



The CSBG organizational standards provide a standard foundation of organizational capacity for all CSBG Eligible Entities (CEEs) across the United States. The Federal Office of Community Services' Information Memorandum (IM) 138 provides direction to States and CEEs on establishing organizational standards and includes the final wording of the standards developed by the OCS-funded organizational standards Center of Excellence (COE).

The COE-developed organizational standards are comprehensive and were developed for the CSBG Network by the CSBG Working Group. The organizational standards work together to characterize an effective and healthy organization while reflecting the vision and values of Community Action and the requirements of the CSBG Act.

MAXIMUM FEASIBLE PARTICIPATION

Category 1: Consumer Input + Involvement

Standard 1.1

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

Guidance:

- The voices of low-income individuals currently living in the geographic service area must be heard throughout the development, planning, implementation, and evaluation process.64
- Providing services to low-income people does not qualify as including low-income individuals in agency activities.23
- Provide for regular participation of the poor and the affected area residents in the implementation of the programs.⁵⁴

Timeframe: During monitoring period

Agency S	Self-Assessm	ent:
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Summary: How the agency is involving low-income individuals within the agency in program planning, implementation, and evaluation.

Documentation Examples:
□ Sign-in sheets from activities
 Meeting minutes (e.g., governing board and advisory councils)
□ Volunteer hours list
□ Surveys/focus groups
 Other documentation may be used in lieu of what is listed in certain circumstances.
Agency Self-Check: ☐ MET ☐ NOT MET ☐ ON TARGET
State Assessment of Agency:
□ FULLY MET □ NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 1.2

The organization analyzes information collected directly from low-income individuals as part of the community assessment.

Guidance:

- This information can be, but does not need to be, agency customers only.²³
- Community assessment must analyze this data to identify what low-income community members perceive to be the highest needs in their area.

Timeframe: Every three (3) years from the previously completed CNA date

Agency Self-Assessment:
Summary: How low-income individuals were consulted directly, and the data was collected and analyzed as part of the community needs assessment process.
Documentation Examples: ☐ Community needs assessment ☐ Any related appendices or methodology section that details the analysis of customer data ☐ Other documentation may be used in lieu of what is listed in certain circumstances.
Agency Self-Check: ☐ MET ☐ NOT MET ☐ ON TARGET
State Assessment of Agency:
□ FULLY MET □ NOT MET
*If not met, what action steps are needed to meet the standard?
Standard 1.3
The organization has a systematic approach for collecting, analyzing, and reporting customer satisfaction data to the governing board.
 Guidance: Comment boxes, focus groups, interviews, community forums, customer surveys (paper/electronic), post cards, etc. are common examples of methods used to collect data directly from low-income individuals. The board must be provided with the customer satisfaction information they need to effectively plan and evaluate.⁶⁴ Reporting to the governing board may be via written or verbal forms³⁷ but must be documented in the meeting minutes or data provided in the board packet(s).⁶¹ Timeframe: During monitoring period, at least once
Agency Self-Assessment:
Summary: Customer satisfaction data collection methods utilized, evidence the data was reviewed and analyzed, and how/when provided to the governing board.
Documentation Examples: □ Documented discussion and/or subsequent reports, examples: □ Governing board meeting minutes □ Annual reports □ Charts/graphs/spreadsheets/summaries reflecting analysis □ Description(verbal) of how data is collected □ Customer satisfaction policy/procedures □ Other documentation may be used in lieu of what is listed in certain circumstances. Agency Self-Check: □ MET □ NOT MET □ ON TARGET
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State Assessment of Agency:
□ FULLY MET □ NOT MET
*If not met, what action steps are needed to meet the standard?
Category 2: Community Engagement
Standard 2.1
The organization has documented or demonstrated partnerships across the community, for specifically identified purposes; partnerships include other anti-poverty organizations in the area.
 Guidance: Documented or demonstrated partnerships may be relationships that are formalized through an MOU/MOA, contract, coalition membership, etc.³⁷ Partnerships must include providers of services to low-income people or anti-poverty organizations.^{63,66}
Agency Self-Assessment:
Summary: Agency documents or demonstrates current partnerships and their purposes across the community.
Documentation Examples: Agency-wide partnership list MOU/MOAs Contracts/agreements Verbal descriptions of partnership purposes Memberships Other documentation may be used in lieu of what is listed in certain circumstances. Agency Self-Check: MET NOT MET ON TARGET
State Assessment of Agency:

☐ FULLY MET ☐ NOT MET

^{*}If not met, what action steps are needed to meet the standard?

Standard 2.2

The organization utilizes information gathered from key sectors of the community in assessing needs and resources during the community assessment process or other times. These sectors would include at minimum: community-based organizations, faith-based organizations, private sector, public sector, and educational institutions.

