



CENTERS FOR INDEPENDENT LIVING COMPLIANCE REVIEW REPORT

Pathways for the Future: DBA Disability Partners

Grant Award Number: H132A950032 (Sylva)
H132A990010 (Asheville)

REVIEW DATES: May 14-17, 2012

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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 monitoring review of Pathways for the Future (Pathways), operating separate centers in Sylva (Pathways/Sylva) and Asheville (Pathways/Asheville), North Carolina, was conducted May 14 -17, 2012. RSA initially funded the Pathways/Sylva and later made a second Part C grant award to operate a separate center in Asheville with the same governing board. The Asheville center has an advisory board with one of its members serving on the governing board in Sylva. The program review covered the independent living (IL) operations and activities of Pathways for the Future/Sylva and Asheville, and the financial review examined the centers' 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 centers' management, staff, and members of the board of directors.

In addition to the interviews and meetings, program 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. RSA

conducted an exit conference at the conclusion of the onsite meetings to provide feedback on initial impressions from the review.

The RSA review team included the following individuals:

- Deborah A. Cotter, RSA Grants Management Specialist; and
- Lillian Burch, non-federal reviewer.

III. MISSION AND DESCRIPTION

The mission of Pathways/Sylva and Asheville is to partner with individuals and the community to enhance, advocate for and support personal choices, independent living and community inclusion.

The original Pathways/Sylva grant, H132A950032, serves Cherokee, Clay, Graham, Haywood, Jackson, Macon and Swain Counties. Pathways/Asheville, H132A990010, serves Buncombe, Henderson, Madison, McDowell, Polk, Rutherford, and Transylvania counties.

IV. ORGANIZATIONAL STRENGTHS

Accreditation: Both centers were accredited by the Commission on Accreditation of Rehabilitation Facilities to provide targeted case management under a state Medicaid waiver. This accreditation helps to promote sound organizational structure and practices that benefit across all CIL programs, including Independent Living core services.

CyberPals: Through this program at both centers, consumers and volunteers of Disability Partners participate in an on-line peer support network. This is accomplished through the Secret Group on Facebook. The computer refurbishment program, run by a Volunteer/Program Coordinator, leverages the talents of volunteers in the Asheville area, many of whom are retired, to refurbish and provide Central Processing Units (CPUs) to consumers for \$65.00 or 10 hours of volunteer service at the center or elsewhere in the community. Over 100 people with disabilities in Western North Carolina, communicate via the CyberPals program through the Secret Group on Facebook. CyberPals relies on Facebook privacy policies for confidentiality. Participants are informed of these policies when they register. Due to the rural, mountainous nature of the geographic areas where both of the centers are located, the on-line peer support network affords consumers in their local communities to connect with each other virtually.

Consumer Input: Pathways/Asheville has an active advisory board that provides input to the single governing board for both centers. Advisory board members acknowledged the governing board's receptivity to their input as evidenced by the acceptance and implementation of their recommendations. The advisory board provides a direct link with the primary governing board in that one of its members is a voting member of the governing board.

V. OBSERVATIONS AND RECOMMENDATIONS

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

1. Consumer Service Record (CSR) Management

Observation: As described in Finding 1 below, of the 25 CSRs reviewed by RSA at Pathways/Sylva and the 20 CSRs reviewed at Pathways/Asheville, the majority did not contain the required documents and each staff has a different method of organizing materials in their CSRs, making it difficult to locate eligibility forms and Independent Living Plans (ILPs) or wavers. Documents in CSRs at the Pathways/Ashville center were, however, maintained with some degree of consistency. Staff in both centers explained that they had not received formal training on CSR management.

Recommendation: RSA recommends that Pathways/Sylva and Asheville staff consider conducting periodic peer reviews of their respective CSRs or designate a staff person to conduct random reviews of CSRs and use the results as a means of training and technical assistance on best practices among them.

