

**STATE OF IOWA  
COMMUNITY SERVICES BLOCK GRANT PROGRAM (CSBG)**

**CSBG ORGANIZATIONAL STANDARDS  
FY 2020 AGENCY SELF-ASSESSMENT**

Version 5.1 (February 12, 2020)

AGENCY: UPPER DES MOINES OPPORTUNITY, INC.

DUE DATE OF SELF-ASSESSMENT: September 30, 2020

CSBG PROGRAM YEAR: 2020

SELF-ASSESSMENT CONDUCTED BY: KAYLA MCKINNEY

>

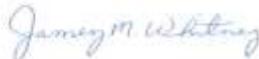
>

>

>

AGENCY CERTIFICATION:

Executive Director's Signature:



Type or Printed Name:

JAMEY M. WHITNEY

Date of Certification:

August 16, 2020

The Executive Director's signature and date signed indicates agency review and approval.

## AGENCY SELF-ASSESSMENT

The CSBG organizational standards provide a standard foundation of organizational capacity for all CSBG eligible entities across the United States. The federal Office of Community Services', CSBG Information Memorandum, Transmittal #138, provides direction to states and eligible entities regarding the establishment of the CSBG organizational standards.

The DCAA conducts CSBG program operations onsite reviews and CSBG organizational standards onsite assessments on a triennial cycle. In the years agencies are not scheduled for a CSBG onsite review and assessment, those agencies are required to complete and submit to the DCAA this CSBG Organizational Standards Agency Self-Assessment instrument. The DCAA, through a desk review process, will review each agency's self-assessment and verify that it was completed as directed. Once an agency's self-assessment is verified and accepted by the DCAA, the agency's annual CSBG organizational standards assessment will be complete.

Management staff within the agency, and any other personnel that the agency deems appropriate, are responsible for completing this CSBG Organizational Standards Agency Self-Assessment instrument. The agency's self-assessment requires a certification signature from the Executive Director and is due on or before September 30th of the CSBG program year. Completed agency self-assessments, including the Executive Director's electronic signature, should be e-mailed to Lorie Easter and Greg Pieper (e-mail addresses below).

The following are the elements of the agency self-assessment:

1. A page for each of the 58 CSBG organizational standards.
2. Guidance that frames the intent of the standard and provides information regarding the meaning of the standard, a glossary that clarifies specific language in the standard, DCAA defined time frame requirements (if applicable) for the standard, and the DCAA's preferred review method/approach to assessing an agency to the standard. The guidance and glossary information comes from the Community Action Partnership's CSBG organizational standards guidance tools.
3. MET and NOT MET check boxes that agencies will use to indicate whether their agency has MET or has NOT MET the standard.
4. An area for agencies to 1) explain and/or list agency documents and/or tools that confirm or demonstrate how their agency MET the standard (this should be a list of all documentation, tools, and/or guidance that the agency will have available for the DCAA to inspect at their agency's next scheduled CSBG onsite review and assessment), OR 2) provide the progress and the action steps their agency is taking to address a standard that their agency has NOT MET, and the estimated completion date and/or timeline their agency has established in order to meet that standard.

Agencies should be specific in their descriptions when listing agency documents and/or tools. At a minimum, a document/tool description should include the title, date, and if appropriate, the section the information is located. The following are a few examples of acceptable descriptions:

For board minutes:	March 30, 2019 board minutes (Executive Director's Report)
For by-laws:	September 30, 2018 Bylaws of ABC Community Action (Election of Directors)
For manuals:	October 1, 2018 ABC Community Action Personnel Policies and Procedures Manual (Records Retention and Destruction)
For invoices/statements:	Invoice from ZYX Law Firm (March 10, 2017)

DO NOT send in the documentation, tools, or guidance with the completed agency self-assessment.

If you have questions about the agency self-assessment, please contact Lorie Easter at (515) 281-3791, [Lorie.Easter@iowa.gov](mailto:Lorie.Easter@iowa.gov); or contact Greg Pieper at (515) 281-0474, [Greg.Pieper@iowa.gov](mailto:Greg.Pieper@iowa.gov).





CATEGORY 1: CONSUMER INPUT AND INVOLVEMENT

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

**Guidance**

- This reflects the need for any business to gather information regarding customer satisfaction. All agencies need to be aware of how satisfied their customers are of the services they receive.
- This standard does not imply that a specific satisfaction level needs to be achieved.
- Documentation is needed to demonstrate all three components in order to meet the standard: 1) collection, 2) analysis, and 3) reporting of data.
- A systematic approach may include, but not be limited to, surveys or other tools being distributed to customers annually, quarterly, or at the point of service (or on a schedule that works for the individual agency). Such collection may occur by program or agency-wide at a point in time.
- Analyzing the findings is typically completed by staff.
- Reporting to the governing board may be via written or verbal formats.

