**ILLINOIS ENVIRONMENTAL PROTECTION AGENCY**

**NOTICE OF FUNDING OPPORTUNITY**

**PROGRAMMATIC RISK ASSESSMENT QUESTIONNAIRE**

The purpose of this assessment is to evaluate the programmatic risk of the applicant. Limited program experience, protocols, and internal control governing program delivery will increase an applicant’s degree of risk but will not preclude the applicant from becoming a grantee. The applicant’s degree of risk may require additional conditions to be incorporated into the grant award pursuant to 2 CFR 200.207.

Patterns or trends in programmatic risk will influence GATA training as well as the agency’s monitoring plan. Appropriate support must be provided by GATU and the agency to build greater capacity.

Process:

1. The agency adds agency and/or grant-specific questions under section 5.
2. The questionnaire (including the agency and/or grant-specific questions) is distributed to the applicant by the agency prior to an awarding decision.
3. The applicant returns the completed questionnaire to the agency. The agency scores the questionnaire based on the responses provided by the applicant. (The automated form will score the responses.)
4. The calculated responses equate to a risk profile for each of the 5 risk categories.
5. The agency aligns the risk profile to the applicable specific condition(s) for medium and high-risk applicants in each of the 5 risk categories.
6. The agency communicates the applicable specific condition(s) within the Notice of State Award.

A separate programmatic risk assessment is required for each grant application. Responses should be specific to the program outlined in the associated notice of funding opportunity.

|  |  |
| --- | --- |
| Program Associated with this Programmatic Risk Assessment | Energy Efficiency Assessment Program |
| Awarding State Agency | Illinois Environmental Protection Agency  |
| Entity Completing Programmatic Risk Assessment |  |
| Individual Completing Programmatic Risk Assessment |  |
| Contact Information for Completer (Phone and Email) |  |

**In response to the requirements of 2 CFR 200.205, the awarding agency is required to review the programmatic risk posed by applicants. Five risk categories are assessed through this questionnaire:**

1. **Management systems and standards**
	1. Do you have written procedures and policies that guide program delivery on the topics of:

|  |  |  |
| --- | --- | --- |
| **Topic** | **Yes** | **No** |
| Quality assurance |  |  |
| Outcome tracking and reporting mechanisms |  |  |
| Relevant documentation of services/goods delivered |  |  |
| Staff performance management policies and procedures |  |  |
| Personnel policies and procedures that include conflict of interest statements |  |  |
| Complaint/grievance resolution policies and procedures |  |  |
| Governing body policies and procedures that include conflict of interest statements |  |  |
| Safeguarding funds, property, and other assets against loss from unauthorized use or disposition  |  |  |
| Management of grant term extensions, where applicable  |  |  |

* 1. Do you have internal controls that govern program delivery on the topics of:

|  |  |  |  |
| --- | --- | --- | --- |
| **Topic** | **Yes** | **No** | **Not Applicable** |
| Quality assurance reporting  |  |  |  |
| Appropriate (to industry) supervision of staff |  |  |  |
| Unit costs analysis and management  |  |  |  |
| Accreditation/licensing compliance program  |  |  |  |
| Personnel policies and procedures that include conflict of interest statements |  |  |  |
| Complaint/grievance resolution policies and procedures |  |  |  |
| Governing body policies and procedures that include conflict of interest statements |  |  |  |
| Safeguarding funds, property, and other assets against loss from unauthorized use or disposition  |  |  |  |
| Management of grant term extensions, where applicable  |  |  |  |

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

[ ]  Yes

[ ]  No

* 1. How many years of experience does the project leader or key program staff have managing the scope of services required under this program?

[ ]  More than five years

[ ]  One to five years

[ ]  Less than one year

* 1. Does the organization have a time and effort system that:

|  |  |  |  |
| --- | --- | --- | --- |
| **Topic** | **Yes** | **No** | **Not Applicable** |
| Records all time worked, and separates time applied to each program  |  |  |  |
| Signed-off by employee and a supervisor |  |  |  |
| Includes an approved methodology  |  |  |  |
| None of the above are applicable because grants are based on a set rate or a per unit of service |  |  |  |

* 1. Does the organization have controls for invoicing grants paid based on a rate or unit of service?

[ ]  Yes

[ ]  No

* 1. Does the organization apply the same standard for match requirements as it does for expenses?

[ ]  Yes

[ ]  No

[ ]  Not Applicable – we’ve not previously been subject to match requirements

* 1. To what extent are you able to produce periodic grant status reports to inform stakeholders about programmatic outcomes and financial status?

[ ]  Reports are an established part of grant management procedures

[ ]  We’re developing reports as part of grant management procedures

[ ]  We do not currently have established reports as part of grant management

1. **Performance History**
	1. How many years of experience does your organization have with grants of comparable scope and/or capacity?

[ ]  More than five years

[ ]  One to five years

[ ]  Less than one year

[ ]  No experience – GO TO QUESTION 3.3

* 1. Has your organization successfully performed the same or substantially same grant in the last three years?

