**Assessing the Health of Your CIL: Preventative Management Checkup Using RSA's Review Tool, Part 2: Administrative/Fiscal Review**

**presented by Paula McElwee on May 8, 2013**

>> TIM FUCHS: Good afternoon everybody. This is Tim with the
National Council on Independent Living and thanks for coming back to
part 2 of the series of assessing the health of your center for
independent living presented by CIL-NET. IL-NET operated through a
partnership through the ILRU utilization program, and the
association of program for rural independent living, with support
provided by RSA at the U.S. Department of Education.
I thank you for your patience in the delay last week and for
joining the teleconference today. This is how I participate in
these calls, even when I am not moderating.
The audio is good, there are no surprises, but you still have the
functionality of the webinar. I trust you can all hear well, and we
will of course citying running the Power Point and "chat" on the web
that are screen.
We are recording the call today for the purposes of archive.
Last week's archive is already up. We will break several times to
to answer your questions, as well as at the end.
In the web that are you can use the public chat text box under
the emoticons to ask questions. They don't always display
immediately, but we do see he them, so don't worry.
For those on the teleconference, like the operator said, you can
a press 7. We will remind you of those instructions.
If you don't have the power points for today, they were sent in
the confirmation e-mail that you received.
And if you don't have them handy, you can e-mail me tim@ncil.org
and I will send them to you. Just like last week's call, it will be
easier to follow along with those power points, in fact it is
essential. I can send them to you right now.
And don't forget to fill out the evaluation at the end of the
call.
On the web that are you can click to a live link on the last
slide, and if you are only on the teleconference, you can find the
evaluation in the confirmation.
There is a separate evaluation for today's call, versus last
week's call. The content is separate, so please do fill out an
evaluation form.
Again, if you are participating in a group, like I know a lot of
you are, great. But do fill out the evaluation as an individual.
We want to know what each person thinks.
I welcome back Paula McElwee. She did a fantastic job last week.
I am excited to again hear from her today. Richard Petty is also on
the phone, is he standing by in case there are questions he may have
information about. He is also with us.
Paula, let's get started. I will go to Slide 2.
>> PAULA: Thanks so much for hosting this. It was so much fun
last week, and today I think will be a bit more varied and a little
better paced, there isn't quite as much information. Maybe we will
have time for even more questions and answers.
I thank all who participated last week answered who sent a
question later, it was fabulous. We answered all of them.
There was one question I want to mention before we get into the
content which came up quite a bit.
It is the question: Do the four core services need to be
provided to every person? And the answer is that every person who
has a CSR record and plan or waiver on that plan would be expected
to have at least one core service.
The reviewers expect to see evidence of all the core services
when they look at a sampling of your records, not just one
individual record. Hopefully that clarification is hopeful, as that
question came up several times. It was probably a question other
folks had as well. Just wanted to clarify that.
A quick review of what we're doing and why, we are using RSA's
actual review tool, and you have the link to that in your last
presentation. It is also online.
That way if they make changes to that tool, you will be able to
see that. It lays out their CIL expectations in a checklist format.
It gives you a chance to review and look at the same questions they
will look at when they go through and do a review.
So using it in your own internal review better prepares you for
the onsite review from RSA. That is why we are using that review
tool.
Last week we also gave you a link to a checklist they informally
use to review consumer service records. As a head's up, that was
changed by RSA. There is an updated link.
So if you already updated the link, you may want to go back and
update it again because there is a small change in one of the items.
We try to keep it up to date, and there was a change between last
week and the present time.
Moving to the next slide, we are actually covering the checklist
item that are in that onsite checklist. At the end of each item, we
are going to also talk about recommendations.
So the checklist gives you the text of what it is that they are
looking for, and if you don't have it, they would would cite you
with a finding requiring corrective action.
Also they often give recommend daipses in that area. That is a
practice are RSA suggests. It may be included in your report if you
don't meet it, but they don't require a plan of correction on that.
However, the suggestion may be useful to you. We are seeing some
suggestions that come unfairly frequently, so we want to pass them
along as best practice suggestion that is RSA gives when they do
their onsits.
So you will see a question, a recommendation if there have been
some in some of the RSA reports you have been interested in.
And then also any tips or suggestions we they may be useful to
you related to that section.
Next slide. We looked at evaluation standards 1-5 in the last
session. Now we are starting with Standard 6. It has to do with
resource development activities.
The checklist item is that the center shall conduct resource
development activities to obtain funding from other sources, other
than chapter 1 of title 7 of the rehabilitation act, which is where
our part B and C funds come from in the centers for independent
living.
The evidence they look for related to that, did you have
activities to raise other money? And were you able to do that, as
part of your operations of your centers?
So there really is a strong emphasis on centers becoming more
diverse in their funding, and not only depending on Title 7 funds.
So the onsite reviewers will be looking at that.
And some things you might show them related to your resource
development would be if you wrote grants to other organizations in
your community or state, perhaps even other national applications,
are you doing anything that you charge for? Do you have fees for
any of your services that are generating additional income for your
center?
And of course, some centers do event-driven fundraising, while
others do fundraising activities and letters. So think about what
you are doing related to resource development.
Related to that, I know that the practical side -- and this isn't
on the slide but I want to mention it kind of in passing. The
practical side is that Boards are not always very comfortable with
their fundraising responsibilities.
And you may want to share with your Board that there is a
expectation for resource development, and it would be expected that
Boards are involved in that, not just staff. So you might kind of
keep that in mind as a piece of this discussion.
The next thing they look at is your program and financial
objectives. They want to know that you have established an annual
and three-year program and financial planning objectives.
When you do your budget, you do look at a three-year budget for
your CIL. So you have looked at some aspects of a financial plan.
But here they are looking at what you expect to accomplish with
those funds and anything else you are doing with your CIL, what you
expect to accomplish during that period of time, and actually to
have both program and financial planning objectives in some sort of
a plan.
Now the objectives also need to include the goals your CIL said
you would accomplish relating to your grant, and they need to relate
back to your mission.
Notice this time difference which we will come back to. But also
that you have a current to-year work plan for achieving the goals or
the mission, including specific activities to meet those
requirements.
The work plan has to have more specific information for each of
the item that you are putting together in your established and
three-year program and financial plan.
Think of it as you have the broad-stroke things you have which
are sometimes called long range goals, sometimes vision statements
or other things that get you going in a Broadway. But then in the
work plan, what specifically are you going to do?
So the question would be that objectives will staff be doing, who
is responsible for that, what is the timeline for that specific to
your work plan, specific activities to accomplish that longer-range
portion of your plan.
If you have had a review, one thing that needs to be in your work
plan, any corrective action that you are adding. If you have a work
plan or you are developing it as a result of a corrective action
plan because of a review, everything that you said you are going to
do in your corrective action would make sense to include in this
work plan.

