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| *This report contains the Module 1 Content for the following comments: 1,2,3,4,5,6,8,9,11,12,13,14,16,17,18,19,20,21,22,23,25,26,28,29,30,31,32,33,35,36,37,38,39,40,41,42,43,45,46,47,48,49,50,51,53,55,56,58,60,61,62,63,64,66,67,68,71,72,73,74,75,76,78,80,81,82,83,84,86,87,88,89,91,92,93,96,98,100,101,102,103,104,105,106,107,108,109,110,111,112,113,114,115,116,118,119,120,121,123,124,125,126,127,129,130,131,132,133,134* |
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| **Comment 1 ( Arizona Department Of Economic Security, Division Of Aging And Adult Services, Community Action Programs And Services (DAAS/CAPS) ; State in AZ)** |
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| Module 1: Module 1 - State Administration: (pages 2-22)   The CSBG State Office appreciates the prospect of items from this report being auto-populated from the CSBG State Plan.  The State CSBG Office concurs with the comments made by the Community Action Partnership on Module 1. Regarding reporting on the percentages of local agencies having met organizational standards. |
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| **Comment 2 ( Clarity, Impact And Performance Project Steering Committee; RPIC in ID)** |
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| Module 1: No Comment |
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| **Comment 3 ( Hill Country Community Action Association, Inc. ; Eligible Entity/Local Agency in TX)** |
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| Module 1: No Comment |
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| **Comment 4 ( Sacramento Employment And Training Agency (Seta) ; Other/Unknown in CA)** |
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| Module 1: No Comment |
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| **Comment 5 (Action For Better Community ; Eligible Entity/Local Agency in NY)** |
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| Module 1: Module 1, Section D   The agency has two concerns regarding this proposed change. First, the section references the number of agencies that met all of the state-adopted organizational standards. New York State adopted the national standards and enhanced them with additional requirements. It is unclear if this question is asking for the number of agencies that met ONLY the national standards that are uniform across the network, or whether this includes additional criteria that states have added on to the national standards as part of their own state-wide quality assurance plan.   Second, the measure provides data only on the proportion of agencies that are fully compliant in a given year. Given that these new reports will begin only three years into the application of these national standards, it seems sensible to provide more categories of compliance so that states can report how many of their agencies are in full or close to full compliance versus how many remain significantly below full compliance with the standards. |
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| **Comment 6 (Action For Boston Community Development Inc.; Other/Unknown in MA)** |
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| Module 1: No Comment |
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| **Comment 8 (Ashtabula County Community Action Agency; Eligible Entity/Local Agency in OH)** |
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| Module 1: No Comment |
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| **Comment 9 (Association Of Nationally Certified Roma Trainers ; Eligible Entity/Local Agency in N/A)** |
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| Module 1: • One area currently proposed could be modified to increase utility As proposed, the single metric the State Agencies will report on will be the number of eligible entities that meet 100% of the CSBG Organizational Standards. To increase utility of the information, State Agencies should have the option to report the number of agencies at a variety of thresholds such as the number of local agencies that have met 80 — 99%, 60 to 79% or less than 60% (or similar ranges). The single standard of 100% does not show strength or allow for demonstration of progress.  • Some areas may need to be modified to respond to the barriers facing many local agencies to increase clarity regarding the information to be collected. |
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| **Comment 11 (California Community Action Partnership Association; Other/Unknown in CA)** |
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| Module 1: No Comment |
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| **Comment 12 (Cap Service ; Other/Unknown in WI)** |
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| Module 1: State Administration: Module 1: Modify the options CSBG State Lead Agencies/grantees have when reporting to OCS on CSBG Organizational Standards to allow for a broader range of responses as described by the Partnership. There are significant challenges with the way this information is being reported and could expand inappropriately beyond the Organizational Standards. Expecting constant perfection is unrealistic and does not have practical utility for local agencies or the State CSBG Lead Agency. As proposed, the single metric the State Agencies will report on will be the number of eligible entities that meet 100% of the CSBG Organizational Standards. To increase utility of the information, State Agencies should have the option to report the number of agencies at a variety of thresholds that still delineate strong performance or allow for a more accurate reflection of the training and technical assistance needs. For instance State Agencies should be able to report the number of local agencies that have met 100%, 90%, 80%, 70%, 60%, 50%, and less than 50% of the standards. This will allow for the collection of more accurate information; better tracking of results over time; and better, more efficient investment of training and technical assistance for those most in need of enhancing their performance.  Module 1— Summary Analysis. I think there is a risk for misinterpretation of data in a summary or analysis prepared by someone not directly connected to service delivery. Time, sophistication and deep understanding of data and its nuances are required. For example, if a program is designed to serve people for 18-24 months, trying to make assumptions for one year data leaves opportunity for misrepresentation.  Module 1— Section D. There is conflicting language regarding QIP's and TAP's from OCS 1M 138. |
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| **Comment 13 (Cattaraugus Community Action, Inc.; Eligible Entity/Local Agency in NY)** |
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| Module 1: No Comment |
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| **Comment 14 (Center For Community Future ; Other/Unknown in N/A)** |
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| Module 1: No Comment |
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| **Comment 16 (Central Missouri Community Action ; Other/Unknown in MO)** |
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| Module 1: No comment |
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| **Comment 17 (Central Nebraska Community Action Partnership; Other/Unknown in NE)** |
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| Module 1: No Comment |
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| **Comment 18 (City Of Austin Health And Human Services ; State in TX)** |
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| Module 1: No Comment |
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| **Comment 19 (Colorado Community Action Association; State Association in CO)** |
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| Module 1: State Administration: (pages 2-22)   The entirety of the Module 1 - State Administration was not a part of this process until the informal public comment period conducted by NASCSP/OCS in early 2016, and has not been properly vetted and commented upon by State Offices, and thus should be removed from this OMB FR1 process and created through its own process (including convening a specific State Office stakeholder group review ahead of network comments). Not only are there substantial changes to the State Office “Final Report” represented in this module (which again were not properly reviewed/commented upon by the network), but the timelines involved are unrealistic in having State Offices required to provide much of the baseline information contained in this module at the end of August 2016 (in the Model State Plan), for a report that has not yet been formally adopted. Additionally, much of this module notes future Information Memorandum’s (IM’s) and other guidance to be provided by NASCSP/OCS, which all should first be established before the network is asked to provide comment on the proposed changes in this module.  Module 1, Section A: (page # 3-4)  · A1.2 – Add “Head Start” as a potential program administered.   · A1.2 - Add “FEMA – Emergency Disaster Relief” as a potential program administered.  Module 1, Section B: (page # 5-6)   · B.7 – This high-level analysis at the State level is not realistic given the amount of time most States have to aggregate, review, clean and submit the data received from the local CEE’s. In Colorado, the State Office has one month between the deadline for submission of data from local CEE’s to the deadline for submission of the aggregated data to NASCSP, this does not provide enough time for in-depth analysis of trends, findings, etc.  Module 1, Section C: (page # 7)   N/A  Module 1, Section D: (page # 8-9)   · D.2 – Instead of an all or nothing approach to reporting on Organizational Standards, there should be ranges of compliance (such as 0-50%, 51%-75%, 76%-90%, 91%-99%) which would allow for a more detailed point in time snapshot of overall compliance with the Organizational Standards throughout the network.   · D.3 – It is unclear at what point in time we would be reporting Tap’s/QIP’s which could and would drastically change from the time of monitoring to the time of submission of this data. For instance, an agency may initially have a TAP that is easily implemented and corrected within a short-time frame, at which point they would come off of the TAP and be in compliance…would we be expected to report this TAP, or only TAP’s/QIP’s that are active at time of report submission?  Module 1, Section E: (page # 10-14)   N/A  Module 1, Section F: (page # 15-16)   · F.1 – It would be very time-consuming and administratively burdensome to provide all of the actual dates of any and all training and technical assistance activities by the State Office and its partners. Additionally, T/TA activities locally often cross over topics and/or cannot be easily defined according to the list provided. It is appropriate to ask in general what T/TA needs where addressed during the reporting period, but not be get so detailed that the section become overly burdensome to complete.  Module 1, Section G: (page # 17-19)   · G.1 – Add “State Office of Information Technology”.  · G.2 and G.3 – Administratively burdensome. This collection of data begins to outweigh the actual provision of linkages. It may be appropriate to ask what general linkages activities where undertaken at the local level, or for examples of local level linkages, but it is unrealistic to ask the State to report out on detailed linkages activities at the local level. Additionally, this is a duplicative data indicator as the local CEE’s are asked to report on linkages in the Community National Performance Indicators and Strategies/Efforts.  Module 1, Section H: (page # 20-21)   N/A  Module 1, Section I: (page # 22)  I.3 – This assumes that local CEE’s have data to make management decisions (which was the original intent of ROMA Next Generation as I understood it). ROMA Next Generation does not accomplish analyzation of data by local CEE’s and does not support local CEE’s collecting and analyzing data to make management decisions (which would imply a more long-term outlook not continually contained within one program reporting year, which all of this data represents). |
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| **Comment 20 (Colorado Department Of Local Affairs ; Other/Unknown in CO)** |
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| Module 1: Module I is duplicative of the state plan and repetitive in nature, lacking any meaning or applicability to program development. Furthermore, it splits the state plan application and state plan reporting into two completely different operating systems and structures, which is not supportive of true program analysis. The additional reporting burden created is administratively intrusive and unnecessary as it is or could be covered within the current state plan structure.  The proposed reporting period for Module I is the federal fiscal year. This does not align with either our program year (calendar year) or state fiscal year. The data entered in this section under this expectation would also not align with the reporting time period from eligible entities. States should to have the ability choose the reporting period that aligns with the rest of the program reporting or alternatively, Module 1 should be removed completely and accomplished within the model state plan process and existing annual/ biannual renewal plans.  Module I, Section B: (page # 5-6) - In the June 21 webinar, OCS announced that it would be releasing an Information Memorandum "soon" on using ACS data. This 1M has not yet been released, nor has any guidance been issued by OCS for this section. It is unreasonable to request comment on something that has not yet been issued, and will likely not be issued before proposed tracking would begin on October I, 2016 (FEY 17). There is also mention of additional support and tools to be provided but there are no proposed, plans or tools that have been defined to evaluate. These issues further show that this module has not been given appropriate time and attention and should be removed until further consideration has occurred. Module I, Section D: (page # 8-9) - D2 requires that states report only on what entities are meeting 100% of the organizational standards. As we have acknowledged implementation as a process, with a desire for states to show progress towards achieving 100% compliance, reporting should allow for a scale that shows where eligible entities are at in working towards compliance, rather than creating all or none criteria. This section also appears to favor QIPs for even minor items out of compliance. Colorado's preferred methodology is to create a Technical Assistance Plan (TAP) first, and eligible entities may work under a TAP as long as they are making reasonable progress to goals on a timeline agreed upon by both the state and the eligible entity. Colorado would not progress to a Quality Improvement Plan (QIP) unless issues are persistent and/or pervasive or pose a high level of risk to the program, eligible entity or state.  Module I, Section G: (page # 17-19) Colorado's state model is one of state oversight with local control. In this environment, linkages are primarily determined and coordinated at the local level and are not enforced by state offices. In summary:  ROMA Next Generation has moved away from outcomes based reporting and now reflects additional information reporting/annual report measures that triple the amount of indicators requested, and is not relevant, necessary or useful the community action strategy and long-term evaluation data. We request that this Module I was added during the process and has not been given ample consideration and review; it is also not appropriate as part of ROMA Next Generation. We request that this module undergo more discussion and be integrated with the state plan process, rather than included in ROMA NG.  The amount of reporting has been grossly underestimated for CAAs, state association and state agencies. We request an evaluation that prioritizes that data points and returns to outcome-based measurement (versus data reporting) to truly show the impact of community action and CSBG in our nation. We also request consideration of the volume of reporting requested of agencies and subcontractors who may be receiving small dollar amounts but still provide for a critical need in their communities.  We request that HHS/ACF/OCS look at interoperability systems to allow agencies to link multiple date reporting systems without creating yet another unfunded mandate for funder-driven tracking that is not useful for client-centered agencies. We further request that HHS/ACF/OCS provides funding to support the interoperability of systems for CSBG.  The proposed timeline is too much too fast on the heels of the implementation of organizational standards. We request delaying implementation by at least a year and allowing scaled measurement to assess agencies on organizational standards rather than an "all or nothing" approach to evaluating their compliance. |