Guidance:

- Demonstrate activity in each of the five key sectors (noted above) over the agency's entire service area, e.g., partnerships, representing the agency on various community groups, etc.
- Demonstrate how that information is used to assess needs and resources.²⁴
- Determine the amount and effectiveness of the assistance being provided to deal with the problems and causes of poverty in the community.⁵⁴
- This may but does not have to be done as part of the Community Needs Assessment

 Fineframe: During monitoring period.

 The community Needs Assessment

 Fineframe: During monitoring period.

Timename. During monitoring period
Agency Self-Assessment:
Summary: Be able to describe how the agency utilizes information from different sectors to identify and address community needs.
Documentation Examples:
 Agency-wide partnership or stakeholders list (with sector representation) Community Needs Assessment (data collection methods and analysis sections) Agency reports on needs and resources produced by the agency Other documentation may be used in lieu of what is listed in certain circumstances.
Agency Self-Check: ☐ MET ☐ NOT MET ☐ ON TARGET
State Assessment of Agency:
□ FULLY MET □ NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 2.3

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

Guidance:

- Demonstrates the agency's ability to deliver performance results/outcomes and/or to "tell the organization's success stories" to the community.
- To be successful at this standard, an agency must not only promote the organization's programs, but also inform the community about the results of its programs.

Timeframe: During monitoring period

Agency Self-Assessment:
Summary: Various methods used by the agency to communicate its message and share its results with the community.
Documentation Examples:
☐ Shared agency-wide results: annual report, community action plan, assessments, etc.
□ Annual event/ gala
□ Social media: Facebook, Twitter, blogs, LinkedIn, etc.
□ Print media: Brochures, Newsletters, Newspaper articles, etc.
□ Broadcast media: Television, Radio, etc.
□ Press releases
□ Website
Other documentation may be used in lieu of what is listed in certain circumstances.
Agency Self-Check: ☐ MET ☐ NOT MET ☐ ON TARGET
State Assessment of Agency:
□ FULLY MET □ NOT MET
*If not met, what action steps are needed to meet the standard?
Standard 2.4
The organization documents the number of volunteers and hours mobilized in support of
its activities.
Guidance:
 There is no requirement to utilize volunteers, only to document their number and hours, if utilized.²⁴
• This can be an agency-wide list, or if kept by program, a cumulative representation of the
total number of volunteers/hours documented. ⁶¹
 At a minimum, this must include documentation of governing board and committee activities.
Timeframe: Annually, during the monitoring period
Agency Self-Assessment:
Summary: The total number of volunteers and hours mobilized in support of the agency's
activities for each program that utilizes volunteers.
Documentation Examples:
☐ Agency-wide or program-by-program list of volunteers and service hours
□ Governing board attendance matrix
 Other documentation may be used in lieu of what is listed in certain circumstances.
Agency Self-Check: ☐ MET ☐ NOT MET ☐ ON TARGET
State Assessment of Agency:

☐ FULLY MET ☐ NOT MET

Category 3: Community Assessment

42 USC 9908(b)(11), of the CSBG Act states "...that includes a community needs assessment for the community served, which may be coordinated with community needs assessments conducted for other programs...". Therefore, IHCDA recognizes that other agency program needs assessments, such as for HUD or Head Start, may be used to meet these standards if all the details outlined in Standards 3.2-3.4 (below) are completed and appropriately demonstrated.

Standard 3.1

The organization conducted a community assessment and issued a report to the community within the past three (3) years.

Guidance:

- This is also called a Community Needs Assessment (CNA).
- Assessment must include a clear description of the geographic location (CSBG counties) that the agency is funded to serve.⁷⁶
 - Assessment must include at least all the CSBG counties served but may include other counties served by the agency.
 - Assessment must not overlook pockets of poverty in areas that receive fewer services.²⁵
- The data utilized must be as current as possible.²⁵
- CNA results must be shared with the community, which may include partner organizations, other sectors, and the community at large.²⁵
 - Presenting only to staff or at a governing board meeting, while open to the public, does not meet the requirements of the standard.⁶¹

Timeframe: CNA: Every three (3) years from the previously completed CNA date (with a two (2)-month buffer); public release thereafter

Agency Self-Assessment:
Summary: The current CNA was completed in the last three years and findings have been communicated to the public.
Documentation Examples: ☐ Current CNA ☐ Documentation illustrating how and when the results were communicated to the public: ☐ Agency website ☐ Agency social media ☐ Community forum ☐ Other documentation may be used in lieu of what is listed in certain circumstances. Agency Self-Check: ☐ MET ☐ NOT MET ☐ ON TARGET
State Assessment of Agency
State Assessment of Agency:

*If not met, what action steps are needed to meet the standard?

