FY 2012 Independent Living
Monitoring and Technical Assistance Guide

State Independent Living Services Program
Older Individuals who are Blind Program

U.S. Department of Education
Office of Special Education and
Rehabilitative Services
Rehabilitation Services Administration
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I. Scope of the Review

A. General

RSA has developed this Independent Living Monitoring and Technical Assistance Guide (IL/MTAG) through which it will assess the performance of the Designated State Agency (DSA) and/or Designated State Unit(s) (DSU) in the administration of the two formula grant programs authorized under Title VII of the Rehabilitation Act of 1973, as amended (Rehabilitation Act), including the state independent living services program (SILS/IL Part B) and the IL services for older individuals who are blind (OIB) program, and their compliance with pertinent federal programmatic and fiscal requirements. In addition, in those states in which state funding equals or exceeds federal funding and the state submits and receives approval to award grants under section 723 of the Rehabilitation Act, (currently Minnesota and Massachusetts), the review will also address the statutory and regulatory requirements, as well as performance related to the DSA and/or DSU’s administration of the centers for independent living (CIL) program authorized by Title VII, Chapter 1, Part C, of the Rehabilitation Act.

- SILS program, authorized by Title VII, Chapter 1, Part B (IL Part B funds);
- CIL program (in 723 states only), authorized by Title VII, Chapter 1, Part C (IL Part C funds); and
- OIB program, authorized by Chapter 2 of Title VII (Chapter 2 funds).

1. SILS and CIL (in 723 states) Programs

The SILS and CIL programs are authorized under the Rehabilitation Act to promote a philosophy of independent living (IL), including a philosophy of consumer control, peer support, self-help, self-determination, equal access, and individual and system advocacy, to maximize the leadership, empowerment, independence, and productivity of individuals with significant disabilities, and to promote and maximize the integration and full inclusion of individuals with significant disabilities into the mainstream of American society by providing financial assistance to states—

- for providing, expanding, and improving the provision of IL services;
- To develop and support statewide networks of centers for independent living (CILs); and
- for improving working relationships among--
  o SILS programs;
  o CILs;
  o Statewide Independent Living Councils (SILCs) established under section 705;
  o State vocational rehabilitation (VR) programs receiving assistance under Title I and under Part C of title VI;
  o Client Assistance Programs receiving assistance under section 112;
  o programs funded under other titles of the Rehabilitation Act;
  o programs funded under other federal laws; and
  o programs funded through non-federal sources.
2. OIB Program

The OIB program provides independent living services to individuals age fifty-five or older whose severe visual impairment makes competitive employment extremely difficult to obtain but for whom IL goals are feasible. This program supports projects that:

- provide any of the IL services to older individuals who are blind that are described in Sec. 34 CFR 367.3(b), including the four IL core services;
- conduct activities that will improve or expand services for these individuals; and
- conduct activities to help improve public understanding of the problems of these individuals.

B. Focus Areas

To align its monitoring activities with the priorities established by the Rehabilitation Services Administration (RSA) Commissioner, the State Monitoring and Program Improvement Division (SMPID) will include in its monitoring of the SILS and the OIB programs three focus areas to be used when reviewing the performance or compliance of each state. These focus areas cover:

- organizational structure;
- fiscal integrity; and
- priority IL and OIB services and populations (including youth transition, as appropriate).

The focus areas will reflect the appropriate distinctions between the SILS and OIB programs as well as the specific requirements that are applicable to the CIL program (in the 723 states.)

The nature and scope, along with the activities to be conducted under each focus area, are contained in Sections III - V of this IL/MTAG. Through the review activities relating to each of the focus areas, SMPID may identify:

- emerging practices that can be shared with other states;
- observations and recommendations for program improvement;
- compliance findings and corrective actions to resolve the findings; and
- technical assistance and continuing education needs for improved performance.

In addition to these national priorities, the review team will assess the state’s progress in implementing SILS, CIL (in 723 states only) and OIB program corrective actions and recommendations from previous monitoring reports.

C. Use of Data

The review team will analyze the performance of the SILS and OIB programs using a set of uniform programmatic and fiscal data covering a five-year period and ending with the most recently completed federal fiscal year. The programmatic data address the numbers and trends related to IL/OIB consumers, services and outcomes. Fiscal data to be analyzed include carry-
over, federal funds expenditures and required match versus actual match. Appendix C of this IL/MTAG contains examples of the uniform programmatic and fiscal data tables (see Appendix C, tables 1 through 8).

The review team will share these data with the DSU(s) prior to the on-site visit and solicit, throughout the review process, information from agency officials and personnel explaining possible trends demonstrated by the data. Tables will reflect all services provided. The review team will identify priority services and populations for each program and analyze trends related to those priorities as such. When applicable, an analysis of these programmatic and fiscal data, along with the explanation of trends, will be included in the monitoring report. The review team will not develop observations and recommendations for program improvement as a result of this analysis unless warranted by significant trends and agreed to by the DSU.

Additionally, the review team will use programmatic data in the review of the focus areas referenced above, particularly with respect to the demographics of individuals served and the provision of IL priority services and, where applicable, OIB services. The specific data to be analyzed in connection with each of these areas is described in more detail in Section V and Appendix C) of this IL/MTAG.

II. Overview of the Review Process

A. Selection of States for Review

During federal FY 2012, RSA will use this IL/MTAG to conduct pilot reviews of state IL formula grant programs in one to two states. Beginning in federal FY 2013, SMPID will conduct SILS, CIL (in 723 states) and OIB program reviews annually in one to two states, taking into account, to the extent possible, a balanced selection of states representing DSUs serving individuals who are blind and visually impaired, individuals with all other disabilities, and individuals with all types of disabilities (blind, general and combined agencies, respectively) from across the geographic regions of the United States. In addition, SMPID may take into account states with various types of SILC organizational structures (nonprofits, state board or commission, or other) and DSU service delivery systems (direct or through grants and/or contracts). These states may or may not be selected from among those in which monitoring of the vocational rehabilitation (VR) and supported employment (SE) programs will occur. In addition, the review of the state IL programs will be conducted separately from the review of the VR and SE programs. Circumstances may also require SMPID to conduct a review of a particular state if, for example, issues requiring immediate review or technical assistance arise in a given year.

In states with two DSUs, one for individuals who are blind and visually impaired (blind agency) and another for individuals with all other disabilities (general agency), both DSUs will be reviewed in the same year. In such instances, RSA will issue two separate reports, one for the SILS/CIL program administered by the general and blind agency jointly, and another for the OIB program administered by the blind agency only. In states with a single DSU, that is, a combined agency, RSA will issue a single report.
B. Duration of the Monitoring Process

The monitoring process will begin and conclude within each fiscal year of the monitoring cycle, but is not intended to last the length of the entire fiscal year. The review team and DSU(s) will discuss and agree when to begin the monitoring process at a time in the year that is most appropriate and mutually convenient. The process includes all preparation and planning, the conduct of an on-site visit, and the development of draft and final monitoring reports.

C. Stages of the Monitoring Process

1. Planning and Preparation

Each state selected for an IL monitoring review will be contacted, when appropriate, by their review team to begin planning monitoring activities. At this time, the review team will:

- introduce the RSA team member who will lead the review and the other members of the team who will participate in the on-site review;
- select, jointly with the DSU(s), the dates for the on-site visits;
- identify IL stakeholders who may participate in the review, including DSU staff, SILC members, CIL directors, and other SILS/OIB program service providers;
- contact representatives of the Independent Living Research Utilization (ILRU) and Technical Assistance and Continuing Education (TACE) centers, as appropriate, to inform them of the review dates.

In preparation for the on-site visits, the review team will conduct a limited number of teleconferences and/or video conferences, as determined by the review team and DSU(s), to:

- discuss the monitoring process and the substance of the focus areas set forth in this IL/MTAG;
- describe significant trends in programmatic and fiscal performance related to RSA’s review focus areas and solicit input from the DSU(s) and the SILC;
- gather information from the DSU(s) and other IL and OIB stakeholders pertinent to the focus areas;
- obtain input regarding the IL stakeholders’ technical assistance and continuing education needs; and
- develop the on-site review agenda.

Prior to the on-site visits, the team will review documents obtained from the DSU(s) related to each of the focus areas. These may include DSU and SILC program and fiscal policies and procedures, organizational charts, IL and OIB contracts and requests for proposals (RFPs), legal documents establishing the SILC, and other documents. The review team will also analyze data related to consumer services and outcomes for the SILS and OIB priorities established by the state, as well as fiscal data, including cost allocation, state match, and draw-downs. The specific materials to be reviewed are listed in Appendix A.
2. **On-site Activities**

The review team will schedule the on-site visits with each DSU, accommodating as much as possible the schedules of agency management and personnel. The review team, consisting of one or two representatives of the **SMPID IL Unit** and one from its **Fiscal Unit**, will engage in a variety of on-site activities, including, but not limited to:

- brief entrance meeting to introduce review team members, DSA/DSU staff and SILC representatives and to review the on-site agenda;
- discussions of about programmatic and fiscal information and performance data;
- review of prior CAPs and recommendations adopted by the DSU(s), if applicable, to ascertain the state’s progress and identify any continuing technical assistance needs;
- identification of emerging practices;
- various activities related to the three focus areas covered by this IL/MTAG; and
- an optional, brief wrap-up meeting to discuss the next steps in the process, schedule the next steps (see below) and solicit DSA/DSU and SILC feedback concerning the conduct of the review.

On-site activities may include separate meetings or visits with the SILC, CILs, other IL/OIB services providers, the **Client Assistance Program**, and collaborating organizations identified in the relevant state documents such as the **State Plan for Independent Living (SPIL)**. These meetings and visits will generally occur within the surrounding geographic area of the state capitol, or the city in which the DSU’s primary administrative offices are located.