[ ]  Yes

[ ]  No

* 1. Provide a brief description of the grants of comparable scope and/or capacity, including project goals and outcomes and specify the applicable year of performance.
	2. During your last two fiscal years, how frequently has your organization submitted project performance and financial reports on time?

[ ]  Always

[ ]  Reported late up to three times

[ ]  Reported late four or more times

[ ]  Not applicable – not a requirement of awards previously received

* 1. Have there been any significant changes in your organization in the last fiscal year related to:

|  |  |  |
| --- | --- | --- |
| **Topic** | **Yes** | **No** |
| Leadership changes  |  |  |
| Significant program/grant initiatives |  |  |
| Structural changes  |  |  |
| Fiscal changes  |  |  |
| Statutory or regulatory requirements |  |  |

* 1. Provide a brief description for all “Yes” responses to question 2.5.
	2. Does the organization have experience working with external partners?

[ ]  Yes

[ ]  No

* 1. Does the organization utilize a sub-recipient to manage, administer, or complete a project?

[ ]  Yes

[ ]  No – if no, go to question 2.10

* 1. What responsibilities will/does the sub-recipient perform?

[ ]  Performance reporting

[ ]  Financial reporting

[ ]  Procurement

[ ]  Contractual services for program functions

[ ]  Other, explain:

* 1. What percentage of grant funds does your organization pass on to sub-grantees/sub-recipients/sub-awards?

[ ]  Less than 10%

[ ]  10-20%

[ ]  More than 20%

* 1. Does your organization have an implement policy for sub-grantee monitoring?

[ ]  Yes

[ ]  No

If no, go to 2.11. If yes, does it include:

[ ]  On-site review

[ ]  Review of prior monitoring

[ ]  Desk/quantitative review

* 1. Does your organization have performance measurements that tie to financial data?

[ ]  Yes

[ ]  No

1. **Reports and findings from audits performed under Subpart F – Audit Requirements of this part or the reports and findings of any other available audit**
	1. During the last two fiscal years, has your organization been out of compliance with programmatic terms and conditions of awards?

[ ]  Organization has not been audited; go to question 3.6

[ ]  No occurrences of non-compliance; go to question 3.6

[ ]  One to three occurrences of non-compliance

[ ]  Four or more occurrences of non-compliance

* 1. If your organization had at least one occurrence of non-compliance with programmatic terms and conditions, summarize each occurrence.
	2. Have corrective actions been implemented within the specified timeframe?

[ ]  Yes

[ ]  No

* 1. Provide explanation for any corrective actions that were not implemented within the timeframe specified and for any corrective actions that remain open.
	2. Has there been a conflict of interest-related finding within the last two fiscal years?

[ ]  No, go to question 3.6

[ ]  Yes, specify the conflict of interest-related finding below and your response to the finding.

* 1. Has your organization been subject to conditional approvals due to program issues?

[ ]  No, to go question 4.1

[ ]  Yes, specify the terms of the special conditions below and whether or not the special condition is still applicable.

1. **The applicant’s ability to effectively implement statutory, regulatory, or other requirements imposed on awardees.**
	1. To what extent does your organization have policies to ensure programmatic expenses are reasonable, necessary, and prudent (allowable)?

[ ]  Policies are implemented and followed

[ ]  Policies are not fully implemented

[ ]  The organization does not currently have these types of policies

* 1. To what extent does your organization have policies to ensure programmatic activities are allowable?

[ ]  Policies are implemented and followed

[ ]  Policies are not fully implemented

[ ]  The organization does not currently have these types of policies

* 1. Has the organization been out of compliance with any statutory, regulatory or other requirements of grant funding within the last two fiscal years?

[ ]  No

[ ]  Yes, provide explanation below.

1. **Agency-specific Questions (as applicable based on terms of the Notice of Funding Opportunity)**
	1. How significant are the program funds in relation to the organizations overall budget?

[ ]  Less than 25%

[ ]  26% - 50%

[ ]  More than 50%

* 1. Is adequate staffing capacity planned for the program implementation?

[ ]  Yes

[ ]  No

* 1. Will the program require scaling up staff capacity?

[ ]  0%

[ ]  Up to 50% of staffing

[ ]  Up to 100% of staffing

[ ]  More than 100%

* 1. Has one staff person been designated to oversee performance reporting for this program?

[ ]  Yes

[ ]  No

* 1. Is there a segregation of duties amongst staff to ensure accurate and validated reporting?

[ ]  Yes

[ ]  No

* 1. Are staff preparing reports familiar with program requirements, deliverables, and outcomes?

[ ]  Yes

[ ]  No

**Certification Section**

I certify that the responses provided to the Programmatic Risk Assessment Questionnaire are true and accurate and that all occurrence of non-compliance with programmatic requirements addressed through this questionnaire have been disclosed.

Authorized Signature Date