**Glossary**

- Systematic approach: Regular, consistent, on a time schedule. Not “ad hoc”.
- Collecting: Documenting information collected from others through tools such as case notes, electronic or written intake systems, online or written surveys, focus groups, sign-in sheets, and pre-posttests.
- Analyzing: Reviewing data or other information collected. This may include looking at trends, met/unmet expectations of performance, unexpected findings or results, survey results, etc. Staff and governing board may be involved reviewing and analyzing data.
- Reporting: Written or verbal presentations of data to a specific audience, i.e. governing board, staff, and community.

**DCAA Review**

- The agency has documentation that confirms their agency analyzed customer satisfaction data and information their agency collects.
- The agency's board minutes (or board meeting materials) confirm that the customer satisfaction data and information their agency collects is being reported to the governing board.

The Iowa Community Action Agencies Client Needs Assessment and Iowa Community Action Agencies Community (Stakeholders) Needs Assessment projects are systematic approaches for collecting customer satisfaction data and information.

**Agency Self-Assessment**

- MET**
- NOT MET**

If **MET**, explain and/or list agency documents and/or tools that confirm or demonstrate how your agency met this standard. If **NOT MET**, (1) provide the action steps your agency is taking to address the standard, and (2) include the estimated completion date and/or timeline your agency has established for meeting this standard.

UDMO submit clients needs assessment monthly through each of the twelve outreach centers. UDMO also utilizes a community (stakeholders) needs assessment. The Early Childhood Programs send out a parent survey for satisfaction results as well.
All materials are collected and the management team along with board members analyze the data in workgroups with follow up to the entire board on the analysis of data.
Customer Feedback met on February 6, 2019. Reported to the board on April 23, 2019.



CATEGORY 2: COMMUNITY ENGAGEMENT

STANDARD 2.2 The agency **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**

- If gathered during the community assessment, it would be documented in the community assessment. If done during “other times” this may be reflected in reports, data analysis, or staff/board meeting minutes.
- Engagement may include: key informant interviews, staff participation in other community groups/advisory bodies, community-wide processes, etc.
- Documentation is needed to demonstrate that all five sectors have been engaged: community-based organizations, faith-based organizations, private sector, public sector, and educational institutions. There is no requirement for how many individual organizations the agency must contact, or what data is collected.
- If one or more of these sectors are not present in the community or refuses to participate, then the agency needs to demonstrate the gap or a good faith effort to engage the sector(s).
- Demonstrating that you have “gathered” and “used” the information may be met in a variety of ways including, but not limited to: summarizing the data in the community assessment or its appendices; documentation of phone calls, surveys interviews, focus groups in agency files (hard copy or electronic); documentation in planning team minutes; summary reports on the data shared at board meetings or committee meetings; etc.

**Glossary**

- Utilizes information: Demonstrates that the governing board/staff have reviewed and considered data collected from sources as they make decisions. This may result in a change of activity or a conscious decision to maintain the status quo.
- Community: May include the geographic community the agency serves or a subset as determined by the agency.

**DCAA Review**

- The agency has documentation that confirms their agency collects assessment data and information from these 5 key sectors: community-based organizations, faith-based organizations, private sector organizations, public sector organizations, and educational institutions.
- The agency has documentation that confirms their agency utilizes the data and information collected from key sectors of the community.

The Iowa Community Action Agencies Community (Stakeholders) Needs Assessment includes needs assessment data and information from all 5 key sectors.

**Agency Self-Assessment**

- MET
- NOT MET

If **MET**, explain and/or list agency documents and/or tools that confirm or demonstrate how your agency met this standard. If **NOT MET**, (1) provide the action steps your agency is taking to address the standard, and (2) include the estimated completion date and/or timeline your agency has established for meeting this standard.

UDMO collects data from community-based organizations, faith-based organizations, private sector organization, public sector organizations, and educational institutions through the Community Needs Assessment.
Data from the assessment was analyzed through UDMO management team including board members on February 8, 2019.
The updated data will be analyzed August 2020 with UDMO management team.





CATEGORY 3: COMMUNITY ASSESSMENT

STANDARD 3.1 The agency conducted a community assessment and issued a report within the past 3 years.

