

ALLEGHENY COUNTY
DEPARTMENT OF HUMAN SERVICES



CONTRACT MANUAL

COMMUNITY SERVICES BLOCK GRANT (CSBG)

Updated Effective February 1, 2024

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CHAPTER 1: INTRODUCTION

The Community Services Block Grant (CSBG) is a federal formula block grant administered by the Department of Health and Human Services, Administration for Children and Families, Office of Community Services. The CSBG is administered in Pennsylvania by the Department of Community and Economic Development (DCED). CSBG funds are provided to eligible entities to provide services and activities that have a measurable and significant impact on the causes of poverty in the community. The CSBG supports individuals and families who are low-income to gain stability and improved economic security. Eligible entities that receive CSBG funds from the DCED are organizations which are designated as a Community Action Agency (CAA), a Community Action Program or a Limited Purpose Agency. In Allegheny County outside of the City of Pittsburgh, the Allegheny County Department of Human Services (DHS) is designated as the CAA. In the City of Pittsburgh, Pittsburgh Community Services, Inc. is designated as the CAA. Within DHS, our work as a CAA is housed in the Office of Community Services (OCS). The mission of the OCS is to provide human services that empower people, strengthen families, and work to build a healthy, connected community. Through more than 100 community-based agencies and direct services, OCS offers support, rooted in solid data and best practices, that help prevent crises, stabilize households, and create opportunities to thrive.

The amount of CSBG funds provided to the DHS is based on the amount of CSBG funds approved in the federal budget, the amount of CSBG funds allocated to Pennsylvania, and a formula that determines the amount of CSBG funds awarded to a CAA based on population, poverty and unemployment data.

The CSBG Contract Manual contains information regarding requirements that must be met by CONTRACTOR(S) [hereinafter referred to as SERVICE PROVIDER(S)] that receives CSBG funds from the DHS. Any questions that SERVICE PROVIDERS may have about the CSBG Contract Manual or CSBG are to contact the DHS, OCS.

CHAPTER 2: EMBRACING A WHOLE FAMILY APPROACH

The 2Gen or whole family approach (hereafter referred to as whole family) was coined in the 1980s by the Foundation for Child Development. The whole family approach gained traction in the early 2000s and reemerged in 2010. In 2012, Ascend at the Aspen Institute published the “Two Generations, One Future” report that laid the groundwork for the growth and development of whole family field expansion. After a decade of learnings from organizations doing whole family work, Ascend published “State of the Field: Two Generation Approaches to Family Well-being”. It is from the work of Ascend at the Aspen Institute and the 2Gen or whole family work of organizations around the country that our community action work in Allegheny County will be shaped.

Ascend at the Aspen Institute was founded with the mission to serve as the hub for breakthrough ideas and proven strategies that move parents, especially women and their children beyond poverty toward educational success and economic security. Whole family approaches focus on creating opportunities for and addressing the needs of parents and children together. Ascend’s blueprint for action centers on helping parents pursue skills and complete education to improve their own economic security and stability, while simultaneously ensuring their children are on a path from the earliest age to engage in lifelong learning. This framework aligns very well with the mission of community action which is for individuals and families in poverty to achieve improved stability and economic security.

The adoption of a whole family approach for the community action work carried out by the DHS and SERVICE PROVIDERS began in January 2024. Leading up to the launch of a whole family approach, the DHS held a whole family kick-off meeting, provided one on one consultations on whole family with SERVICE PROVIDERS and made changes to the Synergy client management information system to document and track services and outcomes for the whole family. In 2024 the DHS will hold whole family practice convenings with SERVICE PROVIDERS to enhance information exchange, learning and best practices.

CHAPTER 3: GENERAL REQUIREMENTS

The SERVICE PROVIDER who receives CSBG funds from the DHS shall adhere to the contract requirements contained in the AGREEMENT between the COUNTY and the SERVICE PROVIDER, the DHS General Requirements Contract Specifications Manual, the CSBG Contract Manual, and to other documents that pertain to current contractors all of which are posted on the DHS website, including those identified in Exhibit D of the AGREEMENT.

1) GLOSSARY OF TERMS

The following terms within the Contract Manual have the following definitions:

- A. COUNTY refers to the County of Allegheny.
- B. DHS refers to the Allegheny County Department of Human Services.
- C. OCS refers to the Office of Community Services, a program office in the DHS.
- D. SERVICE PROVIDER refers to the agency contracted to provide services under the agreement with the DHS.
- E. DCED refers to the Pennsylvania Department of Community and Economic Development.
- F. CSBG refers to the Community Services Block Grant.
- G. WORKSTATEMENT refers to the scope of work to be performed by the service provider.
- H. SERVICE PROFILE refers to the service template contained in the Contract Manual for CSBG that is completed by the service provider and is approved by the OCS.
- I. AGREEMENT refers to the contract established between the COUNTY and the SERVICE PROVIDER in which the services to be provided are defined.

2) GENERAL PROVISIONS

The SERVICE PROVIDER ensures that it will abide by the terms and conditions as stipulated in the AGREEMENT between the COUNTY and the SERVICE PROVIDER and ensures that services will be provided only to individuals and families who meet the eligibility criteria established under the CSBG as specified in the CSBG Contract Manual.

3) MANDATED REPORTERS

The SERVICE PROVIDER shall be familiar with and adhere to the requirements contained in Chapter 63, Child Protective Services Law.

4) PURCHASE OF EQUIPMENT

Any furnishings and equipment purchased by the SERVICE PROVIDER with CSBG funds provided hereunder for use in the performance of this AGREEMENT shall be pre-approved by COUNTY, shall be the property of COUNTY, and at the request of the COUNTY shall be delivered to the COUNTY upon the termination or conclusion of this AGREEMENT.

- A. The SERVICE PROVIDER shall maintain and administer in accordance with sound business practice a program for the maintenance, repair, protection, preservation and insurance of all furnishings and equipment belonging to the COUNTY and used by the SERVICE PROVIDER in the performance of this Agreement.
- B. An up-to-date inventory of furnishings and equipment purchased during present and previous fiscal years must be maintained by the SERVICE PROVIDER.
- C. Any furnishings and equipment belonging to the COUNTY and used by the SERVICE PROVIDER in the performance of this Agreement, unless otherwise provided herein or approved in writing by the COUNTY, shall be used only in the performance of this AGREEMENT.
- D. In the event that the SERVICE PROVIDER is indemnified, reimbursed or otherwise compensated for any loss or destruction of, or damage to, any furnishings or equipment belonging to the COUNTY and used by the SERVICE PROVIDER in the performance of this AGREEMENT, it shall use the proceeds to repair, renovate or replace the COUNTY property involved, or shall credit such proceeds against the cost of the work covered by the AGREEMENT or shall otherwise reimburse the COUNTY as directed.

CHAPTER 4: CSBG PROGRAM REQUIREMENTS

a. Service Profile

The SERVICE PROVIDER shall complete and submit a SERVICE PROFILE to the OCS based on guidance provided by the OCS. The SERVICE PROFILE shall include the information listed in the designated template by inserting information after each numbered item. The SERVICE PROFILE template is located in the Appendix to this manual. The SERVICE PROFILE shall be updated and submitted to the OCS during the period of the AGREEMENT should there be changes to the information included in the SERVICE PROFILE.

b. Work Statement

The WORK STATEMENT is a description of the scope of work to be performed by the SERVICE PROVIDER for the services purchased by the COUNTY. The WORK STATEMENT is prepared by the COUNTY. The WORK STATEMENT is reviewed by the SERVICE PROVIDER during the contracting process. If the SERVICE PROVIDER has any questions or concerns about the WORK STATEMENT, the SERVICE PROVIDER is responsible to bring this information to the attention of the COUNTY (OCS is the 1st point of contact). The COUNTY will address any questions or concerns raised by the SERVICE PROVIDER. The WORK STATEMENT shall not change during the period of the AGREEMENT unless the COUNTY and the SERVICE PROVIDER agree to the change in a written amendment to the AGREEMENT.

The WORK STATEMENT sections include name of SERVICE PROVIDER, name of the DHS Office associated with the SERVICE PROVIDER, name of service, description of service, responsibility of the SERVICE PROVIDER relative to the delivery of the service, other information as determined by the COUNTY.

c. Contract Funding, Payment Method, Budget, Invoices

The DHS will inform the SERVICE PROVIDER of the contract funding award for the services purchased by the COUNTY under the AGREEMENT. The contract funding award represents the amount of funding the COUNTY has agreed to provide to the SERVICE PROVIDER for the services funded under the AGREEMENT.

The payment method for the disbursement of funding by the COUNTY to the SERVICE PROVIDER is determined by the COUNTY. Current payment methods include program funding and capped fee for service funding. Program funding is a payment method in which expenditures incurred by the SERVICE PROVIDER consistent with the approved budget are invoiced by the SERVICE PROVIDER per DHS policy and paid to the SERVICE PROVIDER by the COUNTY. Capped fee for service funding is a payment method in which the total funding awarded is capped with fees paid to the SERVICE PROVIDER based upon a fee structure which is mutually agreeable between the SERVICE PROVIDER and the COUNTY.

The SERVICE PROVIDER who receives a program funding award from the COUNTY is required to establish a budget for the service that is mutually agreeable between the SERVICE

PROVIDER and the COUNTY. The budget is submitted by the SERVICE PROVIDER in the Master Provider Enterprise Repository (MPER), Program Funded module. The OCS is responsible to review and approve the budget. The OCS is responsible to notify the SERVICE PROVIDER if the budget is not approved, the reason for non-approval, and changes that are required. The budget must be approved by the OCS before any payments can be made to the SERVICE PROVIDER. The SERVICE PROVIDER is responsible to request of OCS approval of a modification to an approved budget. Budget modifications that are approved by OCS are prepared in the MPER, Program Funded module.

The SERVICE PROVIDER who receives either a program funding award or a capped fee for service funding award is responsible to invoice the DHS monthly following the DHS policy and procedures. Monthly invoicing for a program funding award is through the MPER, Fiscal Enterprise. Monthly invoicing for capped fee for service funding award is through an invoicing process defined by DHS. Monthly invoices are reviewed and approved by OCS before remitted to the DHS Fiscal Office for payment processing.

d. Acknowledgement of Funding

Under the agreement the COUNTY has with the DCED relative to CSBG funding, the DCED requires that the following statement be added to publications issued by the COUNTY or the SERVICE PROVIDER regarding services or projects which are funded by CSBG:

This (project or service) is funded in whole or in part under the Community Services Block Grant (CSBG) from the Federal Department of Health and Human Services under the administration of the Commonwealth of Pennsylvania, Department of Community and Economic Development. Allegheny County Department of Human Services is the local agency which makes the CSBG funding award.

e. Eligibility for Services

The SERVICE PROVIDER who receives CSBG funding to provide services to individuals and families is required to determine eligibility for services at the referral stage of the intake process prior to enrollment. Eligibility for services is based on the eligible family unit income being within the allowable Federal Poverty Level (FPL), age of primary client 18 years of age and above, and residence in Allegheny County outside the City of Pittsburgh.

CSBG income eligibility requires that a person's income in relation to their family size does not exceed 200% of the FPL. Income eligibility determination is based on total eligible family income for the 30-day period immediately preceding the date of application for services. When determining income eligibility, persons in the family means persons in the household. A household includes any individual or group of individuals who live as one economic unit. The income of each individual in the household 18 years of age or older must be counted in the determination of eligibility. In determining whether an individual is part of a household, the SERVICE PROVIDER will determine if the individual pays for his/her own food and occupancy. If a person does pay for their own food and occupancy, they can be considered a household of one for the determination of eligibility.

As the FPL is based on annual income, the income for the past immediate 30 days is multiplied by 12. The FPL is published annually by the Department of Health and Human Services (HHS). The SERVICE PROVIDER is required to use the annually determined FPL for determination of CSBG income eligibility. Income that applies towards eligibility includes salaries, wages, dividends, interest, Social Security retirement benefits, unemployment compensation, and cash receipts of family members and others residing in the home. Income that does not apply towards eligibility includes Temporary Assistance for Needy Families (TANF), Social Security Disability Insurance (SSDI) payments, Supplemental Security Income (SSI) and training program stipends, Social Security survivor benefits, income tax refunds, income from unrelated persons in the home such as foster child, income from emancipated minors in the home, and salary or wages from children under 18 years of age in the home. Non-cash benefits as a source of support for families does not apply towards income eligibility but is documented by the SERVICE PROVIDER. Non-cash benefits includes child care subsidy, child care voucher, housing voucher, LIHEAP, permanent supportive housing, public housing, SNAP and WIC. When documentation for non-cash benefits is not available, the SERVICE PROVIDER shall make note of this in the case record.

Documentation of eligibility is required in each case record. Documentation of eligible income from persons served for example includes salary or wage statements, documentation from the County Assistance Office or the Social Security Administration, interest and dividend statements, documentation from the Department of Labor and Industry, and other sources when applicable. When there is no income or when documentation of income is not able to be secured, a self-declaration statement signed by the person who receives services is required. When a self-declaration is used, a reason is documented in the case record as to why the self-declaration is used, and the length of time the self-declaration covers is 90 days, at which point a redetermination of eligibility is required, which can be an additional self-declaration when appropriate. When household eligibility determination is identified for a person who is considered a household of one, documentation supporting that the person pays for their food and occupancy expenses is required with a signed statement by the other adult household member(s) and the person receiving services. In addition, a case note is required for a household size determination of one.

The redetermination of income eligibility after the initial determination of eligibility is to be completed annually every 365 days. However, should a life event occur which the SERVICE PROVIDER is made aware of such as marriage, birth of child, change in family composition, change in employment status, to name a few, a redetermination of eligibility is required at that time. A redetermination of eligibility is also required if there is a lapse of 60 or more days between the determination of eligibility and the start of a person's participation in a program or service.

