**Programmatic Risk Assessment Questionnaire**

**FY18**

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 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 program-specific.

|  |  |
| --- | --- |
| Program Associated with thisProgrammatic Risk Assessment: | Local Highway Safety Improvement Program |
| Awarding State Agency: | Illinois Department of Transportation |
| Entity Completing ProgrammaticRisk Assessment: |       |
| Individual CompletingProgrammatic Risk Assessment: |       |
| Contact Information forCompleter (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. **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.**
5. **Agency-specific Questions (As applicable based on terms of the Notice of Funding Opportunity)**
6. **Quality of management systems and ability to meet the management standards**
7. Do you have written policies and procedures that guide program delivery on the topics of:
8. Quality assurance [ ]  YES/[ ]  NO
9. Outcome tracking and reporting mechanisms [ ]  YES/[ ]  NO
10. Relevant documentation of services/goods delivered [ ]  YES/[ ]  NO
11. Staff performance management policies and procedures [ ]  YES/[ ]  NO
12. Personnel policies and procedures that include conflict of interest statements [ ]  YES/[ ]  NO
13. Complaint/grievance resolution policies and procedures [ ]  YES/[ ]  NO
14. Governing body policies and procedures that include conflict of interest statements [ ]  YES/[ ]  NO
15. 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

[ ]  One to five years

[ ]  Less than one year

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

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

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

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

[ ]  One to five years

[ ]  Less than one year

[ ]  No experience 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

[ ]  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:
	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%

[ ]  10-20%

[ ]  More than 20%

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

[ ]  review of prior monitoring

[ ]  desk / quantitative review

* 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

[ ]  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. (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
	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

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

[ ]  Fully able to comply with all statutory requirements

[ ]  With the following exception(s), the organization is able to comply: Text response of exception(s)

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)

1. **Agency-specific Questions (As applicable based on terms of the Notice of Funding Opportunity)**

No additional agency-specific questions have been added for this program to the Programmatic Risk Assessment questionnaire.

## Certification Section

I certify that the responses provided to this 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.

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Authorized Signature Date