Now, your actual corrective action plan has the persons
responsible and due dates and usually there is comments back and
forth and you and RSA decide exactly what that will look like. But
those pieces would be moved over to be included in your overall plan
That way as you look at that information, you are able to do
that.
I just had a little bleep in my power. Can someone verify you
can still hear me?
>> TIM: Yes, we can.
>> PAULA: Okay. It was just a little bleep. My computer is
coming back up now. It won't take very long. Of course we need
something to happen to keep us all awake!
>> TIM: Shall I move to Slide 7 while you are getting going?
>> PAULA: Yes. As you look at the work plan, we suggest that
you make one overall plan to include not just objectives, but also
other objectives so that you cover all the thing you intend to do
for Board, for staff and also sometime for volunteers.
That way you are looking at your center activities in a
comprehensive way. Sometimes it is called "strategic planning" and
that piece is part of this. You can roll your strategic plan into
this kind of detail, or you can do this separately, but they should
connect to each other.
They should make sense so your mission and any strategic goals or
vision you identify with your Board should flow into the work plan
with objectives and goals that are measurable, you know who is
responsible and you have target dates to accomplish them.
We also are seeing recommendations from RSA on making sure there
is a training plan for the Board and volunteers. They will make a
finding, if there is not a training plan for staff, but a
recommendation or suggestion, as well as if there is not a plan for
Board and volunteers too.
When you update that, you may think about what is your plan for
new and continuing Board members, and what is your orientation for
new staff and volunteers, as well as continuing staff, and your work
plan answers a lot of those questions and keeps you on track with
keeping everybody up to date on the skills.
Let's look at the next one. We see this cited fairly frequently.
This is your 704 accuracy and documentation. You know this is
submitted on an annual basis and the content is used by RSA.
Sometimes I think they use all of they will together, sometimes they
use them individually as they look at specific centers, but one
thing they probe for is the accuracy of the report.
They want to know you have implemented whatever internal controls
and procedures are needed, including maybe quality assurance
elements to make sure the 704 report is accurate and documented.
Some centers have fairly sophisticated software options which
help with that collection an documentation for the 704 report.
That is fine, but not required.
If you are very small and haven't yet come up with a software
option you want, or, as some centers -- I have seen some centers do
switching from one to another software because you have become
convinced that this one is better.
It doesn't matter where you are in the process, whatever you do,
you have to show the accuracy of your data. So as you look at how
you report on the persons that you serve, your software program or
your hand-held program need to agree with what is in the consumer
record about the services delivered.
One of the things we see fairly frequently cited, folks are
documenting everything that happens with the consumer, which is
fine. But they are documenting each interaction as a separate goal,
not just a separate contact.
And you want to be careful about that because you went to make
sure you are not over counting goals met by counting every
interaction with the consumer.
So you are looking at your file and documentation, but not in a
way as to over count the numbers of contact with your folks. The
double-check RSA will do onsite and that you can certainly do in
your own review, to ask the question if there is continuity between
what your staff are entering into the computer, any periodic reports
you create.
Some of you do a quarterly report for your state or Board, some
do monthly report, something do something semiannual. But does it
all agree, so that your information and computer entry, and your
periodic reports and last 704 reports tie together without
over counting or other kinds of things happening.
If it doesn't make sense, you need to be sorting out what you
will do about that, and you need to begin to correct that now. Last
week we talked about the fact there is a strong indication that you
ought to be doing some of your internal CSR review, at least
annually to review if people are still being served appropriately
and are their goals being met.
This can be part of that review. So you can look for 704
continuity as part of the CSR review. So think about that as a
process that might streamline a little, helping you see continuity
across all the program you provide and all the different service
providers that are in your organization.
The next area on the next slide, organization and personnel
practices. Here we look at a number of things. These bullets are
all things on the checklist, using sound organizational and
personnel assignment practices.
That usually has to do with a cheer organizational chart that has
a title and indicates who reports to whom, lines of authority. Also
that you have a job description for each position, and that you have
some sort of a performance appraisal process regularly done within
your organization.
We see organizations cited for inconsistency in these, as well as
not having them. So sometimes you will have an organizational chart
with different titles than what is on the job description, for
example.
You really want to watch that and make sure you keep the job
description and the organizational chart and your budget you submit
to RSA, that there is some continuity there and some consistency on
that you call things.
If you have a tendency to change titles, make sure you go back
and ask yourself if you changed it everywhere it needed to be
changed which may also include policies and procedures, but
certainly your organizational chart and job description.
Also, affirmative action for qualified individuals with
significant disabilities will be an expectation that they see
individuals are working for you that either have a visible
individual or have self-disclosed they have a significant
disability. They will expect to see some activity in that area, so
that is another consumer control checklist piece.
Also on a fairly regular basis they have recommended that your
personnel policies be written, and that they address your wage and
salary process, whatever that is.
So how frequently people are paid and how that works, what they
have to turn in to you related to that, any fringe benefits you
provide, vacation and sick leave accrual and so forth.
So you will often see a recommendation in addition, if there are
not personnel policies addressing those elements, as well as any
other elements that appear problematic when they are onsite.
And then staff development and training. I know we just talked
about this, but we're going to talk about it again because it shows
up again in the checklist.
They first want to know that you have personnel who are
specialists in the development and provision of IL services and in
the development and support of centers. So you have personnel with
experience in some way, who make it possible for them to be a
specialist.
Now it isn't defined beyond that, so you need to look back at the
job descriptions about the qualifications you require, and does it
show you have capable personnel doing the job they were hired to do.
Also they look at a staff development program directed at
improving the skills of staff.
How can you make sure your staff directly knows how to provide IL
services, understand and practice IL philosophy. Those come up on a
fairly frequent basis.
If you look back at our website ILRU.org, you will find a number
of staff development pieces that are very helpful. There is a
section on the four core services that people can go through and
understand the services as they are provided.
We have a set of training on the consumer service record itself
and the processes around that which are excellent, and we have a
really fine history and philosophy. It was out on DVD and is still
available onsite.
All of those have accessible formats so that you can get them to
meet the different needs of your staff. If you do a rapid course,
you get a certificate that says you completed it, and you can put
that in the personnel file.
So take a look at some of that training. It really hits these
issues well. Some of it is excellent to review before you go into
planning. Because remembering where we come from and what we
believe, that is foundation alto how we actually do our work plan,
how we move forward into the future.
This last item in this section on the checklist, that staff
receive training on how to serve unserved or underserved minority
groups.
They will typically look to see who you have identified in your
community to see who is underserved or unserved because that will
differ from one community to the next.
They specifically mention minority groups because minority groups
often fall into that category, and they specifically mention the
challenge between urban and rural settings, and the populations
contained in those settings because it very much changes the access
people have to services.
So how are you responding to that, and this is more than
diversity training. Diversity training would be a piece and you can
kind of see that if you think about a minority group, so they ought
to relate well with whoever the minority groups are in your
particular area.
And they ought to understand the difference between urban and
rural culture. There is a couple churl difference there that is not
usually ethnically driven, but usually it is quite obvious, the
differences in those two areas.
Look at who your unserved and underserved populations and think
about what your staff needs to know to be effective to provide
services to them.
And remember often we see the recommendation to the Board for
training and development as a part of this as well.
Next slides is conflicts of interest. Here we look at safeguards
against employee, board member or volunteers participating in an
administrative decision that benefits that person or their immediate
family or a business interest of theirs.
It also safeguards against any person using a position for a
purpose that is or gives of appearance of being motivated by
personal gain, either financial or other, either for yourself or
others.
But if the position is being used or gives the appearance of
being used for personal gain, it would be problematic. This gets
cited a couple different ways.
Sometimes there isn't a written policy anywhere, and you want to
have a written policy, typically. That way you know the employee or
the board member and the volunteer understand conflicts of interest
are not acceptable.
And if they have a conflict, they should be disclosing it; it is
usually a portion of the actual policy, especially for a Board
member. You would typically see that they disclose the conflict and
that they would not participate in the conversation or decision
about that, and the rest of the Board would make the decision:
Especially in rural areas if the Board member is a only person you
can buy a fridge from, they just wouldn't participate in that
discussion, not that your Board would participate in deciding to buy
a refrigerator, but you understand the concept.
You don't want that person is make a decision who is likely to
benefit from it, but it also applies to employees. For example, if
my husband as a season business and I want you to buy from him, we
need to know what are the safe guards against doing that in a way
that is providing a financial gain that is unfair and not in the
best interests of the center.