When persons no longer meet eligibility criteria, the SERVICE PROVIDER has up to 30 days to transition the person from services. The transition process includes the completion of case note(s), referrals when appropriate, completed Service Closure and Case File Checklists, and a closure letter, all of which are uploaded in the client's electronic case record in the DHS Synergy information technology application by the SERVICE PROVIDER.

As CSBG funds are used to support Self-Sufficiency Services, Employment Assistance Services, Individual/Family Supports/Emergency Assistance (Basic Needs), and Transportation, the SERVICE PROVIDER shall adhere to CSBG income eligibility requirements for persons served. Eligibility for services determination for Volunteer Income Tax Assistance (VITA) and Financial Empowerment Community Outreach services shall follow guidelines established by other funders and/or the SERVICE PROVIDER and do not fall under CSBG requirements.

The SERVICE PROVIDER is required to secure income documentation and household size information to determine income eligibility. The SERVICE PROVIDER is required to use the DHS Synergy information technology application which has an eligibility calculator to determine income eligibility. The eligibility calculator also uses Allegheny County residency outside the City of Pittsburgh and the age of 18 or older for the primary client as additional eligibility criteria. The Synergy information technology application is not used for VITA and Financial Empowerment.

f. Self-Sufficiency Services

Self-Sufficiency Services are intended to assist eligible persons and their families to achieve stability and economic security. Self-Sufficiency Services focus on helping individuals and families overcome barriers to stability and economic security and builds upon their interests and strengths while accessing community services and supports. Accessing community services and support includes when applicable receiving assistance from the SERVICE PROVIDER to apply for public benefits which assists individuals and families with meeting their needs.

Self-Sufficiency Services are provided within the framework of a whole family or two generation approach. A whole family or two generation approach is a family-led strategy which provides adults and children with the tools to set, plan for, and achieve their goals together. When the whole family works together to support each other's goals, long-term change, stability, and well-being become a reality. The whole family approach supports the belief that families themselves know where they want to be. By using an approach where the families are in the driver's seat identifying their desired outcomes, practitioners of the whole family approach support the family in developing a plan to reach their goals. Research has shown that families who engage in a whole family approach experience significant improvements in healthy relationships, financial stability, and child well-being. The concept of working with a primary client will not change as this is a cornerstone of Self-Sufficiency Services. What will change is Self-Sufficiency Services adopting an intentional focus on the health and well-being of all members of the household and connecting household members to services and support which will assist them in reaching their goals.

Self-Sufficiency Services is defined by a scope of work and description which is contained in the contract WORKSTATEMENT for this service. Self-Sufficiency Services is also defined in the SERVICE PROFILE completed by the SERVICE PROVIDER which is a part of the AGREEMENT with the COUNTY. The SERVICE PROVIDER must adhere to the scope of work and responsibilities associated with this service as described in the contract WORKSTATEMENT and the SERVICE PROFILE.

The SERVICE PROVIDER is responsible to assess each referral for Self-Sufficiency Services to determine if the person and family meets eligibility requirements and is agreeable to work with the SERVICE PROVIDER towards achieving goals which upon achievement will improve stability and economic security. If a person and family does not meet eligibility requirements or is not agreeable to working on goals, the SERVICE PROVIDER shall identify where possible other services and resources the person and family may qualify for and assist in linking the person and family to these other services and resources. The SERVICE PROVIDER is to transition a person and family from referral status to either an open case status or close the referral within 60 days from the date of referral.

The SERVICE PROVIDER is responsible for completing initial and periodic assessments for individuals and families enrolled in Self-Sufficiency Services. The assessment instrument and process completed by the SERVICE PROVIDER is the Adult Needs and Strengths Assessment (ANSA). The SERVICE PROVIDER's direct services and supervisory staff for Self-Sufficiency Services are required to be certified in use of the ANSA and to maintain certification. ANSA certification is managed by the DHS. The ANSA is to be completed within 30-45 days from date of enrollment in services. The ANSA is used by the SERVICE PROVIDER to help inform the development of the service plan. Strengths and needs identified in the ANSA are to be imported by the SERVICE PROVIDER into the service plan. The ANSA is to be updated no less than every 6 months from the date of the most recent ANSA. The ANSA is designed to focus on the primary client. Using the ANSA to help inform a whole family approach is

accomplished by completing the section for additional respondents and in the open text section for my life my story.

The development of the service plan is to be completed within 60 days from date of enrollment by the SERVICE PROVIDER. The service plan is to be signed by the primary client and staff person of the SERVICE PROVIDER. The service plan will include goal(s) for the primary client and other individuals in a family when applicable, referrals made when applicable, action steps to be taken to achieve the goals, and the timeline relative to the goals and action steps. The service plan is to be updated no less than every 6 months from the date of the most recent service plan. The service plan is considered a living document and the cornerstone of Self-Sufficiency Services. A service plan reflects what the individual and family enrolled in Self-Sufficiency Services wants to achieve to reach the overall community action goal of stability and economic security.

The SERVICE PROVIDER will have a minimum of one contact per month with individuals and families enrolled in Self-Sufficiency Services. Face to face contact is encouraged whenever possible. When circumstances exist which make face to face contacts impossible or not safe due to health conditions or due to other factors, this is to be noted in a case contact note. Documentation in the case file must appear for all contacts. Contacts which meet the minimum of one contact per month that are not face to face can be by telephone call or virtual contact. Email and texts messages do not meet the one contact per month requirement, although maintaining contacts through these means is acceptable. Building and maintaining a professional and supportive working relationship with an individual and family is an important determinant of service retention and success. The SERVICE PROVIDER is encouraged to substitute face to face contact when not able to be maintained with a virtual contact through video means whenever possible. This is another means to build and maintain a supportive, professional relationship. The frequency and intensity of contacts will change over time. When initially engaging a primary client and family, more frequent contacts help to build a supportive and trusting relationship. The SERVICE PROVIDER shall consider this when making contacts with the primary client and family.

The SERVICE PROVIDER is responsible to inform custodial parents in single-parent families about the availability of child support services. Information regarding child support services is available by contacting Allegheny County Court of Common Pleas, Family Division, at this address <https://www.alleghenycourts.us/welcome-to-the-fifth-judicial-district-of-pennsylvania-county-of-allegheny/>

The SERVICE PROVIDER is responsible for documenting a contact in the client record in the Synergy client management system regarding having informed custodial parents in single-parent families of the child support services.

The SERVICE PROVIDER is responsible for documenting the services each individual in the family receives, referrals, and outcome indicators each individual in the family is working towards and achieves. The SERVICE PROVIDER is responsible to secure and maintain a resume in the Synergy case file for individuals in the family who have employment as a goal. The SERVICE PROVIDER will assist individuals with preparing a resume when applicable. The SERVICE PROVIDER is responsible for assisting individuals and families with preparing a household budget and documentation of this in the Synergy case file. The household budget is one of the tools the SERVICE PROVIDER will use as a way of assessing financial security and financial well-being. The SERVICE PROVIDER will assist individuals and families with completing a financial well-being assessment when the goal of improving financial well-being is included in the service plan. Measuring the achievement of improved financial well-being is handled through the completion of more than one financial well-being assessment.

The SERVICE PROVIDER is responsible to document all contacts and attempted contacts with the individual and family enrolled in Self-Sufficiency Services and to document information regarding closure from Self-Sufficiency Services which shall include case contact(s) note(s), service and case closure checklists, and a service closure letter. The SERVICE PROVIDER is responsible to document case file reviews in the Supervisor Log quarterly throughout the life of the case.

g. Employment Assistance Services

Employment Assistance Services are intended to assist unemployed individuals with obtaining and retaining employment and to assist underemployed individuals with obtaining and retaining improved employment. The SERVICE PROVIDER is responsible for adhering to the scope of work and responsibilities associated with Employment Assistance Services as described in the contract WORKSTATEMENT. Employment Assistance Services are also defined in the SERVICE PROFILE completed by the SERVICE PROVIDER as a part of the AGREEMENT with the COUNTY.

Employment Assistance Services are provided within the framework of a whole family or two generation approach. A whole family or two generation approach is a family-led strategy which provides adults and children with the tools to set, plan for, and achieve their goals together. When the whole family works together to support each other's goals, long-term change, stability, and well-being become a reality. The whole family approach supports the belief that families themselves know where they want to be. By using an approach where the families are in the driver's seat identifying their desired outcomes, practitioners of the whole family approach support the family in developing a plan to reach their goals. Research has shown that families who engage in a whole family approach experience significant improvements in healthy relationships, financial stability, and child well-being. The concept of working with a primary client will not change as this is a cornerstone of Employment Assistance Services. Employment Assistance Services delivered within a whole family approach framework engages the primary client to learn if there are needs and goals of other family members that may impact the goals of the primary client.

The SERVICE PROVIDER is responsible for meeting with and assessing the eligibility and interest of each person referred for this service. As part of the assessment, the SERVICE PROVIDER is responsible to gather information about other household members and to determine if the goals of the person referred for this service are impacted by the needs of other household members and how the SERVICE PROVIDER can assist the person referred for the service and other household members. Persons who meet the eligibility requirements receive information about the service from the SERVICE PROVIDER in order to make an informed choice about enrollment in the service. If a person does not meet eligibility requirements or elects to not enroll in this service, the SERVICE PROVIDER shall identify where possible other services and resources the person may qualify for and assist in linking the person to these other services and resources. The SERVICE PROVIDER is to transition a person from referral status to either an open case status or to closure within 60 days from the date of referral.

The SERVICE PROVIDER is responsible to develop a service plan with each person enrolled in services that includes short term and long-term career goals and any barriers to the achievement of these goals. The service plan may also include goals for other household members. Each person enrolled in this service works on the completion of a job readiness curriculum at their own pace. The SERVICE PROVIDER and the person enrolled in this service tracks the benchmarks the person achieves as they progress through the job readiness curriculum.

The SERVICE PROVIDER will offer specific services to persons that assist them with achieving their

service plan goals including workshops, assistance with preparation of a resume, assistance with addressing financial concerns, assistance with how to handle a criminal background with a prospective employer, job search skills, interview skills and mock interviews, attending employer presentations, and supporting persons to achieve job retention for up to 90 days following securing employment.

The SERVICE PROVIDER is responsible to inform custodial parents in single-parent families about the availability of child support services. Information regarding child support services is available by contacting Allegheny County Court of Common Pleas, Family Division, at this address <https://www.alleghencourts.us/welcome-to-the-fifth-judicial-district-of-pennsylvania-county-of-allegheny/>

The SERVICE PROVIDER is responsible for entering a note in Contacts in the client record in the Synergy client management system regarding having informed custodial parents in single-parent families of child support resources.

The SERVICE PROVIDER is responsible to document services a person receives, referrals a person receives for other services, and outcome indicators a person is working towards and has achieved. The SERVICE PROVIDER is responsible for documenting services, referrals and outcome indicators when applicable for other household members. The SERVICE PROVIDER is responsible to secure and maintain a resume for persons who have employment as a goal in the client record.

The SERVICE PROVIDER is responsible to document all contacts and attempted contacts with the person enrolled in this service and to document information regarding case closure from this service which includes case contact(s) case notes, service plan and case closure checklists, and a case closure letter. The SERVICE PROVIDER is responsible to document case file reviews in the Supervisor Log quarterly throughout the life of the case.

h. Individual/Family Supports/Emergency Assistance (a.k.a. Basic Needs)

Individual/Family Supports/Emergency Assistance Services (a.k.a. Basic Needs) are intended to assist eligible persons to meet basic and urgent needs which persons are not able to meet on their own due to loss of income, reduced income, or insufficient income. Individual/Family Supports/Emergency Assistance Services are defined by a scope of work and description which is in the contract WORKSTATEMENT for this service. The SERVICE PROVIDER will adhere to the scope of work and responsibilities associated with this service as described in the contract WORKSTATEMENT. Individual/Family Supports/Emergency Assistance Services are also defined in the SERVICE PROFILE completed by the SERVICE PROVIDER as a part of the AGREEMENT with the COUNTY.

The SERVICE PROVIDER is responsible to document in Synergy information technology application referrals for Individual/Family Supports/Emergency Assistance Services (Basic Needs). Referrals which are accepted move to active client status in the Synergy information technology application. Documentation of these services includes a completed application for assistance, referral information, household information, demographic information, eligibility information, case note(s), and 3rd party documents such as bills and/or notices which describe(s) the basic and urgent needs eligible persons have which they are not able to meet on their own. Documentation also includes a review of household savings, income and expenses for the most recent 30-day period to assess the financial capability of the individual/family to address the need. This information should be included in the completed application for assistance. The decision to provide Individual/Family Supports/Emergency Assistance Services is documented in the Synergy information technology application and is communicated to the

person requesting assistance as supported by a case note. Individual/Family Supports/Emergency Assistance Services does not include the provision of cash or checks to the person requesting assistance although providing vendor gift cards to address specific needs is permitted. Individual/Family Supports/Emergency Assistance Services usually involves transactions with 3rd parties on behalf of the person requesting assistance, to include but not be limited to payments for housing, utilities, food, transportation, loans, appliances, child care, medical, dental, other. The SERVICE PROVIDER is responsible to assist eligible persons when applicable to apply for public benefit programs to meet basic and urgent needs which persons are not able to meet on their own. This ensures that CSBG funds are not used when other sources of support are available or CSBG funds are used in combination with other funds to meet basic and urgent needs. Documentation in case note(s) is required when other sources of assistance to meet basic and urgent needs are reviewed and considered.

The SERVICE PROVIDER is responsible to inform custodial parents in single-parent families about the availability of child support services. Information regarding child support services is available by contacting Allegheny County Court of Common Pleas, Family Division, at this address <https://www.alleghenycourts.us/welcome-to-the-fifth-judicial-district-of-pennsylvania-county-of-allegheny/> The SERVICE PROVIDER is responsible for entering a note in Contacts in the client record in the Synergy client management system regarding having informed custodial parents in single-parent families of child support resources.

The SERVICE PROVIDER is responsible to document services a person receives including assistance which has been approved, an assistance award letter, referrals a person receives for other services, and outcome indicators a person is working towards and has achieved.

