



CENTERS FOR INDEPENDENT LIVING

COMPLIANCE REVIEW REPORT

Independent Living Resource Center/DBA Mainstream Independent
Living Center

GRANT # H132A930061

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REHABILITATION SERVICES ADMINISTRATION

TABLE OF CONTENTS

I. PURPOSE OF THE ON-SITE MONITORING REVIEW	2
II. METHODOLOGY	2
III. MISSION AND DESCRIPTION	3
IV. ORGANIZATIONAL STRENGTHS AND EMERGING PRACTICES	3
V. OBSERVATIONS AND RECOMMENDATIONS	4
VI. FINDINGS AND CORRECTIVE ACTIONS	8

I. PURPOSE OF THE ON-SITE MONITORING REVIEW

Sections 706(c) and 722 of the *Rehabilitation Act of 1973*, as amended (*Rehabilitation Act*) mandate that the Rehabilitation Services Administration (RSA) conduct on-site reviews of Centers for independent living (CILs) funded under Title VII, Part C, Section 722. The objectives of on-site reviews are to:

- assess compliance with the requirements of Section 725(b) and (c)(3) of the *Rehabilitation Act* and 34 CFR 366.60-366.63;
- study program operations, organizational structure and administration of the CIL under Section 725(c)(1), (2), (5) and (6) of the *Rehabilitation Act* and 34 CFR 366.2 and 366.50;
- review documentation sufficient to verify the accuracy of the information submitted in the most recent 704 Annual Performance Report;
- verify that the CIL is managed in accordance with federal requirements in the Education Department General Administrative Regulations (EDGAR);
- assess CIL conformance with its work plan, developed in accordance with Section 725(c)(4) of the *Rehabilitation Act* and 34 CFR 366.50(d)(2), conditions of the CIL's approved application and consistency with the State Plan for Independent Living (SPIL);
- identify areas of suggested or necessary improvements in the CIL's programmatic and fiscal operation and provide technical assistance resources available on the local, state, regional and national level;
- identify areas of exemplary work, projects and coordination efforts and make this information available to the larger CIL community; and
- provide an opportunity to share information with experienced nonfederal individuals involved in the operations of CILs and make available technical assistance to enhance CIL operations or to minimize or to eliminate problem areas.

II. METHODOLOGY

The on-site review of the Mainstream Independent Living Center (Mainstream) in Little Rock, Arkansas was conducted on August 9-11, 2011. The program review covered the independent living (IL) operations and activities of Mainstream. The financial review examined the center's participation in Title VII, Part C, of the *Rehabilitation Act*. RSA used the On-Site Review Guide (ORG) to conduct the on-site review. During the review, interviews were conducted with the center's board of directors, management, staff, consumers, and stakeholders. In addition to the interviews, program and financial documents were reviewed in accordance with the protocol required by RSA's ORG, including a sample of consumer service records (CSRs), and other documents that verified compliance with standards and indicators. CSRs were selected for review on a random basis. The review team conducted an exit conference at the conclusion of the review to provide feedback on initial impressions from the review.

The RSA review team included the following individuals:

- Pamela Hodge, RSA program specialist; and,

- Frieda Kliewer, Executive Director, Sandra Beasley Independent Living Center, nonfederal reviewer

III. MISSION AND DESCRIPTION

The mission of Mainstream is to provide services, support and advocacy to enable persons with significant disabilities to live independently in the community. Mainstream serves Pulaski County and was first awarded a RSA grant under Title VII, Chapter 1, Part C, of the *Rehabilitation Act* in 1993.

In addition to the four core services, Mainstream is involved in the programs and projects described below on behalf of individuals with significant disabilities.

- **Pre-employment services** – Mainstream conducts employment workshops to increase consumers’ skills and awareness in: employment etiquette, employment discovery through job search, computer skills, cover letter and resume writing, employment marketing, networking, and interviewing skills.
- **Nursing Home Relocation** – Mainstream assists people with significant disabilities to relocate from a nursing home environment to live independently in the community. Funds for this program allow for rent and utility deposits, purchase of furniture and adaptive equipment, home modifications and other necessities for setting up a new household. Funds for this program are allocated through Money Follows the Person.
- **Home modification/ramp building services** – Mainstream receives Community Development Block Grant (CDBG) funds to build ramps and complete other modifications in consumers’ homes such as installation of grab bars and purchase of adaptive equipment. Volunteers from the Telephone Pioneers, a community-based organization, donate their time to build the ramps and complete other modifications in consumer homes.