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| **Comment 21 (Combined Community Action ; Eligible Entity/Local Agency in TX)** |
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| Module 1: No Comment |
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| **Comment 22 (Community Action Agency ; Other/Unknown in NE)** |
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| Module 1: No Comment |
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| **Comment 23 (Community Action Agency Of Beaver County ; Eligible Entity/Local Agency in PA)** |
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| Module 1: No Comment |
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| **Comment 25 (Community Action Agency Of North Alabama ; Other/Unknown in AL)** |
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| Module 1: NO Comment |
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| **Comment 26 (Community Action Agency Of Northwest Alabama, Inc.; Eligible Entity/Local Agency in AL)** |
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| No Module 1 Content for this comment. |
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| **Comment 28 (Community Action Agency Of Northwest Alabama, Inc. ; Eligible Entity/Local Agency in AL)** |
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| No Module 1 Content for this comment. |
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| **Comment 29 (Community Action Agency Of Southern New Mexico; State Association in NM)** |
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| Module 1: Module 1 - State Administration: (pages 2-22)   Module 1, Section D: (page # 8-9)   Response: D3 (Page 9) What is the criteria or cause for putting a QIP or TAP in place? It is suggesting that one unmet standard could constitute a TAP or QIP? Will guidance or documents be provided for State use? Is this totally at the States discretion? |
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| **Comment 30 (Community Action Association ; State Association in NM)** |
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| Module 1: Module 1, Section D: (page # 8-9)  Response: D3 (Page 9) What is the criteria or cause for putting a QIP or TAP in place? It is suggesting that one unmet standard could constitute a TAP or QIP? Will guidance or documents be provided for State use? Is this totally at the States discretion? |
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| **Comment 31 (Community Action Commission Of Erie, Huron, & Richland Counties ; Eligible Entity/Local Agency in N/A)** |
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| Module 1: No Comment |
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| **Comment 32 (Community Action Committee Of Victoria, Texas; Eligible Entity/Local Agency in TX)** |
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| Module 1: No Comment |
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| **Comment 33 (Community Action Council ; Eligible Entity/Local Agency in KY)** |
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| Module 1: No Comment |
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| **Comment 35 (Community Action Council Of Portage County; Other/Unknown in OH)** |
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| Module 1: No Comment |
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| **Comment 36 (Community Action Partnership ; National Partner in DC)** |
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| Module 1: Module 1: State Administration   · Significantly modify Question D2 to allow for better and more accurate reporting. Question D2 does not allow for State CSBG Lead Agencies to report the number of agencies not meeting 100% of the Organizational Standards thus providing one, very limited and difficult to consistently achieve metric. It is important to including reporting on the Organizational Standards; however, the proposed format for reporting is problematic.   · Modify Question D3 to reflect the purpose and intent of Technical Assistance Plans and Quality Improvement Plans. Question D3 does not clarify that a Technical Assistance Plan rather than a Quality Improvement Plan is the preferred option for agencies not meeting Organizational Standards as per the guidance provided in OCS IM 138.   · Remove or significantly modify Question B7. The question places an undue burden on State CSBG Lead Agencies and needs to be modified to be reflective of data collected. |
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| **Comment 37 (Community Action Partnership Of Kern ; Other/Unknown in CA)** |
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| Module 1: Module 1 - State Administration: (pages 2-22)   Module 1, Section A: (page # 3-4)   · No Comments   Module 1, Section B: (page # 5-6)   · Question B7 Analysis: This question will require information be collected that goes beyond what is being collected through the ROMA data included in this draft annual report. The estimated time burden in the federal register did not assume this additional data collection. This is added reporting burden on State CSBG Lead Agencies because as written, the questions require the agencies to go beyond merely reporting the data and conduct sophisticated data analysis that will require additional time and may exceed the capacity of agency staff to provide meaningful information. |
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| **Comment 38 (Community Action Partnership Of Orange County; Eligible Entity/Local Agency in CA)** |
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| Module 1: No Comment |
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| **Comment 39 (Community Action Partnership Of Riverside County; Eligible Entity/Local Agency in CA)** |
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| Module 1: Section D.2: Organizational Standards Performance (page # 9)   The information requested in the table for Number that Met All State Standards/Number that Did Not Meet All State Standards does not seem to have practical utility. It would seem more useful and relevant to track the number of agencies meeting each individual Standard, from 1.1 to 9.4. Then, instead of reporting on the number of agencies meeting all/not meeting all of the Organizational Standards, it would reflect the number of agencies meeting each individual Standard in each State, and determination could be made on which Standards each State should focus on providing technical assistance for, or possibly having as priorities for allocating Discretionary CSBG funding to, etc. Also, this would more accurately reflect how each State, and ultimately how the CSBG network is doing in regards to meeting/not meeting each individual Standard. |
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| **Comment 40 (Community Action Partnership Of San Luis Obispo County, Inc.; Eligible Entity/Local Agency in CA)** |
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| Module 1: No Comment |
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| **Comment 41 (Community Action Planning Council Of Jefferson County, Inc.; Eligible Entity/Local Agency in NY)** |
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| Module 1: State Administration: (pages 2-22)   Module 1, Section A: (page # 3-4)   • No Comments  Module 1, Section B: (page # 5-6)   • Question B7 Summary Analysis. As written, this question exceeds the capacity of many state CSBG Lead Agencies (grantees). This question will require information be collected that goes beyond what is being collected through the ROMA data included in this draft annual report. The estimated time burden in the federal register did not assume this additional data collection. This is added reporting burden on State CSBG Lead Agencies because as written, the questions require the agencies to go beyond merely reporting the data and conduct sophisticated data analysis that will require additional time and may exceed the capacity of agency staff to provide meaningful information.  Module 1, Section C: (page # 7)   • No comment  Module 1, Section D: (page # 8-9)   • D2. This question is too narrow in its potential responses and decreases the capacity of the state to fulfill its duties and impacts both the quality of the data collected and the utility of the data. The single metric sought is the number of entities that met all state-adopted organizational standards; this is a poor metric when used in isolation of performance at a variety of levels. No one and no agency will score 100% of anything 100% of the time. Ongoing perfection is an unreasonable expectation and is inappropriate to be used as the single reporting measure. This question should be changed to allow states to report on how many entities met 100%, 90%, 80%, 70%, 60% and less than 50% of the Standards. This will increase the performance of states by allowing them to focus their limited training and technical assistance resources on those entities not meeting multiple standards. It would also improve the quality of data as it will provide a more robust assessment of performance.  • This question needs to be re-worked in order to manage the burden of effort on states and eligible entities. The current language conveys that a Quality Improvement Plan (QIP) is the preferred option if an eligible entity has one or more unmet organizational standards. OCS IM 138 clearly articulates the Technical Assistance Plan (TAP) is the preferred option. This section should also reference IM 138’s statement that as long as an eligible entity is making progress towards meeting the standards, the state should not take action to reduce or eliminate funding.  Module 1, Section E: (page # 10-14)   • No comments  Module 1, Section F: (page # 15-16)   • No comments  Module 1, Section G: (page # 17-19)   • G3b. This question would not be able to be answered with the ROMA data being collected as proposed. This will increase the burden on states to report.  Module 1, Section H: (page # 20-21)   • No comments  Module 1, Section I: (page # 22)   • I4. This question seeks information regarding ROMA Goals. As the ROMA Goals are not listed in one module, it noted here to re-instate the current ROMA Goal: Agencies increase their capacity to achieve results. It is unfortunate there is not a module or section number that requests feedback on the data collection formatted around the set of new national ROMA goals. |
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| **Comment 42 (Community Action Program Associations For Community Action Agencies; State Association in WI)** |
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| Module 1: No Comment |
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| **Comment 43 (Community Renewal Team ; Eligible Entity/Local Agency in CT)** |
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| Module 1: Module 1 - State Administration: (pages 2-22)   Module 1, Section D: (page # 8-9)   a. D2. There are significant challenges with the way this information is being reported and potential creates a misuse of the Organizational Standards. As proposed, the metric the State Agencies will report on will be the number of eligible entities that meet 100% of the CSBG Organizational Standards. State agencies should have the option to report the number of agencies at a variety of thresholds (100%, 90%, 80%, 70%, 60 %...) that show strong performance or the training and technical needs of the agencies. Presenting this type of information in this way will reflect a more accurate picture of agency performance will allow for better tracking over time and assist the State agencies in more efficient investment of training and technical assistance.   b. To manage the burden of effort on agency this question needs to be reworked. The Quality Improvement Plan (QIP) is the current language referenced as the preferred option is an eligible entity has one or more unmet organizational standards. A Technical Assistance Plan (TAP) is the preferred option in OCS IM138. As mentioned in IM138 as long as an eligible entity is making progress towards meeting the standards, the state should not take action to reduce or eliminate funding, this should be referenced. |
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| **Comment 45 (Del Norte Senior Center, Inc.; Eligible Entity/Local Agency in CA)** |
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| Module 1: Module 1 - State Administration: (pages 2-22)  State agency staff and administration would be in the best position to comment on specific changes from existing state reporting requirements; however, any increased reporting burden to the states would pass down to the local agencies. Also, to the extent that narrative information is being required, the burden of reporting in narrative format is significantly more than that of reporting statistical data. The utility and usefulness of requiring every agency to report this information just for the sake of humanizing the program is questionable. |
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| **Comment 46 (Delaware Opportunities Inc.; Eligible Entity/Local Agency in DE)** |
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| Module 1: No Comment |
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| **Comment 47 (Department Of Community Service And Development ; State in CA)** |
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| Module 1: The State Accountability Measures are a significant improvement to the integrity and evaluation of CSBG. These measures would require states to demonstrate the Results Oriented Management and Accountability (ROMA) cycle through assessment, planning, implementation, achievement of results, and evaluation. This is a measurable step to hold states accountable to the strategies and plans indicated in the State Plan. It is also a method to report out to the CSBG network, the Office of Community Services and the general public the successes and efforts of Community Action. Considering that fact, there are still areas of improvement to be addressed. Module 1, Section B.7 contains statewide goals and accomplishments that require the State to provide a summary analysis on major changes and trends within the CSBG network. On the surface, the effort appears straightforward. However, upon further inspection some of the questions asked would require the State to implement several additional data collection and analysis processes to effectively report out on the questions asked.  Particular efforts identified in Section B.7 will prove difficult to analyze:  O "In what domains did eligible entities have the greatest impact in the State based on the State's analysis of data?" o The Department has 60 agencies servicing 58 distinct counties. The assessment of impact is not discreet due to the vast differences in service territory (rural and urban), population (language, ethnic and cultural diversity) and agency operations. It would be very difficult to assess impact statewide with the degree of variance and effectiveness of different domains administered in a myriad of fashions.  "How well did the State and eligible entities do in meeting the needs of individuals, families, and communities compared to targets? In what areas were eligible entities most successful in meeting their targets? In what areas did eligible entities experience challenges in meeting their targets?" o The review of programmatic data required of the current annual reporting structure, CSBG Information Survey (CSBG IS), requires us to analyze current and prior year data to assess the changes in service delivery. This effort would require the Department to add additional data analysis tools to draw conclusions based upon the plethora of variance in program structure. This again is a difficult assessment to achieve and would require a uniform structure to achieve.  The challenges put forth in Section B.7 are directly correlated with increased workload associated with evaluating greatest impact and trends. This effort is very subjective, labor intensive and would require significant and increased alterations to data collection systems and reporting structures. It is highly encouraged that this section be revisited or revised to remove the subjectivity and to address the resource burden required to complete this section of the report. |
