>> Paula: Two minutes. This is your two‑minute warning. All right. Just to orient you to how we're doing this, the plan is to cover the last two handouts in your packet today which are two different PowerPoints. Although Roger has been willing to jump in. He may or may not be able to keep me from when he does, but there's one with his name on it, one with my name on it. I'm Paula, he's Roger. We're both going to speak. I'm going to lead off and go from there. There is also another one‑page document that was actually in yesterday's packet called "The Consumer Service Record Checklist." Not to be confused with Deb's document called "The Program Assistant's Only Closed CSR Review Checklist." The reason I point out the confusion is because we were confused enough in our instructions that when we tried to replace one on the website, only one got up on the Wiki. And I need to double check on that time of day to make sure we got them both up for you. But if we didn't, they will be shortly. So just so you know. So we're going to talk about regulation a little bit. How many of you had a federal review at your center while you were there? You may have good insight as we go along here today. Don't hesitate. We've only got half an hour, but don't hesitate to jump in a little. Everybody spot those guys? They may have some peer support for you later. Anybody who has during the time that they've been in the position, have you applied the federal checklist on your own? Have you looked at it ‑‑ I'm seeing some blank looks like not everybody knows what that is. That will also be on the Wiki for you. But the RSA, Rehabilitation Services Administration, that oversees our services got in trouble recently. They were given a report recently to indicate that they should do even more review. They want us to be as prepared as possible because they want us to succeed, do it and do it well. So they took their checklist of what they review when they go through with you and they put it on their website. It's on RSA's website. So you can find that checklist and you can look at that. And on May 1st, you'll find this posted ‑‑ it's already posted on our website, there's a webinar around that entire checklist, RSA's. ed.gov/rsa.

>> Audience: Did you say May 1st?

>> Paula: May 1st it's a webinar on applying the entire checklist to help you be as ready and as on target with the regulations as you can be. But today we're only going to look at the CSR portion of that because that's ‑‑ there are lots of topics that we all would love to cover and we have to stay to this topic. So related to the consumer service record and related to the services that you've all been talking about and how you provide those, we want to look at what regulatory requirements are there related to how you document what you do. Because some of what you do with documentation relates to the regulation. Some of it is flexible and it relates instead to what you decided to do in the recordkeeping. So let's kind of sort those two out. Figure out who can talk a little about where we are with the reporting requirements.

First thing is, there's a couple ways that RSA knows that you're doing what you say you're doing and that you're actually effective in what you're doing, and part 1 of those is the 704 report. There's also a financial piece related to that called the SF525, right? My brain won't work today. There are other things, but a 704 report has some very specific things around what we've been talking about, right? Some have been talking about setting goals. And in your 704 report, as some people have mentioned, you tell how many goals people have set and met in different areas. What different areas you've been working in. You also talk about how you look at information and referral. How do you judge that, how do you measure that. How many information & referrals and what type have you provided. And one of the things they ask you for besides services and I&R is how many people have plans and how many people have waivers. Now, there's not a magic number. Sometimes people will say, is it supposed to be 50/50 or what? No, there's not a magic number, but if you have almost all waivers, probably there would be questions as that's kind of a red‑flag because there are many people that you work with who are going to say to you, if you say let's set some goals, do you mind if we write them down in a plan that will hold both you and I accountable on that, most people or more than half of people will probably say yes. So the red‑flag is, how are you presenting that option for waiver? Because there may be a tendency to maybe say, oh, you don't have to do it. Which is not the same thing as offering people a plan and a waiver. Do you see the difference? So if you're just saying to people, don't worry about those plans, you're going to have a high proportion of people who have waivers. So you see how that works? So there's not a magic number, there would be some things that might be red flags about that number in your 704.

>> Audience: Paula, I have a question. Do you have any opinion about centers that have diversified funding. So Part C is paying for some of the things they're doing and not other things they're doing like, let's say, home modifications for instance. Should that be included in these recordkeepings in the same way?