IV. ORGANIZATIONAL STRENGTHS AND EMERGING PRACTICES

- Mainstream has a sound fiscal structure. Fiscal policies and procedures are well developed and implemented. There is a strong separation of duties for incoming checks and outgoing payments. Mainstream has a clear policy on the three-day transfer of CIL funds.
- Mainstream is well connected in the community and has developed partnerships with many organizations. Such organizations include: City of Little Rock, CDBG funds, Center for Medicaid and Medicare Services for Money Follows the Person (Nursing home transition), domestic violence organizations and Vocational Rehabilitation Services for employment.
- The staff of Mainstream demonstrated excellent knowledge, skills, and experience that enable them to assist consumers with the provision of services. One of the Mainstream staff has sign language skills and is able to assist consumers who are deaf with the provision of advocacy and other IL skills as well as information and referral services. Other Mainstream staff have various disabilities and serve as excellent role models and peer counselors. Many of the staff have received training on the IL history and

philosophy. Each staff member has a training plan and requests training pertinent to his/her job in advance.

V. OBSERVATIONS AND RECOMMENDATIONS

During its review activities, RSA identified the observations below and made recommendations that Mainstream may consider.

1. Board Training Plan

Observation: Mainstream does not have a training policy and/or plan for board members. The review team observed that some of the board members were not familiar with key components of their programmatic and fiscal oversight responsibilities, such as a review of the center's budget and expenditures. Members of the board are unfamiliar with the CIL's bylaws. Similarly, in interviews with board members, some were unable to describe the four core services mandated by the *Rehabilitation Act*.

Most of Mainstream's board members have served for at least one year and many have been reluctant to participate in training that will increase their understanding of CIL board roles and responsibilities. Ongoing board training has not occurred on an annual basis for several years.

Recommendation: RSA recommends that Mainstream:

- 1.1 develop a training policy and plan for all board members;
- 1.2 implement a plan for continuous board training regarding the grants management and financial requirements in EDGAR, OMB Circulars such as A-122, and Title VII of the *Rehabilitation Act*, including the Standards and Assurances in Section 725; and
- 1.3 participate in board training on the IL philosophy, such as what every new board member and executive director should know that includes background information on the history of the IL movement and program.

Technical Assistance: Courses available through the Independent Living Research Utilization (ILRU) and the Association of Providers of Rural Independent Living (APRIL) as well as participation in other workshops and conferences may be utilized to fulfill requirements established in the center's forthcoming training policy and plan.

Mainstream Response:

Mainstream's Board of Directors reviewed RSA's Site Review Team's Observations and Recommendations and have taken steps to implement their suggestions. The Executive Committee of the Board of Directors instructed the Executive Director to contact Richard Petty with ILRU to discuss acceptable training options for the Board to insure its ongoing compliance with EDGAR and Title VII of the Rehabilitation Act. After the Executive Director's discussion with Mr. Petty, Phase one of the corrective plan of action for the Board has been implemented. The plan will include members of the Board to go through an orientation process, which will include the history of Mainstream, the IL Philosophy and the history of the Independent Living Movement. The trainings will insure that each member understands the mission of the center and independent living.

The next phase of the Corrective Plan of Action includes bringing in trainers, who have the necessary expertise needed to train a non-profit Board, as well as those trainers who are knowledgeable of the IL philosophy and history as well as Board responsibilities to oversee programs and finances of the Center.