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| **Comment 48 (Department Of Housing And Community Development ; State in MA)** |
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| Module 1: Module 1 – Section B we are concerned about the quality and clarity of information to be collected for the following questions:   •B.2. Eligible Entity Satisfaction Targets – The state’s response to this question relies greatly on the ability of OCS, through use of the ACSI Survey, to achieve an acceptable response rate, administer the survey with regularity, and provide subsequent feedback to States in a timely manner. In the first ACSI survey administered to the CAA network in 2015, a number of State’s learned too few of their CAAs responded for the rate to be statistically significant. In our State, it took several encouraging reminders to our network partners to achieve a statistically significant response. We are concerned that if the ACSI is administered annually (or even bi-annually), the response rate will decline further and, as a result, feedback provided will become less reliable for us to adjust our State Plan goals based upon. Additionally, while OCS promised further guidance on this particular question because the CSBG State Plan due September 1, 2016 requires us to set an Eligible Entity Satisfaction Target, no further guidance has been provided to date.  •B.7. Summary Analysis – The State’s ability to provide a meaningful analysis of the trends and results this question alludes to relies on our ability to share data from other federal programs CAAs coordinate CSBG funding with (e.g. – Head Start, WIC, HUD, SNAP, WIOA, etc.). Few meaningful data “bridges” between different funding sources currently exist at the Federal level. We are hopeful, however, that proposed changes to the CSBG National Performance Indicators (NPIs), etc. will allow our state to provide a more meaningful analysis of trends in demographic shifts of those served by our agencies as well as the type and frequency of services provided. |
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| **Comment 49 (Department Of Human Services ; State in AR)** |
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| Module 1: Module 1 - State Administration: (pages 2-22)   As a State Administration I am concerned that the proposed Module 1 reporting date of March 31, 2017 does not allow State CSBG Lead Agencies sufficient time to prepare for reporting on this information, updating their internal processes and procedures, and using OLDC.   Module 1, Section A: (page # 3-4)   The American Customer Satisfaction Index (ACSI) was administered for the first time in FY 2015 and States received their results in February 2016. States were not fully informed of intended reporting requirements and State responsibilities around the ACSI, until Module 1 was released for review during the 60-day comment period and additional guidance from OCS was projected to be released by August 2016. States will need guidance and additional time to work with their agencies and prepare reports on their use of the ACSI.   Module 1, Section C: (page # 7)   Analysis is contextual and these questions should not be mandated as implied in the language, and are only examples of the ways in which data could be analyzed and understood. Language in the final bullet that refers to States “encouraging” local entities to change based on State analysis can be interpreted as a potential intrusion of State authority upon statutorily mandated local control and should be altered or eliminated. States may need guidance and additional training to identify questions and data analysis procedures to guide state-level analysis. |
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| **Comment 50 (Department Of Social Services Office Of Community Services ; State in CT)** |
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| Module 1: Module 1 - State Administration: (pages 2-22)   Module 1, Section D: (page # 8-9)   o Is there a federal threshold for when an agency is not to be put on a TAP re: Organizational Standards? Or is this at the discretion of the State? |
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| **Comment 51 (Dickinson Community Action Partnership ; Other/Unknown in ND)** |
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| Module 1: OCS on CSBG Organizational Standards to allow for a broader range of responses. As noted below, there are significant challenges with the way this information is being reported and creates a misuse of the Organizational Standards. Expecting constant perfection is unrealistic and does not have practical utility for local agencies or the State CSBG Lead Agency. As proposed, the single metric the State Agencies will report on will be the number of eligible entities that meet 100% of the CSBG Organizational Standards. To increase utility of the information, State Agencies should have the option to report the number of agencies at a variety of thresholds that still delineate strong performance or allow for a more accurate reflection of the training and technical assistance needs.  Module 1, Section B: (page # 5-6)  module 1 • Question 87 Summary Analysis. As written, this question exceeds the capacity of many state CSBG Lead Agencies (grantees). This question will require information be collected that goes beyond what is being collected through the ROMA data included in this draft annual report. The estimated time burden in the federal register did not assume this additional data collection. This is added reporting burden on State CSBG Lead Agencies because as written, the questions require the agencies to go beyond merely reporting the data and conduct sophisticated data analysis that will require additional time and may exceed the capacity Of agency staff to provide meaningful information.  Module 1, Section D: (page # 8-9)   D2. This question is too narrow in its potential responses and decreases the capacity of the state fulfill its duties and impacts both the quality of the data collected and the utility of the data. The single metric sought is the number of entities that met all state-adopted organizational standards; this is a poor metric when used in isolation of performance at a variety of levels. No one and no agency will score 100% of anything 100% of the time. Ongoing perfection is an unreasonable expectation and is inappropriate to be used as the single reporting measure. This question should be changed to allow states to report on how many entities met 100%, 90%, 80%, 70%, 60% and less than 50% of the Standards. This will increase the performance of states by allowing them to focus their limited training and technical assistance resources on those entities not meeting multiple standards. It would also improve the quality of data as it will provide a more robust assessment of performance.  This question needs to be re-worked in order to manage the burden of effort on states and eligible entities. The current language conveys that a Quality |
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| **Comment 53 (Division Of Sate Service ; State in DE)** |
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| Module 1: No Comment |
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| **Comment 55 (Florida Department Of Economic Opportunity ; Other/Unknown in FL)** |
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| Module 1: \* Changes will take place mostly on a state level, but we need to remember that changes made at that level could eventually affect us at the local level. Module 2 is information that we already gather and provide as the total amount of   \* CSBG funding expended during the reporting period based on the various domains.   \* Allowing state agencies to only provide a 100% or fail to local agencies for CSBG Organizational Standards doesn’t provide a true picture of the agencies standards. States should be able allowed to report how many agencies met 100%, 90%, 80%, etc. in order to truly reflect a state’s performance. Also, it would allow for focused technical assistance on agencies with the most need. |
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| **Comment 56 (Four Square Community Action ; Other/Unknown in NC)** |
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| Module 1: No Comment |
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| **Comment 58 (Greater Bergen Community Action; Eligible Entity/Local Agency in NJ)** |
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| Module 1: Module 1 - State Administration: (pages 2-22)   Module 1, Section D: (page # 8-9)  High passing grades for almost everything is 90-100%, not just 100%.Considering the number of standards, changing this to 95% would give a better idea of where the agencies stand, instead of this all or nothing approach. |
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| **Comment 60 (Hinds County Human Resources Agency ; Other/Unknown in MS)** |
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| Module 1: Module 1, Section A: (page # 3-4) No Comments   Module 1, Section B: (page # 5-6)   Question B7 Summary Analysis. As written, this question exceeds the capacity of many state CSBG Lead Agencies (grantees). This question will require information be collected that goes beyond what is being collected through the ROMA data included in this draft annual report. The estimated time burden in the federal register did not assume this additional data collection. This is added reporting burden on State CSBG Lead Agencies because as written, the questions require the agencies to go beyond merely reporting the data and conduct sophisticated data analysis that will require additional time and may exceed the capacity of agency staff to provide meaningful information.   Module 1, Section C: (page # 7)   No comment   Module 1, Section D: (page # 8-9)   D2. This question is too narrow in its potential responses and decreases the capacity of the state fulfill its duties and impacts both the quality of the data collected and the utility of the data. The single metric sought is the number of entities that met all state-adopted organizational standards; this is a poor metric when used in isolation of performance at a variety of levels. No one and no agency will score 100% of anything 100% of the time. Ongoing perfection is an unreasonable expectation and is inappropriate to be used as the single reporting measure. This question should be changed to allow states to report on how many entities met 100%, 90%, 80%, 70%, 60% and less than 50% of the Standards. This will increase the performance of states by allowing them to focus their limited training and technical assistance resources on those entities not meeting multiple standards. It would also improve the quality of data as it will provide a more robust assessment of performance.   This question needs to be re-worked in order to manage the burden of effort on states and eligible entities. The current language conveys that a Quality Improvement Plan (QIP) is the preferred option if an eligible entity has one or more unmet organizational standards. OCS IM 138 clearly articulates the Technical Assistance Plan (TAP) is the preferred option. This section should also reference IM 138’s statement that as long as an eligible entity is making progress towards meeting the standards, the state should not take action to reduce or eliminate funding.   Module 1, Section E: (page # 10-14)   No comments   Module 1, Section F: (page # 15-16)   No comments   Module 1, Section G: (page # 17-19)    G3b. This question would not be able to be answered with the ROMA data being collected as proposed. This will increase the burden on states to report.   Module 1, Section H: (page # 20-21)   No comments   Module 1, Section I: (page # 22)   I4. This question seeks information regarding ROMA Goals. As the ROMA Goals are not listed in one module, it noted here to re-instate the current ROMA Goal: Agencies increase their capacity to achieve results. It is unfortunate there is not a module or section number that requests feedback on the data collection formatted around the set of new national ROMA goals. |
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| **Comment 61 (Illinois Association Community Action Agency ; Other/Unknown in IL)** |
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| Module 1: Module 1, Section B: (page # 5-6)     Question B7 Summary Analysis. As written, this question exceeds the capacity of many state CSBG Lead Agencies (grantees). This question will require information be collected that goes beyond what is being collected through the ROMA data included in this draft annual report. The estimated time burden in the federal register did not assume this additional data collection. This is added reporting burden on State CSBG Lead Agencies 6 Illinois Association of Community Action Agencies Feedback — CSBG Annual Report OMB PRA Clearance FRN #1 because as written, the questions require the agencies to go beyond merely reporting the data and to conduct sophisticated data analysis that will require additional time and may exceed the capacity of agency staff to provide meaningful information.  Module I, Section D: (page # 8-9)  D2. This question is too narrow in its potential responses. As a result, it decreases the capacity of the state to fulfill its duties and impacts both the quality of the data collected and the utility of the data. The single metric sought is the number of entities that met all state-adopted organizational standards; this is a poor metric when used in isolation of performance at a variety of levels. No one and no agency will score 100% of anything 100% of the time. Ongoing perfection is an unreasonable expectation and is inappropriate to be used as the single reporting measure. This question should be changed to allow states to report on how many entities met 100%, 90%, 80%, 70%, 60% and less than 50% of the Standards. This will increase the performance of states by allowing them to focus their limited training and technical assistance resources on those entities not meeting multiple standards. It would also improve the quality of data as it will provide a more robust assessment of performance.  This question needs to be re-worked in order to manage the burden of effort on states and eligible entities. The current language conveys that a Quality Improvement Plan (QIP) is the preferred option if an eligible entity has one or more unmet organizational standards. OCS 1M 138 clearly articulates the Technical Assistance Plan (TAP) is the preferred option. This section should also reference 1M 138's statement that as long as an eligible entity is making progress towards meeting the standards, the state should not take action to reduce or eliminate funding. The expectation that CAAs can be perfect, i.e. 100% compliant is not realistic. On any given day, agencies/programs face uncertainty — it is the nature of this business. Instead, consider a scaling of compliance that will allow for improvement plans to be genuine, thoughtful and crafted towards innovation. There should also be resilience scaling as well, which examines past practices and the agency's capacity to self-correct.  Module I, Section G: (page # 17-19)   G3b. Collecting the ROMA data as is being proposed would not provide an answer to this question. Data collection to answer this question will further increase the burden on states to report.  Module I, Section I: (page # 22)  14. This question seeks information regarding ROMA Goals. As the ROMA Goals are not listed in one module, it noted here to re-instate the current ROMA Goal: Agencies increase their capacity to achieve results. It is unfortunate there is not a module or section number that requests feedback on the data collection formatted around the set of new national ROMA goals. |
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| **Comment 62 (Inca Community Service; Eligible Entity/Local Agency in OK)** |
