

CCRPC Youth Provider Applicant Risk Assessment Questionnaire

CCRPC Applicant Name:

1. System for Award Management verification

- 1.1 Is the applicant registered in the System for Award Management program YES/NO
- 1.2 Is the applicant debarred or suspended in the system? YES/NO

2. Quality of management systems and ability to meet the management standards

2.1. Does the applicant have written policies and procedures that guide program delivery on the topics of:

- a. Quality assurance YES/NO
- b. Outcome tracking and reporting mechanisms YES/NO
- c. Relevant documentation of services/goods delivered YES/NO
- d. Staff performance management policies and procedures YES/NO
- e. Personnel policies and procedures that include conflict of interest statements YES/NO
- f. Complaint/grievance resolution policies and procedures YES/NO
- g. Governing body policies and procedures that include conflict of interest statements YES/NO
- h. Safeguarding funds, property and other assets against loss from unauthorized use or disposition YES/NO
- i. Management of grant term extensions, where applicable YES/NO

2.2. Does the applicant have internal controls that govern program delivery on the topics of:

- a. Quality assurance reporting YES/NO
- b. Appropriate (to industry) supervision of staff YES/NO
- c. Accreditation/licensing compliance program YES/NO/NOT APPLICABLE

2.3. Does the applicant have written standards of conduct covering real or perceived conflict of interest related to actions of employees engaged in the selection, award or administration of contracts supported by grant awards?

YES/NO

2.4. How many years of experience does the project leader have managing the scope of services required under this program?

- More than five years
- One to five years
- Less than one year

2.5. Does the applicant have a time and effort system that:

- | | | |
|----|--|-----------------------|
| a. | Records all time worked, including time not charged to awards? | YES/NO |
| b. | Is signed-off by the employee and a supervisor? | YES/NO |
| c. | Includes an approved methodology? | YES/NO/NOT APPLICABLE |

2.6. To what extent is applicant able to produce periodic grant status reports to inform stakeholder program outcomes?

- Reports are an established part of grant management procedures
- Applicant is developing reports as part of grant management procedures
- Applicant does not currently have established reports as part of grant management

3. History of performance

3.1. How many years of experience does the applicant have with grants of comparable scope and/or capacity?

- No experience GO TO QUESTION 3.3
- More than five years
- One to five years
- Less than one year

3.2. If the applicant has experience with grants of comparable scope and/or capacity, provide a brief description of similar project goals and outcomes; specify the applicable year:

3.3. During the last two fiscal years, how frequently has the applicant submitted project performance reports on time?

- Not applicable – not a requirement of awards previously received
- Always
- Reported late up to three times
- Reported late four or more times

3.4. Have there been any significant changes in applicant's organization in the last fiscal year related to:

- | | | |
|----|---|--------|
| a. | Leadership change(s) | YES/NO |
| b. | Significant program / grant initiative(s) | YES/NO |
| c. | Structural changes | YES/NO |
| d. | Fiscal changes | YES/NO |
| e. | Statutory or regulatory requirements | YES/NO |
| f. | Other | YES/NO |

3.5 Provide a brief explanation for all "YES" responses to question 3.4.

- 3.6. Does the applicant obtain prior written approval from LWIA #17 when:
- a. Organization is not subject to these requirements YES/NO
 - b. The scope or objective of the program changes YES/NO
 - c. Key personnel specified in the application change YES/NO
 - d. The approved project director disengages for more than 3 months or reduces 25% of time devoted to the project YES/NO

3.7. Does the applicant have performance measurements that tie to financial data? YES/NO

4. Reports and findings from audits performed under Subpart F—Audit Requirements of this part or the reports and findings of any other available audit

4.1 During the last two fiscal years, has applicant had an audit that resulted in findings?

- Applicant has not had an audit; Go to Question 4.6
- No findings; Go to Question 4.6
- One to three findings
- Four or more findings

4.2 If the applicant had at least one finding of non-compliance with programmatic terms and conditions, summarize each occurrence.

4.3 Have corrective actions been implemented within the specified timeframe? YES/NO

4.4 Provide explanation for any corrective actions that were not implemented within the timeframe specified and for any corrective actions that remain open.

4.5 Have there been conflict of interest-related findings within the last two fiscal years? YES/NO

4.6 If there have been conflict of interest-related findings within the last two fiscal years, specify the conflict of interest-related finding and your response to the finding.

4.7 Has applicant been subject to conditional approvals due to program issues? YES/NO

4.8 If applicant has been subject to conditional approvals due to program issues, specify the terms of the special condition and whether or not the special condition is still applicable.

5. The applicant's ability to effectively implement statutory, regulatory, or other requirements imposed.

5.1. To what extent does applicant have policies to ensure programmatic expenses are reasonable, necessary and prudent (allowable)?

- Policies are implemented and followed
- Policies are not fully implemented
- The applicant does not currently have these types of policies

5.2. To what extent does applicant have policies to ensure programmatic activities are allowable?

- Policies are implemented and followed
- Policies are not fully implemented
- The organization does not currently have these types of policies

5.3. Is applicant able to fully comply with all statutory requirements including but not limited to 2CFR200?
YES/NO

5.4. If applicant is unable to fully comply with all statutory requirements of this program including but not limited to 2CFR200, **list the exception(s)**.

5.5. Has the applicant been out of compliance with any statutory, regulatory or other requirements of grant funding including but not limited to 2CFR200 **within the last two fiscal years?** YES/NO

5.6. If applicant been out of compliance with any statutory, regulatory or other requirements including but not limited to 2CFR200, **list compliance issues**.

Additional Comments:

Applicant Certification:

By signing this questionnaire, I certify that the statements herein are true, complete and accurate to the best of my knowledge. I also agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil or administrative penalties. (U.S. Code, Title 218, Section 1001)

I agree.

Authorized Representative's Name

Authorized Representative's Signature

Date