☐ FULLY MET ☐ NOT MET

Standard 3.2

As part of the community assessment, the organization collects and includes current data specific to poverty and its prevalence related to gender, age, and race/ethnicity for their service area(s).

Guidance:

 A CNA provides information about poverty for all three (3) categories of demographic data [gender, age, race/ethnicity].²⁵

Agency Self-Assessment:

Timeframe: Every three (3) years from the previously completed CNA date

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Summary:	The CNA	provides	data	describing	the	interaction	between	poverty	level	and	the
following fo	ur demogra	aphic cate	gories	s: gender, a	ıge,	race, and e	thnicity.				

Documentation Examples:

□ CNA and any needed appendices	
 Other documentation may be used in lieu of what is listed in certain circum 	istances.
Agency Self-Check: ☐ MET ☐ NOT MET ☐ ON TARGET	
State Assessment of Agency:	

☐ FULLY MET ☐ NOT MET

Standard 3.3

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

Guidance:

- The CNA must include both qualitative and quantitative data⁷⁶:
 - Qualitative: Descriptive or narrative data (primary data) collected directly from community members via interviews, focus groups, community workshops, or surveys.
 - Methodology includes gathering information from a variety of points of view (i.e., low-income population, clients, governing board members, community leaders, partner agencies/companies).
 - Findings are represented in the actual words of the respondent.
 - Quantitative: Statistical or numerical data that will help understand the scope of the needs in the community.
 - Primary data may include information from the agency's own programs such as client demographics, or how clients interact with (i.e., are or are not served by) programs addressing key community needs, and/or
 - Secondary data may include and compare National, State and Local sources from a variety of different agencies/departments.

^{*}If not met, what action steps are needed to meet the standard?

- The CNA must include data analysis that:
 - includes a review of the similarities/differences between findings by topic from the different types of data sources, and
 - o provides meaningful conclusions based on the data reported in the CNA.

Timeframe: Every three (3) years from the previously completed CNA date

Agency Self-Assessment:

Summary: The CNA uses well-sourced qualitative and quantitative data that are analyzed to make conclusions about the needs of low-income individuals in the service area.

Documentation Examples:

bocumentation Examples.
□ CNA and any needed appendices
☐ Methodology descriptions
Other documentation may be used in lieu of what is listed in certain circumstances.
Agency Self-Check: ☐ MET ☐ NOT MET ☐ ON TARGET
State Assessment of Agency:
□ FULLY MET □ NOT MET

Standard 3.4

The community assessment includes key findings on the causes and conditions of poverty and the needs of the communities assessed.

Guidance:

- Key findings in the CNA must focus on how the causes and conditions of poverty relate to the community's documented needs.
- For each key finding identified in the CNA, analysis should consider how the issue manifests at the family, agency, or community level. This consideration must be apparent in the key findings, but it is **not** required that each level be identified for each key finding:
 - Family (how does the need concern individuals and families who have identified things in their own life that are lacking)
 - Agency (did the data identify areas where the agency does not have resources or capacity to respond to an identified need)
 - Community (does the issue impact the community as a whole, not just customers or potential customers of the agency).

Timeframe: Every three (3) years from the previously completed CNA date

Agency Self-Assessment:

Summary: Outline/Specify/List the CNA's key findings about the causes and conditions of poverty, and how they relate to the community's documented needs.

Documentation Examples:

	CNA and any	needed a	appendices				
	Other docume	entation n	nay be used in	lieu of what is	s listed in	certain cir	cumstances.
Agency	/ Self-Check:	\square MET	□ NOT MET	☐ ON TARG	ET		

^{*}If not met, what action steps are needed to meet the standard?

State Assessment of Agency:
□ FULLY MET □ NOT MET
*If not met, what action steps are needed to meet the standard?
Standard 3.5
The governing board formally accepts the completed community assessment.
 Guidance: Within sixty (60) calendar days of completion, the full current assessment must be formally accepted by governing board motion, and the vote must be recorded in meeting minutes.⁶¹ Timeframe: Within (60) calendar days of the most recently completed CNA date
Agency Self-Assessment:
Summary: Governing board has voted to approve the completed CNA within the appropriate timeframe.
Documentation Examples: ☐ Governing board meeting minutes ☐ Other documentation may be used in lieu of what is listed in certain circumstances. Agency Self-Check: ☐ MET ☐ NOT MET ☐ ON TARGET
State Assessment of Agency:

VISION AND DIRECTION

Category 4: Organizational Leadership

Standard 4.1

☐ FULLY MET ☐ NOT MET

The governing board has reviewed the organization's mission statement within the past five (5) years and assured that: 1. The mission addresses poverty, 2. The organization's programs and services are in alignment with the mission.