The review team or the DSU director may also invite DSA/DSU management and staff, the chairperson of the SILC, and ILRU and TACE center representatives to participate in both the entrance and wrap-up meeting. (It should be noted that the wrap-up meeting is optional, and that DSA, DSU, ILRU or TACE staff are not required to attend, but may be invited as deemed appropriate by the DSU directors.) To make the efficient use of available funds, ILRU/TACE participation through teleconference or video conference should be explored wherever possible. TACE and ILRU representatives may also participate in other on-site monitoring sessions as observers upon the DSU’s request.

In rare cases, an on-site review may not be possible, in which case the team would conduct the review consistent with this IL/MTAG through an expanded use of teleconferencing and document reviews. The review team would discuss with DSU(s) how best to maximize resources under these circumstances to conduct the review and provide technical assistance.

3. **Follow-up Activities**

Subsequent to the on-site visits, the review team may request additional documentation to supplement information obtained prior to or during the visits. Additional teleconferences may also be necessary to clarify any outstanding questions or concerns or to gather further detail about a particular issue.
Within ten to fifteen business days following the on-site visits, the review team will conduct a follow-up teleconference or video conference with the DSU(s), ILRU/ TACE center representatives, and other IL/OIB stakeholders to discuss preliminary program and fiscal findings and recommendations. Some findings may require review by the Department of Education’s Office of General Counsel and hence may not be fully developed or available to share at this time. Emerging practices, technical assistance needs and performance trends identified during the on-site visit may also be discussed during this teleconference.

D. Draft Report

The review team will develop a draft report that contains:

- concise analysis of the SILS, CIL (if applicable) and OIB programmatic and fiscal data;
- brief description of any emerging practices identified during the review;
- review of the progress achieved toward the implementation of any outstanding corrective actions and/or recommendations from prior monitoring reviews, and identification of any ongoing technical assistance needs;
- observations and recommendations to improve performance pertaining to each of the focus areas;
- program and fiscal compliance findings resulting from the latest review and corrective actions necessary to resolve the findings; and
- a description of the technical assistance provided during the review and any additional technical assistance and continuing education needs.

SMPID expects the review team to complete and provide the draft monitoring report to the DSU(s) within 45 calendar days from the conclusion of the on-site visits. The DSU(s) will then have 21 calendar days to submit written responses to the draft reports directly to the review team. DSU(s) may request an extension by submitting a written justification to the review team, which then will notify the DSU(s) if, and for how long, the requests are approved. The DSU responses should include:

- the identification of factual errors;
- responses to any programmatic or fiscal observations, recommendations, compliance findings and corrective actions;
- supporting documentation or data as needed to substantiate DSU responses; and
- requests for technical assistance to assist the agency to carry out the recommendations and corrective actions identified in the draft reports.

The review team may engage in discussions with DSU management and staff to assist in the development of the draft reports response. In addition, the review team may conduct teleconferences with the DSU(s) to clarify information included in the responses and request additional documentation to support statements made in the responses.

The review team also will provide a copy of the draft report to the SILC chair. Any SILC comments to the draft report must be provided through the DSU(s), as the entity(ies) being reviewed. The SILC is not to further distribute the draft report to persons outside the council.
E. Final Monitoring Report

Based on the information provided by the DSU(s) in response to the draft report, the review team will develop the final monitoring reports. The review team may also modify or eliminate an observation, recommendation, compliance finding or corrective action after consultation with SMPID management and the Office of General Counsel as warranted.

In addition to the information included in the draft report, the final report will contain DSU responses to the drafts and the requests for technical assistance that will enable the agencies to carry out the recommendations and corrective actions. Supporting documentation or exhibits submitted by the DSU(s) in support of its draft report responses will be included in the final report at RSA’s discretion. The review team may request additional assurances or documentation from the DSU(s) in connection with programmatic or fiscal findings. The final reports will indicate when such material is required.

Once completed, the final report will be provided to the DSU(s) and the SILC and published on the RSA web site. The review team will notify the DSU(s), SILC and other stakeholders involved in the review process of the location of the reports on the website.

F. Corrective Action Plans

Within 45 calendar days of the issuance of the final reports, the DSU(s), jointly with the review team, will develop the corrective action plan (CAP) to address any compliance findings identified through the monitoring process. The content of the CAPs will include:

- the programmatic or fiscal findings as stated in the final report;
- the corrective actions required to resolve the findings contained in the final reports;
- the specific steps the agencies will take to complete the corrective actions;
- timelines within which the agencies expect to complete each step of the corrective actions; and
- target dates for resolution of the findings.

Once the CAP is approved and implemented, the DSU(s) will provide quarterly progress reports on the implementation of the CAPs. DSU(s) should plan to submit the first CAP progress report no later than 30 calendar days after the end of the first full quarter following the approval of the CAP, and then 30 calendar days after each subsequent quarter until all corrective actions are completed and the CAP is retired.

G. Technical Assistance Plans

Within 60 calendar days following the publication of the final monitoring reports, the review teams will facilitate teleconferences or video conferences with the DSU(s), SILC and ILRU/TACE center representatives to develop technical assistance plans (TAPs) addressing the technical assistance needs identified by the DSU(s). During the teleconferences, participants will discuss the details of the identified technical assistance needs, identify and assign specific
responsibilities for implementing technical assistance and establish initial timeframes for the provision of the assistance. The review team will distribute draft TAPs to the participants for review, making necessary revisions based on their input prior to the approval of the plans.

The review team will convene teleconferences with DSU, SILC and ILRU/TACE center representatives, at least semi-annually, to review progress on the TAPs and discuss any further technical assistance needs that may have emerged.

H. Involvement of Consultants in the Review Process

It is within the discretion of the DSU(s) to involve contracted consultants not associated with ILRU/ TACE centers in any or all stages of the review process, including in the development of CAPs and TAPs. However, the review team will direct all communication to the DSU and other IL/ OIB stakeholders rather than to the consultants. It is the responsibility of the DSU(s) to share information with the consultants as they deem necessary and consistent with their involvement.

I. Evaluation of the Review Process

All participants in the review process, including DSU management and personnel, SILC members, CILs, ILRU/ TACE centers and other stakeholders, will have an opportunity to provide comments and suggestions for improvement of the monitoring process following the conclusion of the review activities and issuance of the final reports. All participants may provide written comment at any point during the process. SMPID will obtain additional input through teleconferences scheduled with the DSUs during the year.

III. Focus Area - Organizational Structure

A. Nature and Scope

This focus area addresses the following:

- DSU exercise of its statutory/regulatory duties, including the administration of SILS, CIL (in the 723 states), OIB; provision of administrative support services; delivery of IL and OIB services directly and/or indirectly through grants or contracts;
- SILC legal status, placement and composition;
- SILC autonomy and exercise of statutory duties, including SPIL development and monitoring; resource plan development and oversight; coordination with the State Rehabilitation Council (SRC) and other councils and organizations; conduct of regular meetings open to the public and with sufficient notice; and
- Working relationships among the DSU(s), SILC, IL, and OIB service providers and other stakeholders.
B. Review of Progress from Recommendations and Compliance Findings Identified during Prior Monitoring Cycle

**Resources:** the most recently published Section 107 Monitoring Report and/or Corrective Action Plans

The review team will follow up on observations, recommendations, and/or compliance findings documented in the last monitoring review cycle to determine whether additional technical assistance is needed. In addition to following up on findings and recommendations, the review team will identify if changes have occurred subsequent to the prior review related to the DSU’s fiscal management.

- Describe observations, recommendations and/or compliance findings related to organizational structure made in previous Section 107 Monitoring Reports which have not been addressed, including current status and possible reasons they have not been addressed where applicable.

- Compare information from the IL and OIB systems sections of most recent 107 report with the organizational structure currently in place in the DSA/DSU.

- Describe technical assistance the agency might need in order to resolve outstanding corrective actions related to the SILS, CIL in 723 states, and OIB organizational structures.

C. Organizational Structure: SILS and CIL (in 723 States) Programs

C1. DSU exercise of its statutory/regulatory duties

1. DSU duty to establish a SILC  *[Section 705(a) of the Act]*

**Resources:** Legal document establishing the SILC, if available

- Has the state officially established the SILC (e.g., by law, executive order or administrative procedures, other)?
  
  ____YES ____NO

- Is the legal authority establishing the SILC consistent with the SILC duties, composition and other requirements outlined in section 705 of the Act? *(34 CFR 364.21(a)(1))*
  
  ____YES ____NO

2. DSU non-delegable duty to receive, account for and disburse IL Part B funds and state matching funds (and IL Part C funds in 723 States  *[Section 704(c)(1) of the Act]*

**Resources:** DSU contracts and RFP procedures; DSU IL program procedures; SILC procedures (e.g., bylaws); CIL monitoring tools
• Does the DSU(s) disburse the IL Part B funds to the SILC, the IL service providers and entities conducting other SPIL activities?
  ____YES  ____NO

• Does the DSU(s) manage the RFP, competition and selection processes for funding the IL service providers and other SPIL activities?
  ____YES  ____NO

• Is the SILC’s role in these processes consistent with its mandated duties, without exceeding its statutory authority?
  ____YES  ____NO

• Does the DSU(s) exercise its fiscal/program monitoring and reporting responsibilities in 34 CFR 364.20(i) and 34 CFR 364.34. (See Fiscal Integrity Focus Area IV below)
  ____YES  ____NO

• Does the DSU(s) ensure that the SILC, IL service providers and other recipients use IL Part B and state matching funds only for allowable purposes in Section 713 and 705(c) of the Act?
  ____YES  ____NO

For Section 723 States only

• Are DSU procedures for determining CILs compliance with section 725 standards and assurances consistent with 34 CFR 366.38, and do they include annual on-site compliance reviews of at least fifteen percent of the CILs receiving IL part C funds?
  ____YES  ____NO

3. DSU duty to provide administrative support services for the SILS program and CIL program (in 723 States) Section 704(c)(2) of the Act

Resources: IL service provider contracts; IL program policies and procedures; organizational chart; IL program liaison’s job description

• Does the DSU(s) provide administrative support services to the SILS program and CIL program (in 723 States)?
  ____YES  ____NO

• Describe the support services provided (IL liaison staff, SILC support staff, office space, equipment and supplies, fiscal accounting services, training and technical assistance, other).