>> Paula: The understanding we have is yes and here's why. As part of your Part B grant or your Title VII grants, you are also supposed to come up with those other services, those other resources that will provide services to your folks. And so if you count all that you do because you've initiated it through your Title VII money, that's certainly legitimate so you can count those numbers. Now, it's not the same thing as, there are some ways in which you want to keep things very separate on the financial side, and probably you have specific reporting requirements for that grant itself and you're going to have to sort that out because each center may have a little different mix, but in general, RSA wants to see what other services you generated as a part of the Title VII.

>> Audience: Thank you.

>> Paula: Anybody see anything different? Roger does.

>> Roger: As Paula says, we're required to do resource development, you know, to broaden our abilities ‑‑

>> Audience: Are you talking into a microphone?

>> Roger: Thought I was. They might have turned it down. Is that better?

>> Audience: Yeah.

>> Roger: At any rate, one of the main reasons we report all of this stuff to RSA is so that they can present it to Congress to appropriate money for centers for independent living. And it's really nice for RSA to be able to say to congress, look at the bang for the buck we're getting, you know. And I'm just throwing out things, but, you know, you may have a center whose entire Title VII Part C grant is $230,000 and may have a $3 million budget, and that $3 million is going into achieving its mission. Okay? So that sends a real message to Congress that that $200,000 is really important.

>> Paula: A wonderful investment on the part of our country to help us with things.

>> Audience: We had a ‑‑ can you hear me? We had a recent RSA review, and this is kind of an interesting story about this. About identifying your funding source and identifying what you are going to report on your 704 report. How many of you are familiar with the WIPA project? When they did that, the Social Security Administration requested that all of those files be destroyed. But the policy is that all records must be retained for a minimum of three years. However, RSA stated that if you have a funding source and you're reporting the goals set and met by consumers with that funding source, you have to comply with all 704 requirements. So I guess the point is, just if you have a funding source and you cannot comply with all of the 704 requirements, then don't report the goals on that particular project.

>> Paula: Good clarification. So by reporting the goals, you put yourself in a position of having to retain records which the funder would not allow you to retain?

>> Audience: Exactly.

>> Paula: See the dilemma there? Yeah, yeah. So you do have to look very closely at your grant specific requirements because those specific requirements may cause you to behave in a specific way. Because some of us have state money as well as private grants. You have to look at the conditions for each one and figure out where that fits, but RSA will not say you can't count those people. Okay? Yes?

>> Audience: (Inaudible).

>> Paula: Okay. So when we look at your consumer record review, these are the things that are on RSA's checklist. And the first thing they want to know is that in the actual record, you have determined that the person is eligible for the program. Let me tell you what this does and does not mean because, you know, we're all familiar with eligibility that makes us kind of start sweating a little because we know it's that Social Security thing or you have some other eligibility kinds of things. This is self‑disclosure guys. You don't have to get any medical report, you don't have to have any doctor sign off, but you have to ask the person. And sometimes organizations are being cited because they just don't even ask or there's no record that they ask. There's no documentation that they asked the person. So you need to ask the person when they come in, do you have a ‑‑ and the word here in the law is significant disability. Do you have a significant disability? When you have your 51 percent staff and management, the word significant isn't in there. But with your board and with the person served, it's significant disability. Now, significant disability, there's a very specific definition, and we can probably post the link to that too. I hadn't thought about that, but I'll pull it up for you. But the designation has to do with, does it affect your daily life? Does it affect what you do day by day? That makes disability significant. Sometimes people will say, well, you know, you always think like I don't know if it's significant or not. Well, think about it. Do you change what you do every day because of your disability? It's not that we're saying you can't function because it's so significant. We're saying that your disability itself is significant. So the eligibility would be, does the person have a significant disability? And that's actually on the review ‑‑ on both review checklists. Because the one that's posted on the Wiki now is the checklist that the reviewers use, one for each record, as they go through, and it is not identical to the other posted checklist. That's a consolidation of all of those individual records. And so they will do this checklist that I'm going over now with you on each record, and then they consolidate that into the overall. So they will ask with each record they review, has eligibility been determined and they are requiring to sign and date it. And if your policy says signed and dated by both the staff and consumer, then it must be signed and dated by both. If your policy says signed by or a staff person or a consumer, you can decide. Interesting, huh? When you have to pin things down to detail, sometimes that's important. So if I throw in a little of those, there you go. The next thing they want to know is what services were requested. Because sometimes what the person requests is not the same thing that you end up with, and you have a lot of examples of that yesterday as we talked about I&R, right? A person comes in asking for a specific thing, but they don't really know what other options are available until you share that. So what did they request and did they sign ‑‑ is there an ILP or did they sign a waiver or did someone sign a waiver. And there's that. And it's actually not in their regulation. Can be a staff person. The next thing they want to know is what IL services did you provide? And this has been a fascinating one to look at. And I don't know if any of you with recent reviews would have some conversation around this, but they are looking at the content of those ILPs and they are determining from that whether or not you're providing the four core services. So if there are not all four core services fairly regularly showing up in those plans, they're going to begin to question whether or not you're providing all the four core services. Two questions related to that. Number one, define what your core services are for you. Just because we can all rattle off those four items doesn't mean it's identical. And there was a really good discussion back here at this table yesterday about when does I&R become something else, right? It's a good question. But you can determine that. That's not dictated to us. But you need to know what your determination is so you're identified, right? So identify what do you do that's called I&R? What do you do that's called peer support? What do you do that's called that. And make sure those are all identified as you go along. Make sense? And then you will probably need to make sure that the goals are listed in the record whether or not the person had a plan. Because you can't measure if a goal is met, which you're required to do, unless you write it down. So if you were unclear on that, it's true that people can waive a written plan, but you still have to write the goals down anyway. Okay? So that does bring me back around to this question of, what's the point of a waiver? And a lot of centers have decided instead to take a more proactive approach with people and just say, how can we help you plan for a more independent life? Let me capture your ideas in writing. Let's work on them together. Let's figure out how we can hold each other accountable for whatever pieces we're putting together here. And you know that's working well for a lot of centers.

