



**TEXAS DEPARTMENT OF HOUSING AND COMMUNITY AFFAIRS  
COMMUNITY SERVICES BLOCK GRANT (CSBG) PROGRAM**

## **Community Action Plan Guidance**

**IN CONNECTION WITH THE  
RESULTS ORIENTED MANAGEMENT AND ACCOUNTABILITY (ROMA) CYCLE**



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## CSBG Act and State Requirement

**CSBG ACT 676 (b) (11)** states “an assurance that the State will secure from each eligible entity in the State, as a condition to receipt of funding by the entity through a community services block grant made under this subtitle for a program, a community action plan (which shall be submitted to the Secretary, at the request of the Secretary, with the State plan) that includes a community-needs assessment for the community served, which may be coordinated with community-needs assessments conducted for other programs.”

**TAC Rule §6.206 (a)** in accordance with the CSBG Act each Eligible Entity must submit a Community Action Plan on an annual basis. The Community Action Plan is required to be submitted to the Department by a date directed by the Department, for approval prior to execution of a Contract.

**Every year on September 1<sup>st</sup>, all CAPS/Budgets are due to the Department as indicated in the Subrecipient contract.**

## Submission Instructions

Complete all submission forms and submit the current year CAP Plan and Budget in MS Excel format only (DO NOT convert to a PDF format) and the Certification of Board Approval of Budget and CAP converted to a PDF format once it is approved and signed.

The Department will open the Wufoo submission form on May 1<sup>st</sup> and will close the form on September 1<sup>st</sup> at 11:59 pm CST. The Department is requesting that the completed CAP and Budget with all supporting documentation be submitted as early as possible to:

<https://tdhca.wufoo.com/forms/cap-submission-form/>

The CAP sets the course for the CSBG Subrecipients’ activities for the upcoming year. Sufficient time should be allotted to its preparation, and key agency staff are to be included in the preparation. The Board’s committee that is responsible for program issues are to be consulted in the process and provide input and direction in the development process.

## Naming Convention for Uploaded Documents

Use your agency acronym ( [Appendix A – Agency Acronyms](#) ) located at the end of the document.

When uploading documentation, please save in the following naming conventions for the documents as shown below:

- PYXX\_AgencyAcronym\_CAP
- PYXX\_AgencyAcronym\_CIS
- PYX\_AgencyAcronym\_Budget
- PYXX\_AgencyAcronym\_BudgetSummary
- PYXX\_AgencyAcronym\_PublicHearing

## Questions

For questions, contact Karen Keith at [karen.keith@tdhca.state.tx.us](mailto:karen.keith@tdhca.state.tx.us).


## Three-Year Community Action Plan

### Instructions

- a) With the agency submission of the Community Needs Assessment (CNA) to the Department for review, which must be conducted at minimum every three years, the Subrecipient needs to submit a Community Action Plan (CAP) that includes the Top 5 Needs and Gaps in Services.
- b) Year 2 and 3 the Subrecipient will provide the Department updated targets and estimates, and annually an updated Agency Capacity Bldg. tab to keep staff certifications current and the Referrals/Partnerships tab to meet OS 2.1.
- c) Every year a Budget must be submitted along with the CAP.

## TOP 5 Needs and Gaps

### Instructions

- a) Completed every three years and aligns with the CNA Top Needs identified.
- b) Only complete fields highlighted in yellow.
- c) Complete Tab: Needs
  1. **Subrecipient:** enter Subrecipient name
  2. **Rank** of need is to match the ranking of needs addressed in the Subrecipient CNA
  3. **Need:** Write the need statement using individual/family or community level
    -  If the Subrecipient is going to write the need as a community level need then the Subrecipient will complete the Community Initiative Status form (see CIS instructions below)
  4. **Outcome:** Write the outcome statement desired (opposite of need)
  5. **Organization(s)/Program Providing Services or Strategies:** Provide the names of all organizations, including Subrecipient, with the service(s)/strategies each will provide to address the identified need.
  6. **County(ies) where provided:** List the county(ies) where the services are provided
  7. **Gaps in Services – provide a brief narrative of:**
    - Gaps in Services for each need
    - Bridging the Gaps in Services and what the Subrecipient or partner organizations can do to bridge the gaps.

### Reference

**Needs Assessment Addressing Top Five Needs:** CSBG Act, Sec. 676 (b)(11) requires the State to secure from each eligible entity a community needs assessment and Sec. 676(b)(3)(B-C) requires that eligible entities provide information on how linkages will be developed to fill identified gaps in the services through the provision of information, referrals, and follow-up consultation.

TDHCA opted to select the top 5 needs that align with agency mission and ability to make an impact, from the local community assessment. Services for other identified needs may be addressed under the SRVs and NPIs.