The SERVICE PROVIDER is responsible to document all contacts and attempted contacts with the person and to document information regarding closure which shall include case contact(s) note(s), case file and closure checklists, and a case closure letter. The SERVICE PROVIDER is responsible to document at least one case file review in the Supervisor Log .

i. Transportation Coordination

Transportation Coordination Services are intended to assist eligible persons with access to transportation to obtain and/or retain employment or to attend education/job training/career development services. The SERVICE PROVIDER is responsible to adhere to the scope of work and responsibilities associated with this service as described in the contract WORKSTATEMENT. Transportation Coordination Services are also defined in the SERVICE PROFILE completed by the SERVICE PROVIDER as a part of the AGREEMENT with the COUNTY.

The SERVICE PROVIDER is responsible to assess each referral for services to determine if the person referred meets eligibility requirements and is agreeable to work with the SERVICE PROVIDER towards achieving the goals as identified in the transportation assistance plan. Persons served will receive a transportation assistance program booklet or guide which describes the services, eligibility, and requirements to be met to receive services.

If a person does not meet eligibility requirements or is not agreeable to working on identified goals and action steps, the SERVICE PROVIDER shall identify where possible other services and resources the person may qualify for and assist in linking the person to these other services and resources. The

SERVICE PROVIDER is to transition a person from referral status to either an open case status or close the referral within 60 days from the date of referral.

The SERVICE PROVIDER is responsible to secure a completed application for transportation assistance which includes information that documents income and expenses for the most recent 30 day period and any savings maintained by the family. The SERVICE PROVIDER is responsible to develop a transportation assistance plan for each eligible person who receives services. Specific services that are provided are individualized to each person and aligns with the transportation assistance plan which may include assistance accessing public transportation, gas cards, payments towards cost of ride sharing, vehicle repairs, vehicle insurance payment, or vehicle payment. For persons who are assisted with the purchase of a vehicle, the SERVICE PROVIDER will ensure the person has a household budget that is able to accommodate the cost of vehicle ownership and maintenance. The SERVICE PROVIDER is permitted to use CSBG funds to support the cost of the purchase of a vehicle if other resources are applied towards the cost of purchase of a vehicle. The SERVICE PROVIDER will assist persons with the development of a household budget when necessary.

The SERVICE PROVIDER will develop and maintain case records of persons who receive services in the Synergy client management information system. Case records of persons served shall be standardized among the SERVICE PROVIDER and their community partners.

The SERVICE PROVIDER is responsible to inform custodial parents in single-parent families about the availability of child support services. Information regarding child support services is available by contacting Allegheny County Court of Common Pleas, Family Division, at this address <https://www.alleghenycourts.us/welcome-to-the-fifth-judicial-district-of-pennsylvania-county-of-allegheny/> The SERVICE PROVIDER is responsible for entering a note in Contacts in the client record in the Synergy client management system regarding having informed custodial parents in single-parent families of child support resources.

The SERVICE PROVIDER is responsible to document the services a person receives which includes a payment assistance letter to vendor and an award letter informing the person of the assistance rendered, referrals a person receives for other services, and outcome indicators a person is working towards and has achieved.

The SERVICE PROVIDER is responsible to document all contacts and attempted contacts with the person enrolled in this service and to document information regarding closure from this service including case contact note(s), one entry in Supervisor log, case file and case closure checklists, and a case closure letter.

j. Volunteer Income Tax Assistance (VITA)

Volunteer Income Tax Assistance (VITA) Services are intended to assist persons who reside in Allegheny County with the preparation and filing of federal, state, and local tax returns. The SERVICE PROVIDER is responsible for adhering to the scope of work and responsibilities associated with this service as described in the contract WORKSTATEMENT. VITA Services are also defined in the SERVICE PROFILE completed by the SERVICE PROVIDER as a part of the AGREEMENT with the COUNTY.

The SERVICE PROVIDER will secure and maintain certification and approval as a VITA service from the

Internal Revenue Service. The SERVICE PROVIDER will recruit, train and support persons who are certified as tax-preparation volunteers for VITA services. The SERVICE PROVIDER will supervise, support and approve the work performed by certified tax-preparation volunteers. The SERVICE PROVIDER will operate and manage one or more accessible sites in an area of Allegheny County which DHS is agreeable to. The SERVICE PROVIDER will prepare communication and marketing activities to promote the availability of VITA services. The SERVICE PROVIDER will secure and maintain data regarding the VITA services which meets program reporting requirements and the requirements of the DHS. The DHS data requirements includes but are not limited to an unduplicated count of the number of persons who had a tax return prepared and submitted, an unduplicated count of the number of persons whose tax return included an Earned Income Tax Credit (EITC) and/or the Child Tax Credit (CTC), the average annual household income of the persons who had a tax return prepared and submitted, the average tax refund for persons who had a tax return prepared and submitted, the total tax refund amount for the total number of unduplicated persons who had a tax return prepared and submitted, the total amount of the tax refund amount under the EITC and CTC. Other DHS data requirements primarily include client and family demographic information which the DHS will specify to the SERVICE PROVIDER.

k. Financial Empowerment Community Outreach

Financial Empowerment Community Outreach Services are intended to provide financial education and empowerment classes and workshops both in-person and virtual at accessible locations within communities of Allegheny County that cover topics that include but are not limited to management of household income, savings, debt reduction, banking, credit reports, scores and restoration, payday loans and predatory lending, household energy efficiency, weatherization, use of utility company assistance programs and use of public benefits. The SERVICE PROVIDER is responsible for adhering to the scope of work and responsibilities associated with this service as described in the contract WORKSTATEMENT. Financial Empowerment Community Outreach Services are also defined in the SERVICE PROFILE completed by the SERVICE PROVIDER as a part of the AGREEMENT with the COUNTY.

The SERVICE PROVIDER is responsible to provide communication and marketing activities to promote financial empowerment classes and workshops. The SERVICE PROVIDER is responsible to maintain and report to the DHS information regarding financial empowerment classes and workshops that includes the names of the classes and workshops held, number of persons who attended each class or workshop, a description of the classes and workshops, the dates the classes and workshops are held, the hours of instruction for the classes and workshops. The SERVICE PROVIDER is responsible to report to the DHS an unduplicated count of the number of persons who attended classes and workshops during the period of the AGREEMENT and the participant's evaluations of the classes and workshops. Persons who attend more than one class or workshop during the period of the AGREEMENT are counted once when the SERVICE PROVIDER reports the unduplicated count of persons who attended classes or workshops. The SERVICE PROVIDER is responsible to maintain a roster of the participants who attended the financial empowerment classes and workshops that includes the person's name and address and the name of the community they reside in. Other DHS data requirements primarily include client demographic information which the DHS will specify to the SERVICE PROVIDER.

I. Tangible Aid and Assistance

The SERVICE PROVIDER who provides Self-Sufficiency Services, Employment Assistance Services, Individual/Family Supports/Emergency Assistance Services (Basic Needs) and Transportation Coordination Services is permitted to use CSBG funds allocated under the AGREEMENT for Tangible Aid and Assistance for eligible individuals and other family members for the purpose of removing barriers to achieve service plan goals and/or to meet basic and urgent needs that eligible individuals are not able to meet on their own. The standards to be adhered to by the SERVICE PROVIDER when CSBG funds are used for Tangible Aid and Assistance includes:

1. The SERVICE PROVIDER must have the client expenses line item in the approved AGREEMENT budget when the AGREEMENT is program funded. When the AGREEMENT is fee for services, the SERVICE PROVIDER is permitted to use funds from the fee(s) towards the provision of Tangible Aid and Assistance.
2. Tangible Aid and Assistance for eligible individuals and other family members is capped at \$1,250.00 per case type during the time of the active enrollment period. The SERVICE PROVIDER is responsible to assist the eligible individual's and other family members linkage to public benefits or resources to meet their needs when applicable. CSBG funds are able to be used with other sources of funds when applicable, or as the sole source of support when no other funds are available.
3. The SERVICE PROVIDER must document in the client file in the Synergy client management system the barrier(s) or need(s) the Tangible Aid and Assistance is intended to address. Documentation is to be included in the contact(s) note(s), assistance summary, and document folder. The document folder shall be used for storage of receipt(s) or other records that support the expenses relative to Tangible Aid and Assistance.
4. Examples of Tangible Aid and Assistance include but are not limited to rental assistance, mortgage assistance, food expenses, childcare expenses, GED test fees, employment examination fees, transportation expenses, utility payments, utility service restoration, vehicle repair, automobile insurance, interview clothing, work clothing, PA ID card, driver license fees, background checks, etc. Tangible Aid and Assistance requires the approval of SERVICE PROVIDER program management staff. A contact note in the Synergy client file which documents program management staff approval is required.

m. Service Provider Policies

The SERVICE PROVIDER shall have a written policy regarding the denial of services and client grievances. The denial of services pertains to the SERVICE PROVIDER not providing services to eligible persons or for persons who are not eligible for reasons defined by the SERVICE PROVIDER which are included in the written policy. Client grievances pertains to the written policy of the SERVICE PROVIDER which is communicated to clients regarding the rights of clients to file a grievance and how the grievance is handled by the SERVICE PROVIDER. The written policy regarding client grievances shall include contact information for DHS's Directors Action Line with a notation that the Directors Action Line may be contacted regarding complaints, concerns, or grievances.

n. Results-Oriented Management and Accountability (ROMA) and Other Approved Continuous Quality Improvement Models

Results-Oriented Management and Accountability (ROMA) is an approved performance management and accountability model for services funded by the CSBG. Other approved continuous quality improvement models included CAP Infinity Basic (on-line course developed by Community Action Association of PA), PDCA (Plan Do Check Act), DMAIC (Define Measure Analyze Improve Control), and TQM (Total Quality Management).

ROMA is a measurement and performance framework which has been widely used for the last 20+ years by CSBG grantees to maintain accountability and management oversight. ROMA is a performance-based initiative designed to preserve the anti-poverty focus of CSBG and to promote greater effectiveness at the state and local level for grantees receiving CSBG funds. The passage of the Government and Performance Results Act of 1993 led to the development of ROMA. ROMA incorporates the use of outcomes and results into the management and operation of CSBG grantees. The federal Health and Human Services Department describes core elements of ROMA that includes a focus on client/community/organization change, an understanding of the interdependence of clients, communities, and programs in that client improvements reinforce community improvements, an understanding that CSBG does not succeed as an individual program, and the emphasis upon partnerships and the leveraging of other resources.

The other approved continuous quality improvement models were approved for use by the PA Department of Community and Economic Development (DCED) in 2022. CAP Infinity Basic has been made available to SERVICE PROVIDERS's beginning in 2023 by the DHS.

The SERVICE PROVIDER's staff who manage program services, provide staff supervision, and provide direct services which are funded with CSBG funds are to be trained in ROMA or another approved continuous quality improvement models.

o. Information Technology Application

The SERVICE PROVIDER who provides Self-Sufficiency Services, Employment Assistance Services, Transportation Coordination, and Individual/Family Supports/Emergency Assistance Services (referred to as Basic Needs in Synergy) shall use the information technology application designated by the DHS to document information regarding individuals and families who receive services funded by the CSBG. The information technology application is known as Synergy, hereafter referred to as the Synergy client management system. The Synergy client management system shall also be used by the SERVICE PROVIDER to document referrals for these services which do not result in service enrollment but rather are handled as an Outreach and Referral (referral type) in Synergy.

The Synergy client management system is used by the DHS and the SERVICE PROVIDER to document and retain information that is used by the DHS to meet CSBG quarterly and annual reporting requirements. The Synergy client management system is an electronic client management information system. The Synergy client management system is a secure electronic client management information system which is web accessible to designated DHS staff and the SERVICE PROVIDER's staff with their computer devices.

The DHS provides training to SERVICE PROVIDER staff in the use of the Synergy client management system. This includes both initial training for new users and on-going training.

The SERVICE PROVIDER is required to meet minimum computer specifications defined by the DHS in order to use the Synergy client management system in an optimal manner. Information regarding minimum computer specifications is available on the DHS web-site

<https://www.alleghenycounty.us/Human-Services/Resources/Doing-Business/Data-processing-Systems.aspx>

The SERVICE PROVIDER's staff members are required to have individual user accounts to use the Synergy client management system. The SERVICE PROVIDER shall submit a user account form referred to as an ISAR to the DHS to request a new user account for each person who uses the Synergy client management system. The DHS has a site the SERVICE PROVIDER accesses to complete an ISAR request on-line. The link to information regarding the ISAR is here <https://s3.amazonaws.com/dhs-application-support/index.htm> After selecting this link, select Applications Access then select the Online ISAR link to complete and submit the ISAR request. The SERVICE PROVIDER's staff members are responsible to adhere to the DHS User Account Policy, link to policy <https://www.alleghenycounty.us/Human-Services/Resources/Doing-Business/Data-processing-Systems.aspx>. The SERVICE PROVIDER is responsible to contact OCS when a staff member needs a user account and when a staff member needs trained in the Synergy client management system. The SERVICE PROVIDER is responsible to contact OCS when a staff member no longer needs access to the SYNERGY client management system so the user account for that staff member is deactivated.

The SERVICE PROVIDER is responsible to use the SYNERGY client management system to document information in real-time. Real-time is defined as inputting information and documentation into the SYNERGY client management system within 3 business days from the event or from the date when the required information and documentation has been secured.

The SERVICE PROVIDER is responsible to document information in the Synergy client management system in the following screens: referral information, case summary, household information, sexual orientation and gender identify expression, contact information, demographics, eligibility, document

folder, case involvement, supports, contacts, assistance summary, assessments, service plans, recommendations, outcome indicators, services, supervisor log. Documentation requirements in the Synergy client management system for Employment Assistance, Individual/Family Supports/Emergency Assistance and Transportation Coordination do not include the Adult Needs and Strengths Assessment (ANSA). The SERVICE PROVIDER for Individual/Family Supports/Emergency Assistance (Basic Needs) and Transportation Coordination is required to secure an application from the person who requests assistance and to upload the application to the client document folder. The Synergy client management system screens and information fields within the screens comprise the electronic case record. The electronic case record in the Synergy client management system is the official record for each person served by the SERVICE PROVIDER under this AGREEMENT and is subject to monitoring and audit reviews by DHS, DCED, and other authorized entities.

