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IL-NET National Training and Technical Assistance Center for Independent Living



Independent Living Research Utilization

www.ilru.org

Understanding and Using ACL's Compliance & Monitoring Protocol (COMP) Tool Part 1

Presenter:

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Evaluation Survey & Presenter Contact Information

Your feedback on this webinar is important to us. At the end of the presentation you will have the opportunity to complete a brief evaluation survey.

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What you will learn

- Regulatory requirements to perform annual CIL reviews and how to adequately communicate adherence to compliance during a review
- Aspects of CIL operations that must meet federal requirements including standards, assurances, program operation, organizational structure, and administration of the CIL
- The CIL's level of regulatory compliance and readiness for a review by conducting an organizational self-assessment using ACL's Compliance & Monitoring Protocol (COMP) Tool

Compliance and Monitoring Protocol (COMP)

- Has been developed by, the Administration for Community Living (ACL).
- Is available for download on ACL's website at <https://acl.gov/programs/il-comp>
- Is now in effect, and reviews at all levels have taken place.

The Objectives of CIL Oversight and Monitoring

- Assess compliance with the assurances and evaluation standards in Sections 725(b) and 725(c)(3) of the Rehabilitation Act, as amended, including the program operation, organizational structure and administration of the CIL under Section 725(c)(1), (2), (5), and (6) of the Act;
- Review documentation to verify the accuracy of the most recent annual program performance report (PPR);
- Verify that the CIL is managed in accordance with federal program and fiscal requirements;

The Objectives of CIL Oversight and Monitoring, cont'd.

- Assess conformance with the Center's work plan in the PPR* and consistency with the State Plan for Independent Living (SPIL);
- Identify areas of improvements in the CIL's programmatic and fiscal operation and provide TA resources available on the local, state, regional, and national level; and
- Identify areas of exemplary practice and make this information available to the larger CIL community.

*Program Performance Report (formerly the 704 report)

Purpose of Compliance & Outcome Monitoring Protocol

- The purpose of the COMP is to improve program performance.
- The Office of Independent Living Programs (OILP) relies on the COMP to provide consistent federal oversight of CIL grantees.
- Grantees may use the COMP to understand program and fiscal requirements and to conduct self-evaluations.
- Non-federal reviewers will use the COMP as a resource to ensure consistency during onsite reviews.

Components of the Review

- Federal review of program compliance
- Federal review of outcomes
- Federal review of fiscal operations
- Provision of technical assistance

There are Three Tiers to Monitoring

Tier 1: Standard monitoring is a desktop review by your program officer of the PPR, your SF425 reports, your drawdowns or any other information available. Your Program Officer (P.O.) may request additional information on any areas of concern.

Tier 2: Focused Review is led by a program officer and results from any information from a center that may be high-risk or of significant concern. It can be either a desktop review or an onsite review.

Tier 3: Comprehensive Review is led by a program officer but brings a team into the review to verify compliance with identified areas of high risk. This can be either onsite or remote and reviews documents, conducts interviews, and requires demonstration by the center of compliance.

This webinar looks at the COMP and specifically the comprehensive review as a tool for self-assessment by your center.

Your Notification that You're Being Reviewed

- The Office of Independent Living Programs (OILP), Program Officer will notify the center in writing (most likely by email, so make sure your center's contact information is current by notifying the Program Officer of changes, updating your ILRU listing, and updating your listing in SAM.gov).
- You will be notified by the OILP Review Team Lead if you are going to undergo a Tier 2 or Tier 3 review. The notification will identify the timeline for review and may include any concerns they will be looking at.
- If your review places you at "high-risk," you will be required to develop a corrective action plan that OILP will approve.
- Typically you will work with ILRU's intensive support program to develop and implement this plan.

If You are not Responsive to Your Requirements

- You will be placed in the High Risk category.
- The OILP may restrict your access to funds.
- Once your funds are restricted, you will be on a timeline to demonstrate progress which will be **no more than 12 months.**
- OILP may take additional action, including a move to terminate the federal award if no progress is shown after placement on High Risk status with funds restricted.
- There are a number of monitoring actions that may be implemented throughout the period of the Corrective Action Plan, determined by that plan.

You Can Find Much More About this Process

- After this training, the presentation and all of the reference materials will be posted in the on-demand section at ilru.org.
- If you are notified of a pending review, you certainly want to dig into more detail than we can present today.
- Today, we are discussing how you can use these materials now to improve your CIL's program performance by using this information and applying it to your CIL.

