CENTERS FOR INDEPENDENT LIVING
COMPLIANCE REVIEW REPORT

Disabled Citizens Alliance for Independence, Inc.

Viburnum, Missouri

Grant Award Number: H132A937004

REVIEW DATES: March 4-7, 2013
CIL Response: June 17, 2013
Final Report: August 8, 2013

REHABILITATION SERVICES ADMINISTRATION
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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 Disabled Citizens Alliance for Independence (DCAI) in Viburnum, Missouri was conducted March 4-7, 2013. The program review covered the independent living (IL) operations and activities of DCAI and 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 management, staff, consumers, volunteers, and members of the board of directors. In addition to the interviews, program, personnel, and financial documents were reviewed in accordance with the protocol required by RSA’s ORG, including written policies and procedures, 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:

- Deborah Cotter, RSA program specialist;
III. MISSION AND DESCRIPTION

DCAI’s mission is to empower people with disabilities to live independently. DCAI’s goals are to provide programs and services that give individuals with disabilities the choice to maintain independence in their homes and communities. The center serves Crawford, Iron, Dent, Reynolds, and Washington counties in western Missouri. DCAI was originally established in 1980, when it was first awarded a RSA grant under Title VII, Chapter 1, Part C, of the Rehabilitation Act.

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

- **Education:** DCAI Education staff work with students with disabilities, participating in Individualized Education Plan (IEP) meetings to enable students to achieve their educational goals. Adults with disabilities reported learning to read as a result of working with DCAI Education staff. One man, who was in his late 50s and had multiple disabilities, had recently earned his General Education Diploma (GED).
- **Consumer Directed Services (CDS):** This program, funded in part through a state Medicaid waiver, enables Medicaid-eligible individuals with disabilities to employ a personal attendant to assist them with activities of daily living. Consumers reported that they were pleased that DCAI trained them on how to hire their personal attendant and work with them to participate fully in the community. CDS not only affords independence to eligible individuals, but also increases the employment of people in the rural Viburnum area who serve as attendants. Moreover, the program income from CDS has enabled DCAI to grow rapidly into the second largest employer (98 full time equivalents), excluding personal care attendants (PCAs), in a seven-county radius.
- **Transportation:** DCAI has three vans, including one accessible to individual with wheel chairs and power scooters. Consumers reported being able to obtain transportation to and from medical appointments through DCAI’s transportation program. This service is funded by program income earned through the CDS Program.

IV. ORGANIZATIONAL STRENGTHS AND EMERGING PRACTICES

- **Backpacks in the Schools and CIL Staff Participation in Individualized Education Plans:** Using unrestricted funds, DCAI provides free backpacks to low-income students, so that the students not only receive free school supplies, but also free food every weekend throughout the year. Parents of school children in Viburnum who are in poverty not only receive school supplies at the start of the school year and food for their children every weekend but also learn about IL and other services for which they and/or their children may be eligible.

The local school superintendent reported that the combination of DCAI’s above-noted programs and services to low-income and disabled students enabled students with disabilities not only to learn about available IL services but also to better transition from
school to work and/or from school to secondary and postsecondary school. Several consumers of transition age and consumers who are in post-secondary education reported that they would not have advanced as far as they had without these DCAI school services.

V. OBSERVATIONS AND RECOMMENDATIONS

During its review activities, RSA identified the observations below and made recommendations that DCAI may consider to improve its overall operations and IL service delivery to consumers with significant disabilities.

1. Consumer Peer Support Groups

Observation: DCAI is located in a sparsely populated location where public transportation is nonexistent. DCAI staff and consumers reported that the majority of services are provided by DCAI staff travelling to consumers’ homes. Consumers who receive peer support services from staff but reported that they would like to meet other consumers. The location and environment make it difficult for consumers to meet in peer support groups. As a result, consumers do not have the opportunity to connect with one another at the center or other locations.

Recommendation: RSA recommends that DCAI consumers and staff consider other ways in which consumers may connect with other DCAI consumers to generate peer support groups. For example, consumers reported that if the center held events for consumers, they would try to participate to network with other consumers. Several consumers said they would appreciate the opportunity to be “matched” with other consumers and connect with each other by phone. Internet and email access are limited and cost prohibitive for consumers. As a result, phone communication between and among consumers may be a practical way of fostering consumer-to-consumer interaction and peer support.

DCAI Response: We appreciate the ideas and suggestions from our consumers. DCAI is in the process of scheduling meetings in the five counties we serve with invitations being sent to individuals with disabilities. These meetings will be to explain the services in which we provide as well as give consumers the opportunity to meet one another. Our Independent Living Department is presently reviewing to determine if other Peer Groups can be established in multiple locations.

RSA Response: RSA acknowledges DCAI’s consideration.

2. Increasing Communication through Cross Training

Observation: The RSA Review team found that staff in various departments throughout the center was unaware of what the other departments’ roles and functions included. Most reported that they are unable to assist when help is needed because of the lack of knowledge and training on other programs. As a result, consumers, too, were unaware of all IL services available to them through the center.

Recommendation: RSA recommends that DCAI board, management staff, including department heads, consider cross training staff not only to increase understanding and
communication across departments but also to ensure that all staff, especially front-line staff in all departments, is better able to address the needs of consumers. Moreover, all DCAI consumers would benefit from the four core services of information and referral, IL Skills training, peer support, and advocacy in terms of self-advocacy and systems change advocacy.