- 1.1 The Board along with the Executive Director is in the process of developing a Policy and Procedure Training Manual for all members. The Training Policy will be developed by April 24, 2012. In the meantime, the existing Board members have taken steps to educate themselves. The Board President is enrolled in an online class with ILRU that will start on January 30, 2012 and conclude on February 17, 2012. The title of the course is "Getting on Board!" The course level is introductory to intermediate. The Secretary Treasurer of Mainstream's Board will be taking "Financial Management for Centers for Independent Living" March 19, 2012 through April 6, 2012; this is also an online educational course offered by ILRU. The remainder of the Board is going to take Rapid Courses offered by ILRU, and the Course descriptions are as follows: History of Independent Living, Overview of the Rehabilitation Act of 1973, Roles and Responsibilities of IL Partners and the Statutory Basis and Purpose of the SPIL. These steps are being implemented to insure ongoing compliance and sustainability of the Center and its governing Board.
- 1.2 The training policy being developed will include a mechanism for ongoing training in reference to grant management and the financial requirements in EDGAR, OMB Circulars such as A-122 and Title VII of the Rehabilitation ACT, including the Standards and Assurances in Section 725.
- 1.3 As previously stated, existing and new Board members will be trained on the background information concerning the IL history and philosophy, the IL Movement, "consumer control" and the programs and core services offered by the IL Center. Mainstream's present Executive Director is very knowledgeable of Mainstream's history, the IL Movement and its history and the IL Philosophy. The Director does participate in ongoing training opportunities. The present Director has a keen awareness that knowledge is power and takes steps to enhance her educational skills to better serve persons with disabilities. The Training Plan will have professional steps to insure that any future Executive Director will receive the necessary trainings and supports needed to be an outstanding leader for Mainstream and the disability community.

2. Bylaws: Nomination Process

Observation: Mainstream's Board of Directors does not implement its written nomination/election process or its standing committees as indicated in Mainstream's bylaws. Page 12 of Mainstream's bylaws states that a nomination committee is comprised of the Board Chair and four other board members. The duty of the nomination committee is to solicit potential board members and nominate candidates to the board in advance of the annual meeting. 60 days prior to the annual meeting, the nomination committee requests invitations for new board candidates. Ballots listing a slate of candidates are sent to current board members 30 days prior to the annual meeting. The nomination committee collects the ballots and reports the results at the annual meeting. The written bylaws state that there are other standing committees, including personnel and finance committees. Board interviews revealed that board members were not familiar with the nomination/election process or the standing committees as outlined in

the bylaws. Nominations occur when board members identify potential candidates. Candidates complete applications. Potential candidates are invited to a board meeting and the Mainstream Board votes on that candidate. Board members do not participate in any committees as specified by the bylaws.

Recommendations: RSA recommends that Mainstream:

- 2.1 review the nomination/election process as written in Mainstream’s bylaws and determine if the board will implement the written process or change the way the board carries out its nomination/election activities.
- 2.2 review its standing committees as specified in Mainstream’s bylaws and determine if the committees will be implemented or eliminated.

Technical Assistance: Consult with other CILs and review their bylaws for effectiveness.

Mainstream Response:

- 2.1 Mainstream’s Board of Directors took RSA Site Review Team’s observations and recommendations under advisement and has taken the necessary steps needed to update the Center’s existing Bylaws. The Executive Committee of the Board has developed a draft of the Bylaws, and the nomination and election process has been addressed. The revised Bylaws will be presented to the entire Board for review and accepted on February 7, 2012. A draft of the revised Bylaws has already been submitted to the Board for comments and suggestions prior to the February meeting, so that they are prepared to vote on the revision.

Anticipated Completion Date: Mainstream’s Bylaws should be completed and in place as governing instrument by February 24, 2012

- 2.2 The Executive Committee directed by the Board has reviewed the Center’s existing Bylaws and has determined to eliminate the existing standing committees. In Article V Section 1 of the revised Bylaws, it states in reference to committees, that “the organization shall establish both permanent and temporary committees to properly administer the affairs of Mainstream.

Anticipated Completion Date: February 24, 2012

Mainstream did consult with and reviewed the Bylaws of other Centers, as well as other non-profit organizations that receive Federal funds, to assess their effectiveness. This was done to determine whether the revisions of the Center’s existing Bylaws would be workable, and to insure the accountability of the Board of Directors and the center’s staff.

3. Consumer Service Records (CSRs)

Observation: The review team observed that the narratives in the center’s CSRs provide minimal documentation about how Mainstream’s IL specialists facilitate the development and achievement of consumers’ IL goals.

Recommendation: RSA recommends that Mainstream develop procedures and training to enhance documentation related to how IL specialists facilitate the development and achievement of consumers’ IL goals.

Technical Assistance: Mainstream may wish to obtain training through ILRU and review of other CILs' CSR documentation.