Any comments about any of this part before we go on to the next slide?

>> Audience: I have a question.

>> Paula: Yes?

>> Audience: This is something we struggle with because we've got one person that's an information & referral coordinator and then we have another person that does various things. He's my advocacy specialist. And one of the things he does is he fields a lot of ‑‑ they're like information & referral calls, but they're for advocacy. I can't get this through a system basically. He's the person that helps talk them through the system. But most of that is just done over the phone. So there's no CSR opened and so a lot of the advocacy that we do goes that route. I mean, there's some that goes through the ‑‑ with the independent living skills advocates, but a lot of it goes through that, but then sometimes we're a little fuzzy how we should be reporting that and getting credit for it because he's doing it like half time. That's all he does.

>> Paula: But he didn't write a goal for it.

>> Audience: Exactly. Because we don't have a record for them. We just have a spreadsheet thing like we do for I&R.

>> Paula: Yeah, as long as you have some kind of documentation about how you're providing advocacy, and some people have advocacy goals. Both can certainly be counted.

>> Audience: I hear Richard behind me calling it I&R.

>> Paula: Call it I&R, but say it's an advocacy I&R.

>> Audience: Right.

>> Paula: Did you have another comment Richard?

>> Audience: That was it.

>> Paula: That was it. Call it I&R because I&R is the only time you wouldn’t need to have a consumer service record. So if you call it anything else, you have to have a consumer service record. So you can say it's an advocacy I&R, but it's still I&R, information and referral. Does that make sense?

>> Audience: Yes.

>> Paula: Ready to go on to the next one?

>> Audience: Yes.

>> Paula: What? I missed it.

>> Audience: I guess one other way you can view that is a form of systems advocacy, and systems advocacy is a different animal altogether. And it could be considered as that kind of activity, but in terms of individual documentation of services, I believe it would have to be considered as I&R.

>> Paula: Yeah, because it says it's not ‑‑ systems advocacy is interesting because it often flows from the individual need. So it often has a component of some specific person's desire to access some specific service or place or whatever, and that makes it specific in your experience, but not specific necessarily in your recordkeeping by name in that CSR. You would not be required to do that.