• Where is the SILS program placed within the DSA/DSU organizational structure?
• Are the support services and organizational structure appropriate or sufficient for the needs of the program?

___YES ___NO

4. DSU Duty to Provide IL Services Section 704(e) of the Act and 34 CFR 364.43(b)

Resources: DSU contracts and RFP procedures; DSU IL program procedures; SILC procedures (e.g., bylaws); CIL monitoring tools; current SPIL

• Through what method (directly and/or through grants or contracts) and through which funding sources (federal, state, other) does the DSU(s) provide IL services in the state?

• Is the DSU IL service provision method and funding source(s) accurately described in the SPIL?

___YES ___NO

For Section 723 States Only

• Is the state’s order of priorities for allocating funds among CILs within a state consistent with 34 CFR 366.34?

___YES ___NO

• If the state has adopted an order of priority other than that outlined in 34 CFR 366.22, was it jointly agreed upon by the DSU director and the SILC chair?

___YES ___NO

• If applicable, are the state’s policies, practices and procedures governing the awarding of grants to new CILs consistent with 34 CFR 366.37?

___YES ___NO

C2. SILC Appointment, Membership and Term Limit

Resources: SILC membership roster; SILC policies and procedures; SILC bylaws

1. Appointments

• Are all SILC members (including ex-officio SILC members) appointed by the governor, or the appropriate entity within the state responsible for making such appointments, in accordance with state law? (34 CFR 364.21(b)(1))

___YES ___NO
2. Composition

- Does the SILC include at least one director of a center chosen by the directors of CILs within the state; and, as ex-officio, nonvoting members, a representative from the DSU(s) and representatives from other State agencies that provide services to individuals with disabilities? (Section 705(b)(2) of the Act)
  ____YES ____NO

- Are the majority of all members (voting and ex-officio members combined) individuals with disabilities not employed by any state agency or center? (Section 705(b)(4)(A)(iv) of the Act)
  ____YES ____NO

- Are the majority of the voting members individuals with disabilities not employed by any state agency or center? (Section 705(b)(4)(B) of the Act)
  ____YES ____NO

- Do SILC members provide statewide representation, represent a broad range of individuals with disabilities and are they knowledgeable about CILs and IL services? (Section 705(b)(4)(A) of the Act)
  ____YES ____NO

3. Term limits

- Do all SILC members (voting or ex-officio) serve for no more than two consecutive full three-year terms? (Section 705(b)(6))
  ____YES ____NO

C3. SILC Independence

1. SILC placement and legal status

**Resources:** Executive order/legislation (if applicable); DSU organizational chart; SILC bylaws; IL program procedures

- Describe the placement of the SILC and its organizational construct, (e.g., nonprofit, independent state board or commission, or other), with respect to the federal requirement that the SILC is not established within a state agency, including the DSA or DSU(s), and that it is independent of all other state agencies. (34 CFR 364.21(a)(2))

2. SILC Resource Plan

**Resources:** SILC resource plan; approved budget; board minutes; policies and procedures (including SILC bylaws); and DSU contract
• Does the SILC prepare, in conjunction with the DSU, a resource plan for the provision of resources, including staff and personnel, necessary to carry out its statutory duties? (34 CFR 364.21(i)(1))
  ____YES ____NO

• Is it clear that there are no explicit or implicit conditions or requirements that may compromise the independence of the SILC? (34 CFR 364.21(i)(3))
  ____YES ____NO

• Is the SILC exercising its responsibility for the proper expenditure of funds and use of the SILC plan resources? (34 CFR 364.21(i)(4))
  ____YES ____NO
  o Does the SILC have the necessary fiscal controls, policies, procedures and practices, e.g., executive committee approval of financial statements and expenditures?
    ____YES ____NO
  o Does the SILC have autonomy in its resource plan expenditures in accordance with federal regulations and applicable state regulations?
    ____YES ____NO
  o Does the SILC receive timely DSA/DSU reimbursement of its resource plan expenditures? (See Fiscal Integrity focus area)
    ____YES ____NO

• Does the SILC expend federal funds only for allowable and authorized purposes consistent with the SILC duties in Section 705(c) of the Act?
  ____YES ____NO

3. SILC Staff

Resources: SILC policies and procedures (including bylaws); resource plan/approved budget; board minutes; contract; DSU IL program policies; job descriptions; and performance evaluations

• Does the SILC supervise and evaluate its own and/or DSU-provided staff and other personnel as necessary to carry out its statutory duties, consistent with state law? (34 CFR 364.21(j)(1))
  ____YES ____NO
  o How does the SILC exercise this responsibility (job descriptions, annual performance evaluations, other)?
• Are there safeguards to ensure that DSU-provided staff and other administrative support personnel are not assigned any state agency duties that would create a potential conflict of interest while assisting the SILC in carrying out its duties? 34 CFR 364.21(j)(2)

___YES___NO

○ What do the safeguards consist of, (e.g., written policies and procedures, other)?

C4. SILC Duties

Resources: SILC policies and procedures (including bylaws); SILC meeting minutes; contract language; DSU IL policies and procedures

1. Joint development and signing of the SPIL in conjunction with the DSU(s) Section 705(c)(1) of the Act

• Does the SILC jointly, with the DSU(s), develop the SPIL, including goals and objectives, priority IL services and populations and design for the statewide network of CILs?

___YES___NO

• Do the DSU(s) and SILC have written procedures for conducting SPIL public hearings that meet the requirements of 34 CFR 364.20(g) and 34 CFR 364.20(h)?

___YES___NO

2. SPIL monitoring, evaluation and implementation Section 705(c)(2) of the Act

• Is the SILC implementing the evaluation plan outlined in section 7 of the SPIL, including the method established for evaluating consumer satisfaction with IL services in the state?

___YES___NO

3. Coordination among the SRC, other councils and organizations Section 705(c)(3) of the Act

• Does the SILC conduct coordination activities with the SRC, other councils and organizations addressing the needs of disability populations and issues?

___YES___NO

4. Regularly scheduled meetings that are open to the public and with sufficient advance notice Section 705(c)(4) of the Act

• Does the SILC ensure that its regularly scheduled meetings are open to the public and with sufficient advance notice, including reasonable accommodations?

___YES___NO
• How does the SILC ensure compliance with this requirement (written procedures, public notices, SILC website, other)?

5. Record-keeping, access and reporting  Section 705(c)(5) of the Act

• Does the SILC fulfill its requirement to keep records, afford access and submit reports such as the 704 Report?  
  ____YES   ____NO

D. Organizational Structure: OIB Program

D1. Administration of the OIB Program

Resources: DSA/DSU organizational chart; OIB staff job descriptions, DSA/DSU contracts and RFP procedures; DSA/DSU OIB policies and program procedures

• Is the OIB program administered by the entity designated by the state as the sole state agency (DSA/DSU) authorized to provide rehabilitation services to individuals who are blind?  
  34 CFR 367.11(g)
  ____YES   ____NO

• Is the OIB program administered in a manner that ensures its programmatic integrity with respect to other state IL or VR programs?  
  ____YES   ____NO
  o Where is the OIB program placed within the DSA/DSU organizational structure?
  o What administrative support/staff resources been assigned to the OIB program?

• Are the organizational structure and administrative support appropriate or sufficient for the needs of the program?  
  ____YES   ____NO

• Does the DSU/DSA ensure that grant funds are expended only for the purposes of the OIB program?  
  34 CFR 367.11(a)  
  ____YES   ____NO

D2. OIB Services Provision

Resources: OIB policies and procedures; list of OIB service providers; 7-OB report; OIB contracts and RFP procedures; OIB purchasing policies and procedures

• Does the DSU/DSA provide OIB services that contribute to the maintenance of, or the increased independence of, older individuals who are blind?  
  34 CFR 367.11(e)(1)  
  ____YES   ____NO
• Does the DSA/DSU engage in 34 CFR 367.11(e)(2):
  o capacity-building activities, including collaboration with other agencies and organizations;
  o activities to promote community awareness, involvement, and assistance; and
  o outreach efforts.

  ____YES  ____NO

• Does the DSU/DSU provide these services and activities directly or indirectly through grants or contracts?

  ____YES  ____NO

D3. Oversight/Quality Assurance and Reporting

Resources: OIB program policies and procedures; OIB contracts and RFP procedures; OIB purchasing policies and procedures; OIB grants/contract management and oversight procedures; OIB data collection and reporting methods/databases; Appendix C Table 8 of this IL/MTAG

• Does the DSU have adequate oversight/monitoring policies and procedures related to the use of Chapter 2 and state matching funds? (See the Fiscal Integrity focus area)

  ____YES  ____NO

• Does the DSU collect accurate data necessary to prepare and submit the annual performance report (7-OB Report) meeting the requirements of 34 CFR 367.11(d), including employment data in 34 CFR 367.11(d)(5)? Section 752(i)(2)(a) of the Act; and 34 CFR 367.11(d)

  ____YES  ____NO

D4. Other

• Does the DSU seek to incorporate new methods or approaches for OIB service provision into the SPIL, as appropriate? 34 CFR 364.28

  ____YES  ____NO
IV. Focus Area - Fiscal Integrity – SILS, CIL (in 723 states) and OIB Programs

A. Nature and Scope

This focus area addresses the following:

- strategic planning and budgeting;
- policies and procedures;
- internal controls;
- DSU management of funding streams;
- DSU drawdown of funds/cash management, including timely reimbursement of SILC and service provider expenditures; and
- contract development and monitoring consistent with Education Department General Administrative Regulations (EDGAR), and program regulations at 34 CFR 364.21-364.43, 364.56 and 364.59.

B. Review of Progress from Recommendations and Compliance Findings Identified during Prior Monitoring Cycle

**Resources**: the most recently published Section 107 Monitoring Report and/or Corrective Action Plans

The review team will follow up on observations, recommendations, and/or compliance findings documented in the last monitoring review cycle to determine whether additional technical assistance is needed. In addition to following up on findings and recommendations, the review team will identify if changes have occurred subsequent to the prior review related to the DSU’s fiscal management.

