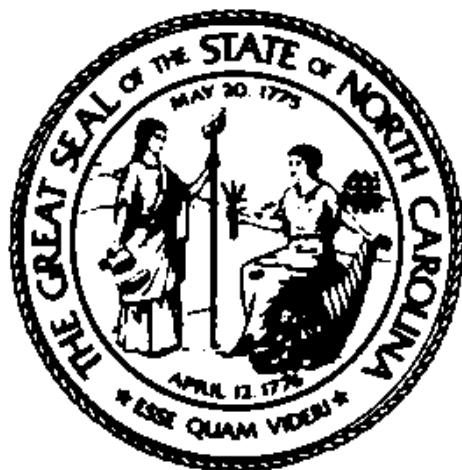**NORTH CAROLINA DEPARTMENT OF
HEALTH AND HUMAN SERVICES
NORTH CAROLINA DIVISION OF SOCIAL SERVICES**



Subrecipient Monitoring Plan
Contracts

State Fiscal Year 15-16
July 1, 2015-June 30, 2016

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**NC DHHS DIVISION OF SOCIAL SERVICES
SUBRECIPIENT MONITORING PLAN**

## I. INTRODUCTION

## PURPOSE

This document describes the protocol the North Carolina Division of Social Services (NC DSS) will utilize in carrying out its subrecipient monitoring responsibilities. This plan serves as the manual for implementing the Division's subrecipient monitoring policy. This plan is applicable to all units and individuals within NC DSS that have a role in subrecipient monitoring as identified in this plan.

## SUBRECIPIENT MONITORING

The Federal Office of Management and Budget (OMB) 2 CFR Part 200, Subpart F- Audit Requirements (http://www.whitehouse.gov/omb/circulars_index-slg/) requires pass-through entities to monitor their subrecipients' use of federal funds. This is to ensure reasonable compliance with federal program laws and regulations and that provisions of contracts or grants and performance goals are achieved. Pass-through entities must ensure that any subrecipients expending $500,000 or more in federal grants or awards during a given fiscal year have a single or program-specific audit performed in accordance with 2 CFR Part 200, Subpart F- Audit Requirements. In addition, N.C. G.S. § 143-6.1 requires the category of financial assistance contracts funded with State dollars and other dollars that flow through the appropriation process to be monitored as subrecipients.

Subrecipient monitoring promotes accountability and continuous quality improvement. This document incorporates monitoring activities undertaken by the various sections and teams within the Division to the extent that those activities maintain the integrity of the monitoring requirements outlined in this plan. The Division's subrecipient contract monitoring activities are coordinated through the DSS Program Compliance Office.

Ongoing monitoring of Federal and State funds determines if the awards are used for authorized purposes in compliance with laws, rules, regulations, and grant provisions. Deficiencies identified are shared with agency management and designated Division staff for corrective measures and ongoing training.

In order to carry out its mandate to provide basic support to assist individuals to become self-supportive and self-reliant in a manner consistent with the rights, and responsibilities of all North Carolina citizens (G. S. § *108A-*) NC DSS provides financial assistance funding to local county governments, non-profit agencies, universities, and other non-governmental entities utilizing federal grants and funds appropriated by the General Assembly of North Carolina. Those services provided on behalf of NC DSS are designed to enable individuals and families to become self-supportive, self-reliant and to achieve well-being through ensuring safety and permanence.

This plan outlines how NC DSS, as a pass-through entity, will comply with its responsibilities under OMB 2 CFR Part 200, Subpart F – Audit Requirements and G.S. § 143-6.2 (Reports on Use of State Funds by Non-State Entities) to monitor the disbursement and use of federal and state dollars for the intended purpose per the compliance requirements of each funding source and the stipulations of the contract or performance

agreement with the subrecipient. These requirements are consistent with the expectations of federal agencies and states addressed in the Federal Financial Assistance Management Improvement Act.

## MONITORING PLAN REQUIREMENTS

Each Section shall develop and maintain a monitoring plan for all financial assistance subrecipients in accordance with DHHS Policy at:

http://info.dhhs.state.nc.us/olm/manuals/dhs/pol-40/man/monitoring_of_programs1.htm

A list of subrecipients and program funding is found in the DHHS Open Window database at

http://dhhsopenwindow.nc.gov/index.aspx

Options can be selected by Services or by Contracts.

## DESCRIPTION OF SUBRECIPIENTS AND PROGRAMS/SERVICES FUNDED

NC DSS receives funds from several federal and state programs and, in turn, issues funding through contracts with a many of public, non-profit, for profit, and private agencies and organizations. These agencies provide a variety of services for NC DSS ranging from direct services and support to advocacy and training. Financial assistance awards support such activities as crisis/emergency services and services to specific target populations. These services are funded by a variety of federal grants and state appropriations. The Social Services Block Grant (SSBG), Temporary Assistance to Needy Families (TANF) Block Grant, Low-Income Heating and Energy Program Block Grant, Community Services Block Grant, IV-E, CBCAP, IV-B and Food and Nutrition Services – USDA (FNS) are significant sources of funding for NC DSS services.

## PROGRAM AREAS AND SERVICES TO BE MONITORED

| Area | Federal/State Compliance Number |
|---|---|
| Social Service Block Grant for Children: CPS, Foster Care, Adoption, and Links | 93.667-1<br>93-667-13 |
| IV-E Foster Care | 93-658 |
| IV-E Adoption Assistance | 93-659 |
| Work First | 93.558 |
| State Maternity Fund | 93.645-1 |
| At Risk Case Management | N/A |
| Child Support | 93.563 |
| Family Violence Prevention | 93.671 |
| Food and Nutrition Services | 10.561 |
| Low Income Home Energy Assistance Program-LIEAP | 93.568-2 |
| Low Income Home Energy Assistance Program-CIP | 93.568-3 |
| Refugee Assistance | 93.566-2 |
| Children's Trust Fund | N/A |
| Community-Based Child Abuse Prevention | 93.590 |
| Intensive Family Preservation Services (IFPS): | 93.556 |
| Family Support Program /FRC | 93.556 |
| Reunification Services | 93.556 |
| Adoption Promotion and Post-Adoption Support | 93.558<br>93.556<br>93.603 |
| Children's Advocacy Centers | N/A |
| CAN/CPS Child Welfare | 93.669 |
| CSBG | 93.569 |

Compliance Supplements and other audit resources for monitoring the above programs can be found at the following web page:
https://www.nctreasurer.com/slg/Pages/Compliance-Supplements-and-Single-Audit-Links.aspx

# CORE AREAS TO BE MONITORED*

The OMB 2 CFR Part 200, Subpart F – Audit Requirements specifies fourteen (14) areas of compliance monitoring. North Carolina has an additional requirement that requires policies prohibiting conflict of interest be reviewed for non-profit subrecipients. Depending on the program and type of funding, all 14 core areas may **not** be applicable to the funding source.

The core areas of compliance monitoring involve fiscal monitoring (i.e., review of financial statements and audit findings and internal controls) and program monitoring (i.e., determination of whether the eligibility criteria were met or review of the scope of work to see if the objectives of the contract have been met). Following is a brief description of each of the core areas:*

CC: *Crosscutting Requirements:* These are supplements written by state agencies to detail in one location the common compliance requirements that span across several programs.

A/1: *Activities Allowed or Unallowed*: This requirement refers to specific activities identified in the grant agreement, contract, allocation, letters, policy manuals and state or federal regulations that are allowed or that may be unallowed. The purpose of this requirement is to provide reasonable assurance that State and Federal funds are used for the intended purposes.

B/2: *Allowable Costs/Cost Principles*: This requirement seeks to assure that the costs paid to the contractor are reasonable and necessary for the operation and administration of the program and that the subrecipient uses an acceptable method of allocating costs, including indirect costs.

C/3: *Cash Management*: This requirement is only applicable if the contractor receives an advance of funds from NC DSS of more than 60 days from when the funds would ordinarily be disbursed. In accordance with the DHHS Cash Management Policy, the Controller's Office is responsible for reviewing the cash needs of subrecipients that receive advances every three months to determine whether or not the advance represents more than a 60-day cash requirement.

E/5: *Eligibility*: This requirement ensures that only those individuals and organizations that meet the eligibility requirements for receiving services or financial assistance from the program participate in the program. The eligibility requirement for an individual diagnosis, risk factors, medical necessity criteria, income, etc. Similarly, an organization may qualify to participate in a program based on the extent to which the type of program and the mission of the organization are consistent with the requirements of the funding source.

F/6: *Equipment and Real Property Management*: This requirement refers to tangible property that has a useful life of more than one year and costs more than $5,000. Such equipment may only be purchased per the conditions of the approved contract or grant agreement.

G/7: *Matching, Level of Effort, Earmarking*: These requirements are specifically addressed in the grant documents, allocation letters, contracts and state or federal regulations.

- *Matching* refers to the specific amount or percentage of funds the subrecipient is required to match the state or federal grant. The matching portion must be verifiable in the accounting records, incurred during the period of the award, must not be used to meet the match of another program, allowable under cost principles and derived from non-federal or non-state funds unless specifically authorized.
- *Level of Effort* refers to the specific level of service that must be provided (e.g., the number of clients the subrecipient must serve) or a specified level of service (e.g., maintenance of effort) or the requirement that federal or state funds may only be used to supplement the non-state or non-federal funding of the service.
- *Earmarking* refers to the requirement that an amount or percentage of a program's funding must be used for specific activities.

*H/8:  Period of Performance*:  This requirement refers to the time period authorized for state and federal funds to be expended.  State funds are authorized for the fiscal year (July 1 – June 30); however, NC DSS may allow a subrecipient to carry forward unexpended funds into the next fiscal year.  Most federal funds allow additional time after the end of the grant period for obligations incurred during the grant period to be paid.

*I/9:  Procurement and Suspension and Debarment*:  This requirement assures that the subrecipient follows the state and federal policies and procedures for procurement, that the subrecipient has not been suspended or disbarred from receiving funding from the state or federal government, and that the subrecipient does not use federal funds to purchase goods or services costing more than $100,000 from a vendor that has been disbarred by the federal or state government..

*J/10:  Program Income*:  The purpose of this requirement is to assure that program income is being used appropriately.  This requirement refers to the gross income received by the subrecipient on activities, services or goods purchased with state or federal funds.  Program income may be used to provide matching funds when approved by the state or federal agency.

*L/12:  Reporting*:  Contract administrators are required to monitor the financial, performance and special reporting of the subrecipient in order to provide assurance that funds are being managed efficiently and effectively to accomplish the objectives of the program as specified in the compliance supplement, applicable laws and regulations, and contract or grant agreements.

*M/13:  Subrecipient Monitoring*:  Program Monitors, Contract Administrators, and Program Coordinators are required to provide assurance that any NC DSS subrecipient that subcontracts with another agency monitors the agency with which the subrecipient subcontracts as specified in the compliance supplement for the funding source.

*N/14:  Special Tests and Provisions*:  Program Monitors, Contract Administrators, and Program coordinators must provide assurance that all special requirements found in the laws, regulations, or the provisions of the contract or grant agreement are monitored appropriately.  Such special tests and provisions may relate to fiscal and/or programmatic requirements or may include actions that were agreed to as part of the audit resolution of prior audit findings or in corrective action plans identified as a result of monitoring reviews.

*15: Conflict of Interest*: This requirement applies to any private, non-profit entity eligible to receive state funds, either by General Assembly appropriation, or by grant, loan or other allocation from a State agency (S.L. 1993-321, Section 16 of the Appropriations Act). An agency official is required to sign a notarized copy of the policy before a contract is executed. Copies of the organization's attestation to the Conflict of Interest Policy is kept by the Program Compliance section in the organization's file. The Division's Conflict of Interest Policy for Private Not-for Profit Agencies can be found at https://www2.ncdhhs.gov/dss/county/ .

The applicable compliance requirements for a funding source are outlined in the compliance supplement for the specific federal or state program. In cases where a program is funded by multiple funding sources, the funding source with the most stringent requirements would be the criteria used to monitor the program. The compliance supplement identifies those core areas which at a minimum must be monitored. Monitors are not precluded from looking at additional areas as long as the minimum core areas are also examined. (See Attachment B for an overview of compliance requirements for each program for which NC DSS is the pass-through entity). Monitoring the compliance requirements helps to fulfill part of the intent of the Federal Financial Assistance Management Improvement Act of 1999 (i.e., to improve the effectiveness and performance of federal financial assistance programs).

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***Note: With the exception of the Davis-Bacon Act (D) the Conflict of Interest (15) and No Overdue Taxes requirement, the federal and state requirements are the same. The alphabetic code denotes how the federal requirement is referenced. The numeric code is the corresponding state code for that core area.*

# ROLES AND RESPONSIBILITIES

DSS Program Compliance Office has been assigned the lead responsibility for coordinating subrecipient contract monitoring activities within NC DSS. In order to maintain objectivity in carrying out its responsibilities, the duties of Division Contract Fiscal Monitor is distinctly separate from other NC DSS staff who have direct responsibility for program and fiscal management, program development, technical assistance, or any other functions directly related to program administration.

The role of subrecipient contract monitoring is to provide an objective process for assurance of compliance with the requirements of subrecipient monitoring per OMB 2 CFR Part 200, Subpart F – Audit Requirements and the DHHS Subrecipient Monitoring protocols. It is the role of subrecipient contract monitoring to assure that all programs/contracts which are determined to require subrecipient monitoring are meeting the requirements set within the applicable compliance supplements or contracts.

## DUTIES OF DSS Program Compliance Office

The Division Program Compliance Office is responsible for providing reasonable assurance to the Executive Management Team (EMT) of NC DSS and, by virtue of its assignment of the responsibility, to the Department that a subrecipient is in compliance with the state and federal requirements according to the specifications of the type of financial assistance received. This includes making a determination as to whether there is sufficient internal control over financial management and accounting systems to account for program funds in accordance with state and federal requirements. Specifically, the DSS Program Compliance Office is responsible for:

1. Developing, implementing, and updating the Division's subrecipient monitoring plan.
2. Disseminating single audit findings to all sections and monitors.
3. Identifying what components need to be monitored according to the applicable compliance requirements.
4. Identifying NC DSS team roles and responsibilities for monitoring.
5. Developing and designing appropriate monitoring tools, instruments, protocols and worksheets, in collaboration with the Lead Monitors and other DHHS Subrecipient Monitoring Coordinators.
6. Providing training to the Contract Administrators, Program Compliance Representatives, and Program Coordinators on the methods and strategies for program and fiscal monitoring, including on-site monitoring and the reporting requirements of monitors.
7. Reviewing the progress of monitoring activities to assure that they are being carried out in a manner consistent with the plan.
8. Providing ongoing feedback and support to program compliance representatives in carrying out their responsibilities.
9. Maintaining and updating a current list of DSS staff performing ongoing monitoring activities carried out within the Division.
10. Maintaining a listing of locations where the source documents for specific monitoring activities are maintained.
11. Evaluating the impact of subrecipient contract activities on NC DSS' ability to comply with applicable Federal and State requirements and communicating any concerns to management.

Implementation of the NC DSS Subrecipient Monitoring Plan involves the participation of most sections within NC DSS.