Typically these are written policies, and typically the employee,
the Board member or volunteer acknowledges them with a signature,
and then you file them in a file folder that is for each Board
member or the Borpd as a whole, and for each employee or volunteer.
That way everybody knows yes they were inform of the conflicts of
interest procedures and they are filed away and can be reviewed if
necessary
Next slide, confidentiality. It is the same kind of thing.
Making people understand they understand this subject and its
responsibilities, it is often put in a policy that people sign that
they received. We look for adopted and implemented policies and
procedures that safeguard the confidentiality of all personal
information.
They give examples like photographs or publicity releases, lists
of names. And the list of names is probably one that sneaks up on
centers sometimes.
This is because you have a list of the peer support group, a list
of the people who want to participate in a certain advocacy event,
and are those being protected in the same way as the consumer
service record.
That is a good question to ask yourself, is not just their actual
record, but other things that might be important and can include or
may include personal information.
There is a reference you there you can pick up for the actual
requirements, but they want you to protect not just current
information, but also stored personal information too.
One place RSA sometime finds a problem, if a staff person is
working on files, maybe you do that once a month or one day on the
end of the week to catch up on the computer.
Whether it is paper or computer, if anyone wax away from their
desk and leaves it unsecured, it is considered to be a
confidentiality problem.
So you want to make sure your staff is very conscious of the fact
this if they have personal information regarding a consumer or
person, they should be taking that information and also taking a
look at do they need to lock it in a drawer or take it back to the
place it originally was.
So it is what do they need to do to protect it? No one should be
walking away and leaving it open where others might gain
confidential information.
The other thing we are seeing around confidentiality has to do
with meeting space. Sometime in very small centers when you are
meeting with somebody at your desk, there isn't the kind of
confidentiality you may need or want.
So think about that, and think about is there a place where
people can take a look at offing a more confidential place for those
conversations.
Even if it is a very small shared office or some kind of an space
across the hall the organization shares with other people that you
can reserve, you probably need to look at your space.
And then you need to ask if we have meeting space that ensures
confidentiality is protected when consumers meet with staff. This
is a recommendation, not a requirement at this point in time.
It is, however, seen as something of concern. So recommendations
may come with this. At this point we haven't seen findings related
to that, but if there was a clear violation, I suppose that could
also come up.
The next one we look at, drug-free workplace. There is a section
on this topic. We look here at your published statements. There
are some specific things in the drug-free workplate notification
required for recipients of federal funds.
One is a published statement to notify employees it is not lawful
to manufacture or distribute or possess or use controlled
substances. A lot of times this is another one of those statements
in the back of a personnel handbook and staff signs off that they
receive it.
So someway you need to know your staff received it, because
looking down further, each employee has to be given a copy, and
signing receipt of it kind of proves that piece.
You need an established drug-free on going awareness program.
What we suggest, when you look at that staff development plan that
is required in your work plan and under the section on staff
development, the drug-free awareness is one of the items in your
staff development program.
If you do a little bit of staff development at a monthly staff
meeting he have year, you might have 12 topics you cover in
drug-free workplace might be one of them.
That way you make sure you have an established ongoing awareness
around drug-free workplace. And sometimes you will find that you
have someone else who would provide that for you. Sometimes an
insurance carrier will do that, a health insurance carrier or some
kind of an employee assistance program, the employee of that program
will provide that.
We mention each person is given a copy. If there is a
conviction, what you do about it is also a part of this drug-free
workplace. You either need to take appropriate personnel action, or
require them to participate in some kind of rehab program, which is
a little tricky to sort out sometime.
But they want to see evidence that you behaved appropriately if
something comes up, and they also want to see the language in your
policy that backs up that you are taking appropriate personnel
action, whatever that looks like for your organization.
Next they look at insurance coverage. Let's look at that. They
want to know that you have insurance coverage for real property and
equipment acquired with federal funds equivalent to that provided
for the property that you own.
At this point it isn't talking about other kinds of risk
management. As a manager you will do other kinds of risk
management. You may very well recommend or your Board may recommend
certain limits for directors and officers insurance or other kinds
of risk management pieces, but it isn't in the check list.
The property is the only thing in the checklist, property and
equipment.
They want to know that your protection is the same for their
property as it is what you own. So what you bought with a grant,
what was acquired with federal funds, it needs to be the same here.
As a tip, they want to see the Board is serious about fiduciary
responsibilities and risk management is part of that.
Make sure your minutes reflect that when there is a discussion
around that. It may include how you mitigate risks, maybe policies
and procedures about how you secure the building. It might be other
things, including selection of coverage and reviewing that
periodically.
It isn't required, but it is a good practice to show the Board is
taking that risk management piece seriously. You may want to take a
look at that as well.
The next area is nondiscrimination on the next slide. Let's look
at that. Here they want to know that you do not deny services on
the basis of race, color, national origin, session, existence of
disability.
Some of your states may have additional categories, but these are
the actual federal categories from the checklist. This is a
required policy, so put it in writing.
Provide this to staff in a handbook or the sign-off sheet you do
at orientation or whatever.
And then also post it on your bulletin board to show how you
handle a complaint if there was one. Make sure people nope the
complaint process.
So if somebody asks that would you do if you feel you were being
discriminated against, what would you do? So take a look at all
those pieces.
You do not deny services, that is the actual checklist item, but
they will look for a policy and procedure related to that.
The last one before questions and answers, prohibition against
lobbying. They will expect something very specific, and that is
that you will not use federal funds to influence or attempt to do
that to Congress through lobbying.
There is a reference there for the form and other references
related to that, and they expect that you would keep that on file.
So you fill out the form, the Board and you review it, you sign
and date it, and you have that on file that you understand. So it
is your certification of understanding of what the lobbying
requirements.
We feel it is good to sort this out in detail, because we often
have the advocacy versus lobbying conversation, and we need to know
the difference and incorporate provisions consistent with these
federal regulations into your written policies and procedures so you
are very clear on this matter. That is very helpful.
We are going to go to questions and answers here, and I have one
reference that came across from one of the other presenters about
the consistency of the records, of the CSRs.
One of the things you need to know, sometime during review -- so
it is good practice when you do your own review to back up that is
in the written consumer service record by picking up the phone and
talking to the consumer.
Sometimes that will actually happen during your RSA review, and
it is a good thing to remember. They may call any of the people
whose file they draw, and they can draw any file they want. You
need to make sure you are consistent with the records in addition to
being consistent with 704 report.
Time for questions and answers.
>> TIM: This are no questions pending in the web that are. I
will have the operator remind everyone about the process.
>> If you do have a question on liept, press Number 7 on the
telephone keypad. Question from Julie Shaw.
>> Participant: We have three questions. First, is there the
ability for a CIL to reduce their insurance coverage if it is well
above property owned and exceeds grant amount?
>> PAULA: You want an answer to that one first?
>> Participant: Yes.
>> PAULA: The question about how much insurance coverage you
have, that is a Board decision. This it is not something specified
beyond that one standard, not something specified. However you do
want to look at what is good practice for a not for profit.
You want to ask the question: How much risk management do I need
to be doing related to my environment and what is expected here?
About but that is totally up to you. The Board makes that decision
as part of the fiduciary responsibility. I know that isn't an
"answer" answer, but that is up to you.
>> Participant: Under the nondiscrimination slide, Slide 15 you
speak to the existence of a disability. Does that include type of
disability? Let me further explain.
We are a young CIL, so in implementing services based on
community input, et cetera, we implemented services that don't
duplicate anything that is available in the community. If there is
another program that is specifically funded to serve a person with a
specific type of disability the same service, but it is a
specialized service, are we then obligated to provide it?
>> PAULA: You are obligated not to discriminate in the
provisions of the four core services if the person chooses you as
the service provider. #.
>> Participant: So there is no provision be made to duplication
of services by CILs?
>> PAULA: No. The expectation is we are cross-disability, and
anyone coming to us for the core services would receive them from
us. We can talk to them about community options. We want to open
the doors and have collaboration.
But we won't thawrn person away on the basis of someone else
specializing in their disability.
>> Participant: Third question. If you have a consumer who
wants to volunteer at the agency, and they have the dual role of
consumer and volunteer, can that be interpreted to mean there is
then a conflict of interest, even though there is no financial gain?
>> PAULA: . Not typically. A consumer controlled agency, we
have a dual role for all of us.
There are times when staff members may access a service because
they have a disability, and that is the reality of the fact we have
that consumer control.
We will be in a position sometimes where employees will also need
to be consumers, persons who receive a service. And sometimes Board
members will be persons who receive a service.
So receiving services from a center is not, in and of itself, a
conflict. It would only be a conflict if they got special treatment
in some way or got something nobody else could get, or there was
some kind of other financial advantage.
So because we are consumer-run we will always see that mix of
role where Board members or volunteers or staff persons are also
consumers of services. It is a reality of what we do, and not a
conflict in and of itself.
>> Participant: One more clarifying question. On duplication of
services, an example would be we run a service animal program under
IL skills training.
If you need a guide dog, you go to a guide dog school, and we
don't train guide dogs here. Would we be obligated to train guide
dogs because we provide a service animal program?
>> PAULA: No, you are only to provide the four core services.
Go back and look at the four core services training we have online.
Independent living skill training is probably what the service
animals fall under, and you don't have to provide every possible
independent skill as long as you meet individualized needs related
to living skills. Does that make sense?
>> Per test pant: Yes.
>> PAULA: Not every skill but the skills that match up with the
skill folks are saying they want you to help them meet.
>> TIM: I will jump in here. We have a lot of good questions
rolling in on the web that are. I will take them in the order in
which they were received.
First from Charlotte Stewart who asks if you can share a sample
to your work plan with her.
>> PAULA: We probably can. I have three or four that have given
me permission to share them. They are very different, one to the
next. Sometime they are written in chart form, sometimes narrative
form. Sometime the center decides to put in a lot of background
because they feel the philosophy is so important, they don't want to
tell you what they're going to do until they tell you why.
I think all those are valid opportunities, but let me get further
permission from a couple of those to put them up on the wiki.
Charlotte, my e-mail address is at the end of the presentation. I
have had a couple samples that I can't say are perfect, but it shows
the direction centers are going.
They haven't been vetted by RSA, they are a centers approach, but
I think it would be helpful and I have permission to share them.
>> TIM: Thanks, Paula. Let me know if you have a couple. I
easily get them to the registrar, and we will do that.
Second question from Bonnie Worth: You are aware of any other
types of training for Board of Director members that may be free or
lower cost?
>> PAULA: Any other types? Not sure where you are being with
that, Bonnie. We have a lot of training on our with web page that
is important training for Boards.
So if you type in "Board" and look at that, you will find some.
We will also be shortly putting together and online a self-study
training document. So there will be a handbook Board members can
look at.
But we recommend Board members understand the history and fill as
see, and that section is a four-part session, about a half-hour
each. A lot of centers have their Boards take a look at that, and
the Boards will actually review it ahead of time.
And then you have a short discussion based on the study questions
that we provide. That is a real good way to get to the IL
information. Also there are excellent online resources for reading
about Boards, like the Board Cafe and Blue Avocado, both excellent
places to find articles about Boards free of charge you can find
online.
So while it is not a training session so to speak, it certainly
is training available to you in written format which you may want to
take a look at.
>> TIM: Great, and I just posted the link. You gave some other
great resources. But as far as IL-NET training, I put a link in the
archives to see if any are helpful.
I will take two quick clarification questions we received before
we go back to the phone. For those still waiting on the web, thanks
for your patience. We will get to your questions.
First question: On last week's call we talked about the 51% of
majority requirement of staff, persons with disabilities, not
"significant" disabilities. Is it 51% persons with disabilities or
significant disabilities?
>> PAULA: 51 percent persons with disabilities, but in the
nondiscrimination portion of the checklist, they look to make sure
that you didn't exclude persons with significant disabilities
because of that disability when you did your hiring process. I will
repeat it because it is like two difference pieces.
Piece one, 51% of the staff may have a disability,
self-disclosed, not required to be significant. But they also want
to look at your nondiscrimination when you are hiring to make sure
that you did not exclude persons with significant disabilities in a
discriminatory way.
TIM: Thanks. Second clarification before going back to the
phone, question asking if we can clarify the comment on Slide 8 when
you spoke about goals and contexts related to overcounting.
>> PAULA: This has been something interesting that came unfairly
recently. It was related to a specific review.
When the RSA reviewers looked at the numbers in the 704 report
and looked at the CSR, they saw that every entry in the CSR was
counted as a service by that center.
So instead of the services accomplishing a goal which might have
-- let's say 24 # a time you contact the person or the person
contacts you related to accomplishing that goal, the goal itself is
the count, one goal. Not the 25 times you talked.
>> TIM: Let's go back to the phone. We will come back to these
web questions after we take two phone questions.
>> There is a question on the line from Tammy.
>> Participant: My question is about resource development on fee
for service. We had a couple CILs who recently went through a
review. They had a lot of question regarding self-direct person
Nell assistance program.
In the RSA review, they tried to say that the Medicaid funds for
the personal assistance wasn't fee for service, when those of us who
do those services actually classified that as "pass-through" funds.
Can you give some up site on that?
>> PAULA: Yes, and that brings to mind another issue to mention
as well.
When funds are coming to the center that are a hundred percent
passed through, they are typically not counted. But when there is a
management fee or some kind of an amount that you get for handling
that, that portion of it is typically considered program-related
income. We didn't talk about what happens with the fees for service
when you raise them, but they are considered by RSA to be
program-related income.
That means they are under the same what you can and cannot spend
the money on, or they might be under the same bucket of how it is
allocated and how it is allowable, and maybe under some restriction
about program related income.
If you are raising money in a different program that is
unrelated, it will be a little different. It is not necessarily
program-related. RSA's interpretation has been if the staff person
who is doing the activity that raises money for you, if they are
paid through your Title 7 funds, then it is program-related income
and is subject to the same restrictions.
Did that answer the question?
>>
Participant: Yes.