Guidance:

- Review of whether programs and services are in line with the mission could be completed by either a Board of Directors or staff leadership, as reflected in meeting minutes or other documentation.⁶¹
- The mission statement does not have to use the word poverty but must address the issue
 of poverty in some way. Phrases that demonstrate this may include: "increase selfsufficiency", "economic security", "ladders of opportunity", "low-income," "economically
 disadvantaged, etc." ^{26, 61}

^{*}If not met, what action steps are needed to meet the standard?

rimetrame: Five (5) years prior to your upcoming monitoring session date.
Agency Self-Assessment:
Summary: Documented discussion of the mission statement by the governing board, within the past five years, it addresses poverty, and conclusions by the governing board and/or staff that programs are/are not in alignment.
Documentation Examples:
☐ Current organization mission statement
□ Governing board meeting minutes
□ Retreat notes indicating discussion of the mission statement and program alignments
Other documentation may be used in lieu of what is listed in certain circumstances.
Agency Self-Check: ☐ MET ☐ NOT MET ☐ ON TARGET
State Assessment of Agency:
□ FULLY MET □ NOT MET
*If not met, what action steps are needed to meet the standard?
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Standard 4.2
The organization's Community Action Plan (CAP) is outcome-based, anti-poverty
focused, and ties directly to the community assessment.
Guidance:
Compliance is based upon acceptance of the annual CAP by IHCDA.
Timeframe: Annually, during the monitoring period
Agency Self-Assessment:
Summary: Annually submit a complete CAP to IHCDA and have it accepted by IHCDA staff.
Documentation Examples:
□ Annual CAP submission (in IHCDA's files)
Agency Self-Check: ☐ MET ☐ NOT MET ☐ ON TARGET
State Assessment of Agency:
□ FULLY MET □ NOT MET

^{*}If not met, what action steps are needed to meet the standard?

Standard 4.3

The organization's community action plan and strategic plan document the continuous use of the full Results Orientated Management and Accountability (ROMA) cycle or comparable system (assessment, planning, implementation, achievement of results, and evaluation). In addition, the organization documents having used the services of a ROMA-certified trainer (or equivalent) to assist in implementation.

Guidance:

- Agency must show thoughtful assessment of needs, planning to meet those needs, implementation of programs and services designed to meet those needs, collection of data, and an analysis of this data.²⁷
- A ROMA trainer must be involved in agency activities, but it is up to the organization to determine the manner of his/her involvement: such as strategic planning meetings, consultation on implementation, etc.³⁷
- This Standard is not about training on ROMA (or requiring each CAA to have a ROMA trainer on staff) but implementing ROMA principles on a continuous basis.²⁶

Timeframe: During the monitoring period

Agency	/ Self-A	Assessm	nent:
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Summary: Demonstrate that the CAA is incorporating/using the ROMA cycle. Provide evidence of assistance by a Nationally Certified ROMA Trainer or Implementer, or comparable.

Documentation Examples:
□ Strategic planning notes
□ ROMA Implementation Checklist
□ A brief narrative speaking to the agency's use of each step of the ROMA cycle
 Meeting minutes, written communication, invoice, contract, etc., of a ROMA professional's involvement
 Execution of other CAR Standards assist in documenting the agencies use of the ROMA cycle.
 Other documentation may be used in lieu of what is listed in certain circumstances.
Agency Self-Check: ☐ MET ☐ NOT MET ☐ ON TARGET
State Assessment of Agency:
□ FULLY MET □ NOT MET

Standard 4.4

The governing board receives an annual update on the success of specific strategies included in the Community Action Plan (CAP).

Guidance:

Updates can be written or verbal, as long as they are noted in the minutes/board packet. This update may be a written report or staff presentation followed by board discussion.²⁶

Timeframe: Annually, during the monitoring period

^{*}If not met, what action steps are needed to meet the standard?