**NC DSS STAFF PERFORMING SUBRECIPIENT MONITORING AND RELATED SUPPORT ACTIVITIES ARE IDENTIFIED BELOW:**

| NC DSS Monitoring Staff SFY 15-16 | Area of Responsibility |
|---|---|
| **Division Monitoring Coordinators** | |
| Carlotta Dixon, DSS Program Compliance-Lead Contract Monitor | Contracts |
| Judy McArn; James McQueen | Child Support Services |
| David Locklear, Betsy E. Moore | Food And Nutrition Services, Low Income Home Energy Assistance Program (LIEAP, CIP), |
| Marlene Myers | Refugee Services |
| Johnice Tabron | Work First Services |
| Kevin Kelley; Kristin O'Connor | Child Welfare Services/Community Based Programs |
| Freeman Denton | Community Services Block Grant (CSBG) |
| | |
| **Division Program Compliance Monitors** | |
| | Work First[PJ4] |
| Marlene Myers, Lynne Little, Pat Priest | Refugee Assistance Program Services, Formula (RAP-SS, TAG-F) and Discretionary (School Impact, TAG-D, Elderly & Cuban-Haitian) |
| Alice Smith, Jerquitta Hicks-Smallwood | Food And Nutrition Services |
| Renee Smith, Nicola Allen | Food And Nutrition Services Employment & Training |
| Connie Dixon | Food And Nutrition Services Education Training |
| Suzanne Harlow | Low Income Energy Assistance |
| Freeman Denton, Valerie Powell, Jean Fectau | Community Services Block Grant Programs |
| Kenya Newsome, Sally McDonald, Carole Allen, Judy Jedrey, Millie Bellamy, Leona Cauble, Terri Griffin, Angela Craig, Sharon Stanley | Child Support Services |
| Deborah Day | Community-Based Programs |
| Bernard Norfleet, Gloria Duncan | IV-E Foster Care, IV-E Adoption Assistance, Medicaid At Risk Case Management, Social Services Block Grant for Children: Adoption, Child Protective Services, Foster Care Services, NC LINKS |
| Amelia Lance/Michelle Reines | Special Children Adoption Incentive Fund; Adoption; Adoption Promotion |
| Michelle Reines | Post Adoption |
| Teresa Strom | Permanency Innovation |
| Kristin O'Connor | IV-B, CAPTA |
| **Division Program Coordinators** | |
| Tina Bumgarner | State Maternity Fund |

| NC DSS Monitoring Staff SFY 15-16 | Area of Responsibility |
|---|---|
| **Division Program Contract Administrators** | |
| Erin Conner | CPS/Child Welfare/Foster Care |
| Erin Conner | Chafee Foster Care Independence Program, Education and Training Vouchers |
| Michelle Reines | Children's Advocacy Centers |
| Deborah Day | Children's Trust Fund |
| Deborah Day | Family Support Programs |
| Michelle Reines | At-Risk Afterschool Services |
| Michelle Reines | Respite Services |
| Michelle Reines | Intensive Family Preservation Services |
| Michelle Reines | Post Adoption Support Programs |
| Amelia Lance/Michelle Reines | Adoption Promotion |
| Teresa Strom/Erin Conner | Permanency Innovation Initiative |
| Kathy Dobbs, Lydia Duncan | Child Protective Services, Child Welfare Collaborative, Child Welfare Training |
| Kathy Dobbs | Child Medical Evaluation Program (CMEP) |
| Jeanne Preisler | Child Welfare Evaluation, Child Welfare Training |
| Freeman Denton, Valerie Powell, Jean Fecteau, | Community Services Block Grant |
| Connie Dixon | Food Banks, FNS Nutrition Education, FNS Nutrition Outreach |
| Renee Smith, Nicola Allen | FNS Employment & Training |
| Johnice Tabron | Work First Drug Testing |
| James McQueen | Child Support |

### Division Monitoring Coordinators
Develop Compliance Review Criteria for Program(s) Administered
Review and Follow-Up on Plans of Correction;
Ensure Monitoring Reports are posted in designated files on the Division's server.

### Division Program Compliance Monitors
Monitor activities of the subrecipient to ensure that funds are used for authorized purposes in compliance with the laws, regulations, and the provisions of the grant or agreement. Provide monitoring reports to staff member designated to post results on the Division's server.

### Division Program Coordinators
Monitor activities of the subrecipient to ensure that funds are used for authorized purposes in compliance with the laws, regulations, and the provisions of the grant or agreement. Provide Technical Assistance to subrecipients in Addressing Areas of Risk.

### Division Program Contract Administrators
Work with vendors to develop and monitor contracts, receive any reports or deliverables, review and approve invoices and expenditure reports, coordinate with DSS Budget Office and DHHS Controller's Office to ensure accurate and timely payment for eligible expenditures.

**<u>Division Program Compliance/Contracts Section</u>**

Review and approve all contracts, provide daily contract technical assistance, update DSS Contracts and DHHS Open Window databases, assist in drafting contracts to ensure appropriate levels of performance expectations, sort and forward contracts to appropriate areas for review, approval and signature. Review and approve all contract invoices. Review and approve all contract corrective actions and paybacks. Initially data enter all contractors into NC Grants subject to NC State Auditors GS 143-6.22 & 23 Grant Compliance Reporting. Review all NC Grant submissions according to NC State Auditors GS 143-6.22 & 23 Grant Compliance Reporting. Enter and manage contract financial information into North Carolina Accounting System (NCAS).  Upload all grant award into DHHS Open Window.

**<u>Support Staff</u>**

Post Monitoring Results, maintain Monitoring Plan on line.

# DOCUMENTATION OF MONITORING ACTIVITIES

Each Program Compliance Monitor, Contract Administrator, Program Administrator, or Fiscal Compliance Monitor is responsible for reporting their monitoring activities. Documentation shall follow the format developed by the Section's Monitoring Coordinator.  Any ensuing technical assistance required as a result of subrecipient monitoring activities shall be referred to the contract administrator or the appropriate program representative for follow-up.

In addition, copies of certain monitoring documents will be kept in a centralized location by the designated support staff to facilitate easy access and review.  This shall include copies of all source documents such as the Self-Assessment Review Summary, the risk assessment tool, monitoring tools and instruments and copies of pertinent information used for monitoring shall also be included in the subrecipient's file.  Copies of all communication to and from the subrecipient which pertains to subrecipient monitoring shall also be included in the file.  This includes copies of the notification, the monitoring results report, plans of correction and notification to the subrecipient of the disposition of the outcome of the review of the corrective action plan (closure letter).

# SANCTIONS FOR NON-COMPLIANCE

This section describes the recourse NC DSS has when monitoring activities confirm that the subrecipient is out of compliance with state and federal regulations based on the requirements of the type of funding received and as outlined in the program or grant agreement.  If NC DSS suspects or determines that a subrecipient has failed to adhere to required guidelines, the following actions should be completed and documented as necessary:

1. Section/program staff should first make every effort to work with the subrecipient agency to identify and document problems, plan steps to resolve them, and monitor the results of corrective actions taken.

2. If necessary, NC DSS will request assistance from the DHHS Controller's Office or from other appropriate external entities.

If a Program Compliance Representative/Monitor suspects internal fraud, it will be reported to the Contractor Director [PJ5]and the DSS Division Director.  The Division will prepare an SBI Report and consult with the Internal Auditor and the Division of Budget and Analysis.  In the event the Internal Auditor agrees that the Division's suspicions are well founded, the DHHS Office of the Internal Auditor will coordinate an audit/investigation as deemed appropriate with the Office of State Auditor, internal staff, Federal authority, local law enforcement authorities, and/or the SBI.

## POSTING MONITORING RESULTS

There is a folder on the Division's shared J: Drive, folder CONTRACT, there is a subfolder called **Monitoring**. In the folder called Monitoring, there is a subfolder for each section of the Division where the monitoring results will be placed alphabetically by Contractor name. Each section that monitors Contract Programs or Contract Fiscal Activities will identify a person or persons who will be responsible for posting their monitoring results into that folder.

The Section subfolders are:
**Child Welfare Services** (includes Adoption, At Risk Case Management, Child Protective Services, Foster Care Services, Post Adoption, and State Maternity Fund)
**Child Support Services**
**Economic and Family Services** (includes Food and Nutrition Services, Energy Programs, Work First, Refugee Cash Assistance, Community Services Block Grant)
**Program Compliance-Contracts Section**


**REFERENCES:**
Executive Order 12689 – Debarment and Suspension, 54 Federal Register 34131, August 18, 1989.

Federal Financial Assistance Management Improvement Act of 1999, Public Law 106-107, January 20, 1999.

§ NC General Statutes Chapter 143 Article 1 – Executive Budget Act, Section 6.2 Report on Use of State Funds by Non-State Entities.

NC DHHS Open Window

NC DHHS Division of Social Services, Plan for Monitoring Subrecipients

NC DHHS Policy and Procedure Manual, Chapter IV:  General Administration, "Monitoring of Programs," Effective Date:  July 1, 2000; Revised, August 1, 2002.

NC DHHS Subrecipient Monitoring Manual:   A Guide to Assist Divisions in Developing Monitoring Plans, Office of the Controller, December 1, 2002.

NC Department of State Treasurer, State Compliance Supplement

NC General Assembly, 1993 Session Law, Chapter 321 (Senate Bill 27), Section 16 of the Appropriations Act:  State Money Recipients/Conflict of Interest Policy.

Office of Management and Budget, 2 CFR Part 200, Subpart F – Audit Requirement

# II. DIVISION OF SOCIAL SERVICES CONTRACTS MONITORING

All Division Program Contract Administrators review, approve and upload the quarterly and annual reports into DHHS Open Window the following:

Monthly
- DSS 1571 III Administrative Costs Report. Agencies with subcontract(s) must include monthly 1571 report(s) completed by the subcontractor(s) 1571 report(s) must be submitted monthly even if not costs are incurred.

Quarterly
- Completed Performance Status Report. First quarter report is due by October 10th; Second quarter report is due January 10th; Third quarter report is due by April 10th..

Annually
- Completed Performance Status Report with cumulative end-of-year data. End of year report is due by December 10th.

## A. Economic and Family Support Services Contract Monitoring Procedures

**Office of Economic Opportunity/Community Services Block Grant (CSBG)**
**Sub-Recipient Monitoring Plan**

## Administrator/Lead Monitoring Coordinator
Office of Economic Opportunity/ Mr. Freeman Denton

## Description of Program to be Monitored
The Office of Economic Opportunity administers one major federal grant program, the U.S. Department of Health and Human Services' Community Services Block Grant Program (CSBG). Federal rules for this program require the state, as the prime grant recipient, to monitor its sub-grantees.

**Community Services Block Grant (CSBG)**
The Community Services Block Grant program provides assistance to a network of community-based organizations for programs and services to ameliorate the causes and consequences of poverty and to revitalize low-income communities. CSBG can be used to fund programs and other activities that assist low-income individuals and families to attain self-sufficiency, provide emergency assistance, support positive youth development, promote civic engagement and improve organizational infrastructure for planning and coordination among multiple resources that address poverty conditions in the community.

## CSBG Federal Monitoring Legislation

PUBLIC LAW 105–285—OCT. 27, 1998 ''SEC. 678B. MONITORING OF ELIGIBLE ENTITIES.

''(a) IN GENERAL.—In order to determine whether eligible entities meet the performance goals, administrative standards, financial management requirements, and other requirements of a State, the State shall conduct the following reviews of eligible entities:

''(1) A full onsite review of each such entity at least once during each 3-year period.

''(2) An onsite review of each newly designated entity immediately after the completion of the first year in which such entity receives funds through the community services block grant program.

''(3) Follow up reviews including prompt return visits to eligible entities, and their programs, that fail to meet the goals, standards, and requirements established by the State.

''(4) Other reviews as appropriate, including reviews of entities with programs that have had other Federal, State, or local grants (other than assistance provided under this subtitle) terminated for cause.

## Identification of CSBG Sub-Recipients by Type and Funding Amount[PJ6]

**Community Services Block Grant**
**FY 2014-2015 Sub-Recipient List[PJ7]**

| GRANTEE | ALLOCATION | SERVICES/PROJECTS |
|---|---|---|
| Action Pathways, Inc. dba CCAP | $942,117 | Self-Sufficiency |
| Alamance County Community Services Agency, Inc. | $409,152 | Self-Sufficiency |
| Blue Ridge Community Action, Inc. | $633,277 | Self-Sufficiency Information and Referral (Linkages) |
| Blue Ridge Opportunity Commission, Inc. | $297,411 | Self-Sufficiency Emergency Assistance |
| Catawba County Department of Social Services | $393,275 | Youth Education |
| Charlotte Area Fund | $2,140,939 | Self-Sufficiency Nutrition |

| | | |
|---|---|---|
| Choanoke Area Development Association, Inc. | $543,627 | Self-Sufficiency |
| Coastal Community Action, Inc. | $430,876 | Self-Sufficiency |
| Community Action Opportunities, Inc. | $766,015 | Self-Sufficiency |
| Davidson County Community Action, Inc. | $372,124 | Self-Sufficiency |
| Eastern Carolina Human Services Agency, Inc. | $995,778 | Self-Sufficiency |
| Economic Improvement Council, Inc. | $385,246 | Self-Sufficiency |
| Experiment in Self-Reliance, Inc. | $1,030,805 | Self-Sufficiency |
| Four Square Community Action, Inc. | $191,911 | Information and Referral (Linkages) |
| Franklin-Vance-Warren Opportunity, Inc. | $518,879 | Self-Sufficiency |
| Gaston Community Action, Inc. | $1,117,059 | Self-Sufficiency |
| Greene Lamp, Inc. | $856,982 | Self-Sufficiency |
| Iredell Community Action Research and Evaluation, Inc. | $409,488 | Self-Sufficiency |
| Johnston-Lee-Harnett Community Action, Inc. | $867,236 | Self-Sufficiency |
| Joint Orange-Chatham Community Action, Inc. | $1,492,694 | Self-Sufficiency |
| Macon Program for Progress, Inc. | $156,595 | Self-Sufficiency |
| Martin County Community Action, Inc. | $104,562 | Self-Sufficiency |
| Mountain Projects, Inc. | $246,954 | Information and Referral (Linkages) |
| Nash-Edgecombe Economic Development, Inc. | $ 753,090 | Self-Sufficiency |
| Passage Home | $1,512,236 | Self-Sufficiency & Youth |
| Salisbury-Rowan Community Action Agency, Inc. | $695,540 | Self-Sufficiency |

| | | |
|---|---|---|
| Sandhills Community Action Program, Inc. | $533,874 | Self-Sufficiency |
| Southeastern Community & Family Services, Inc. | $1,630,146 | Self-Sufficiency |
| Telamon Corporation | $396,814 | Self-Sufficiency |
| Union County Community Action, Inc. | $335,390 | Self-Sufficiency |
| WAMY Community Action, Inc. | $445,429 | Self-Sufficiency |
| Wayne Action Group for Economic Solvency, Inc. | $395,639 | Self-Sufficiency |
| Welfare Reform Liaison Project, Inc. | $1,231,989 | Self-Sufficiency/Employment |
| Western Carolina Community Action, Inc. | $334,789 | Self-Sufficiency |
| Yadkin Valley Economic Development District, Inc. | $479,123 | Self-Sufficiency |
| **TOTAL** | **$24,047,061** | |

| GRANTEE (LPA) | ALLOCATION | SERVICES/PROJECTS |
|---|---|---|
| North Carolina Commission of Indian Affairs | $57,174 | Education: provides services to low-income American Indian students to assist them with remaining in college and maintaining a minimum Grade Point Average (GPA) of 2.0. |
| Telamon Corporation | $170,277 | Education: provides services to increase job readiness skills and/or obtain workplace English speakers of other languages training. |
| The Affordable Housing Group | $204,400 | Housing: provides technical assistance to community-based organizations for the purpose of developing or restoring safe/ affordable housing. Provides Housing Counseling to community-based organizations. |

| | | |
|---|---|---|
| Western Economic Development Organization | $128,251 | Education: provides educational assistance to low-income individuals to support obtaining a GED certificate, vocational trade certificate and/or a state license certification |
| **TOTAL** | **$560,102** | |