In this case if we pay for the staff person to manage the
personal assistance services and all their benefits or salary,
everything is paid for through the program and no Title 7 funds are
used, then none of the Title 7 requirements apply?
>> PAULA: That would be my financing. I am looking forward to
more explanation around that at our financial training workshop
coming up later this month.
And then we also have a workshop on how centers build their
capacity, including fees for service coming up in June. I hope to
see more examples of exactly how it has been applied, because there
are not yet a lot of examples of how that has been interpreted with
centers.
>> Participant: We will be at that training. So thank you.
>> PAULA: Good. Maybe we can pin John down and get his opinion
on that too.
>> TIM: Great. Second question from the phones.
>> Yes, a question from Susan. Press 7 if you have a question.
>> Participant: Thank you so much for this web that are. It is
very helpful. I am with the center for independence of the disabled
in New York City. Can you elaborate a bit on the affirmative action
planning that is required?
There are very different kinds of affirmative action plans that
be created, some are very granular but they tend to respond to
specific issues that have arisen and present legal issues for an
organization.
Can you give some examples of affirmative action plan that pass
muster or pass the detail you think RSA requires?
>> PAULA: That you show you don't discriminate on the basis of
hiring. Significant disabilities is the first focus, and then the
second time it comes up, nondiscrimination phrase.
I live in California. One of the things that really struck me
when I looked at this nondiscrimination piece, it is very different
from what I am required to do for the state.
One of the first things each center will have to do is look at
this as only a starting place because you also have a responsibility
related to whatever is happening in your own state legally. I guess
that is my first caution.
RSA's list is the federal list, not necessarily the same as what
your state requires. So you want to be sure and look at that.
Affirmative action isn't actually mentioned here, so what you see is
nondiscrimination.
Then if you look back under the -- I'm trying to find it here.
>> Participant: Slide 9 describes affirmative action. We have
an EEOC statement, obviously, and we are compliant with federal and
state and local law.
But the reference to affirmative action, I wanted further
explanation of that.
>> PAULA: That caught me by surprise, as I didn't even remember
that being in here. I remember you pointing that out.
It is practices, but notice it isn't a policy.
The language on the checklist, including affirmative action to
employ and advance employment for qualified individuals with
significant disabilities.
>> Per test pant: Affirmative action has a legal meaning,
meaning to affirmatively employ and advance. But you didn't mean we
need an affirmative action plan that had specific targets and goals.
That is fine.