The SERVICE PROVIDER is responsible to conduct internal file reviews of client records as this process ensures quality service and data in the Synergy client management system. Internal file reviews are enhanced by use of the Case File Review Checklist. All internal file reviews are to be documented by the SERVICE PROVIDER in the supervisor log in the Synergy client management system. The SERVICE PROVIDER for Self-Sufficiency Services and Employment Assistance Services is responsible to complete and document an internal file review for each case file at 60 days from enrollment and quarterly thereafter. Quarterly reviews are to be completed and documented in the Supervisor Log no later than 10 days after the end of each calendar year quarter. The last month of each calendar year quarter includes March, June, September, December. Internal file reviews are most effective when completed jointly by the direct service staff and supervisor. The SERVICE PROVIDER for Individual/Family Supports/Emergency Assistance (Basic Needs) and Transportation Coordination is responsible to complete and document one case file review for each of these case types.

The SERVICE PROVIDER is responsible to secure and upload documents specific to individuals and families who receive services in the client document folder in the Synergy client management system. Critical documents include income and other eligibility information, identity information specific to the primary client, benefit information, information when applicable that supports the achievement of outcome indicators, and other information as determined appropriate by the SERVICE PROVIDER or by the DHS. Both the Case File Review Checklist, Case Closure Checklist, and case closure letter are uploaded by the SERVICE PROVIDER to the document folder at case closure. The case closure letter is a letter that informs the individual who has received services of the closure of their case with the SERVICE PROVIDER and any referrals or recommendations for the individual who has received services.

When a re-determination of eligibility is completed by the SERVICE PROVIDER in the Synergy client management system and the individual who has received services is determined to no longer be eligible, the SERVICE PROVIDER has up to 30 days to transition the individual from services and end services. In addition to the documents identified to be uploaded to the document folder at case closure, the SERVICE PROVIDER is responsible to enter information into contacts regarding eligibility and case closure.

The SERVICE PROVIDER is responsible to stay abreast of changes to the SYNERGY client management system and to use the Synergy client management system consistent with the changes which have occurred. Changes to the Synergy client management system are communicated to the SERVICE PROVIDER by the DHS.

The SERVICE PROVIDER is responsible to notify the OCS in real time should there be any issues with

the use of Synergy client management system.

p. National Performance Indicators (NPI's)

SERVICE PROVIDERS that receive CSBG funds to support services to income eligible individuals and families under Goal 1 (Individuals and Families with Low Income are Stable and Achieve Economic Security) of the National Community Action Theory of Change are required to use National Performance Indicators (NPI's) that are clustered under six domains which includes Employment; Education and Cognitive Development; Income, Infrastructure and Asset Building; Housing; Health Social/Behavioral Development; and Civic Engagement and Community Involvement. NPI's are part of the measurement system for assessing the impact of services on individuals and families. NPI's available to select from are in the Synergy client management system used by the DHS and the SERVICE PROVIDER. NPI's statuses include working towards, achieved and no longer applicable. The SERVICE PROVIDER is responsible to select NPI's that are applicable to individuals and families they work with whose service plan goals are congruent with selected NPI's. The SERVICE PROVIDER is responsible to select the status working towards and the effective date for each NPI that is applicable and to select the status achieved when applicable and the effective date. If the status working towards is selected and the status achieved is not obtained, the working towards status shall remain as the last status in the client case record. The status no longer applicable is also available to select by the SERVICE PROVIDER. This status is selected only when an NPI a person has selected to work on no longer applies based on the unique circumstances of each person. Each of the six domains and the NPI's that the SERVICE PROVIDER selects from and reports on are identified here. Guidance is also provided regarding the intent of selected NPI's.

Employment NPI's

NPI 1a – The number of unemployed youth who obtained employment to gain skills or income

NPI 1b – The number of unemployed adults who obtained employment up to a living wage.

NPI 1c – The number of unemployed adults who obtained and retained employment for 90 days up to a living wage.

NPI 1e – The number of unemployed adults who obtained employment with a living wage or higher.

NPI 1f – The number of unemployed adults who obtained and retained employment for 90 days with a living wage or higher.

NPI 1h – The number of employed adults in a career advancement program who entered or transitioned into a position that provided increased income and/or benefits.

NPI 1z.1 – The number of underemployed adults who obtained employment up to a living wage.

NPI 1z.2 – The number of underemployed adults who obtained employment at living wage or higher.

Guidance regarding measurement of living wage – The SERVICE PROVIDER shall use the living wage measurement tool based on 250% of Federal Poverty Guidelines (FPG) and household size to determine when earned income from employment constitutes a living wage. Living wage employment is achieved when an individual's gross earned income is 250% or more of the FPG and the individual is a member of a family whose combined gross earned income is 250% or more of the FPG for its actual family size. The living wage measurement tool which the SERVICE PROVIDER shall refer to is located in the Appendix to this manual.

Guidance regarding reporting on employment retention for 90 days when eligible household income exceeds 200% Federal Poverty Levels – The SERVICE PROVIDER is responsible to report on NPI employment retention at 90 days. When an individual a SERVICE PROVIDER has worked with

secures employment that moves them above 200% of FPL, the SERVICE PROVIDER is responsible to work with the individual for up to 30 days to transition them from services while keeping the case in an active status in the Synergy client management system in order to report out on 90-day employment retention. The SERVICE PROVIDER is responsible to discuss tracking 90-day employment retention with the individual who received services and to secure their agreement to inform the SERVICE PROVIDER of achievement or not of the 90-day employment retention measure. For individuals whose income exceeds 200% of Federal Poverty Level and their case file in Synergy client information system has remained open to track 90-day employment retention, the SERVICE PROVIDER has 3 business days following the 90-day employment retention measure to close the case in the Synergy client information system.

Guidance regarding employed adults in a career advancement program who entered or transitioned into a position that provided increased income and/or benefits – Activities an individual may be engaged in that qualify for this outcome indicator includes but are not limited to a program that provided continuing or vocational education, a program that provided job referral or employment placement assistance, a program that provided employment counseling/coaching, on the job training, starting a micro-business.

Education and Cognitive Development NPI's

NPI 2a – The number of children (0-5) who demonstrate improved emergent literacy skills

NPI 2b – The number of children (0-5) who demonstrate skills for school readiness

NPI 2c.1 – The number of children enrolled in early childhood education (0-5) who demonstrate positive approaches towards learning including improved attention skills

NPI 2c.2 – The number of children (1st - 8th grades) who demonstrate positive approaches towards learning including improved attention skills

NPI 2c.3 – The number of children (9th – 12th grades) who demonstrate positive approaches towards learning including improved attention skills

NPI 2d.1 – The number of children enrolled in early childhood education (0 – 5) who are achieving at basic grade levels (academic, social, other school success skills)

NPI 2d.2 – The number of children (1st – 8th grades) who are achieving at basic grade levels (academic, social, other school success skills)

NPI 2d.3 – The number of children (9th – 12th grades) who are achieving at basic grade levels (academic, social, other school success skills)

NPI 2e – The number of parents/caretakers who improved their home environment conducive to learning

NPI 2f – The number of adults who demonstrated improved basic education.

NPI 2g – The number of adults who obtained high school diploma and/or obtained equivalency certificate or diploma.

NPI 2h – The number of adults who obtained a recognized credential, certificate, or degree related to the achievement of educational or vocational skills.

NPI 2i – The number of adults who obtained an associate degree.

NPI 2j – The number of adults who obtained a bachelor's degree.

Education and cognitive outcomes for children and youth are supported by education goal(s) in the service plan. Guidance for these NPI's follows.

NPI 2a outcome achievement is supported by information provided by the parent(s) to the SERVICE PROVIDER that a child has improved emergent literacy skills by way of new or

improved vocabulary skills and/or enhanced literacy competence. This could include foundations of language and reading such as use of new vocabulary, storytelling, phonetic awareness (rhyming words), and/or letter recognition by sight and/or sound.

NPI 2b outcome achievement is supported by information provided by the parent(s) to the SERVICE PROVIDER that a child has exhibited signs of being ready to enter school such as enhanced/increased socialization and communication skills. School readiness skills may include recognition of letters in the alphabet, ability to rhyme words, name colors, count to 10, use full sentences, share and take turns, motor skills such as using a glue stick or snapping clothing, ability to follow directions and participate in group activities.

NPI 2c.1, 2c.2 and 2c.3 outcome achievement is supported by information provided by the parent(s) to the SERVICE PROVIDER. Positive approaches to learning include emotional and behavioral self-regulation/attention, cognitive self-regulation, initiative and curiosity, information gathering, working memory, problem solving, creativity, and persistence through small frustrations. This may include information and documentation a parent receives from an educational organization.

NPI 2d.1, 2d.2 and 2d.3 outcome achievement is supported by information provided by the parent(s) to the SERVICE PROVIDER that their child or youth has achieved basic grade level achievement (academic, social, and other school success skills). This may include feedback and information and/or documentation a parent(s) receives from an educational organization.

NPI 2e outcome achievement is supported by information provided by the parent(s) to the SERVICE PROVIDER that their home environment is more conducive to learning due to changes or enhancements which have been made.

Guidance regarding adults who demonstrated improved basic education – Basic education includes the basic skills adults need, such as reading, writing, Math, English language proficiency, and problem solving, to be productive workers and citizens. This can also include basic education needed as a prerequisite to obtain additional education. An example of an activity that supports the selection of this outcome indicator is an adult who attended a reading, writing or other basic skills class who demonstrated improved knowledge.

Guidance regarding adults who obtained a recognized credential, certificate, or degree related to achievement of educational or vocational skills – An example of an activity that supports the selection of this outcome indicator is an adult in a case management or coaching program or a skills training program who earned a certificate or credential as part of their preparation for seeking employment.

Income, Infrastructure, and Asset Building NPI's

NPI 3a – Number of individuals who achieved and maintained capacity to meet basic needs for 90 days.

NPI 3c – Number of individuals who opened a savings account or IDA (Individual Development Account)

NPI 3d – Number of individuals who increased their savings.

NPI 3e – Number of individuals who used their savings to purchase an asset.

NPI 3e1 – Of the above, the number of individuals who purchased a home.

NPI 3f – Number of individuals who improved their credit scores.

NPI 3h – Number of individuals who report improved financial well-being.

NPI 3z.1 – Number of individuals who obtained one or more public benefits.

NPI 3z.2 – Number of individuals who improved stability and economic security through receipt of individual/family supports/emergency assistance to meet basic/urgent needs.

NPI 3z.3 – Number of parents/caretakers who opened an Individual Education Account for one or more children in the family.

NPI 3z.4 – Number of parents/caretakers who increased their contributions to an Individual Education Account for one or more children in the family.

Guidance on individuals who achieved and maintained capacity to meet basic needs for 90 days

The SERVICE PROVIDER that selects this outcome indicator to work towards achieving must provide one or more activities that helps the person to manage household income and resources, maintain a budget, use financial services in the community, provide financial coaching and guidance. While a person needs to be able to meet basic needs to achieve stability, the selection of this outcome indicator requires a role the SERVICE PROVIDER plays towards meeting this outcome indicator.

Guidance on individuals who used their savings to purchase an asset – This outcome indicator may apply to various situations such as the use of savings to purchase a vehicle or new appliance(s) for the home. Another example could be the use of savings to purchase savings bonds for a child for their future higher education.

Guidance on number of individuals who used their savings to purchase a home – This outcome indicator may qualify when savings was used to meet down payment requirements for a home purchase.

Guidance on number of individuals who improved their credit scores – For use of this outcome indicator, the SERVICE PROVIDER is required to secure more than one credit score for a person they are working with so that an improvement in the score can be demonstrated.

Guidance on number of individuals who report improved financial well-being – For the use of this outcome indicator, the SERVICE PROVIDER is required to have individuals they are working with complete the financial well-being scale from the Consumer Financial Protection Bureau which demonstrates improvement in an individual's financial well-being. Financial well-being can be described as a state wherein a person can fully meet current and ongoing financial obligations, can feel secure in their financial future, and is able to make choices that allow them to enjoy life. The assessment will produce a score between 0 and 100 upon completion. When an individual completes a re-assessment with a higher score in comparison to their initial assessment, this will demonstrate a person's level of financial well-being has improved. This website contains pertinent information

<https://www.consumerfinance.gov/consumer-tools/financial-well-being/>

The Financial Well-Being Questionnaire and Scoresheet is in the Appendix to the CSBG Contract Manual.

Housing NPI's

NPI 4a – Number of individuals experiencing homelessness who obtained safe temporary shelter.

NPI 4b – Number of individuals who obtained safe and affordable housing.

NPI 4c – Number of individuals who maintained safe and affordable housing for 90 days.

NPI 4e – Number of individuals who avoided eviction.

NPI 4f – Number of individuals who avoided foreclosure.

NPI 4g – Number of individuals who experienced improved health and safety due to improvements in the home (e.g. reduction or elimination of lead, radon, carbon dioxide, fire hazards, electrical issues, etc.)

NPI 4h – Number of individuals with improved energy efficiency and/or energy burden reduction in their homes.

Guidance on housing indicators – Due to a change in reporting, each housing indicator is to be associated with all household members. The logic impacts all members of the household.

Guidance on households experiencing homelessness who obtained safe temporary shelter – The SERVICE PROVIDER is responsible to use the US Housing and Urban Development (HUD) definition of homelessness. SERVICE PROVIDER who selects this outcome indicator for an individual they are working with must be able to document in the Synergy client management system case file that the individual was homeless and that through the efforts of the SERVICE PROVIDER the individual obtained safe temporary shelter.