## Monitoring Activities

Monitoring procedures for the Office of Economic Opportunity CSBG Program begin with the annual funding application processes and continue through the closeout of each grant year. The Monitoring Documents for the CSBG program are included as Appendices at the end of this document. Major monitoring activities are summarized in the chart below.

| Monitoring Activities | Documents/Tools | Type of Report Issued or Result | Follow-up Procedures | Documentation Location | Responsibility |
|---|---|---|---|---|---|
| Contractor's Training | Training Manual, Presentations, Handouts | N/A | Evaluation | Section File | Administrator<br><br>All Staff |
| Application Review | Funding Application<br><br>Review Guide<br><br>Corrected Applications (if needed) | Letter/Email requesting corrections (if needed)<br><br>Contract Approval | Letter | Sub-Recipient File | Assigned Program & Fiscal Analysts |
| Conduct Agency Risk Assessments | Sub-Recipient Risk Assessment Form | Letter notifying High Risk Agencies | Monitoring Activities correspond with determined risk level<br><br>OEO Administrator must be made aware of high risk agencies | Sub-Recipient File | Assigned Program & Fiscal Analysts<br><br>Program Manager |
| Monthly Expenditure Reviews | Financial Status Report (OEO Form 286) | Letter to Controller's Office | Letter Telephone Email | Sub-Recipient File | Administrator<br><br>Assigned Fiscal Analyst |
| Quarterly Sub-Recipient Performance Review(CSBG) | Sub-Recipient Performance Report<br><br>Sub-Recipient Performance Report Review Guide | Summary letter of program and expenditure results | Letter; Telephone Email | Sub-Recipient File | Assigned Program Analyst |
| Sub-Recipient Year End performance | Sub-Recipient Year End Report of Outcome Measures | Summary letter of Year End accomplishments | Letter; Telephone; Email | Sub-Recipient File | Assigned Program & Fiscal Analysts |

| Monitoring Activities | Documents/Tools | Type of Report Issued or Result | Follow-up Procedures | Documentation Location | Responsibility |
|---|---|---|---|---|---|
| report review (CSBG) | Year End Performance Report Review Guide | | | | |
| On-site Monitoring Visit | Grantee Monitoring Plan | Summary letter of findings/corrective actions and recommendations | Letter Telephone Email | Sub-Recipient File | Assigned Program & Fiscal Analysts<br><br>Administrator (as needed) |
| Review of Audit/Sworn Accounting Statement (not always received) | Audit | Used as part of desktop and onsite monitoring when received | Letter | Controller's Office<br><br>Sub-Recipient File | Controller's Office/Audit Resolution Branch<br><br>Assigned Fiscal Analyst |
| Sub-Recipient Monitoring Database data entry | Open Window (formally Sub-Recipient Monitoring System) | N/A | N/A | Open Window Web-Based System | Contract Administrators |

### Risk Assessment

Risk assessments will be performed for any new sub-recipient and annually thereafter.  The Office will categorize each sub-recipient as low risk, medium risk or high risk using the risk assessment scoring coordinates. Risk assessments will be documented on the Sub-Recipient Risk Assessment Form and will be maintained in the appropriate section of the sub-recipients file.

The intensity of monitoring activities will have direct correlation to the Sub-Recipient's assigned risk category.  Risk assessment forms and instructions are included as Appendices at the end of this document.

### On-Site Monitoring

Formal notification is provided to each sub-recipient prior to conducting administrative, programmatic and/or fiscal monitoring visits.  The Office of Economic Opportunity reserves the right to conduct unannounced site visits on an as needed basis.  Prior to formal site visits, each sub-recipient is required to complete an Internal Controls Questionnaire and a Pre-Assessment Questionnaire to be reviewed by the assigned Program Analyst and/or Fiscal Analyst.  Assigned Program and Fiscal Analysts will conduct a comprehensive review of administrative, fiscal and programmatic records

relative the Community Services Block Grant (CSBG) Program.  Common records reviewed include but are not limited to: reported outcome measures, listings of individuals who received or were denied services, board minutes, current contracts obligating CSBG funds, organizational charts, separation of assigned duties, payrolls, books of accounts, revenue expenditure reports, staff timesheets, and documentation related to programmatic practices of the agency.

## Corrective Actions

When a sub-recipient has areas of non-compliance and/or deficiencies, a Corrective Action Plan will be required.  The process for corrective actions includes:
1. Identification of deficiencies through monitoring;
2. Notification to sub-recipient of identified findings;
3. Corrective Action Plan development;
4. Formal acceptance of the Sub-Recipient's Corrective Action Plan; and
5. Follow-up to ensure Corrective Action Plan has sufficiently been implemented.

## Internal Monitoring Tracking

The CSBG program will continue updates and reviews sub-recipient expenditures via an OEO Form 286 (Financial Status Report) tracking log.  In addition, an on-site monitoring tracking spreadsheet is used to ensure monitoring compliance.  These tools included as Appendices at the end of this document .

## Compliance Supplement Requirements

Link to Agency Matrix for Federal Programs is at:
https://www.nctreasurer.com/slg/State%20Compliance%20Supplements/B-FedMatrix-2012.pdf[PJ8]

Link to Compliance Supplement is at
https://www.nctreasurer.com/slg/State%20Compliance%20Supplements/93.569-CL-2012.pdf

# Providers List for NC Refugee Assistance[PJ9]

| AGENCY[PJ10] | ADDRESS, PHONE NUMBER, & WEBSITE | COUNTIES SERVED | KEY SERVICES |
|---|---|---|---|
| NC African Services Coalition, Inc. (ECDC) - Greensboro | 122 N. Elm Street, Suite 810<br>Greensboro, NC 27401<br>Phone # 336-574-2677<br>Fax # 336-574-2672<br>http://www.ascafrica.org | Guilford County | Case Management, Employment Services, Vocational Skills Training, Driver's Training, Skills Recertification, Transportation, Interpretation & Translation |
| Carolina Refugee Resettlement Agency, Inc. (HIAS) - Charlotte | 5007 Monroe Road, Suite 101<br>Charlotte, NC 28205<br>Phone # 704-535-8805<br>Fax # 704-535-8806<br>http://www.carolinarefugee.org/ | Mecklenburg County | Case Management, Employment Services, Vocational Skills Training, Driver's Training, Vocational Education Instruction, Skills Recertification, Transportation, Immigration & Citizenship, Interpretation & Translation |
| Catholic Charities Diocese of Charlotte - Western Regional Office | 50 Orange St.<br>Asheville, NC 28801<br>Phone # 828-255-0146<br>Fax # 828-253-7339 http://www.ccdoc.org | Buncombe, Henderson, and Madison Counties | Case Management, Employment Services, Vocational Skills Training, Driver's Training, Transportation, Immigration & Citizenship (Cuban-Haitian Program), Interpretation & Translation |
| Catholic Charities Diocese of Charlotte (USCCB) - Charlotte Office | 1123 S. Church Street<br>Charlotte, NC 28203-3405<br>Phone # 704-370-3262<br>Fax # 704-370-3370 or 704-370-3377<br>http://www.ccdoc.org | Charlotte / Mecklenburg County, also Gaston, Union, and Cabarrus Counties | Case Management, Employment Services, Vocational Skills Training, Driver's Training, Transportation, Immigration & Citizenship, Interpretation & Translation, School Impact Program Services |
| Central Piedmont Community College - Charlotte | P.O. Box 35009<br>Charlotte, NC 28235<br>Phone # 704-330-4855<br>Fax # 704-330-4821<br>http://www.cpcc.edu/ | Mecklenburg County | English Language Training, Vocational Skills Training, Transportation, Interpretation & Translation |
| Charlotte Mecklenburg Senior Center - Charlotte | 3925 Willard Farrow Drive<br>Charlotte, NC 28215<br>Phone # 704-531-6900<br>Fax # 704-531-6008<br>http://www.cmseniorcenters.org/ | Mecklenburg County | English Language Training Transportation, Information & Referral, Interpretation & Translation |
| Church World Service (CWS) - Durham Office | 112 S. Duke Street, Suite 4B<br>Durham, NC 27701<br>Phone # 919-680-4310<br>Fax # 919-680-4320<br>www.cwsrdu.org | Durham, Orange, and Wake Counties | Case Management, Employment Services, English Language Training, Vocational Skills Training, Vocational Education Instruction, Transportation, Immigration & Citizenship, Interpretation & Translation, School Impact Program Services |

| AGENCY[PJ10] | ADDRESS, PHONE NUMBER, & WEBSITE | COUNTIES SERVED | KEY SERVICES |
|---|---|---|---|
| Church World Service (CWS) - Greensboro Office | 620 S. Elm St., Suite 315<br>Greensboro, NC  27406<br>Phone # 336-617-0381<br>Fax # 336-617-3654<br>http://cwsgreensboro.org/ | Guilford County | Case Management, Employment Services, Vocational Skills Training, Driver's Training, Vocational Education Instruction, Transportation, Interpretation & Translation |
| Cross Cultural Resources, Inc. - Charlotte | 4801 E. Independence Drive, Ste. 608<br>Charlotte, NC 28212<br>Phone # 704-469-5638<br>Fax # 704-208-4018<br>http://www.ccrlanguages.com/ | Statewide | Interpretation & Translation |
| Elon University School of Law, Humanitarian Immigration Law Clinic - Greensboro | *Physical Address:* 210 W. Friendly Avenue; Greensboro, NC 27401<br>*Mailing Address:* Humanitarian Immigration Law Clinic; P.O. Box 5848; Greensboro, NC 27435<br>Phone # 336-279-9354<br>Fax # 336-272-9667<br>http://www.elon.edu/e-web/law/academics/Immigration%20Clinic.xhtml | Statewide | Immigration & Citizenship, Transportation, Interpretation & Translation |
| Guilford County Schools | 120 Franklin Blvd.<br>Greensboro, NC  27401<br>Phone # 336-370-8982<br>Fax 336-370-8939<br>http://gcsnc.com | Guilford County | School Impact Program Services (Interpretation & Translation, Parent-Focused Assistance, After-School Activities, In-School Services) |
| Interfaith Refugee Ministry (EMM) - New Bern Office | 1233 Colony Drive<br>New Bern, NC  28562<br>Phone # 252-633-9009<br>Fax # 252-638-7570<br>http://www.helpingrefugees.org | Craven, Onslow, Carteret, Pitt, and Wayne Counties | Case Management, Employment Services, English Language Training, Vocational Skills Training, Driver's Training, Vocational Education Instruction, Transportation, Interpretation & Translation, School Impact Program Services |
| Interfaith Refugee Ministry (EMM) - Wilmington Sub-Office | 25 S. Third St.<br>Wilmington, NC  28401<br>Phone: 910-264-7244<br>Fax:  910-762-5115<br>http://www.helpingrefugees.org | New Hanover and Robeson Counties | Case Management, Employment Services, Vocational Skills Training, Driver's Training, Vocational Education Instruction, Transportation, Interpretation & Translation |
| International House - Charlotte | *Physical Address:* 1817 Central Avenue, Suite 215; Charlotte, NC 28205<br>*Mailing Address:* P.O. Box 5429; Charlotte, NC 28299-5429<br>Phone # 704-405-0962<br>Fax # 704-334-2423<br>www.ihclt.org | Mecklenburg, Union, Gaston, Cabarrus, Rowan, Cleveland, Lincoln, Catawba, Burke, and Caldwell Counties | Immigration & Citizenship, Interpretation & Translation |

| AGENCY[PJ10] | ADDRESS, PHONE NUMBER, & WEBSITE | COUNTIES SERVED | KEY SERVICES |
|---|---|---|---|
| Lutheran Services Carolinas - Child & Family Services - Refugee Resettlement Services (LIRS) - Raleigh Office | 616 Hutton St.<br>Raleigh, NC 27606<br>Phone # 919-832-2620<br>Fax # 919-832-9876<br>http://www.LSCarolinas.net | Wake, Durham, and Orange Counties | Case Management, Employment Services, English Language Training, Vocational Skills Training, Driver's Education, Vocational Education Instruction, Transportation, Interpretation & Translation, School Impact Program Services |
| Montagnard Dega Association, Inc. - Greensboro | 611 Summit Ave., Suite 10<br>Greensboro, NC 27405<br>Phone # 336-373-1812<br>Fax # 336-373-1832<br>https://sites.google.com/site/mdagreensboronc/ | Guilford County | Employment Services, Vocational Skills Training, Vocational Education Instruction, Transportation, Interpretation & Translation |
| New Arrivals Institute - Greensboro | *Mailing Address:* P.O. Box 5315; Greensboro, NC 27435<br>*New Arrival School:* 101 W. Vandalia Road; Greensboro, NC 27406<br>*NAI Main Office:* 2616-G Lawndale Drive; Kirkwood Commons; Greensboro, NC 27408<br>Phone # 336-937-4701<br>http://sites.google.com/site/newarrivalsinstitute/home | Guilford, Alamance, Randolph, Rockingham, Forsyth, and Davidson Counties | English Language Training, Vocational Education Instruction, Skills Recertification, Day Care, Interpretation & Translation |
| Senior Resources of Guilford | P.O. Box 21993<br>301 East Washington Street<br>Greensboro, NC 27401-27420<br>Phone # 336-373-4816<br>Fax # 336-373-4922<br>http://www.senior-resources-guilford.org/ | Guilford County | Case Management, English Language Training, Transportation, Immigration & Citizenship, Interpretation & Translation |
| U.S. Committee for Refugees & Immigrants (USCRI) - Raleigh Office | The Raleigh Building; 5 West Hargett Street, Suite 202<br>Raleigh, NC 27601<br>Phone # 919-334-0072<br>Fax # 919-334-0077<br>http://www.refugees.org/about-us/where-we-work/north-carolina/ | Wake County | Case Management, Employment Services, English Language Training (Cuban-Haitian Program), Vocational Skills Training, Driver's Training, Vocational Education Instruction, Transportation, Immigration & Citizenship (Cuban-Haitian Program), Interpretation & Translation |
| World Relief Refugee Services of North Carolina (WR) - High Point Office | 2029 North Centennial St.<br>High Point, NC 27262<br>Phone # 336-887-9007<br>Fax # 336-887-5245<br>http://worldrelief.org/highpoint | High Point / Guilford County and Winston-Salem / Forsyth County | Case Management, Employment Services, English Language Training Transportation, Vocational Skills Training, Vocational Education Instruction, Skills Recertification, Interpretation & Translation |

| AGENCY[PJ10] | ADDRESS, PHONE NUMBER, & WEBSITE | COUNTIES SERVED | KEY SERVICES |
|---|---|---|---|
| World Relief Refugee Services (WR) - Durham Office | 801 Gilbert Street, Suite # 209<br>Durham, NC 27701<br>Phone # 919-286-3496<br>Fax # 919-956-5918<br>http://worldreliefdurham.org/ | Durham, Orange, and Wake Counties | Case Management, Employment Services, Driver's Training, Vocational Education Instruction, Skills Recertification, Transportation, Interpretation & Translation |

**Work First**

North Carolina's Work First Program is based on the premise that parents have a responsibility to support themselves and their children. Through Work First, parents can get short-term training and other services to help them become employed and self-sufficient, but the responsibility is theirs, and most parents have two years to move off Work First Family Assistance. Work First emphasizes three strategies: Diversion, Work, and Job Retention. Work First Family Assistance is also provided for eligible children whose caretaker is not eligible for benefits themselves. Work First Family Assistance provides monthly financial assistance to help in meeting the basic needs of families with children such as food, shelter, etc.