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| Module 1: Section D: (page # 8-9)   · The single metric of the number of entities that met ALL state-adopted organizational standards is too narrow. It does not show a clear picture of the agencies. No one and no agency will score 100% of anything 100% of the time. Perfection to this point is an unreasonable expectation. The purpose should be to see which agencies are thriving and which need more training and technical assistance. |
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| **Comment 63 (Indiana Housing And Community Development Authority ; State in ID)** |
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| Module 1: Module 1, Section A: (page # 3-4)   Module 1, Section B: (page # 5-6)   B1 Auto populated from plan   B2 No   B3 We have public hearing and send information out to agencies to get feedback.   B4 Agency Level   B5 & B6 Narratives will provide information   B7 Although CSBG has a broad interpretation of funding use, as a lead State Agency, IHCDA need to provide more direction and oversight to ensure that use of funds is being used to develop programs that produce results and reduce poverty.   Module 1, Section C: (page # 7)   C1 –Auto populated   C2 – Auto populated   C3- No Change, Allocation remained the same which agencies received 90%, will be populated  Module 1, Section D: (page # 8-9)  D1 Is this the CAR will be reviewed during monitoring   D2 Auto populated   D3 Monitoring (Steve)   Module 1, Section E: (page # 10-14)   E1 -No changes made to the formula   E2 Auto populated   E3 Yes allocation was made within 30 days.   E4 Auto Populated  E5 Auto Populated   E6 Auto Populated   E7 Auto Populated   E8 Take from State Plan   E9 Auto Populated   Module 1, Section F: (page # 15-16)   F 1 Auto Populated   F 2 Take form State Plan   Module 1, Section G: (page # 17-19)   G 1 Auto Populated   G 2 Auto Populated   G 3 Auto Populated   G4 Take form State Plan   G 5 Auto Populated   G 6 Auto Populated   Module 1, Section H: (page # 20-21)  Steve’s section- Monitoring   Module 1, Section I: (page # 22)   \* Consider adding remote or desk-top monitoring as an additional monitoring option   \* Consider adding self-assessment as an additional monitoring option |
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| **Comment 64 (Iowa Community Action Association; Eligible Entity/Local Agency in IA)** |
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| Module 1: Module I - State Administration: (pages 6-7)   B7 Summary Analysis. As written, this question seems to exceed the capacity of State CSBG Lead Agencies. This question will require information be collected beyond what is being collected through the ROMA data included in this draft annual report. The estimated time burden in the federal register Agencies because as written, the questions require the agencies to go beyond merely reporting the data and conduct sophisticated data analysis that will require additional time and may exceed the capacity of agency staff to provide meaningful information.  Module I, Section D: (page # 8-9)   D2 Organizational Standards Performance. We believe this question is too narrow in its potential responses and decreases the capacity of the state fulfill its duties and impacts both the quality of the data collected and the utility of the data. The single metric sought is the number of entities that met all state-adopted organizational standards; this is a poor metric when used in isolation of performance at a variety of levels. No one and no agency will score 100% of anything 100% of the time. Ongoing perfection is an unreasonable expectation and is inappropriate to be used as the single reporting measure. This question should be changed to allow states to report on how many entities met 100%, 90%, 80%, 70%, 60% and less than 50% of the Standards. This will increase the performance of states by allowing them to focus their limited training and technical assistance resources on those entities not meeting multiple standards. It would also improve the quality of data as it will provide a more robust assessment of performance.  This question needs to be re-worked in order to manage the burden of effort on states and eligible entities. The current language conveys that a Quality Improvement Plan (QIP) is the preferred option if an eligible entity has one or more unmet organizational standards. OCS 1M 138 clearly articulates the Technical Assistance Plan (TAP) is the preferred option. This section should also reference 1M 138's statement that as long as an eligible entity is making progress towards meeting the standards, the state should not take action to reduce or eliminate funding. |
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| **Comment 66 (Lakes And Prairies Community Action Partnership ; Other/Unknown in MN)** |
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| Module 1: Module 1 - State Administration: (pages 2-22)  Module l, Section D2: (page # 8-9)  This question is too narrow in its potential responses and decreases the capacity of the state fulfill its duties and impacts both the quality of the data collected and the utility of the data. The single metric sought is the number of entities that met all state-adopted organizational standards; this is a poor metric when used in isolation of performance at a variety of levels. No one and no agency will score 100% of anything 100% of the time. Ongoing perfection is an unreasonable expectation and is inappropriate to be used as the single reporting measure. This question should be changed to allow states to report on how many entities met 100%, 90%, 80%, 70%, 60% and less than 50% of the Standards. This will increase the performance of states by allowing them to focus their limited training and technical assistance resources on those entities not meeting multiple standards. It would also improve the quality of data as it will provide a more robust assessment of performance. This question needs to be re-worked in order to manage the burden of effort on states and eligible entities. The current language conveys that a Quality Improvement Plan (QIP) is the preferred option if an eligible entity has one or more unmet organizational standards. OCS 1M 138 clearly articulates the Technical Assistance Plan (TAP) is the preferred option. This section should also reference 1M 13 8's statement that as long as an eligible entity is making progress towards meeting the standards, the state should not take action to reduce or eliminate funding. |
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| **Comment 67 (Lorain County Community Action Agency ; Other/Unknown in OH)** |
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| Module 1: No Comment |
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| **Comment 68 (Louisville Metro Community Service ; State in KY)** |
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| Module 1: No Comment |
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| **Comment 71 (Maine Community Action Association ; Other/Unknown in NE)** |
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| Module 1: No Comment |
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| **Comment 72 (Massachusetts Community Action Agency Planners’ Group; State Association in MA)** |
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| Module 1: No Comment |
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| **Comment 73 (Maui Economic Opportunity Inc. ; Other/Unknown in HI)** |
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| Module 1: No Comment |
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| **Comment 74 (Merced County Community Action Agency ; Other/Unknown in CA)** |
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| Module 1: No Comment |
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| **Comment 75 (Michigan Community Action ; Eligible Entity/Local Agency in MI)** |
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| Module 1: Module 1: Modify the options CSBG State Lead Agencies/grantees have when reporting to OCS on CSBG Organizational Standards to allow for a broader range of responses There are significant challenges with the way the proposed changes to the CSBG Annual Report requests information and erodes the effectiveness of the Organizational Standards. The reporting tools set up false expectations of the data and performance. As proposed, the single metric the State Agencies will report on will be the number of eligible entities that meet 100% of the CSBG Organizational Standards. State Agencies should have the option to report the number of agencies at a variety of thresholds that still delineate strong performance or allow for a more accurate reflection of the training and technical assistance needs.  Module I - State Administration: (pages 2-22)   Module I, Section B: (page # 5-6)   Question B7 Summary Analysis. As written, this question exceeds the capacity of many state CSBG Lead Agencies (grantees). This question will require information be collected that goes beyond what is being collected through the ROMA data included in this draft annual report. The estimated time burden in the federal register did not assume this additional data collection. This is added reporting burden on State CSBG Lead Agencies because as written, the questions require the agencies to go beyond merely reporting the data and conduct sophisticated data analysis that will require additional time and may exceed the capacity of agency staff to provide meaningful information.  Module I, Section D: (page # 8-9)   D2. This question is too narrow in its potential responses and decreases the capacity of the state fulfill its duties and impacts both the quality of the data collected and the utility of the data. The single metric sought is the number of entities that met all state-adopted organizational standards; this is a poor metric when used in isolation of performance data variety of levels. No one and no agency will score 100% of anything 100% of the time. Ongoing perfection is an unreasonable expectation and is inappropriate to be used as the single reporting measure. This question should be changed to allow states to report on how many entities met 100%, 90%, 80%, 70%, 60% and less than 50% of the Standards. D3. This question needs to be re-worked in order to manage the burden of effort on states and eligible entities. The current language conveys that a Quality Improvement Plan (QIP) is the preferred option if an eligible entity has one or more unmet organizational standards. OCS 1M 138 clearly articulates the Technical Assistance Plan (TAP) is the preferred option. This section should also reference 1M 138's statement that as long as an eligible entity is making progress towards meeting the standards, the state should not take action to reduce or eliminate funding.  Module 1, Section G: (page # 17-19)   G3b. This question would not be able to be answered with the ROMA data being collected as proposed. This will increase the burden on states to report. |
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| **Comment 76 (Minnesota Community Action Partnership; State Association in MN)** |
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| Module 1: State Administration  Module 1, Section B: (page # 5-6)   · Question B7 Summary Analysis. As written, this question exceeds the capacity of many state CSBG Lead Agencies (grantees). This question will require information be collected that goes beyond what is being collected through the ROMA data included in this draft annual report. The estimated time burden in the federal register did not assume this additional data collection. This is added reporting burden on State CSBG Lead Agencies because as written, the questions require the agencies to go beyond merely reporting the data and to conduct sophisticated data analysis that will require additional time and may exceed the capacity of agency staff to provide meaningful information. 100 Empire Drive | Suite 202 | Saint Paul, MN 55103 | www.MinnCAP.org  Module 1, Section D: (page # 8-9)   · D2. This question is too narrow in its potential responses. As a result, it decreases the capacity of the state to fulfill its duties and impacts both the quality of the data collected and the utility of the data. The single metric sought is the number of entities that met all state-adopted organizational standards; this is a poor metric when used in isolation of performance at a variety of levels. No one and no agency will score 100% of anything 100% of the time. Ongoing perfection is an unreasonable expectation and is inappropriate to be used as the single reporting measure. This question should be changed to allow states to report on how many entities met 100%, 90%, 80%, 70%, 60% and less than 50% of the Standards. This will increase the performance of states by allowing them to focus their limited training and technical assistance resources on those entities not meeting multiple standards. It would also improve the quality of data as it will provide a more robust assessment of performance.  · This question needs to be re-worked in order to manage the burden of effort on states and eligible entities. The current language conveys that a Quality Improvement Plan (QIP) is the preferred option if an eligible entity has one or more unmet organizational standards. OCS IM 138 clearly articulates the Technical Assistance Plan (TAP) is the preferred option. This section should also reference IM 138’s statement that as long as an eligible entity is making progress towards meeting the standards, the state should not take action to reduce or eliminate funding.  Module 1, Section G: (page # 17-19)   · G3b. Collecting the ROMA data as is being proposed would not provide an answer to this question. Data collection to answer this question will further increase the burden on states to report.  Module 1, Section I: (page # 22)   · I4. This question seeks information regarding ROMA Goals. As the ROMA Goals are not listed in one module, it noted here to re-instate the current ROMA Goal: Agencies increase their capacity to achieve results. It is unfortunate there is not a module or section number that requests feedback on the data collection formatted around the set of new national ROMA goals. |
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| **Comment 78 (Missouri agency Inc. ; Other/Unknown in MO)** |
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| Module 1: No Comment |
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| **Comment 80 (Montgomery County Community Action Development Commission; Other/Unknown in PA)** |
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| Module 1: No Comment |
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| **Comment 81 (Multi-Service Center (Msc) ; Eligible Entity/Local Agency in WA)** |
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| Module 1: No Comment |
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| **Comment 82 (National Association For State Community Service Program ; Other/Unknown in N/A)** |