**Services:** CSBG Act, Sec. 676(b)(3)(B-C) requires that eligible entities provide information on how linkages will be developed to fill identified gaps in the services through the provision of information, referrals, and follow-up consultation. CSBG Act, Sec. 676(b)(D)(5)(6)(9) requires that CSBG eligible entities develop linkages with governmental and other social service programs to assure the effective delivery of services and requires that eligible entities establish linkages with other organizations to fill identified gaps in services through the provision of information, referrals, case management, and follow-up consultations.

## Outcomes (FNPIs) & Services (SRVs)

### Instructions

- a) Completed annually
- b) Only complete fields highlighted in yellow.
- c) Complete Tabs: 1-7
  1. Employment
  2. Education
  3. Income-Assets
  4. Housing
  5. Health
  6. Civic
  7. Support Services

Tabs 1-7, include both the outcomes and services as they relate to the identified top five needs in the service area, and can include any other services provided by the Subrecipient.

- d) **Identify Outcomes (FNPIs)** for each Domain:
  1. Select all outcomes the Subrecipient plans to achieve in the program year,
  2. ONLY indicate the outcomes the Subrecipient will address and populate column C
  3. Provide the target planned to achieve in column D.



Include the unduplicated individuals who will achieve an outcome in FNPI 7a - Outcomes across multiple domains. FNPI 7a is an unduplicated count of individuals who obtained one or more outcomes; ***it should be at least as high as the highest NPI.***

- e) **Identify Services (SRVs)** for each Domain:
  1. Select all services the Subrecipient plans to provide to support FNPIs
  2. ONLY indicate those services the Subrecipient will provide and populate column
  3. Provide the estimate in column H.
- f) **Estimates for Number of Individuals:** Using previous performance data, and anticipated need for the CAP year, estimate the number of individuals that will achieve the outcome or receive the service.
- g) **Other:** Use "Other" to identify services and outcomes not related to the top 5 identified needs.
- h) **Service Supporting Multiple Domains (SRV 7):** Be sure to indicate estimates for following, only count individuals:
  1. SRV 7a for case managed individuals
  2. SRV 7b for all income/eligibility determinations approved and denied
  3. SRV 7c for referrals that are to be made across programs for applicants only estimate the number of individuals and not the number of referrals

### Reference

**TAC RULE §6.206 (f)** The Strategic Plan, Community Assessment, and CAP require Department approval; those that do not meet the Department's requirements as articulated in these rules, in federal guidance, in Subrecipient's Contract, and in Department guidance will be required to be revised until they meet the Department's satisfaction.

## Agency Capacity Building

### Instructions

- a) Only complete fields highlighted in yellow
- b) Complete Tab: Agency Capacity Bldg.
  - 1. Provide the number of staff who have the certification identified in the B.4 series

## Section B1—B3

### Instructions

- a) Only complete fields highlighted in yellow
- b) Complete Tab: Section B1—B3

### Section B1: Provision of Nutritious Foods and Initiatives

- a) **Provision of Nutritious Foods:** Provide a narrative for Provision of Nutritious Foods and explain how the Subrecipient will provide nutritious foods on **an emergency basis**.
- b) **Initiatives:** Provide a narrative on how the Subrecipient will use the funds to support innovative community and neighborhood-based initiatives related to the purposes of this subtitle, which may include fatherhood initiatives and other initiatives with the goal of strengthening families and encouraging effective parenting.

### Reference

**Provision of Nutritious Foods** – CSBG Act, Sec. 676(b)(4) states “an assurance that eligible entities in the State will provide, **on an emergency basis**, for the provision of such supplies and services, nutritious foods, and related services, as may be necessary to counteract conditions of starvation and malnutrition among low-income individuals; “

The assistance only needs to be provided on an emergency basis, until the need is met. If a referral source can meet the need, that is acceptable; otherwise, CSBG funds must be used to meet the need.

**Initiatives** – CSBG Act, Sec. 676 (b)(3)(D) states “a description of how the local entity will use the funds to support innovative community and neighborhood-based initiatives related to the purposes of this subtitle, which may include fatherhood initiatives and other initiatives with the goal of strengthening families and encouraging effective parenting”

### Section B2: Case Management Services and Caseload

- a) Answer questions 1-3 by choosing from the dropdown list
  - 1. Enter the Number of Case Managers the agency has on staff
  - 2. Enter the agency’s State-assigned TOP Goal, or a higher “agency-set” TOP Goal
  - 3. Enter the average household size for the agency service area

### Reference

**Case Management Services and Caseload:** CSBG Act, Sec. 672 (1) one of the primary purposes of the CSBG grant is to empower low-income families and individuals to become fully self-sufficient.