Guidance on households who obtained safe and affordable housing – The SERVICE PROVIDER who selects this outcome indicator for an individual they are working with must be able to document in the Synergy client management system case file that the individual obtained housing that is considered safe as defined by the primary client and that the housing is affordable defined as housing that consumes no more than 30% of household income. A household who has or obtains a subsidized housing voucher which enables them to afford housing also qualifies.

Guidance on households who experienced health and safety improvements in the home or who improved energy efficiency and or energy burden reduction in their homes – The SERVICE PROVIDER who selects either of these outcome indicators for an individual they are working with must be able to document in the Synergy client management system case file that the household received weatherization assistance for the designated weatherization assistance program that serves residents of Allegheny County or the household received assistance from another resource.

Health and Social/Behavioral Development NPI's

NPI 5b – Number of individuals who demonstrated improved physical health and well-being.

NPI 5c – Number of individuals who demonstrated improved mental and behavioral health and well-being.

NPI 5d – Number of individuals who improved skills related to the adult role of parents/caregivers.

NPI 5e – Number of parents/caretakers who demonstrate increased sensitivity and responsiveness in their interactions with their children.

NPI 5f – Number of seniors (65 years of age or older) who maintained an independent living situation.

NPI 5z.1- Number of disabled adults who maintained an independent living situation.

Guidance on individuals who demonstrate improved physical health and well-being or improved mental and behavioral health and well-being – The SERVICE PROVIDER who selects this outcome indicator for an individual they are working with must have a health need (physical or mental/behavioral) and health improvement goal identified in the service plan and must be able to document in the Synergy client management system case file improvements made by the individual. Improvements made are to be documented by case contact notes, updated assessments, and information provided by the individual they are working with.

Guidance on individuals who improved skills related to adult role of parents/caregivers – The SERVICE PROVIDER who selects this outcome indicator for an individual they are working with must have some means to document improved skills through the individual's participation in a program that builds these skills. A certificate of completion of a program or a pre and post measure of skills may satisfy this requirement.

Guidance on parents/caretakers who demonstrate increased sensitivity and responsiveness in their interactions with their children – The SERVICE PROVIDER who selects this outcome indicator will have a goal in the service plan regarding the parents/caretakers increasing their sensitivity and responsiveness in their interactions with their children and will have obtained information from the parents/caretakers in which they self-report improvement in sensitivity and responsiveness in their interactions with their children.

Civic Engagement and Community Involvement NPI's

NPI 6a – Number of community action program participants who increased skills, knowledge, and abilities to enable them to work with community action to improve conditions in the community.

NPI 6a.1 – Of the above, number of community action program participants who improved their leadership skills.

NPI 6a.2 – Of the above, number of community action program participants who improved their social networks.

NPI 6a.3 – Of the above, number of community action program participants who gained other skills, knowledge and abilities to enhance their ability to engage.

Guidance regarding NPI 6a - program participants who increased skills, knowledge, and abilities to enable them to work with community action to improve conditions in community – An example of an activity that supports the selection of this outcome indicator includes persons who participated in a program or service which increased their skills, knowledge and abilities and worked with community action through engagement with the SERVICE PROVIDER to improve conditions in the community. NPI 6a MUST be selected when any of the other indicators 6a.1, 6a.2, or 6a.3 are selected, as these indicators are a subset of 6a.

Guidance regarding NPI's 6a.1, 6a.2, 6a.3 – The selection of any of these outcome indicators by SERVICE PROVIDER signifies a person participated in a program or service which improved their leadership skills, improved their social networks, or who improved their ability to engage.

q. Services Documentation

SERVICE PROVIDERS that receive CSBG funds to support services to income eligible individuals and families under Goal 1 (Individuals and Families with Low Income are Stable and Achieve Economic Security) of the National Community Action Theory of Change are required to document Services that are clustered under seven domains which includes Employment; Education and Cognitive Development; Income, Infrastructure and Asset Building; Housing; Health Social/Behavioral Development; Civic Engagement and Community Involvement; Services Supporting Multiple Domains. Services available to select from are in the Synergy client management system. Services are located by selecting the Tracking link, then the Service Summary link. The SERVICE PROVIDER is responsible to select the Domain and the Service(s) that are applicable to individuals in the family they work with. The SERVICE PROVIDER is responsible to select the effective date for each Service. Each of the seven Domains and the Services that the SERVICE PROVIDER selects from are identified here. Guidance is also provided regarding the intent of certain Services. Services selected are either provided directly by the SERVICE PROVIDER or are provided by another organization which the SERVICE PROVIDER has referred a person.

The SERVICE PROVIDER is responsible to select Services for individuals in the family they work with each calendar year during which a person is active in services. For example, for persons who received case management services in 2023 and continues to receive case management services in 2024, the SERVICE PROVIDER is responsible to document case management as a service with a 2024 date. This practice ensures that all services people receive in each calendar year are documented in the year in which the services were provided. This practice also ensures accuracy in data for annual reporting on use of CSBG funds.

Guidance on Services in All Domains – the services listed under each domain are intended to help persons achieve outcomes in that domain. The services listed under Services That Support Multiple Domains are services which help persons to achieve outcomes in one or more of the domains such as employment, education and cognitive, etc.

Employment Domain Services

- Apprenticeship/Internship
- Career Workshops
- Employment Supplies
- Interview Skills Training
- Job Readiness Training
- Job Referrals
- Job Search Coaching
- On the job and other work experience
- Post-Employment Coaching
- Pre-employment physicals, background checks
- Resume Development
- Vocational Training
- Youth Summer Work Placements

Education and Cognitive Development Services

- Adult Literacy Classes
- Applied Technology Classes
- Basic Education Classes

Before and After School
Early Head Start
English Language Classes
Head Start
High School Equivalency Classes
Home Visits
Other Early Childhood Education
Parenting Supports
Post-Secondary Education Preparation
Scholarships
School Supplies
Youth Summer Recreation Placements
Youth Summer Education Programs
Youth Behavior Improvement Programs
Youth Mentoring Programs
Youth Leadership Training Programs

Guidance regarding Basic Education Classes - basic education classes provide instruction for basic skills adults need, such as reading, writing, Math, English language proficiency, and problem solving, to be productive workers and citizens. This can also include basic education needed as a prerequisite to obtain additional education.

Income and Asset Building Services

Child Support Payments
Financial Management Programs (budgeting, credit management, credit repair, etc.)
First-time Homebuyer Counseling
Foreclosure Prevention Counseling
Health Insurance
Small Business Start-up and Development Counseling
SNAP Benefits
Social Security/SSI Benefits
TANF Benefits
Veteran's Benefits
VITA, EITC, Other Tax Preparation Programs

Guidance regarding Child Support Payments – child support payments as a service is selected when the SERVICE PROVIDER assists the enrolled person or other household member with obtaining child support payments.

Housing Services

Deposit Payments
Energy Efficiency Improvements (insulation, air sealing, furnace repair, etc.)
Healthy Homes Services (lead and/or radon elimination or reduction, carbon dioxide detectors, smoke detectors, fire hazards, electrical)
Home Repairs (structural, appliance, heating, emergency)
Landlord Tenant Mediation
Mortgage Payments (includes emergency payments)
Rent Payments (includes emergency payments)
Utility Arrears Payments

Utility Deposits
Utility Payments (includes LIHEAP)

Health and Social/Behavioral Services

Adult Dental Screening/Exam
Adult Dental Services
Child Dental Screening/Exam
Child Dental Services
Developmental Delay Screening
Doctor Visit Payments
Domestic Violence Programs
Food Distribution
Hygiene Assistance
Immunizations
Maternal and Child Health
Mental Health Assessments
Mental Health Counseling
Nursing Care Services
Parenting Classes
Physicals
Prescription Payments
Substance Abuse Counseling
Vision Screening
Wellness Education

Guidance regarding Domestic Violence Programs – when this service is selected, the SERVICE PROVIDER has connected the enrolled person or other household member with a Domestic Violence Program.

Civic Engagement and Community Involvement Services

Citizenship Classes
Leadership Training
Volunteer Training

Services Supporting Multiple Domains

Birth Certificate
Case Management
Child Care Subsidies
Child Care Payments
Criminal Record Expungement
Driver's License
Eligibility Determinations
Emergency Clothing Assistance
Legal Assistance
Mediation/Customer Advocacy Interventions
Referrals
Social Security Card
Transportation Services

r. Information Regarding Program Forms for Eligible Individuals

The SERVICE PROVIDER shall use program forms listed here when applicable for eligible persons who receive services. Program forms are located in the Appendix of this manual. The SERVICE PROVIDER shall upload completed program forms to the document folder in the client record in Synergy client management system.

Self-Declaration of Income at or Below 200% Federal Poverty Level

The SERVICE PROVIDER shall use the Self-Declaration of Income Form for Individual and Household Income at or Below 200% Federal Poverty Level as documentation of income eligibility when income eligibility documentation is not available or when there is no household income. The form is located in the Appendix to this manual. This form upon completion is required to be uploaded to the case file document folder in Synergy client management system. The SERVICE PROVIDER shall follow guidance in Section e. Eligibility for Services section of this manual when using this form.

The SERVICE PROVIDER is responsible to explain the use of the form to the person who receives services and to inform the person who receives services of the income that applies and the income that does not apply towards eligibility. When the form is used by the SERVICE PROVIDER, the SERVICE PROVIDER is responsible to enter a note in contacts case file in Synergy client management system regarding the use of the form.

Synergy Case File Review Checklist

The SERVICE PROVIDER shall complete the Case File Review Checklist for Self-Sufficiency Services, Employment Assistance Services, Individual/Family Supports/Emergency Assistance (Basic Needs), and Transportation Services for each eligible person who receives services. This form is maintained and updated by the SERVICE PROVIDER during the duration of services and uploaded to the document folder in the client file in the Synergy client management system at case closure. The form is located in the Appendix to this manual.

Synergy Case Closure Checklist

The SERVICE PROVIDER shall complete the Case Closure Checklist for Self-Sufficiency Services, Employment Assistance Services, Basic Needs/Emergency Assistance, and Transportation Services each eligible person who receives services. This form is uploaded to the document folder in the client file in the Synergy client management system at case closure. This form is located in the Appendix to this manual.

Synergy Enrollment Confirmation and Release of Information Form

The SERVICE PROVIDER shall complete with eligible persons the Enrollment Confirmation and Release of Information form and upload this form to the client file document folder in the Synergy client management system. This form is located in the Appendix to this manual.

CFPB Financial Well-Being Questionnaire and Scoresheet

The SERVICE PROVIDER shall have eligible persons complete the CFPB Financial Well-Being Questionnaire when the SERVICE PROVIDER has selected the NPI regarding improving financial well-

being. The SERVICE PROVIDER will upload the completed form to the document folder in the Synergy client management system client record. The SERVICE PROVIDER will complete the Financial Well-Being Questionnaire Scoresheet each time that the questionnaire is completed and upload this to the document folder in the Synergy client management system client record. The SERVICE PROVIDER will use this form and scoresheet as a tool to measure how eligible persons rate their financial well-being. The SERVICE PROVIDER will complete this form with eligible persons to establish a baseline and will have the form completed by eligible persons at intervals which coincide with an updated ANSA. The CFPB Financial Well-Being Guide which can be accessed at this site <https://www.consumerfinance.gov/consumer-tools/financial-well-being/> The questionnaire and scoresheet are located in the Appendix to this manual.

s. Reporting Requirements

The SERVICE PROVIDER is required to provide reports that contain information needed by DHS that is not documented in the Synergy client management system. The DHS shall inform the SERVICE PROVIDER of the information that is needed and when the information is needed. The DHS will provide the SERVICE PROVIDER with report templates when possible.

The Appendix to this manual contains the Section B report template. This is a cumulative report to be submitted by SERVICE PROVIDER twice during the period of the AGREEMENT by the 15th of the month following the months of June and December

The DHS submits calendar year quarterly reports regarding National Performance Indicators (NPI's) for quarters that include January – March, April – June, July – September, October – December. To ensure the accuracy of these reports, the SERVICE PROVIDER has up to ten (10) days following the close of each quarter to document NPI's in case records.

Reporting requirements which are met by the SERVICE PROVIDER assists the DHS with meeting CSBG report requirements.

t. Monitoring

The SERVICE PROVIDER is subject to annual or more frequent monitoring when indicated by the DHS to ensure the SERVICE PROVIDER is providing services that are consistent with the AGREEMENT between the COUNTY and the SERVICE PROVIDER and to ensure the SERVICE PROVIDER's compliance with the requirements of the AGREEMENT and the CSBG Contract Manual. Monitoring is completed by the OCS and may involve other offices within DHS and the COUNTY.

Monitoring of the SERVICE PROVIDER whose services are funded by CSBG is completed by staff in the OCS. The OCS staff utilize a program monitoring report tool which the SERVICE PROVIDER has access to so that the SERVICE PROVIDER has an understanding of the scope and content of monitoring. A copy of the program monitoring report tool is located in the Appendix to this manual. Monitoring using other means may also occur at the discretion of the OCS, in which case the SERVICE PROVIDER will be notified.

Program monitoring is typically planned for in advance with the SERVICE PROVIDER. A formal monitoring letter is issued to the SERVICE PROVIDER by the OCS. Program monitoring of services provided to individuals and families whose service records are documented in the Synergy client management system are monitored remotely by the OCS through review of the client records in Synergy. Administrative data that is subject to monitoring is handled remotely through the OCS's access to administrative files and records. This process enables the OCS to conduct monitoring in an efficient manner without unnecessary imposition upon the SERVICE PROVIDER.

Program monitoring results documented by the OCS in the program monitoring report tool or through other means and the program monitoring de-brief report form are shared with the SERVICE PROVIDER during a monitoring de-brief meeting. Findings from program monitoring that result in recommendations or corrective actions are shared with the SERVICE PROVIDER by the OCS. Findings that result in recommendations or corrective actions require a written response from the SERVICE PROVIDER.