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| Module 1: 3. Module 1   a. B.2 and B.3 Eligible Entity Satisfaction Targets: There are issues related to completing B.2 and B.3. These issues are related to the need for statistically significant data, guidance from OCS, and consistent administration and dissemination of the survey and the results.   b. B.7 Summary Analysis: Analysis is contextual and therefore, these questions should not be mandated. Limited data sharing across programs creates challenges for meaningful analysis of trends and results.   c. D.2 Organizational Standards Performance: This question sets an unreasonable standard for CAAs to meet 100% of the Organizational Standards in a reporting period. NASCSP acknowledges this standard is set in the CSBG State Plan, but believes it should not be the single reporting measure.  d. D.3 QIPs and TAPs: Additional guidance will be necessary to ensure consistent practices throughout the CSBG Network for creating and implementing TAPs and QIPs.   e. H.4 and H.5 QIPs: Question H.4 and H.5 will require additional training and technical assistance and guidance from OCS before implementation of Module 1.  Module 1 – State Administration   The sections included to manage and measure State Administration align well with the CSBG State Plan and State Accountability Measures; however, since Module 1 was not included in the initial feedback period for the proposed annual report, additional conversation, training and technical assistance, and concrete guidance are needed prior to implementation. Given its importance, Module 1 deserves thorough review and consideration by the full CSBG Network. This need for additional vetting directly effects the projected timeline for reporting on this module.   Overall, NASCSP is concerned that OIS will not have sufficient time to build Module 1 in OLDC and work with States to ensure a smooth data entry process by March 31, 2017. Additionally, the proposed Module 1 reporting date of March 31, 2017 does not allow State CSBG Lead Agencies sufficient time to prepare for reporting on this information, update their internal processes and procedures, and use OLDC. While, NASCSP recognizes OCS’ budget request includes additional set aside funding to support States, it is essential—not optional— that States receive the funding necessary to fulfill the increased administration and oversight requirements. Given that this is a request and not an approved budget item, NASCSP is conscientious of the potentially increased need to dedicate staff time and resources at the State level in order to continue the CSBG Network’s focus on quality administration and oversight. The following sections in Module 1 include new reporting elements that will require intensive and targeted training and technical assistance. As such, the proposed timeline is not realistic.  Module 1, Section B, Statewide Goals and Accomplishments (page # 5-6):  Questions B.2 and B.3 address the State’s target for eligible entity Overall Satisfaction and process for considering feedback. The State’s response to this question relies greatly on the ability of OCS, through use of the American Customer Satisfaction Index (ACSI) Survey, to achieve an acceptable response rate, administer the survey with regularity, and provide subsequent feedback to States in a timely manner. The ACSI was administered for the first time in FY 2015 and States received their results in February 2016. The process for gathering statistically significant results across the States was time consuming and response rates varied greatly across the nation. Additionally, in some states there were not enough eligible entities to achieve a statistically significant and anonymous result for the ACSI. States were not fully informed of intended reporting requirements and State responsibilities around the ACSI, until Module 1 was released for review during the 60-day comment period and additional guidance NASCSP Feedback – FRN #1 OMB PRA Clearance, CSBG Annual Report from OCS was projected to be released by August 2016. States will need guidance and additional time to work with their agencies and prepare reports on their use of the ACSI.  The analysis component of Question B.7 presents examples of the types of analysis questions integral to quality performance management and review at the State level. However, NASCSP emphasizes that analysis is contextual and these questions should not be mandated as implied in the language, and should instead be clearly marked as examples of the ways in which data could be analyzed and understood. The State’s ability to provide meaningful analysis of trends and results relies on the States’ and CAA’s ability to access, aggregate, and analyze data from a wide range of federally funded programs, some of which have limited data sharing capabilities. Furthermore, language in the final bullet that refers to States “encouraging” local entities to change based on state analysis can be interpreted as a potential intrusion of State authority upon statutorily mandated local control and should be altered or eliminated. We are hopeful that if States receive the necessary guidance and additional training, States will improve their ability to identify questions and data analysis procedures to guide State-level analysis.   Module 1, Section D, Organizational Standards for Eligible Entities (page # 8-9): NASCSP recognizes the work done by the Community Action Partnership and the larger CSBG Network in crafting a common set of organizational standards and the enhanced emphasis on organizational excellence. Question D.2 sets an unreasonable standard for CAAs to meet 100% of the Organizational Standards in a reporting period. NASCSP acknowledges this standard is set in the CSBG State Plan, but believes it should not be the single reporting measure. This section should also reference IM 138’s statement that as long as an eligible entity is making progress towards meeting the standards, the state should not take action to reduce or eliminate funding. Question D.3 asks States to provide the number of CSBG Eligible Entities with unmet standards with a Technical Assistance Plan (TAP) or Quality Improvement Plan (QIP) in place. Guidance on standardizing the development of TAPs and QIPs must be provided to ensure consistent practices throughout the CSBG Network.   Module 1, Section H, Monitoring, Corrective Action, and Fiscal Controls (page # 20-21): As stated in reference to Quality Improvement Plans in the above paragraph, question H.4 and H.5 will require additional training and technical assistance and guidance from OCS before implementation of Module 1. |
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| **Comment 83 (National Community Action Foundation ; Eligible Entity/Local Agency in N/A)** |
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| Module 1: Module #1 – the State Reports: We strongly concur with the full Community Action Partnership comments regarding the state reports on local organizational standards. The proposed design is an inappropriate “pass/fail” format and should be modified. |
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| **Comment 84 (National Community Partnership ; Other/Unknown in ND)** |
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| Module 1:   Module 1, Section B: (page # 5-6)   · Question B7 Summary Analysis. As written, this question exceeds the capacity of many state CSBG Lead Agencies (grantees). This question will require information be collected that goes beyond what is being collected through the ROMA data included in this draft annual report. The estimated time burden in the federal register did not assume this additional data collection. This is added reporting burden on State CSBG Lead Agencies because as written, the questions require the agencies to go beyond merely reporting the data and conduct sophisticated data analysis that will require additional time and may exceed the capacity of agency staff to provide meaningful information.   Module 1, Section D: (page # 8-9)  · D2. This question is too narrow in its potential responses and decreases the capacity of the state fulfill its duties and impacts both the quality of the data collected and the utility of the data. The single metric sought is the number of entities that met all state-adopted organizational standards; this is a poor metric when used in isolation of performance at a variety of levels. No one and no agency will score 100% of anything 100% of the time. Ongoing perfection is an unreasonable expectation and is inappropriate to be used as the single reporting measure. This question should be changed to allow states to report on how many entities met 100%, 90%, 80%, 70%, 60% and less than 50% of the Standards. This will increase the performance of states by allowing them to focus their limited training and technical assistance resources on those entities not meeting multiple standards. It would also improve the quality of data as it will provide a more robust assessment of performance.   · This question needs to be re-worked in order to manage the burden of effort on states and eligible entities. The current language conveys that a Quality Improvement Plan (QIP) is the preferred option if an eligible entity has one or more unmet organizational standards. OCS IM 138 clearly articulates the Technical Assistance Plan (TAP) is the preferred option. This section should also reference IM 138’s statement that as long as an eligible entity is making progress towards meeting the standards, the state should not take action to reduce or eliminate funding.   Module 1, Section G: (page # 17-19)  · G3b. This question would not be able to be answered with the ROMA data being collected as proposed. This will increase the burden on states to report.   Module 1, Section I: (page # 22)   · I4. This question seeks information regarding ROMA Goals. As the ROMA Goals are not listed in one module, it noted here to re-instate the current ROMA Goal: Agencies increase their capacity to achieve results. It is unfortunate there is not a module or section number that requests feedback on the data collection formatted around the set of new national ROMA goals. |
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| **Comment 86 (New England Community Action Partnership (NE cap) ; State Association in CT)** |
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| Module 1: Module 1 - State Administration: (pages 2-22)   · Module 1, Section B: (page # 5-6) o Question B7 Summary Analysis. As written, this question exceeds the capacity of many state CSBG Lead Agencies (grantees). This question will require information be collected that goes beyond what is being collected through the ROMA data included in this draft annual report. The estimated time burden in the federal register did not assume this additional data collection. This is added reporting burden on State CSBG Lead Agencies because as written, the questions require the agencies to go beyond merely reporting the data and conduct sophisticated data analysis that will require additional time and may exceed the capacity of agency staff to provide meaningful information.   · Module 1, Section D: (page # 8-9) o D2. This question is too narrow in its potential responses and decreases the capacity of the state fulfill its duties and impacts both the quality of the data collected and the utility of the data. The single metric sought is the number of entities that met all state-adopted organizational standards; this is a poor metric when used in isolation of performance at a variety of levels. No one and no agency will score 100% of anything 100% of the time. Ongoing perfection is an unreasonable expectation and is inappropriate to be used as the single reporting measure. This question should be changed to allow states to report on how many entities met 100%, 90%, 80%, 70%, 60% and less than 50% of the Standards. This will increase the performance of states by allowing them to focus their limited training and technical assistance resources on those entities not meeting multiple standards. It would also improve the quality of data as it will provide a more robust assessment of performance.  O This question needs to be re-worked in order to manage the burden of effort on states and eligible entities. The current language conveys that a Quality Improvement Plan (QIP) is the preferred option if an eligible entity has one or more unmet organizational standards. OCS IM 138 clearly articulates the Technical Assistance Plan (TAP) is the preferred option. This section should also reference IM 138’s statement that as long as an eligible entity is making progress towards meeting the standards, the state should not take action to reduce or eliminate funding.   · Module 1, Section G: (page # 17-19) o G3b. This question would not be able to be answered with the ROMA data being collected as proposed. This will increase the burden on states to report.  · Module 1, Section I: (page # 22) o I4. This question seeks information regarding ROMA Goals. As the ROMA Goals are not listed in one module, it noted here to re-instate the current ROMA Goal: Agencies increase their capacity to achieve results. It is unfortunate there is not a module or section number that requests feedback on the data collection formatted around the set of new national ROMA goals. |
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| **Comment 87 (New York Department Of Youth And Community Development ; State in NY)** |
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| Module 1: Module 1:   1. We recommend HHS allow State agencies to report on movement towards 100% compliance with national Organizational Standards (e.g. 70%, 80&, 90%) as opposed to only those meeting 100% of the Standards |
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| **Comment 88 (New York State Community Action Association; Eligible Entity/Local Agency in NY)** |
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| Module 1: Module 1 - State Administration: (pages 2-22) Module 1, Section D: (page # 8-9)  · The sole metric of the number of eligible entities that met all of the Organizational Standards is not useful in assessing the performance among agencies or of one agency’s improvement over time. The 100% requirement requires perfection or suggests that Organizational Standards reflect a low level of minimally acceptable performance. This not only in unreasonable, it does not inform the development of effective training and technical assistance (T/TA) plans. States should be able to report performance at a number of thresholds below 100% to help focus T/TA efforts and to improve the quality of the data as it related to performance assessment.  · Question D3 needs to be reviewed for consistency with OCS’ IM 138 which identifies the Technical Assistance Plan (TIP) as the preferred response if an eligible entity does not meet all of the standards. D3 should also affirm IM 138’s recommendation that a state should not take action to reduce funding if an agency is making progress toward meeting the standards. Module 1, Section I: (page # 22)   · Question I4 addresses ROMA goals and although it is not specifically addressed here, as noted above we strongly recommend that the Agency Capacity goal be reinstated. A high quality Community Action network rests on a foundation of high performing agencies. |
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| **Comment 89 (Ninth District Opportunity, Inc.; Eligible Entity/Local Agency in GA)** |
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| Section A  No comment, Content acceptable  Module 1, Section B:    No comment, Content acceptable  Module 1, Section C:    No comment, Content acceptable  Module 1, Section D:   No comment, Content acceptable  Module 1, Section E:    Question E3a is especially important, as some states have been holding allocations until late in the Fiscal Year, making it difficult for agencies to spend within appropriate timelines.  Module 1, Section F:   No comment, Content acceptable  Module 1, Section G:   No comment, Content acceptable  Module 1, Section H:   No comment, Content acceptable  Module 1, Section I:   If states are expected to provide oversight and support to agencies, they should be held accountable for having access to a credentialed NCRI/NCRT to provide guidance (as agencies are) in order to demonstrate their understanding of these concepts. Also, documentation of participation of ROMA training should be required for all state office staff in this section. |
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| **Comment 91 (North Dakota Community Action ; State Association in ND)** |
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| Module 1: Module I, Section G: (page # 17-19)   • G3b. This question would not be able to be answered with the ROMA data being collected as proposed. This will increase the burden on states to report.  Module I, Section I: (page # 22)  14. This question seeks information regarding ROMA Goals. As the ROMA Goals are not listed in one module, it noted here to re-instate the current ROMA Goal: Agencies increase their capacity to achieve results. It is unfortunate there is not a module or section number that requests feedback on the data collection formatted around the set of new national ROMA goals. |
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| **Comment 92 (North Dakota Department Of Commerce; State in ND)** |
