CENTERS FOR INDEPENDENT LIVING
COMPLIANCE REVIEW REPORT

Southern Nevada Center for Independent Living
Grant Award Numbers: H132A930108 & H132A940031

REVIEW DATES: September 18-20, 2012
Draft Report: January 10, 2013
CIL Response: February 8, 2013
Final Report: February 12, 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 Southern Nevada Center for Independent Living (SNCIL) was conducted September 18-20, 2012. The program review covered the independent living (IL) operations and activities 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, and members of the board of directors. In addition to the interviews, 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. 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:

- Timothy Beatty, Chief, Independent Living Unit, RSA;
- Megan Stegemiller, RSA staff interpreter;
• Josephine Black, nonfederal reviewer; and
• Janice John, District Manager, representative - designated state unit.

III. MISSION AND DESCRIPTION

SNCIL’s mission is "Removing barriers preventing independent living" by providing services designed to empower people with disabilities to:

• make individual choices;
• assume responsibility to direct their lives;
• manage their own affairs;
• fulfill social roles; and
• achieve independent lifestyles in the community.

SNCIL serves all of Clark County through its two locations. In 1993, SNCIL was awarded its first RSA grant under Title VII, Chapter 1, Part C, of the Rehabilitation Act, and a second one was awarded in 1994.

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

• **Disability Awareness Fair:** SNCIL has hosted an annual disability awareness day for the past 21 years in which consumers have easy access to approximately 60-70 disability service vendors such as Social Security, Housing Authority, Vocational Rehabilitation, and others. Local politicians are invited to give consumers the chance to speak about issues impacting their independent living capacity. Co-sponsors partnering with SNCIL to host the event include the State of Nevada Bureau of Vocational Rehabilitation which assures its consumers receive an invitation and the City of Las Vegas Adaptive Recreation Program. Other partners include the Governors Council for People with Disabilities, United Way of Southern Nevada, local businesses, and private citizens.

• **Emergency Planning:** SNCIL provides input about emergency evacuation plans to include individuals of all disabilities.

• **Disability Awareness for Taxis:** SNCIL provides training for taxi cab drivers on the requirements of the Americans with Disabilities Act and appropriate customer service for individuals with disabilities.

• **Disability Resource Guide:** Since 1999, SNCIL has published the Las Vegas Disability Resource Guide, a publication that serves as a directory of available resources for individuals with disabilities. The guide is also posted on the center’s web page. SNCIL provides consumers’ access to services and vendors the opportunity to network through this publication.

• **Partnerships for Housing & Transportation:** SNCIL advocates for accessible and affordable housing and transportation. SNCIL partnered with Accessible Space Inc. in developing new accessible facilities for consumers. SNCIL continuously monitors both the public and door-to-door transportation to assure equal access and potential expansion of routes.
• **Olmstead Services:** SNCIL tracks the implementation of the state’s Olmstead Plan to assure consumers live in the most integrated situations possible. SNCIL partnered with Medicaid Nursing Home Transition Team to help consumers transition and access community based services to live independently. SNCIL has served on a grant work team with the Department of Health and Human Services, Medicaid Division, to bring in new funds to transition individuals from institutions, e.g., group and nursing homes, to the community.

• **Work Incentive Program:** SNCIL partners with the State of Nevada Department of Employment Training and Rehabilitation through on a fee for service basis to provide work incentive training and plans for consumers.

### IV. ORGANIZATIONAL STRENGTHS AND EMERGING PRACTICES

• **Board Recruitment Fact Sheet:** SNCIL developed a recruiting fact sheet that describes the role and responsibilities of board members to assist prospective board members in making the decision as to whether or not to serve on the SNCIL Board. This resource has proved to be an effective tool in filling vacant positions with qualified board members.

### V. OBSERVATIONS AND RECOMMENDATIONS

During its review activities, RSA identified the observations below and made recommendations that SNCIL may consider. In addition, the completed ORG is attached to this report.

1. **Accessibility of Main Office Parking Lot**

   **Observation:** The interior of SNCIL’s main office itself is accessible. However, gaining access to the building from the parking lot is challenging due to the limited number and location of the accessible parking spaces. The closest space was observed be occupied each day by an employee of SNCIL which meant consumers needing such a parking space must park further away from the entrance and use the access to the sidewalk at their space. There is no ramp immediately in front of the entrance to the center which means anyone needing to access the center via a ramp must go to one of the accessible parking spaces and maneuver from there to the entrance.