You may still want to keep some great notes about what you do because you want to say, hey, we had an impact on this and this and this, right? And you had a chance to report that so don't forget to keep advocacy notes on the advocacy portion of I&R. That would still be helpful for you. Okay. The next thing you're going to do is check off those goals or say that they've been changed or say they have not been met as you redo that plan. So on whatever time frame ‑‑ and everybody's different about that. On whatever time frame you do a review, and that may even be individual. In some centers, it's individual to the person. So you say, well, how often should we be checking back in on this then with you? Do you want us to check once a month or do you want us to check once a week? Are you going to come in and talk with me quarterly and we'll see what we need to change? It depends on how much you're doing and how much they're doing and how confident they are about where they're going with the steps, right? So you may have something different for each person. And if you have something different for each person, that's fine, but you must review the goals at least once a year. And if we're only seeing annual review, typically your reviewers are again going to have red‑flags because it kind of indicates you're not doing follow‑up that might encourage people in some way. You want to make sure you have thought about this. Think about it, develop your own policies. What are you going to do internally? What works for your organization and what works individually for that person for a follow‑up process so at least from time to time you're asking the question, okay, how are we on these goals? Have we met them? Are you done with us? Do we need to extend some things? Do we need to kind of step back and modify what we were going to do? What is it that we want to do next? And you must do that at least once a year. Of course the caveat is assuming you can connect with a person when you go back to try to connect with them. And I don't know how mobile your communities are, but some of our California communities are very mobile and we go back more frequently than once a year and still can't find folks because they are homeless and so, you know, we hope they come back to see us, but if they don't, we sometimes at that point have to say, not able to contact. Wait for them to come back to us. Okay. Also you will need in the record a signed release of information for anything that you release information for. And we have seen something interesting in the compliance reviews that sometimes even when a center says we do not use photographs of consumers, they are sometimes getting a finding that they did not have photo releases in the consumer service record. So my suggestion to you there is be very clear on your policy. Because if you're just saying we don't do it, they're not sure you're not just making it up on the spot honestly, you know. Because if you have any pictures in your brochures and stuff, they're going to want to see the results. They're on your website, in your newsletter, in your blog, on Facebook. If you've got pictures of people out there anywhere, you're wanting to have a release to have that picture needs to be in your CSR. Yes?

>> Audience: What about if they're consumer records, take pictures of their ID?

>> Paula: I don't know. You don't have to have a release to put an identification in a consumer record, do you? I don't think so. But most people don't use ‑‑ don't use a photo ID anymore, record, but you may have some programs that require it, so.

>> Audience: What about people who are in a photograph, but around there as a subject of the photograph?

>> Paula: Within your organization, if you use their photograph, whether they were the subject or in the background, you must have a release if they're a person that you provide services to. Now, if you're at some public event and the newspaper comes in and shoots a picture, different rules. But our rule is, you need a photo release or you won't use that photo.

>> Audience: So we recently moved into a new building and we had a large reception and we had a couple of hundred people and there are a lot of those pictures that are up on their website. We should have had a couple of hundred releases?

>> Paula: How many of them are people that have CSRs with your organization of that 200 people?

>> Audience: 75‑ish.

>> Paula: So you don't have to do it for other people that come into a public event, but you are taking a different role in the lives of a person as a CSR. And I think it would probably be questioned if you didn't have it. Now, Richard is going to disagree. Let's see what he has to say.

>> Audience: Sorry.

>> Paula: No, you're allowed to do that. You're my boss.

>> Audience: That's not why I'm allowed.

>> Paula: I'm just laughing.

>> Audience: But on that issue of taking photos and IDs, we would encourage you to have a very good reason to gather and maintain that information. Because you're adding a different level of complexity and obligation for your own organization for maintaining privacy of that information. And it means if you're going to maintain Social Security numbers, driver's license, IDs, photos, things like that, then the care that you have to take with those records expands greatly. And you have a liability issue if those records are lost or stolen or if someone on your staff, heaven forbid, should misuse that information. So make sure if you gather information, that there is a true need for what you're gathering.

>> Paula: Make sense?

>> Audience: I'd just like to follow up on what Richard said. When we had our review done, RSA did note that we had copies of driver's licenses in files. And while it wasn't a finding, they did caution us, if you have that photo ID in the file, go ahead and give it a time limit. If you need it now for some purpose, 30 days after that objective is completed, shred it and don't keep that information in your file. The same with Social Security numbers. And the reasoning Richard is, just as you said, the level of liability.

>> Paula: And identity theft is a very active business today, and you hope you never hire someone that would use information in that way, but it is not impossible that it would occur. Just be very cautious.