Questions & Discussion

Use the CIL Evaluation Tool

- Don't just answer "yes" or "no." Make notes in the comment section regarding where this information can be verified.
- If there is someone that might be interviewed to validate your compliance, jot down their name.
- If there is a policy number that applies to your compliance on an item, look up and verify that the policy meets the requirement, then note the policy number.
- Your working draft should have lots of notes, so that you are documenting how you can demonstrate that you meet the requirements, as well as develop a "to-do" list for corrections and updates.

Verification of Standards and Assurances: Consumer Control

- You will need to record whether the number of governing board members with significant disabilities is over 50%.
- To do this you have to ask. Centers that do not ask board members if they have a significant disability are out of compliance.
- In this section you will also need to demonstrate that the board is the principal decision-making body.
- Reviewers will be reviewing board minutes for the past 12 months.
- They want to see written policies and procedures for specifying the roles and responsibilities of board members and for your process for identifying and recruiting board members.
- You will show similar information regarding whether all employees and those in decision-making positions are more than 50% individuals with disabilities. So you need to ask employees to disclose this.

Verification of Standards and Assurances: Self-help and self-advocacy. 725(b)(1)(B)

- Are you able to show a record of self-help and self-advocacy among individuals with significant disabilities?
- Do you conduct/participate in both individual and group activities showing self-help and self-advocacy?
- Can you identify staff or consumers who could be interviewed and verify some of those activities?
- Do individual Consumer Information Files clearly include information on how your center demonstrates a commitment to self-help and self-advocacy?
- How do your policies address self-help and self-advocacy?

Verification of Standards and Assurances: Peer Relationships and Peer Role Models 725(b)(1)(C)

- How do you promote the development of peer relationships and peer role models among people with disabilities?
- Can you identify staff or consumers who could be interviewed and verify some of those activities?
- Does your Consumer Information File clearly include information on how your center demonstrates a commitment to peer relationships?
- Are you able to demonstrate peer support that is individually goal-based, not group-based only?
- Are there peer role models in addition to your staff?
- How do your policies address peer relationships?

Verification of Standards and Assurances: Equal Access 725(b)(1)(D)

- How do you promote equal access for individuals **within the community**? [*Equal access, for the purposes of this question, means that the same access provided to individuals without disabilities is provided in the center's service area to individuals with significant disabilities.*]
- How do you promote equal access to all your services, programs, activities, resources, and facilities, regardless of funding source?
- Can you identify staff or consumers who could be interviewed and verify equal access?
- How do your policies address equal access?

Language access

- What native languages other than English are used in your service area?
- How do you make information and services available to people whose English proficiency is limited and who apply for or receive services?
- Can you provide copies of written material that has been translated for access?
- Are all your written policies, materials, and IL services available in alternative formats (e.g., Braille, large print, audio tape, electronic)?
- How do you provide access to individuals with intellectual disabilities or who are Deaf?
- How do you address language access in your written policies and procedures?

Are your Offices and Services Physically Accessible?

- How do individuals with mobility disabilities access doors, bathrooms, parking lots, etc.?
- Is signage at a height and in a format useful for all? Braille, tactile, large print?
- What are your policies and practices around environmental access? Do you have:
 - ✓ a no-fragrance policy
 - ✓ use “green” cleaners
 - ✓ time any chemical treatments for after work hours
 - ✓ have signage requesting no fragrance of visitors?

Use the Accessibility Checklist provided

- You may have already completed a formal ADA review of your offices and services.
- ACL/OILP has provided you with a CIL Accessibility Checklist in the Appendices. You will be expected to have completed this, noted what improvements are needed, and marked what policies and procedures apply. Attach those to the checklist as you prepare.
- Begin immediately to correct any accessibility issues identified. If reviewed, you can demonstrate that you took action.

Provision of Services on a Cross Disability Basis 725(b)(2)

- Take a look at your last PPR and at the people who come and go in real time. Is it clear that you serve people who have a range of significant disabilities? Show the numbers.
- What is your disability determination? Can you show that the people you serve verify that they have significant disabilities?
- The CILs and SILC determined who is unserved and underserved in your state and included that in your State Plan. What are you doing to address their needs?
- Do you have additional unserved/underserved identified as specific to your CIL? How do you serve them?