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| Module 1: Section B: (page # 5-6)   · As written, this question exceeds the capacity of many state CSBG Lead Agencies (grantees). This question will require information be collected that goes beyond what is being collected through the ROMA data included in this draft annual report. The estimated time burden in the federal register did not assume this additional data collection. This is added reporting burden on State CSBG Lead Agencies because as written, the questions require the agencies to go beyond merely reporting the data and conduct sophisticated data analysis that will require additional time and may exceed the capacity of agency staff to provide meaningful information.   Module 1, Section D: (page # 8-9)   · This question is too narrow in its potential responses and decreases the capacity of the state fulfill its duties and impacts both the quality of the data collected and the utility of the data. The single metric sought is the number of entities that met all state-adopted organizational standards; this is a poor metric when used in isolation of performance at a variety of levels. No one and no agency will score 100% of anything 100% of the time. Ongoing perfection is an unreasonable expectation and is inappropriate to be used as the single reporting measure. This question should be changed to allow states to report on how many entities met 100%, 90%, 80%, 70%, 60% and less than 50% of the Standards. This will increase the performance of states by allowing them to focus their limited training and technical assistance resources on those entities not meeting multiple standards. It would also improve the quality of data as it will provide a more robust assessment of performance.   · This question needs to be re-worked in order to manage the burden of effort on states and eligible entities. The current language conveys that a Quality Improvement Plan (QIP) is the preferred option if an eligible entity has one or more unmet organizational standards. OCS IM 138 clearly articulates the Technical Assistance Plan (TAP) is the preferred option. This section should also reference IM 138’s statement that as long as an eligible entity is making progress towards meeting the standards, the state should not take action to reduce or eliminate funding. |
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| **Comment 93 (North Dakota Lead Agency; State in ND)** |
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| Module 1: CSBG Annual Report OMB Clearance Process- 33  1. Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility  · While there are elements that may be helpful, there are a number of areas detailed below where the collection of information does not meet the threshold of necessity or utility. The package as proposed in its entirety is overly burdensome, contains reporting tools that will provide useless information, and is outside the reach of the Community Services Block Grant (CSBG).  · The burden on local agencies is not impacted by the implementation of the Online Data Collection system (OLDC). To comply with the draft CSBG Annual Report local agencies will need to modify existing systems.  2. The accuracy of the agency’s estimate of the burden of the proposed collection of information   · As a State grantee, we do not have the funding or capacity for the most part, to create systems or support local agencies to develop systems that will streamline or decrease the burden or tripling the amount of data to be collected.  · In regards to the changes to Module 4, many agencies may either lack management information systems with the capacity to disaggregate this type of data from its overall customer database, or struggle to integrate the required data given their use of multiple (and sometimes incompatible) reporting systems.  · The current IS survey includes 300+ data elements to report. The proposed CSBG Annual Report includes more than 1,000. This increased burden of reporting comes with no new resources.  · Many agencies lack management information systems with the capacity to provide the required data. Data fields required for ROMA Next Generating reporting may not be mirrored in those used by agencies. In addition, many agencies use multiple (and sometimes incompatible) reporting systems which adds to the time necessary to provide the data.   3. The quality, utility, and clarity of the information to be collected; and  · Regarding the stability indicators selected and included in the clearance package (Module 4), they are not helpful or practical when reporting customers stabilized as a result of the eligible entity’s work. Tracking clients after they have left the program would be overly cumbersome and many individuals may be difficult to contact. This has the potential to consume a large amount of agency resources.  · Module 3, Section A: Many of the indicators used here are inappropriate for reporting by local sub-grantees to States and by States to OCS and will produce data of limited utility. Several challenges underscore this point. First, community-level data on indicators is not always available at the level (e.g. regional or zip code/census tract) or population (e.g. low-income children aged 0-5) that matches the area and population targeted by the agency. Second, community-level indicators are influenced by a wide number of sources that would most likely overwhelm the impact of even successful community initiatives, a fact that significantly limits their utility for providing meaningful information about outcomes. Third, any meaningful data about the outcomes of community-level initiatives would require a rigorous program evaluation and could not be determined on the data collected through the Annual Report alone.   4. Ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology.  · Module 4: Remove the Characteristics for NEW Individuals and Households Report. This report has no practical utility at the local level given the time and expense to create it at each local agency.  · OCS’ Dear Colleague Letter of June 17, 2016, states, “Aware of the reporting burden the proposed Annual Report will entail, OCS will decrease that burden by establishing an on-line automated system for use by the states and – at the discretion of the states – the local agencies, for reporting that allows in many instances auto-populating data from one year to the next and a variety of data entry processes (e.g. manual entry and automatic upload).” It is important to note, this online automated system may benefit State Lead Agencies (grantees), but will most likely not benefit local Community Action Agencies (sub-grantees). Sub-grantees (local agencies) will still need systems that track customers, services, outcomes, and given the requirement of many funding sources (including other federal Department of Health and Human Services funding) requires additional and sometime separate data collection systems. State grantees do not have the funding or capacity for the most part, to create systems that will streamline or decrease the burden outlined here. Furthermore, new state-level systems will do little to address the needs of local agencies for improved management information systems with the capacity to collect and report the data required by ROMA Next Generation.  Module 1 - State Administration: (pages 2-22)   Module 1, Section B: (page # 5-6)   · As written, this question exceeds the capacity of many state CSBG Lead Agencies (grantees). This question will require information be collected that goes beyond what is being collected through the ROMA data included in this draft annual report. The estimated time burden in the federal register did not assume this additional data collection. This is added reporting burden on State CSBG Lead Agencies because as written, the questions require the agencies to go beyond merely reporting the data and conduct sophisticated data analysis that will require additional time and may exceed the capacity of agency staff to provide meaningful information.  Module 1, Section D: (page # 8-9)   · This question is too narrow in its potential responses and decreases the capacity of the state fulfill its duties and impacts both the quality of the data collected and the utility of the data. The single metric sought is the number of entities that met all state-adopted organizational standards; this is a poor metric when used in isolation of performance at a variety of levels. No one and no agency will score 100% of anything 100% of the time. Ongoing perfection is an unreasonable expectation and is inappropriate to be used as the single reporting measure. This question should be changed to allow states to report on how many entities met 100%, 90%, 80%, 70%, 60% and less than 50% of the Standards. This will increase the performance of states by allowing them to focus their limited training and technical assistance resources on those entities not meeting multiple standards. It would also improve the quality of data as it will provide a more robust assessment of performance.  · This question needs to be re-worked in order to manage the burden of effort on states and eligible entities. The current language conveys that a Quality Improvement Plan (QIP) is the preferred option if an eligible entity has one or more unmet organizational standards. OCS IM 138 clearly articulates the Technical Assistance Plan (TAP) is the preferred option. This section should also reference IM 138’s statement that as long as an eligible entity is making progress towards meeting the standards, the state should not take action to reduce or eliminate funding. |
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| **Comment 96 (Northern Tier Community Action Corp. ; Eligible Entity/Local Agency in PA)** |
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| Module 1: No Comment |
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| **Comment 98 (NORWESCAP; Eligible Entity/Local Agency in NJ)** |
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| Module 1: No Comment |
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| **Comment 100 (Nothing Compares; Other/Unknown in NC)** |
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| Module 1: Module 1, Section B: (page # 5-6)  B.2 and B.3 States have not received adequate training and guidance to address the intended reporting requirements and use of the information gathered from the 1st time implementation of the ACSI. OCS must provide for additional TA if information gathered in B2 and B3 is to be beneficial.  B.7 should not be mandated but rather serve as a framework for in which state level performance data could be analyzed to inform the work of the state. Module I, Section D: (page # 8-9)  D.2 should not be limited to the collection of eligible entities meeting 100% of the organizational standards but should instead allow states to report on how many entities met various percentages or ranges (i.e. 100%, 85-99%, 70-84%, less than 50%). This likely will increase the performance of states by allowing them to further analyze and focus their limited training and technical assistance resources on entities not meeting multiple standards.  D.3 OCS must provide for additional TA if information gathered under D.3 is to be beneficial as guidance standardizing the development of TAPs and QIPs has not been made available and as such practices throughout the Network will be inconsistent. The standardization of TAPs and QIPs is necessary.  Module 1, Section E: (page # 10-14)   E.2, E.3, and E.7 Currently, states are allowed to determine their reporting period. Items E2, E3, and E7 no longer allow this and require information reported to be based on the federal fiscal year. This requirement will cause challenges to states with fiscal years (reporting periods) other than the federal fiscal year. This requirement also conflicts with Module 2, Section A which allows reporting based on time periods other than the federal fiscal year.  Module I, Section H: (page # 20-21)  H.4 and H.5 OCS must provide for additional TA if information gathered under H.4 and H.5 is to be beneficial as guidance standardizing the development of QIPs has not been made available and as such practices throughout the Network will be inconsistent. The standardization of QIPs is necessary.  Module I, Section I: (page # 22)  1.3 is duplicative and should be removed. The work states are required to complete through review of Organizational Standard Category 9 Data and Analysis (specifically Standard 9.3 "The organization has presented to the governing board for review or action, at least within the past 12 months, an analysis of the agency's outcomes and any operational or strategic program adjustments and improvements identified as necessary" meets the purpose of this item.  1.4 is poorly worded and does not maximize the reporting structure. Consider the following revision — "Has the state provided each eligible entity written feedback regarding the data collected in the CSBG annual report?" |
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| **Comment 101 (Ohio Association Of Community Action Agencies; Other/Unknown in OH)** |
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| Module 1: No Comment |
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| **Comment 102 (Opportunities For Otsego, Inc. ; Other/Unknown in NY)** |
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| Module 1: Module 1, Section B:   · Question B7 Summary Analysis. As written, this question exceeds the capacity of many state CSBG Lead Agencies. This question will require information be collected that goes beyond what is being collected through the ROMA data included in this draft annual report. The estimated time burden in the federal register did not assume this additional data collection. This is added reporting burden on State CSBG Lead Agencies because as written, the questions require the agencies to go beyond merely reporting the data and conduct sophisticated data analysis that will require additional time and may exceed the capacity of agency staff to provide meaningful information.   Module 1, Section D:   · D2. This question is too narrow in its potential responses and decreases the capacity of the state to fulfill its duties and impacts both the quality of the data collected and the utility of the data. The single metric sought is the number of entities that met all state-adopted organizational standards; this is a poor metric when used in isolation of performance at a variety of levels. No one and no agency will score 100% of anything 100% of the time. Ongoing perfection is an unreasonable expectation and is inappropriate to be used as the single reporting measure. This question should be changed to allow states to report on how many entities met 100%, 90%, 80%, 70%, 60% and less than 50% of the Standards. This will increase the performance of states by allowing them to focus their limited training and technical assistance resources on those entities not meeting multiple standards. It would also improve the quality of data as it will provide a more robust assessment of performance.   · This question needs to be re-worked in order to manage the burden of effort on states and eligible entities. The current language conveys that a Quality Improvement Plan (QIP) is the preferred option if an eligible entity has one or more unmet organizational standards. OCS IM 138 clearly articulates the Technical Assistance Plan (TAP) is the preferred option. This section should also reference IM 138’s statement that as long as an eligible entity is making progress towards meeting the standards, the state should not take action to reduce or eliminate funding.   Module 1, Section G:   · G3b. This question would not be able to be answered with the ROMA data being collected as proposed. This will increase the burden on states to report.   Module 1, Section I:   · This question seeks information regarding ROMA Goals. As the ROMA Goals are not listed in one module, it noted here to re-instate the current ROMA Goal: Agencies increase their capacity to achieve results. It is unfortunate there is not a module or section number that requests feedback on the data collection formatted around the set of new national ROMA goals. |
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| **Comment 103 (Oregon Housing And Community Services ; Other/Unknown in OR)** |
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| Module 1: No Comment |
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| **Comment 104 (People Incorporated Of Virginia; Other/Unknown in VA)** |