Mainstream Response:

Mainstream was operating under the parameters that were recommended during the Center's 1998 RSA Site Review. Mainstream's CSR Form and IL Plan Form were updated in accordance with the instructions that were proposed by members of that Site Review Team (the team was composed of financial representative from RSA, a CIL Director, and an IL Person evaluated services and programs, and they were from the Regional 6 Office, then located in Dallas, TX). Their suggestions and recommendations were presented to Board of Directors and staff of Mainstream, during their exit interview. At the conclusion of that Site Review thirteen years ago, Mainstream's Board of Directors at that present time instructed the Executive Director and staff to implement their recommendations, and it was done to meet the requirements in reference to appropriate documentation.

Mainstream's staffers have received training from ILRU on previous occasions, and the staff did receive ongoing training pertaining to disability related issues, throughout the reporting period in question. Mainstream conducted an internal assessment of all the Center's Policy and Procedures Manuals and discovered that we do have an Independent Living Procedures Manual that was developed in May of 1993. The Manual covered services and documentation procedures for the programs offered by the Center to persons with significant disabilities.

The Center is in the process of updating that Manual to include in-depth steps on how to better collect and record the required CSR data. This is being done to insure documentation creditability as well as enhancing the Center's compliance standards for years.

Anticipated Completion date: The Manual will be updated and reviewed by the Board of Directors for their approval on or about April 30, 2012.

In an ongoing effort to increase Mainstream's advocates' documentation skills, which includes providing technical assistance to consumers as they develop their IL Goals and responsibilities, Mainstream purchased a new data collection system called Mi-CIL On October 1, 2011. Mi-CIL's software was developed by a Center Director, and the programmers monitor RSA 704 Report Requirements. The system is designed to collect the required data for the Annual 704 Report, which will eliminate the inconsistency of data recorded and documented from consumers such as the services provided to consumers, etc. in the data collection. The system is designed to assist the advocates with asking the appropriate questions and collecting the correct documentation, which will insure a greater degree of accountability on the part of the center and its staff. The system has the capabilities of being able to generate the appropriated forms at the time of the consumer's data being entered into the system. In addition, Mainstream has updated its Consumer Service Record Form and IL Plan Form to insure that it is in compliance with the EDGAR and the Rehabilitation Act of 1973 as Amended.

The staff of Mainstream has always been cautioned on documentation, and that will continue. Mainstream has attempted to send each new employee through ILRU's course "Orientation for New CIL/SILC Personnel", and that will continue. In addition, the Executive Director is meeting with the staff twice a week, which is a new procedure that was implemented after the Center's

Site Review in August. During these meetings, operational procedures are discussed, and the importance of documentation; this will also be an ongoing policy for the center.

The staff will continue to take online courses through ILRU and other trainings that promote the integrity of the agency and its mission. Each staffer will be required to take and participate in a minimal of four trainings per fiscal year, that will benefit the staffer as well as the population that we are mandated to serve.

Anticipated Completion Date: This will be an ongoing procedure to insure agency compliance according to the standards of our funding sources.

VI. FINDINGS AND CORRECTIVE ACTIONS

RSA identified the compliance findings below. Within 30 days of receipt of the final report, Mainstream must submit a corrective action plan (CAP) to RSA for review and approval. The CAP should include: (1) the specific corrective actions that the CIL will undertake in response to each finding; (2) the methodology that the CIL will utilize to evaluate if each corrective action has been effective; and (3) the timetable for the implementation and evaluation of the corrective action. RSA acknowledges the corrective actions addressed in the final report. RSA requests that Mainstream submit a separate document that includes the findings and corrective action steps that will be implemented by Mainstream in order to resolve any remaining issues.

Finding 1: 704 Part II Reporting of Consumer Demographics

Legal Requirement:

34 CFR 364.35

In addition to complying with applicable EDGAR recordkeeping requirements, the State plan must include satisfactory assurances that all recipients of financial assistance under parts B and C of chapter 1 of title VII of the *Rehabilitation Act* will maintain--

- 1) Records that fully disclose and document--
 - a) The amount and disposition by the recipient of that financial assistance;
- 2) The total cost of the project or undertaking in connection with which the financial assistance is given or used;
 - a) The amount of that portion of the cost of the project or undertaking supplied by other sources; and
- 3) Compliance with the requirements of chapter 1 of title VII of the *Rehabilitation Act* and this part; and
- 4) Other records that the Secretary determines to be appropriate to facilitate an effective audit.