The OCS uses the Integrated Monitoring Tool (IMT) to manage information storage and communication with the SERVICE PROVIDER regarding monitoring. The DHS and the OCS staff along with designated staff of the SERVICE PROVIDER have access to the IMT. The SERVICE PROVIDER is required to use the IMT per the policy and guidelines established by the DHS.

Service Profile Template – Services for Individuals and Families

The SERVICE PROVIDER shall submit a SERVICE PROFILE to the OCS for the period of time covered by the AGREEMENT for each service. The SERVICE PROFILE shall include the information listed herein. The SERVICE PROFILE shall be updated and submitted to OCS during the period of the AGREEMENT should there be changes.

1. Name of Service Provider, address, telephone number, web address.
2. List the service that is funded under the agreement. The name of the service is identified in MPER.
3. Name of program (if applicable). List NA if not applicable.
4. Name and contact information (telephone number and e-mail) for agency director, service/program director, and fiscal person.
5. List address where service is located. If service is provided at more than one address, list applicable addresses. If there is a service person specific to an address, list their name, e-mail, and phone number.
6. Identify days and hours of operation of service. Include flexible hours available to provide services outside of regular business hours. Identify days throughout the year that services will not be provided.
7. Identify communities where clients reside that utilize service. If service is available to residents of Allegheny County regardless of community of residence this information is to be included.
8. Identify funding source and funding amount for service. Include leveraged funding provided by other sources when applicable.
9. Identify the number of persons (unduplicated) to be served by service for each year covered by the agreement.
10. Describe the target population to be served including any specialized populations (e.g. persons with disabilities, persons reentering community from incarcerated settings, etc.)
11. List direct service positions that are funded under this AGREEMENT. Include position title, minimum qualifications by position, position status as either full-time or part-time.
12. List supervisor and/or management positions that are funded under this AGREEMENT. Include position title, minimum qualifications by position.
13. Include a list of staff names who have received Introduction to ROMA training or CAP Infinity training through the Community Action Association of PA.
14. List referral sources to your service and provide a description of your outreach strategies for recruitment of participants.
15. Provide a description of the service. Information shall include at a minimum overall goal of service, intake process, service delivery, and service closure.
16. Completion of annual target workbook for National Performance Indicators (COPOS Indicators) for each service funded under the AGREEMENT. This does not apply to VITA services and Financial Empowerment Community Outreach services. SERVICE PROVIDER will confirm completion and submission of the annual target workbook.

ALLEGHENY COUNTY DEPARTMENT OF HUMAN SERVICES
OFFICE OF COMMUNITY SERVICES
ONE SMITHFIELD STREET, SECOND FLOOR
PITTSBURGH, PA 15222

Self-Declaration of Income Form for Individual and Household with No Income or With Income at or Under 200% FPL

The individual to receive services is to select either one of the following:

No Income: I, _____, attest that the household I reside in had no income for the 30-day period prior to my enrollment date. During this time, my household supported itself in these ways:

Income at or under 200% FPL: I, _____, attest that the sum of my household eligible income for persons 18 years of age or older for the 30-day period prior to my enrollment date did not exceed 200% of Federal Poverty Level. The organization I have applied for services with informed me of the 200% Federal Poverty Level threshold for my household size and informed me of what constitutes eligible income. I am attesting to this due to not having income documentation available.

If I selected either one of the above as a part of my eligibility determination, a redetermination of eligibility is required within 90 days. Before 90 days, if my household had eligible income for the 30-day period prior to my enrollment date, I will secure income documentation if possible.

Name of Individual to Receive Services: _____

Name(s) of Other Household Members: _____

Total Number of Persons in Household: _____

Dates of 30-day Period Prior to My Enrollment: _____

Signature of Individual to Receive Services: _____

Date of Signature of This Form: _____

Allegheny County Department of Human Services

2024 Living Wage Measurement Tool

Household Size	Federal Poverty Guideline (FPG) 100% Annual Gross Income	250% of FPG Annual Gross Income	Hourly Self-Sufficiency Wage
1	\$15,060	\$37,650	\$18.10
2	\$20,440	\$51,100	\$24.57
3	\$25,820	\$64,550	\$31.03
4	\$31,200	\$78,000	\$37.50
5	\$36,580	\$91,450	\$43.97
6	\$41,960	\$104,900	\$50.43
7	\$47,340	\$118,350	\$56.90
8	\$52,720	\$131,800	\$63.37

- Federal Poverty Guideline annual wages are based on 2024 FPG calculations.
- For a household size of one person, the gross earned income of only this person is used to calculate living wage. For a household of two or more persons, the gross earned income of all household members whose income applies towards eligibility is used to calculate living wage.
- Hourly self-sufficiency wage is calculated based on compensation for 2,080 hours per year.
- Example:
 - A family with 2 adults and one child is enrolled in services. The primary client works full-time, 35 hours per week, and earns \$15.50 hour. The other adult works part-time, 20 hours per week, 40 weeks per year, earning \$14.00 hour.
 - Primary client @ \$15.50 hour x 35 hours per week x 52 weeks per year = \$28,210
 - Other adult @ \$14.00 hour x 20 hours per week x 40 weeks per year = \$11,200
 - Current household annual income is \$28,210 + \$11,200 = \$39,410
 - Current household annual income of \$39,410 is 153% FPG (\$39,410/\$25,820)
 - Living wage for household of 3 persons is \$64,550.

Enter Agency Name Here



Synergy: DHS SSP Services Case File Review Checklist

Enter Program Service Name Here (SSP CM OR MVI Employment Assistance)

Client Name	
Assigned Worker	
Open Case Date	
Case Status	

DIRECT SERVICE WORKER CHECKLIST	File reviewer sign off & COMMENTS
Date Reviewed: <u>Recertification Status</u> Synergy Due Date: <input type="checkbox"/> Not yet due <input type="checkbox"/> Pending <input type="checkbox"/> Completed	Date Reviewed: <input type="checkbox"/>
<u>Household Income Information Items</u> Enrollment Income Enrollment Income for all eligible household members 18 years or older: <input type="checkbox"/> Income Proof Uploaded <input type="checkbox"/> Start Dates/End Dates/ Location Self-Declaration Income Form <input type="checkbox"/> Form Uploaded <input type="checkbox"/> Case note reference <input type="checkbox"/> Updated at 90 days (if applicable) Non-Cash Benefits <input type="checkbox"/> Applicable benefits documented <input type="checkbox"/> Proof Uploaded Household Income Changes <input type="checkbox"/> Any new income? <input type="checkbox"/> Income proof obtained/uploaded? <input type="checkbox"/> Eligibility Screen- still eligible? Re-Certification Income <input type="checkbox"/> N/A <input type="checkbox"/> Income Proof Uploaded	<input type="checkbox"/>
CSBG Enrollment Confirmation and Synergy Release Form <input type="checkbox"/> Signed Form Uploaded: Enrollment <input type="checkbox"/> Signed Form Uploaded: Re-Certification	<input type="checkbox"/>
Current Resume <input type="checkbox"/> Uploaded to Docs Folder	<input type="checkbox"/>

ANSA <input type="checkbox"/> N/A <input type="checkbox"/> Initial completed within 45 days of case open date <input type="checkbox"/> Re-Assessment completed (due every 6 months)	<input type="checkbox"/>
Self-Sufficiency Case Plan <input type="checkbox"/> N/A <input type="checkbox"/> Initial plan completed within 60 days of case open date <input type="checkbox"/> Client Case Plan Acceptance Completed <input type="checkbox"/> Case Plan Signature uploaded to Docs Folder <input type="checkbox"/> Case Plan updates no less than every 6 months completed	<input type="checkbox"/>
Job Seeker Plan <input type="checkbox"/> N/A <input type="checkbox"/> All applicable updates completed	
Financial Well Being Documents <input type="checkbox"/> CFPB Financial Well-Being- Initial Assessment (Enrollment) <input type="checkbox"/> CFPB Financial Well-Being: Re-Assessment (6 months) <input type="checkbox"/> Current Budget Review <input type="checkbox"/> Credit Report /Proof of Score (if applicable) <input type="checkbox"/> All Docs Uploaded	<input type="checkbox"/>
Contact/Case Notes <input type="checkbox"/> Contact notes minimum once per month (must be face to face or telephone/virtual)	<input type="checkbox"/>
Child Support Resources <input type="checkbox"/> N/A <input type="checkbox"/> Information Provided (if applicable) <input type="checkbox"/> Case Note Reference <input type="checkbox"/> Resource Document Uploaded	<input type="checkbox"/>
Working Status <input type="checkbox"/> Reviewed for updates which correlate with income info	<input type="checkbox"/>
COPOS Indicators Summary Updates <input type="checkbox"/> Reviewed for applicable updates within each quarter period	<input type="checkbox"/>
Service Summary Updates <input type="checkbox"/> Reviewed for applicable updates within each quarter period	<input type="checkbox"/>
Case Closures: <input type="checkbox"/> Final Case Closure Note <input type="checkbox"/> Service Closure Letter mailed to last known address <input type="checkbox"/> Service Closure Letter uploaded to Docs Folder <input type="checkbox"/> Case Closure Checklist completed and uploaded	<input type="checkbox"/>

Revised effective 2-2022

Enter Agency Name Here



Synergy: DHS Basic Needs Case File Review Checklist

(Enter program Service Name Here)	
Client Name	
Assigned Worker	
Open Case Date	
Case Status	
DIRECT SERVICE WORKER CHECKLIST	File reviewer sign off & COMMENTS
Date Reviewed:	Date Reviewed:
<p><u>Recertification Status</u></p> <p>Due Date:</p> <p><input type="checkbox"/> Not yet due</p> <p><input type="checkbox"/> Pending</p> <p><input type="checkbox"/> Completed</p>	<input type="checkbox"/>
<p><u>Household Income Information Items</u></p> <p>Enrollment Documentation</p> <p><input type="checkbox"/> Client Photo ID uploaded</p> <p><input type="checkbox"/> Household members identified</p> <p><input type="checkbox"/> Enrollment income for household uploaded</p> <p><input type="checkbox"/> Start Dates/End Dates/Location</p> <p><input type="checkbox"/> Client eligibility determined</p> <p>Self-Declaration Income Form</p> <p><input type="checkbox"/> N/A</p> <p><input type="checkbox"/> Form uploaded</p> <p><input type="checkbox"/> Case note reference</p> <p><input type="checkbox"/> Updated at 90 days (if applicable)</p> <p>Non-Cash Benefits</p> <p><input type="checkbox"/> Applicable benefits documented</p> <p><input type="checkbox"/> Proof uploaded</p> <p>Household Income Changes</p> <p><input type="checkbox"/> Any new income?</p> <p><input type="checkbox"/> Income proof obtained/uploaded?</p> <p><input type="checkbox"/> Eligibility screen - still eligible?</p> <p>Public Benefits</p> <p><input type="checkbox"/> N/A</p> <p><input type="checkbox"/> Proof uploaded</p> <p><input type="checkbox"/> Client file contains evidence of referral/connection to benefits</p> <p>Re-Certification Income</p> <p><input type="checkbox"/> N/A</p> <p><input type="checkbox"/> Income proof uploaded</p>	<input type="checkbox"/>

CSBG Enrollment Confirmation and Synergy Release Form <input type="checkbox"/> Signed form uploaded: Enrollment	<input type="checkbox"/>
Application for Assistance <input type="checkbox"/> Signed application for basic needs	<input type="checkbox"/>
Household Budget <input type="checkbox"/> Budget information included in application for services	<input type="checkbox"/>
Contact/Case Notes <input type="checkbox"/> Contact occurring at least once a month <input type="checkbox"/> Contact notes up to date <input type="checkbox"/> Referrals documented with contacts	<input type="checkbox"/>
COPOS Indicators <input type="checkbox"/> COPOS indicators updated to reflect client progress	<input type="checkbox"/>
Tangible Aid <input type="checkbox"/> N/A <input type="checkbox"/> Assistance Summary documented <input type="checkbox"/> Award letter uploaded <input type="checkbox"/> Receipt/payment documentation uploaded	<input type="checkbox"/>
Child Support Resources <input type="checkbox"/> N/A <input type="checkbox"/> Information provided (if applicable) <input type="checkbox"/> Case note reference	<input type="checkbox"/>
Service Summary Updates <input type="checkbox"/> Reviewed for applicable updates within each quarter period	<input type="checkbox"/>
Case Closures: <input type="checkbox"/> Final case closure note w/ sustainability plan <input type="checkbox"/> Service closure letter mailed to last known address <input type="checkbox"/> Service closure letter uploaded to docs folder <input type="checkbox"/> Case closure checklist completed and uploaded	<input type="checkbox"/>
	Supervisor Log: <input type="checkbox"/> Documentation internal file review (at least once)

Enter Agency Name Here



Synergy: DHS Transportation Case File Review Checklist

(Enter program Service Name Here)	
Client Name	
Assigned Worker	
Open Case Date	
Case Status	
DIRECT SERVICE WORKER CHECKLIST	File reviewer sign off & COMMENTS
Date Reviewed:	Date Reviewed:
<u>Recertification Status</u> Due Date: <input type="checkbox"/> Not yet due <input type="checkbox"/> Pending <input type="checkbox"/> Completed	<input type="checkbox"/>
<u>Household Income Information Items</u> Enrollment Documentation <input type="checkbox"/> Client Photo ID uploaded <input type="checkbox"/> Household members identified <input type="checkbox"/> Enrollment income for household uploaded <input type="checkbox"/> Start Dates/End Dates/Location <input type="checkbox"/> Client eligibility determined Self-Declaration Income Form <input type="checkbox"/> N/A <input type="checkbox"/> Form uploaded <input type="checkbox"/> Case note reference <input type="checkbox"/> Updated at 90 days (if applicable) Non-Cash Benefits <input type="checkbox"/> Applicable benefits documented <input type="checkbox"/> Proof uploaded Household Income Changes <input type="checkbox"/> Any new income? <input type="checkbox"/> Income proof obtained/uploaded? <input type="checkbox"/> Eligibility screen - still eligible? Public Benefits <input type="checkbox"/> N/A <input type="checkbox"/> Proof uploaded <input type="checkbox"/> Client file contains evidence of referral/connection to benefits Re-Certification Income <input type="checkbox"/> N/A <input type="checkbox"/> Income proof uploaded	<input type="checkbox"/>
CSBG Enrollment Confirmation and Synergy Release Form <input type="checkbox"/> Signed form uploaded: Enrollment	<input type="checkbox"/>