>> Audience: I just want to clarify and make sure we're in compliance here. When we have consumers who are involved in something where there may be a photo shoot, we may be doing group photos, we get the photo release signed by them.

>> Paula: That's correct.

>> Audience: But we are not required to have in each of the CSRs, everyone that is a consumer with our agency. It's only in those events when we know we're going to be taking photos and possibly using those that we would need that in their file, correct?

>> Paula: You write the policy and they will hold you to your policy and that is what I would recommend, yes. Because technically I think you would be hard‑pressed to say, well, I had this photo release and it's for any photo I take. They don't like the photo I put up, but I had a release. But if they had a release for a specific photo use, that's a different thing altogether. It's a lot more transparent way to use a photo release. And if you write your policy that way and you have evidence of, okay, these are the three pictures and here are the releases that go with them.

>> Audience: And that is the way our policy is written.

>> Paula: So your policy, you will be held to your policy on that. And you can write it either way, but I think this is the better way. Okay. Other questions and comments? Because we have to give Roger a little time.

Okay. Remember sometimes the photo releases have been required. And then you are required to give notification. We'll talk about that on the next page, some of these do not have to be in the CSR, but the CSR is probably the best place for them because where else are you going to keep this information and that would be things like your notification to them that they can appeal to the public assistance program, for example. You're offering it is available in alternative formats. And recently in a recent update, RSA specified that essentially the CAP program must be in accessible or alternative formats. So keep those in mind as you go through there. Now, as we're looking to all of these requirements and where you keep a record, there was a question earlier about electronic records and paper records and where you keep the records, and here's what we're seeing now. Most of the centers are moving towards electronic records because you can password protect them. There's not the fear that somebody might forget to lock the cabinet at the end of the day.

As long as you have a computer so they go down when you're away from the desk so nobody can access that information without a password and it's all protected. A lot more and more are going to electronic records. You will be asked if you have electronic records though. How do your consumers access their own record? Because one of things you need to do is, if they ask to see their record, they have the right to see their record. So you need to think about that. How am I going to do the consumer access to the record if it's an electronic record, and decide and put it in a policy and follow up with that policy. So you may decide if the consumer requests the record, we're going to set up a computer for them in the conference room and they can access their record, and here's how we make sure it's only their record and nobody else's. Okay? So you have to have some kind of safeguard there. Or you may say, we will print it and give it to them. Or you may say, they can sit next to me at my desk and I'll go through it with them. You need to think about how you will allow access, but if you're not doing just paper so you can't hand it to them to go into the other room to read it, that's an issue. And then on the flip side, you've got the issue of how you make it available to a person who cannot see that paper record. So you may in those cases need to have an electronic record anyway. Yes? You had a question?

>> Audience: So if someone does request to see their file, do you have to have a policy in place as to how you're going to provide that?

>> Paula: I would strongly recommend that you do because there could be questions about whether or not you really allow access if you have office ‑‑ from beginning to end, and policies help you think through which practices. Their value is they help you think through the entire step‑by‑step process, and you get it nailed down and you can communicate it then to everybody because it's all in one place. So you want policies when you can, and those are the kind of policies that are helpful. Other comments or questions about that? Richard has a comment. Yes?

>> Audience: Sorry. Bang myself in the nose with the microphone. There are some forms that you need to keep as printed forms, and our tutorial on CSRs identifies those forms that need to be kept as print forms.

>> Paula: It gives you quite a bit more detail than we have time to go through right now. So, yeah, you should take a look at those. Okay? All right.