34 CFR 364.36 With respect to the records that are required by Sec. 364.35, the State plan must include satisfactory assurances that all recipients of financial assistance under parts B and C of chapter 1 of title VII of the *Rehabilitation Act* will submit reports that the Secretary determines to be appropriate.

34 CFR 366.50(h) To be eligible for assistance under this part, an eligible agency shall provide satisfactory assurances that the applicant will conduct an annual self-evaluation, prepare an annual performance report, and maintain records adequate to measure performance with respect to the standards in subpart G.

34 CFR 366.50 (i) The annual performance report and the records of the center's performance required by paragraph (h) of this section must each contain information regarding, at a minimum (1) The extent to which the center is in compliance with the standards in section 725(b) of the *Rehabilitation Act* and subpart G of this part (Cross-reference: See Secs. 366.70(a)(2) and 366.73); (2) The number and types of individuals with significant disabilities receiving services through the center; (3) The types of services provided through the center and the number of individuals with significant disabilities receiving each type of service.

Facts and Analysis: The review of CSRs, data collection and recording practices of Mainstream demonstrated that the data reported by the CIL in the 704 Report Part II are not statistically accurate. Discussions with the CIL executive director and staff revealed that the inaccuracy in reporting was a result of unwritten policies and procedures for consistently recording and documenting the services staff provide to consumers. For example, there is a lack of recording of staff hours used to conduct outreach and community awareness activities. Some of this failure to document stems from technology breakdown, and some staff report activities or services differently.

CSRs reviewed by review team:

- 200 of 200 did not include documentation of consumer eligibility or ineligibility;
- 200 of 200 of the CSRs did not include a signed ILP or a waiver;
- 200 of 200 CSRs did not include the services provided; and,
- 200 of 200 did not indicate the goals established or achieved.

In view of the foregoing, it was not possible for the RSA team to substantiate Mainstream's 704 Annual Performance Report (704 Report) data related to the numbers of IL goals achieved, ILPs developed and waivers signed by consumers.

Finding: Mainstream is not in compliance with the requirements of 34 CFR 366.50(h) and 34 CFR 366.50 (i) because the review of CSRs, data collection, and recording practices indicated that the data submitted in Mainstream's FY 2010 704 Part II Report were not statistically accurate.

Corrective Action: Mainstream must take the steps necessary to report accurate data in its annual 704 Part II Report consistent with the requirements at 34 CFR 366.50(h) and 34 CFR 366.50 (i).

Technical Assistance: To achieve compliance with this finding, RSA encourages Mainstream to work with ILRU to correct reporting deficiencies. The CIL should conduct an assessment of all CSRs to determine those that are active and those that are inactive, and set up a filing system to maintain files in each category.

Mainstream Response:

Mainstream's Board of Directors and staff accept to a degree that the data submitted in the Center's 704 Report for Fiscal Year 2010 was not statistically accurate; however, the information that was reported was taken from our former data collection system. The system worked well for a number of years; therefore, there was no reason to suspect that the 704 information that it generated may have contained some faulty statistics. Mainstream did not intentionally submit substandard data. For over 23 years, the Center has strived to provide quality services to our consumers and other community stakeholders.

Mainstream has reviewed all of its existing files to determine, which files should be closed and which should remain open. A reorganization of the filing systems has been done to maintain the files in the appropriate categories of active or non-active.

A Corrective Action Plan was implemented on September 1, 2011. In the first phase of the plan, the Executive Director and the Business Manager reviewed each open consumer file to assess the status of the consumer and to see if the file should be closed or open. The files that needed to be closed were, and they were then filed in the appropriate place. The second phase of the plan was to have the Administrative Assistant to reorganize the file cabinet, to insure that files were in the correct filing drawer, and then those files were refiled in alphabetical order for easy access. To insure ongoing accountability of records, Mainstream's files are now reviewed at the time of intake, on a regular basis and before the consumer record is closed by the Executive Director. This process and procedure was fully implemented on October 1, 2011. Further, to insure going forward that Mainstream's entire consumer records are in compliance with EDGAR and all other guideline instruments, this will be an ongoing process.