Application for Assistance and Service Plan <input type="checkbox"/> Signed application for transportation assistance uploaded <input type="checkbox"/> Transportation service case plan (via case note)	<input type="checkbox"/>
Household Budget <input type="checkbox"/> Budget information included in application for services	<input type="checkbox"/>
COPOS Indicators <input type="checkbox"/> COPOS indicators updated to reflect client progress	<input type="checkbox"/>
Contact/Case Notes <input type="checkbox"/> Contact occurring at least once a month <input type="checkbox"/> Contact notes up to date <input type="checkbox"/> Referrals documented with contacts	
Tangible Aid <input type="checkbox"/> N/A <input type="checkbox"/> Assistance Summary documented <input type="checkbox"/> Award letter uploaded <input type="checkbox"/> Receipt/payment documentation uploaded	<input type="checkbox"/>
Service Summary Updates <input type="checkbox"/> Reviewed for applicable updates within each quarter period	<input type="checkbox"/>
Child Support Resources <input type="checkbox"/> N/A <input type="checkbox"/> Information provided (if applicable) <input type="checkbox"/> Case note reference	<input type="checkbox"/>
Case Closures: <input type="checkbox"/> Final case closure note documenting if/how need addressed <input type="checkbox"/> Service closure letter mailed to last known address <input type="checkbox"/> Service closure letter uploaded to docs folder <input type="checkbox"/> Case closure checklist completed and uploaded	<input type="checkbox"/>
	Supervisor Log: <input type="checkbox"/> Documentation internal file review (at least once)



Community Services Block Grant Enrollment Confirmation & Release Form

Community Services Block Grant Participant Enrollment Confirmation

By signing below, I certify that the information provided to (enter provider agency name) is true to the best of my knowledge. I allow release of this information for the expressed purpose of determining program eligibility. I understand that this information will be held in strict confidence.

Applicant Signature _____ Date _____
Interviewer Signature _____ Date _____

Community Services Block Grant Participant Release of Information

By signing below, I authorize (enter provider agency name) to share income documentation, ANSA assessments (if applicable), service plans and case notes in the provision of service or streamline cross service enrollment with other providers in the Community Services Block Grant network. I understand that this information will be held in strict confidence.

Applicant Signature _____ Date _____
Interviewer Signature _____ Date _____

Revised effective 2-2022



CSBG SERVICES SYNERGY CASE CLOSURE CHECKLIST

Client Name: _____

Service: _____

- Confirm that current household Income and Working Status are recorded on the Demographics Screen and all income proof has been uploaded to the case record.

Comments _____

- Select the following items which apply to the program service and confirm these items are all current: (skip this for Emergency Basic Needs Assistance cases)

- Adults Needs and Strength Assessment (ANSA)
- Self-Sufficiency Case Plan
- Job Seeker Plan
- Transportation Case Plan

- Confirm that the status of all COPOS Indicators are updated and current.

Comments _____

- Confirm that all Services are updated and current.

Comments _____

- Confirm the Assistance Summary screen is current.

Comments _____

- Confirm a Case Closure Note has been completed detailing reasons for closure.

Comments _____

- Confirm a Case Closure Letter has been mailed and uploaded to the case record.

Comments _____

Direct Service Staff: _____ Date: _____

Internal File Review Member: _____ Date: _____

Revised effective 2-2022



Questionnaire

NAME OR NUMBER

Part 1: How well does this statement describe you or your situation?

This statement describes me	Completely	Very well	Somewhat	Very little	Not at all
1. I could handle a major unexpected expense	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. I am securing my financial future	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Because of my money situation, I feel like I will never have the things I want in life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I can enjoy life because of the way I'm managing my money	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. I am just getting by financially	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I am concerned that the money I have or will save won't last	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Part 2: How often does this statement apply to you?

This statement applies to me	Always	Often	Sometimes	Rarely	Never
7. Giving a gift for a wedding, birthday or other occasion would put a strain on my finances for the month	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. I have money left over at the end of the month	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. I am behind with my finances	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. My finances control my life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Part 3: Tell us about yourself.

11. How old are you?

<input type="checkbox"/>	18-61	<input type="checkbox"/>	62+	<input type="checkbox"/>
--------------------------	--------------	--------------------------	-----	--------------------------

12. How did you take the questionnaire?

I read the questions **Someone read the questions to me**



Scoring worksheet

NAME OR NUMBER _____

1. Select the person's answers, record the response value in the right hand column and add up the total values for each part of the questionnaire.

This statement describes me	Completely	Very Well	Somewhat	Very little	Not at all	Response value
1. I could handle a major unexpected expense	4	3	2	1	0	
2. I am securing my financial future	4	3	2	1	0	
3. Because of my money situation, I feel like I will never have the things I want in life	0	1	2	3	4	
4. I can enjoy life because of the way I'm managing my money	4	3	2	1	0	
5. I am just getting by financially	0	1	2	3	4	
6. I am concerned that the money I have or will save won't last	0	1	2	3	4	
Part 1 subtotal:						

This statement applies to me	Always	Often	Sometimes	Rarely	Never	Response value
7. Giving a gift for a wedding, birthday or other occasion would put a strain on my finances for the month	0	1	2	3	4	
8. I have money left over at the end of the month	4	3	2	1	0	
9. I am behind with my finances	0	1	2	3	4	
10. My finances control my life	0	1	2	3	4	
Part 2 subtotal:						
Total response value:						

2. Find the financial well-being score

How old is the person?

- 18-61 62+

How did the person take the questionnaire?

- Self-administered
 Administered by someone else

Because scores vary based on age and how the questionnaire was administered, you must convert the total response value to a financial well-being score.

- Find the row that corresponds to the total response value.
- Follow that row across to the column that corresponds to the person's age and how the questionnaire was administered.
- Record the final score.

Financial well-being score:

Total response value	Questionnaire self-administered		Questionnaire administered by someone else	
	18-61	62+	18-61	62+
0	14	14	16	18
1	19	20	21	23
2	22	24	24	26
3	25	26	27	28
4	27	29	29	30
5	29	31	31	32
6	31	33	33	33
7	32	35	34	35
8	34	36	36	36
9	35	38	38	38
10	37	39	39	39
11	38	41	40	40
12	40	42	42	41
13	41	44	43	43
14	42	45	44	44
15	44	46	45	45
16	45	48	47	46
17	46	49	48	47
18	47	50	49	48
19	49	52	50	49
20	50	53	52	50
21	51	54	53	52
22	52	56	54	53
23	54	57	55	54
24	55	58	57	55
25	56	60	58	56
26	58	61	59	57
27	59	63	60	58
28	60	64	62	60
29	62	66	63	61
30	63	67	65	62
31	65	69	66	64
32	66	71	68	65
33	68	73	70	67
34	69	75	71	68
35	71	77	73	70
36	73	79	76	72
37	75	82	78	75
38	78	84	81	77
39	81	88	85	81
40	86	95	91	87

Learn more at consumerfinance.gov/financial-well-being

**Section B: CSBG Eligible Entity
Capacity Building**

Name of
Agency:

**B. Hours of Agency Capacity Building
(Training, Planning, Assessment)**

	<u>Total</u> January – June	<u>Total</u> July – December	<u>Total</u> January - December
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1). Hours of Board Members in Capacity Building Activities

2). Hours of Agency Staff in Capacity Building Activities

C. Volunteer Hours of Agency Capacity Building (Program Support, Service Delivery, Fundraising):

1. Total Number of Volunteer Hours Donated to the Agency
 a. Of the Above, the Total Number of Volunteer Hours Donated by Individuals with Low Incomes

D. The Number of Staff Who Hold Certifications That Increase Agency Capacity to Achieve Family and Community Outcomes, As Measured by One or More of the Following:

1. Number of Nationally Certified ROMA Trainers
2. Number of Nationally Certified Implementers
3. Number of Certified Community Action Professionals (CCAP)
4. Number of Staff with a Child Development Certification
5. Number of Staff with a Family Development Certification
6. Number of Pathways Reviewers
7. Number of Staff with Home Energy Professional Certifications
 - a. Number of Energy Auditors
 - b. Number of Retrofit Installer Technicians
 - c. Number of Crew Leaders
 - d. Number of Quality Control Inspectors
8. Number of LEED Risk Certified Assessors

	July - December	January - December
	January - June	
9. Number of Building Performance Institute Certified Professionals		
10. Number of Classroom Assessments Scoring Systems (CLASS) Certified Professionals		
11. Number of Certified Housing Quality Standards (HQS) Inspectors		
12. Number of American Institute of Certified Planners (AICP)		
13. Other (Please Specify Others Below: Additional Indicator Additional Indicator		
E. Unduplicated Number of Organizations, both Public and Private, that the CSBG Eligible Entity Actively Works with to Expand Resources and Opportunities In-order to Achieve Family and Community Outcomes		
1. Non-Profit		
2. Faith Based		
3. Local Government		
4. State Government		
5. Federal Government		
6. For-Profit Business or Corporation		
7. Consortiums/Collaborations		
8. School Districts		
9. Institutions of Post-Secondary Education/Training		
10. Financial/Banking Institutions		
11. Health Service Organizations		
12. Statewide Associations		
TOTAL		

**ALLEGHENY COUNTY DEPARTMENT OF HUMAN SERVICES
OFFICE OF COMMUNITY SERVICES
PROGRAM MONITORING REPORT**

Program monitor:
Service provider:
Address:
Telephone:
Contact person:
Location of on-site visit if applicable:
Contract allocation:
Monitoring date(s):
Most recent monitoring date(s):

Type of service:	<input type="checkbox"/> Self-Sufficiency Case Management	<input type="checkbox"/> Basic Needs	<input type="checkbox"/> Transportation	<input type="checkbox"/> Employment	<input type="checkbox"/> Other
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Funding source:	<input type="checkbox"/> CSBG	<input type="checkbox"/> Other (describe)
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PRE-MONITORING CHECKLIST			
MONITOR TASKS	YES	NO	COMMENTS
Did the service provider receive a monitoring letter at least two weeks before the start of monitoring that describes the scope of the monitoring?	<input type="checkbox"/>	<input type="checkbox"/>	
Was the letter uploaded into IMT?	<input type="checkbox"/>	<input type="checkbox"/>	
Did the service provider receive a copy of the monitoring tool?	<input type="checkbox"/>	<input type="checkbox"/>	

ADMINISTRATION				
	YES	NO	NA	COMMENTS
Does the service provider comply with the requirements of the Master Provider Enterprise Repository (MPER)? These include keeping provider information current, creating and maintaining service offerings, creating program funded budgets, submission of program funded invoices.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Is there an approved budget for the funded service? (Does not apply to service funded by a fee or rate)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have there been any budget modifications or adjustments during the contract period?	<input type="checkbox"/>	<input type="checkbox"/>	
Is the service provider submitting program invoices by the 8 th business day of the month for the previous billable month?	<input type="checkbox"/>	<input type="checkbox"/>	
Is there a current approved Service Profile for the contracted service?	<input type="checkbox"/>	<input type="checkbox"/>	
Does the service provider have a written denial of services policy? Briefly describe how this is communicated to clients.	<input type="checkbox"/>	<input type="checkbox"/>	
Does the service provider have a written client grievance policy? Briefly describe how this is communicated to clients.	<input type="checkbox"/>	<input type="checkbox"/>	
Does the service provider have a written policy which makes clients aware of child support resources? Briefly describe how this is communicated to clients.	<input type="checkbox"/>	<input type="checkbox"/>	
Does the service provider have arrangements in place for communication with participants with limited English proficiency or other communication barriers? (Interpreters, alternative language materials, external resources to meet needs, etc.) per DHS General Contracts specification manual.	<input type="checkbox"/>	<input type="checkbox"/>	
Does the service provider have a written disaster recovery business resumption plan (per DHS General Contracts Specifications Manual) that provides for the continuation of business operations in the event of a disaster which makes the service provider facility and /or system inoperable?	<input type="checkbox"/>	<input type="checkbox"/>	
Have any DHS funds been used to purchase new equipment during this contact period? If so, has the service provider followed the Fixed Asset Program requirements in the DHS General Contracts specification manual?	<input type="checkbox"/>	<input type="checkbox"/>	

Have any unusual incidents occurred as defined in the DHS General Contracts Specifications Manual during this contract period? YES NO

If yes, have these incidents been reported to DHS per requirements stated in the Specifications Manual?
 YES NO

Provide a brief description of the incident (s) including date, action taken, and date(s) reported to DHS:

SERVICE DELIVERY				
SERVICE	PLANNED Number of Persons to be Served During Contract Period (Per Service Profile)	Number of Persons SERVED As of Date of Monitoring	PERCENTAGE ACHIEVED as of Date of Monitoring	Performance Target Benchmark
Self-sufficiency case management				
Basic Needs				
Employment Assistance				
Transportation Assistance				
Other (describe)				
How does service provider recruit potential participants?				
<input type="checkbox"/> Referrals	<input type="checkbox"/> Word of Mouth	<input type="checkbox"/> Social Media	<input type="checkbox"/> Brochures/Flyers	<input type="checkbox"/> Other:
Comments:				
If service provider is not on track to achieve service targets, what are the contributing factors and what action is being taken to increase service participation?				