Agency Self-Assessment:
Summary: The governing board received an update on and discussed the CAP.
Summary: The governing board received an update on and discussed the CAP. Documentation Examples: Governing board minutes, or packet, or similar Annual report results Other documentation may be used in lieu of what is listed in certain circumstances. Agency Self-Check: MET NOT MET ON TARGET State Assessment of Agency: FULLY MET NOT MET *If not met, what action steps are needed to meet the standard?
Standard 4.5
The organization has a written succession plan in place for its CEO/Executive Director, approved by the governing board, which contains procedures for covering an emergency/unplanned, short-term absence of 3 months or less, as well as outlines the process for filling a permanent vacancy.
 Succession plan must contain these basic elements: 1) covers the CEO/ED position; 2) approved by the governing board; 3) covers an emergency/unplanned absence; 4) covers a short-term absence of 3 months or less; and 5.) includes a process for filling a permanent vacancy. For long-term vacancies, succession plan must include 1) who will sit on a search committee or transition team, 2) an overview of the selection process, and 3) a brief list of key skills/abilities required by a CEO/ED for the agency.⁶¹ The plan must be reviewed, at least by Leadership Staff, during the monitoring period, and approved by the governing board if changes are made.⁶¹ A public agency must adhere to its local government policies and procedures around interim appointments and processes for filling a vacancy.⁶⁹ Timeframe: At least once during the monitoring period
Agency Self-Assessment:
Summary: The current succession plan is in place for the Executive Director position, and demonstrates all required elements, including documentation of agency staff review.
Documentation Examples: ☐ Governing board minutes, or packet, or similar ☐ Other documentation may be used in lieu of what is listed in certain circumstances. Agency Self-Check: ☐ MET ☐ NOT MET ☐ ON TARGET State Assessment of Agency:

☐ FULLY MET ☐ NOT MET

Standard 4.6

An organization-wide comprehensive risk assessment has been completed within the past two (2) years and reported to the governing board.

Guidance:

- It is acceptable to assemble several assessments or tools as long as once collected they
 meet the time frame of every two years and the definitions of "agency-wide" (not just
 particular programs) and "comprehensive" (covering all pertinent aspects of operations).²⁶
- While there is no mandatory format; the assessment should include such potential risk factors as: governance, human resources, technology, communication, insurance coverage, transportation, facilities, staffing, service delivery, property, finances & financial management, competition, resources, contracts & procurement, etc.
 - Appropriately using the Nonprofit Risk Management Center (NRMC) link on the NCAP website (Tools & Resources/Online Tools) for Community Action Organizational Assessment and Risk Resources
 - o , meets all necessary requirements of this standard.
- Public agencies may need to draw from multiple government documents to make up a typical risk assessment used by the non-public agencies.

Timeframe: Two (2) years prior to your upcoming monitoring session date

*If not met, what action steps are needed to meet the standard?

Category 5: Board Governance

Standard 5.1

The organization's governing board is structured in compliance with the CSBG Act:

- 1. At least one third democratically selected representative of the low-income community
- 2. One-third local elected (public) officials (or their representatives)
- 3. The remaining membership from major groups and interests in the community (private)

Guidance:

- Agency's governing board approved bylaws that are structured in compliance with the CSBG Act (see above) and Indiana State law.
 - The bylaws may only have a range of community action governing board members between 15 and 51 members.⁵²
 - o Indiana Code requires both public and private Community Action Agencies to adhere to the full tripartite board structure as described in this standard.
- When governing board composition is not divisible by three:
 - No group number can ever be higher than the low-income representatives.
 - The public representative ratio must be rounded up to be a whole number.⁶¹
 - Low-income community representatives will make up greater than a third of the governing board.
- Agency follows its governing board approved Bylaw policies for tripartite structure and board membership levels.
 - o Each new member must be voted onto the governing board¹², following the appropriate selection process^{64,88}, and meets qualifications for service.
 - o When governing board positions are filled, they are filled with an individual/representative from the correct sector of representation.
- A public official or representative only serve on the governing board as such while they (or their principals) are in office.⁶⁴
 - o A public representative or public body cannot appoint more than one individual to represent them on the governing board.⁶¹
 - After their service as a public official or representative, an individual may remain

on the governing board if they are reclassified to another sector of representation.
Timeframe: Annually, during monitoring period
Agency Self-Assessment:
Summary: Tripartite compliance is documented in the bylaws and maintained.
Documentation Examples:
☐ The Indiana (IHCDA) CAA Board Governance Management Tool (or IHCDA-approved alternate)
□ Current governing board roster
 Other documentation may be used in lieu of what is listed in certain circumstances.
Agency Self-Check: ☐ MET ☐ NOT MET ☐ ON TARGET

		State Assessment of Agency:
☐ FULLY MET	□ NOT MET	

Standard 5.2

The organization's governing board has written procedures that document its democratic selection process for low-income board members adequate to assure that they are representative of the low-income community.

Guidance:

- The written democratic selection process/procedures (e.g., direct election, public forum, representative of service or community organization, etc.) aligns with CSBG requirements and has been approved by the governing board.
 - Whether or not they are low-income themselves, all representatives of the low-income population must be democratically selected to an agency's board of directors.
 - Low-income people in the community, served by the CAA, must have input prior to the candidate rising to the governing board.
 - A low-income representative may NOT be selected by a CAA staff member or by the Executive Director of another organization in the community.¹²
 - A low-income representative may NOT be chosen by or voted directly onto the CAA tripartite board solely by the governing board or nominating committee vote.⁴
 - If during their term as a board member, an individual who personally qualified for CSBG services increases their earnings such that they no longer qualify for CSBG services, they may remain on the board as a low-income representative.
- The agency follows their approved democratic selection process when seating low-income individuals/representatives on their governing board.