**DCAI Response:** All staff and board members have completed an IL History and Philosophy Training to help increase the awareness and knowledge of the IL services available to all consumers. An annual refresher on IL History and Philosophy will be provided with training certificates and documentation retained by the Human Resources Department. Employee trainings have been provided on Team Building, dealing with change, and interviewing skills. A new Pay for Performance process has been implemented which encourages all employees to develop their skills and knowledge on the services being provided by DCAI.

**RSA Response:** RSA appreciates DCAI’s responsiveness to the recommendation.

**3. Board Training Plan**

**Observation:** DCAI 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 the center’s budget and expenditures. The board indicated that it could have avoided some of the financial issues which they experienced and the CIL’s decreased respect in the community had it better understood its role and responsibilities. Most of DCAI’s board members have served for at least one year and ongoing board training has not occurred on an annual basis for several years. In interviews with board members, the RSA Review Team found that some were unable to describe the four mandated core services.

**Recommendation:** RSA recommends that DCAI develop and implement a training policy and plan for all board members, including training related to grants management and financial requirements in the EDGAR, OMB Circulars such as A-122, and Title VII of the Rehabilitation Act, including the standards and assurances in Section 725; and training on the IL philosophy, including the history of the IL movement.

**DCAI Response:** Please see current Board Training Plan provided (Attachment 1). As of to date each board member has completed Fiduciary Responsibilities Training and IL History and Philosophy Training. At each individual board meeting Department Heads and Senior Management are providing updates on services being offered by DCAI. Please see example certificates for the Fiduciary Responsibilities Training (Attachment 2) and IL History and Philosophy Training (Attachment 3) completed by the individual board members. Three of the current board members will be attending the Missouri Independent Living Summit in St. Charles, MO, June 23rd-June 25th, 2013.

**RSA Response:** RSA appreciates DCAI’s responsiveness to the recommendation. Thank you for providing the attachments, including the training plan, materials, and certificates of completion.
VI. FINDINGS AND CORRECTIVE ACTIONS

RSA identified the compliance findings below. Within 30 days of receipt of the final report, the CIL 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 reserves the right to pursue enforcement action related to these findings as it deems appropriate, including the recovery of funds, draw down restrictions, funds withholding, or grant terminations, pursuant to 34 CFR 74.60 and 34 CFR 74.62 of the Education Department General Administrative Regulations (EDGAR).

Finding 1: Conflict of Interest

Legal Requirement:

EDGAR 75.525. A grantee may not permit a person to participate in an administrative decision regarding a project if: (1) The decision is likely to benefit that person or a member of his or her immediate family; and (2) The person (i) Is a public official; or (ii) Has a family or business relationship with the grantee. (b) A grantee may not permit any person participating in the project to use his or her position for a purpose that is—or gives the appearance of being—motivated by a desire for a private financial gain for that person or for others.

Finding: DCAI is not in compliance with federal requirements at EDGAR 75.525 regarding conflicts of interest among staff members who are related to each other. Specifically, during the onsite, RSA observed the below which, taken together, indicates the appearance of partiality among board and staff members who are related with respect to hiring, supervision, performance evaluations, and compensation actions. Additionally, DCAI’s current policies and procedures and staff handbook do not include procedures that safeguard against conflicts, or the appearance of conflicts, involving family members.

- Forty-nine (49) of DCAI’s 98 staff members are related to one another. Of the 12 management staff positions, six were related to another manager or non-supervisory staff person. None had recused themselves from evaluating a subordinate relative’s performance and/or deliberating on personnel actions, such as suspension as a result of conduct or promotions.
- The board secretary is related to one non-supervisory staff member. Yet, in reviewing the board meeting minutes, there is no indication that the board secretary recused herself from board discussions which impacted the role and benefits of the employee who is her niece.
- Unrelated staff indicated that information was not communicated to them as it was to staff members who were related, such as information regarding career opportunities within the center and training opportunities. As a result, unrelated staff could not avail themselves to such opportunities as related staff.
- Policies and procedures do not address such conflicts of interest related to staff hiring, supervision, performance evaluation and compensation. As a result, the board and staff
reported that the center has been the subject of a number of Equal Employment Opportunity Commission complaints related to the appearance of partiality among relatives.

- The governing board had not exercised its oversight responsibility to develop and implement bylaws and policies and procedures to ensure impartiality and avoid conflict of interest among the board members and staff of the center. Staff indicated it felt the board was not ensuring that everyone was being treated in an equal and fair manner in regards to hiring, supervision, performance evaluations, and compensation.

**Corrective Actions:** DCAI must take the corrective actions necessary to safeguard against the appearance of and potential for conflicts of interest in its board governance and staff assignment practices by:

- establishing and implementing policies and procedures addressing the appearance of conflicts of interest and potential conflicts of interest, including family members involved in staff hiring, supervision, performance evaluations and compensation;
- re-establishing regular board evaluations of the executive director’s job performance, including provisions for board member recusal in the case of family members;
- increasing the governing board’s capacity to effectively and impartially exercise its oversight responsibilities, for example, through the recruitment of additional members, consideration of appropriate changes to its bylaws, development of written processes for identifying and recruiting prospective board members, and the establishment of a board training and development program for both current and new members; and
- establishing hiring policies and procedures to ensure the recruitment of the most qualified staff available, including public job opening announcements and impartial job applications review processes, and determining if applicants are related to current staff.