   **Recommendation:** RSA recommends that SNCIL explore with the landlord the possibility of establishing more accessible parking spaces closer to the front entrance of the center and building a ramp from the parking lot directly at the front door to allow for greater access.

   **SNCIL Response:**

   SNCIL has explored with the landlord the possibility of establishing more accessible parking spaces closer to the front entrance of the center and building a ramp from the parking lot directly at the front door to allow for greater access.

   While the landlord has agreed to make these changes, due to recent increases in traffic volume at the location, parking has become a challenge. Both parties have agreed that there is not a solution for additional parking spaces and SNCIL has submitted notice effective June 2013 which is the
end of the current lease period. SNCIL is in the process of looking for a location to meet all of the above specifications and ADA requirements.

**Status Report:** SNCIL will forward a change of address to RSA no later than June 30, 2013.

**2. Multiple Chemical Sensitivity**

**Observation:** RSA observed that a sign was posted in the center regarding multiple chemical sensitivity. However, during the on-site, review team members found that that some staff used scented fragrances that could be easily detected and served as an irritant to someone with multiple chemical sensitivity.

**Recommendation:** RSA recommends that SNCIL provide training to the staff about multiple chemical sensitivity and why staff should refrain from using scented fragrances, including colognes or perfumes, while at work. The board may want to consider a clear policy to the staff as well.

**SNCIL Response:**

SNCIL will schedule training to the staff about multiple chemical sensitivity (MCS) and why staff should refrain from using scented fragrances including colognes or perfumes while at work and the board consider clear policy to the staff.

Training materials will include the IL NET Training, Understanding & Accommodating Multiple Chemical Sensitivity Training Manual. The board will be asked to consider a clear policy to staff to include an agreement form signed by current and new employees confirming awareness of the MCS policy and agreement to adhere to the policy. MCS training will be included in the SNCIL Annual Staff Training Curriculum of SNCIL’s Policies and Procedures.

**Status Report:** Outcomes will be reported upon completion and no later than September 30, 2013.

**Effectiveness:** Will be assessed by a chemically sensitive environment for consumers and staff.

**VI. FINDINGS AND CORRECTIVE ACTIONS**

RSA identified the compliance findings below. Within 30 days of receipt of the final report, 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: Consumer Service Records

Legal Requirement:

34 CFR 364.51(a)(1). Before or at the same time as an applicant for IL services may begin receiving IL services funded under this part, the service provider shall determine the applicant's eligibility and maintain documentation that the applicant has met the basic requirements specified in Sec. 364.40. (2) The documentation must be dated and signed by an appropriate staff member of the service provider.

34 CFR 364.52(b)(1) Development of an individual's IL plan must be initiated after documentation of eligibility under Sec. 364.51(a) and must indicate the goals or objectives established, the services to be provided, and the anticipated duration of the service program and each component service. (2) The IL plan must be developed jointly and signed by the appropriate staff member of the service provider and the individual with a significant disability or, if consistent with State law and the individual chooses, the individual's guardian, parent, or other legally authorized advocate or representative.

34 CFR 364.52(c)(1). The IL plan must be reviewed as often as necessary but at least on an annual basis to determine whether services should be continued, modified, or discontinued, or whether the individual should be referred to a program of VR services under 34 CFR part 361 or to any other program of assistance.

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 consumer service record that includes: (a) Documentation concerning eligibility or ineligibility for services; (b) The services requested by the consumer; (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 (1) established with the consumer, whether or not in the consumer's IL plan, and (2) achieved by the consumer.

34 CFR 366.63(c)(1)(i). The center shall provide evidence in its most recent annual performance report that it – Maintains a consumer service record that meets the requirements of 34 CFR 364.53 for each consumer. (ii) Facilitates the development and achievement of IL goals selected by individuals with significant disabilities who request assistance from the center;

34 CFR 366.63(c)(2)(i). The center shall provide evidence in its most recent annual performance report that the center maintains records on the IL goals that consumers receiving services at the center believe they have achieved.

