CDBG **MONITORING**

ON-SITE REVIEW FORM —————————————————

PART 1: GENERAL INFORMATION

SUBRECIPIENT: _____ DATE OF ONSITE VISIT: _____

ACTIVITY/PROJECT NAME: _____ CONTRACT PERIOD REVIEWED: _____

PROJECT MANAGER: _____ MONITORING STAFF/CITY: _____

AGENCY STAFF PARTICIPATING IN MONITOR AND THEIR ROLE: _____

PART 2: NATIONAL OBJECTIVE

PRELIMINARY REVIEW

DOCUMENTS TO REVIEW

☐ National Objective Documentation [570.208] (e.g. program application)

STAFF REVIEW

1. Does the activity qualify as an eligible public service under § 570.201(e)? Describe activity.   ☐ YES   ☐ NO

2. Select the appropriate Low/Mod National Objective category.
   ☐ Area Benefit   ☐ Limited Clientele Benefit
   ☐ Housing Benefit   ☐ Job Creation or Retention

3. What documentation of the above category was provided by the subrecipient?

ON-SITE DISCUSSION

	YES	NO	COMMENTS
OTHER:			
OTHER:			
OTHER:			

PART 3: ADHERENCE TO SUBRECIPIENT AGREEMENT/ACTIVITY PROGRESS

PRELIMINARY REVIEW

DOCUMENTS TO REVIEW

☐ Subrecipient Agreement   ☐ Timeline

☐ Progress Reports   ☐ Reimbursement Requests

STAFF REVIEW

SCOPE OF SERVICE: _____

DAYS/HOURS OF OPERATION: _____

PROPOSED # SERVED: _____ ACTUAL # SERVED: _____

IS THIS PROJECT ON TRACK TO SERVE THE PROPOSED NUMBER?   ☐ YES   ☐ NO

LIST ANY SPECIAL/ADDITIONAL TERMS IN THE SUBRECIPIENT AGREEMENT THAT NEED TO BE REVIEWED.

STAFF REVIEW CONTINUED	YES	NO	COMMENTS
Is the budget on track to be fully expended by the end date? Is the project on track to be available the duration of the designated time?			
Are there concerns with reimbursement requests? Is additional documentation necessary during the monitor?			
Were progress reports submitted on time?			
Has the agency requested technical assistance?			
Are there concerns based on email/phone calls with the agencies ability to implement the contract executed?			
Will the agency require technical assistance to fulfill their contract?			
OTHER:			
OTHER:			
OTHER:			

ON-SITE DISCUSSION

	YES	NO	COMMENTS
What is the purpose of this program? (Staff evaluation - Is this consistent with the scope of service?)			
What days and hours is this program available? (Staff evaluation - Is this consistent with previously submitted documentation?)			
Are there concerns that this project will not meet the proposed number served?			
Have there been changes to the program (e.g. activity goals, scope of service, number of people to be served)?			
Is the intended client group being reached? Explain.			
How are participants being informed of the funding source and City involvement? Please show examples.			
How is the public being informed that funds from this program have been made available to your agency?			
Have there been changes in make-up or responsibility of staff for this activity in the past year? If yes, describe changes and how the City was informed.			
Has the project manager reviewed the terms of the subrecipient agreement? Are there any questions?			
Is the project manager located on-site and running the day-to-day operations of the program?			
Have the eligible activities under this funding source changed?			
OTHER:			
OTHER:			
OTHER:			

PART 4: ADMINISTRATION

PRELIMINARY REVIEW

DOCUMENTS TO REVIEW

- ☐ Articles of Incorporation
- ☐ IRS Non-Profit Determination
- ☐ Board of Directors Roster
- ☐ Organizational Chart
- ☐ Certifications of Policy Compliance
- ☐ Employee Code of Conduct
- ☐ Board Handbook
- ☐ Pay Schedule

- ☐ Policies and Procedures that contain:
    - ☐ Non-Discrimination (§570.602 & 618)
    - ☐ Conflict of Interest (§200.318 & §570.611)
    - ☐ Grievance (staff and clients) §570.607(a)
    - ☐ Termination (staff and clients) §570.607(a)
    - ☐ Confidentiality (§200.303(e))
    - ☐ Record Retention (§570.506)
    - ☐ Language Assistance Policy
    - ☐ Equal Employment Opportunity Policy
    - ☐ Procurement Policy [200.318(a)] (if applicable)

STAFF REVIEW	YES	NO	COMMENTS
Adequate control of access to accounting records, blank forms, checkbooks, and confidential records			
Articles of Incorporation/Bylaws			
Authorization to Request Funds			
Board of Directors Roster			
Organizational Chart			
Certifications of Policy Compliance			
Confidentiality Policy [200.303(e)]			
Conflict of Interest Policy [200.318(c)(1)]			
Employee Code of Conduct			
Equal Opportunity Policy prohibits discrimination on the basis of race, sex, color, national origin, age, religion, disability, and familial status			
Environmental Review Record [58.34(a)]			
Procurement Policy [200.318(a)] (if applicable)			
Language Assistance Policy			
Record Retention Policy			
Board Handbook			
Does the program appear to be operating ethically and within its mission statement?			
OTHER:			
OTHER:			
OTHER:			

ON-SITE DISCUSSION

	YES	NO	COMMENTS
Are the following available in the program file? Subrecipient agreement, ERR, National Objective documentation, and reimbursement requests with supporting documentation. Please show me.			
Are client files maintained and kept securely?			
Is the IT system secure? Explain.			
Have there been any conflicts of interest for staff or the Board?			
Were any board members/employees assisted with these funds?			
Have there been any staffing issues?			
Are there any concerns with staff turnover?			
Have there been any concerns with conflicts of interest?			
Is there evidence of discrimination in the program?			
OTHER:			
OTHER:			
OTHER:			