- Describe fiscal observations, recommendations and/or compliance findings made in previous Section 107 Monitoring Reports which the DSU has not addressed, including current status and possible reasons they have not been addressed where applicable.

- Compare information from fiscal management sections of most recent 107 report with the fiscal management system currently in place in the DSU.

- Describe technical assistance the agency might need in order to resolve outstanding corrective actions related to SILS, CIL (in 723 states), and OIB program fiscal management.
C. Resource Management

1. DSU Resource Management

**Resources:** grant awards; draw down history; fiscal policies and procedures; grants and contracts; fiscal reports submitted by SILCs in 723 states; contractors and service providers; purchase orders; invoices; receipts

- **General Resource Management** – The review team will examine the agency’s general resource management, how the agency manages funding resources, including state revenue, program income (when applicable), and draw downs of federal funds.

  o Describe the coordination during the year between the DSU/DSA staff responsible for fiscal management and the program managers that maximizes the use of funding sources and how this coordination contributes to the quality and quantity of services to consumers.

  o Describe how the DSU manages and tracks financial resources, including federal and non-federal funds, program income, and other funding sources to ensure the proper expenditure, accounting, and reporting of those funds, consistent with the SPIL financial plan and SILC resource plan.

  o Describe the DSU’s internal fiscal reviews on expenditures, accounting, and reporting of fiscal resources. Also describe the frequency of these reviews.

  o Describe any conditions in the SILC Resource Plan that may compromise independence of the SILC.

  o Describe the methods by which the SILC is reimbursed for expenditures outlined in its Resource Plan.

- **State Revenue and Other Match Sources** – SILS, CIL (in 723 states), and OIB programs regulations require the state to make a portion of expenditures from non-federal funds to meet its cost sharing requirements) 34 CFR 365.12(b)(1), 34CFR 365.12 (b)(2) [SILS, CIL (in 723 states), and OIB] and (367.11(b), 34 CFR 367.40 [OIB only] (34 CFR 80.24). Use the questions below to review the state appropriation of non-federal funds and other match sources.

  o Has the DSU had sufficient non-federal expenditures during the last five years to satisfy its match requirements under the SILS and OIB programs? ____YES ____NO

    If “NO,” describe the deficiency amount and the years affected.

- **Drawing Down Federal Funds** – In accordance with 34 CFR 364.22 [SILS, CIL (in 723 states), and OIB] and 34 CFR 367.11(a) [OIB only] the agency must have procedures in
place to minimize the time elapsing between the grantee’s receipt and disbursement of federal funds (34 CFR 80.21(b)).

- Describe the DSU’s process of drawing down funds, including determining the amount of funds to be drawn down, the frequency of draw downs, and staff responsible for making draw down

- **Program Income** – Analyze gross income received or generated by the DSU and used to support activities of the SILS, CIL (in 723 states), and OIB programs (34 CFR 364.5).

Program income must be reported accurately (34 CFR 76.720; 34 CFR 364.36) [SILS, CIL (in 723 states), and OIB] and (34 CFR 367.11(d)) [OIB only] the DSU must employ methods to properly and efficiently administer all IL and OIB funds (34 CFR 364.34) [SILS, CIL (in 723 states), and OIB] (34 CFR 367.11(a)) [OIB only] and program income must be disbursed before requesting additional federal funds from the award (34 CFR 80.21(f)).

- What are the sources of program income?

- Describe the process by which program income is tracked and expended, including procedures for ensuring the proper reporting of program income and that program income is disbursed prior to drawing down federal funds.

If technical assistance is needed regarding program income, additional resources/questions may include:

- the percentage of IL or OIB expenditures supported by transfers of program income and the amount of expected program income for the upcoming FY;

- the extent program income has fluctuated overall, over the last five years and possible factors contributing to these trends; and

- the percentages, if any, of the total Social Security reimbursements transferred from other programs.

2. **Fiscal Planning**

**Resources:** fiscal policies and procedures; financial plans; current SPIL

**DSU Processes** – Identify the strategic planning of financial and programmatic resources used in the SILS, CIL (in 723 states), and OIB programs, including the SPIL financial plan and the SILC resource plan. Planning includes a review of the development of the financial and programmatic crosswalk, the application of financial monitoring and evaluation reports used for fiscal forecasting purposes at the agency program/grant level. (34 CFR 364.34) [SILS, CIL (in 723 states), and OIB], (34 CFR 367.11(a)) [OIB only], and (34 CFR 80.20(a)).
• Describe the DSU’s fiscal planning process, including roles and responsibilities within the DSU/DSA, SILC and other stakeholders and the timing of the planning within the DSU or the DSA.

D. Match Management

Resources: award notifications; documentation for in-kind match

The review team will examine the DSU’s ability to plan, access, and expend state general funds and other match resources to meet federally mandated requirements.

1. Sources of Match (34 CFR 365.12(b)(1), 34 CFR 365.12 (b)(2)) [SILS and OIB programs], (367.11(b ), 34 CFR 367.40) [OIB only], and (34 CFR 80.24)

• Describe the process for tracking and monitoring state match, ensuring sufficient funds are available to meet the DSU’s match requirement and that those funds are accounted for and reported properly.

E. Internal and External Fiscal Monitoring and Oversight

The review team will examine the DSU’s internal and external control systems. Internal control represents the agency’s plans, methods, and procedures used to meet its missions, goals, and objectives and serves to safeguard assets and prevent fraud, waste, abuse, and mismanagement. Internal control provides assurance that the DSU’s objectives are achieved through:

• effective and efficient fiscal operations;
• reliable financial reporting; and
• compliance with laws and regulations.

External control is achieved through contract monitoring to ensure contractors provide quality services in accordance with the contract, current laws, rules, policies and procedures, and the agency’s written standards.

1. Internal and External Fiscal Control

Resources: fiscal policies and procedures; financial reports

The questions in this section address methods the DSU employs to properly and efficiently administer IL and OIB funds (34 CFR 364.34) [SILS, CIL (in 723 states), and OIB], (34 CFR 367.11(a)) [OIB only] and account for the funds in accordance with state laws and procedures for expending and accounting for its own funds. This includes fiscal controls and accounting procedures sufficient to permit preparation of reports, and to permit the tracing of funds to a level of expenditures adequate to establish that such funds have been used in accordance with the guidelines of applicable statutes (34 CFR 80.20(a)). Additionally, grantees are responsible for managing the day-to-day operations of the grant supported activities to ensure compliance with
applicable federal requirements and to ensure performance goals are achieved. Grantee monitoring must cover each program, function or activity. (34 CFR 80.40(a))

- **Financial Tracking**
  
  o Describe the DSU’s procedures and practices for developing the (internal/external) fiscal reports, including the SF-269/SF-425; and the RSA-704 Part I and the RSA-7-OB reports and for tracking the sources and uses of funds with respect to the approved SPIL financial plan and SILC resource plan, and the staff involved in their preparation.
  
  o Describe the DSU’s methods or procedures for developing and maintaining supporting documentation that are used to verify the accuracy of financial and statistical reports submitted to RSA.
  
  o Describe the DSU’s procedures for verifying the accuracy of data in the fiscal system before they are entered into the reports, as well as the accuracy of the actual completed reports before they are submitted to RSA.

- **Payment Processing**
  
  o Describe the procedure used by the DSU for processing purchase orders, invoices, and/or any document that is used to reimburse the SILC for expenditures for conducting its statutory duties, to pay for IL and OIB services provided directly by the DSU and/or other service providers, (including CILs in 723 states) via grants or contracts.
  
  o With regard to the provision of IL or OIB services, describe the DSU’s procedures for monitoring the day-to-day activities to ensure the following:
    
    - invoices and purchase orders are only for those services or goods provided to those individuals determined eligible (34 CFR 364.51) [SILS and CIL (in 723 states) only] and section 751 of the Act [OIB only];
    - invoices and purchase orders are only for those services identified in the Consumer Service Record (CSR) (34 CFR 364.53) [SILS and CIL (in 723 states) only];
    - invoices and purchase orders are only for goods and services allowable under the applicable program;
    - the individual actually received the goods and services; and
    - payments match the invoices in terms of the services and goods authorized.

2. **Contract Administration – Development and Management**

   **Resources:** fiscal policies and procedures; RFPs; contracts; vendor agreements; invoices; purchase orders; current SPIL
Contract administration includes: planning; identifying deliverables; developing terms and conditions, including SILC/service provider reimbursements, the schedule and process for monitoring contractor performance; and billing.

- What percentage of the IL or OIB service delivery system is expended by using outside vendors and/or contractors?

- Does the DSU have written policies in place to govern the rates of payments for purchased services, as required by 34 CFR 365.30 and 34 CFR 365.31? [SILS, CIL in 723 states, and OIB programs]

  ____YES ____NO

Describe:

- Describe how the DSU sets the payments it makes for services and how it ensures those fees are reasonable.

- Describe how the DSU reconciles the amounts paid to the contractors to ensure that the total amount paid under the contract does not exceed the agreed-upon contract amount.

- Describe the procedures used by the DSU to ensure the contractor complies with all applicable requirements. In particular, describe the monitoring procedures that the agency uses to ensure the following:
  
  o services provided by the contractor are limited to those allowed under the IL or OIB program;
  o the services are provided solely to applicants or eligible consumers;
  o the services have been provided and at the level agreed to in the contract;
  o the contractor has satisfied performance goals as agreed to in the contract; and
  o the contractor has maintained supporting documentation to verify amounts invoiced and received under the contracts.

- Describe the DSU/DSA procedures to ensure timely reimbursement of funds to the SILC and the IL/OIB service providers for allowable and allocable expenditures.