ENVIRONMENTAL ASSESSMENT (<i>applies to on-site monitoring - cleanliness, safety, accessibility, and suitability of facility</i>)	Yes	No	Comments
Overall, does the environment enable a safe and clean service delivery?	<input type="checkbox"/>	<input type="checkbox"/>	
Does the facility have enough space and resources to fulfill service delivery?	<input type="checkbox"/>	<input type="checkbox"/>	
Is the facility accessible for persons with disabilities including building access and restrooms?	<input type="checkbox"/>	<input type="checkbox"/>	
Additional Comments pertaining to the environment:			

STAFF	
POSITIONS FUNDED UNDER CONTRACT	SERVICE AREAS
<p>Have there been any vacancies for direct service or supervisory staff during this contract period? If so, describe the reason for the vacancies and how long it took to fill the vacancies. If there are positions vacant at the time of the monitoring, identify the positions that are vacant and describe what is being done to fill them.</p>	
<p>Have staff funded under the CSBG allocation received training or professional development during the contract period? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, list the staff member(s) and training received:</p>	
<p>Have staff funded under the CSBG allocation received ROMA (Results Oriented Management and Accountability) training or an approved alternate training? <input type="checkbox"/> YES <input type="checkbox"/> NO List the staff that have received ROMA training or an approved alternate training and when the training occurred.</p>	

SERVICE: SELF- SUFFICIENCY CASE MANAGEMENT

CLIENT FILE REVIEW:			
Names of client files which were reviewed: (First name initial, last name, case open date)	1.	2.	3.
	4.	5.	

MONITORING CRITERIA:	1	2	3	4	5
Client File Documentation General					
Client file is stored in a secured electronic data system in which client information is protected.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Household members if applicable are identified in each client file.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demographic information is present for each member of the household.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client File Documentation Eligibility					
Client is 18 years of age or older. Photo ID included in client record.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client household is in Allegheny County, outside of the City of Pittsburgh.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client files contains income documentation for every household member 18 years or older for the 30-day period prior to the enrollment date which verifies eligible family income does not exceed 200% of Federal Poverty Level.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains the Self-Declaration Form when household had no income or income documentation under 200 % FPL was not available.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains information/documentation on any non-cash benefits client household receives (SNAP, WIC, etc.).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client income changes during service enrollment are documented in the client file, and eligibility re-determined. Corresponding documentation for income changes is reflected in demographics income and working status screens as well as applicable documents uploaded to client file.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Client eligibility re-determination completed at one year for CSBG or earlier when an event occurs which may impact eligibility. (Documentation via contacts, documents, and re-certification tab)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client File Documentation Enrollment and Services					
Client enrollment confirmation & release form signed, dated and uploaded to document folder.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
There is a case note in the client file labeled enrollment which describes the needs of the primary client and other household members if applicable. The case note will identify a conversation occurred with the primary client to convey that services can support other household members. The Case note will include a decision by the primary client to include or not include any needs/goals of other household members.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file has an assessment of primary client's need for service, including identification of the specific strengths to build on and needs to be addressed (ANSA) within 45 days from service enrollment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
For multi-person households, the ANSA includes information about household members other than the primary client. Additional information is located in the Additional Respondents and My Life My Story sections of the ANSA.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file has a service plan that includes primary client strengths, primary client needs to be addressed, primary client goals and action steps, timeline regarding goals and action steps, plan effective date, staff and client signatures. Service plan may also include needs, goals, action steps, and timeline for other household members. Initial service plan completed within 60 days of enrollment. Service plan updates to be completed every 6 months.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains documentation of each client contact including date of	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

contact, type of contact, reason for contact. Attempted contacts are also documented. Contacts will occur at least once a month. Face to face contacts is encouraged whenever possible.					
Client file contains documentation of services provided or arranged for that assist primary client and other household members when applicable with achieving their goals via contacts, referrals, services summary and/or service plan information.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains documentation of reportable outcome indicators that the primary client and other household members when applicable are working towards and have achieved. COPOS indicators are updated to reflect primary client progress and progress of other household members when applicable throughout the duration of service involvement.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains a resume when the primary client has an employment goal. A resume will also be in the client file for other household members who may have an employment goal documented in the service plan.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file identifies natural supports.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains a household budget that includes monthly income and expenses. The household budget is updated when there are changes that impact the budget.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains documentation of completion of the financial well-being scale and score sheet at initial and subsequent intervals throughout service provision. Applies to clients who are working towards achieving improved financial well-being.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains documentation of client securing an initial credit report from a recognized credit bureau and subsequent documentation when the client has a goal to improve credit score.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Client file contains documentation of tangible aid and assistance when applicable via contacts, assistance summary screen, and source documentation (ex: award letter) in the document folder.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains proof of child support services information provided for applicable households. Documentation of informing client is in a contact note.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains evidence of the client being referred/connected to any applicable public benefits when applicable. Selection of a client obtaining one or more public benefits under COPOS Indicators is required if work is being done to assist client with obtaining one or more public benefits.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains Supervisor log documentation of completed internal file reviews initial and quarterly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client File Documentation Closure					
Client file contains final case note which speaks to transition from services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains copy of service closure letter mailed to last known address of client.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains completed case file review checklist and case closure checklist for closed case.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SERVICE: BASIC NEEDS ASSISTANCE

CLIENT FILE REVIEW:			
Names of client files Which were reviewed: (First name initial, last name, case open date)	1.	2.	3.
	4.	5.	

MONITORING CRITERIA:	1	2	3	4	5
Client File Documentation General					
Client file is stored in a secured electronic data system in which client information is protected.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Household members if applicable are identified in each client file.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demographic information is present for each member of the household.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client File Documentation Eligibility					
Client is 18 years of age or older. Photo ID included in client record.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client household is in Allegheny County, outside of the City of Pittsburgh.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client files contains income documentation for every household member 18 years or older for the 30-day period prior to the enrollment date which verifies eligible family income does not exceed 200% of Federal Poverty Level.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains the Self-Declaration Form when household had no income or income documentation under 200 % FPL was not available.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains information/documentation on any non-cash benefits client household receives (SNAP, WIC, etc.).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client income changes during service enrollment are documented in the client file, and eligibility re-determined. Corresponding documentation for income changes is reflected in demographics income and working status screens as well as applicable documents uploaded to client file.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Client eligibility re-determination completed at one year for CSBG or earlier when an event occurs which may impact eligibility. (Documentation via contacts, documents, and re-certification tab)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client File Documentation Enrollment and Services					
Client enrollment confirmation & release form signed, dated and uploaded to document folder.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
There is a completed application for basic needs uploaded to the document folder. The application includes the household monthly budget and information regarding any savings maintained by the client.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
There is a case note in the client file which describes enrollment and the needs the primary client is requesting assistance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains documentation of each client contact including date of contact, type of contact, reason for contact. Attempted contacts are also documented. Contacts will occur at least once a month. Face to face contacts is encouraged whenever possible.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains documentation of services provided or arranged for that assists client with achieving their goals via contacts, referrals, services summary and/or service plan information.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains documentation of reportable outcome indicators that the client is working towards and has achieved. COPOS indicators should be updated to reflect client progress throughout the duration of service involvement.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains documentation of tangible aid and assistance when applicable via contacts, assistance summary screen, and source documentation (ex: award letter) in the document folder.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains proof of child support services information provided for applicable households.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Documentation of informing client should be included in a contact note.					
Client file contains evidence of the client being referred/connected to any applicable public benefits when applicable. Selection of a client obtaining one or more public benefits under COPOS Indicators is required if work is being done to assist client with obtaining one or more public benefits.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains at least one Supervisor log entry documenting client record oversight.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client File Documentation Closure					
Client file contains final case note documenting if/how client basic need(s) have been addressed, including a sustainability plan discussion.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains copy of service closure letter mailed to last known address of client.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains completed case closure checklist for closed case.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Form revised 10-2022

SERVICE: TRANSPORTATION SERVICES

CLIENT FILE REVIEW:			
Names of client files which were reviewed: (First name initial, last name, case open date)	1.	2.	3.
	4.	5.	

MONITORING CRITERIA:	1	2	3	4	5
Client File Documentation General					
Client file is stored in a secured electronic data system in which client information is protected.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Household members if applicable are identified in each client file.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demographic information is present for each member of the household.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client File Documentation Eligibility					
Client is 18 years of age or older. Photo ID included in client record.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client household is in Allegheny County, outside of the City of Pittsburgh.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client files contains income documentation for every household member 18 years or older for the 30-day period prior to the enrollment date which verifies eligible family income does not exceed 200% of Federal Poverty Level.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains the Self-Declaration Form when household had no income or income documentation under 200 % FPL was not available.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains information/documentation on any non-cash benefits client household receives (SNAP, WIC, etc.).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client income changes during service enrollment are documented in the client file, and eligibility re-determined. Corresponding documentation for income changes is reflected in demographics income and working status screens	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

as well as applicable documents uploaded to client file.					
Client eligibility re-determination completed at one year for CSBG or earlier when an event occurs which may impact eligibility. (Documentation via contacts, documents, and re-certification tab)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client File Documentation Enrollment and Services					
Client enrollment confirmation & release form signed, dated and uploaded to document folder.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
There is a completed application for transportation assistance uploaded to the document folder. The application includes the household monthly budget and information regarding any savings maintained by the client.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file has a transportation service plan that includes client goals and action steps. The service plan is identified in a contact note which is labeled service plan.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains documentation of each client contact including date of contact, type of contact, reason for contact. Attempted contacts are also documented. Contacts will occur at least once a month. Face to face contacts is encouraged whenever possible.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains documentation of services provided or arranged for that assists client with achieving their goals via contacts, referrals, services summary and/or service plan information.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains documentation of reportable outcome indicators that the client is working towards and has achieved. COPOS indicators should be updated to reflect client progress throughout the duration of service involvement.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains documentation of tangible aid and assistance when applicable via contacts, assistance summary screen, and source	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

documentation (ex: award letter) in the document folder.					
Client file contains proof of child support services information provided for applicable households. Documentation of informing client should be included in a contact note.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains at least one Supervisor log entry documenting client record oversight.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client File Documentation Closure					
Client file contains final case note documenting if/how client transportation need has been met.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains copy of service closure letter mailed to last known address of client.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains completed case closure checklist for closed case.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SERVICE: EMPLOYMENT ASSISTANCE SERVICES

CLIENT FILE REVIEW:			
Names of client files Which were reviewed: (First name initial, last name, case open date)	1.	2.	3.
	4.	5.	

MONITORING CRITERIA:	1	2	3	4	5
Client File Documentation General					
Client file is stored in a secured electronic data system in which client information is protected.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Household members if applicable are identified in each client file.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demographic information is present for each member of the household.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client File Documentation Eligibility					
Client is 18 years of age or older. Photo ID included in client record.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client household is in Allegheny County, outside of the City of Pittsburgh.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client files contains income documentation for every household member 18 years or older for the 30-day period prior to the enrollment date which verifies eligible family income does not exceed 200% of Federal Poverty Level.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains the Self-Declaration Form when household had no income or income documentation under 200 % FPL was not available.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains information/documentation on any non-cash benefits client household receives (SNAP, WIC, etc.).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client income changes during service enrollment are documented in the client file, and eligibility re-determined. Corresponding documentation for income changes is reflected in demographics income and working status screens	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

as well as applicable documents uploaded to client file.					
Client eligibility re-determination completed at one year for CSBG or earlier when an event occurs which may impact eligibility. (Documentation via contacts, documents, and re-certification tab)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client File Documentation Enrollment and Services					
Client enrollment confirmation & release form signed, dated and uploaded to document folder.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file includes completed intake form.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
There is a case note in the client file which describes enrollment and initial needs for the primary client and other household members if applicable. The case note will identify a conversation occurred with the primary client to convey that services can support other household members. Case note will include decision of primary client to include or not include needs/goals of other household members in services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file includes completed job seeker agreement.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file includes completed employment barriers form.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file includes a resume. A resume will also be in the client file for other household members who may have an employment goal documented in the service plan.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains documentation of each client contact including date of contact, type of contact, reason for contact. Attempted contacts are also documented. Contacts will occur at least once a month. Face to face contacts is encouraged whenever possible.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Client file contains documentation of services provided or arranged for that assists primary client and other household members when applicable with achieving their goals via contacts, referrals, services summary and/or service plan information.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains documentation of reportable outcome indicators that the primary client and other household members when applicable are working towards and have achieved. COPOS indicators are updated to reflect primary client progress and progress of other household members when applicable throughout the duration of service involvement.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file identifies natural supports (if available)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains a household budget that includes monthly income and expenses.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains documentation of completion of the financial well-being scale and score sheet at initial and subsequent intervals throughout service provision. Applies to clients who are working towards improved financial well-being.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains documentation of client securing an initial credit report from a recognized credit bureau and subsequent documentation when the client has a goal to improve credit score.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains documentation of tangible aid and assistance when applicable via contacts, assistance summary screen, and source documentation (ex: award letter) in the document folder.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains proof of child support services information provided for applicable households. Documentation of	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

informing client should be included in a contact note.					
Client file contains evidence of the client being referred/connected to any applicable public benefits when applicable. Selection of a client obtaining one or more public benefits under COPOS Indicators is required if work is being done to assist client with obtaining one or more public benefits.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains at least one Supervisor log entry documenting client record oversight.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client File Documentation Closure					
Client file contains final case note documenting if/how client employment need has been addressed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains copy of service closure letter mailed to last known address of client.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client file contains completed case file review checklist and case closure checklist for closed case.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SERVICE: OTHER

CLIENT FILE REVIEW:					
Names of client files Which were reviewed: (First name initial, last name, case open date)	1.	2.	3.		
	4.	5.			
MONITORING CRITERIA:	1	2	3	4	5
Client File Documentation General					
Client file is stored in a secured electronic data system in which client information is protected.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If client files are not stored in a secured electronic data system, briefly describe how client files are constructed and maintained:					
Client File Documentation Eligibility					
(Insert unique service documentation items here. Additional rows can be added for each item documented which pertains to eligibility).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client File Documentation Enrollment and Services					
(Insert unique enrollment and service documentation items here. Additional rows can be added for each item documented which pertains to enrollment and services).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client File Documentation Closure					
(Insert unique service documentation items here.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>