PART 5: FINANCIAL MANAGEMENT

PRELIMINARY REVIEW

DOCUMENTS TO REVIEW

- ☐ Financial Policy
- ☐ Most recent audit (federal expenditures exceed $750k) OR Certified Financial Status Report (federal expenditures do not exceed $750k)
- ☐ Current Approved Budget
- ☐ List of all accounts in accounting system
- ☐ Documentation of Match (if applicable)
- ☐ Payroll Records – Timesheets, Salary Schedule (if applicable)
- ☐ Payment Requests

STAFF REVIEW	YES	NO	COMMENTS
Financial Policy (contains approval authority for financial transactions, recording transactions, and show an adequate separation of duties			
Is the Subrecipient required to have a single audit per 2 CFR 200.501 (a)?			
Are there any outstanding audit/financial issues?			
Is it clear how the organization records and tracks the use of funds? Do records identify funds by grant/program year?			
Is there a separate account for CDBG or other Federal Funds?			
Are encumbrances or obligations recorded against funds when invoices, purchase orders, Subrecipient Agreements, staff time records are executed and do accounting records include unexpended/unobligated balances?			
Are non-CDBG funds being leveraged by the activity year to date? What source? Compare use of leveraged funds to the submitted budget, application, and agreement.			
Is adequate control maintained of access to accounting records, blank forms, checkbooks and confidential records?			
Is there evidence of cash flow problems?			
If any portion of a salary is paid with CDBG funding, is there evidence of payment for time spent on anything other than the CDBG activity that is funded?			
Grievance/Termination Policy			
IRS Non-Profit Determination			
National Objective Documentation [570.200(2)]			
Non-Discrimination Policy			
OTHER:			
OTHER:			
OTHER:			

ON-SITE DISCUSSION

	YES	NO	COMMENTS
Does the budget track the revenue and expenditures by specific source? Please show me.			
Do you have a system for tracking that employee taxes are paid? Please provide a sampling.			
Is income generated from the use of these funds? If yes, is the file clear how funds are generated and what happens to these program income funds?			
Have there been any major changes to the overall budget for the organization?			
If being reimbursed for staff time, are timesheets current? Please show us the last two weeks.			
OTHER:			
OTHER:			
OTHER:			

PART 6: COST ALLOWABILITY

PRELIMINARY REVIEW

DOCUMENTS TO REVIEW
Previous Reimbursement Requests
Policies and Procedures

STAFF REVIEW	YES	NO	COMMENTS
Do activity expenditures/request include any unallowable costs (e.g. entertainment, travel, lobbying or donations to other organizations)?			
Were any activity funds committed or expended prior to the beginning of the program year?			
Is there documentation of time spent on eligible activities for all wages that are being reimbursed?			
Subsistence Payments: Is there a tracking mechanism in place to ensure participants receive no more than three (3) consecutive months of assistance?			
OTHER:			
OTHER:			
OTHER:			

ON-SITE DISCUSSION

	YES	NO	COMMENTS
OTHER:			
OTHER:			
OTHER:			

PART 7: DOCUMENTATION AND RECORD KEEPING

PRELIMINARY REVIEW

DOCUMENTS TO REVIEW
☐ Policies and Procedures
☐ Program Application

STAFF REVIEW	YES	NO	COMMENTS
Are all required elements collected on the application?			
Is the agency following their policies and procedures for the program they have been funded?			
Based on the review of the program, are there areas that should be enhanced in the policies and procedures?			
OTHER:			
OTHER:			
OTHER:			

ON-SITE DISCUSSION

1. NUMBER OF FILES REVIEWED: _____

	YES	NO	COMMENTS
OTHER:			
OTHER:			
OTHER:			

PART 8: CIVIL RIGHTS AND AFFIRMATIVE MARKETING PLAN

PRELIMINARY REVIEW

DOCUMENTS TO REVIEW

☐ Employee Application   ☐ Alternative Language Policy
☐ Job Posting Language   ☐ Affirmative Action Plan (Boise)
☐ Equal Opportunity Policy   ☐ Section 504 Self-Assessment (Boise)

STAFF REVIEW	YES	NO	COMMENTS
Do job advertisements contain equal employment opportunity language?			
Does the agency specifically prohibit discrimination on the basis of race, sex, color, national origin, age, religion, disability, and familial status?			
Job advertisements contain equal employment opportunity language			
City of Boise: Does the organization have more than 15 employees? If yes, does the organization have a current workforce analysis?			
City of Boise: Does the organization have an affirmative action plan? Is the organization meeting affirmative action goals? Has the organization identified a Section 504-Coordinator? Is the organization marketing its housing, program, or service throughout the service or market identified in the affirmative marketing plan?			
OTHER:			
OTHER:			
OTHER:			

ON-SITE DISCUSSION

	YES	NO	COMMENTS
How does the organization advertise job vacancies?			
Were any employment discrimination complaints filed against the organization? Have they been satisfactorily resolved?			
Has staff been trained to assist participants with alternative language needs (e.g. Spanish speaking, hearing impaired, etc.)?			
Has the organization posted the ADA Section 504 poster notice or equivalent in an accessible location? Please show us.			
Has the organization provided training to staff on program and physical accessibility, including reasonable accommodation requirements?			
OTHER:			
OTHER:			
OTHER:			

PART 9: GENERAL

1. ARE THERE ANY QUESTIONS FOR US?

2. DO YOU HAVE ANY TECHNICAL ASSISTANCE REQUESTS OR TRAINING OPPORTUNITIES?