Finding: SNCIL must develop and maintain CSRs consistent with federal requirements. During the on-site review, the RSA team randomly selected and reviewed 67 active and inactive CSRs. Of the CSRs reviewed by the RSA team found that SNCIL did not comply with:

- 34 CFR. 364.51(a)(1), 34 CFR 364.53(a)(b)(e)(2), 34 CFR 366.63(c)(1) and 34 CFR 366.63(c)(2)(i) because CSRs lacked the required consumer eligibility documentation; 25
did not specify the requested services; 9 of the CSRs did not clearly indicate the core services or other services provided; and 27 did not document the goals achieved by the consumer. Fifteen (15) CSRs showed the goals as being set and achieved on the date of the intake. Six CSRs indicated that the consumer was provided the Las Vegas Disability Resource Guide as a service. While the Resource Guide can be documented as a resource tool to assist consumers in accessing IL services in the community, the guide itself is not an actual service.

- ILPs include estimated duration of the services to be provided and demonstrate that they are reviewed at least annually to whether services should be continued, modified, or discontinued, or whether the individual should be referred to another in accordance with 34 CFR 364.52(b)(1) and 34 CFR 364.52(c)(1);
- 34 CFR 364.52(b)(1) and 34 CFR 364.52(c)(1) because 13 of the IL plans did not specify the estimated duration of the services to be provided and 5 CSRs were not reviewed at least annually to determine whether services should be continued, modified, or discontinued or whether the individual should be referred to a program of VR services under 34 CFR part 361 or to any other program of assistance.
- 34 CFR 366.63(c)(1)(ii) because CSRs lacked any documentation of the center’s role in facilitating the development and achievement of consumers’ IL goals and other CSRs contained minimal documentation to that effect.

Corrective Action: SNCIL must take corrective action to ensure that:

- CSRs adequately and consistently document consumers’ eligibility or ineligibility for IL services before or at the time of the IL services requested, and the IL goals achieved in accordance with 34 CFR. 364.51(a)(1), 34 CFR 364.53(a)(b)(e)(2), 34 CFR 366.63(c)(1) and 34 CFR 366.63(c)(2)(i);
- ILPs include estimated duration of the services to be provided and demonstrate that they are reviewed at least annually to whether services should be continued, modified, or discontinued, or whether the individual should be referred to another in accordance with 34 CFR 364.52(b)(1) and 34 CFR 364.52(c)(1);
- CSRs include documentation of the center’s role in facilitating the development and achievement of consumers’ IL goals, in accordance with 34 CFR 366.63(c)(1)(ii); and
- the Resource Guide is documented in CSRs as a resource tool to assist consumers in accessing IL services in the community and not as a service.

The corrective action must include the review and revision of consumer service procedures and forms and implementation of staff training, as appropriate. To implement the corrective actions, SNCIL should revise and implement written CSR management policies and procedures.

Technical Assistance: The RSA-funded Independent Living Research Utilization (ILRU) training and technical assistance program offers a CSR documentation tutorial which is available at no cost to CILs located at http://ilru.org/html/training/rapidCourses/index.html. ILRU is in the process of developing an IL goal-setting tutorial as well.
SNCIL Response:

Corrective action will include the review and revision of consumer service procedures, forms and implementation and staff training as appropriate.

Corrective Action:
To ensure that SNCIL maintains CSRs consistent with federal requirements SNCIL will review policies, procedures and forms and make and implement revisions as appropriate per the following findings and legal requirements:

- CSRs adequately and consistently document consumers’ eligibility or ineligibility for IL services before or at the time of the IL services requested, and the IL goals achieved in accordance with 34 CFR. 364.51(a)(1), 34 CFR 364.53(a)(b)(e)(2), 34 CFR 366.63(c)(1) and 34 CFR 366.63(c)(2)(i); ILPs include estimated duration of the services to be provided and demonstrate that they are reviewed at least annually to whether services should be continued, modified, or discontinued, or whether the individual should be referred to another in accordance 34 CFR 364.52(b)(1) and 34 CFR 364.52(c)(1);

- CSRs include documentation of the center’s role in facilitating the development and achievement of consumers’ IL goals, in accordance with 34 CFR 366.63(c)(1)((ii); and

- ILPs include estimated duration of the services to be provided and demonstrate that they are reviewed at least annually to whether services should be continued, modified, or discontinued, or whether the individual should be referred to another in accordance 34 CFR 364.52(b)(1) and 34 CFR 364.52(c)(1);

- the Resource Guide is documented in CSRs as a resource tool to assist consumers in accessing IL services in the community and not as a service.