3. Service Provider Requirements

- Does the DSU’s oversight and monitoring policies and procedures ensure compliance with the service provider requirements for the SILS and OIB programs, as applicable, cited in 34 CFR 364.20(i) (i.e., sections 364.21 through 364.43, 364.56 and 364.59)? (These requirements will be reviewed in conjunction with RSA’s IL and OIB program staff.)

  ____YES ____NO

F. Allowable and Allocable Costs

Allowable and allocable costs focus on the DSU’s implementation of written procedures for determining reasonableness, allocability, and allowability of SILC and IL/OIB service provider
costs in accordance with the provisions of the applicable cost principles and terms and conditions of the grant award.

To be allowable, costs can only be charged to the SILS or OIB program in accordance with relative benefits received. Factors affecting the allowability of costs include, but are not limited to, whether they are allocable, reasonable and necessary (2 CFR 225, Appendix A, paragraph C).

**Resources:** personnel job descriptions; personnel activity reports; timesheets; payroll; contracts

When reviewing personnel costs, time distribution and payroll, all relevant documents must be evaluated to determine the allowability of these costs (2 CFR 225, Appendix B, paragraph 8) [SILS, CIL in 723 states and OIB programs].

1. **Personnel Cost Allocation** – Specifically how personnel costs are allocated for employees of the DSU working on one or multiple cost objectives
   
   - Do employees who work on more than one grant or cost center complete personnel activity reports (PARs) or other supporting documentation to record their time?
   
   ____YES ____NO
   
   o If “YES,” do those PARs or supporting documentations reflect an accurate, after-the-fact reporting of time actually spent on each program?
   
   ____YES ____NO
   
   o If “NO,” how is the staff’s time apportioned to each of the programs worked on?
   
   - How often do employees (or their supervisors), who work on only one grant or cost center complete the required certification form?
   
   - If a random sample is used, does it meet the following requirements (2CFR 225, Appendix B, Item 8.h.6)? [SILS, CIL in 723 states and OIB programs]

   o Has the sampling method been approved by the cognizant federal agency?
   
   o The sampling universe must include all employees who salaries are to be allocated based on sample results.
   
   o The entire time period involved must be covered by the sample.
   
   o The results must be statistically valid and applied to the period being sampled.

   ____YES ____NO

2. **Allocation of Direct Program Costs**

   - Describe how the DSU determines the appropriate amount of shared costs to allocate to each program when those costs are charged directly to the program.
Describe the procedures the DSU uses to monitor these shared costs to ensure that each program pays for only its proportional share.

3. Indirect Cost/Cost Allocation Plan – Specifically whether indirect costs or cost allocation plans have been implemented within the agency.

The questions below address indirect costs that are incurred for a common or joint purpose benefiting more than one cost objective, and cannot be readily assignable to the cost objectives specifically benefitted, without effort disproportionate to the results achieved. (2 CFR 225, Appendix A, paragraph F.1) [SILS, CIL in 723 states and OIB programs]

- Does the DSU charge indirect costs to the IL or OIB programs? 
  ____YES ____NO

  o If “YES,” has the DSU submitted and received approval from the cognizant federal agency for an indirect cost rate or cost allocation plan?
    ____YES ____NO

- Is that approved rate or plan still in effect?
  ____YES ____NO

  o If “YES,” does the DSU charge indirect costs to the program in accordance with the rate or plan approved by the cognizant federal agency?
    ____YES ____NO

Explain any “NO” answers below:

- Describe the procedures the DSU uses to ensure that each program does not pay more in terms of indirect costs than is approved by the federal cognizant agency.

- Describe the process for administering the DSU’s cost allocation process and the staff involved.

V. Focus Area - Priority Services and Populations

A. Nature and Scope

This area addresses the following:

- IL service priorities identified in the SPIL, the four IL core services and, where applicable, services for transition age youth;
- Population priorities identified in the SPIL, including minority, urban and rural populations and geographic areas;
- SPIL strategies, activities and evaluation methods related to priority IL services and populations including consumer satisfaction evaluations; and
• OIB service and population priorities, strategies, activities and evaluation methods.

B. Review of Progress from Recommendations and Compliance Findings Identified during Prior Monitoring Cycle

Resources: the most recently published Section 107 Monitoring Report and/or Corrective Action Plans

The review team will follow up on observations, recommendations, and/or compliance findings documented in the last monitoring review cycle to determine whether additional technical assistance is needed. In addition to following up on findings and recommendations, the review team will identify if changes have occurred subsequent to the prior review related to the DSA/DSU’s IL and OIB service provision.

• Describe observations, recommendations and/or compliance findings made in previous Section 107 Monitoring Reports which the agency has not addressed, including current status and possible reasons they have not been addressed where applicable.

• Compare information from IL and OIB service delivery sections of most recent 107 report with the service delivery systems currently in place in the agency.

• Describe technical assistance the agency might need in order to resolve outstanding corrective actions related to SILCs, CILs in 723 states, and OIB service delivery systems.

C. Priority Services and Populations: SILS and CIL (in 723 States) Programs

1. IL Priority Services, Populations and Geographic Areas

Resources: SPIL

• Which services, populations and geographic areas (if applicable) are identified as priorities in section 1.2B of the latest approved SPIL? 34 CFR 364.32, 34 CFR 364.33, 34 CFR 364.42(b)(2)(3)

• What criteria and processes were used to identify these priorities (previous SPIL, 704 Reports, census data, other)?
  o Were the CILs and the Client Assistance Program consulted in the development of these priorities? 34 CFR 364.30, 34 CFR 364.42(c)

• Was youth transition considered as a potential priority?  
  ___YES ___NO
2. SPIL Alignment

Resources: SPIL, 704 Report, Parts I and II, Appendix D Table 4, 5 and 6 of this IL/MTAG

- For current services, population and geographic priorities, what were the trends prior to the latest SPIL, based on available data including the 704 Report?

- What were the trends prior to the latest SPIL for the other, non-prioritized areas (including youth transition, nursing home transition, IL core services, significant life areas, and access to transportation, assistive technology and health care, etc.), based on available data including the 704 Report?

- To what extent do the foregoing data align with the priorities in the current SPIL?

3. Activities and Results Related to IL Priorities Services, Populations and Areas

Resources: 704 Report Parts I and II, SPIL, Appendix D Table 4, 5 and 6 of this IL/MTAG

- What activities are being conducted to address the priority services, populations and geographic areas (resource development, coordination with other councils and organizations, systems advocacy, other)?

- What are the roles of the IL partners in the state (DSU(s), CILs, SILC, others), individually and collaboratively?

4. Evaluation

Resources: SPIL, 704 Report, consumer satisfaction surveys

- What methods are in place to review and evaluate the activities addressing the priority services, populations and geographic areas (consumer satisfaction surveys, 704 Report data, other)?

- Have these evaluation methods resulted in any actual or planned adjustments to SPIL priorities and activities, if applicable?

- Has there been measurable progress regarding the priority services, populations and geographic areas subsequent to the development of the latest SPIL, based on available data including the 704 Report?

- What are the trends for the other, non-prioritized areas (including youth transition, nursing home transition, IL core services, significant life areas, and access to transportation, assistive technology and health care, etc.), based on available data including the 704 Report?
D. Priority Services and Populations: OIB Program

1. OIB Priority Services and Populations

Resources: List of IL-OIB services provided by the state; 7-OB; source of data for targeting identifying population(s) for priority services; Appendix C Tables 7 and 8 of this IL/MTAG

- Which of the OIB services listed in 34 CFR 367.3(b) have been designated as priorities in the state if any?
  - Do they include the four IL core services? 34 CFR 367.1(a)

- What are the state’s OIB priority populations (racial/ethnic minorities, rural or urban areas, deaf/blind, blindness caused by specific eye conditions or by particular diseases/conditions prevalent in the state such as diabetes, other), if any?

- What criteria and processes were used to identify these service and population priorities (previous 7-OB Reports, Census data, other)?

2. Activities and Trends Related to Priorities Services, Populations and Areas

Resources: DSA/DSU OIB policies and procedures; OIB contracts; list of OIB services provided in the state; 7-OB report

- Describe the OIB services that are being provided in the state, particularly those designated as priorities, if applicable.

- Describe the capacity-building, community awareness and outreach activities being conducted to reach the priority populations, as applicable.

- Describe how the OIB partners (DSA/DSU, CILs, other agencies and organizations) are providing the OIB services and conducting the capacity-building, community awareness and outreach activities, individually and collaboratively.

- How does the DSA/DSU ensure that these services and activities align with the OIB service and population priorities?

3. Evaluation

Resources: Consumer satisfaction surveys; available state agency and 7-OB Report data

- What methods are in place to review and evaluate the actions addressing the priority services and populations (consumer satisfaction surveys, 7-OB Report data, other)?
• Have these evaluation methods resulted in any actual or planned adjustments to OIB service delivery or capacity-building, community awareness and outreach activities, if applicable?

• What are the trends regarding the priority services, populations and geographic areas, based on available data including the 7-OB report?
APPENDIX A

STATE INDEPENDENT LIVING & OLDER INDIVIDUALS who are BLIND PROGRAMS

FY 2012 MONITORING AND TECHNICAL ASSISTANCE GUIDE

Documents for Review

Designated State Unit (DSU)

- DSU fiscal and program policies and procedures for the SILS and CIL programs (in 723 states), and the OIB program
- List of OIB and IL service providers, including CILs and non-CILs
- Copies or sample selection of DSU IL, part B contracts/requests for proposals, memorandums of understanding (MOUs), etc.
- DSU organizational chart
- List of DSU staff involved in SILS (and CILS in 723 states) and OIB program administration, including position descriptions
- DSU’s SILS and CIL (in 723 states) program monitoring tools
- Sample list of technical assistance and training DSU conducted for contractors or grantees over the last two years
- Approved SPILs
- 704 and 7-OB Reports and other data related to priority services and populations available in the states
- Drawdown reports, SF-425s, and other DSA/DSU fiscal documentation

SILC

- Legal document establishing SILC – including executive order, legislation or other (when applicable)
- Documentation that SILC is a nonprofit or independent state board or commission (when applicable)
- DSU-SILC contract (when applicable)
- SILC financial statements and expenditures
- SILC membership roster indicating disability status, appointment categories, original term start and end dates, etc.
- SILC staff roster (whether hired by SILC or assigned by DSU) with position descriptions
APPENDIX B

STATE INDEPENDENT LIVING SERVICES & OLDER INDIVIDUALS WHO ARE BLIND PROGRAMS

FY 2012 MONITORING AND TECHNICAL ASSISTANCE GUIDE

Examples of Findings from Prior Reviews

During the monitoring of the SILS and OIB programs between FY 2007 and FY 2010, RSA made findings of non-compliance and identified the corrective actions that DSUs were required to take to resolve the findings. This appendix includes examples of findings from the monitoring reports resulting from these prior reviews as they relate to the focus areas covered during the monitoring activities, including the organizational structure of the SILS program, the provision of IL and the fiscal integrity of the programs. These examples illustrate the manner in which RSA interprets the federal requirements pertinent to these focus areas. The review team and DSU(s) may find these examples helpful when analyzing factual information in light of relevant statutory and regulatory provisions.

