (6) The prospective primary participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency entering into this transaction.
- (7) The prospective primary participant further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and

Voluntary Exclusive-Lower Tier Covered Transaction,” provided by the department or agency entering into this covered transaction, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

- (8) A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.
- (9) Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
- (10) Except for transactions authorized under paragraph 6 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.

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***Certification Regarding Debarment, Suspension, and Other Responsibility Matters - -***

**Primary Covered Transactions**

- (1) The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:
  - (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by any Federal department or agency;
  - (b) Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
  - (c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
  - (d) Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.

- (2) Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

*Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion -- Lower Tier Covered Transactions*

Instructions for Certification

- (1) By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below.
- (2) The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.
- (3) The prospective lower tier participant shall provide immediate written notice to the person to which this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or had become erroneous by reason of changed circumstances.
- (4) The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meaning set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.
- (5) The prospective lower tier participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.
- (6) The prospective lower tier participant further agrees by submitting this proposal that it will include this clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
- (7) A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from covered transactions, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.

- (8) Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
- (9) Except for transactions authorized under paragraph five of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

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*Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - - Lower Tier Covered Transactions*

- (1) The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
  - (2) Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.
- By checking this box, the state CSBG authorized official is providing the certification set out above.

#### 15.4. Environmental Tobacco Smoke

Public Law 103227, Part C Environmental Tobacco Smoke, also known as the Pro Children Act of 1994, requires that smoking not be permitted in any portion of any indoor routinely owned or leased or contracted for by an entity and used routinely or regularly for provision of health, day care, education, or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law does not apply to children's services provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for inpatient drug or alcohol treatment. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1000 per day and/or the imposition of an administrative compliance order on the responsible entity by signing and submitting this application the applicant/grantee certifies that it will comply with the requirements of the Act.

The applicant/grantee further agrees that it will require the language of this certification be included in any subawards which contain provisions for the children's services and that all subgrantees shall certify accordingly.

- By checking this box, the state CSBG authorized official is providing the certification set out above.