

Manhattan Community Board 11
Human Service Organization Questionnaire
(rev. June 2022)

Community Board 11 (CB11) wishes to establish and maintain healthy working relationships with the organizations serving our community. We ask that you complete the following survey to help us get to know your organization and its work better.

Instructions

1. We understand that organizations are formed and structured differently. All questions require an answer. Please do your best to answer each question as best as possible and mark “Not Applicable or N/A” where questions don’t apply to your organizational structure.
2. We understand that CB11 is home to many. For the purposes of this survey, we will use the term “East Harlem” to include East Harlem, El Barrio, Spanish Harlem, Randall’s Island, and Ward’s Island
3. You can complete the attached form and return it to _____ or you can complete the google form linked in this email to complete the survey.

| ORGANIZATION CONTACT INFORMATION (CB 11 PURPOSES) | SUGGESTED CHANGES OR UPDATES |
|---|------------------------------|
| <ol style="list-style-type: none"> 1. Full name <ol style="list-style-type: none"> a. (Title, email, phone) 2. Organization Name 3. Address(s) in East Harlem (please also list any other locations in NYC) 4. Website 5. Presenter(s) & Point of Contact (name, title, email, phone) [instruction: please identify the point of contact for CB11 going forward] 6. Would you or a member of your organization be willing to visit the Human Services committee meeting to give regular updates about your work in East Harlem? | |

| ORGANIZATIONAL INFORMATION | SUGGESTED CHANGES OR UPDATES |
|--|------------------------------|
| <ol style="list-style-type: none"> 1. Organization status (nonprofit, for profit partnership, for profit corporation, local government entity, State government entity, Federal government entity, etc.) 2. How long has your organization been operating in East Harlem? 3. Please provide a copy of your most recent annual report 4. Who has authorized your location in East Harlem (e.g., DOH, DOMH, OASAS, City Council, NY Senate, ...etc.) | |

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| <p>5. Does your organization have a community advisory board? If so,</p> <ul style="list-style-type: none"> a. When does it meet? b. What is the recruitment process for community advisory board members? c. If not, do you believe that your organization would be more effective by establishing an advisory board? (Please take this opportunity to share any capacity limits that your organization may have in this regard.) | |
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| PROGRAMS, SERVICES, INITIATIVES | SUGGESTED CHANGES OR UPDATES |
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| <ol style="list-style-type: none"> 1. What programs/services does your organization provide? (Why is this service or program important for East Harlem?) 2. Please explain your organization's current service capacity (# of beds, etc.) 3. What is the current estimated number/percentage of East Harlem residents/families served by your organization? 4. Does your organization provide services at locations outside of East Harlem? 5. What is the current number/percentage of East Harlem residents currently employed by your organization? 6. What is the percent of services/treatment modality provided to East Harlem resident vs clientele who do not reside in East Harlem? 7. How does your organization partner with other organizations, local or otherwise, to provide the best quality of services and resources for East Harlem residents? 8. Please share your organization's assessments regarding issues impacting the neighborhood of East Harlem and its residents (written or observational assessments). 9. Please provide copies of any complaints received by your organization regarding your East Harlem location: (e.g., issues uncovered by internal or external audit, or complaints filed to you and other government agencies.) in the past two years. | |

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| 10. When is your program next up for review, audit, or reauthorization? | |
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| REQUEST FOR ADDITIONAL INFORMATION | SUGGESTED CHANGES OR UPDATES |
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| <ol style="list-style-type: none"> 1. Please detail what if any client safety and public safety measures your organization has put in place to assist its clients and the surrounding community. 2. What, if any, impact has your organization endured because of the COVID-19 pandemic as it relates to service delivery, staffing, client participation? 3. CB11 supports our local businesses and organizations. Please let us know about any issues or complaints that your organization believes CB11 should be aware of. | |