**DCAI Response:** The current Executive Director’s start date was October 16, 2012. All job openings, promotions, or training opportunities since October 16, 2012 have been communicated and open for all employees to apply with the exception of the current In-Home Supervisor to avoid direct reporting of one family member to another. There are no indications to substantiate the allegations being granted based on family relationships. All EEOC complaints that have been filed were by ex-employees with no current staff having filed a family preferential treatment allegation, with the complaints being released with no findings in merit.

All employees as well as board Policy and Procedures have been reviewed with appropriate changes being made since current Executive Director has been in place. An annual Conflict of Interest process has been established and approved by the board of directors. Each employee’s Conflict of Interest requires disclosure of employee family relationships, consumer and personal attendant family relationships, and any other business financial considerations being required. Please see sample copy of the employee Conflict of Interest form (Attachment 4) that is currently kept on each employee and board member by our Human Resources Department. Any areas addressed on the employee and board member Conflict of Interest form has been reviewed for determination if a conflict exists. The organizational reporting structure has been reviewed with several changes being made to reduce any possible conflicts of family relationships.
Currently the board Bylaws and Policies and Procedures have been reviewed by our legal attorney with proposed recommendations with approval received by board of directors. The board and Executive Director have established a Pay for Performance program which took place on April 1, 2013. The Pay for Performance program will see all employees and management personnel are evaluated on a consistent basis. Individual performance plans will be established annually with performance and self-development goals for every employee. The Executive Director has had all Department Heads complete an Evaluation of his performance. Please see attached two (2) Executive Director Performance Evaluations (Attachments 5.1 and 5.2). The board of directors has established an annual evaluation program for the Executive Director. A copy of the evaluation form is submitted for your review (Attachment 6).

Board members as well as management staff has been informed the importance of impartiality shown for any family members. In the June 10, 2013 board meeting, board members were informed of the importance of them being recused from making any decisions which could be alleged as showing partiality.

DCAI has established a new board member training and informational packet. Please see enclosed information which will be used in evaluating and selecting of new board members (Attachment 7). Currently the board has approved the addition of one additional board member with a focus of recruiting opportunities in the future.

DCAI has established an interviewing policy with the Human Resources Department, the hiring manager, and the next level of management being involved in the selection of candidates to be interviewed and present in the actual interviews of all prospective employees. The information, application, cover letter, resumes, and interview process are considered in selecting the most qualified candidate for any position open to the community or current employee staff.

**RSA Determination:** RSA agrees with this corrective action and appreciates DCAI’s swift action to address this issue. The RSA looks forward to reviewing DCAI’s ongoing efforts in the Corrective Action Plan to implement this policy and procedure.

**Finding 2: Staff Training Plan**

**Legal Requirement:**

34 CFR 364.24 - The State plan must assure that the service provider establishes and maintains a program of staff development for all classes of positions involved in providing IL services and, if appropriate, in administering the CIL program. The staff development program must emphasize improving the skills of staff directly responsible for the provision of IL services, including knowledge of and practice in the IL philosophy.

34 CFR 366.50(l) - To be eligible for assistance under this part, an eligible agency shall provide satisfactory assurances that—

(1) Staff at centers will receive training on how to serve unserved and underserved populations, including minority groups and urban and rural populations.
**Finding:** DCAI is not in compliance with 34 CFR 364.24 because it does not have a plan for staff training and development. DCAI does not have policies or procedures that address staff training. The staff indicated that there are spontaneous on-the-job trainings mostly regarding Social Security benefits. There are no specific staff orientations or periodic training on topics such as IL history or philosophy. Staff members indicated that job learning consists of questioning other staff as service provision issues arise. As a result of the lack of a training plan, staff training needs are not being met, particularly in the areas of board roles and responsibilities and IL philosophy.

**Corrective Action:** DCAI must take corrective action to establish and maintain a program of staff development for all classes of positions involved in providing IL services and, if appropriate, in administering the CIL program. The staff development program must emphasize improving the skills of staff directly responsible for the provision of IL services, including knowledge of and practice in the IL philosophy.

**Technical Assistance:** DCAI may consider including such topics as center board roles and responsibilities, nonprofit governance, IL philosophy and history, program development and evaluation, as well as fundraising and resource development. As part of its training and development process, DCAI may consider utilizing the training and technical assistance resources offered by the Independent Living and Resource Utilization, IL-NET.

**DCAI Response:** Employee training has been provided consistently for all employees in the past. Actual copies of certificates or training documentation has been a primary focus since our last review. Please see the Employee Training Plan (*Attachment 8*) that was established, along with sample copies of certificates of completion being kept in our Human Resources Department (*Attachment 9*). All staff has completed training on IL History and Philosophy, Team Building, adapting and adjusting to change, and explaining the importance of the new Pay for Performance Evaluation process. All employees are encouraged to establish performance and developmental objectives that will increase their skills and knowledge in their current position as well as the organization as a whole. An optional Effective Interviewing Training focusing on self-improvement and development of their careers was offered to each employee.