Note: These findings have been redacted to eliminate DSA/DSU and state names and other identifiable information.

Focus Area - Organizational Structure of the DSU and SILC

Example 1: The Agency is not in compliance with the legal term limits for SILC members because the state agency representatives SILC have been members for longer than is permitted by federal law and regulation.

1. Failure to Comply with federal regulations regarding SILC Term Limits for SILC members

Legal Requirement: 34 CFR 364.21(b)-(f). Each member of the SILC shall serve for a term of three years, except that:

- a member appointed to fill a vacancy occurring prior to the expiration of the term for which a predecessor was appointed must be appointed for the remainder of that term;
- the terms of service of the members initially appointed must be (as specified by the appointing authority) for the fewer number of years as will provide for the expiration of terms on a staggered basis; and
- no member of the SILC may serve for more than two consecutive full terms.

Finding: All State agency representatives on the SILC have been members for longer than is permitted by federal law and regulation. Both the executive order establishing the SILC and the SILC bylaws reflect the term limit requirements for all SILC members, excepting that ex-officio non-voting SILC members are not subject to the required two consecutive three-year term limits.
Corrective Action 1: The Agency and the SILC must ensure that:
   1.1 all State Agency representatives who are ex-officio non-voting members on the SILC and who have served more than the required two consecutive three-year term limits are replaced with new members appointed by the governor;
   1.2 The SILC must take all steps necessary to ensure that all ex-officio non-voting members do not exceed the required term limits; and
   1.3 that expiration of terms for State Agency representatives on the SILC are reflected in the annual 704 Part I Report.

Agency Response: The Agency agrees to this action, and together with the SILC will develop a plan whereby State Agency representatives will have term limits in compliance with requirements and replacement agency representatives can be identified.

RSA Response: In its corrective action plan (CAP), the Agency should describe the steps it will take with the SILC to ensure that term limits are adhered to for all members.

Example 2: The SILC Executive Director indicated they met with legislators and their staff on issues impacting individuals with disabilities and the IL community. The position description of the executive director specifies that the position handles legislative issues for the council and educates legislators about the IL Council and Centers for Independent Living (CILs). The position description of the IL Specialist specifies that the position will provide information and referral to consumers.

2. Failure to comply with federal requirements regarding SILC Duties

Legal Requirement: 34 CFR 364.21(g) - OMB Circular A-122, Attachment B, Item 25 Lobbying

Finding: The SILC is not in compliance with 34 CFR 364.21 and OMB Circular A-122 because it is using its federal funds to conduct activities that are not related to its mandated duties, specifically conducting legislative advocacy activities and providing information and referral services. The SILC could not show that these activities were within the limited lobbying exemptions of OMB circular A-122 or that they were conducted with non-federal funds.

Corrective Action 2: The SILC must:
   3.1 cease any activities funded with federal funds that are not consistent with OMB Circular 122’s prohibition on lobbying or the SILC’s statutory duties; and
   3.2 take the necessary steps to ensure compliance with 34 CFR 364.21 to perform their duties consistent with the federal requirements.

Agency’s Response: In accordance with RSA’s guidance on SILC roles and responsibilities, the SILC will engage in advocacy in the normal course of fulfilling its statutory duties. Federal law and regulations do not preclude the SILC from using its federal funds to engage in some forms of advocacy that flow directly from the SILC’s fulfillment of its statutory duties.
RSA Response: The SILC also advocates for IL on a year-round basis through its interaction with a variety of disability-related councils, commissions and organizations at the state, local and federal levels, in accordance with 705(c)(3). Such interaction enables the SILC to promote a better understanding of the IL philosophy; encourage new collaborative initiatives in support of the Statewide Plan for Independent Living (SPIL) goals and objectives; and influence the state’s disability policies and practices in this way. It is important to note, however, that although the SILC may interact with the State and federal legislatures by, for example, being invited by a state legislative committee to provide testimony on an IL-related issue or proposal, the federal government identifies certain interactions as lobbying, and while lobbying may be a form of advocacy, all IL grantees and subgrantees are prohibited from using federal funds to engage in lobbying.

Whether a particular SILC advocacy activity results from the fulfillment of its duties in section 705 depends on the scope and nature of the SILC’s involvement in the activity in question.

Focus Area: Fiscal Integrity

Example 1: The Agency submitted a Financial Status Report (SF-269) that reported total match of $76,844 for the OIB program, and also reported its entire federal allotment of $696,810 as either expended or obligated. To utilize the entire FY 2006 allotment, the Agency was required to expend a minimum of $77,423. The $76,844 actually expended is $579 less than the required match amount of $77,423.

1. Failure to meet the federal requirements regarding Match/Carryover – Independent Living Services for Older Individuals Who Are Blind Program (OIB program)

Legal Requirements: 34 CFR 364.6(b), made applicable to the OIB program by 34 CFR 367.4(c)(3), 34 CFR 367.11(b), 34 CFR 80.20(a), made applicable to the OIB program by 34 CFR 367.4(a)(6), 34 CFR 80.24(a), made applicable to the OIB program by 34 CFR 367.4(a)(6), Section 19 of the Rehabilitation Act of 1973, as amended

Finding: The Agency failed to submit accurate SF-269s when reporting federal funds expended and the nonfederal funds expended to meet the match requirements to carryover federal funds. In both FY 2006 and FY 2008, the SF-269s revealed a match deficit. Although in subsequent revised reports, the Agency maintains that match requirements were met for these fiscal years, supporting documentation is needed in order to verify the revised reports.

Corrective Action 1: The Agency must:
1.1 cease submitting inaccurate financial reports, SF-269s, as required by 34 CFR 80.20;
1.2 submit a written assurance to RSA within 10 days of receipt of the final monitoring report that will ensure the timeliness, accuracy, and completeness of future financial reports submitted and the accurate accounting of all charges made to the OIB program.
   The Agency also must assure that internal controls are implemented in order to ensure the accuracy of OIB program accounting and reporting;
1.3 submit a plan, including timelines, describing the internal controls that will be implemented to ensure timeliness and accuracy of the financial reports; and
1.4 submit documentation for RSA’s review and approval to support the revised September 30 (year-end) financial status reports submitted for the OIB program for FY 2006 and FY 2008. Upon completion of this review, RSA must be able to determine the following for FY 2006 and FY 2008:

- the total program expenditures at year-end;
- the federal share of total program expenditures;
- non-federal share of total program expenditures;
- total obligations;
- federal share of obligations; and
- non-federal share of obligations.

**Agency Response:** The Agency will:

- cease submitting SF-269 reports with information deemed inappropriate per 34 CFR 361.12, 34 CFR 80.20 and 34 CFR 76.707;
- develop and implement a plan to update the internal controls that ensure timely and accurate submittal of financial and statistical reports; and
- submit a written assurance to RSA within ten days of receipt of the final monitoring report including the specific steps that the Agency will take to ensure the accuracy and completeness of financial and statistical reports submitted, the accurate accounting of all charges to the VR program, and internal controls are implemented to ensure the accuracy of VR program accounting and reporting.

The Agency has: Revised previously submitted 4th quarter (September 30th) and subsequent SF-269 reports for VR, supported employment (SE), IL, and OIB programs that required corrections from FY 2005 through FY 2008.

**RSA Response:** Although in subsequent revised reports, the Agency maintains that match requirements were met for these fiscal years, supporting documentation is needed in order to verify the revised reports.

Subsequent to the completion of RSA’s on-site monitoring visit and discussions related to this finding with the Agency financial and program staff, the Agency took the following actions:

- The Agency submitted a 4th quarter SF-269 for FY 2006. On this report, the Agency reported that it had actually expended only $695,629 of the $696,810 in federal funds appropriated in FY 2006 for the OIB program, leaving $1,181 in Federal funds to carry-over to the next fiscal year. According to this form, the Agency still spent $4,033 more in federal funds than it had matched, and it carried over $1,181 when it had not met its match requirement for the fiscal year in which the funds were appropriated.
- The Agency submitted a revised FY 2006 SF-269 for the period ending September 30, 2007. This report increased non-federal expenditures by $22,913 (from $76,844 to $99,757). However, this report ended September 30, 2007, rather than September 30, 2006, the date by which all non-federal expenditures for match must be made. Upon review, RSA rejected this report and is requiring re-submission by the Agency. If the Agency is correcting an error to previously report non-federal expenditures, and its intention is to report non-federal expenditures that were not included on the SF-269

If the revised report and supporting documentation shows an increase in the non-federal funds expended in FY 2006 equal to or greater than $448.11, then there would be no match violation, but the repeated revisions to the SF269 to correct deficiencies discovered by the RSA monitoring visit demonstrates a problem with the Agency’s fiscal controls and accounting procedures.

Example 2: RSA noted that the salary of the Director of the IL Unit is paid solely from VR monies. According to the job duties for the Director of the IL Unit, the director performs no activities related to the VR program and instead works approximately 50 percent of the time on IL-part B activities and 50 percent on OIB activities.