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| Module 1: Module 1, Section C: (page # 7)   No comment.   Module 1, Section D: (page # 8-9)   The request for States to identify the number of agencies that met all the Organizational Performance Standards is too narrow. This question should be changed to allow states to report on how many entities met 100%, 90%, 80%, 70%, 60% and less than 50% of the Standards. This will increase the performance of states by allowing them to focus their limited training and technical assistance resources on those entities not meeting multiple standards, and reflect increases in positive performance. It would also improve the quality of data as it will provide a more robust assessment of performance.   Module 1, Section E: (page # 10-14)   No comment.    Module 1, Section F: (page # 15-16)   No comment.   Module 1, Section G: (page # 17-19)   G3b. This question would not be able to be answered with the ROMA data being collected as proposed. This will increase the burden on states to report.   Module 1, Section H: (page # 20-21)   No comment.   Module 1, Section I: (page # 22)   I4. This question seeks information regarding ROMA Goals. As the ROMA Goals are not listed in one module, it noted here to re-instate the current ROMA Goal: Agencies increase their capacity to achieve results. It is unfortunate there is not a module or section number that requests feedback on the data collection formatted around the set of new national ROMA goals. |
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| **Comment 105 (ProAction Of Steuben And Yates Inc.; Eligible Entity/Local Agency in NY)** |
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| Module 1: State Administration: (pages 2-22)   Module 1, Section B: (page # 5-6)   · Question B7 Summary Analysis. As written, this question exceeds the capacity of many state CSBG Lead Agencies (grantees). This question will require information be collected that goes beyond what is being collected through the ROMA data included in this draft annual report. The estimated time burden in the federal register did not assume this additional data collection. This is added reporting burden on State CSBG Lead Agencies because as written, the questions require the agencies to go beyond merely reporting the data and conduct sophisticated data analysis that will require additional time and may exceed the capacity of agency staff to provide meaningful information.  Module 1, Section D: (page # 8-9)   · D2. This question is too narrow in its potential responses and decreases the capacity of the state fulfill its duties and impacts both the quality of the data collected and the utility of the data. The single metric sought is the number of entities that met all state-adopted organizational standards; this is a poor metric when used in isolation of performance at a variety of levels. No one and no agency will score 100% of anything 100% of the time. Ongoing perfection is an unreasonable expectation and is inappropriate to be used as the single reporting measure. This question should be changed to allow states to report on how many entities met 100%, 90%, 80%, 70%, 60% and less than 50% of the Standards. This will increase the performance of states by allowing them to focus their limited training and technical assistance resources on those entities not meeting multiple standards. It would also improve the quality of data as it will provide a more robust assessment of performance.  · This question needs to be re-worked in order to manage the burden of effort on states and eligible entities. The current language conveys that a Quality Improvement Plan (QIP) is the preferred option if an eligible entity has one or more unmet organizational standards. OCS IM 138 clearly articulates the Technical Assistance Plan (TAP) is the preferred option. This section should also reference IM 138’s statement that as long as an eligible entity is making progress towards meeting the standards, the state should not take action to reduce or eliminate funding.  Module 1, Section G: (page # 17-19)   · G3b. This question would not be able to be answered with the ROMA data being collected as proposed. This will increase the burden on states to report.  Module 1, Section I: (page # 22) I4. This question seeks information regarding ROMA Goals. As the ROMA Goals are not listed in one module, it noted here to re-instate the current ROMA Goal: Agencies increase their capacity to achieve results. It is unfortunate there is not a module or section number that requests feedback on the data collection formatted around the set of new national ROMA goals. |
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| **Comment 106 (Project Bravo; Eligible Entity/Local Agency in TX)** |
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| Module 1: No Comment |
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| **Comment 107 (Pueblo County Housing And Human Services; Other/Unknown in CO)** |
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| Module 1: Module 1: State Administration / No Comments   5. Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility   6. The accuracy of the agency’s estimate of the burden of the proposed collection of information   7. The quality, utility, and clarity of the information to be collected; and   8. Ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. |
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| **Comment 108 (Redwood Community Action Agency ; Eligible Entity/Local Agency in CA)** |
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| Module 1: Module 1, Section D. 2  In order to better reflect the number of eligible entities meeting the newly implemented Organizational Standards, we recommend that there be additional  columns inserted that allow States to also report on the number of eligible entities that have met a certain percentage of the Organizational Standards (i.e. 50%, 80%, 90% Met) versus only capturing if an Eligible entity has met "All". The information gathered, especially over a period of years, will have more practical utility if this change were made in the proposed report. |
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| **Comment 109 (Sa Howell, LLC ; Other/Unknown in GA)** |
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| Module 1: 1.   State offices should have the option to report multiple benchmarks concerning the achievement of OS compliance to demonstrate progress over time rather than insinuating failure for those not performing at a rate of 100%.   Many state employees are not qualified to provide ROMA oversight, technical support, and monitoring. State offices should be held accountable for access to a ROMA professional (NCRT, NCRI, or Master Trainer) and document regular participation in ROMA training, along with agencies.  Module 1, Section B  This section requires states to demonstrate an understanding of ROMA. States will more than likely be required to hire better qualified staff (data analysts) or contract these activities out. This is expected to result in a strong, more productive network along with more accurate data on a national level.   Module 1,  Question E3a is especially important, as some states have been holding allocations until late in the Fiscal year, making it difficult for agencies to spend within appropriate timelines. Some states have even gone so far as to modify allocations without notifying agencies and the refusing to provide an explanation of the changes. This level of accountability is absolutely imperative to the proper operation of the network. |
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| **Comment 110 (SEMCAC; Eligible Entity/Local Agency in MN)** |
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| Module 1: Section A: (page # 3-4)   · No Comments  Module 1, Section B: (page # 5-6)   · Question B7 Summary Analysis. As written, this question exceeds the capacity of many state CSBG Lead Agencies (grantees). This question will require information be collected that goes beyond what is being collected through the ROMA data included in this draft annual report. The estimated time burden in the federal register did not assume this additional data collection. This is added reporting burden on State CSBG Lead Agencies because as written, the questions require the agencies to go beyond merely reporting the data and conduct sophisticated data analysis that will require additional time and may exceed the capacity of agency staff to provide meaningful information.  Module 1, Section C: (page # 7)   · No comment  Module 1, Section D: (page # 8-9)   · D2. This question is too narrow in its potential responses and decreases the capacities of the state to fulfill its duties and impacts both the quality of the data collected and the utility of the data. The single metric sought is the number of entities that met all state-adopted organizational standards; this is a poor metric when used in isolation of performance at a variety of levels. No one and no agency will score 100% of anything 100% of the time. Ongoing perfection is an unreasonable expectation and is inappropriate to be used as the single reporting measure. This question should be changed to allow states to report on how many entities met 100%, 90%, 80%, 70%, 60% and less than 50% of the Standards. This will increase the performance of states by allowing them to focus their limited training and technical assistance resources on those entities not meeting multiple standards. It would also improve the quality of data as it will provide a more robust assessment of performance.  · This question needs to be re-worked in order to manage the burden of effort on states and eligible entities. The current language conveys that a Quality Improvement Plan (QIP) is the preferred option if an eligible entity has one or more unmet organizational standards. OCS IM 138 clearly articulates the Technical Assistance Plan (TAP) is the preferred option. This section should also reference IM 138’s statement that as long as an eligible entity is making progress towards meeting the standards, the state should not take action to reduce or eliminate funding.  Module 1, Section E: (page # 10-14)   · No comments  Module 1, Section F: (page # 15-16)   · No comments  Module 1, Section G: (page # 17-19)   · G3b. This question would not be able to be answered with the ROMA data being collected as proposed. This will increase the burden on states to report.  Module 1, Section H: (page # 20-21)   · No comments  Module 1, Section I: (page # 22)   · I4. This question seeks information regarding ROMA Goals. As the ROMA Goals are not listed in one module, it noted here to re-instate the current ROMA Goal: Agencies increase their capacity to achieve results. It is unfortunate there is not a module or  section number that requests feedback on the data collection formatted around the set of new national ROMA goals. |
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| **Comment 111 (South Plain Community Action Association ; State Association in TX)** |
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| Module 1: No Comment |
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| **Comment 112 (Southeastern North Dakota ; Eligible Entity/Local Agency in ND)** |
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| Module 1: Module I, Section B: (page # 5-6)   • Question 87 Summary Analysis. As written, this question exceeds the capacity of many state CSBG Lead Agencies (grantees). This question will require information be collected that goes beyond what is being collected through the ROMA data included in this draft annual report. The estimated time burden in the federal register did not assume this additional data collection. This is added reporting burden on State CSBG Lead Agencies because as written, the questions require the agencies to go beyond merely reporting the data and conduct sophisticated data analysis that will require additional time and may exceed the capacity of agency staff to provide meaningful information.  Module 1, Section D: (page # 8-9)   D2. This question is too narrow in its potential responses and decreases the capacity of the state fulfill its duties and impacts both the quality of the data collected and the utility of the data. The single metric sought is the number of entities that met all state-adopted organizational standards; this is a poor metric when used in isolation of performance at a variety of levels. No one and no agency will score 100% of anything 100% of the time. Ongoing perfection is an unreasonable expectation and is inappropriate to be used as the single reporting measure. This question should be changed to allow states to report on how many entities met 100%, 90%, 80%, 70%, 60% and less than 50% of the Standards. This will increase the performance of states by allowing them to focus their limited training and technical assistance resources on those entities not meeting multiple standards. It would also improve the quality of data as it will provide a more robust assessment of performance.  This question needs to be re-worked in order to manage the burden of effort on states and eligible entities. The current language conveys that a Quality Improvement Plan (QIP) is the preferred option if an eligible entity has one or more unmet organizational standards. OCS 1M 138 clearly articulates the Technical Assistance Plan (TAP) is the preferred option. This section should also reference 1M 138's statement that as long as an eligible entity is making progress towards meeting the standards, the state should not take action to reduce or eliminate funding.  Module 1, Section G: (page # 17-19)  G3b. This question would not be able to be answered with the ROMA data being collected as proposed. This will increase the burden on states to report.  Module I, Section I: (page # 22)   • 14. This question seeks information regarding ROMA Goals. As the ROMA Goals are not listed in one module, it noted here to re-instate the current ROMA Goal: Agencies increase their capacity to achieve results. It is unfortunate there is not a module or section number that requests feedback on the data collection formatted around the set of new national ROMA goals. |
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| **Comment 113 (Southern New Hampshire Services ; Eligible Entity/Local Agency in NH)** |
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| Module 1: No Comment |
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| **Comment 114 (Southwest Oklahoma Community Action ; Other/Unknown in OK)** |
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| Module 1: No Comment |
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| **Comment 115 (State Of North Carolina; State in NC)** |
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| Module 1: Module 1 State Administration Module 1, Section B: (page # 5-6)  B.2 and B.3 States have not received adequate training and guidance to address the intended reporting requirements and use of the information gathered from the 1st time implementation of the ACSI. OCS must provide for additional TA if information gathered in B2 and B3 is to be beneficial.  B.7 should not be mandated but rather serve as a framework for in which state level performance data could be analyzed to inform the work of the state.  Module I, Section D: (page # 8-9)  D.2 should not be limited to the collection of eligible entities meeting 100% of the organizational standards but should instead allow states to report on how many entities met various percentages or ranges (i.e. 100%, 85-99%, 70-84%, less than 50%). This likely will increase the performance of states by allowing them to further analyze and focus their limited training and technical assistance resources on entities not meeting multiple standards.  D.3 OCS must provide for additional TA if information gathered under D.3 is to be beneficial as guidance standardizing the development of TAPs and QIPs has not been made available and as such practices throughout the Network will be inconsistent. The standardization of TAPs and QIPs is necessary.  Module 1, Section E: (page # 10-14)   E.2, E.3, and E.7 Currently, states are allowed to determine their reporting period. Items E2, E3, and E7 no longer allow this and require information reported to be based on the federal fiscal year. This requirement will cause challenges to states with fiscal years (reporting periods) other than the federal fiscal year. This requirement also conflicts with Module 2, Section A which allows reporting based on time periods other than the federal fiscal year.  Module I, Section H: (page # 20-21)  H.4 and H.5 OCS must provide for additional TA if information gathered under H.4 and H.5 is to be beneficial as guidance standardizing the development of QIPs has not been made available and as such practices throughout the Network will be inconsistent. The standardization of QIPs is necessary.  Module I, Section I: (page # 22)  1.3 is duplicative and should be removed. The work states are required to complete through review of Organizational Standard Category 9 Data and Analysis (specifically Standard 9.3 "The organization has presented to the governing board for review or action, at least within the past 12 months, an analysis of the agency's outcomes and any operational or strategic program adjustments and improvements identified as necessary" meets the purpose of this item.  1.4 is poorly worded and does not maximize the reporting structure. Consider the following revision — "Has the state provided each eligible entity written feedback regarding the data collected in the CSBG annual report?" |