**RSA Determination:** RSA agrees with this corrective action and asks you to submit your staff development program in your Corrective Action Plan.
Center for Independent Living (CIL)

On-Site Review Instrument

Fiscal Year: 2013
Name of Grantee: Disabled Citizens Alliance for Independence
Grant #: H132A937004
State: Missouri

Rehabilitation Act of 1973, as amended
Title VII, Chapter I, Sections 706 and 722 – CIL Program
Part I
STANDARDS, INDICATORS AND ASSURANCES FOR CILS

The following questions are based on the CIL standards, indicators and assurances as required in Title VII of the Rehabilitation Act and the corresponding regulations. Unless otherwise noted, a “no” response indicates that the CIL did not demonstrate minimum compliance with the corresponding standard, indicator or assurance. A “no” response will be the basis for a corresponding finding in the report. The term recommended practice denotes a practice that, although not explicitly required by federal law or regulations, would, if followed, further the purpose of the independent living (IL) program.

I. Grantee is an Eligible Agency
Section 725(c)(1) of the Rehabilitation Act; 34 CFR 364.4(b)

Yes The CIL meets the definition of eligible agency as defined in the statute and regulations.

Verification Source: IRS 990; articles of incorporation; interviews with consumers, board, and staff, review of documents; observation by review team; and 704 Report data and consumer service records

II. Standards and Indicators
Section 725(b) and (c)(3) of the Rehabilitation Act; 34 CFR Part 366, Subpart G; 704 Report, Part II

The purpose of this subpart is to measure the extent to which the CIL is in compliance with the standards and assurances in Section 725(b) and (c) of the act.

Compliance Indicator I – Philosophy
Section 725(b)(1) of the Rehabilitation Act; 34 CFR 366.63(a)

Consumer Control
Sections 702(2), 725(b)(1)(A) and 725(c)(2) of the Rehabilitation Act; 34 CFR 366.63(a)(1)

(a) Governing Board
Sections 725(b)(1)(A) and 725(c)(2) of the Rehabilitation Act; 34 CFR 366.50(b) and 366.63(a)(1)(i)(A)

Verification of Consumer Control

_8_ Number of persons on the governing board.

_7_ Number of governing board members with significant disabilities.

Yes Is line (ii) over 50 percent of line (i)?
Recommended Practice:

_1_ Number of members from minority groups on the governing board.

Yes Verification that the CIL Board is the Principal Decision-Making Body
The CIL board is the principal governing body of the CIL, as evidenced, for example, by its bylaws, policies and procedures, and other practices ensuring that policy decisions are vested with the governing body.

Recommended Practices:

Yes The CIL has policies and procedures specifying board members’ roles and responsibilities.

Yes The CIL has a written process for identifying and recruiting board members.

Verification Sources for Governing board: bylaws, policies and procedures, and interviews with the Board and Management staff.

(b) CIL Employees
Sections 725(b)(1)(A) and 725(c)(6) of the act; 34 CFR 366.63(a)(1)(i)(B)

<table>
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<th>CIL Employees</th>
<th>Total Persons</th>
<th>Persons with Disabilities</th>
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<tr>
<td>Decision-making positions</td>
<td>17</td>
<td>15</td>
</tr>
<tr>
<td>Other staff positions</td>
<td>77</td>
<td>53</td>
</tr>
</tbody>
</table>

Yes Over 50 percent of the CIL’s employees in decision-making positions are filled by individuals with disabilities.

Yes Over 50 percent of staff positions are filled by individuals with disabilities.

Recommended Practice:

_0_ Number of minority employees (decision-making and other staff positions)

Verification Sources for CIL Employees: Staff organizational chart, staff roster, interviews with staff, and observation by review team.

Self-help and Self-advocacy
Section 725(b)(1)(B) of the Rehabilitation Act; 34 CFR 366.63(a)(2)

Yes The CIL promotes self-help and self-advocacy among individuals with significant disabilities.

In this instance, “minority” refers to members of racial or ethnic groups that have been traditionally underrepresented.
Verification Sources for Self-help and Self-advocacy: Interviews with consumers, Board, staff, and community stakeholders.

**Development of Peer Relationships and Peer Role Models**

*Section 725(b)(1)(C) of the Rehabilitation Act; 34 CFR 366.63(a)(3)*

Yes The CIL promotes the development of peer relationships and peer role models among individuals with significant disabilities.

Verification Sources for Development of Peer Relationships and Peer Role Models: Interviews with consumers, board, and staff; and review of Consumer Service Records (CSRs).

**Equal Access**

*Section 725(b)(1)(D) of the Rehabilitation Act; 34 CFR 364.23(b) and 366.63(a)(4)(5)*

Yes Ensures equal access of individuals with significant disabilities, including communication and physical access, to the CIL’s services, programs, activities, resources and facilities, whether publicly or privately funded. *Equal access, for purpose of this question, means that the same access is provided to any individual with a significant disability regardless of the individual’s type of disability.*

Yes Advocates for and conducts activities that promote the equal access to all services, programs, activities, resources and facilities in society, whether public or private, and regardless of funding source, for individuals with significant disabilities. *Equal access, for the purposes of this question, means that the same access provided to individuals without disabilities is provided in the center’s service area to individuals with significant disabilities.*

Yes To the maximum extent feasible, makes available personnel able to communicate with individuals with significant disabilities who rely on alternative modes of communication (manual communication, nonverbal communication, Braille, audiotapes, etc.) and who apply for or receive IL services.

