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| **COMMUNITY SERVICES BLOCK GRANT (CSBG) PROGRAM** **2024-2026 APPLICATION AND PLAN****PLEASE NOTE: DOCUMENT CANNOT BE UPLOADED IN ITS ENTIRETY FOR THE APPLICATION BUT IS BEING RELEASED TO ALLOW YOU TO DEVELOP THE CONTENT FOR EACH SECTION/QUESTION IN ADVANCE. THE TEXT FOR EACH QUESTION WILL NEED TO BE PASTED INTO EACH SECTION.** **Due September 29, 2023 through the Grants Portal*****EXCERPT FROM SOON TO BE RELEASED CO CSBG 2024-2026 APPLICATION******COMMUNITY ACTION PLAN AND STRATEGIC PLAN SECTIONS*** ***2023 CO Community Action Regional Forums*** |

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| **H. COMMUNITY ACTION PLAN (3 YEARS)**1. **Describe how the Service and Strategies in CSBG that your agency will be working on, identified in Section E, will address the needs identified in the community needs assessment and what are the general services and strategies that will be used?**
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| 1. **Describe the expected outcomes for the customers or community that will be achieved. Indicate whether each outcome is a family, agency or community level outcome.**
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| 1. **How will success be measured? Include how data will be collected and the quantitative and qualitative evaluation techniques that will be used. What are the measurement tools (evidence) and services strategy (outputs) that will prove outcomes were obtained?.**
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| 1. **What other community entities, organizations, or stakeholders are contributing to this project and how services will be coordinated? Describe how duplication of services will be avoided. Please specifically describe any subrecipients involved.**
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| 1. **Describe how CSBG funds are leveraged with other cash and in-kind resources in the community. In what ways does CSBG fill gaps in services or address unmet needs in the community?**
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| 1. **Describe how the principles and practices of Results Oriented Management and Accountability (ROMA) are used in your agency and program?**
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| 1. **When was the last ROMA training accessed by the organization? Who attended, and who provided the training?**
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1. **Did a Certified ROMA Trainer review this Community Action Plan prior to submission?**

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| * Yes
* No

Provide the name of the Certified ROMA Trainer who completed the review. |

1. **Upload ROMA Trainer/Implementer Review Certification and Review Notes (PDF)**
2. **Please upload a copy of the Board minutes approving the Community Action Plan**

**I. STRATEGIC PLAN (5 YEARS)**

1. What is the **long-term vision** for the CSBG program at your organization or department? How does this vision address reduction of poverty, revitalization of low-income communities, and/or empowerment of people with low incomes to become more economically secure?

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1. What **strengths, weaknesses, opportunities and threats** contribute to the organization or department’s ability to achieve the long-term vision indicated above. (Strengths and weaknesses are internal to the organization. Opportunities and threats are external to the organization.)

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1. What **long-term family, agency and/or community goals** are addressed by the strategic plan?

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1. How is **customer satisfaction information and customer input** included in the strategic planning process?

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1. How are the goals in the strategic plan **supported by your community action plan**? How will **progress be tracked** towards the overall vision and goals expressed in your strategic plan?

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