Pathways/Sylva and Pathways/Asheville Response: Beginning September, 2012, staff will be trained in proper documentation for CSR's utilizing ILRU's training materials. Staff will participate in at least one training per month provided by CIL Management Suites and provide documentation of participation to their supervisor to be placed in their personal records.

2. Staff Training

Observation: While staff of both centers participates in or conducts training, the personnel records do not include certificates of training completion or information indicating that staff has participated in training. Neither the General Manager nor the Executive Director maintains a master list of which trainings staff have completed which trainings. As a result, there is no record of what training staff has completed to use for purposes of developing a training plan for both centers.

Recommendation: RSA recommends that Pathways/Sylva and Asheville consider including documentation of completed trainings in personnel files to provide a record of all training completed to provide a record for purposes of developing and assessing the centers' training plans.

Technical Assistance: On-line training courses are available through 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.

Pathways/Sylva and Pathways/Asheville Response: Beginning September, 2012, staff will be trained in proper documentation for CSR's utilizing ILRU's training materials. Staff will participate in at least one training per month provided by CIL Management Suites and provide documentation of participation to their supervisor to be placed in their personal records.

VI. FINDINGS AND CORRECTIVE ACTIONS

RSA identified one compliance finding below related to both centers. Within 30 days of receipt of the final report, Pathways/Sylva and Asheville must submit a corrective action plan (CAP) to

RSA for review and approval. The CAP should include: (1) the specific corrective actions that the center will undertake in response to each finding; (2) the methodology that the center 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, pursuant to 34 CFR 74.60 and 34 CFR 74.62 of the Education Department General Administrative Regulations (EDGAR).

Finding 1: 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; ... (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:

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- Two of 20 did not include documentation of consumer eligibility or ineligibility.
- One of 20 of the CSRs included an unsigned ILP or waiver.
- Eighteen of 20 included an ILP that was only signed by the consumer, not the staff.
- Five of 20 were compared with the records in MiCIL and found that the electronic versions were inconsistent or contained service notes in the goals section.
- Four of 20 did not indicate the goals that were achieved.

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- Four of 15 did not include documentation of consumer eligibility or ineligibility.
- One of 15 of the CSRs included an un signed ILP or waiver.
- Twelve of 15 included an ILP that was only signed by the consumer, not the staff.
- Three of 15 were compared with the records in MiCIL and found that the electronic versions were inconsistent or contained service notes in the goals section.
- Six of 15 did not indicate the goals that were achieved.

Finding: Pathways/Sylva and Asheville are not in compliance with the requirements at 34 CFR 364.53(a) as documented above because their CSRs lacked the required documentation, including:

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

Corrective Action: Pathways/Sylva and Asheville must take corrective action to ensure that the centers consistently document consumers' eligibility or ineligibility, ILPs or waivers, and IL goals achieved.

Technical Assistance: In developing the corrective actions, the Pathways centers should 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 centers' CSR documentation, goal-setting and goal achievement activities, and 704 Report data verification practices. ILRU has a number of CSR related trainings available for the purpose of training staff and ensuring consistency. Descriptions and link to register for these courses is available online at [the ILRU website](#).

Pathways/Asheville and Pathways/Sylva Response: The CSR intake form will be revised by September 1, 2012 to make it easier to understand where consumers and staff sign. Policies and Procedures will be revised to reflect changes. Staff will cross check all new CSR opened each month to ensure staff and consumers have signed in the proper places. Staff will also take the responsibility to cross check CIL Management Suites to ensure documentation has been entered in the proper category.

Management will spot check files monthly to ensure all CSR's have been signed and properly documented in CIL Management Suites.

Beginning September, 2012 staff will be trained in proper documentation for CSR's utilizing ILRU's training materials. Staff will participate in at least one training per month provided by CIL Management Suites and provide documentation of participation to their supervisor to be placed in their personal records.

RSA Determination: RSA agrees with this corrective action plan. RSA will review the draft documents and provide technical assistance, as needed.