>> PAULA: Thanks so much for bringing that up. All these
questions have been great.
>> Participant: If I can sneak this in, on the decision making
definition in federal regulation, can you elaborate on the
definition at all?
>> PAULA: Yes, a little bit. That is typically identified as
whoever the supervisors are, although it could include someone else
who has a role.
The executive director would always be a decision maker and an
associate director too. Someone in the finance area may or may not
ab decision-maker, depending upon your structure.
Some organizations, the person they hire in their finance
department has a CFO-type role and really is a chief financial
officer, a participant in the management team, has a lot to say
about what happens.
While it other places, they serve more of a bookkeeping role, not
part of the decision-making process. So whether or not that person
would be included really depends on their function.
>> Participant: But someone who is not supervising staff but
supervises cadres of volunteers?
>> PAULA: Are they involved in management decisions? Whether it
is proposing policy, establishing work plans? My guess is over the
volunteer area, they would be.
>> Participant: So they are establishing work plans, supervising
those personnel. One more classification question about
decision-making.
We have a person on staff who is a in a unique senior counselor
position because of their expertise and knowledge of IL services.
They have a teaching role, but they don't do work plans and they
don't do personnel supervision, so lateness, et cetera. #.
Is that or is that not a supervisory role?
>> PAULA: I would consider it this way: You get to define who
has a supervisory role. And if you can justify it, they should
accept it.
>> Participant: Thank you.
>> PAULA: You put it in the job description, you identify who
your management team is and you identify they do indeed meet the
51%.
>> Per test pant: Ale he be darned. Thank you.

Who knew.
>> PAULA: Everybody is there to make a work. I saw a center
where they had three employees, the executive director didn't have a
disability, the other two people did. The only way to hit the 51%
was if all were decision makers, and that might be pushing it. But
if you can justify it and it makes sense to you, typically it has
not been something that has come up.
>> Participant: Okay, great.
<< TIM: Because of the volume of questions we got, I allowed us
to take 15 a minutes for this question an answer break, but I want
to get back to the presentation. For those on the web wanting
answers to lobbying and fundraising, we will get to those at the end
of the call. I want Paula to get back to her presentation.
For the folks at Access Living and wondering about curriculum for
independent skills training, this link was posted to our most recent
IL skills training.
If you are on the telephone it is on the ILRU website training
website, where you will see the get to the core of it skills
training. With that, I will go ahead to Slide 18. Let's continue.
>> PAULA: This is the slide I least want to talk about. This
allocation issue, personnel allocation, it is a very complicated
thing. It is a specific regulatory issue cited frequently by RSA
reviewers.
But I will tell you what is on the checklist, and then let's talk
a little bit about that. But we probably won't answer all your
questions on that one.
Salaries and wages are charged based on document payrolls
approved by a responsible official. That is the first checklist
item. That one is usually okay.
Usually somebody is checking off on timesheets or whatever the
actual document is that you use to determine pay. Now, the
distribution of salaries and wages are supported by personnel
activity reports, and reflect after the fact determination of actual
activity of each employee.
There are many loaded phrases in this one sentence here. So what
you have is first of all, that the distribution or allocation of
salaries, that there is a distribution, that is goes into different
categories based on your funding and how you spread that allocation
across those funding sources.
So the first part of that is, there is a distribution of salaries
and wages. The second part of it, there is a personnel action
report that tells what the personnel did that supports that
distribution.
So the second piece is you have a pay personnel reports their
activities. And the third piece, the way you allocate it, it is
across what they actually did, not what you predicted they would do.
This means if you have someone working under more than one grant,
under more than one project, you would distribute their salaries and
wages, and there are other related expenses, across your funding
sources based on what they actually did.
That means you have to do it after they did it, not as a
prediction. Whew! Then the reports are maintained that reflect
that distribution of activity so you know how staff members are
being charged to the different grants.
A good section of the financial management training coming up,
the three-day workshop in Pennsylvania later in the month will cover
this area of personnel activity reports and how they work and how
you do your distribution and your personnel cost allocation, that
will be specifically handled there.
It will also be posted on the website, just like we do this
webinar. That way you will have access to those material and to the
actual video of the presenters talking about this specific area. I
am not comfortable answering more than the most basic questions
about this because it is still kind of -- we're still kinding
firming up our complete understanding about it.
And the reason I say that, the Department of Education has a lot
of layers. There are different ways in which the Department of
Education informs us on how this all works.
When you look at the Department of Education information around
this, sometime we look at the whole big picture to figure out what
is the best way to do it, and I don't have things like sample forms
or things like that, but the presenters will have those things for
you at the workshop and online shortly after.
So hopefully that will help. Know to the next slide, as I hold
my breath. Your financial management beyond just the personnel
action piece, another area with a quite a bit of judgment knee.
Remember last week we said part of the increased scrutiny comes
from the fact OMB audited RSA, so the office of management and
budget looked at the rehabilitation services administration that
oversees us.
And OMB asked RSA to be more thorough in looking at fiscal
management when they come onsite. So we are all stepping up to do
this as accurately as possible.
The first thing we will look at, there is an accurate, current
and complete disclosure of financial results with each
federally-sponsored project in accordance to the standard Form 425,
a financial status report you are required to submit.
They will look to make sure you submitted it and that those
numbers agree with that they have as far as what you are receiving,
so accurate, current and complete disclosure.
Identify adequately the source and application of the funds for
those federally-sponsored activities, so you know exactly what the
source was and how you applied them.
And then the effective control over and accountability for all
funds, property and other assets to safeguard your assets.
Now "effective control" will be looked at in several pieces.
They will look at the what is called the division of lane earn or
distinct ways in which different people handle the information so
there is cross-accountability.
So one person opens the mail, and another person opens the
checks, or they open the mail together, whatever. So what are your
internal controls to make sure that you are taking care of the funds
as they come in.
As you look at property, what is your control over and
accountability for property purchased with the grant? You need some
inventory, policies showing how you bought it, how you can dispose
of it, your limits on being able to do that. So how do you
safeguard all the assets to make sure they are only used for the
grant and not given away in another way.
So look at how you control and are accountable for how you use
those funds relayed to property and things you control as well.