Yes To the maximum extent feasible, makes available personnel able to communicate in the native languages of individuals with significant disabilities whose English proficiency is limited and who apply for or receive IL services.

Yes Makes available in alternate formats, as appropriate, all of its written policies, materials and IL services (e.g., Braille, large print, audio tape).

Yes The CIL is physically accessible for individuals with significant disabilities, for example, individuals with mobility disabilities (e.g., signage, doors, bathrooms, parking lots) or individuals with Environmental Illness and Multiple Chemical Sensitivity (e.g., no-fragrance policy or use of “green” cleaners).
The CIL ensures communication access for individuals with significant disabilities by using, for example, TDDs/TTYs for individuals with hearing disabilities or picture boards and/or other means of communication for individuals with cognitive disabilities.

Types of reasonable accommodation:

<table>
<thead>
<tr>
<th></th>
<th>Full-time</th>
<th>Part-time</th>
<th>Upon Request</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interpreters are available at the CIL.</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Readers are available at the CIL.</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Personal attendants are available at the CIL.</td>
<td>X</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Verification Sources for Equal Access: Interviews with consumers, Board, and staff, and review of documents.

**Compliance Indicator 2- Provision of Services on a Cross- Disability Basis**

*Section 725(b)(2) of the Rehabilitation Act; 34 CFR 366.63(b)*

Yes Provides IL services to eligible individuals or groups of individuals without restrictions based on the particular type or types of significant disability of an individual or groups of individuals, unless the restricted IL service (other than the IL core services) is unique to the significant disability of the individuals to be served, e.g., Braille instruction for persons who are blind.

Yes Provides IL core services to individuals with significant disabilities in a manner that is neither targeted nor limited to a particular type of significant disability.

Yes Provides IL services to individuals with a diversity of significant disabilities and individuals who are members of populations that are unserved or underserved by programs under Title VII of the act.

Verification Sources for Provision of Services on a Cross-Disability Basis: 704 Report data, observation by review team, and interviews with consumers, board, and staff.

**Compliance indicator 3 – Independent Living Goals**

*Section 725(b)(3) of the Rehabilitation Act; 34 CFR 366.63(c); 34 CFR 364.52; 34 CFR 364.53*

Yes The CIL maintains a consumer service record (CSR) for each consumer.

The CSRs contain:

Yes Documentation showing that the individuals are eligible or ineligible for services (only those eligible are served).
Yes  Written Independent Living Plans (ILPs) or written waivers from the consumers stating that ILPs are unnecessary.

Yes  Information on the services requested by, and the services provided to, or arranged for, the consumers.

Yes  The IL goals or objectives established with the consumers, whether or not in the ILPs.

Yes  The goals or objectives the consumers believe they have achieved.

The CIL maintains documentation on:

Yes  CIL notification to consumers of their right to develop, or waive the development, of an ILP.

Yes  The number of ILPs developed by consumers receiving services from the CIL.

Yes  The number of waivers signed by consumers receiving services from the CIL stating that an ILP is unnecessary.

Yes  The CIL’s facilitation of the development and achievement of IL goals selected by individuals with significant disabilities who request assistance from the CIL.

Yes  The CIL’s provision of opportunities for consumers to express satisfaction or dissatisfaction with the CIL’s services and policies and documentation the CIL sends any results to its governing board and the appropriate SILC.

The ILPs:

Yes  Indicate the goals or objectives established, the services to be provided and the anticipated duration of the services.

Yes  Are developed jointly and signed by the appropriate CIL staff member and the individual with a significant disability/legally authorized representative.

Yes  Are provided in accessible formats, as needed.

Yes  Are reviewed at least annually to determine whether services should be continued, modified or discontinued and/or whether the individual should be referred to another program, including VR, developmental disability or special education individualized plans as appropriate.

Recommended Practice:

Yes  The CIL has written CSR management policies and procedures.

Verification Sources for Independent Living Goals: Review of CSRs, comparison with electronic database, and interviews with staff.
Compliance Indicator 4 – Community Options and Community Capacity
Section 725(b)(4), (6), and (c)(10) of the Rehabilitation Act; 34 CFR 366.63(d)

The CIL performed at least one activity in each of the following categories during the reporting year: FY 2011

Yes Community advocacy.
Yes Technical assistance to the community on making services, programs, activities, resources and facilities in society accessible to individuals with significant disabilities.
Yes Public information and education.
Yes Aggressive outreach to populations of individuals with significant disabilities that are unserved or underserved by programs under Title VII of the act in the CIL’s service area.
Yes Collaboration with service providers, other agencies, and organizations that could assist in improving opportunities for individuals with significant disabilities to avail themselves of the services, programs, activities, resources and facilities in the CIL’s service area.
Yes Did the CIL’s outreach to unserved or underserved populations include minority groups and urban and rural populations?

Verification Sources for Community Options and Community Capacity: interviews with consumers, board, staff, and stakeholders; review of outreach materials, including Web site and brochures; and review of CSRs.

Compliance indicator 5 – IL Core Services and Other IL Services
Section 725(b)(5) of the Rehabilitation Act; 34 CFR 366.63(e); 34 CFR 364.51(b)(2)(iii); 34 CFR 364.58

Yes The CIL provides information and referral services to all individuals who request this type of assistance from the CIL in accessible formats.