Mainstream's management team will offer and provide ongoing training in reference to the importance of documentation and meeting the standards set for RSA as well as other grantors. As stated previously, Mainstream will contact ILRU when applicable to meet the Center's overall goals and objectives and to meet the standards of procedural compliance. Mainstream is fortunate enough to have had an ongoing working relationship with ILRU for a number of years.

Anticipated Completion Date: This step of the Corrective Action Plan has been put into action to assist the Center with maintaining its sustainability for those that we are mandated to serve. This will be an ongoing action step.

Finding 2: Consumer Service Record Documentation**Legal Requirement:**

34 CFR 364.53 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 CSR that includes: (a) documentation concerning eligibility or ineligibility for services; ... (c) either the IL plan developed with the consumer or a waiver signed by the consumer stating that an IL plan is unnecessary; (d) The services actually provided to the consumer; and ... (e) the IL goals or objectives established with the consumer, whether or not in the consumer's IL plan, and achieved by the consumer.

34 CFR 366.63(c)(2) The Center shall provide evidence in its most recent annual performance report that the Center maintains records on (i) the IL goals that consumers receiving services at the Center believe they have achieved; (ii) the number of Independent Living Plans (ILPs) developed by consumers receiving services at the Center; and (iii) the number of waivers signed by consumers receiving services at the Center stating that an ILP is unnecessary.

Facts and Analysis: Of the CSRs reviewed by the RSA team:

- 200 of 200 did not include documentation of consumer eligibility or ineligibility;
- 200 of 200 of the CSRs did not include a signed ILP or waiver;
- 200 of 200 did not indicate the services provided;
- 200 of 200 did not indicate the goals set or achieved.

Finding: Mainstream does not meet all the requirements of 34 CFR 364.53 because its CSRs did not include:

- documentation of consumers' eligibility or ineligibility, as required by 34 CFR 364.53(a);
- signed ILPs or waivers, as required by 34 CFR 364.53(c); (d) services provided as required by 364.53(e) and
- IL goals established and achieved by the consumer, as required by 34 CFR 364.53(e).

Corrective Action: Mainstream must take corrective action to ensure that the center documents consumers' eligibility or ineligibility, ILPs or waivers, services provided, and IL goals established and achieved.

Technical Assistance: To achieve compliance with this finding, RSA encourages Mainstream to work with ILRU to correct reporting deficiencies. In addition, RSA recommends that the corrective action include steps to develop the corresponding policies and procedures and to institute the appropriate training, supervision and quality control systems. Such systems would address the center's CSR documentation, goal-setting and goal achievement activities, and 704 Report data verification practices.

Mainstream Response:

Mainstream recognizes that the RSA Site Review Team concluded from their preliminary assessment that the Center did not meet all the requirements of 34 CFR 364.53 in reference to documentation for a consumer's eligibility or ineligibility for services. The Center further understands that the consumer files in some instances did not contain all necessary evidence that the Site Review Team was searching for in the physical file at the time of their initial review. However, Mainstream wishes to advise RSA that the Center's staff did provide the services as outlined in our 704 Report for Fiscal Year 2010. The files reviewed by the Site Review Team in August of 2011 may seemed to not have contained all the prerequisite information; however, the Center's data collection system (CILVER), which has been replaced, did contain the aforesaid information including CSR data, eligibility status and the consumers' goals and objectives. Therefore, the numbers that were reported for the abovementioned reporting period came from that system. Mainstream's Board of Directors and staff realizes that the Site Review Team wanted to see that vital information in the consumers' actual files. In addition, we understand that the Team did not have time nor an opportunity to review the consumer records as they appeared in the facilities' data collection system. The eligibility status of the consumers was and is still maintained electronically, and we were under the impression that was an acceptable way

to store information as outlined in the reporting regulations. Mainstream wants to re-emphasize, the information that was reported to RSA was accurate, based on the information CILVER the Center's former data system generated for the 704 Report.