Work First services are provided to families to improve their employability, to assist families to become employed, to retain employment, and to become self-sufficient. The services provided to families include education/training, employment services, childcare, transportation services, and retention services for the employed. These services provided to families enable the state to meet its Work Participation Rates goals. Generally, these services are provided by a Work First program employment worker and/or by other community agencies

**Contract Monitoring Staff**

The Economic and Family Services Section (EFSS) has one (1) position identified as the Work First Program Administrator for the NC's Substance Use Testing Contract with Fortes Laboratories Wilsonville, OR. The Contract's Administrator duties include the responsibility to conduct an annual monitoring, the facilitation of test results, management of data needs and training, and to ensure Substance Use Testing problems are addressed for the program. There are two (2) Work First Policy Consultants that share in the duties of the Contract's Administrator based on assignment of duties.

**Monitoring Tools**

The monitoring tools currently in use are based on applicable laws and regulations that govern the program contracts for DHHS/DSS. The DHHS Internal Control Questionnaire is utilized for the documentation of the annual contract monitoring for the Work First Program.

## Process of Review & Corrective Action

The program staff member conducting the monitoring notifies the vendor that the annul monitoring review is required. The annual review is scheduled for completion. Site visit monitoring is preferable for the first initial visit to ensure a professional partnership is developed with the vendor. The program staff member will generate discussions regarding the process, expectations, and potential outcomes of the monitoring. Under special circumstances, desktop monitoring may be substituted for on-site monitoring to ensure the contract is monitored as required. For example, travel restrictions, time limitation or vacant positions may necessitate desktop monitoring instead of on-site monitoring.

Any corrective action plans developed will be written with requirements and deadlines. The plans are attached to the vendor's contract in the Open Windows system.

## Maintenance of Monitoring Documentation

Monitoring tools, relevant verification information, compliance findings, corrective action plans, and monitoring correspondence will be maintained in the Division's Central Office in the Hargrove Building, 820 S. Boylan Ave, Raleigh, NC. The Division maintains the records per the North Carolina Record's Retention Policy.

## B. North Carolina Child Support Services Contract Monitoring Procedures

The Child Support Program oversees 10 contracts.

| 30062 | Laboratory Corporation of America | $560,000 | Perform genetic testing and provide percentage of possible paternity. |
|---|---|---|---|
| 30564 | Eastern Band of Cherokee Indians | $0 | Provide access and use of the Automated Collection and Tracking System (ACTS) |
| 34257 | Mississippi [MJE11]DSS – IDEC | $95,812 | Provides locate information concerning non-custodial parents and matches for the financial institution levy process. |
| 34753 | DES – UIB | $60,000 | Provides for the interception of Unemployment Insurance Benefits to pay support in conjunction with a child support court order. |
| 30770 | Division of Public Health | $154,800 | Provide birth verifications and affidavits of parentage. |
| 30528 | Division of Employment Security/ DES-Industrial Commission | $0 | Receive data regarding non-custodial parents who are receiving unemployment insurance benefits.  Provide new hire information. |
| 26113 | Maximus (PSI) | $359,800 | Obtain new hire information from employers and provide this information to Child Support. |
| 30446 | Berkshire Road I, LLC | $146,881 | Lease office space for the Child Support call center |
| 30597 | System & Methods, Inc. | $3,422,440 | Receive and receipt child support payments |
| 34581 | Administrative Office of the Courts | $389,468 | Provide access and visitation services |

**Contract monitoring includes review of invoices and reports for accuracy by program supervisor. Once verified, the invoice is provided to the Contract Administrator for review and payment.**

# C. Child Welfare Services Contract Monitoring Procedures

**Monitoring Contracts with Not for Profit Organizations and Other Non-Governmental Entities**

**Program areas and services to be monitored**

| Area | Compliance Number | Subrecipients | Funding Source | Review Tool |
|---|---|---|---|---|
| Adoption Promotion | 93.556 93.558 93.603 | Attachment A | IV-B2 TANF Adoption Incentive | Attachment E |
| Post Adoption Support | 93.556 | Attachment A | IV-B2 | Attachment B |
| Children's Trust Fund | NA | Attachment A | CTF | Attachment B |
| Community-Based Child Abuse Prevention Program | 93.590 | Attachment A | CBCAP | Attachment B |
| Family Support Program | 93.556 | Attachment A | IV-B2 | Attachment B |
| Child Welfare Training | | | | |
| Child Support Enforcement – Access and Visitation | 93.597 | Attachment A | Access and Visitation Programs | Attachment B |
| Intensive Family Preservation Services | 93.556 | Attachment A | IV-B2 | Attachment B |
| Children's Advocacy Centers | NA | Attachment A | SSBG | Attachment B |
| CAN/CPS Child Welfare | 93.669 | Attachment A | CAN | Attachment A |
| Permanency Innovation Initiative | 93.645 93.658 | Attachment A | IV-B1 IV-E | Attachment A |

**Description of Programs**

*Adoption Promotion*
Adoption Promotion services are for the purpose of enhancing and expanding adoption programs, to secure permanent homes for hard to place children, and to encourage partnerships between public and private agencies to achieve permanency for children in a timely manner by providing incentives for the adoption of special needs children. Participating agencies are compensated for adoption services that culminate in the finalization of an adoption. These services are recruitment of adoptive families, pre-adoption training, post placement support and the facilitation of legal procedures resulting in the finalization of an adoption.

*Post Adoption Support*
Post Adoption Support services provide enhanced capacity to adoptive parents so they in turn can provide a lifetime commitment to their adopted children and ensure that adopted children have their safety, permanency, education, physical, and emotional needs met. These services may include, screening and assessment, case management, parenting programs, crisis intervention, trainings, therapy, respite care, and supportive services after the finalization of the adoption.

*Permanency Innovation Initiative Fund*
The Permanency Innovation Initiative provides services

to improve permanency outcomes for children living in foster care through reunification with parents, providing placement or guardianship with other relatives, or adoption, improve engagement with biological relatives of children in or at risk of entering foster care and reduce costs associated with maintaining children in foster care. The services are Family Finding, Child Specific Adoption Recruitment Services and Permanency Training.

*Children's Advocacy Centers*
Certified Child Advocacy Centers provide services for families in their county who have children that have been a victim of sexual abuse. Each center has a multidisciplinary team that includes the District Attorney, law enforcement, and a forensics investigator. The child is able to receive all of these services at the center. Additional services provided to the family include individual and group counseling and information and referral.

*Access and Visitation*
The purpose of the Access and Visitation Program is to support and facilitate noncustodial parents' access to and visitation of their children. Activities may include mediation, counseling, parent education, development of parenting plans, and visitation enforcement (including monitored and supervised visitation, and neutral drop-off and pick-up).

*Children's Trust Fund*
Children's Trust Fund services are intended to prevent abuse and neglect of juveniles. Abuse and neglect prevention programs are defined to be those programs and services which impact on juveniles and families before any substantiated incident of abuse or neglect has occurred. These programs may include, but are not limited to:

- Community-based educational programs on prenatal care, perinatal bonding, child development, basic child care, care of children with special needs, and coping with family stress; and
- Community-based programs relating to crisis care, aid to parents, and support groups for parents and their children experiencing stress within the family unit.

*Community-Based Child Abuse Prevention and Family Support Programs*
Family support programs are defined as a conceptual approach to strengthening and empowering families and communities. The operating premise of family support programs is if family and child quality of life is improved, the risk of child maltreatment decreases. Rather than following a particular intervention design, family support programs attempt to address the specific needs of the families in the community in which they operate. This flexibility encourages grass-roots program development and collaboration with families and other local interests in the program planning process.

Because of the grassroots, community-based orientation of family support programs, there are significant variances among programs. However, all programs provide evidence-based, evidence-informed programming. Many family support programs provide a continuum of various family strengthening activities. Other family support programs are designed to provide a single service. Some examples of family support services in North Carolina include support groups, parent education/training, and information and referral. Services target families and children from birth through seventeen, and are provided for all family members through on-site or home-based strategies.

*Respite Services*
Respite is a short term service provided in the temporary absence of the regular caregiver to children who are at risk of victimization, who have experienced victimization, and/or who have disabilities, chronic or terminal illness. This service is provided within or outside the child's home and is intended to enable the family to stay together and to keep the child(ren) living at home and in the community.

*Intensive Family Preservation Services (IFPS)*
The IFPS model provides in-home crisis intervention services designed to help families at imminent risk of having a child removed from the home. These services help to maintain children safely in their homes and prevent unnecessary separation of families. This model is characterized by very small caseloads for workers, short duration of services, 24-hour availability of staff, the provision of services primarily in the child's home or in another environment, and intensive and time-limited services.

## REVIEW PROCESS

### Determining the Period Under Review

The period under review (PUR) is determined to be 12 months prior to the date of the on-site monitoring review and through the month preceding the month of the date of review. For example, if the review date is scheduled for December 2015, PUR would be December 2014 through November 2015.

Contract Administrators may choose to review documentation for all periods during a subrecipient's grant cycle should the PUR uncover programmatic or fiscal concerns.

### Sampling of DSS-1571 Administrative Costs

At minimum, Contract Administrators are to review a random sample of two (2) months of DSS-1571 Administrative Cost Report supporting documentation during the PUR. Should financial testing of the sample uncover inconsistencies within line item expenditure categories, the Contract Administrator may review all DSS-1571 Administrative Costs for the line item(s) in question during the full 12-month PUR or for all periods during a subrecipient's grant cycle.

### The Review

Monitoring reviews begin during the subrecipient application/contracting process. The monitoring process encompasses a variety of tools that are used throughout the contract period. Fiscal and program reports, desk monitoring, on-site monitoring reviews and on-going telephone/e-mail contact with contracted agencies provide valuable information to determine subrecipient's contractual compliance and program success. Contract Administrators are responsible for monitoring contractual activities, maintaining monitoring documentation and providing monitoring follow-up to all contracted agencies.

*Desk Monitoring*

Desk monitoring occurs on a monthly basis. Contract Administrators review the DSS-1571 Administrative Cost Report for accurate, allowable and reasonable costs and the State Auditors' non-compliance list is reviewed to ensure all G.S. 143-6.22 & 23 reporting requirements are being fulfilled by the subrecipient. If applicable, monthly program reports or database entries are reviewed to ensure participants are enrolled and programming activities have been implemented. As specified in an individual scope of work of a contract, the following documents[PJ12] may be used to monitor the Contractor:

1. Agency Organizational Chart
2. Board Member Profile
3. Service Implementation Plan
4. Anticipated Revenue Summary
5. Funding Chart
6. Job Descriptions for Direct Services Staff in the Contract

Completed contractor documents will be maintained in the attachment section of Open Window. Ongoing telephone and e-mail monitoring is documented by the Contract Administrator when it pertains to possible contractual non-compliance issues.

During the first quarter of the contract year, subrecipients receive a "Performance Status Monitoring Tool"[1] (see sample Attachment C). This document is completed and submitted by the subrecipient 90 days after contract start date[2] and is essential to the desk monitoring process. A conference call is conducted between the Contract Administrator and subrecipient administration/staff to review the subrecipient's Performance Status report to ensure that required components of programming, accurate monthly reporting, and fiscal procedures are being implemented and baseline data is being compiled to fulfill the evaluation plan of the contract. In addition, any concerns or additional clarification needed by the subrecipient regarding the contract are addressed with the Contract Administrator. A review of the Performance Status Report after the conference call enables the Contract Administrator to assess and assign an initial subrecipient risk level. The risk assessment of the subrecipient is completed and uploaded into Open Window by the Contract Administrator.

*Assessment of Risk*

Initially, risk assessment starts during the contracting process and initial risk level is assigned at the completion of the Performance Status monitoring process noted above. Areas evaluated include, but are not limited to: the size of the subrecipient, complexity of funding and programs, organizational experience, size of funding award, variety of programs, organizational history, previous experience, resolution of previous issues, and staff turnover. The following charts outline risk factors that are considered when assessing risk and the corresponding suggested monitoring activities for each subrecipient.

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[1] Contract Administrators may tailor the Performance Status Monitoring Tool template to meet the reporting requirements mandated by the program area's state or federal funding source and/or to provide additional information to assist with outcome accountability and evaluation.
[2] Or 90 days from the date the contract is fully executed.

| Low Risk Factors* | Suggested Monitoring |
|---|---|
| No audit finding. No corrective action plans. Capable staff with low turnover. Complete, accurate and timely routine reports. No complaints (clients, staff, etc.). Attend required meetings. Previously funded subrecipient. | Desk Review of regular reports (fiscal/program). Random request of 1571 back-up information. Desk Monitoring during the contract year. Scheduled monitoring visit (s). Documentation of monitoring activities. |

| Medium Risk Factors* | Suggested Monitoring |
|---|---|
| Audit findings. Weakness in internal controls. Weakness in staff. Change in Management/Administration. Variances in fiscal/monthly reports. New contractor. Non-attendance of required meetings. Late program implementation start date. Unclear program/fiscal policies. Late submissions of required documentation. | Desk Review of regular reports (fiscal/program). Random request of 1571 back-up information. Desk Monitoring during the contract year. Scheduled monitoring visit(s) for specific areas of concern. Corrective Action Plan implemented. Documentation of monitoring activities. |

| High Risk Factors* | Suggested Monitoring |
|---|---|
| Unresolved audit finds. Unresolved correction action plan. Untrained staff/turnover. Complaints. Failure to submit required documentation. On Non-Compliance State Auditor's List. Lack of Program/Fiscal Policies. Failure to respond. | Desk Review of regular reports (fiscal/program). Random request of 1571 back-up information. Desk Monitoring during the contract year. Scheduled site visits(s) for specific areas of concern. Unscheduled monitoring visits. Corrective Action Plan implemented. Follow-up monitoring visit(s) within three months. Documentation of monitoring activities. Termination of contract. |

* Any or all factors determine risk level

*Notification of On-Site Monitoring Review*

For announced reviews, Contract Administrators send a formal written notification letter on NC DSS letterhead to the subrecipients at least 10 business days prior to the scheduled review date. At minimum, the notification letter will include:

- The date and location of the review
- The contractual areas to be reviewed
- The programmatic and financial records to have available at the time of the review
- The period under review

*Frequency of On-Site Monitoring Review*

Based on the determination of risk, the Contract Administrator will develop a monitoring plan for subrecipients to include prioritization for subrecipients determined to be high-risk. Increased frequency of on-site monitoring review or desk reviews, corrective action plans and related reports will be used to conduct more comprehensive monitoring for high-risk subrecipients.