On the next slide, we continue the topic. How does your spending
agree with your budget amounts? So how much did you actually spend
related to how much you budgeted?
And sometimes RSA, related to that they will look at the
percentage of the year that has passed and the percentage of your
award that you have spent.
If it is out of balance, they may question you on why have you
expended 75% of the budget when the year is only 55% over? You are
overspending here, what is going on? So you will see that question
asked.
The next two are written procedures. Remember the word "written"
is what they will be looking for. They will be looking for written
procedures that minimize the time teen the transfer of funds and the
disbursement of funds by the recipient.
That means RSA would expect, when they come in and look, that
when you drew money out of the account for the Title 7 money, when
you drew that money down, you also wrote checks to spend that money
at about the same time.
So minimizing the time between when you transfer the money down
and when you actually spend the money in a way appropriate for that
tbrant.
So written procedures on that, and there was a bit of discussion
on targeting 48 hours for that window. That isn't actually what
they look at, but they will look at that you have actually done, and
if it is more than the 4 # # hours, I guess the way to say it, they
will be more concerned about it.
So look at what you do. You don't have to make it 48 hours. In
fact I suggest you don't put an actual timeframe in the written
procedures; otherwise you will be held to it. But put in the back
of your mind that is a number that has been bandied about, so it is
a good target.
Also look at your written procedures for determining that the
costs are reasonable, allocatable, and my spell-check doesn't like
that word, and then allowable.
You need to know those three things about your cost, and that
needs to be in writing. One thing we will have in Pennsylvania
later this month in the training, samples of written procedures for
all these things. They will also be posted online.
So when we provide a sample procedure, I know we all kind of do
it with dated-breath, but it won't work for you that way. You need
to have your name, the titles match, and you do what you say you
will.
But we have some suggestions for written procedures to help you
with that. The word "reasonable" means that you have checked.
fix Sometime it is a bidding process, if it is equipment.
Sometimes reasonable would be showing that you didn't pick the
resort hotel spa for your meeting, but you instead did something
mainstream that made more sense, so forth
That the costs are allocated appropriately. So if you have more
than one funding source, that you are allocating shared costs like
rents and management staff and your administrative functions are
allocated across your funding sources.
And that the costs be allowable. You will find some things that
are not allowable, probably some obvious ones would be typically
food that is questioned.
I have heard people make really strong statements like: I will
never buy food with Title 7 money because it is too complicated. Is
isn't that you can't, but it has to be essential to what is going
on.
So feeding your Board just to be social, so you want donuts
there, that probably won't be an ahowable costs.
So maybe the Board members may want to take turns to bring them
or forget having them because none of us need them. But typically
food will be questioned unless it is an essential part of whatever
is going on, so know that.
Alcoholic beverages are typically not considered allowable to
spend this money on, so you can't do a wine-tieing with RSA's money.

you will find all of this information in the fiscal management
training which we will go through in detail. And that you keep your
records, as part of that.
I am still on the last one on that prior slide -- sorry about
that. That you keep the records, cost accounting records,
supporting cost-allocation. That is a hint to me that I need to
move faster. I will go a little faster.
>> TIM: It is thinking about catching up now. It will be right
there.
>> PAULA: That is fine. I have it in front of me so I can move
on. You need a cost allocation plan or an incorrect cost rate.
Most of us look at doing a cost allocation plan, but I know of a
couple centers -- maybe many more -- that do federal indirect cost
rate.
But your cost allocation plan does need to be approved by the
U.S. us Department of Education and you do need to, once a year,
tell them that you are either still using the same cost allocation
and verify it with Department of Education, or you need to update
your cost allocation plan accordingly.
Cost allocation plans will also be a huge part of the training we
will do coming up shortly and it will be available whether or not
you are able to join us in Pennsylvania.
Then your administrative costs are distributed equitable manner
as you describe it in the plan. Some of that may be a little
complicated, so take a look at the training when it comes back out.
If you don't have a cost allocation you are comfortable with and you
feel you need to look at it again, if you haven't gotten U.S.
Department of Education approval, you need to do that, we will cover
all those in quite a bit of detail.
The next slide on accounting system, they will look for a formal
accounting system. This means you need records on all these. It
doesn't mean you need to use a specific accounting system.
Accountants can give along description about what is good or not
good about cookbooks or whatever it is you want to take a look at.
It isn't specified, the accounting system you have.
But you have to have a grant ledger that keeps your moneys
clearly identified per grant. In a general journal you need to look
at all the entries there and you need to have a way of receiving in
your funds.
You will notice a statement here that the organization determines
if it is cash or accrual basis. In a minute we will talk about when
you need to have an independent audit, a single independent audit.
If you have an independent audit and you have a cash system, that
is not a generally-accepted accounting practice.
Since a cash process is not a generally-accepted accounting
process, you will all have at least that one finding or that one
statement if you have an independent audit. So tuck that away for
future reference.
Let's look at the travel costs. These are reasonable and
allowable, which means they do not exceed charges allowed under your
own written policy. Or if you don't have that policy, there is a
federal rate that is set, and that is doesn't exceed that federal
rate or is provided for in that way.
We have seen a situation where centers, especially the last
couple years with gas costs going up and down, where centers have
said they pay one amount in their policy, and then they decide to
update it in their Board minutes, but they haven't got the
documentation that it isn't in agreement.
So make sure you keep is it up to date and you may want to tie it
to another factor so that you don't have to keep changing it, if you
think that will be helpful for you.
And that the cost requests are reasonable, that you have actual
receipts for them. A credit card receipt is typically not
considered to be the itemized receipt.
In restaurant charges, this would mean the itemized receipt you
at the time along with the little one that you sign, the itemized
receipt would be expected to be turned in to show the cost
reimbursement is justified and document.
Because the other one doesn't tell if you bought a tshirt or a
bet else of wine with your meal. So the itemized is what we look
for there.