2. Failure to comply with federal requirements regarding the Assigning Personnel Costs—Staff Working on Multiple Programs

Legal Requirements: 34 CFR 361.3, 34 CFR 361.12, 34 CFR 364.34, 34 CFR 80.20(a), 2 CFR part 225 (formerly known as OMB Circular A-87), Appendix B, paragraph 8.h4 and 8.h5

Finding: The Agency is not in compliance with 2 CFR part 225, Appendix B, 8.h.4 and 8.h.5, because personnel costs are not allocated appropriately using personnel activity reports to each program. As a result, the VR program bears a disproportionate share of the personnel costs that arise under other programs administered by the Agency, including IL and OIB. Given this, the Agency has failed to comply with 34 CFR 361.12 and 34 CFR 80.20(a), which requires the Agency to administer the VR program in such a manner that ensures the proper expenditure and accounting of VR funds.

Regulations at 34 CFR 361.3 require that VR funds must be used for the provision of VR services or for the administration of the VR program. To constitute an administrative cost under the VR program, the expenditure must be incurred in the performance of administrative functions of the VR program (34 CFR 361.5(b)(2)). Administrative salaries, including staff that work under the VR program, constitute a VR-related administrative cost (34 CFR 361.5(b)(2)(xi)). Non-VR related personnel costs—such as those related to the Director of the IL Unit—do not constitute VR administrative costs because they do not arise from the performance of administrative functions for the VR program. Therefore, non-VR related personnel expenditures are not allowable under the VR program, pursuant to 34 CFR 361.3, and may not be paid for with VR funds.

Although the funding for the VR program represents the greatest share of the Agency’s funding, the practice of assigning IL-part B- and OIB-related personnel costs to the VR program because of limited funding in other programs is not in accordance with cost principles outlined in 2 CFR part 225. In order to ensure the proper administration of the programs and accountability of funds, the Agency must be able to document the time its staff spend on the VR, IL, and OIB programs. Federal cost principles set forth requirements for ensuring the proper accounting of staff time, both for staff working full-time on one program and for staff splitting their time on multiple programs. In particular, 2 CFR part 225, Appendix B, paragraph 8.h.4 requires the
Agency’s employees, who split their time on multiple programs, to document the time spent working on each program via personnel activity reports. These reports must reflect an after-the-fact documentation of the actual time spent on each program (Id. at 8.h.5). Without such supporting documentation, the Agency cannot ensure that the personnel costs were allocated appropriately to the proper programs. For this reason, the Agency has failed to comply with 34 CFR 361.3, 34 CFR 361.12, 34 CFR 364.34, 34 CFR 80.20(a), and 2 CFR part 225, Appendix B, 8.h.4 and 8.h.5.

Corrective Action 2: The Agency must:

2.1 cease using Title I funds for personnel costs that do not arise under the administration of the VR program and that are not supported by documentation, such as personnel activity reports, as required by 2 CFR part 225, Appendix B, 8.h.4 and 8.h.5;

2.2 submit a written assurance to RSA within 10 days of receipt of the final monitoring report that it will comply with 2 CFR part 225, Appendix B, 8.h.4 and 8.h.5 by requiring staff who work on multiple programs to submit personnel activity reports to support the time spent on each program; and

2.3 submit a plan, including timelines, describing the corrective actions that will be taken to ensure:

i. personnel activity reports are maintained that reflect actual time spent on each program in order to support the allocation of an equitable portion of personnel costs for individuals, not charged indirectly, who work on more than one federal grant program or cost objective; and,

ii. personnel and administrative costs are allocated equitably, either directly or indirectly, to each program administered by the Agency in accordance with program requirements.

Agency Response: The Agency has already taken corrective action to remedy this finding. During the 107 review process, RSA provided technical assistance on how to set up a personnel activity reporting process. This process has been implemented, and all staff that work on multiple programs are required to submit personnel activity reports to support the time spent on each grant program. These personnel activity reports reflect actual time spent by employee on multiple programs, rather than estimated time spent. Personnel activity reports are submitted each pay period to the Grants and Funds Management office for preparation of journal entries to assign those costs to the appropriate grant program and cost objective. The state’s financial accounting system does not currently provide a direct mechanism to enter personnel activity information that would override established costing data.

RSA Response: RSA appreciates the steps the Agency has taken to resolve this finding and required corrective actions that will be further documented in its CAP developed as a result of this final report.

Example 3: The Agency does not conduct periodic certifications for employees working solely on one federal grant program. In failing to comply with this requirement, the Agency is not able to ensure that the IL and OIB programs is administered properly and efficiently and that all funds are accounted for properly.
3. Failure to comply with federal regulations requiring Periodic Certification – Personnel Working Solely on IL or OIB Programs

Legal Requirements: 34 CFR 361.12, 34 CFR 364.34, 34 CFR 80.20(a), 2 CFR part 225 (formerly known as OMB Circular A-87), Appendix B, paragraph 8.h3

Finding: As a recipient of IL funds, the Agency is required to administer the program properly and efficiently (34 CFR 364.34 and 34 CFR 80.20(a)). It must ensure that IL funds are properly accounted for and that accurate data are collected and reported (Id.). In ensuring the proper administration of the IL and OIB program and accountability of IL and OIB funds, the Agency must be able to document the time its staff spend on the IL or OIB program. Federal cost principles set forth requirements for ensuring the proper accounting of staff time, both for staff working full-time on one program and for staff splitting their time on multiple programs. In particular, 2 CFR part 225, Appendix B, paragraph 8.h.3, requires the Agency employees or their supervisors to certify, at least semi-annually, that the employee worked solely on one grant program during the period covered by the certification.

While onsite, RSA found that the Agency does not conduct semi-annual certifications for staff that work solely on one program, as required by 2 CFR part 225, Appendix B, paragraph 8.h.3. Furthermore, the Agency does not require its staff to track their time to specific programs. Instead, the personnel documentation that RSA reviewed on-site indicated that the Agency staff report their hours worked, but do not attribute those hours to any benefiting grant, regardless of whether the hours worked were attributed to one single grant or multiple grants, which made it impossible for RSA to determine which staff worked on a single grant. Given this failure to ensure that the staff’s time is certified at least twice a year, the Agency has failed to comply with 2 CFR part 225, Appendix B, paragraph 8.h.3. In failing to comply with this certification requirement, as well as the Agency’s failure to require its staff to track their time in accordance with the program worked, the Agency also has failed to comply with 34 CFR 364.34 and 34 CFR 80.20(a), because the Agency cannot ensure proper disbursement and accounting for IL and OIB funds and that the IL funds have been expended solely on VR allowable personnel costs.

Corrective Action: The Agency must:

3.1 submit a written assurance to RSA within 10 days of receipt of the final monitoring report that it will comply with staff certification requirements set forth at 2 CFR part 225, Appendix B, 8.h.3, as well as administrative requirements set forth at 34 CFR 361.12 and 34 CFR 80.20(a); and

3.2 develop procedures to ensure that, at a minimum, semi-annual certifications are completed for all employees working solely on one federal grant program or cost objective.

Agency Response: The Agency concurs with the finding and will submit the written assurance and a corrective action plan to implement the corrective actions required by RSA to comply with federal requirements. Written procedures to ensure on-going compliance with federal requirements are being developed and implemented and semi-annual certifications covering the latter part of the calendar year have been completed.
Example 4: The Agency does not have an established cost allocation plan or indirect cost rate approved by the U.S. Department of Education, required to ensure that they distribute administrative costs among its various funding sources in an equitable manner.

Legal Requirement: OMB Circular A-122, “Cost Principles for Non-Profit Organizations

4. Failure to comply with the U.S. Department of Education-approved indirect cost rate or cost allocation plan

Finding: The Agency is not in compliance with OMB Circular A-122 because it is allocating indirect costs to the Part C grant without an approved indirect cost rate or cost allocation plan.

Corrective Action 4: The Agency must submit an indirect cost rate or cost allocation plan for U.S. Department of Education approval. For this purpose, RSA will provide a Cost Allocation Plan Information Review Checklist and Model Cost Allocation Plan.

Agency Response: The Agency submitted a draft cost allocation plan to RSA.

RSA Response: The cost allocation plan submitted by the Agency does not conform to the requirements of the Cost Allocation Plan Information Review Checklist and Model Cost Allocation Plan that RSA provided. The allocation method described in the plan must be more specific. Descriptions such as “costs are allocated based on a reasonable or most equitable manner” are not sufficient. The Agency must submit a revised cost allocation plan in accordance with instructions provided by RSA (will resend this information upon request.) The revised cost allocation plan must be submitted to the Department’s Indirect Cost Group with a copy to the IL Unit Representative (ILrepresentive@ed.gov.)

The Agency submitted a revised cost allocation plan, to the Indirect Cost Group; an email confirmation of its receipt of the plan was forwarded to the Agency, RSA considers this corrective action to have been completed.

Focus Area: Priority IL and OIB Services

Example 1: The Agency’s IL staff was not familiar with the IL philosophy and the IL core services; consumer service records lacked consistent documentation regarding eligibility determination, independent living plans, IL services requested and provided, IL goals set and met.

1. Failure to provide the four core Independent living services as per federal regulations

Legal Requirement: As stated at 34 CFR 364.53, 34 CFR 364.59, CFR 365.1 (b), and 34 CFR 365.30;

Finding: The Agency is not in compliance with federal regulations because its state-administered IL program does not provide the IL core services. The Agency provides only assistive devices such as eye-glasses, hearing aids and walkers.
Corrective Action 1: RSA requires that the Agency take corrective action to ensure that it provides the four IL core services, directly or through grants or contracts, with federal, state or other funds. The Agency must:

1.1 reassess and restructure its IL program based on the IL philosophy and the four IL core services;
1.2 develop policies and procedures based on the consumer records requirements outlined in 34 CFR 364.53, CFR 364.59 and the service provider requirements in CFR 365.1(b) and the standards for processing referral in 34 CFR 365.30;
1.3 conduct outreach activities to increase the number of consumers served, variety of disabilities represented, IL services provided and IL goals achieved;
1.4 assess the most appropriate service delivery and funding options for the expanded IL program;
1.5 establish the corresponding quality assurance and staff development programs; and
1.6 institute improved resource management practices to monitor and, if appropriate, to adjust Part B program expenditures to ensure optimal use of resources available for the provision of IL services.