Low and medium risk subrecipients will be monitored as needed during an award cycle according to an established schedule once baseline data is collected, unless other requirements for frequency take precedence.

*Monitoring Reports*

The Site Review Report (see Attachment B) is completed at the end of the on-site monitoring review. The OMB 2 CFR Part 200, Subpart F – Audit Requirements specifies fourteen areas of compliance monitoring and if applicable to the program are reviewed during the on-site review, in addition to the subrecipient's Conflict of Interest Policy which is included in the subrecipient's executed contract. Areas concerning programming, fiscal management, compliance requirements, personnel, safety, organizational capacity, subcontract services and evaluation are also reviewed to confirm contractual compliance during the on-site review. Information from the Site Review Tool is summarized in a formal written letter to subrecipient within 30 days of on-site monitoring review. At the completion of the on-site monitoring review, Contract Administrators will re-assess risk level. Open Window is updated after the on-site monitoring review.

**Program Non-Compliance and Corrective Action:**

Within 30 calendar days of an on-site monitoring review with identified corrective action findings, the Contract Administrator will send a formal written corrective action findings letter to the subrecipient. At minimum, the findings letter will include:

- A summary of the purpose of the review
- Strengths identified during the review
- Recommendations for continuous quality improvement
- Areas of non-compliance and required corrective action

Subrecipients will have thirty (30) days to submit correction action plan in response to the corrective action findings identified in the findings letter. Upon receipt of the subrecipient's correction action response, the Contract Administrator will review and verify the documentation for contractual compliance. Should the subrecipient satisfy all correction action findings, the Contract Administrator will issue a formal written closure letter to the subrecipient to notify the subrecipient that the corrective action items have been satisfied. The Contract Administrator will also reassign the subrecipient to a lower risk level, if appropriate.

Should the subrecipient fail to satisfy the corrective action findings, the Contract Administrator will issue a follow-up letter to the subrecipient within 30 days to notify the subrecipient of unresolved findings and required actions. The subrecipient will be given no more than 15 business days from the date of the follow-up letter to respond to the unresolved corrective action findings.

In addition to the follow-up letter, the Contract Administrator may determine that a follow-up on-site monitoring review is needed to ensure compliance with contractual requirements.

Should the subrecipient fail to satisfy correction action findings upon issuance of the follow-up letter, the Contract Administrator <u>will</u> conduct a follow-up on-site review within 30 days of receipt of subrecipient's follow-up response, unless requirements for frequency take precedence. Reassessment of risk level will also be completed. If the subrecipient remains in non-compliance status, the contract may be terminated due to failure to meet the terms and conditions of the contract.

**Maintenance of Monitoring Documentation:**

All monitoring documentation, verification information, corrective action plans, correspondence, and program/fiscal reports are maintained in the subrecipient's master file located in the North Carolina Department of Health and Human Services, Division of Social Services, Child Welfare Section, 820 S. Boylan Avenue, Raleigh, North Carolina 27603.

Monitoring tools, relevant verification information, compliance findings, corrective action plans, initial and follow-up correspondence will be maintained on DHHS/DSS Shared Drive within the Child Welfare Services Section.

| ATTACHMENT A: SUBRECIPIENTS FOR SFY 15-16 | |
|---|---|
| **Contractor Name (Subrecipient)** | **Program Type** |
| Children's Home Society of NC, Inc. | Adoption Promotion |
| Crossnore School, Inc. | Adoption Promotion |
| Community Services for Children, Inc. dba Grandfather Home | Adoption Promotion |
| Omni Visions, Inc. | Adoption Promotion |
| Barium Springs Home for Children | Adoption Promotion |
| Easter Seals UCP, Inc. | Adoption Promotion |
| Another Choice for Black Children, Inc. | Adoption Promotion |
| Methodist Home for Children, Inc. | Adoption Promotion |
| Seven Homes Residential Youth Development Alternative, Inc. | Adoption Promotion |
| The Children's Home, Inc. | Adoption Promotion |
| Lutheran Family Services in the Carolinas | Adoption Promotion |
| Children's Home Society of NC | Post Adoption Support |
| Eckerd Youth Alternatives, Inc. | Post Adoption Support |
| Barium Springs Home for Children | Post Adoption Support |
| Center for Child & Family Health | Post Adoption Support |
| Catawba County Department of Social Services | Post Adoption Support |
| Children's Home Society of NC | Permanency Innovations Initiative |
| NC Administrative Office of the Court | Child Support – Access and Visitation CPS (Criminal Record Checks) |
| Exchange Club Child Abuse Prevention Center of NC, Inc. | Intensive Family Preservation  Services |
| Methodist Home for Children | Intensive Family Preservation  Services |
| Children's Home Society of NC | Intensive Family Preservation  Services |
| Eckerd Youth Alternatives | Intensive Family Preservation  Services |
| Barium Springs Home for Children | Intensive Family Preservation  Services |
| Coastal Horizons Center | Intensive Family Preservation Services |
| Alamance Partnership for Children | Family Support Program Services |
| Albemarle Smart Start | Family Support Program Services |
| Burke County Public Schools | Family Support Program Services |
| Children and Family Resource Center of Henderson County | Family Support Program Services |
| Children's Center of Surry, Inc. | Family Support Program Services |
| Children's Council of Watauga County | Family Support Program Services |
| Communities In Schools of Brunswick County, Inc. | Family Support Program Services |
| Down East Partnership for Children | Family Support Program Services |
| East Carolina University | Family Support Program Services |
| Eckerd Youth Alternatives | Family Support Program Services |
| Exchange Clubs' Child Abuse Prevention Center in Durham, Inc. | Family Support Program Services |

| ATTACHMENT A: SUBRECIPIENTS FOR SFY 15-16 | |
|---|---|
| **Contractor Name (Subrecipient)** | **Program Type** |
| Exchange Club Center for the Prevention of Child Abuse of Iredell Co. | Family Support Program Services |
| Family Place of Transylvania | Family Support Program Services |
| Family Resources of Cherokee County, Inc. | Family Support Program Services |
| Family Service of the Piedmont, Inc. | Family Support Program Services |
| Franklin-Vance-Warren Opportunity | Family Support Program Services |
| Help, Incorporated: Center Against Violence | Family Support Program Services |
| McDowell County Schools | Family Support Program Services |
| Onslow County PEERS Program. | Family Support Program Services |
| Orange County Partnership for Young Children | Family Support Program Services |
| Person Cooperative Extension | Family Support Program Services |
| Public Health Authority of Cabarrus County | Family Support Program Services |
| Salvation Army of Wake County | Family Support Program Services |
| Smart Start of New Hanover County | Family Support Program Services |
| Swain County Government | Family Support Program Services |
| Thompson Child and Family Focus | Family Support Program Services |
| Wilson County Department of Social Services | Family Support Program Services |
| Prevent Child Abuse North Carolina | Family Support Program Services |
| Caring for Children, Inc. | Respite Services |
| Coastal Horizons Center | Respite Services |
| Exchange Club Center for the Prevention of Child Abuse of NC | Respite Services |
| Wake County Department of Human Services | Respite Services |
| Southwestern Child Development Commission, Inc. | Respite Services |
| Children's Center of Surry, Inc. | Respite Services |
| Wayne Uplift Resource Association, Inc. | Respite Services |
| Youth Focus, Inc. | Respite Services |
| Buncombe County Department of Social Services | Children's Trust Fund |
| Catawba County Department of Social Services | Children's Trust Fund |
| Orange County Partnership for Young Children | Children's Trust Fund |
| Children's Advocacy Centers of North Carolina | Children's Advocacy Centers |
| Boys & Girls Clubs of Wake County | At-Risk Afterschool |
| Youth Villages | Out-of-Home Placement/Child Welfare |
| NC Administrative Office of the Courts | CPS/Child Welfare |
| Center for Child and Family Health | Child Welfare Training |
| Asheville-Buncombe Technical Community College | Child Welfare Training |
| Central Piedmont Community College | Child Welfare Training |
| Guilford Technical Community College | Child Welfare Training |
| NC State University Center for Family and Community Engagement | Child Welfare Training |

| ATTACHMENT A: SUBRECIPIENTS FOR SFY 15-16 ||
|---|---|
| **Contractor Name (Subrecipient)** | **Program Type** |
| University of NC-CH Family and Children's Resource Program | Child Welfare Training |
| University of NC-CH Psychiatry Dept. | Child Welfare Training |
| University of NC-CH Child Medical Evaluation Program | Child Welfare Training |
| University of NC-CH Child Medical Evaluation Program | Child Protective Services |
| University of NC-CH Child Welfare Education Collaborative | Child Welfare Collaborative |

# ATTACHMENT C: Site Visit Report

**Instructions**: The Contract Administrator will conduct a site visit during the contract year. The Performance Status Report completed by the Provider should accompany this report. Attach all supporting documents necessary. Site Visit information must be entered into the DHHS Program Monitoring Database[PJ13].

| Subrecipient: | Site Visit Date: | Risk Assessment: |
|---|---|---|
| Program Name: | Contract # | |
| Program Type: | | |

Type of Visit: ☐ Monitoring Visit    ☐Site Visit    ☐Technical Assistance    ☐Other (Explain)

| In Attendance: | Date: |
|---|---|

| Topic Area | Yes | No | N/A | Recommendations/Comments |
|---|---|---|---|---|
| **A.     Budget** | | | | |
| 1. Are 1571 fiscal reports on file and is an electronic copy maintained? | | | | |
| 2. Are 1571 fiscal reports submitted on time? | | | | |
| 3. Are 1571 fiscal reports submitted accurately? | | | | |
| 4. B/2- Are Costs Allowable | | | | |
| 5. Is budget spend down appropriate? | | | | |
| 6. Is a budget amendment needed? | | | | |
| 7. Are receipts kept for audit purposes? Review back up information for one submitted 1571 report. Attach to report. | | | | |
| 8. Are expenditures in accordance with the budget? | | | | |
| 9. Is travel documented - date, distance, locations, staff purpose & rates? | | | | |
| 10. Are funds co-mingled (placed in one account)? | | | | |
| If Yes, is there a Journal/Ledger Spreadsheet? | | | | |
| 11. G/7:Are match requirements being met? | | | | |
| -- Can grantee provide clear documentation of match? | | | | |
| -- What are the sources of the match? | | | | |
| 12. Records are retained for five years from the end date of the contract | | | | |
| **B.     Equipment (F/6)** | | | | |
| 1. Has approved equipment been purchased? Review receipts. | | | | |

| Topic Area | Yes | No | N/A | Recommendations/Comments |
|---|---|---|---|---|
| 2. Was competitive bidding used to obtain equipment? | | | | |
| 3. Is equipment being used appropriately and clearly marked "Property of DHHS"? | | | | |
| C.      Professional and Contractual Services | | | | |
| 1. Have all subcontracts received PRIOR grantor approval? | | | | |
| 2. Are subcontractor's contracts signed and filed? | | | | |
| 3. Does subcontract outline work to be performed and does it comply with program objectives? | | | | |
| 4. Are subcontractors submitting required fiscal/program reports by required deadlines? | | | | |
| 5. Was competitive bidding used to obtain subcontract(s)? | | | | |
| 6. If sole source used, is approval on file? | | | | |
| 7. Is "Subcontractor" making regular & accurate billing? | | | | |
| D. Personnel | | | | |
| 1. Are all contract positions filled? | | | | |
| 2. Are file folders maintained for each employee (including employment applications, job descriptions, resumes, background checks, reference checks, W-4 and I-9 forms, etc.? | | | | |
| 3. Are time sheets maintained for all employees? | | | | |
| 4. Are there any conflict of interest issues in the hiring/supervision process? | | | | |
| 5. Has staff attended required training? | | | | |
| E.      Programming | | | | |
| 1. Did the program start on time? | | | | |
| 2. Is the program design implemented? | | | | |
| 3. Has projected number of participants been met? | | | | |
| 4. E/5-Do participants meet eligibility requirements? | | | | |
| 5. Is programming delivered in a culturally competent manner? | | | | |

| Topic Area | Yes | No | N/A | Recommendations/Comments |
|---|---|---|---|---|
| 6. Is programming required by the federal/state funding source being implemented? | | | | |
| 7. A/1-Are activities Allowable | | | | |
| 8. Is information entered into the program database timely? | | | | |
| 9. Is information entered into the program database accurate? Attach to report. | | | | |
| 10. Are program polices and procedures in place? | | | | |
| 11. Is programming in a safe and secure environment? | | | | |
| 12. Is client information on file? | | | | |
| 13. Interview or discussion with staff/participants/board members. | | | | |
| 14. Is staff to client ratio appropriate? | | | | |
| 15. Are services provided outside of traditional hours? | | | | |
| 16. Is baseline/outcome data being collected? | | | | |
| 17. Is there evidence of on-going collaboration with other service delivery systems/community partners? | | | | |
| E.    Organizational Capacity | | | | |
| 1. Review board member roster - attach to report. | | | | |
| 2. Review board member minutes - attach to report | | | | |
| 3. Are the required individuals on the advisory board? | | | | |
| 4. Review subrecipient's By-Laws – attach to report. | | | | |
| 5. Is staff turn-over rate high? | | | | |
| 6. Is appropriate supervision given to staff? | | | | |
| 7. Is there a Sustainability Plan? | | | | |

Briefly, describe what follow-up support (if any) is needed.

_____
_____
_____
_____

Is a Corrective Action Plan needed:    ☐ YES                    ☐NO
If yes, Corrective Action Plan steps may/will be required to be initiated and resolved within 30 days.