Policy provides reimbursement by actual or per diem which you
determine, as well as you're howable costs. And you determine how
you tell if they are reasonable and allowable, but you need to take
a look at that.
In the area of procurement, you have to have a written
procurement procedure, and there is a reference there for you to
look at. All of this section, all of the second half of this
presentation will be covered in more detail in the training in
Pennsylvania.
But those procedures need to look at cost, quality, delivery,
competitive bidding, inspection, acceptance. So you notice it isn't
is a little bit of a discussion on procurement, but it says you have
to take competitive bidding, as an element, into consideration. And
see all the over elements there.
And separation of responsibility of authorization of purchasing
and subsequent payment. For example, payments are made only if
disbursements or checks are countersigned, and I don't remember what
that means.
That is the language in their checklist. These dots are all
right in the checklist. I am suddenly drawing a blank under why it
would be countersigned. I think what they mean there is dual
signatures on some checks, if the person benefiting from the
purchase is one of the check signers, you need somebody else to sign
the check.
And then under payment vouchers, that they are identified as to
the funning source, the expense classify kairks the transaction
date. And a lot of centers just buy a stamp that has all that stuff
on there.
So you would actually look at your payment vouchers having a
stamp, and you would stamp it. And it will have right there your
funding source, what category this expense goes into and the date.
It is usually initialed or signed to give the bookkeeper permission
to cut the check.
And you know what the limits are. Each staff person knows I can
only spend a hundred dollars or 5,000 dollars, and how much the
levels are before it requires that second signature, according to
your policy or sometime Board approval depending on the level.
So you need to determine your own policy, have limits established
and identified in your written policies.
The next one is property. Again, it requires that you keep
current and complete records of all the property you purchased with
grant funds, that you have some kind of a system for controlling
your inventory.
Now sometime that is one of those property labels, and you have a
numbering system and you -- if you have a lot of property, that is a
are very useful way to keep track of things. Because there may be
three desks that are the same and you need to know which desk was
bought with which grant so that you know how to dispose of it and so
forth.
But you need to keep records about how you maintain your property
and equipment. You need to do inventory at least every two years.
You need to adjust your inventory only upon written authority of a
designate official.
That means you can't have somebody at the front desk who decides
these things are all gone, I will just take it off of there. You
need a process to determine when there is an adjustment to
inventory, and that needs to happen according to your own process.
And those adjustments and how you deal with your property means
guarding against loss or damage or theft of that property.
So the policies and procedures have to control both purchasing
property, but also how you dispose of it, when are you able to do
that. So can you stake a look at that.
And your property includes include a description, a purchase
date, the cost, the serial number or ID number of the source of the
equipment award number, so you know what the source of the equipment
was.
Also, who owns the title, information from which federal
participation can be calculated. Location and condition of
equipment, the date it was reported and what you do with the
equipment.
Some of us have been doing this for a long, long time. There may
be a lot of equipment. I have been to centers that have offsite
storage just for this equipment because they are afraid to ever let
it go because it is federally-funded, and there are restrictions on
when you can let it go.
Some of that is determined by your own policy and procedure, but
it needs to fit what makes sense related to this, and you need to
know what happened to it, what was the ultimate disposition.
So if you turned those old computers to be recycled because they
fell under your equipment definition as something that needed the to
be tracked, you need to know what happened to them and what the
funding was and where they went.
So you need some property information related to that. They will
also then look at your records retention, which is the next item.
They look at least three years.
And for your state you may have other requirements and other
sources but federal is financial records and other documentation, so
all the documentation relayed to these records is retained for a
period of three years in accordance with federal requirements.
Now, you may want to keep some information very long-term, like
if you have an audit, your audit itself, you may want to keep audits
going back quite a ways.
You may want to keep your summary information, what you file with
the IRS and so forth, but you certainly want to keep everything,
including all backup documentation for a period of three years.
Remember if you expend more than 500,000 in federal awards, not
just this one, but any federal award, you are required to have
annual nonfederal audit including these funds and any other funds
you received from the federal government.
And then you have a responsibility to submit it to the federal
audit clearinghouse if you have more than doll 500,000 dollars.

if you do fiduciary oversight, make sure the Board is involved in
the report from the auditor. Don't funnel or filter it through the
executive director, but make sure that the auditor has direct
contact with your board of directors when they show the results of
your audit, if you have one.
The next slide tells you what happens next. If you have a review
or if you do your own review, if RSA does the review, you will have
to do corrective action plan with target dates.
Before you develop that, they will send you a draft report. If
you disagree with the findings, you can say that you disagree.
However, most of the time you have had adequate opportunity for
those conversations during the review itself.
So usually there are not a lot of changes that happen with that
draft report. I suggest to centers to get the draft report as soon
as you can and tell them you either accept or don't accept the
findings, with your rationale, but start on your corrective action
plan anyway because you only get a few weeks to do the corrective
action plan after the finality is back.
So if you already know you need to make some changes, get started
on doing that. Again, make sure it is included in your three-year
program and financial planning objectives for the center.
If you are doing your own review, you can still follow the same
process, and you will benefit from it. So make a set of goal and
objectives having to do with anything you feel is not coming up to
enough snuff to bring it back to the standards for external review.
Bring it back to flow through the mission so that you have goals
and objectives that improve your quality. That would be stuff you
can do out of this review.
Some of it will be written stuff, policies and procedures, so you
are going to need to make sure your written policies and procedures
are complete and that you are following them, that you are
implementing them.
It means training your staff and Board about them and then
following through in some way. So those would be expectations
related to the resolution of concern.
Now let's look just for fun at some of the most frequent or
common findings. One we are finding on a regular basis, the failure
to keep the cost allocation plan up to date.
Remember you need to send an annual review of that to RSA. It
may just ab statement that says we are still following the cost
allocation plan developed and approved in 2009.
That may be that you submit, but you need to submit and keep
updated the cost allocation plan. We also see a failure to im me
men the cost allocation plan as kind of a regular concern that is
fairly common in a finding.
Once you have your cost allocation plan, you need to make sure
you apply it. Usually the plan itself has a way, if you get a new
funning source, you can put that in to the cost allocation, and that
is usually the place where centers forget to apply it.
They get a new grant and they don't apply the formula across all
of the grants; they wait until later. And you need to apply it when
in your coast allocation plan at that time.
So your failure to base time allocation on after the fact records
which we mentioned a little while ago, and Richard has said he will
answer questions on that as we go through that in a minute.
And failing to have policies and procedures, especially with
procurement and disposal of equipment, but also failure to follow
your own policies and procedures is a fairly common finding.
So you may write a procedure more restrictive than that RSA
requires, but they will hold you to your policy and procedure when
you do your reviews, so make sure you have taken a look at that.
We do have sample policies and cost allocation plan guidance
posted for you. Can you look at those documents it will hopefully
be helpful to you in that respect.
Okay, that is the end of the checklist for RSA. They have a lot
to cover. They usually spend several days with you when they come
out. Your own review will probably take longer because you are also
trying to do day-to-day stuff as you go along.
I hope you will find this useful and use this checklist to make
sure that your center is as healthy as possible and that you
continually look at your own quality, which is what will protect you
when it comes to these reviews.
You want to be a center in excellent standing when your review
comes along. Are we ready for more questions?
>> TIM: We have a lot to go through. I hope some of you can
stay on the phone. We will continue for about 10 or 12 minutes
here. Let's have the operator give the telephone instructions.
>> If you have a question, press No. 7 on your telephone keypad.
>> TIM: While we wait for those, I said I would start by
clearing some of the pending questions from our first Q&A session.
Bonnie was wondering if we have examples of policies on lobbying, as
in hobbying versus advocacy for staff?
>> PAULA: I haven't looked for that specifically on our website.
I know we can put some up.
Looking at the reference we gave on that slide and looking at
that certification, it will be very clear information for you as you
look at the issue of lobbying. It tells you specifically what you
are not able to do with federal funds.
So look at that certification, and I think that will answer some
of your questions.
>> TIM: Thanks. And then from shairm Simpson and Steven
Johnson.