Timeframe: During the monitoring period.

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Summ	nary: Agency's democratic selection process is adequate, and board approved, and all low-
income	e individual/representatives were seated using the democratic selection process.
Docur	nentation Examples:
	Agency's written democratic selection process/policy
	Governing board approval for the policy (i.e., governing board meeting minutes)
	Documentation showing democratic selection process was followed for all low-income

Agency Self-Assessment:

- members seated:

 o Ballots/results
 - Letters from partner organizations

Advertisement of position and election details

□ Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: ☐ MET ☐ NOT MET ☐ ON TARGET

State Assessment of Agency:
□ FULLY MET □ NOT MET
*If not met, what action steps are needed to meet the standard?
Standard 5.3
The organization's bylaws have been reviewed by an attorney within the past five (5) years.
 The review must be independently submitted to the agency for consideration; if reviewer is a governing board member, voting on the bylaws as part of their regular board role is not sufficient to meet this standard. The reviewing attorney must be practicing⁶¹ but is not required to have a specific area of expertise.²⁸ The reviewing attorney is not required to be paid for their work (may be a volunteer).²⁸ The attorney must review the full agency bylaws and not just specific changes.⁶¹ Not applicable to public agencies.⁶⁹ Timeframe: Five (5) years prior to your upcoming monitoring session date
Agency Self-Assessment:
Summary: Evidence of a practicing attorney's review of the organization's full bylaws.
Documentation Examples: ☐ Invoice, letter/email, meeting, or ☐ Committee minutes discussing full review (if attorney is a governing board member) ☐ Proof individual is a practicing attorney, if requested ☐ Other documentation may be used in lieu of what is listed in certain circumstances.
Agency Self-Check: ☐ MET ☐ NOT MET ☐ ON TARGET

State Assessment of Agency:

☐ FULLY MET ☐ NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 5.4

The organization documents that each governing board member has received a copy of the bylaws within the past two (2) years.

Guidance:

• All <u>active</u> governing board members must have received a copy of the bylaws either in hard copy or electronically.²⁸

members on the agency website, intranet, or other governing board secured area is sufficient to meet this standard. 61

Timeframe: Two (2) years prior to your upcoming monitoring session date

Agency Self-Assessment:

Summary: Governing board members had access to, or were provided, the bylaws.

Documentation Examples:

Governing board minutes documenting their distribution
Individual or group signed and dated acknowledgement of receipt
Email to all governing board members reflecting attached bylaws
Posting the bylaws on a governing board-accessible website
Other documentation may be used in lieu of what is listed in certain circumstances.

Agency Self-Check: MET NOT MET ON TARGET

State Assessment of Agency:

Making a current version of the bylaws continually accessible to governing board

Standard 5.5

The organization's governing board meets in accordance with the frequency and quorum requirements and fills board vacancies as set out in the bylaws.

Guidance:

- Bylaws must include policies for meeting frequency, quorum, and filling vacancies.
 - The full governing board must meet at least 6 times per year; the Annual Meeting may be included as one of the six meetings.⁶¹
 - The bylaws may not authorize a quorum of fewer than One-third (1/3) of the number of directors in office.⁵⁷
- Agency follows its governing board approved policy.

*If not met, what action steps are needed to meet the standard?

- The governing board must fill vacant board positions within the timeframe in the bylaws (no longer than ninety (90) calendar days).³⁶
- Organizations must abide by any additional governing board representation rules in their bylaws, such as representation from geographic areas.⁵²

Timeframe: Annually, during the monitoring period

	Agend	y Self-Asse	essment:		

Summary: Bylaws contain appropriate policies for meeting frequency, quorum, and filling vacancies and the agency follows their policy.

Documentation Examples:

Bylaws
The governing board attendance matrix
Governing board meeting minutes

☐ Other documentation may be used in lieu of what is listed in certain circumstances. Agency Self-Check: ☐ MET ☐ NOT MET ☐ ON TARGET
State Assessment of Agency:
□ FULLY MET □ NOT MET
*If not met, what action steps are needed to meet the standard?
Standard 5.6
Each governing board member has signed a conflict-of-interest form within the past two (2) years.
 Governing board members are cognizant of their conflicts and honor the board's conflict of interest policy when actual (real) or potential conflicts arise. There is no particular template to follow. However, the form must include⁶¹: What actions board members are expected to take should a conflict arise. A full written disclosure of actual (real) or potential conflicts (e.g., places to list conflicts) A signature and date line Every "active" member must have a current conflict of interest form on file with the agency.⁶¹ Each form must be fully executed (signed and dated) by the governing board member, within the past 2 years, to be valid.⁶¹ Public agencies must have each advisory board member fulfil this requirement.⁶¹ Timeframe: Two (2) years prior to your upcoming monitoring session date
Agency Self-Assessment:
Summary: All active governing board members have signed/dated a COI statement that includes a list of any potential conflicts of interest.
Documentation Examples: ☐ Most recently signed conflict of interest statement from each active board member ☐ Other documentation may be used in lieu of what is listed in certain circumstances. Agency Self-Check: ☐ MET ☐ NOT MET ☐ ON TARGET State Assessment of Agency:
□ FULLY MET □ NOT MET