Coordinator/Consultant
_____Date_____

Program Administrator
_____Date_____

**ATTACHMENT D – SAMPLE**

**Performance Status Monitoring and Quarterly Reporting Tool**

| **Tool Instructions** |
|---|
| **Goal:** On a yearly basis, the US Department of Health and Human Services and the North Carolina General Assembly allocates funds to the North Carolina Division of Social Services for the provision of Family Support Services. It is our goal to ensure that organizations are self-monitoring and meeting their contracted measurable program outcomes.<br><br>This tool serves as both Performance Status Monitoring due at the close of the 1st Quarter **and** for 2nd, 3rd, and 4th Quarterly Reporting. Reporting should be cumulative for outputs and outcomes, so please complete the form with information "to date". Your 4th quarter report, will serve as your agency's end of year report. The Narrative section is not cumulative.<br><br>Please enter all information requested in the spaces provided. For Outcome reporting, actual outcome data should be listed (i.e. date evaluation measures were utilized; number of clients evaluated; outcome % aggregated to date; if available; or date outcome % will be available). An example is provided in the first outcome and evaluation plan worksheet. Please report on all outcomes as listed in your agency's logic model in the executed contract. |

Quarter:  ☐ 1  ☐ 2  ☐ 3  ☐ 4/Final

Date of Report Completion:

Name of Organization:

Contract ID #:

Name and Title of Person Completing the Form:

Phone Number of Person Completing the Form:

Please list all contracted services and number served (cumulative):

| Program Name | Projected # Served (include separate outputs for caregivers and children) | Actual # Served to Date (include separate outputs for caregivers and children) | Percentage Served to Date |
|---|---|---|---|
| i.e. – Circle of Parents | 20 caregivers; 20 children | 10 caregivers; 12 children | 50%;60% |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**FISCAL MANAGEMENT:**

1.  Does the agency fiscal staff person have a copy of the contract and budget?  ☐ YES  ☐ NO

2.  Is the 1571 Reimbursement form submitted by the 10th of each month?  ☐ YES  ☐ NO

3a.  Are multiple funding sources received by the agency?  ☐ YES  ☐ NO

3b.  If so, are funds from multiple funding sources deposited into one account?  ☐ YES  ☐ NO
    *Note: If your agency answered "Yes" to question 3 or 4, please have a copy of the agency's*
    *Cost Allocation Plan available for review during site visit.*

4.  Is all equipment purchased from NC DSS funding labeled "Property of DHHS – FS"?
    *Note: Labeled equipment will be viewed during the site visit.*  ☐ YES ☐ NO ☐ N/A

5. Is your agency on track with budget projections?  ☐ YES  ☐ NO
    *Note: If your agency answered "No" please contact the contract administrator to discuss amendment..*

6a. Does your agency use subcontractors on this grant?  ☐ YES  ☐ NO

6b. If so, how do you monitor subcontractors?_____

**PROGRAMMING:**

1.  Is a copy of the contract located at the program site(s)?  ☐ YES  ☐ NO

2.  Is there a Policy and Procedures manual onsite at the program?  ☐ YES  ☐ NO

3.  Have all of the staff listed in the budget been hired?  ☐ YES  ☐ NO

4.  If there has been staffing changes, was the contract administrator notified?  ☐ YES ☐ NO ☐ N/A

5.  Have all educators/facilitators been trained in your selected curricula?  ☐ YES  ☐ NO

6.  Have all relevant staff members attended the NC DSS *Family Support in Practice: Connecting with Families* training?  ☐ YES  ☐ NO

7.  Have all relevant staff members completed *Strengthening Families Protective Factors* on-line training?  ☐ YES  ☐ NO

8.  Are families referred to other agencies for services not provided by your program?  ☐ YES  ☐ NO

9.  If applicable, have adult participant been invited to join the Advisory Board?  ☐ YES ☐ NO ☐ N/A

**FAMILY SUPPORT DATABASE:**

1.  Is the NC DSS Database completed monthly in an accurate and timely manner?  ☐ YES  ☐ NO

2.  Who is responsible for database entry accuracy?  _____

3.  Does the Program Director check the database monthly for accuracy?  ☐ YES  ☐ NO

# Family Support Program Outcomes

| Vision: Families have enhanced capacity to provide for their children's educational, physical, and emotional needs and child have opportunities for healthy social and emotional development | | | | |
|---|---|---|---|---|
| **Measurable Outcomes** | **Program/Curriculum** | **Activities/Services** | **Measurement Tools** | **Actual Outcomes (YTD - Cumulative)** |
| *i.e. Of the 48 parents who participate in IY training, 75% will demonstrate a decrease in negative parenting practices.* | *Incredible Years* | *Provide 3 series during the SFY. Each series will consist of 14 weekly sessions.* | *Eyberg Child Behavior Inventory – Pre/Post testing*<br><br>*Retrospective Parenting Survey – provided at the 2nd and 10th session* | *Pre Test Eyberg has been provided to 12 participants in current IY cohort which started on January 1, 2011. Posttest Eyberg to be given at the conclusion of the series. Projected series end date is March 31. Once pre/post data is collected, NC Partnership for Children will aggregate the data.*<br><br>*Retrospective Parenting Survey was provided to 12 parents at the 2nd session for the current IY cohort. A 2nd retrospective survey was given to 8 parents during the 10th session. Results are as follows:*<br><br>*Of the 8 parents who completed both retrospective surveys, 85% reported a decrease in the use of harsh discipline techniques.* |

**NARRATIVE (For this Quarter Only – Not cumulative)**

1. What strengths has your program experienced this quarter?

2. Provide at least one family or client success story from your program this quarter:

3. What challenges or barriers has your program faced this quarter?

4. How do you plan to address these challenges?

5. Describe partnerships and collaboration efforts with your local Department of Social Services and other community-based family support agencies this quarter:

6. Does your agency have any feedback that might benefit the NC Division of Social Services?  Is there any support, training, and/or assistance that your agency would like NC DSS to provide?

## ATTACHMENT E: Performance Based Contracts for Adoption Services
## MONITORING TOOLS

**Monitoring Procedure:**

For the Performance Based Contracts for Adoption Services, the contract agencies submit their claims for payment on the DSS 1571, Part IV with the names of the children adopted through their agency, the children's SIS identification numbers, the type of special needs that the children have, and the amount of funds requested. The Contract Administrator for these contracts randomly selects cases from each contracting agency for review. The following information is completed and maintained by the Division.

I.      Name of Contract Provider:                                                                                      Contract Number:

II.     Date of Monitoring Activity:

III.    Attendees

| Entrance Interview | | Exit Interview | |
|---|---|---|---|
| Name | Title | Name | Title |
| Name | Title | Name | Title |
| Name | Title | Name | Title |
| Name | Title | Name | Title |
| Name | Title | Name | Title |

IV.     Contract Type:   **Special Children Adoption Fund/Adoption Promotion Program Contract**

V.      Provider's License is intact and current:     YES     ☐                          NO     ☐

        Describe verification method:  ☐    Telephone-  ☐    Email                Licensure Consultant  _____
        License Number:   N/A

**VI.        Board of Directors**

        Board Meeting Minutes attached    YES ☐      NO ☐                              By Laws attached      ☐ YES      NO ☐
        Board Members Poster attached    YES ☐      NO ☐                              Is there a sustainability plan?    ☐ YES      NO

VII. Complete the following Table of cases reviewed *(attach a separate page if more detail is needed)*

| Child Information | County | Amount Paid | Were appropriate/ quality services provided? | | Type of Contact | | Comments |
|---|---|---|---|---|---|---|---|
| | | | Yes | No | Site Visit | 1571 Review | |
| 1. Name: | | | | | | | . |
| SIS #: | | | | | | | |
| Special Needs: | | | | | | | |
| 2. Name: | | | | | | | |
| SIS #: | | | | | | | |
| Special Needs: | | | | | | | |
| 3. Name: | | | | | | | |
| SIS #: | | | | | | | |
| Special Needs: | | | | | | | |
| 4. Name. | | | | | | | |
| SIS #: | | | | | | | |
| Special Needs: | | | | | | | |
| 5. Name | | | | | | | |
| SIS #: | | | | | | | |
| Special Needs: | | | | | | | |
| 6. Name: | | | | | | | |
| SIS #: | | | | | | | |
| Special Needs: | | | | | | | |
| 7. Name: | | | | | | | |
| SIS #: | | | | | | | |
| Special Needs: | | | | | | | |
| 8. Name: | | | | | | | |
| SIS #: | | | | | | | |
| Special Needs: | | | | | | | |
| 9 Name: | | | | | | | |
| SIS #: | | | | | | | |
| Special Needs: | | | | | | | |
| 10 Name: | | | | | | | |
| SIS #: | | | | | | | |
| Special Needs: | | | | | | | |

VII.    Conclusions (*Attach additional sheets, if needed.*)

A.    Describe strengths noted during this monitoring activity:

Under the terms of the contract _____ agrees to provide adoption services to adoptive families.  The deliverables are finalized adoptions.  In order to provide these deliverables, families need to be prepared and supported.  Preparation and support for families include recruitment, training, and placement, legal and supportive services to ensure the finalization of an adoption.  Requests for reimbursement are made via DSS-1571(modified) on a monthly basis.

Contractor has a baseline of zero. The payment levels for disbursement of the Special Children Adoption Fund/Adoption Promotion Program Fund are:

- $ 7,200 per child for children from 0-12 years and per child for sibling groups of two children;  $ 12,000 per child for children from 13-18 years; $ 12,000 per child for sibling groups of three or more who are placed together at the same time in an adoptive family;  $ 7,200 and $12,000 to be shared by agencies when joint planning leads to Decree of Adoption after baselines have been reached, with each agency receiving $3,600 or $.6,000 according to the guidelines established for the age of the child and sibling group of three or more when placed together.
-

Contractor completed _____ adoptions to date for which they received reimbursements.  _____   records were selected for review.

Reviews indicated that case files contained documentation of services. ☐ YES        NO ☐

Deliverables were in compliance with program policy of the Division of Social Services and with the terms of the contract. ☐ YES        NO ☐

B.    Described any cases needing improvement that does not affect program compliance.

Describe any issues that result in this contract being out of compliance.  n/a

C.    Describe what follow up support (if any) is needed.
_____
_____
_____
_____

D.  Was the claim allowable?    ☐ YES        NO ☐

E.  If no, a Corrective Action Plan will be required within 30 days.

**Contract Administrator:**    _____  _____        Date:_____
                               Signature                                      Printed Name

**Contractor Representative:**  _____  _____        Date:_____
                               Signature                                      Printed Name

# ADOPTION PROMOTION PROGRAM FUND REIMBURSEMENT FORM

| NAME OF AGENCY | NAME OF PREPARER | PREPARER'S TELEPHONE ( ) | PREPARER'S EMAIL |
|---|---|---|---|
| | | | |

| CHILD'S INFORMATION | | | | SIS IDENTIFICATION NUMBER | DATE OF DECREE OF ADOPTION | IF SHARED, GIVE NAME OF OTHER AGENCY | AMOUNT OF PAYMENT RECEIVED FROM OTHER SOURCE(S) | AMOUNT OF PAYMENT REQUESTED | CHILD'S SPECIAL NEEDS |
|---|---|---|---|---|---|---|---|---|---|
| NAME | CUSTODIAL COUNTY NUMBER | AGE | RACE | | | | | | |
| 1. | | | | | | | | | |
| 2. | | | | | | | | | |
| 3. | | | | | | | | | |
| 4.' | | | | | | | | | |
| 5. | | | | | | | | | |
| 6.. | | | | | | | | | |
| 7. | | | | | | | | | |
| 8. | | | | | | | | | |
| 9. | | | | | | | | | |
| 10 | | | | | | | | | |

## CERTIFICATION

I certify that the above adoption services were provided in compliance with Adoption Promotion Program Fund guidelines and have been documented as required.

Signature of Authorized Official: _____  Print Name: _____

Title: _____  Date: _____

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Attachment F

## Subrecipient Contract Monitoring Reference Procedures

Subrecipient contracts require in-depth monitoring as detailed in the Uniform Grants Guidance (UGG).*External Link* Therefore, subrecipient monitoring must be in compliance with UGG minimum standards, which include:

- Review of internal controls and business processes.

- Review of audit financial and performance reports.

- Verify that a single audit was conducted if expenditures were $750,000 or more during the fiscal year and that repayment of disallowed costs, financial adjustments, or other necessary actions were taken.

- Ensure timely and appropriate actions are taken on all deficiencies resulting from monitoring activities.

- Any necessary actions including implementation of remedies for non-compliance.

# PROCEDURES

## Monitoring Levels

The SMP specifies the level of monitoring required, as detailed below.
Full level monitoring requires:

- Programmatic, fiscal, and administrative review

- Testing three months of a sample of transactions and the contractor's associated documentation

Targeted level monitoring requires: Either programmatic or fiscal and an administrative review

- Testing two months of a sample of transactions and the contractor's associated documentation

Both levels of monitoring must incorporate:

- Results of the review of the Internal Control Structure Questionnaire (ICSQ);

- Compliance with performance measures;

- When applicable, adherence to their subcontracting policies and procedures; and,

- Any other pertinent factors.

## Enhanced Monitoring

Enhanced Monitoring is an increased level of monitoring that applies to all contracts with a value of $10 million or more, including those that reach the $10 million threshold during the life of the

contract. In addition to the requirements of full and targeted monitoring, Enhanced Monitoring may include the following:

- Analysis of financial reports;
- Additional monitoring visits resulting in a formal report;
- Additional reporting requirements; and
- Other risk assessment and management activities.

## Monitoring Methods

Once the level of monitoring is determined, monitoring may be conducted by an on-site visit, desk review, or a billing review.

| | On-Site Visit | Desk Review | Billing Review |
|---|---|---|---|
| **Definition:** | A review of a contractor's financial, personnel, service and client records, which may include observation of program activities at a site such as a contractor's administrative or service delivery site. | A documentation review of a contractor's financial, personnel, service and client records in a site and away from the contractor's administrative or service delivery sites. | A review of Contractor and contractor documents that support service delivery and validity of claims that takes place in a Contractor site as billings are received. |
| **Details:** | • May include observation of service delivery.<br>• May be used for both full and targeted level monitoring. | • Documents reviewed are the same as for an on-site visit and submitted by the contractor at the request of the contract manager.<br>• The monitoring tools are the same as those used for an on-site visit.<br>• May only be used for targeted level monitoring (see exceptions below) and the time frames for monitoring requirements must mirror those for on-site visit.<br>• **Exceptions:** A contract with an SMP level of full may be monitored using the desk review monitoring process if | • Allowed for those services listed in Billing Review or otherwise approved by DSS.<br>• May be used for targeted or full level monitoring. |

| | On-Site Visit | Desk Review | Billing Review |
|---|---|---|---|
| | | one of the following conditions exists:<br><br>○ Contractor is out of state<br><br>○ Contractor does not maintain an office or an office with adequate space<br><br>• Contract management staff must document one of the exception conditions on the monitoring tools when conducting a desk review for a full monitoring. | |

## Monitoring Types

Once the monitoring method has been selected, contract staff must determine the appropriate type of monitoring. There are three types of contract monitoring conducted in the DSS monitoring process: fiscal, programmatic, and administrative.

| | Fiscal Monitoring | Programmatic Monitoring | Administrative Monitoring |
|---|---|---|---|
| **Definition:** | A review of a contractor's financial operations, which may include a review of internal controls for program funds in accordance with state and federal requirements, an examination of principles, laws and regulations, and a determination of whether costs are reasonable and necessary to achieve program objectives. This activity involves an assessment of financial statements, records, and procedures. It is similar to an audit, but has a lesser degree of detail and depth and, usually, a higher degree of frequency. | A review of a contractor's service delivery system to determine if it is consistent with contract requirements including outputs, outcomes, quality, and effectiveness of programs. In programmatic monitoring, service-related information is reviewed for compliance with process and outcome expectations as identified in standards, rules, and contracts. This activity assesses the degree to which the identified need is being met and the quality of the service being provided, based on established objectives and performance measures. | A review of a contractor's internal controls and operating processes. An administrative review must be conducted in conjunction with either a fiscal or programmatic monitoring review. This is accomplished through the completion of the appropriate administrative tool. |

|  | **Fiscal Monitoring** | **Programmatic Monitoring** | **Administrative Monitoring** |
|---|---|---|---|
| **Details:** | Fiscal monitoring includes, but is not limited to:<br><br>• Reviewing the contractor's bills when they are received to determine if appropriate units of measure are reported and that costs (units x rate) are correct<br><br>• Comparing budgets or budget limits to actual costs to determine if the contractor's expenditures are likely to be more or less than budgeted<br><br>• Obtaining documentation that services billed were actually delivered according to the contract<br><br>• Comparing bills with supporting documentation to determine that costs were allowable, necessary, and allocable. | Program monitoring may include any or all of the following:<br><br>• Reviewing the service provisions of the contract to determine program required objectives, outcomes, and performance measures<br><br>• Reviewing the contractor's reports and other materials to determine if services are being provided<br><br>• Interviewing direct delivery staff and others to determine if the services are being performed according to contract requirements. | Administrative monitoring may include any or all of the following:<br><br>• Reviewing personnel files to:<br><br>• Verify required training<br><br>• Verify background check requirements<br><br>• Verify minimum qualifications, required training, insurance and licensing of staff<br><br>• Reviewing subcontractor selection, contracting, and monitoring, if applicable<br><br>• Reviewing procedures for monitoring service delivery<br><br>• Reviewing complaint resolution process.<br><br>• If DUA is applicable, administrative monitoring must include [these minimum requirements.] *Word Document* |

