Friday FAQs
Part 1 of 10

Question of the Day for Friday, August 6: How do we conduct a Rapid Needs Assessment to reevaluate the needs of the community?

CAAs are required to utilize the ROMA cycle with CARES funding:

- The community needs assessment is the first phase of the ROMA cycle and is the foundation for planning strategies/services and outcomes.
- Because the pandemic is a constantly changing situation, community needs may be changing.
- To lessen the administrative burden during the pandemic, CAAs can conduct a rapid needs assessment with a focus on identifying needs resulting from the impact of the pandemic.

A rapid Needs Assessment can be achieved through a scaled-back assessment that focuses on *readily available sources* that can provide information about the impact the pandemic is having on communities.

A rapid Needs Assessment does not need to be a formal survey like the standardized survey conducted every 3 years. A rapid assessment should simply gather information readily available to determine the current needs of individuals with low incomes.

Some methods of how to conduct a rapid assessment are:

- Collect information to determine the current needs of individuals with low incomes based on:
  1. What you know the needs are
  2. Feedback from community stakeholders
  3. What you learn from people who call/come into your agency looking for services

- Develop an advisory group, work group or committee. Include individuals from stakeholder sectors to share information on what they know about the needs. Utilize people who are connected to the community.

- Gather information from readily available sources. Some examples are:
  - Agency Program Services Data
  - Census Data
  - Unemployment Data
  - Data on local COVID Impacts
  - Data from 211
  - Data from state health department/government sources
  - Advisory or Feedback work groups/committees
  - Stakeholder meetings or polling of pandemic related needs
  - Additional Resources coming into the community COVID-related relief efforts
  - Word-of-mouth information on the current needs of people with low incomes

Documenting a rapid needs assessment - It is important to document your knowledge of the *current* needs in your community related to the COVID-19 pandemic:

- Documentation must be maintained for each re-assessment. You do not need to complete a new formal needs assessment. A brief update to your last needs assessment will suffice (meeting notes/minutes).

- The documentation can be informal but must reflect the agency's assessment of its service area, changing needs and new planned strategies. You simply need to document in some way that you are aware of your needs (meeting notes/minutes).

- Frequency: CAAs are required to periodically re-assess the needs of the communities they serve in an on-going manner throughout the public health emergency. ODOC suggests re-assessing needs on a quarterly basis, and/or when significant events occur such as a local increase in COVID cases, to determine if new strategies are needed. Because the pandemic is a constantly changing situation, community needs may also be changing.

Reminders:

To be allowable, all strategies must:

✓ Meet highest priority needs identified in the local needs assessment

✓ Be used to help prevent, prepare for or respond to the coronavirus

CSBG CARES Allowable Strategies

The rapid needs assessment should include:

1. Ranked Needs: When conducting the on-going needs assessment for the pandemic, it is important to rank the identified needs and address the highest-ranking needs first. *The intent is for the greatest needs to be addressed to achieve the greatest impact*

2. Identify Barriers: It is important to identify barriers when addressing the greatest needs and use that information to move forward.

3. Community Resources: The Needs Assessment should also identify other community resources available and include gaps in available resources.

4. Referrals for Unmet Needs: If the greatest needs are not something your agency can provide, your agency should consider what can be done to partner or create linkages within the community to address those unmet needs with referrals to other resources.

Community Action Plan (CAP):

- Update/revise your Community Action Plan (CAP) strategies and outcomes when new needs have been identified and new strategies are implemented.

- If/when the Community Action Plan is revised, upload it into OK Grants.

Resources/Tools:

- FINAL_COVID-Community-Assessment-Tools-Template-and-Guide_4.14.20.pdf

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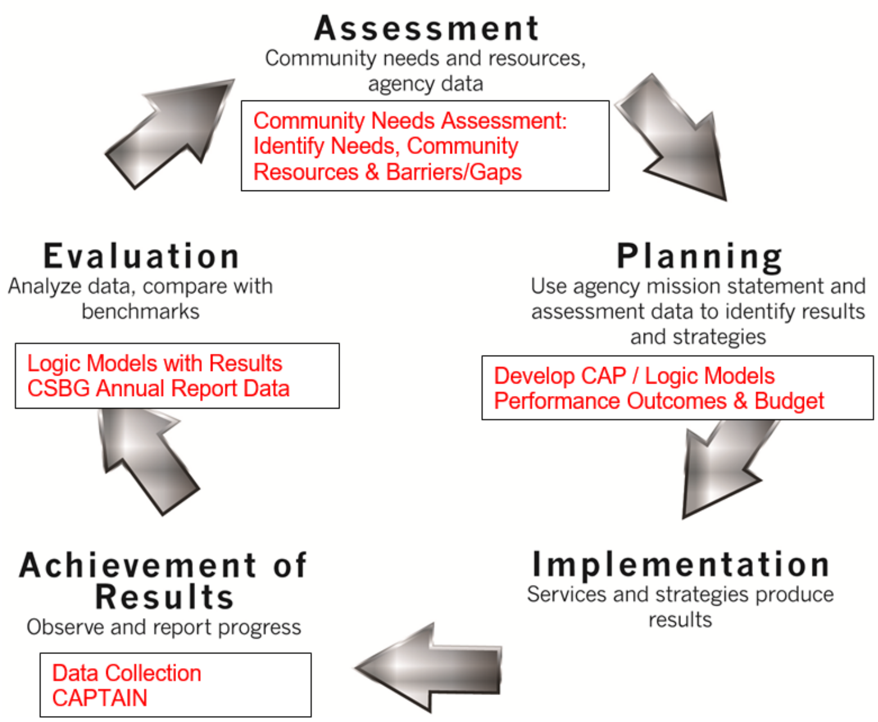
Lean into ROMA to Evaluate (compare results to needs):



The Logic Model is an Effective Planning Tool

ROMA Logic Model – *Instruction / Tips*

Organization: ______________________ **Program:** ______________________ ☐ Family ☐ Agency ☐Community

Need	Service or Activity	Outcome	Outcome/Indicator	Results*	Measurement Tool(s)	Data Source, Data Collection Procedures, Personnel *(What, Where, How, Who)*	Frequency of Data Collection and Reporting:
Needs Statement: Describe the Problem, Need, Situation identified in the CAA's Community Needs Assessment. *(brief but more than 1 or 2 word)* Identify level of need: Whose need is it? That will tell you if it is a family, agency or community level need. The general statement of need that provides the rationale for the service, activity, or intervention.	The strategy, service or intervention provided in response to the problem, need, or situation. Always indicate : 1. the number of people or number of services offered and 2. a timeframe.	A positive benefit, behavior, or a change in condition, functioning, or problem accruing to individuals, families, and communities resulting from a service or activity. This is an outcome statement. The level of outcome should match the level of the need (family, agency or community)	Outcome/Indicators are numerical measures characterizing the results or outcome of a program activity, service, or intervention and are used to measure performance. Indicators are typically represented with both the # and the %. Column 4 is used to project the expected outcome. Include: 1. Number of clients to receive service 2. Number of clients receiving the service that are projected to obtain the outcome? *(note, except for rare exceptions, this number should always be less than the number of clients receiving the services)* 3. A time frame that that agency projects that clients will achieve the outcome This represents the specific outcome you intend to observe.	The same outcome/indicators used in Column 4 but updated to reflect the **actual results**. The success rate should be a percentage. The percentage should be calculated from the same numbers in the outcome indicator (column 4) This represents the specific outcome you observed	The tool, form, or other medium where raw data is collected, e.g. survey instrument, attendance log, case record, pre and post test, waiting list, etc. This begins to define your ***Accountability***.	1. Place where data is maintained, e.g. CAPTAIN database, individual case records, other 2. location, e.g. on-site, subcontractor, other. 3. Describes method(s) for retrieving data from data source(s), e.g. data from case records is retrieved manually, data is maintained in an automated database, and 4. personnel assigned to the task. This further defines the way you will assure ***Accountability***.	1. how often data is required to be collected, 2. how often data is reported. This identifies the reporting function of the ***Accountability*** process.

Mission: ______________________ Proxy Outcome: ______________________

*Actual results are only entered into this column AFTER services are provided; however, you can use this column to record performance targets if desired, and later replace them with actual results.