The CIL provides the following services in response to requests from individuals with significant disabilities who are eligible for IL services:

Yes Independent living skills training.
Yes Peer counseling (including cross-disability peer counseling).
Yes Individual and systems advocacy.
Yes A combination, as appropriate, of any two or more of the IL services defined in Section 7(18)(B) of the act.

The CIL maintains documentation regarding notification of applicants and consumers about:

Yes Policies and procedures, including accessible formats, to obtain review of decisions made by the CIL concerning requests for/provision of IL services.
Yes The availability of the Client Assistance Program (CAP) and how to contact the CAP, including accessible formats.

Verification Sources for IL Core Services and Other IL Services: Interviews with consumers, board, and staff, CIL brochures and Web site, and review of CSRs.

Compliance indicator 6 – Resource Development
Section 725(b)(7) of the Rehabilitation Act; 34 CFR 366.63(e)

Yes The CIL during the reporting year conducted resource development activities to obtain funding from sources other than Chapter 1, Title VII, of the act.

Verification Sources for Resource Development Activities: Interviews with community stakeholders, board, and staff; and review of financial documents and contracts.

III. Program and Financial Planning Objectives
Section 725(c)(4) of the Rehabilitation Act; 34 CFR 366.50(d)

Yes The CIL has established annual and three-year program and financial planning objectives.
Yes The objectives include the CIL’s goals and mission.
Yes The CIL has a current work plan for achieving the goals or mission and has included specific activities to meet the requirements in the indicators.
Yes The work plan includes specific services, priorities and types of services to be provided.
Yes The objectives and work plan are consistent with the current SPIL.

Recommended Practices:

Yes The work plan includes objectives and goals for obtaining or increasing non-Title VII funding.
No The work plan addresses board, staff and/or volunteers training.
Verification Sources for Program and Financial Planning Objectives: Interviews with board, staff and review of documents, including the five year strategic plan and new Executive Director’s Performance Plan for the first six months of his tenure.

IV. 704 Report Accuracy and Documentation
Section 725(b)(c) of the Rehabilitation Act; 34 CFR 366.50(h)(i)

Yes The CIL has implemented internal controls and procedures (including quality assurance) to ensure 704 Report accuracy and documentation.

Yes Based on the CSRs, consumer lists, physical files and other documentation reviewed by RSA, the funding sources and amounts, CSR data (number of consumers, consumer demographics, ILPs and waivers, IL services and goals), standards and assurances compliance and other information in the most recent 704 Report are accurate and complete.
Part II

ORGANIZATION AND ADMINISTRATION OF THE CIL

V. Organizational and Personnel Practices
Sections 704(m)(2) and 725(c)(5) of the Rehabilitation Act; 34 CFR 364.31; 34 CFR 366.50(e)

Yes The CIL uses sound organizational and personnel assignment practices (including organizational chart indicating lines of authority, job descriptions, performance appraisals).

Yes The personnel practices include affirmative action to employ and advance in employment qualified individuals with significant disabilities.

Recommended Practice:

Yes The CIL has personnel policies addressing such areas as wage and salary, fringe benefits, vacation and sick leave, etc.

Verification Sources for Organizational and Personnel Practices: Interviews with board, staff, and review of documents, including policies and procedures.

VI. Staff Development and Training
Section 725(c)(11) of the Rehabilitation Act; 34 CFR 364.23(a); 34 CFR 364.24; 34 CFR 366.50(l)

No The CIL includes personnel who are specialists in the development and provision of IL services and in the development and support of centers.

No The CIL has established and maintains a program of staff development for all classes of positions involved in providing IL services and, where appropriate, in administering the CIL program.

No The staff development program is directed at improving the skills of staff directly responsible for the provision of IL services, including knowledge of and practice in the IL philosophy.

No The staff receives training on how to serve unserved and underserved populations, including minority groups and urban and rural populations.

Recommended Practice:
No The CIL has a governing board training and development program.

Verification Sources for Staff Development and Training: Interviews with Board and staff, and review of documents, such as personnel files.

VII. Conflict of Interest
EDGAR 34 CFR 75.525

No The CIL safeguards against a person (employee, board member, volunteer) to participate in an administrative decision regarding a project if the decision is likely to benefit that person or a member of his or her immediate family and that person is a public official or has a family or business relationship with the CIL.

No The CIL safeguards against any person in the project to use his or her position for a purpose that is, or gives the appearance of being, motivated by a desire for a private financial gain for that person or for others.

Verification Sources for Conflict of Interest: Policies and procedures, Employee Handbook, and interviews with staff and Board.

VIII. Confidentiality
34 CFR 364.56(a)

Yes The CIL has adopted and implemented policies and procedures to safeguard the confidentiality of all personal information, including photographs, publicity releases and lists of names that comply with 34 CFR 364.56(a) requirements including but not limited to:

Yes protecting current and stored personal information.

Yes informing IL applicants or consumers, authorized representatives, service providers and others, as appropriate, about the confidentiality of personal information and the conditions for gaining access to and releasing this information.

Recommended Practice:

Yes The CIL has meeting space that ensures that consumers’ confidentiality is protected when meeting with staff.

Verification Sources for Confidentiality: Interviews with consumers, staff, and board, and review of documents.
IX. Drug-Free Workplace
EDGAR 34 CFR 84.200 – 84.230

Yes The CIL conforms to the requirements of a drug-free workplace.

A statement is published notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of controlled substances is prohibited at the CIL and specifying the action that will be taken against employees for violating the prohibition.