### Section B3: Referrals and Partnerships

Combine all four groups into one excel worksheet using the template provided in Tab: Referrals and Partners

## Referrals and Partners

- a) Required annually to meet OS 2.1

b) Only complete fields highlighted in yellow

c) Complete Tab: Referrals and Partners

Maintain an electronic file that is continually kept current and up-to-date and should contain:

1. List all partners, including all from tab A, by county
2. Referral Organizations: include other non-profits, for-profits, churches, food pantries/food banks, school districts, colleges, universities, health clinics, housing authorities, state and federal assistance agencies
3. Social Service Coalitions whom the agency is a member. Please include the Community Resource Coordination Group (**CRCG**) in the area that can be found at <https://crcg.hhs.texas.gov/index.html> and should also include the local Continuum of Care (**COC**) [CoC Grantee Contacts](#) in Texas.
4. Child Support Offices by county served
5. Texas Workforce Commission (TWC) Offices by county served



Reminder that this tab is reviewed and determines whether OS 2.1 is Met

#### Reference

**Referral Organizations:** The CSBG Act, Sec. 676 (b)(3)(B-C)) and Sec. 676 (b)(D)(5),(6),(9) requires that eligible entities coordinate CSBG funds with other public and private resources and establish linkages between governmental and other social service programs.

**Social Service Organizations:** The CSBG Act, Sec. 676 (b)(3)(D)(6) (D)(5-6) requires CSBG eligible entities to coordinate services between anti-poverty programs and establish linkages

**Child Support Offices:** The CSBG Act, Sec. 678G (b)(1-2) requires that CSBG eligible entities to inform custodial parents in single-parent families about the availability of child support services and refer eligible parents to the Child Support Offices of State and local governments.

**Texas Workforce Commission (TWC) Offices:** The CSBG Act, CSBG Act requirement, CSBG Act, Sec. 676(b)(D)(5), requires that CSBG eligible entities to coordinate the provision of employment and training activities with Workforce Act programs

## Service Locations

#### Instructions

a) Only complete fields highlighted in yellow

b) Complete Tab: Service Locations

1. List the county(ies) of the agency CSBG service area. If the Subrecipient is a one county agency, list each zip code in the Subrecipient service area.
2. Use CARES Engagement Network (<https://cap.engagementnetwork.org/>) and list the number of Households in Poverty, by county or drill down to zip codes for one county agencies. From the referenced website, select "Households in Poverty" from the "Population Profile" data indicators. Utilize the data from the report to complete this attachment. The website is updated regularly and utilizes the most recently available data sets. Subrecipients should download data annually. The referenced website has other data indicators related to education, housing, income, nutrition, and healthcare, which may inform the agency in the development of the CAP.
3. Main Office – choose yes or no from the dropdown list
4. Service Center – choose yes or no from the dropdown list
5. Outreach – choose yes or no from the dropdown list
6. For persons unable to apply for services in person, indicate all options that relate to how they can apply and choose yes or no from the dropdown list



## Certification of Public Hearing for PY 2022 CSBG Budget

1. Subrecipient is auto-populated
2. Enter the Date of Public Hearing
3. Enter the Program Year
4. Obtain Executive Director's signature
5. Insert date to be signed

Once signed, **create a PDF** of the certification page and submit with the CAP and Budget in Wufoo. The Subrecipient may also attach an electronic signature to the MS Excel workbook.

## Community Initiative Status (CIS) Form

Community level initiatives are any project, program, coalition, activity or other group/committed entities that has a clearly defined purpose or goal to create measureable community level change in a specific community.

This form may also be used for community projects not related to the top five needs.

**Initiatives require significant involvement of time and resources into supporting the initiative. This does not include community meetings, community efforts or other activities known as linkages that are not designed to pursue a specific community level outcome.**

### Instructions

- a) Only complete fields highlighted in yellow.
- b) Complete one (1) Attachment CIS1-CIS7 for each of the top five needs that relate ONLY to the Community Level needs. Include on-going Initiatives that have not been closed out from previous year.
- c) ONLY submit a CIS for initiatives that are actively implemented. Contact the Subrecipient trainer if the Subrecipient are unsure.
- d) Complete each of the CIS sections as follows:
  - CIS 1** – Initiative Name: enter the name of the initiative
  - CIS 2** – Initiative Year: Enter the year of the initiative (example: if this is year 2 of a 5 year initiative, enter 2)
  - CIS 3** – Problem Identification: provide a narrative on the scope of the problem that the initiative seeks to address in the community. This may include the need statement from the CNA and/or any data used to complete the assessment. If applicable, provide baseline data and data source.
  - CIS 4** – Goal Agenda: provide a narrative on the initiatives overall goal/agenda. This should be the ultimate outcome we seek to achieve.
  - CIS 5** – Issue/CSBG Community Domains: Choose the domain associated with the need from the dropdown list, the Subrecipient may choose more than one domain.
  - CIS 6** – Ultimate Expected Outcome: choose the outcome from the dropdown list, the Subrecipient may choose more than one outcome.
  - CIS 7** – Identified Community: Choose from the dropdown list. If "Other" is chosen, please explain what other is (example: zip code).
  - CIS 8** – Expected Duration: Provide the range of the initiative in years (example: is the initiative for 8 years, then answer should be 1-8)
  - CIS 9** – Partnership Type: Choose from the dropdown list.