A Corrective Action Plan has been put into operation, and all intake forms have been updated as of September 27, 2011. The Independent Living Plan now has a space where a consumer can check, if they wish to develop an IL Plan, or to waive the development of an IL Plan. The IL Plan Form contains a list of goals that a consumer may wish to achieve, and there is also a space for Mainstream's staff to indicate the type of technical assistance they will be providing to the consumer as well as their responsibilities in the process. In addition, to insure ongoing compliance there is a space for the consumers to identify whether or not they have a significant disability and are eligible for IL Services. Also a space is now provided for a person to check, if he or she is ineligible for IL Services. This is one of the recommendations made by the RSA Site Review Team and it has been implemented. Also, the IL Plan outlines the roles and responsibilities of the consumer as they receive services from Mainstream.

Effective August 25, 2011, every new consumer file is reviewed by the Executive Director to insure documentation compliance of that file. Each staff is required to report the status of the consumers every Friday during the end of week staff meeting. In addition, each staffer is required to submit a weekly report outlining their work activities for the week and the number of consumers that they had contact with during that week. This is an ongoing process since its implementation in August of 2011. If the Executive Director is out of the office, the Business Manager will conduct the meeting and collect the weekly reports. To further insure operational compliance of the center, there has been a restructuring of the Management Team.

The Executive Director reviews the information in the data system as well in an attempt to decrease human errors when entering the consumer's data and case notes. Mainstream has an ongoing working relationship with ILRU, and we will continue to work with ILRU to enhance the educational skills of the staff and how they collect data and interact with the target population that Mainstream services.

Mainstream now has a quality control system that requires the Executive Director to manually review every consumer file upon intake and before it is filed and closed. This is a change from the previous process of how new consumers' files were handled prior to August 11, 2011.

Anticipated Completion Date: Corrective action steps that have been taken will be ongoing to insure accountability.

Summary:

Mainstream, in reference to the RSA Site Review Findings, accepts them to a degree; however, we would like it noted in RSA's records that 229 consumers were served by the Center during the reporting period that was evaluated by the Team in August of 2011. The information reported in Fiscal Year 2010 on the 704 Report was factual to the best of our knowledge based on the data generated from the Center's electronic data collection system. The CSR information generated by the system indicated that those persons served were indeed eligible for Title VII Services. Mainstream accepts the fact that human errors were made and acknowledges that the Center has taken steps to correct those deficiencies. Mainstream, in its many years of operation, has reported

accurate report data and has never intentionally reported statistically inaccurate data to any funding source.

The Center has worked for over twenty years to maintain its integrity and effectiveness as a service provider and a community partner. Mainstream will accomplish all the corrective plan steps with ongoing monitoring by the Executive Director and fiscal oversight by the Board of Directors.

Mainstream does have staffer members who are very knowledgeable of the IL Philosophy, the IL Movement, Consumer Control, the mission of Mainstream and the importance of community integration. However, all of the staff was not interviewed during the Site Review. If all the staff had been interviewed, the Team would have received a greater insight on the expertise of the staff as whole instead of the fraction of information that was generated and placed in this report.

Mainstream will continue to consult with ILRU, University Of Arkansas CURRENTS, APRIL and other organizations that are knowledgeable about disability related issues. The Center's staff will be required to review EDGAR, OMB Circular A-122 and Title VII of the Rehabilitation Act, including the Standards and Assurances in Section 725. As previously stated, Mainstream's Plan of Action includes increasing the number of trainings that the staff participate in annually. In addition, Mainstream wants it noted in RSA's records that the staff is offered training opportunities on a continuous basis, and training is encouraged by the Center's Board of Directors and Executive Director.

Finally, to insure continued growth of the organization, Mainstream decided to respond to RSA's Site Review Observations, Recommendations and Findings in this Compliance Review Report Draft. Mainstream has included its planned action steps to acknowledge and bring into compliance all findings indicated in the report. This was done in order to eliminate going back and forth in the development of a final report. Mainstream wants to move forward with implementation of our ongoing changes. These change indicators will bring forth measurable outcomes to demonstrate the quality and quantity of the services Mainstream provides to consumers. Mainstream is putting forth a Plan of Action that will show our grantors the accuracy of all our services and programs.

Mainstream's Board of Directors and staff trust the action steps and programmatic explanation that have been presented in this report will facilitate an avenue for a satisfactory outcome for the Center and the population that we respectfully serve. Mainstream operates in a professional and ethical manner, and we want to re-emphasize that procedural fact in our answer to this Compliance Review Report.