Yes The CIL has established an ongoing drug-free awareness program.

Yes Each grant-funded employee has been given a copy of the prohibition statement, including a notification that conditions of employment at the CIL require abiding by the statement and informing the director of the CIL of any convictions under a drug statute.

N/A The CIL has taken appropriate personnel action against employees or has required employees to participate in drug abuse assistance program or rehabilitation program if such employees were convicted under a criminal drug statute conviction.

Verification Sources for Drug-Free Workplace: Policies and Procedures, interviews with Board and staff, and review of documents, including personnel files.

X. Insurance Coverage
EDGAR 34 CFR 74.31

Yes The CIL has insurance coverage for real property and equipment acquired with federal funds equivalent to that provided for property owned by the grantee.

Verification Sources for Insurance Coverage: Interviews with staff, and review of documents, including insurance policy.

XI. Nondiscrimination
EDGAR 34 CFR 75.500

Yes The CIL does not deny services to persons on the basis of their race, color, national origin, sex, age or the existence of a disability.

Verification Sources for Nondiscrimination: Interviews with consumers, Board, staff, and review of documents, including policies and procedures.

XII. Prohibition Against Lobbying
EDGAR 34 CFR 82.100; 2 CFR 230, Attachment B, Item 25
Yes  The CIL has on file a signed and dated copy of the Certification of Lobbying Form ED-80-0013 against using federal funds to influence or attempt to influence any federal agency or Congress through lobbying activities as described in 2 CFR 230, Attachment B, Item 25 and EDGAR 34 CFR 82.100.

Recommended Practice:

Yes  Incorporates provisions consistent with 2 CFR 230, Attachment B, Item 25 safeguarding against lobbying in its written policies and procedures.
Part III

GRANTS MANAGEMENT

XIII. Sources and Amounts of Funding (as verified by the review team)

- (A) Title VII, Ch. 1, Part B: $0
- (B) Title VII, Ch. 1, Part C: $380,539
- (C) Title VII, Ch. 2: $0
- (D) Other Federal Funds: $0
- (E) State Government Funds: $76,655
- (F) Local Government Funds: $0
- (G) Foundations, Corporations, or Trust Grants: $6,250
- (H) Donations from Individuals: $0
- (I) Membership Fees: $0
- (J) Investment Income/Endowment: $57,591
- (K) Fees for Service (program income, etc.): $22,756,428
- (L) Other Resources (in-kind, fundraising, etc.): $7,847

Item 4 - Total Income

Total income = (A)+(B)+(C)+(D)+(E)+(F)+(G)+(H)+(I)+(J)+(K)+(L) = $23,285,310

Item 5 - Pass Through Funds

Amount of other government funds received as pass through funds to consumers (include funds received on behalf of consumers that are subsequently passed on to consumers, e.g., personal assistance services, representative payee funds, or Medicaid funds) = $16,754,258

Net Operating Resources

Total Income (Section 4) <minus> amount paid out to consumers (Section 5) = Net Operating Resources = $6,531,052
Grant Related Income

34 CFR 364.6; EDGAR 34 CFR 74.2 and 74.24

Yes If program income is generated with federal funds, such income is used for allowable and approved purposes.

Verification Sources for Grant Related Income: Interviews with staff and Board, and review of financial documents, including general ledger.

Budget

EDGAR 34 CFR 74.21, 74.25, 75.702 and 75.730

Yes Expenditures are recorded by budget cost category and funding sources.

Yes Procedures are followed to assure expenditures are consistent with the approved budget of the CIL.

Yes CIL requests prior RSA approval for budget and program plan revisions, when required under EDGAR 74.25.

Verification Sources for Budget: Review of financial documents, including ED-524, Board meeting minutes, and interviews with board and staff.

XVI. Personnel Cost Allocation

2 CFR 230, Attachment B, Item 8(m)(1)

Yes Salaries and wages are charged based on documented payrolls approved by a responsible official.

Yes The distribution of salaries and wages are supported by personnel activity reports described in 2 CFR 230 Appendix B, Item 8(m)(2) and reflecting an after-the-fact determination of the actual activity of each employee.

Yes The CIL maintains reports reflecting the distribution of activity of all staff members whose compensation is charged to the award.

XVII. Fiscal Management

EDGAR 34 CFR 74.21, 74.22, 74.52, 75.702, 75.707, 75.730; 2 CFR 230 Appendix A, Paragraph D

The CIL’s financial management systems provides for the following:

Yes Accurate, current, and complete disclosure of the financial results of each federally-sponsored project in accordance with the reporting requirements of the
SF-425 financial status report, including program income, federal and recipient shares of expenditures, indirect costs, etc.

Yes  Records that identify adequately the source and application of funds for federally-sponsored activities.

Yes  Effective control over and accountability for all funds, property and other assets in order to safeguard all assets and ensure they are used solely for authorized purposes.

Yes  Comparison of outlays with budget amounts for each award.

Yes  Written procedures that minimize the time between the transfer of funds and the disbursement of funds by the recipient.

Yes  Written procedures for determining the reasonableness, allocability and allowability of costs.

Yes  Accounting records, including cost-accounting records, supported by source documentation and entries are made on a timely basis.

Name/Title of person responsible for preparation of the SF-425: Gina Gray, Finance Director

Yes  The CIL has an approved U.S. Department of Education cost allocation plan (CAP) or indirect cost rate.

