**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 grantee capacity.

Process:

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

**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. **Quality of management systems and ability to meet the management standards**
2. **History of performance**
3. **Reports and findings from audits performed under Subpart F—Audit Requirements of this part or the reports and findings of any other available audit**
4. **The applicant's ability to effectively implement statutory, regulatory, or other requirements imposed on awardees.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Quality of management systems and ability to meet the management standards**
2. Do you have written policies and procedures that guide program delivery on the topics of:
3. Quality assurance  YES/ NO
4. Outcome tracking and reporting mechanisms  YES/ NO
5. Relevant documentation of services/goods delivered  YES/ NO
6. Staff performance management policies and procedures  YES/ NO Personnel policies and procedures that include conflict of interest statements  YES/ NO
7. Complaint/grievance resolution policies and procedures  YES/ NO
8. Governing body policies and procedures that include conflict of interest statements  YES/ NO
9. Safeguarding funds, property and other assets against loss from unauthorized use or

disposition  YES/ NO

1. Management of grant term extensions, where applicable  YES/ NO
2. Do you have internal controls that govern program delivery on the topics of:
3. Quality assurance reporting  YES/ NO
4. Appropriate (to industry) supervision of staff  YES/ NO
5. Unit costs analysis and management  YES/ NO
6. Accreditation/licensing compliance program  YES/ NO / NOT APPLICABLE
7. 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
8. How many years of experience does the project leader have managing the scope of services required under this program?

More than five years (low risk)

One to five years (medium risk)

Less than one year (high risk)

1. Does the organization have a time and effort system that:
   1. Records all time worked, including time not charged to awards?  YES /  NO
   2. Is signed-off by the employee and a supervisor?  YES/ NO
   3. Includes an approved methodology?  YES/ NO/ NOT APPLICABLE

Question is not applicable because grants are based on a set rate or a per unit of service. Go to question 1.6.

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 BEEN SUBJECT TO MATCH REQUIREMENTS

1. To what extent are you able to produce periodic grant status reports to inform stakeholders about program outcomes?

Reports are an established part of grant management procedures (low risk)

We’re developing reports as part of grant management procedures (medium risk)

We do not currently have established reports as part of grant management (high risk)

1. **History of performance** (The applicant's record in managing grant awards, if it is a prior recipient of awards, including timeliness of compliance with applicable reporting requirements, conformance to the terms and conditions of previous awards, and if applicable, the extent to which any previously awarded amounts will be expended prior to future awards)
2. How many years of experience does your organization have with grants of comparable scope and/or capacity?

More than five years (low risk)

One to five years (medium risk)

Less than one year (high risk)

No experience (high risk) GO TO QUESTION 3.3

1. If your organization has experience with grants of comparable scope and/or capacity, provide a brief description of similar project goals and outcomes; specify the applicable year: (Text response)
2. During your last two fiscal years, how frequently has your organization submitted project performance reports on time?

Always (low risk)

Reported late up to three times (medium risk)

Reported late four or more times (high risk)

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:
   1. Leadership change(s)  YES/ NO
   2. Significant program / grant initiative(s)  YES/ NO
   3. Structural changes  YES/ NO
   4. Fiscal changes  YES/ NO
   5. Statutory or regulatory requirements  YES/ NO
   6. Other  YES/ NO
2. Provide a brief explanation for all “YES” responses to question 2.4. (Text response)
3. Does the organization utilize a sub-grantee/sub-recipient / sub-award to manage, administer or complete a project?  YES/ NO If NO, go to question 2.10.
4. What responsibilities does the sub-grantee/sub-recipient/sub-award perform?
   1. Participant eligibility determination  YES/ NO
   2. Performance reporting  YES/ NO
   3. Program delivery functions  YES/ NO
   4. Financial reporting  YES/ NO
   5. Other        YES/ NO
5. What percentage of grant funds does the organization pass on to sub-grantees/sub-recipients/sub-awards?

Less than 10% (low risk)

10-20% (medium risk)

More than 20% (high risk)

1. Does your organization have an implemented policy for sub-grantee monitoring?  YES/ NO

If NO, go to 2.10. If YES, does it include:

on-site review (low risk)

review of prior monitoring (low risk)

desk / quantitative review (medium risk)

* 1. Do you obtain prior written approval from the funding agency when:

1. The scope or objective of the program changes  YES/ NO
2. Key personnel specified in the application change  YES/ NO
3. The approved project director disengages for more than 3 months or reduces 25% of time devoted to the project  YES/ NO

Question is not applicable because organization has not been subject to these requirements

* 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**
2. 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 (low risk)

One to three occurrences of non-compliance (medium risk)

Four or more occurrences of non-compliance (high risk)

1. If your organization had at least one occurrence of non-compliance with programmatic terms and conditions, summarize each occurrence. (Text response)
2. Have corrective actions been implemented within the specified timeframe?  YES/ NO
3. Provide explanation for any corrective actions that were not implemented within the timeframe specified and for any corrective actions that remain open. (Text response)
4. Have there been conflict of interest-related findings within the last two fiscal years?  YES/ NO
   1. If NO, go to question 3.6. (low risk)
   2. If YES, specify the conflict of interest-related finding and your response to the finding.

(Text response)

1. Has your organization been subject to conditional approvals due to program issues?  YES/ NO
   1. If NO, to go question 4.1.
   2. If YES, specify the terms of the special condition and whether or not the special condition is still applicable. (Text response)
2. **The applicant's ability to effectively implement statutory, regulatory, or other requirements imposed on awardees.**
3. To what extent does your organization have policies to ensure programmatic expenses are reasonable, necessary and prudent (allowable)?

Policies are implemented and followed (low risk)

Policies are not fully implemented (high risk)

The organization does not currently have these types of policies (high risk)

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

Policies are implemented and followed (low risk)

Policies are not fully implemented (high risk)

The organization does not currently have these types of policies (high risk)

1. To what extent is your organization able to comply with all statutory requirements of this program?

Fully able to comply with all statutory requirements (low risk)

With the following exception(s), the organization is able to comply: Text response of exception(s) (medium to high risk depending on the exceptions)

1. Has the organization been out of compliance with any statutory, regulatory or other requirements of grant funding within the last two fiscal years?  YES/ NO

If YES, provide explanation. (Text response)

**Certification Section -** Add wording to validate that the responses provided are true and accurate and that all occurrence of non-compliance with programmatic requirements has been disclosed.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Authorized Signature Date