**Guidance**

- This standard refers to what is sometimes called a Community Needs Assessment, and requires that agencies assess both needs and resources in the community. The requirement for this community assessment is outlined in the CSBG Act.
- This may require State CSBG Offices to adjust timeframes for required submission.
- The report may be electronic or print, and may be circulated as the agency deems appropriate. This can include: websites, mail/email distribution, social media, press conference, etc.
- It may be helpful for agencies to document the report release date such as April 2014 or December 2015.

**Glossary**

- Community assessment: A comprehensive assessment of community needs and resources as defined in the CSBG Act.
- Issues a report: The report may be in electronic or print formats, and may be circulated, as the agency deems appropriate. This can include inclusion on website, distributed via email and/or regular mail, through public releases or press conferences, posted via social media, etc.

**DCAA Defined Time Frame**

"Within the past 3 years" means:

- The issue date of the community assessment report is not older than 3 years and 2 months.
- The issue dates of the current and previous community assessment reports were within 3 years and 2 months of each other.

"Issued a report" and "issue date" are the day the community assessment report is formally accepted by the governing board.

**DCAA Review**

- The agency has a community assessment report.
- The agency's community assessment report was issued within the 3 year time frame requirement.

The following assessments and resources have comprehensive community assessment data and information (qualitative and quantitative): Iowa Community Action Agencies Client Needs Assessment, Iowa Community Action Agencies Community (Stakeholders) Needs Assessment, and the online community needs assessment tool provided by the Community Action Partnership. The following resources have data and information specific to poverty (gender, age, race, ethnicity, etc.): the online community needs assessment tool provided by the Community Action Partnership, and the U. S. Census Bureau.

**Agency Self-Assessment**

- MET
- NOT MET

If **MET**, explain and/or list agency documents and/or tools that confirm or demonstrate how your agency met this standard. If **NOT MET**, (1) provide the action steps your agency is taking to address the standard, and (2) include the estimated completion date and/or timeline your agency has established for meeting this standard.

UDMO's community assessment report was approved and issued May 21, 2019.



CATEGORY 3: COMMUNITY ASSESSMENT

STANDARD 3.3 The agency **collects and analyzes** both **qualitative and quantitative data** on its geographic service area(s) in the **community assessment**.

**Guidance**

- Documentation is needed to demonstrate that both types of data are collected in order to meet the standard:
  - Qualitative: this is opinions, observations, and other descriptive information obtained from the community through surveys, focus groups, interviews, community forums, etc.
  - Quantitative: this is numeric information, e.g. U. S. Census data, program counts, demographic information, and other statistical sources.
- Documentation on data analysis is also required in order to meet the standard.

**Glossary**

- Collects and analyzes: Once the data is collected and documented, the agency reviews the data and notes trends, findings, and other information either in the community assessment or its appendices.
- Qualitative data: Qualitative data is usually collected from interviews, surveys, observations, and opinions. Quality has an “L” and can be thought of as data with “letters.” This is data that is collected directly from the “subjects.” It is often considered as “primary” data. Who do you ask? What kind of “in depth” responses do they give you that helps you assess the situation (the needs, the resources and later the outcomes) with greater understanding?
- Quantitative data: Quantitative data is usually aggregated from other sources, so it is often considered “secondary” -- meaning that all of the information collected directly from subjects is gathered together and a total of the responses are produced. Quantity has an “N” and can be thought of a data with “numbers.” How much or how many? What is the scope?
- Community assessment: A comprehensive assessment of community needs and resources as defined in the CSBG Act.

**DCAA Review**

- The DCAA assessed and confirmed the agency MET Standard 3.1.
- The agency's community assessment report includes qualitative data for their agency's service area.
- The agency's community assessment report includes quantitative data for their agency's service area.
- The agency has documentation that confirms their agency analyzes the data and information in their community assessment.

All Category 3: Community Assessment standards are assessed on the same 3 year time frame requirement. Therefore, if an agency is not meeting Standard 3.1, it is not meeting Standards 3.2, 3.3, 3.4, and 3.5.

**Agency Self-Assessment**

- MET
- NOT MET

If **MET**, explain and/or list agency documents and/or tools that confirm or demonstrate how your agency met this standard. If **NOT MET**, (1) provide the action steps your agency is taking to address the standard, and (2) include the estimated completion date and/or timeline your agency has established for meeting this standard.

UDMO's qualitative data is collected from surveys and assessments. UDMO's quantative data is collected from each program's software. Futher data is collected through census databases and Kids Count.
The agency analyzed customer feedback on February 6, 2019; community stakeholders on February 8, 2019; agency capacity on February 12, 2019; and trend data on February 13, 2019.
Updated data will be collected and analyzed in August 2020.