Standard 5.7

The organization has a process to provide a structured orientation for governing board members within six (6) months of being seated.

Guidance:

- All governing board members, regardless of experience or past board participation, must be provided with a structured orientation within six (6) months of being seated (becoming "active").⁶¹
 - o "There is no specific curricula requirement, training methodology"²⁸, or delivery method for board orientation, except that it must be structured and documented.
 - An organization may choose to provide an abridged orientation to returning governing board members.
 - An additional orientation is not required for a board member continuing for an additional term(s) with no interruption in service.
- The governing board member orientation must be documented, e.g., sign-in sheets, individually signed acknowledgement, email acknowledgement, etc.⁶¹

Timeframe: During the monitoring period

Agency Self-Assessment	Agency	Self-Ass	essment:
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Summary: All governing board members have received a structured orientation within six (6) months (from the date voted onto the board) of being seated.

Documentation Examples:

bocumentation Examples.
 Document outlining the full structured orientation process
 Curriculum for the full structured orientation process
☐ Governing board matrix
□ Signed orientation checklist
 Other documented proof of orientation for each seated governing board member
Other documentation may be used in lieu of what is listed in certain circumstances.
Agency Self-Check: ☐ MET ☐ NOT MET ☐ ON TARGET
State Assessment of Agency:
□ FULLY MET □ NOT MET

Standard 5.8

Governing board members have been provided with training on their duties and responsibilities within the past two (2) years.

Guidance:

 The majority of governing board members must participate in at least one training about their responsibilities every two years.⁶¹

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^{*}If not met, what action steps are needed to meet the standard?

- The organization needs to have documentation that the training occurred (including content) as well as documentation that each governing board member has been provided with training opportunities.²⁸
- There is no specific curricula requirement, or training methodology required.²⁸ The following types of governing board training topics are sufficient to fulfill this standard:
 - CSBG Act requirements relevant to the agency
 - Fiduciary Responsibilities
 - Duty of Care (Oversight)
 - Duty of Loyalty
 - Duty of Obedience
 - General Board Roles and Responsibilities
 - Assessments, Planning, Risk Mitigation, and Fundraising
 - Governing Board Recruitment
 - Financial Oversight
 - Oversight and Roles/Responsibilities of the Executive Director
- Agency program reports and ROMA trainings are not considered trainings about governing board responsibilities.⁶¹

Timeframe: Two (2) years prior to your upcoming monitoring session date

Agency Self-Assessment:

Summary: Governing board members have received/participated in training about board member duties and responsibilities (as many as possible, but at least a majority participated).

Documentation Examples:

bocumentation Examples.
☐ Training agendas/content
 Training materials, presenter(s) and documentation of governing board members attendance (i.e., sign in sheets)
☐ Governing board meeting minutes
 Other documentation may be used in lieu of what is listed in certain circumstances.
Agency Self-Check: ☐ MET ☐ NOT MET ☐ ON TARGET
State Assessment of Agency:
□ FULLY MET □ NOT MET

*If not met, what action steps are needed to meet the standard?

Standard 5.9

The organization's governing board receives programmatic reports at each regular board meeting.

Guidance:

- It is **not** required that there be a report on **each** program at every board meeting; however, it does call for some level of programmatic reporting at every board meeting.²⁸
- There is no specific delivery format required for these programmatic reports (e.g., verbal or in writing)