They were told by site reviewer they needed to complete and have
signed by the Board a document regarding lobbying. They don't
remember the name of the document. Any requirement like that which
you are aware of?
>> PAULA: That is the document we're talking about in the slide.
The slide that talks about lobbying, its prohibition, it has that
certification of lobbying ED-00-0013. You can again for it or you
can find it in the regulations.
That certification does need to be done annually.
>> TIM: Barbara has a question. They have conflicting opinions
on whether or not they can pay staff for time during fundraising
events. They often consider the events outreach, is that an
accurate interpretation?
>> PAULA: Let's take it from a couple different directions.
First of all because the requirements in these standards are there
for us to do fund development, it is assumed most of the time that
we are an exception to the prohibition of allowing for funds to be
used for fund development.
So there are centers who hire a development person or whose time,
some of the staff time is used who feel comfortable doing that.
There are other centers who don't feel comfortable using that. It
is a decision you will have to make based on your own assessment of
risk related to that.
Typically it is really messy to allocate the time of someone who
is not a full-time fund developer back to fundraising. Because
remember, you have to allocate the time based on what they actually
do.
Typically, fundraising isn't in their job. Top isn't simple, and
you are going to have to assess that for yourselves. It is done.
Then there is the third complicating factor, often fundraising
activities happen off-hours.
So you may have responsibility for overtime or other kinds of
wage concerns related to that. It isn't a situation we can walk
through and have an answer for everybody attending today, because
you will have to assess all three factors to make a decision for
yourself.
But if you make a decision you feel has adequately taken those
three factors into consideration, that it is allowable for centers
to do this, and you have looked at how you allocate the funds
appropriately for the job decisions and duties, and have you looked
at the overtime requirement, then you certainly have the right to do
it if those three things are met, but it is not simple.
>> TIM: Those are the ones from the list question and answer
session. But let's go back to the phone.
>> Question from Susan.
>> Participant. I am curious about whether you have examples of
the elements of adequate time recording or formats that are
approved?
>> PAULA: RSA has looked at some of the thing we are doing.
Richard, maybe you would like to weigh in?
>> RICHARD: There is an RSA Department of Education spreadsheet
available on their site that will be posted as part of the material
for the May financial training in Pittsburgh. It will be available
following that training.
There are other formats you can create yourself, you have to make
sure that it meets all the requirements that Paula outlined. It can
be very simple; it doesn't have to be as complicated as the
spreadsheet the Department of Education presents.
You can take a more simple path if you choose. Even if you
presented a form that was very simple with percentages of time spent
within a pay period, and it does need to coincide with pay periods
and needs to be signed with either the staff person or supervisor as
your policy states, and you have to make a decision about what you
want.
If you take the more simple path like something I just described,
you absolutely have to have the backup documentation that goes
behind it, showing there was a good basis for having filled out the
form in the way you did.
>> Participant: What constitutes a "basis"?
>> RICHARD: That is not defined. You have to make a decision
and look at it as if you were an auditor. You have to see whether
or not you think that a reasonable person would be able to say yes,
I can see you had good documentation that this is how you spent your
time.
If it is just a sheet all by itself, that is not enough. If you
have a list of activities on a daily basis and you can divide them
up and identify the particular cost objective, or the objective
under which you were operating, that does make a lot more sense. If
you are uncomfortable and you -- there is maybe a little risk with
this.
If you approach is more simple you can always go back to the
Department of Education spreadsheet and use it.
>> Participant: Is there a name or number for that ved sheet?
>> RICHARD: The best way to probably get to that is to go to the
ILRU website, go to the wiki under "what's new" there is the
financial management training coming up for Pittsburgh.
There you will find materials and resources. If those are not
already posted, they will be posted prior to the training and you
can look at those.
>> Participant: Thank you.
>> PAULA: Thanks, Susan.
>> TIM. One more phone question.
>> Question from Michael.
>> Participant: My question is more in line with a statement.
The link on Page 30 of the assessing the health part II
presentation, I clicked on the link and it doesn't work.
>> PAULA: I think you are going to have to copy and paste it.
Did it work that way?
>> Participant: It took me to a generic site not affiliated with
ILRU. It says FHA mortgages, bad credit scores.
>> PAULA: Did you do it with http?
>> Participant: Yes, there is one on the slide.
>> PAULA: I don't see the http on the slide.
>> TIM: We will get the link corrected and we will post it in
the public chat.
<< Participant: Thank you.
>> TIM: Sorry about that. We are at a your ter to the top of
the hour. This will be the last question we will have time for on
the telephone.
We have even extended our question and answer questions. We
didn't anticipate this apt of volume, so thanks very much for your
engagement.
And I encourage you please, please don't lose your question.
Paula is the technical assistance coordinator for the project, and
it is a big part of our role.
Put your question if an e-mail if you are waiting on the
telephone, and Paula or I will be sure to respond to you in the next
day.

Sorry to have to ask you to do that, but I want to be fair to the
time of everyone. One more phone question,. If you are still
waiting, send me an e-mail tim@ncil.org and Paula and I will review
them and get responses back
>> From Freida, she has a question.
>> Participant: The person asking the question stepped away from
the phone. Please disregard. Thank you.
>> TIM: I will use the time to wrap three web questions into
one. People are really latching onto the allowances around food
costs. Some people are asking for clarification and then some
examples about the allowability of food at a semiannual recreation
peer group meeting, or reimbursement to staff for food costs that
they had when they went to a training.
>> PAULA: Typically food costs related to required travel, that
is the training I assume would fit there, it would be considered
allowable.
Not allowing, having food costs covered that are not e smple alto
the event. But like everything else we have talked about here, you
have to justify for yourself what that means.
I wrecked with a couple centers under conditions of
rehabilitation services, meaning they have to get prior approval for
all their expenses.
I can tell you when they get prior approval for food, the process
is very difficult, just fighting that it is essential to the event.
For example when they have a training that they sponsor, they want
to bring people in and feed them lunch, the question the reviewing
person asks is: Couldn't everybody just break for lunch and then
come back to the meeting?
So you either need to show it is not practical to break for lunch
or there is no transportation or that they worked through lunch or
whatever. But you need to come up with your own justification for
why it is essential, because it could be questioned.
And if you are not sure you can make it essential, you probably
shouldn't spend that money on food. I know this would be easier if
it were all or nothing, but you have to make a judgment call on this
item as well as many other item, deciding what risk you are willing
to take to back your concept that you think it is necessary. But I
know it is not black and white, but that is the answer.
>> PAULA: I thank all of you for staying with us late. I have
clicked Slide 32, Paula's contact information. And I offered my own
as well. We are both taking questions, and are always happy to do
that.
Those on the web, I have already pulled out those questions. I
will put them in an e-mail to Paula and we can review them. But for
those on the phone, put them in an e-mail, and we will respond. I
hope this has been helpful.
Don't forget for you and your colleagues, part 1 is already
archived at ILRUdo the korg and part 2 will be arrest kiefd within
48 hours, training materials and audio in sync with power points,
accessible with captioning.
Thanks for being with us, and do check those out. Paula, a fan
says particular job putting clarity on these examples, wonderful
presentation.

To those out there, stay in touch and let us know your questions
if they are from today or whether you think of them in a few weeks.
Thank you.

(Event concluded at 3:50 p.m. CT)

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