CATEGORY 3: COMMUNITY ASSESSMENT

STANDARD 3.4 The **community assessment** includes **key findings** on the **causes and conditions of poverty** and the needs of the communities assessed.

**Guidance**

- There is no required way to reflect this information.
- The agency may choose to include a key findings section in the community assessment report and/or executive summary.
- Conditions of poverty may include items such as: numbers of homeless, free and reduced school lunch statistics, SNAP participation rates, etc.
- Causes of poverty may include items such as: lack of living wage jobs, lack of affordable housing, low education attainment rates, etc.

**Glossary**

- Community assessment: A comprehensive assessment of community needs and resources as defined in the CSBG Act.
- Key findings: A summary of the main issues identified in the community assessment on the causes and conditions of poverty. This may be found in an executive summary or in the full community assessment document.
- Causes and conditions of poverty: The community assessment should analyze the main sources of poverty and how it impacts the community. Conditions of poverty may include items such as: numbers of homeless, free and reduced school lunch statistics, SNAP participation rates, etc. Causes of poverty may include items such as: lack of living wage jobs, lack of affordable housing, low education attainment rates, etc.

**DCAA Review**

- The DCAA assessed and confirmed the agency MET Standard 3.1.
- The agency's community assessment report includes key findings on the causes of poverty for their agency's service area.
- The agency's community assessment report includes key findings on the conditions of poverty for their agency's service area.
- The agency's community assessment report includes key findings on the needs of the communities in their agency's service area.

All Category 3: Community Assessment standards are assessed on the same 3 year time frame requirement. Therefore, if an agency is not meeting Standard 3.1, it is not meeting Standards 3.2, 3.3, 3.4, and 3.5.

Low-income individual, family, and community needs are conditions of poverty. Why those conditions of poverty exist are the causes.

**Agency Self-Assessment**

- MET
- NOT MET

If **MET**, explain and/or list agency documents and/or tools that confirm or demonstrate how your agency met this standard. If **NOT MET**, (1) provide the action steps your agency is taking to address the standard, and (2) include the estimated completion date and/or timeline your agency has established for meeting this standard.

UDMO's community assessment addresses key findings on page three with detailed data on the following pages.
The assessment was approved by the board on May 21, 2019.







CATEGORY 4: ORGANIZATIONAL LEADERSHIP

STANDARD 4.3 The agency's **Community Action plan** and **strategic plan** document the **continuous use of the full Results Oriented Management and Accountability (ROMA) cycle** or **comparable system** (assessment, planning, implementation, achievement of results, and evaluation). In addition, the agency documents having used the services of a ROMA-certified trainer (or equivalent) to assist in implementation.

**Guidance**

- There is no requirement to have a certified ROMA trainer on staff at the agency.
- While a ROMA trainer (or equivalent) must be involved, it is up to the agency to determine the manner in which this individual is utilized. Examples include: involving the trainer in strategic planning meetings, consultation on implementation, etc.
- This includes involving a ROMA trainer (or equivalent) in the course of ROMA cycle activities such as the community assessment, strategic planning data and analysis, and does not need to be a separate activity.

**Glossary**

- Community Action plan/CSBG work plan: The written document summarizing the work of the agency over the course of a contract year that is provided to the State CSBG Office.
- Strategic plan: ~~An agency-wide document, approved by the governing board, that includes the mission and vision of an agency along with goals and strategies it hopes to achieve over a set period of time, often 3-5 years. There is no singular strategic plan methodology or process an agency must use.~~ [THE DCAA WILL USE THE DEFINITION FOR "AGENCY-WIDE" STRATEGIC PLAN" PROVIDED IN THE CATEGORY 6 GLOSSARY.]
- Continuous use of the full ROMA cycle: Written documentation that the agency participates in all components of the ROMA cycle: conducted a community needs assessment, conducted planning based on the assessment, implemented services in alignment with the plan, data was collected documenting services provided and outcomes achieved, and analyzed the data provided.
- Comparable system: The CSBG Act allows for a comparable system to ROMA for performance management purposes; however, no states currently utilize a comparable system. All states currently use ROMA as their performance management system. The term "comparable system" is used to comply with current statute.

**DCAA Review**

- The DCAA confirmed (by desk audit) that the agency's CSBG Community Action Plan and Application was submitted (as directed) and accepted.
- The agency's strategic plan documents the continuous use of the full ROMA cycle OR the agency's strategic planning documentation, with their strategic plan, documents the continuous use of the full ROMA cycle.
- The agency has documentation that confirms their agency involved a ROMA-certified trainer or ROMA-certified implementer in the implementation of their strategic plan.