Agency Response:
1.1 The Agency will reassess and restructure its IL Program based on the IL philosophy and the four IL core services;
1.2 policies and procedures have been developed for submission to the SILC for adoption and general distribution to the IL consumers;
1.3 Agency IL staff conducts outreach activities in community centers where potential applicants are located. Independent living staff collaborates with community rehabilitation providers (CRP) to increase the number of participants in the IL Program;
1.4 Agency IL staff, in coordination with the SILC, will assess the service delivery system and most cost effective funding options; and
1.5 Agency will incorporate the quality assurance and staff development training related to IL services delivery into its QA and training policies and procedures.

RSA Response: In addition the agency must submit a plan documenting how it will provide the four IL core services and carry out the corrective actions described above.

Example 2: The Agency does not maintain adequate or consistent documenting in its consumer service records (CSRs). CSRs that were reviewed did not contain documentation of consumers’ eligibility or ineligibility for services and did not include service record notes that would demonstrate the Agency’s facilitation of consumer goal development and achievement.

2. Failure to comply with federal regulations and requirements for the maintenance of consumer service records

Legal Requirement: 34 CFR 364.53, 34 CFR 366.63(c)(1)

Finding: The Agency does not comply with federal regulations that requires that for each applicant for IL services (other than information and referral) and for each individual receiving
IL services (other than information and referral), the service provider shall maintain a consumer service record that includes documentation concerning eligibility or ineligibility for services, and provide evidence in its most recent annual performance report that it facilitates the development and achievement of IL goals selected by individuals with significant disabilities who request assistance from the center.

Corrective Action 2: The Agency must take corrective action to ensure that:
  2.1 CIL staff adequately and consistently document consumer eligibility or ineligibility and its role in helping consumers develop and achieve their IL goals;
  2.2 include necessary CSR management and documentation, training, supervision and quality assurance policies and procedures; and
  2.3 include a review and revision of all related consumer forms and informational materials, as necessary.

Agency Response: The Agency has changed its intake form to include a determination of eligibility or ineligibility. Each IL specialist has been instructed in the process and a determination will occur with each consumer. Additionally, CSR reviews will include reviewing the eligibility/ineligibility document and a review to determine if goals for the consumer are clearly written and their progress towards those goals is documented. Management has reviewed and revised all consumer forms and informational materials.

RSA Response: No further action is required by the Agency. RSA considers this corrective action to have been completed.
APPENDIX C

STATE INDEPENDENT LIVING & OLDER INDIVIDUALS WHO ARE BLIND PROGRAMS

FY 2012 MONITORING AND TECHNICAL ASSISTANCE GUIDE

Data Tables

During the monitoring of the SILS, CIL (in 723 states) and OIB programs, RSA will analyze consumer, services and outcomes using a set of uniform programmatic and fiscal data covering a five year period and ending with the most recently completed fiscal year. The tables below contain the data that will be used during the course of monitoring.

Table 1
Consumer Service Records (CSRs) for IL program for FY 2006 through FY 2010

<table>
<thead>
<tr>
<th>CSR Status</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
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<th>2010</th>
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<td>CSRs from previous year</td>
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<td>CSRs new this year</td>
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<td>Total served</td>
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<td>CSRs closed: moved</td>
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<td>CSRs closed: withdrawn</td>
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<td>CSRs closed: died</td>
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<td>CSRs closed: completed all goals</td>
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<td>CSRs closed: other</td>
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<td>Total CSRs closed</td>
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<td>CSRs with Independent Living Plans (ILP)</td>
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<td>CSRs with ILP waivers</td>
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Table 2
Consumer Records for OIB program for FY 2006 through FY 2010

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<tr>
<th>Case Record Flow</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
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<th>2010</th>
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<tr>
<td>Individuals who began receiving services in the previous reporting year</td>
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<tr>
<td>Individuals who began receiving services during each reporting year (new consumers)</td>
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<tr>
<td>Total individuals served during the reporting year</td>
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# Table 3
Fiscal Performance Data for IL and OIB for FY 2006 through FY 2010

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*Denotes Final or Latest SF-269 or SF-425 Submitted

**Based upon Final or Latest SF-269 or SF-425 Submitted
Table 4
IL Populations Served for FY 2006 through FY 2010

<table>
<thead>
<tr>
<th>A. Race/Ethnicity</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
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</thead>
<tbody>
<tr>
<td>American Indian or Alaska Native</td>
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<tr>
<td>Asian</td>
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<tr>
<td>Black or African American</td>
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<tr>
<td>Native Hawaiian or Other Pacific Islander</td>
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<tr>
<td>White</td>
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<tr>
<td>Hispanic/Latino of any race or Hispanic/Latino only</td>
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<tr>
<td>Non-Hispanic/Latino</td>
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<tr>
<td>Two or more races</td>
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<td>Total</td>
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<tr>
<th>B. Disability</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
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<th>2010</th>
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<tbody>
<tr>
<td>Cognitive impairments</td>
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<td>Mental/emotional impairments</td>
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<td>Physical impairments</td>
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<td>Hearing impairments</td>
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<tr>
<td>Blind or visually-impaired</td>
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<tr>
<td>Multiple impairments</td>
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<td>Total</td>
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<tr>
<th>C. Age</th>
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<th>2007</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
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<tbody>
<tr>
<td>Under 5 years old</td>
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<tr>
<td>Ages 5 – 19</td>
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<td>Ages 20 – 24</td>
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<td>Ages 25 – 59</td>
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<td>Age 60 and older</td>
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<td>Age unavailable</td>
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Tables 4A, 4B and 4C will show each population category’s annual percentage change and percentage share of the respective population category total.
Table 5
IL Services for FY 2006 through FY 2010

<table>
<thead>
<tr>
<th>Services Received</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
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</thead>
<tbody>
<tr>
<td>Core Services: advocacy/legal services</td>
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<tr>
<td>Core Services: IL skills training</td>
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<tr>
<td>Core Services: peer counseling</td>
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<tr>
<td>Core Services: information and referral</td>
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<tr>
<td>Assistive technology</td>
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<tr>
<td>Children's services</td>
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<tr>
<td>Communication services</td>
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<tr>
<td>Counseling and related services</td>
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<tr>
<td>Family services</td>
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<tr>
<td>Housing, home modifications, and shelter services</td>
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<tr>
<td>Mental restoration services</td>
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<tr>
<td>Mobility training</td>
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<tr>
<td>Personal assistance services</td>
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<tr>
<td>Physical restoration services</td>
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<tr>
<td>Preventive services</td>
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<tr>
<td>Prostheses, orthotics, and other appliances</td>
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<tr>
<td>Recreational services</td>
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<tr>
<td>Rehabilitation technology services</td>
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<td>Transportation services</td>
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<tr>
<td>Youth/transition services</td>
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<tr>
<td>Vocational services</td>
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<td>Other services</td>
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Table 5 will show each IL service’s annual percentage change and percentage share of total IL services
### Table 6
IL Goals Set/ Met for FY 2006 through FY 2010

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<tbody>
<tr>
<td>Self-advocacy self empowerment</td>
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<td>Mobility transportation</td>
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<td>Personal resource management</td>
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<td>Relocation (nursing home transition)</td>
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<td>Community social participation</td>
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<tbody>
<tr>
<td>Access to transportation</td>
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Tables 6A and 6B will show each SLA or Access goal category’s annual percentage change (based on the number of goals met), achievement ratio (goals met divided by goals set) and percentage share (number of goals as a percentage of all goals met within the respective goal category)
### Table 7
OIB Populations Served for FY 2006 through FY 2010

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<tr>
<th>A. Race/Ethnicity</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
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<tbody>
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<td>American Indian or Alaska Native</td>
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<tr>
<td>Asian</td>
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<tr>
<td>Black or African American</td>
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<tr>
<td>Native Hawaiian or Other Pacific Islander</td>
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<tr>
<td>White</td>
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<td>Hispanic/Latino of any race or Hispanic/Latino only</td>
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<tr>
<td>Race and ethnicity unknown</td>
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<td>Total</td>
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<table>
<thead>
<tr>
<th>B. Degree Of Visual Impairment</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Totally Blind</td>
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<tr>
<td>Legally Blind</td>
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<td>Severe Visual Impairment</td>
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<table>
<thead>
<tr>
<th>C. Major Cause of Visual Impairment</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
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<tbody>
<tr>
<td>Macular degeneration</td>
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<tr>
<td>Diabetic retinopathy</td>
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<tr>
<td>Glaucoma</td>
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<tr>
<td>Cataracts</td>
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<td>Other</td>
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<tr>
<td>Total</td>
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</tbody>
</table>

Tables 7A, 7B and 7C will show each population category’s annual percentage change and percentage of share of the respective population category total.
### Table 8
**OIB Services for FY 2006 through FY 2010**

<table>
<thead>
<tr>
<th>Services Received</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vision screening/vision examination/low vision evaluation</td>
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<tr>
<td>Surgical or therapeutic treatment</td>
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<tr>
<td>Provision of assistive technology devices and aids</td>
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<tr>
<td>Provision of assistive technology services</td>
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<tr>
<td>Independent living and adjustment skills training</td>
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<tr>
<td>Orientation and mobility training</td>
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<tr>
<td>Communication skills</td>
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<tr>
<td>Daily living skills</td>
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<tr>
<td>Supportive services</td>
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<tr>
<td>Advocacy training and support networks</td>
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<tr>
<td>Counseling</td>
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<tr>
<td>Information referral and community integration</td>
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<td>Total</td>
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</table>

Table 8 will show each service category’s annual percentage change and percentage share of total OIB services.