Yes  The CIL distributes administrative costs among its various funding sources in an equitable manner as described in the CIL’s approved CAP or indirect cost rate.

Verification Sources for Fiscal Management: Interviews with Chief Financial Officer and separately with Payroll department staff, review of payroll and accounting documents, including Personnel activity Records, Grant ledger, and receipts.

XVIII. Accounting Systems
EDGAR 34 CFR 74.21

Yes  The organization maintains a formal accounting system.

If the accounting system is computerized, identify the accounting program software used: Sage by Peach Tree.

The elements of the formal accounting system are (check as appropriate):

___ General Ledger
___ Grant Ledger
___ General Journal
X__ Cash Receipts

Describe other(s):

The formal accounting system is maintained by (check as appropriate):

X__ Cash basis
___ Accrual basis

Describe other(s):

Verification Sources for Accounting Systems: Interviews with staff, review of financial
documents, including bank statements and Sage by Sage by Peach Tree.

XIX. Travel Costs
EDGAR 34 CFR 74.27; 2 CFR 230, Attachment B, Item 51(b)

Yes        Travel costs incurred by employees and officers are reasonable and allowable,
i.e., do not exceed charges allowed under the CIL’s written travel policy or, in the
absence of such a policy, as provided in 2 CFR 230, Attachment B, Item 51(b).

Yes        Travel costs reimbursement requests for federal funds are justified and
documented, e.g., through travel authorizations, receipts, etc, in accordance to the
CIL’s travel policy.

The policy provides for reimbursement by (check as appropriate):

____ (1) Actual expenses
____X_ (2) Per diem

Verification Sources for Travel Policies: Review of fiscal documentation, including travel
reimbursements, and interviews staff.

XX. Procurement
EDGAR 34 CFR 74.21 and 74.40 - 74.48

Yes        The CIL has written procurement procedures complying with EDGAR 34 CFR
74.44.

Yes        The procurement procedures give adequate consideration to costs, quality,
delivery, competitive bidding, inspection and acceptance, as well as
reasonableness, allocability and allowability of costs.

Yes        The procurement procedures address the 34 CFR 74.42 – 74.48 requirements
including written contract award and administration code of conduct; open and
free competitions; cost and price analysis; records and files; contractor conformance/performanc.

Yes There is separation of responsibility for the authorization for purchasing and the subsequent payment. For example, payments are made only if disbursements or checks are countersigned.

Yes Payment vouchers are identified as to funding sources, expense classification and transaction date.

The executive staff/board approval is needed for items over: $10,000 $500.00 requires two signatures.
The person(s) responsible for purchasing equipment and supplies: Assistant Director

Verification Sources for Purchasing: Review of policies and procedures and interviews with staff.

XXI. Property
EDGAR 34 CFR 74.34(f) and (g), 74.44(a)

Yes The CIL maintains current and complete records of all property purchased with grant funds.

Yes The CIL has a system for controlling inventory (general ledger control account, card reports, property labels).

Yes Maintenance of property and equipment records are kept.

Yes Records contain: description of each piece of equipment; purchase date/cost; manufacturer’s serial number, model number, federal stock number, national stock number, or other ID number; source of equipment award number; where title vests; information from which federal participation can be calculated; location and condition of the equipment, date information was reported; and ultimate disposition.

Yes The CIL inventories property at least once every two years.

Date of last inventory: 2 years ago inventoried capital listing.

Yes Adjustments to inventory accounts are made only on written authority of a designated official.

Name/Title of designee: Dennis Atkins, Executive Director.

Yes The CIL guards against loss, damage or theft of property. DCAI has surveillance cameras. The offices are locked and surveillance footage is reviewed on a regular basis.
Yes The CIL has policies, procedures and controls for purchasing and disposing of property.

Verification Sources for Property: Interviews with staff, review of insurance policy, and observation of security system by review team. Executive Director signs for items leaving inventory.

XXII. Conferences and Meetings
2 CFR 230; Memorandum to Grantees Regarding the Use of Grant Funds for Conferences and Meetings, U.S. Department of Education, June 2012 (GAN Enclosure 7)

Yes The CIL ensures (e.g., through written polices or procedures) that, when hosting a conference or meeting, Part C or other federal funds are not used to purchase:
- food for attendees unless doing so is necessary to accomplish legitimate meeting or conference business;*
- alcoholic beverages; or
- entertainment (amusement, diversion, social activities, etc.)*

* This prohibition does not apply to social and recreational services described in 34 CFR 364.4 and related to IL goal(s) in a consumer’s CSR, such as peer support meetings.

XXIII. Records Retention
34 CFR 364.53; EDGAR 34 CFR 74.53(b); EDGAR 34 CFR 75.730

Yes Financial, consumer records and other documentation are maintained and retained for a period of three years in accord with federal requirements.

Verification Sources for Records Retention: Interviews with staff and observation by review team.

XXXIV. Audit
EDGAR 34 CFR 74.26

Yes The CIL expended $500,000 or more in federal awards during the reporting year.

Yes If “Yes” above, an annual nonfederal audit including funds received under Title VII, Chapter 1 of the act has been conducted and a copy thereof submitted to the Federal Audit Clearinghouse, as required.

Verification Sources for Audit: Interviews with staff and review of fiscal documents.