The DCAA requires agencies to submit an annual CSBG Community Action Plan and Application that follows the CSBG ROMA cycle of assessment, planning, implementation, achievement of results, and evaluation. The CSBG application also requires agencies to involve a ROMA-certified trainer or ROMA-certified implementer in the implementation of the application.

Implement: to carry into effect; fulfill; accomplish

**Agency Self-Assessment**

- MET
- NOT MET

If **MET**, explain and/or list agency documents and/or tools that confirm or demonstrate how your agency met this standard. If **NOT MET**, (1) provide the action steps your agency is taking to address the standard, and (2) include the estimated completion date and/or timeline your agency has established for meeting this standard.

UDMO's Director of Program Development, Compliance and Reporting is a Certified ROMA Implementer and was involved in the strategic planning process.
UDMO also had assistance from Tiffany Keimig, Master NCRT and Director of Training and Technical Assistance, for the strategic planning process to ensure full ROMA cycle was involved with the process.





CATEGORY 4: ORGANIZATIONAL LEADERSHIP

STANDARD 4.6 An **agency-wide, comprehensive risk assessment** has been completed within the past 2 years and reported to the governing board.

**Guidance**

- Reporting to the governing board would most likely occur at a regular board meeting and should be reflected in the board minutes.
- It is important to note that to meet the standard the agency only has to complete the risk assessment and report to the governing board. The results of the risk assessment are internal to the agency and therefore private.
- There is no one mandatory tool for completing this task. This comprehensive assessment is more than the financial risk assessment contained in the audit and may also include such areas as insurance, transportation, facilities, staffing, property, etc. To meet the standard, the tool(s) used need to address agency-wide functions, not only individual program requirements.

**Glossary**

- Agency-wide risk assessment: This type of assessment goes beyond just fiscal, HR, transportation, etc., and is meant to capture a wide range of agency issues. Agencies can use a single tool to address this requirement, or use multiple tools in individual areas and work to combine/analyze the results comprehensively from an agency perspective.
- Comprehensive: The risk assessment should cover all pertinent aspects of the agency's operations, inclusive of topics such as governance, financial management, contracts and procurement, human resources, communication, service delivery, protecting vulnerable populations, transportation, and property.

**DCAA Defined Time Frame**

"Within the past 2 years" means:

- The date of the completed risk assessment is not older than 2 years and 2 months.
- The dates of the current and previous completed risk assessments were within 2 years and 2 months of each other.

**DCAA Review**

- The agency has documentation that confirms their agency completed a comprehensive agency-wide risk assessment within the 2 year time frame requirement.
- The agency's board minutes confirm that the agency reported to the governing board that an agency-wide risk assessment was completed by the agency.

**Agency Self-Assessment**

- MET
- NOT MET

If **MET**, explain and/or list agency documents and/or tools that confirm or demonstrate how your agency met this standard. If **NOT MET**, (1) provide the action steps your agency is taking to address the standard, and (2) include the estimated completion date and/or timeline your agency has established for meeting this standard.

UDMO's Risk Assessment was approved by board August 2020.

CATEGORY 5: BOARD GOVERNANCE

STANDARD 5.1 The agency's governing board is structured in compliance with the CSBG Act: 1) At least one third **democratically-selected representatives of the low-income community**; 2) One-third local elected officials (or their representatives); and 3) The remaining membership from major groups and interests in the **community**.

**Guidance**

- This standard is based on the CSBG Act and addresses the composition structure of the governing board only.
- See the CSBG Act and Information Memorandum 82 for comprehensive guidance.

**Glossary**

- Democratic selection process: The CSBG Act requires that the low-income sector of the tri-partite governing board represents the low-income community. Each agency must have a written process defined that provides for how the community selects its representative. Examples of democratic selection procedures for low-income sector directors include: (1) election by ballots cast by the agency's clients and/or by other low-income people in the agency's service area (ballots could be cast, for example, at designated polling place(s) in the service area, at the agency's offices, or via the Internet); (2) vote at a community meeting of low-income people (the meeting could serve not simply to select low-income sector directors but also to address a topic of interest to low-income people); and (3) designation of one or more community organization(s) composed predominantly of and representing low-income people in the service area (e.g. a Head Start Policy Council, low-income housing tenant association, or the governing board of a community health center) to designate representative(s) to serve on the agency's governing board.
- Representatives of the low-income community: People selected by those living in a low-income community to represent them on the agency's governing board.
- Community: May include the geographic community the agency serves or a subset as determined by the agency.