Independent Living Goals 725(b)(3)

- Do you have a Consumer Information File (which you may call a CIF or a CSR, consumer service record) for each consumer?
- Does it contain your documentation of eligibility for services? (Usually the person's declaration of a significant disability).
- Do you turn away or refer people who do not identify as having a significant disability?
- Do you document notification to the consumers of their right to develop, or waive the development of an Independent Living Plan (ILP)? Usually this is a yes/no statement. Can you show the source of total numbers?
- This documentation can be on an entry form.

IL Goals Must be Written Whether or Not There is a Plan

- Does the file include notes that indicate the services requested, and the services provided to or arranged for the consumer?
- Do the notes indicate the development and achievement of IL goals selected by the individual with significant disability who requests services from the CIL?
- Do the notes document completion and if the consumer believes they have achieved goals or objectives?
- Do the ILPs indicate the goals or objectives established, the services to be provided, and the anticipated duration of services?
- Does the ILP indicate it was developed jointly and signed by CIL staff and the individual or their legally authorized representative. (Electronic or scanned signatures are acceptable.)
- Are you able to identify the number of ILPs/waivers?

Satisfaction and Complaints

- Did you provide consumers information on the process to express satisfaction or dissatisfaction with the CIL's services?
- Did you notify the consumer they can appeal CIL decisions?
- Did you document a notification to the consumer on the existence of, the availability of, and how to contact the client assistance program? With availability of accessible formats?
- Was the consumer notified that they can request accessible formats?

A Few More Items on the Written Plan/File

- Are the ILPs provided in accessible formats as needed?
- Are ILPs reviewed at least annually to determine whether services should be continued, modified, or discontinued and/or whether the individual should be referred to other options?
- Do you have signed release of information forms as required/needed?
- Do you provide notification (if possible) about the closure of the individual's CIF?
- Do you have written CIF management policies and procedures addressing all these areas?

Review the Consumer Information File (CIF) Checklist

- The appendices include the checklist reviewers will use to review your files.
- You can use it to conduct an internal file review. (What a great isolated activity!)
- At a minimum, each person who contributes to a file should double check those files during a review using the checklist.
- Best practice: Staff participate in a comprehensive, regular file review, reviewing each other's files for that fresh look at the information. You verify corrections.
- Regular file review could be a monthly review of 1/12 of the files so that all files are reviewed in a year.
- Regular review could be a two-day retreat to review all files at once and bring them up to policy/expectations.

Questions & Discussion

Community Options and Community Capacity

725(b)(4) and (c)(10)

- Can you document at least one CIL activity in community advocacy in the past reporting year?
- Can you document at least one activity of technical assistance to the community on making their services, programs, activities, resources, and facilities accessible?
- Can you document at least one activity in public information and education during the past year?
- What is your aggressive outreach to individuals who are unserved or underserved?
- Have you performed outreach to minority groups and urban/rural populations?
- Have you collaborated with service providers, agencies, or organizations to the benefit of those you serve?

Can you document provision of ALL core services? 725(b)(5)

- Information and referral? In accessible formats?
- Independent Living Skills Training?
- Individual and System Advocacy?
- Transitions from nursing homes or other institutions to a home in the community with requisite supports and services?
- Assistance to individuals with significant disabilities at risk of entering institutions so the individuals may remain in the community?
- Transition of youth who are individuals with significant disabilities, who were eligible for IEPs, and who have completed secondary education or left school.

Can you document the provision of other services? 7(18)(B) You need at least two.

- Psychological/psychotherapeutic counseling services
- Services related to securing housing or shelter
- Rehabilitation technology
- Mobility training
- Life skills, interpreter and reader services for those with cognitive or sensory disabilities
- Personal assistance services, attendant care and training
- Surveys, directories or other re: housing, recreation transportation and other supports
- Consumer information programs on rehab/IL for underserved
- Education and training for participating in community
- Supported living
- Transportation
- Physical rehabilitation
- Therapeutic treatment
- Prostheses and other appliances & devices
- Individual and group recreation
- Training re: self-awareness, esteem and self-empowerment
- Services for children
- Preventative services
- Community awareness

Questions & Discussion

Final Questions and Evaluation Survey

Any final questions?

Directly following the webinar, you will see a short evaluation survey to complete on your screen. We appreciate your feedback!

https://usu.co1.qualtrics.com/jfe/form/SV_b42FgXNGROQF0Md

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