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*\*Excerpted from Section 2 of the CSBG Policy and Procedure manual\**

**ORGANIZATIONAL STANDARDS POLICY**

**200. AUTHORITY**

Under the block grant framework established in the CSBG Act, States have both the authority and the responsibility for effective oversight of eligible entities that receive CSBG funds. Section 678B of the CSBG Act (42 U.S.C. § 9914) requires State CSBG Lead Agencies to establish “performance goals, administrative standards, financial management requirements, and other requirements” that ensure an appropriate level of accountability and quality among the State’s eligible entities.

**300. CENTER OF EXCELLENCE DEVELOPED STANDARDS**

The Washington State Department of Commerce CSBG Office (the State CSBG Office) has chosen to use the Center of Excellence (COE) developed Organizational Standards for oversight of Eligible Entities. The State CSBG Office recognizes these standards as a “comprehensive set of organizational standards developed *by* the CSBG Network *for* the CSBG Network”[[1]](#footnote-1) and as such the most complete and appropriate tool.

**400. REVIEW PROCEDURES**

The State CSBG Office will annually review compliance with the Organizational Standards via the E-Gov online assessment system. There are three points on the State CSBG Office assessment review cycle. Each assessment is labeled according to point on cycle, content remains the same.

All assessments referenced herein will be completed in the online E-Gov system with supporting documentation uploaded electronically.

All assessments occur on a three year cycle. See figure 1.

Monitoring Cycle Figure 1

**410. A-1 OS Pre On-Site Assessment –** Pre On-Site Assessments will be conducted prior to CSBG regular on-site monitoring. All supporting documentation will be reviewed by CSBG State Office staff for compliance. Any needed follow up will take place via the online system and if needed when on-site.

**420. A-2 OS Risk Determined Desk Audit –** TheRisk Assessment Desk Audit will occur the year following on-site monitoring. This audit will be reviewed for Met/Not Met responses from the previous year. The CSBG State Office Risk Assessment Desk Audit will inform whether individual supporting documents must be further reviewed for compliance.

**430. A-3 OS Desk Audit Assessment** – Desk Audits occur the year prior to any CSBG regular on-site monitoring. All supporting documentation will be reviewed by Commerce staff for compliance.

**500. UNMET STANDARDS**

“If a State finds an eligible entity is not meeting a standard or set of standards, the State’s response will depend on the circumstances. In cases where the eligible entity may be able to meet the standard in a reasonable time frame contingent on some targeted technical assistance, the State and entity may develop a technical assistance plan to target training and technical assistance resources and outline a time frame for the entity to meet the standards. If appropriate, in other situations, the State may initiate action in accordance with section 678C of the CSBG Act (42 U.S.C. §9915), including the establishment of a Quality Improvement Plan (QIP) with clear timelines and benchmarks for progress.”[[2]](#footnote-2)

**510. Technical Assistance Plan (TAP) -** IM 138 requires a TAP to be developed in situations where eligible entities or Community Action Agencies (CAA’s) are not meeting CSBG Organizational Standards. A TAP must include:

1. CAA name
2. CSBG State Office monitor’s name
3. Date form completed
4. The specific standard number
5. Performance improvement deliverable
6. Deliverable deadline
7. Person responsible at CAA
8. Review dates
9. Previous actions taken (if applicable)
10. Action status

**(A)** A TAP may be modified at the CAAs request and the CSBG State Office discretion at review dates.

**(B)** If a CAA fails to make a good faith effort to meet TAP deliverables within the approved timeframe, the CAA will be informed of a deficiency and considered noncompliant.

**520.** **Quality Improvement Plan (QIP)** – A QIP must be developed and implemented by a noncompliant agency within 60 days of being informed of a deficiency. The CSBG State Office shall approve or deny QIP responses from CAA’s within 30 days of receipt.[[3]](#footnote-3) A QIP must include the following:

1. CAA name
2. CSBG State Office monitor’s name
3. Date form completed
4. The specific standard number
5. Performance improvement deliverable
6. Deliverable deadline
7. Person responsible at CAA
8. Review dates
9. Previous actions taken (TAP, etc.)
10. Action status

**530. IM 116 Corrective Action, Termination, or Reduction in Funding –** If a CAA fails to come into compliance through a TAP followed by a QIP the State CSBG Office may pursue a reduction in or termination of funding. If the State pursues this it is required to follow IM 116’s direction. See link to IM 116 at footnote.[[4]](#footnote-4)

1. IM 138 http://www.udmo.com/CSBG\_Proposed\_Organizationa\_Performance\_Standards/IM\_138\_CSBG\_Organizational\_Standards\_FY\_2015\_(2).pdf [↑](#footnote-ref-1)
2. Information Memorandum 138, p5-6 [↑](#footnote-ref-2)
3. Community Opportunities, Accountability , and Training Act and Educational Services Act of 1998; Sec. 678C(4)(A) & (B) [↑](#footnote-ref-3)
4. <http://www.acf.hhs.gov/programs/ocs/resource/no-116-corrective-action-termination-or-reduction-of-funding> [↑](#footnote-ref-4)