**DCAA Review**

- The agency has documentation that confirms the governing board is structured in compliance with the CSBG Act.

**Agency Self-Assessment**

- MET
- NOT MET

If **MET**, explain and/or list agency documents and/or tools that confirm or demonstrate how your agency met this standard. If **NOT MET**, (1) provide the action steps your agency is taking to address the standard, and (2) include the estimated completion date and/or timeline your agency has established for meeting this standard.

In UDMO's by-laws, it states the board of directors shall conform to the tripartite requirements for community action agencies of at least 1/3 client representation, 1/3 public representation and the remainder of representatives from the private sector. It also states the selection process under Article 1, Section 2, Letter B.

CATEGORY 5: BOARD GOVERNANCE

STANDARD 5.2 The agency's governing board has written **procedures** that document a **democratic selection process** for low-income board members adequate to assure that they are **representative of the low-income community**.

**Guidance**

- See the CSBG Act and Information Memorandum 82 for comprehensive guidance.
- See definitions list for additional clarity on democratic selection – please note that the CSBG Act requires a democratic *selection* process, not *election* process.

**Glossary**

- Procedures: How a policy will be carried out. Procedures delineate the normal method of operating. They are the protocols for implementation. Procedures carry out policies.
- Democratic selection process: The CSBG Act requires that the low-income sector of the tri-partite governing board represents the low-income community. Each agency must have a written process defined that provides for how the community selects its representative. Examples of democratic selection procedures for low-income sector directors include: (1) election by ballots cast by the agency's clients and/or by other low-income people in the agency's service area (ballots could be cast, for example, at designated polling place(s) in the service area, at the agency's offices, or via the Internet); (2) vote at a community meeting of low-income people (the meeting could serve not simply to select low-income sector directors but also to address a topic of interest to low-income people); (3) designation of one or more community organization(s) composed predominantly of and representing low-income people in the service area (e.g. a Head Start Policy Council, low-income housing tenant association, or the governing board of a community health center) to designate representative(s) to serve on the agency's governing board.
- Representatives of the low-income community: People selected by those living in a low-income community to represent them on the agency's governing board.

**DCAA Review**

- The agency's governing board has written procedures for selecting low-income (sector) board representatives.
- The agency's governing board's written procedures for selecting low-income (sector) board representatives includes a defined democratic selection process.
- The agency's governing board's written procedures for selecting low-income (sector) board representatives assures that the representatives selected represent the low-income community.

**Agency Self-Assessment**

- MET
- NOT MET

If **MET**, explain and/or list agency documents and/or tools that confirm or demonstrate how your agency met this standard. If **NOT MET**, (1) provide the action steps your agency is taking to address the standard, and (2) include the estimated completion date and/or timeline your agency has established for meeting this standard.

UDMO's bylaws explain the democratic selection process under Article 1, Section 2, Letter B.











CATEGORY 5: BOARD GOVERNANCE

STANDARD 5.8 Governing board members have been provided with **training** on their duties and responsibilities within the past 2 years.

**Guidance**

- There is no specific curricula requirement or training methodology required.
- Training may be delivered at board meetings, special sessions, at conferences, or through electronic media, or other modalities as determined by the governing board.
- The agency needs to have documentation that the training occurred (including content), as well as documentation that each board member has been provided with training opportunities.

**Glossary**

- Board training: Training provided to board members either in person or other methodology as determined by the governing board. Sessions may be done as part of a board meeting or as a separate event. Some agencies conduct small trainings at each meeting to provide ongoing learning. Content may vary by training and should be conducted by someone with expertise in the topic being addressed.

**DCAA Defined Time Frame**

"Within the past 2 years" means:

- The date of the training is not older than 2 years and 2 months.
- The dates of the current and previous trainings were within 2 years and 2 months of each other.

**DCAA Review**

- The agency has documentation that confirms that board members were provided a training opportunity on their board member fiduciary duties within the 2 year time frame requirement.
- The agency has documentation that confirms that board members were provided a training opportunity on their board member responsibilities within the 2 year time frame requirement.

The documentation must include the content of the training and confirm that the training occurred.

Fiduciary duties: duty of care, duty of loyalty, and duty of obedience

**Agency Self-Assessment**

- MET
- NOT MET

If **MET**, explain and/or list agency documents and/or tools that confirm or demonstrate how your agency met this standard. If **NOT MET**, (1) provide the action steps your agency is taking to address the standard, and (2) include the estimated completion date and/or timeline your agency has established for meeting this standard.