## Contract Monitoring Questions for Data Use Agreement (DUA) Confidential Information Protection[PJ14]

To be implemented by HHS Agencies/Programs in accordance with existing monitoring processes (for example, add to existing monitoring tools within risk-based monitoring structures, either on-site or desk review).

| Category | Monitoring Questions | Response |
|---|---|---|
| **Policies & Procedures** | 1. Does the contractor have written policies and procedures regarding the protection of confidential information? | ☐ Yes ☐ No |
| | 2. Do the contractor's policies and procedures include:<br>a. Limitations on the use and disclosure of confidential information.<br>b. Protocol for responding to a breach? | ☐ Yes ☐ No<br><br>☐ Yes ☐ No |
| **Training** | 3. Does the contractor have a training curriculum regarding the protection of confidential information? | ☐ Yes ☐ No |
| | 4. Have all workforce authorized to access confidential information taken the training? | ☐ Yes ☐ No<br>Total # of Staff:<br>If No, # of Staff Not Trained: |
| | 5. Was the training taken in a timely manner by all authorized workforce (within 30 days of hire for new staff, annually for existing workforce)? | ☐ Yes ☐ No<br>Total # of Staff:<br>If No, # of Staff Not Trained Timely: |
| **Subcontractors** | 6. Does the contractor have a signed Subcontractor Agreement Form (DUA Attachment 1) for all subcontractors? | ☐ Yes ☐ No<br>Total # of Subcontractors:<br><br>If No, # of Subcontractors Without a Signed Form: |
| **Safeguards for Protection of Confidential** | 7. Can the contractor demonstrate that they are in compliance with minimum safeguards for | ☐ Yes ☐ No<br>If No, what do they lack? |

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| Contract Monitoring Questions for Data Use Agreement (DUA) Confidential Information Protection[PJ14] | | |
|---|---|---|
| To be implemented by HHS Agencies/Programs in accordance with existing monitoring processes (for example, add to existing monitoring tools within risk-based monitoring structures, either on-site or desk review). | | |
| **Category** | **Monitoring Questions** | **Response** |
| **Information (Paper, Oral, & Electronic)** | protecting confidential information? Consider the following, as applicable:<br>a. Secured physical premises (building, locked file cabinets)<br>b. Unique computer login/password for each authorized user<br>c. Secured WiFi (Password-Protected; Not Public)<br>d. Records destruction (shredder v. trash can)<br>e. Encryption software | What encryption software (brand/version) does the contractor use? |

# North Carolina Department of Health and Human Services



**Internal Control Questionnaire**

This internal control questionnaire is designed to assist the grantee in the identification of strengths and weaknesses in its internal control structure.  It will also be used by Departmental monitors and consultants as a guide to assess the grantee's control risk.

<u>Agency Information</u>

Name of Subrecipient Organization: _____

Street Address: _____

City, State and Postal Code: _____

Federal ID (EIN): _____

Contract #: _____

Contact Person: _____

Contact Person's Telephone #: _____

Preparer's Name and Title: _____

Date Prepared: _____

<u>Key Employees</u>

Board of Directors' Chairperson: _____

Clerk to the Board of Directors: _____

Executive Director: _____

Business Manager: _____

Chief Finance Officer: _____

Deputy Finance Officer: _____

Budget Officer: _____

Bookkeeper: _____

Other (title): _____

_____ _____

_____ _____

_____ _____

_____ _____

_____ _____

*Note: The basic foundation of an adequate system of internal control is the segregation of duties among employees in such a manner that no one employee handles a transaction from inception to completion. When this is not possible due to the small number of employees, other controls can be implemented to reduce risk.*

<u>Instructions:</u>

1. Write in the name(s) of the employee(s) which are involved in the following activities: cash receipts, disbursements, payroll, purchasing, posting to the accounting records and fixed assets.

2. For each employee identified, place an "x" by each activity that the employee performs.

| Employee Duties | N/A | Employee Name | | | | | |
|---|---|---|---|---|---|---|---|
| Opens the mail | | | | | | | |
| Prepares cash receipts log | | | | | | | |
| Performs cashier functions (receives cash) | | | | | | | |
| Prepares prenumbered receipts | | | | | | | |
| Mails prenumbered receipts to payor | | | | | | | |
| Reviews voided prenumbered receipt forms | | | | | | | |
| Prepares deposits | | | | | | | |
| Reconciles cash receipts log to deposit | | | | | | | |
| Prepares account codings for receipts | | | | | | | |
| Posts to cash receipts journal | | | | | | | |
| Posts to general ledger | | | | | | | |
| Posts to accounts receivable subsidiary records | | | | | | | |
| Prepares account codings for disbursements | | | | | | | |
| Posts to cash disbursements journal | | | | | | | |
| Posts to accounts payable subsidiary records | | | | | | | |
| Reconciles reimbursement requests to receipts | | | | | | | |
| Prepares bank reconciliations | | | | | | | |
| * Operating checking account(s) | | | | | | | |
| * Investment account(s) | | | | | | | |

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| | N/A | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| * Payroll account(s) | | | | | | | | |
| Bank reconciliations reviewed by | | | | | | | | |
| * Operating checking account(s) | | | | | | | | |
| * Investment account(s) | | | | | | | | |
| * Payroll account(s) | | | | | | | | |
| Investigates and resolves complaints from contributors | | | | | | | | |
| Investigates and resolves complaints from vendors | | | | | | | | |
| Write-off of uncollectible pledges or bad debts | | | | | | | | |
| Analyzes aged accounts receivables | | | | | | | | |
| Authorizes and approves disbursements | | | | | | | | |
| Authorizes and approves purchases | | | | | | | | |
| * Prepares purchase requisitions/orders | | | | | | | | |
| Prepares checks | | | | | | | | |
| Signs checks | | | | | | | | |
| Mails checks | | | | | | | | |
| Has access to blank unissued checks | | | | | | | | |
| Reviews voided and returned checks | | | | | | | | |
| Verifies correctness of invoices | | | | | | | | |

Instructions:

1. Write in the name(s) of the employee(s) which are involved in the following activities: cash receipts, disbursements, payroll, purchasing, posting to the accounting records and fixed assets.

2. For each employee identified, place an "x" by each activity that the employee performs.

| **Employee Duties** | **Employee Name** | | | | | | |
|---|---|---|---|---|---|---|---|
| | N/A | | | | | | |
| Matches vendor invoices to: | | | | | | | |
| * Purchase requisitions/orders | | | | | | | |
| * Receiving reports | | | | | | | |
| Cancels invoices to prevent duplicate payments | | | | | | | |
| maintains imprest petty cash fund | | | | | | | |
| Reconciles imprest petty cash fund | | | | | | | |
| Payment of payroll authorized by | | | | | | | |
| Additions to payroll authorized by | | | | | | | |
| Terminations to payroll authorized by | | | | | | | |
| Pay rates authorized by | | | | | | | |
| Payroll records prepared by | | | | | | | |
| Payroll checks prepared by | | | | | | | |
| Payroll distributed by | | | | | | | |
| Authorizes capital expenditures | | | | | | | |
| Authorizes disposals of fixed assets | | | | | | | |
| Maintains detail fixed asset records | | | | | | | |
| Maintains custody of title documents | | | | | | | |

| | Responsible Personnel (Staff Name and Job Title) | Yes | No | N/A |
|---|---|---|---|---|
| **Receipts** | | | | |
| 1. Cash receipts are deposited intact (I.e. does the organization prohibit amounts from either being withheld from the deposit or requesting the bank to deduct cash from the deposit). | | ☐ | ☐ | ☐ |
| 2. Cash receipts are deposited on a daily basis. | | ☐ | ☐ | ☐ |
| 3. The individual(s) who open the mail make a log of cash receipts (a simple list of individual receipts to establish control and document what was received), including notation of any restrictions before the cash or documentation is routed to others. | | ☐ | ☐ | ☐ |
| 4. A restrictive endorsement ("For Deposit Only") is placed/stamped on all checks when received. | | ☐ | ☐ | ☐ |
| 5. Prenumbered receipt forms, which include acknowledgement of any restrictions, are issued for receipts and donated materials received and the numerical sequence is accounted for. | | ☐ | ☐ | ☐ |
| 6. Prenumbered receipt forms and special event tickets are safeguarded and accounted for. | | ☐ | ☐ | ☐ |
| 7. Voided receipt forms are adequately defaced and retained. | | ☐ | ☐ | ☐ |
| 8. Lock-box (or cashiering) services are used to control access to mail receipts from major fundraising campaigns and membership drives. | | ☐ | ☐ | ☐ |
| 9. Sealed containers or remittance envelopes are used to control direct solicitation collections until they are counted and recorded. | | ☐ | ☐ | ☐ |
| 10. Collection containers are controlled, such as by individual numbering, and they are safeguarded and accounted for. (Note: This control is usually established by organizations which place collection containers in the community) | | ☐ | ☐ | ☐ |
| 11. Distribution of collection container is documented so that each container is traceable. | | ☐ | ☐ | ☐ |

| | Responsible Personnel (Staff Name and Job Title) | Yes | No | N/A |
|---|---|---|---|---|
| 12. Remittance envelopes and other material and identification used for direct solicitation are safeguarded and accounted for. | | ☐ | ☐ | ☐ |
| 13. A schedule is used to ensure that collection container are timely retrieved and that containers not retrieved are investigated. | | ☐ | ☐ | ☐ |
| 14. The contents of collection containers and/or remittance envelopes are counted and recorded in the presence of at least two persons. | | ☐ | ☐ | ☐ |
| 15. The deposit slips used have an official depository bank number preprinted on the document. | | ☐ | ☐ | ☐ |
| 16. Procedures are in place to establish a proper cut-off of cash receipts at the end of fiscal year. | | ☐ | ☐ | ☐ |
| 17. Logs of receipt book issuances are maintained. | | ☐ | ☐ | ☐ |
| 18. Are unused portions of receipt books required to be returned to the issuance location? | | ☐ | ☐ | ☐ |
| 19. Cash receipts are controlled at the earliest point of receipts. | | ☐ | ☐ | ☐ |
| 20. When funds cannot be deposited daily, are the funds transported to a centralized location at the end of the workday and secured overnight? | | ☐ | ☐ | ☐ |
| 21. Is effective control maintained over receipts of gifts, grants, donations, etc. and is a follow-up made by a responsible official to see that they have been classified and recorded properly? | | ☐ | ☐ | ☐ |
| 22. Management approves and spot-checks reconciliations. | | ☐ | ☐ | ☐ |
| 23. Are timely corrective actions taken in cash discrepancies? | | ☐ | ☐ | ☐ |
| **Receivables** | | | | |
| 1. Receipts on accounts are posted to an accounts receivable subsidiary ledger. | | ☐ | ☐ | ☐ |
| 2. Receipt of payments on receivable are documented, such as by receipt forms or notations on pledge forms. | | ☐ | ☐ | ☐ |

| | Responsible Personnel (Staff Name and Job Title) | Yes | No | N/A |
|---|---|---|---|---|
| 3. An analysis of aged pledges receivable is reviewed at least monthly by a person independent of the functions of handling and recording of cash receipts. (Note: Not-for-profit organizations are allowed to record the value of pledges receivable, less the amount estimated as uncollectible in their financial statements) | | ☐ | ☐ | ☐ |
| 4. Records of pledges written off are documented and kept on file. | | ☐ | ☐ | ☐ |
| 5. A policy statement defines the circumstances under which delinquent pledges are to be enforced or written off. | | ☐ | ☐ | ☐ |
| 6. Procedures exist to prepare and send billings as soon after the sale of goods or performance of service as possible, but at least within the month. | | ☐ | ☐ | ☐ |
| 7. Procedures have been documented to collect monies due within the established payment terms. | | ☐ | ☐ | ☐ |
| 8. Remittance advices and billings are retained to support entries to accounts receivable records. | | ☐ | ☐ | ☐ |
| 9. Procedures exist to prevent the interception or alteration by unauthorized persons of billings or statements after preparation but before they are mailed. | | ☐ | ☐ | ☐ |
| 10. The agency has established policies and procedures concerning refunds of overpayments, issuance of billing adjustments. | | ☐ | ☐ | ☐ |
| 11. Subsidiary accounts receivable and notes receivable records are maintained. | | ☐ | ☐ | ☐ |
| 12. Subsidiary accounts are reconciled at least monthly with the general ledger control account. | | ☐ | ☐ | ☐ |
| 13. Charges for goods or services are based on authorized rates and approved by the appropriate State/Federal authorities. | | ☐ | ☐ | ☐ |
| 14. The accounting department is notified directly and in a timely manner of billings and collection | | ☐ | ☐ | ☐ |
| 15. Collections on accounts receivable are deposited daily, rather than held for posting to detail records. | | ☐ | ☐ | ☐ |

