

Illinois Emergency Management Agency / Programmatic Risk Assessment Questionnaire (ICQ)

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.

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 awards..

1. Quality of management systems and ability to meet the management standards

1.1. Do you have written policies and procedures that guide program delivery on the topics of:

a. Quality assurance YES NO

b. Outcome tracking and reporting mechanisms YES NO

c. Relevant documentation of services/goods delivered YES NO

d. Staff performance management policies and procedures YES NO

e. Personnel policies and procedures that include conflict of interest statements YES NO

f. Complaint/grievance resolution policies and procedures YES NO

g. Governing body policies and procedures that include conflict of interest statements YES NO

h. Safeguarding funds, property and other assets against loss from unauthorized use or disposition YES NO

i. Management of grant term extensions, where applicable YES NO

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

- a. Quality assurance reporting YES NO
- b. Appropriate (to industry) supervision of staff YES NO
- c. Unit costs analysis and management YES NO
- d. Accreditation/licensing compliance program YES NO N/A

1.3 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

1.4 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)

1.5 Does the organization have a time and effort system that:

- a. Records all time worked, including time not charged to awards? YES NO
- b. Is signed-off by the employee and a supervisor? YES NO
- c. Includes an approved methodology? YES NO N/A

1.6 Does the organization have controls for invoicing grants paid based on a rate or unit of service? YES NO

1.7 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)

2. 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)

2.1. 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)

2.2 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

2.3 Do you obtain prior written approval from the funding agency when:

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

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

3.1. 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.
- No occurrences of non-compliance. (low risk)
- One to three occurrences of non-compliance (medium risk)
- Four or more occurrences of non-compliance (high risk)

3.2 Have corrective actions been implemented within the specified timeframe? YES NO N/A

4. The applicant's ability to effectively implement statutory, regulatory, or other requirements imposed on awardees.

4.1. 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)

4.2 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, please explain

Certification

By submitting this programmatic internal control questionnaire, I certify to the best of my knowledge and belief that the information provided in this document is true, complete and accurate and that any false, fictitious or fraudulent information or the omission of any material fact could result in the immediate termination of my grant award(s).

Name of Organization	<input style="width: 80%;" type="text"/>
Name & Title	<input style="width: 80%;" type="text"/>
Name of IEMA Grant Program applying for:	<input style="width: 80%;" type="text"/>
Date	<input style="width: 80%;" type="text"/>

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The Programmatic Risk must be considered and included in the special conditions section of the NOSA and UGA

IEMA Program Manager Review and Risk Ranking

- Low Risk Applicant
- Medium Risk Applicant
- High Risk Applicant

Program Manager Comments	<div style="border: 1px solid black; height: 80px;"></div>
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