The board was to receive training on Roles & Responsibilities during the November 26, 2019 board meeting but due to it being held via Teleconference, the board members watched the training independently.
See November 26, 2019 board minutes.













CATEGORY 7: HUMAN RESOURCE MANAGEMENT

STANDARD 7.1 The agency has written personnel policies that have been reviewed by an attorney and approved by the governing board within the past 5 years.

**Guidance**

- There is no requirement that the attorney be paid, but should be a currently practicing attorney.
- Final reviews by attorneys on the governing board or on staff are not recommended, but are not disallowed.
- Note that the review needs to have occurred at some point during in the past 5 calendar years.
- Agencies may work with human resource professionals (such as SHRM certified staff) and others (attorneys on staff or on the governing board) prior to the legal review to minimize cost.
- Note that not all attorneys are familiar with human resource issues and agencies are encouraged to use attorneys with this type of expertise.

**Glossary**

- Policy: An approved system of what is going to be done. A *procedure* is how the policy will be carried out. Policies are guidelines that regulate organizational affairs. They direct the conduct of people and the activities of the systems. Policies explain how the agency intends to operate.
- Reviewed by an attorney: A licensed attorney has reviewed and provided the governing board with assurances the document complies with applicable laws. There is no requirement that the attorney must be paid; they may be pro bono. While recommended that the attorney is not a board member, there is no prohibition of this in the standard. A written report from the attorney would document such a review.
- Approved by governing board: Reviewed at either a board committee or full board. If reviewed at the committee level, the committee would recommend approval to the governing board and the full board votes to approve and the vote is recorded in the board minutes.

**DCAA Defined Time Frame**

"Within the past 5 years" means:

- The date of the governing board approval is not older than 5 years and 2 months.
- The dates of the current and previous governing board approvals were within 5 years and 2 months of each other.

**DCAA Review**

- The agency has written personnel policies.
- The agency has an invoice/letter/statement or other documentation confirming that an attorney reviewed the personnel policies within the 5 year time frame requirement.
- The agency's board minutes confirm that the governing board approved the personnel policies within the 5 year time frame requirement.

**Agency Self-Assessment**

- MET
- NOT MET

If **MET**, explain and/or list agency documents and/or tools that confirm or demonstrate how your agency met this standard. If **NOT MET**, (1) provide the action steps your agency is taking to address the standard, and (2) include the estimated completion date and/or timeline your agency has established for meeting this standard.

Barry Sacket Law office reviewed personnel policies with board approval October 24, 2017.





CATEGORY 7: HUMAN RESOURCE MANAGEMENT

STANDARD 7.4 The governing board conducts a **performance appraisal** of the CEO/Executive Director **within each calendar year**.

**Guidance**

- There is no specific appraisal tool required to be used.
- This may be accomplished through a board committee or the full board; however, the governing board should receive and accept via board vote the appraisal, with the acceptance reflected in the board minutes.
- The approval of the performance appraisal is often done in conjunction with setting the CEO/Executive Director compensation.

**Glossary**

- Performance appraisal: An annual opportunity to formally review an employee’s performance in their position. A written tool, as determined by the agency, is to be used.
- Within each calendar year: ~~This is meant to convey that an activity would happen once each year, e.g. 2014, 2015, 2016. It is hoped that activities that have this notation would happen annually; however, it may be that an activity could fall in February 2015 and December 2016 and this would be compliant with “each calendar year”.~~ [THE DCAA WILL ASSESS THE AGENCY ACCORDING TO ITS "WITHIN EACH CALENDAR YEAR" TIME FRAME DEFINITION.]

**DCAA Defined Time Frame**

"Within each calendar year" means:

- The date of the performance appraisal is not older than 1 year and 2 months.
- The dates of the current and previous performance appraisals were within 1 year and 2 months of each other.

**DCAA Review**

- The agency's board minutes (or appropriate board committee minutes) confirm that the governing board (or appropriate board committee) conducted an annual performance appraisal of the CEO/Executive Director.
- The agency's board minutes confirm that the governing board voted to accept the annual performance appraisal of the CEO/Executive Director.
- The annual performance appraisal of the CEO/Executive Director was conducted within the calendar year time frame requirement.

**Agency Self-Assessment**

- MET
- NOT MET

If **MET**, explain and/or list agency documents and/or tools that confirm or demonstrate how your agency met this standard. If **NOT MET**, (1) provide the action steps your agency is taking to address the standard, and (2) include the estimated completion date and/or timeline your agency has established for meeting this standard.

A performance evaluation was conducted before February 2020. The governing board discussed the evaluation on February 25, 2020.