Methodology:

SNCIL Staff will take the ILRU Case Service Record Training and review and revise policies, procedures and forms to meet 34 CFR. 364.51(a) (1) and Section 364.40. (2) Revised practices will require that before or at the same time as the applicant for IL services may begin receiving IL services funded under this part, SNCIL shall determine the applicant’s eligibility and maintain documentation that the applicant has met the based requirements specified in Sec. 364.40. (2). The documentation must be dated and signed by an appropriate Staff Member of SNCIL.

Revisions will also include the following in accordance to:

34 CFR 364.53(a) (b) (e) (2), For each applicant for IL services (other than information and referral) and for each individual receiving IL services (other than information and referral), SNCIL shall maintain a consumer service record that includes: (a) Documentation concerning eligibility or ineligibility for services; (b) The services requested by the consumer; and (e) the IL goals or objectives and (2) achieved by the consumer;
34 CFR 366.63(c) (1) (i), SNCIL will provide evidence that it facilitates the development and achievement of IL goals selected by individuals with significant disabilities who request assistance from the center in CSRs;

CFR 364.52(b)(1) and 34 CFR 364.52(c)(1), ILPs include estimated duration of the services to be provided and demonstrate that they are reviewed at least annually to whether services should be continued, modified, or discontinued, or whether the individual should be referred to another service provider.;

34 CFR 366.63(c) (1) ((ii), CSRs include documentation of the center’s role in facilitating the development and achievement of consumers’ IL goals.

Policy will also include the Resource Guide is documented in CSRs as a resource tool to assist consumers in accessing IL services in the community and not as a service. Staff will be trained on revisions and process will be implemented.

Staff will be trained on revisions and processes will be implemented per the following time table for the development, implementation and evaluation of effectiveness corrective actions:

<table>
<thead>
<tr>
<th>Action Step</th>
<th>Target Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Educate staff about on-site review findings for CSRs</td>
<td>February 07, 2013</td>
</tr>
<tr>
<td>2. Staff will participate in ILRU CSR Training</td>
<td>April 30, 2013</td>
</tr>
<tr>
<td>3. Educate Center Staff that the Resource Guide is to be documented in</td>
<td>April 30, 2013</td>
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<tr>
<td>CSRs as a resource tool to assist consumers in accessing IL services in</td>
<td></td>
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<td>the community and not as a service.</td>
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<tr>
<td>4. Develop policy and procedure to review files a minimum of two weeks</td>
<td>April 30, 2013</td>
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<td>after intake and amend existing file review form to include review for:</td>
<td></td>
</tr>
<tr>
<td>1. Eligibility or ineligibility documentation: Staff signature and date</td>
<td></td>
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<td>2. Service Request Documentation</td>
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<td>3. ILP Goals and Objectives Estimated Time of Duration</td>
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<tr>
<td>4. Documentation of the center’s role in facilitating the development</td>
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<tr>
<td>and achievement of consumers’ ILP, IL goals or objectives.</td>
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<tr>
<td>5. Annual file review</td>
<td></td>
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<td>5. Amend existing file review checklist form to include review for items 1-</td>
<td>April 30, 2013</td>
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<td>5 above.</td>
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<tr>
<td>Action Step</td>
<td>Target Date</td>
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<td>----------------------------------------------------------------------------</td>
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<td>7. Develop policy and procedure and train staff to document the center’s</td>
<td>April 30, 2013</td>
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<td>role in facilitating the development and achievement of consumers’ IL</td>
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<td>Goals.</td>
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<td>8. Develop a policy to submit CSRs to the Office Coordinator for review</td>
<td>April 30, 2013</td>
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<td>when a consumer goal is achieved.</td>
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<tr>
<td>9. Develop a form for Office Coordinators to review CSRs after a consumer</td>
<td>April 30, 2013</td>
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<tr>
<td>achieves a goal to ensure the center’s role in facilitating the development</td>
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<td>and achievement of the consumers’ goal is evident.</td>
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<td>10. Train Office Coordinators to review CSRs ensure documentation of the</td>
<td>April 30, 2013</td>
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<tr>
<td>center’s role in facilitating the development and achievement of the</td>
<td></td>
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<td>consumer’s IL goals is evident.</td>
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<tr>
<td>11. Develop policy that Office Coordinators review open case files at least</td>
<td>April 30, 2013</td>
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<td>annually to assess whether services should be continued, modified, or</td>
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<td>discontinued, or whether the individual should be referred to another</td>
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<td>service provider.</td>
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<tr>
<td>12. Develop form for Office Coordinators to review CSRs at least annually</td>
<td>April 30, 2013</td>
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<td>to assess whether services should be continued, modified, or discontinued,</td>
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<tr>
<td>or whether the individual should be referred to another service provider.</td>
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<td>13. Run queries quarterly reports to assess the total number of CSRs to</td>
<td>Starting July 01, 2013</td>
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<td>eligibility determination to assess the consistency of eligibility</td>
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<td>determination and documentation for 704 reports.</td>
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<td>14. Review existing CSR policies, procedures and forms in comparison to</td>
<td>August 30, 2013</td>
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<td>legal requirements.</td>
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<td>15. Compare a minimum of three Centers for Independent Living ILP</td>
<td>August 30, 2013</td>
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<td>development, IL Goals and Objectives documentation, and documentation of</td>
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<tr>
<td>the centers’ role in goal achievement by the consumer.</td>
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<tr>
<td>16. Amend policies, procedures and forms with revisions as appropriate per</td>
<td>October 30, 2013</td>
</tr>
<tr>
<td>training and comparisons for CSRs and ILPs, IL Goals and documentation.</td>
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<tr>
<td>17. Train Staff on revised policies, procedures and forms to implement</td>
<td>November 30, 2013</td>
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<td>revisions.</td>
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<tr>
<td>18. *Status report to RSA.</td>
<td>December 31, 2013</td>
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**Finding 2: Records Retention**