Timeframe: Annually, during the monitoring period
Agency Self-Assessment:
Summary: Program reports, of some level, are presented at each board meeting.
Documentation Examples: ☐ Governing board pre-meeting packet(s) ☐ Governing board meeting minutes ☐ Other documentation may be used in lieu of what is listed in certain circumstances. Agency Self-Check: ☐ MET ☐ NOT MET ☐ ON TARGET
State Assessment of Agency:
□ FULLY MET □ NOT MET
*If not met, what action steps are needed to meet the standard?
Category 6: Strategic Planning
Standard 6.1
The organization has an agency-wide strategic plan in place that has been approved by the governing board within the past five (5) years.
 Guidance: The strategic plan must be agency-wide, not for one or more individual programs²⁹ nor a list of just individual program³⁷, or agency goals.⁶¹ If the current plan will expire within three (3) months of the monitoring visit, the agency must be able to show evidence that a new plan is underway.⁶¹ The full governing board must formally approve the completed strategic plan and not a committee of the board.²⁹
Agency Self-Assessment:
Summary: Strategic plan, the plan's effective dates, and approval date by the governing board.
Documentation Examples: ☐ Strategic plan ☐ Governing board meeting minutes ☐ Other documentation may be used in lieu of what is listed in certain circumstances. Agency Self-Check: ☐ MET ☐ NOT MET ☐ ON TARGET
State Assessment of Agency:
□ FULLY MET □ NOT MET

^{*}If not met, what action steps are needed to meet the standard?

Standard 6.2

The approved strategic plan addresses "reduction of poverty", "revitalization of low-income communities", and/or "empowerment of people with low incomes to become more self-sufficient".

Guidance:

- This standard does not explicitly require an agency to formally list all three of the stated objectives in the strategic plan. As long as one (or more) of the objectives is shown.
- The plan demonstrates at least <u>one</u> of the following methods:
 - A direct connection from the strategic plan goals to CSBG ACT objectives identified above.⁶¹
 - A short section that clearly links one or more of the three objectives (identified in the standard) and explains how they are addressed ²⁹ or,
 - o A Compliance Summary Page explaining how the plan meets the requirements.

Timeframe: Five (5) years prior to your upcoming monitoring session date

Standard 6.3

The approved strategic plan contains "family", "agency" and/or "community" goals.

Guidance:

- For each goal, objective or action step in the strategic plan, the agency must clearly indicate which of the three categories (family, agency, or community) it primarily links to.²⁹
 - o This may be done in the strategic plan itself or in a crosswalk document.
- There is no requirement to address all three types of goals.²⁹
- The strategic plan must include at least one family or community goal.
 - The family or community goal must refer to an <u>external</u> anticipated change in outcome for individuals, families, or communities the agency serves.

Timeframe: Five (5) years prior to your upcoming monitoring session date

^{*}If not met, what action steps are needed to meet the standard?

Agency Self-Assessment:
Summary: Each objective is clearly linked to family, agency, or community and the plan
demonstrates at least one external goal.
Documentation Examples:
□ Strategic plan
□ Crosswalk of strategic plan to goal type
 Other documentation may be used in lieu of what is listed in certain circumstances.
Agency Self-Check: ☐ MET ☐ NOT MET ☐ ON TARGET
State Assessment of Agency:
□ FULLY MET □ NOT MET
*If not met, what action steps are needed to meet the standard?
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Standard 6.4
Customer satisfaction data and customer input, collected as part of the community
needs assessment, is included in the strategic planning process.
Guidance:
 During the strategic planning process, organization must review and discuss customer
satisfaction data <u>and</u> data from the community needs assessment.
Customer satisfaction data is information collected through surveys or comment
cards, etc., about the effectiveness of their interactions with your agency.
Customer input is collected through the Community Needs Assessment, Focus Groups, etc.,
and provides information about customer's opinions about gaps in services or issue areas the
agency is trying to address.
Timeframe: Five (5) years prior to your upcoming monitoring session date
Agency Self-Assessment:
Summary: Customer satisfaction and customer input data were included in the strategic planning
process.
Documentation Examples:
□ Strategic plan appendices/reference list/methodology
□ Notes from strategic planning session
□ Strategic planning process description
Other documentation may be used in lieu of what is listed in certain circumstances.
Agency Self-Check: ☐ MET ☐ NOT MET ☐ ON TARGET
State Assessment of Agency:
□ FULLY MET □ NOT MET

Standard 6.5

The governing board has received update(s) on progress towards meeting the goals in the strategic plan within the past twelve (12) months.

Guidance:

- Governing board must receive either a single report that reviews all strategic goals or periodic reports on specific goals that add up to a full review of all goals each year.²⁹
- All updates contributing to the "full report" on strategic plan progress must be provided to the full governing board, not a committee or subcommittee.²⁹

Timeframe: Annually, during the monitoring period

Agency Self-Assessment:		
Summary: The governing board received a "full report" on strategic plan progress each year.		
Documentation Examples:		
 Strategic plan scorecard, presentation, or similar mechanism; and 		
□ Governing board meeting minutes		
Other documentation may be used in lieu of what is listed in certain circumstances.		
Agency Self-Check: ☐ MET ☐ NOT MET ☐ ON TARGET		
State Assessment of Agency:		
State Assessment of Agency.		
□ FULLY MET □ NOT MET		

^{*}If not met, what action steps are needed to meet the standard?