CATEGORY 7: HUMAN RESOURCE MANAGEMENT

STANDARD 7.5 The governing board reviews and approves CEO/Executive Director compensation within every calendar year.

**Guidance**

- The full board should review and approve the total compensation at a regular board meeting and have it reflected in the board minutes.
- This includes: salary, fringe, health and dental insurance, expense/travel account, vehicle, etc.
- As a point of reference, the IRS Form 990 asks: Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? If so, describe the process.
- The compensation review and approval often happens in conjunction with the CEO/Executive Director performance appraisal.

**Glossary**

- Approved by governing board: Reviewed at either a board committee or full board. If reviewed at the committee level, the committee would recommend approval to the governing board and the full board votes to approve and the vote is recorded in the board minutes.
- CEO/Executive Director compensation: The salary, fringe, health/dental, retirement, vehicle, travel/expense account, raise, incentive compensation, deferred compensation, and any other item the CEO/Executive Director receives. This full package is shared with the full board each calendar year.
- Within every calendar year: ~~This is meant to convey that an activity would happen once each year, e.g. 2014, 2015, 2016. It is hoped that activities that have this notation would happen annually; however, it may be that an activity could fall in February 2015 and December 2016 and this would be compliant with "each calendar year".~~ [THE DCAA WILL ASSESS THE AGENCY ACCORDING TO ITS "WITHIN EVERY CALENDAR YEAR" TIME FRAME DEFINITION.]

**DCAA Defined Time Frame**

"Within every calendar year" means:

- The date of the governing board approval is not older than 1 year and 2 months.
- The dates of the current and previous governing board approvals were within 1 year and 2 months of each other.

**DCAA Review**

- The agency's board minutes (or appropriate board committee minutes) confirm that the governing board (or appropriate board committee) conducted an annual CEO/Executive Director compensation review.
- The agency's board minutes confirm that the governing board approved the annual CEO/Executive Director compensation.
- The annual compensation review of the CEO/Executive Director was conducted within the calendar year time frame requirement.

**Agency Self-Assessment**

- MET
- NOT MET

If **MET**, explain and/or list agency documents and/or tools that confirm or demonstrate how your agency met this standard. If **NOT MET**, (1) provide the action steps your agency is taking to address the standard, and (2) include the estimated completion date and/or timeline your agency has established for meeting this standard.

Compensation for the Executive Director was done during the annual evaluation and completed on February 25, 2020.







































CATEGORY 9: DATA AND ANALYSIS

STANDARD 9.3 The agency has presented to the governing board for review or action, at least within the past 12 months, an analysis of the agency’s outcomes and any **operational or strategic program adjustments and improvements** identified as necessary.

**Guidance**

- This standard would be met through governing board or staff discussions as long as the analysis and discussions are documented.
- It is important to note that an agency is likely to have multiple programs with varying program years. This standard addresses an annual review of agency outcomes. Agencies are likely to make operations and strategic program adjustments throughout the year, making a single point in time analysis less effective than ongoing performance management.
- Agencies can meet this standard by having: an annual governing board discussion of agency outcomes, multiple conversations over the course of the year, or other process the agency deems appropriate as long as these discussions are reflected in the minutes, with any operational or program adjustments or improvements being noted.
- Agencies are not required to make adjustments in order to meet the standard, only to have conducted an analysis.

**Glossary**

- Operational or strategic program adjustments and improvements: Outcomes analysis may lead to operational or strategic program changes. Such changes may include but not limited to change in expected participation rates, service locations, project partners, service delivery strategies, performance measures, etc.

**DCAA Defined Time Frame**

"Within the past 12 months" means:

- The date of the presentation is not older than 1 year and 2 months.
- The dates of the current and previous presentations were within 1 year and 2 months of each other.

**DCAA Review**

- The DCAA assessed and confirmed the agency MET Standard 4.4.
- The DCAA assessed and confirmed the agency MET Standard 6.5.
- If the agency made any adjustments to the goals outlined in their strategic plan, the agency's board minutes confirm that the agency reviewed the adjustments with the governing board.

**Agency Self-Assessment**

- MET
- NOT MET

If **MET**, explain and/or list agency documents and/or tools that confirm or demonstrate how your agency met this standard. If **NOT MET**, (1) provide the action steps your agency is taking to address the standard, and (2) include the estimated completion date and/or timeline your agency has established for meeting this standard.

UDMO's Director of Program Development, Compliance and reporting presents to the Board of Directors as needed on Strategic Planning updates. UDMO's Executive Director gives montly operational updates and changes to programming. HR Director gives updates on all operational and personnel policies when changes are made.