**Legal requirement:**

EDGAR 74.53(b): Financial records, supporting documents, statistical records, and all other records pertinent to an award shall be retained for a period of three years from the date of submission of the final expenditure report or, for awards that are renewed quarterly or annually, from the date of the submission of the quarterly or annual financial report, as authorized by the Secretary. The only exceptions are the following:

1. If any litigation, claim, or audit is started before the expiration of the 3-year period, the records shall be retained until all litigation, claims, or audit findings involving the records have been resolved and final action taken.
2. Records for real property and equipment acquired with Federal funds shall be retained for 3 years after final disposition.
3. When records are transferred to or maintained by the Secretary, the 3-year retention requirement is not applicable to the recipient.
4. Indirect cost rate proposals, cost allocations plans, etc. as specified in Sec. 74.53(g).

**Finding:** SNCIL must retain records pertinent to the IL Part C awards in accordance with the federal requirements at EDGAR 74.53(b). During the on-site review, SNCIL staff stated that CSRs for the consumers in their Work Incentives Planning and Assistance (WIPA) program were destroyed when the funding for that program ended on June 30, 2012. The destruction of the CSRs was based on instructions from the WIPA program even though these consumers were also reported as being provided independent living services by the center on the FY 2011 704 report. Despite the fact records were destroyed, SNCIL still reported the total number of consumers documents in these records on the FY 2011 704 Reports. According to the two 704 Reports submitted for FY 2011, SNCIL reported 1,028 consumers served through grant number H132A930108, and 471 consumers served through grant number H132A940031. However, the review team was counted only approximately 309 current CSRs in the files at the main office. As a result, the review team was unable to verify the accuracy of the 704 Reports.

**Corrective Action:** SNCIL must develop and implement written policies and procedures to ensure that CSRs, along with other grant records, are maintained and retained in accordance with requirements at EDGAR 74.53(b).

**Technical Assistance:** See the Technical Assistance recommendation from Finding 1.

**SNCIL Response:**

Only Grant H132A930108 was impacted by the WIPA Mandate to shred WIPA files. The 1028 CSRs at the main office were reported on the H132A930108 704 report and of these 719 were WIPA and were shredded, while 309 were Independent Living (IL) and remained intact. Grant H132A940031 was not impacted and the 471 CSRs reported on this 704 report were IL.
Corrective Action: SNCIL will develop and implement written policies and procedures to ensure that CSRs, along with other grant records, are maintained and retained in accordance with requirements at EDGAR 74.53(b) regardless of other funding source mandates by April 30, 2013.

Evaluation: Effectiveness of the policy will be assessed by adherence to the policy.