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| **Comment 116 (Texas Association Of Community Action Agencies, Inc. (Tacaa); Other/Unknown in TX)** |
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| Module 1: No Comment |
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| **Comment 118 (The State Of New York Community Action Association ; State Association in NY)** |
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| Module 1: Module 1 - State Administration: (pages 2-22) Module 1, Section D: (page # 8-9)   · The sole metric of the number of eligible entities that met all of the Organizational Standards is not useful in assessing the performance among agencies or of one agency’s improvement over time. The 100% requirement requires perfection or suggests that Organizational Standards reflect a low level of minimally acceptable performance. This not only in unreasonable, it does not inform the development of effective training and technical assistance (T/TA) plans. States should be able to report performance at a number of thresholds below 100% to help focus T/TA efforts and to improve the quality of the data as it related to performance assessment.  · Question D3 needs to be reviewed for consistency with OCS’ IM 138 which identifies the Technical Assistance Plan (TIP) as the preferred response if an eligible entity does not meet all of the standards. D3 should also affirm IM 138’s recommendation that a state should not take action to reduce funding if an agency is making progress toward meeting the standards. Module 1, Section I: (page # 22)   · Question I4 addresses ROMA goals and although it is not specifically addressed here, as noted above we strongly recommend that the Agency Capacity goal be reinstated. A high quality Community Action network rests on a foundation of high performing agencies. |
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| **Comment 119 (TN Department Human Services ; State in TN)** |
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| Module 1 - State Administration: (pages 2-22)  Module 1, Section B: (page # 5-6): Minimal guidance has been provided on exactly what is expected through the State Accountability Measures. OCS provided a grid, which one could barely read due to the size of the print, along with some initial feedback during the implementation of the Organizational Standards of what exactly the State Accountability Measures were. Little training or technical assistance was provided on what would truly be expected of agencies to meet each of these standards. Then OCS implemented the Model State Plan with minimal time to train and engage eligible entities in the process before having to submit the Model State Plan, and again, our Department along with agencies were given little notice of the ACSI Process, leaving little time to engage the eligible entities. All this together has affected our overall results. It does not seem fair to our Department to be judged upon these results, across the board, when the results themselves are not even considered reliable. I think it would be prudent to allow the State Lead Agency to include additional data regarding the six (6) drivers of satisfaction and the factors that may have led to these responses.  Module 1, Section D: (page # 8-9): It seems like the data requested in D.2 should be submitted and calculated individually based upon each eligible entities’ results. If Agency A, B, & C all met the standards, but Agency D only met 55% of the standards it does not seem to be a fair or accurate reflection upon those agencies who are meeting the standards versus those who are not. |
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| **Comment 120 (Tompkins Community Action ; Eligible Entity/Local Agency in NY)** |
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| Module 1: No Comment |
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| **Comment 121 (Total Action For Progress ; Other/Unknown in VA)** |
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| Module 1: No Comment |
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| **Comment 123 (Tri County Community Action ; Other/Unknown in MN)** |
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| Module 1: No Comment |
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| **Comment 124 (U.S Department Of Health And Human Service ; Eligible Entity/Local Agency in DC)** |
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| Module 1: Please note that the following three sections of Module I that we are commenting on were added to the proposed CSBG Annual Report since OCS' initial comment period. So, this is the first time anyone in the CSBG Network has been provided with the opportunity to respond to these new requirements.  Section B: Summary Analysis (B. 7)  These analysis requirements would exceed our State CSBG Office's capacity to perform; new administrative resources and training and technical assistance regarding data analysis and procedures would be needed. These analysis requirements would also contribute to our burden cost estimate that we described earlier in question #2 under OCS REQUESTED FEEDBACK.  Further, while this section offers examples of analysis questions, these questions should not be required, as implied by the language "should be provided" in the first paragraph. In addition, the language in the final bullet that refers to "changes the State will encourage and support with local eligible entities" can be interpreted as a potential intrusion of state authority upon statutorily mandated local control and should be clarified or removed.  Section l: State and Eligible Entity Analysis of Data (1.3)   This requirement would likely exceed our State CSBG Office's capacity to perform; new administrative resources and training and technical assistance regarding data analysis and procedures would be needed. This requirement would also contribute to our burden cost estimate that we described earlier in question #2 under OCS REQUESTED FEEDBACK.  Section I: State Feedback on Data Collection, Analysis, and Reporting (1.4)   This requirement for State CSBG Offices would contribute to our burden cost estimate that we described earlier in question #2 under OCS REQUESTED FEEDBACK. It would also be of questionable utility for both the State CSBG Office and the eligible entities. Our eligible entities track, collect, and report their own performance measures and are the appropriate entity to analyze their data. This question should be removed. |
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| **Comment 125 (Vermont Community Action Partnership ; Other/Unknown in VT)** |
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| 1. Module 1: Modify the options State CSBG Lead Agencies and grantees have when reporting to OCS on CSBG Organizational Standards, to allow for a broader range of responses. As noted below, there are significant challenges with the way this information is being reported that misinterprets and misuses the Organizational Standards. Expecting constant perfection is unrealistic and does not have practical utility for either local agencies or the State CSBG Lead Agency (LAs). As proposed, the single measure the State Agencies will report on is the number of Eligible Entities (EEs) that meet 100% of the CSBG Organizational Standards. To make this measure practical and realistic, and to increase the usefulness of the information, LAs should have the option to report the number of agencies at a range of thresholds that still indicate strong performance as well as allow for a more accurate reflection of the EEs’ training and technical assistance needs. For example, reporting the number of local agencies that have met 100%, 90%, 80%, 70%, 60%, 50%, and less than 50% of the standards will allow for the collection of more accurate information, better tracking of results over time, and better, more efficient investment of training and technical assistance resources.   Module 1: Module 1 - State Administration: (pages 2-22)   Module 1, Section D: (page # 8-9)   1. D2 – This question is too narrow in its potential responses and decreases the capacity of the state to fulfill its duties and impacts both the quality of the data collected and the utility of the data. The single measure required is the number of EEs that met all state-adopted organizational standards; this is a poor measure when used in isolation of performance at a variety of levels. Very few if any agencies will likely score 100% of anything 100% of the time. Ongoing perfection is an unreasonable expectation and is inappropriate to be used as the only reporting measure. This should be changed to allow states to report on how many entities met 100%, 90%, 80%, 70%, 60% and less than 50% of the Standards. This will increase the performance of states by allowing them to focus their limited training and technical assistance resources on those entities not meeting multiple standards. It would also improve the quality of data as it will provide a more robust assessment of performance.   2. This question needs to be re-worked in order to manage the burden of effort on states and eligible entities. The current language conveys that a Quality Improvement Plan (QIP) is the preferred option if an eligible entity has one or more unmet organizational standards. OCS IM 138 clearly articulates that the Technical Assistance Plan (TAP) is the preferred option. This section should also reference IM 138’s statement that as long as an eligible entity is making progress towards meeting the standards, the state should not take action to reduce or eliminate funding.   Module 1, Section G: (page # 17-19)   G3b – This question would not be able to be answered with the ROMA data being collected as proposed. This will increase the burden on states to report.   Module 1, Section I: (page # 22)   I4 – This question seeks information regarding ROMA Goals. Since the ROMA Goals are not listed in a single module, we are reiterating here our request to re-instate the current ROMA Goal of “Agencies Increase Their Capacity to Achieve Results”. OCS should have structured a module or section number to request feedback on the data collection formatted around the set of new national ROMA goals. |
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| **Comment 126 (Vernon Community Action Council, Inc.; Eligible Entity/Local Agency in LA)** |
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| Module 1: No Comment |
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| **Comment 127 (Virginia Community Action Partnership ; State Association in VA)** |
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| Module 1:  Regarding Module 1, it appears that the only metric reflecting compliance with Organizational Standards is reporting on the number of eligible entities that meet 100% of the organizational standards. This is of limited usefulness and we believe that state agencies should have the option to report the number of agencies achieving various levels of meeting the standards (100%, 90%, 80%, 70%, 60%, 50% or less than 50% of the standards). This will assist both in the collection of more useful information and better reflect the need for specific training and technical assistance. |
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| **Comment 129 (Western New York Community Action Agency; Eligible Entity/Local Agency in NY)** |
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| Module 1: No Comment |
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| **Comment 130 (Wisconsin Community Action Program Association ; State Association in WI)** |
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| Module 1: The current draft nearly triples the amount of required information data points. There are over 1,100 items for local CAA reports (and even more when counting other items), as opposed to the 374 items in the current system. This means that CAAs will be forced to contribute on many of the new state data items; agencies will have to contribute because states must now investigate and report narrative details on local agency achievement of organizational standards |
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| **Comment 131 (Wisconsin Department Of Children And Families; Eligible Entity/Local Agency in WI)** |
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| Section B: (page # 5-6)  p. 6 – B.7 Summary Analysis: The first six bullet points all seem like they will be easy for states to answer and will provide useful information.  The last two bullet points appear to place new expectations on the State office that are not included in the State Accountability Measures. They may be problematic on two levels: 1) they would increase the workload for our state’s CSBG administration, which is currently handled by one staff person; and 2) our state’s network of eligible entities values local control and is not looking to the State for directives on their programming decisions.   “Based on analysis, what services, strategies, or administrative practices were identified to be shared across the State?” The passive voice makes it confusing. Is the State CSBG office charged with identifying best services, strategies, and administrative practices to share across the state? Is this a new requirement from OCS?   “Based on analysis of performance data, what changes will the State encourage and support with the local eligible entities?” Is this question referring to 5.Sii? from the State Accountability Measures, which requires States to provide individual written feedback on the each eligible entity’s performance in meeting ROMA goals, or does it refer to a new requirement?  Module 1, Section E: (page # 10-14)   p. 14 - E.9b. Carryover for this Fiscal Year: Wisconsin's CSBG contracts operate on the calendar year and the agencies have 90 days after the end of December to close out their contracts. Therefore, the State did not have the final data to report at the time the Annual Report is due at the end of March. Our office will be able to send the correct Carryover amount during April, a few weeks after the Annual Report is submitted.   Module 1, Section H: (page # 20-21)   p. 21 – H.6 Single Audit Review: Does “Audit Number” mean “Report ID”?  Module 1, Section I: (page # 22)   p. 22 – “State and Eligible Analysis of Data: Describe how the State validated that the eligible entities used data to improve service delivery.”  Would this be addressed by monitoring the agencies for CSBG Organizational Standard 9.3, which states, “The organization has presented to the governing board for review and action, at least within the 12 months, an analysis of the agency’s outcomes and any operational or strategic program adjustments and improvements identified as necessary.”? What other expectations would there be relating to how the State validates that the eligible entities used data to improve service delivery? |
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| **Comment 132 (Work And Family Support Bureau; Other/Unknown in NM)** |
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| Module 1: No Comment |
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| **Comment 133 (Wsos Community Action; Eligible Entity/Local Agency in OH)** |
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| Module 1: No Comment |
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| **Comment 134 (York County Community Action ; Eligible Entity/Local Agency in ME)** |
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| Module 1: \* Allow State Agencies to report on a scale of meeting the Organizational Standards rather than expecting all organizations to achieve 100%. |