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| | Responsible Personnel (Staff Name and Job Title) | Yes | No | N/A |
|---|---|---|---|---|
| 16. Access to accounts receivable accounting system is limited only to authorized individuals. | | ☐ | ☐ | ☐ |
| 17. Are delinquent accounts followed up? | | ☐ | ☐ | ☐ |
| **Disbursements** | | | | |
| 1. The governing board authorizes all bank accounts and check signers. | | ☐ | ☐ | ☐ |
| 2. Dual signatures required on all checks. | | ☐ | ☐ | ☐ |
| 3. The bank is immediately notified of all changes of authorized check signers. | | ☐ | ☐ | ☐ |
| 4. Disbursements are made by check (except for petty cash). | | ☐ | ☐ | ☐ |
| 5. Cash disbursements are supported by vendors' receipts or other external documents. | | ☐ | ☐ | ☐ |
| 6. Vendor invoices, or other documents, indicate the date that goods or services were received. | | ☐ | ☐ | ☐ |
| 7. Unpaid vendor invoices are filed separately from paid invoices. | | ☐ | ☐ | ☐ |
| 8. All invoices are approved for payment by responsible officials. | | ☐ | ☐ | ☐ |
| 9. For disbursements that require special approval of the governing board, their approval is adequately documented. | | ☐ | ☐ | ☐ |
| 10. Vendor invoices are recalculated prior to checks being prepared. | | ☐ | ☐ | ☐ |
| 11. All supporting documents are cancelled to prevent duplicate payment. | | ☐ | ☐ | ☐ |
| 12. A log or other notation is made of purchases that include a contribution element. | | ☐ | ☐ | ☐ |
| 13. Checks are signed only when supported by approved invoices (not signed in advance). | | ☐ | ☐ | ☐ |
| 14. Check signers compare data on supporting documents to checks presented for their signatures. | | ☐ | ☐ | ☐ |
| 15. Check signers examine appropriate approval on supporting documents before signing checks. | | ☐ | ☐ | ☐ |
| 16. Checks are prenumbered and accounted for. | | ☐ | ☐ | ☐ |
| 17. Voided checks are adequately defaced and are easily accessible for review. | | ☐ | ☐ | ☐ |

| | Responsible Personnel (Staff Name and Job Title) | Yes | No | N/A |
|---|---|---|---|---|
| 18. The practice of cashing checks out of cash receipts is prohibited. | | ☐ | ☐ | ☐ |
| 19. Bank transfers are approved, recorded and verified to ascertain that both sides of the transaction are recorded. | | ☐ | ☐ | ☐ |
| 20. A policy exists which documents the rationale used to allocate expenses among functions, grants, or contracts. | | ☐ | ☐ | ☐ |
| **Payroll and Personnel** | | ☐ | ☐ | ☐ |
| 1. A payroll journal is prepared and balanced. | | ☐ | ☐ | ☐ |
| 2. Payroll disbursements are made by check or direct deposit. | | ☐ | ☐ | ☐ |
| 3. Employees' time records are maintained. | | ☐ | ☐ | ☐ |
| 4. W-4 forms are maintained. | | ☐ | ☐ | ☐ |
| 5. Employees' earnings records are maintained. | | | | |
| 6. Adequate records are maintained to allow allocation of payroll costs to functions (including lobbying activities), specific grants and contracts. | | ☐ | ☐ | ☐ |
| 7. Written procedures exist for appropriate allocation of expenses to those related to the organization's purpose and those that are used to generate unrelated business income. | | ☐ | ☐ | ☐ |
| 8. Time sheets or cards are prepared by employees. | | ☐ | ☐ | ☐ |
| 9. Payroll checks are prenumbered and accounted for. | | ☐ | ☐ | ☐ |
| 10. Checks are recorded in the payroll journal as prepared. | | ☐ | ☐ | ☐ |
| 11. Payroll journals are posted at least monthly to employees' earnings records. | | ☐ | ☐ | ☐ |
| 12. Time cards are approved by a director or manager. | | ☐ | ☐ | ☐ |
| 13. An imprest payroll bank account is used. | | ☐ | ☐ | ☐ |
| 14. Unclaimed payroll checks are followed up on by the board of directors or their designee. | | ☐ | ☐ | ☐ |
| **Accounting System** | | ☐ | ☐ | ☐ |
| 1. Bank accounts are reconciled monthly. | | ☐ | ☐ | ☐ |

| | Responsible Personnel (Staff Name and Job Title) | Yes | No | N/A |
|---|---|---|---|---|
| 2. A balancing cash receipts journal is maintained and includes notation of any donor-imposed restrictions. | | | | |
| 3. A balancing cash disbursements journal is maintained for each bank account. | | ☐ | ☐ | ☐ ☐ |
| 4. A purchases journal is maintained. | | ☐ | ☐ | ☐ |
| 5. The accounting system identifies and captures payments which satisfy donor-imposed restrictions. | | ☐ | ☐ | |
| 6. The accounting system captures information necessary either to identify the function for which each expense is incurred or to allocate each expense incurred among appropriate functions. | | ☐ | ☐ | ☐ |
| 7. Recorded contributions and grants are compared to approved budgets and significant variances are investigated by a responsible official. | | ☐ | ☐ | ☐ |
| 8. Contributions and grants that can reasonably be estimated are budgeted. | | ☐ | ☐ | ☐ |
| 9. Documentation, including all correspondence, is maintained for each restricted contribution or grant. | | ☐ | ☐ | ☐ |
| 10. An imprest petty cash fund is utilized and reconciled periodically. | | ☐ | ☐ | ☐ |
| 11. Prenumbered purchase requisitions and/or purchase orders are prepared as authorization for purchases. | | ☐ | ☐ | ☐ |
| 12. For reimbursement type grants and contracts, reimbursements requested and received are reconciled at least monthly, and a responsible official investigates differences. | | ☐ | ☐ | ☐ |
| **Government Programs** | | | | |
| 1. Accounting policies and procedures are adequate to maintain separate records of the receipts and expenditures related to each grant or award. | | ☐ | ☐ | ☐ |
| 2. Expenditures for each grant or award are recorded according to each of the organization's budget categories. | | ☐ | ☐ | ☐ |

| | Responsible Personnel (Staff Name and Job Title) | Yes | No | N/A |
|---|---|---|---|---|
| 3. Government funds are deposited in separate bank accounts or controlled separately, as required. | | ☐ | ☐ | ☐ |
| 4. Requests for advances and reimbursements are approved by an appropriate official. | | ☐ | ☐ | ☐ |
| 5. Procedures have been established to ensure that individuals are not discriminated against on the grounds of race, color, national origin, age or handicap. | | ☐ | ☐ | ☐ |
| 6. Policies have been established and distributed to employees that help ensure a drug-free workplace. | | ☐ | ☐ | ☐ |
| 7. A time schedule for financial reports is maintained to ensure timely filing. | | ☐ | ☐ | ☐ |
| 8. Financial reports, before they are filed, are reconciled to accounting records. | | ☐ | ☐ | ☐ |
| 9. Policies that are specific to government programs are communicated to the organization's personnel. | | ☐ | ☐ | ☐ |
| 10. Policies and procedures have been established to obtain prior approval of certain costs from the granting agency, as required by OMB Circular No. A-122, "Cost Principles for Nonprofit Organizations." | | ☐ | ☐ | ☐ |
| 11. Policies and procedures have been established to ensure that individuals or organizations receiving benefits are eligible under the specific requirements of the programs. | | ☐ | ☐ | ☐ |
| 12. For programs with matching or earmarking requirements, policies, and procedures have been established to ensure that the limits have been met in accordance with applicable laws and regulations. | | ☐ | ☐ | ☐ |
| 13. Cash management procedures, such as cash flow projections, are employed to help ensure a minimum time lapse between receipts of funds and the disbursement. | | ☐ | ☐ | ☐ |

| | Responsible Personnel (Staff Name and Job Title) | Yes | No | N/A |
|---|---|---|---|---|
| 14. Cost charged directly or indirectly to grants are reviewed by a responsible official for compliance with regulations or agreements (including consideration of whether federal funds are used for partisan political activity). | | ☐ | ☐ | ☐ |
| 15. Policies and procedures have been established to prevent charging grants for unreimbursable items, such as bad debt expenses, fines and penalties, interest, fund-raising, and financial costs. | | ☐ | ☐ | ☐ |
| **Donated/In-Kind Services/Materials** | | | | |
| 1. Records (time sheets or other documentation) are maintained indicating the number of hours, type, value, and valuation method of donated/in-kind services. Records are certified by a responsible official. | | ☐ | ☐ | ☐ |
| 2. Records are maintained indicating the type, value, and valuation method of donated/in-kind materials. | | ☐ | ☐ | ☐ |
| 3. Records are maintained of donated/in-kind facilities received. (This control is usually established when the not-for-profit organization is required to report the value of donated facilities in its financial statements to meet generally accepted accounting principles) | | ☐ | ☐ | ☐ |
| 4. A policy statement defines the methods used for determining the values assigned to donated material. | | ☐ | ☐ | ☐ |
| 5. Donated material is inspected when received. | | ☐ | ☐ | ☐ |
| 6. Donated material is adequately safeguarded from unauthorized personnel. | | ☐ | ☐ | ☐ |
| 7. Use of donated material is approved by appropriate personnel. | | ☐ | ☐ | ☐ |
| **Fixed Assets** | | | | |
| 1. There is a formal organizational chart defining the responsibilities of purchasing, receiving, recording, performing and approving the inventory. | | ☐ | ☐ | ☐ |

| | Responsible Personnel (Staff Name and Job Title) | Yes | No | N/A |
|---|---|---|---|---|
| 2. There are formal written procedures for performing a physical inventory. | | ☐ | ☐ | ☐ |
| 3. An annual physical inventory is taken and adequate count records (tags or sheets) are maintained. | | ☐ | ☐ | ☐ |
| 4. Adequate records of fixed assets costs and depreciation records are maintained. | | ☐ | ☐ | ☐ |
| 5. Written capitalization policies have been established by the board of directors. | | ☐ | ☐ | ☐ |
| 6. Perpetual records are periodically reconciled to the general ledger by an independent person. | | ☐ | ☐ | ☐ |
| 7. Fixed asset records are maintained that adequately classify and identify individual items. | | ☐ | ☐ | ☐ |
| 8. Assets believed to be stolen or vandalized are reported to the State Bureau of Investigation (SBI) according to State law. | | ☐ | ☐ | ☐ |
| 9. Fixed Asset System and appropriate accounts are reconciled monthly. | | ☐ | ☐ | ☐ |
| 10. Gains or losses are properly recognized from disposals of fixed assets in proprietary fund types and nonexpendable trust funds. | | ☐ | ☐ | ☐ ☐ |
| 11. Fixed assets are tagged when procured. | | ☐ | ☐ | ☐ |
| 12. The beginning balance, additions, disposals and ending balances are properly reflected in the notes to the financial statements. | | ☐ | ☐ | ☐ |
| 13. Access to the perpetual fixed asset records is limited to authorized individuals. | | ☐ | ☐ | ☐ |
| 14. There is adequate physical security surrounding the fixed asset items. | | ☐ | ☐ | ☐ |
| 15. There is adequate insurance coverage of the fixed asset items. | | ☐ | ☐ | ☐ |
| 16. Missing items are investigated and reasons for them documented. | | ☐ | ☐ | ☐ |
| **General Controls** | | | | |
| 1. When hiring individuals who will be involved with handling of incoming mail or the handling or recording of cash receipts, a responsible official checks applicants' references and otherwise attempts to evaluate their integrity. | | ☐ | ☐ | ☐ |

| | Responsible Personnel (Staff Name and Job Title) | Yes | No | N/A |
|---|---|---|---|---|
| 2. Solicitation material describes solicitor identification and notifies the donor to expect a prenumbered receipt. | | ☐ | ☐ | ☐ |
| 3. The governing board receives frequent reports on the collection status of major pledges and pending grant applications. | | ☐ | ☐ | ☐ |
| 4. The director or manager investigates customer complaints. | | ☐ | ☐ | ☐ |
| 5. Vendors are reviewed by a responsible official to identify potential conflict of interest situations. | | ☐ | ☐ | ☐ |
| 6. The governing board receives frequent reports of purchases from, and distributions to, related parties. | | ☐ | ☐ | ☐ |
| 7. Responsibilities are clearly defined in writing and communicated. | | ☐ | ☐ | ☐ |
| 8. Management understands the knowledge and skills required to accomplish tasks. | | ☐ | ☐ | ☐ |
| 9. Management gets involved in training. | | ☐ | ☐ | ☐ |
| 10. Policies and procedures are consistent with statutory authority. | | ☐ | ☐ | ☐ |
| 11. Agency compares its actual performance with its goals and objectives. | | ☐ | ☐ | ☐ |
| 12. Management has provided resources to ensure compliance with grant requirements and federal and state laws. | | ☐ | ☐ | ☐ |
| 13. Responsibilities are divided so that no single employee controls all phases of a transaction. | | ☐ | ☐ | ☐ |
| **Subrecipient Monitoring** - This is the monitoring you do with entities with which you have a subrecipient relationship, agencies which you pass-through funds to in order to carry out programs and services on your behalf. | | | | |
| 1. Audit resolution process is documented and maintained in an orderly manner. | | ☐ | ☐ | ☐ |
| 2. Master list of all subrecipients is maintained. | | ☐ | ☐ | ☐ |
| 3. Master list of subrecipients is updated as disbursements are made or as contracts are signed. | | ☐ | ☐ | ☐ |
| 4. Findings identified in audit reports for subrecipients are assigned to appropriate personnel to resolve the findings. | | ☐ | ☐ | ☐ |

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| | Responsible Personnel (Staff Name and Job Title) | Yes | No | N/A |
|---|---|---|---|---|
| 5. Personnel assigned to resolve the audit findings are familiar with the issues to make an adequate resolution. | | ☐ | ☐ | ☐ |
| 6. Audit resolutions are reviewed and approved by a person with approval authority. | | ☐ | ☐ | ☐ |
| 7. Monitoring guide is up-to-date and it covers all aspects of the program which would not be included in the compliance audit of the program. | | ☐ | ☐ | ☐ |
| 8. Written procedures exist for resolution of non-compliance findings and questioned costs identified during monitoring visits. | | ☐ | ☐ | ☐ |
| 9. Monitors are adequately trained to evaluate the programs administered by subrecipients. | | ☐ | ☐ | ☐ |
| 10. Monitors consider factors such as size of grants, prior monitor findings, compliance audit findings, the size of the organization receiving the grant, and the experience of the organization in administering the program in selecting subrecipients for monitoring visits. | | ☐ | ☐ | ☐ |
| 11. Agency is in compliance with reporting requirements of NCGS 143-6.1 (State law) and OMB Circular A-133 (Federal law), as applicable. | | ☐ | ☐ | ☐ |
| **Conflict of Interest** | | | | |
| 1. Agency establishes a written Conflict of Interest Policy that is adopted by the Board of Directors. | | ☐ | ☐ | ☐ |
| 2. Agency adopts procedures that effectively implement the Conflict of Interest Policy and which provide for advance disclosure and periodic audits designed to permit analysis and avoidance of potential problems. | | ☐ | ☐ | ☐ |
| 3. Agency provides Conflict of Interest Disclosure form to all employees. | | ☐ | ☐ | ☐ |
| 4. Management reviews the disclosure form for completeness and identifies each potential or real conflict of interest. | | ☐ | ☐ | ☐ |

| | Responsible Personnel (Staff Name and Job Title) | Yes | No | N/A |
|---|---|---|---|---|
| 5. Management meets with, discusses and summarizes a working management plan of any real or perceived conflicts of interest with the disclosing party. | | ☐ | ☐ | ☐ |
| 6. Agency files all disclosure forms in a personnel file for each employee subject to this policy. | | ☐ | ☐ | ☐ |
| 7. Agency maintains a written, enforced policy on financial conflict of interest. | | ☐ | ☐ | ☐ |
| 8. Agency requires public disclosure of significant financial interests. | | ☐ | ☐ | ☐ |
| 9. Agency reports to awarding offices the existence of any conflicting interest(s) and assures that the interest(s) have been managed, reduced, or eliminated in accordance with regulations. | | ☐ | ☐ | ☐ |
| 10. Agency will make available to State and/or Federal agency on request information regarding all conflicting interest(s) identified by the agency and how those interests have been managed, reduced, or eliminated to protect research from bias. | | ☐ | ☐ | ☐ |
| 11. Agency requires that an individual with a conflicting interest be disqualified from participation in a particular program or activity or specified parts of the program or activity and all such disqualifications are appropriately documented. | | ☐ | ☐ | ☐ |
| 12. Agency requires divestiture or severance of significant financial or other interests which create conflict with the individual's work. | | ☐ | ☐ | ☐ |
| **Relationships with Researchers** | | | | |
| 1. Agency informs research investigators of that policy, the associated reporting responsibilities, and related federal regulations. | | ☐ | ☐ | ☐ |
| 2. Agency requires that the research or other activity be monitored by neutral, independent reviewers. | | ☐ | ☐ | ☐ |

| | Responsible Personnel (Staff Name and Job Title) | Yes | No | N/A |
|---|---|---|---|---|
| **Attestation** | | | | |
| *Self-Assessment Completed by:* | | | | |

Signature

Name and Title

Date

I hearby certify that the information reported above is correct and true to the best of my knowledge and belief:

Signature: Chief Executive Officer

Date