**CIS 10** – Partners: Provide a brief narrative on the key 1-3 partners. Include who the partner is, how they are involved and resources they bring to the initiative.

**CIS 11** – Strategy(ies): Choose the Community Level Strategy associated with the domain from the dropdown box



**CIS 12 – CIS 16** are not part of the plan but will be completed once achievement of results are reported on a quarterly basis

**CIS 12** – Progress on Outcomes/Indicators: Choose from the dropdown box

**CIS 13** – Impact of Outcomes: Narrative to provide additional information on the scope of the impact of these outcomes. (e.g. If an initiative created a health clinic, please describe how many individuals and families are expected to be impacted)

**CIS 14** – Outcomes/Indicators to Report: Provide the percent for achievement of outcomes. Indicators to Report are automatically populated

**CIS 15** – Final Status: Choose from the dropdown box

**CIS 16** – Lessons Learned: Provide a brief narrative of Lessons Learned. Describe what went well, identify barriers to success or any significant findings that occurred during the initiative.

## Strategies (STRs)

### Instructions

- a) Only complete fields highlighted in yellow
- b) Select, if used, from the dropdown box and choose which CIS form it is on

## Community National Performance Indicators (CNPIs)

### Instructions

- c) Only complete fields highlighted in yellow
- d) Use the appropriate CNPI tab for the each domain
- e) Identify Community: Choose from the dropdown box.
- f) Target:
  1. Identify target using previous initiative data results, or from what was planned to be achieved.
  2. DO NOT enter into 1<sup>st</sup>– 4<sup>th</sup> Quarter Results cells. These will be entered during the PY for this CAP for each quarterly report.
- g) Rates of Change:
  1. Baseline: Enter the number
  2. CAP Targets: Enter the target value
  3. Expected Percent Change will auto-populate
  4. Actual Results will be entered for reporting only

## Appendix A – Agency Acronyms

| Acronym    | Agency Name  |
|------------|--|
| ASBDC      | Aspermont Small Business Development Center          |
| AUSTIN     | Austin Public Health                                 |
| BBCAC      | Big Bend Community Action Committee                  |
| BVCAP      | Brazos Valley Community Action Program               |
| CWCCP      | Cameron and Willacy Counties Community Projects      |
| CCA        | Combined Community Action, Inc.                      |
| CACVT      | Community Action Committee of Victoria Texas         |
| CACOST     | Community Action Corporation of South Texas          |
| CAICT      | Community Action Inc. of Central Texas               |
| CASSE      | Community Action Social Services & Education         |
| CCGD       | Community Council of Greater Dallas                  |
| CCSCT      | Community Council of South Central Texas             |
| CSNT       | Community Services of Northeast Texas                |
| CSI        | Community Services, Inc.                             |
| CVCAA      | Concho Valley Community Action Agency                |
| CTO        | Cornerstone Community Action Agency                  |
| EACGC      | Economic Action Committee of the Gulf Coast          |
| EOAC       | Economic Opportunities Advancement Corporation       |
| EPCAP      | El Paso Community Action Program, Project BRAVO      |
| FORTWORTH  | City of Fort Worth, Neighborhood Services Department |
| GETCAP     | Greater East Texas Community Action Program          |
| GCCSA      | Gulf Coast Community Services Association            |
| HIDALGO    | Hidalgo County Community Services Agency             |
| HCCAA      | Hill Country Community Action Association, Inc.      |
| LUBBOCK    | City of Lubbock, Community Development               |
| NUECES     | Nueces County Community Action Agency                |
| PCS        | Panhandle Community Services                         |
| PECOS      | Pecos County Community Action Agency                 |
| RPMC       | Rolling Plains Management Corporation                |
| SANANTONIO | City of San Antonio, Department of Human Services    |
| SPCAA      | South Plains Community Action Association            |
| STDC       | South Texas Development Council                      |
| SETRPC     | South East Texas Regional Planning Commission        |
| TNS        | Texas Neighborhood Services                          |
| TCOG       | Texoma Council of Governments                        |
| TCCA       | Tri-County Community Action Agency                   |
| WEBB       | Webb County Community Action Agency                  |
| WTO        | West Texas Opportunities                             |
| WBCO       | Opportunities for Williamson-Burnet Counties         |