So here's some comments from actual compliance review just to go kind of back through that real quickly. If most consumers waive plans, require retraining and processes to present and understand the advantages of developing an ILP. You see what happened, most consumer reviewed plans, the finding from RSA read something like the staff must be retrained and ‑‑ and the organization must develop policies and processes so they understand the advantages of developing an ILP. So you can tell there's kind of a preference for the ILP. Another one we saw pretty frequently is that all records must include development and achievement of IL goals selected by the individuals. And there were two kinds of things that tended to happen that did not express the person's ‑‑ maybe three ‑‑ the person's own goal. Sometimes there's a ‑‑ some people are using a software that has predetermined goals, and I think that's mostly gone by the wayside. I don't think that's out there anymore because it's not individualized enough and it's not flexible enough. But the other two things that sometimes happen with this is, the first one is that the staff person is writing down the name of the program rather than a goal. So you don't want to write down transportation as the goal. You want something measurable and you want it in the words of the person, and then you help that person translate into something reasonable. So they say to you, I've got to get to my mom's house and she moved here and I don't know how to get from my house to her house. So I need to figure that out and I need to know what transportation is because we have Sunday dinner together. Okay. So Sunday transportation from X to Y. All right. Let's figure that out. That is how you become ‑‑ how you make measurement of the thing they said they wanted to do. So you write down what they wanted and then you write down something measurable to get you from here to there ‑‑ to get that person from here to there.

Another thing that we saw is that the CSR does not clearly document services, what service things were so that there was a question about whether or not the four core services were actually provided. So if you don't have plans that also tie some things back to the four core services, you can do more than the four core services, but they ought to be able to pull those records out and a sampling of records to see all four core services in operation.

So if you pull a record out and you ask yourself, could I tell what core services this person's accessing? If the answer's no, think about how you're going to add some documentation to capture that. Okay? Another thing we saw is that consumers are interviewed during your time. And if the consumer did not understand independent living philosophy, the organization was cited. Now, I'm pretty sure that not every person they interviewed would have to understand independent living philosophy, but you probably want to make sure at least some of the people they interview are people that have been around and get it, you know. Because they want to know that you're preaching it, whether or not ‑‑ you know, they want to know you're preaching it and some people are getting it. Some of the people they interview will need to understand that. And, again, that's one of the requirements then that they put on the center was, retrain your staff. They ought to be teaching us. Retrain staff, update your policies and procedures because consumers ought to know this.

Now, when you have a review, here's how it gets resolved. Usually they will send you first draft of a corrective action plan with a target date for responding back to them. Often they will have specific things that are about policies and training. That you will also frequently see that they will ask you to address this in your three‑year plan. Does any of this sound familiar to those of you who have had recent reviews? Okay. I'm glad they're similar. But they will ask for written policies and procedures, training for staff. They will ask that you document your implementation. So of course your best solution is to have all of this in place before they come so you don't get a plan of correction with a bunch of findings. But if you get a plan of correction with a bunch of findings, these are the things you'll have to do a corrective action, what you're going to do with a target date and usually in your three‑year plan, in your financial plan, if that's applicable. Staff training and implementation through documentation.

I heard a comment about ongoing professional development was part of the comment ‑‑ [inaudible] ‑‑ volunteers that. Certainly is also true with your staff. They really want to see that your three‑year plan is global and encompasses a number of things. Board training will show up probably for most of you. Staff training will show up, but you need to have a staff training plan, a board training plan. But you need to have policies and procedures and documentation on those things. Questions and comments? Okay. Please pull your mike up now if you're about ready to talk.

>> Audience: Okay. I've been at the independent living center for less than two years, so I haven't gone through an RSA audit, but I've read a couple of others with findings. And a couple of things and I think it's through RSA was that some of the findings are ‑‑ are repetitious. And part of it has to do with having a small staff. So when it comes to the data process, data management, bookkeeping and you see the same thing over and over, I guess, what's the consequences if nothing changes?

>> Paula: Over and over at consecutive reviews, you will no longer see them. They're closing the centers so you guys need to take this really seriously. There was a day when you could go two, three, five years or more and never correct, but that is not what's happening now. So the centers are being held accountable and RSA is being held accountable and we all are in this together to make sure that we have the highest quality services that we can. And you all know from your own state requirements that there's a lot of scrutiny from federal dollars, and we are funded by federal dollars primarily. So there's a lot of scrutiny and we are responsive to that as a field. But I know you can go back in the history and you can see those repeated reviews, but my opinion, you won't see those repeated reviews any longer. You'll start seeing situations where ‑‑ what RSA will do is ask a center to relinquish their funding. If the center's board chooses not to relinquish the funding, they will start the procedure to close them, to take the funding away and put it back out for bid. Take your breath away, didn't it?

>> Audience: I apologize if you did say this, but I just wanted to ask about the RSA review. Are they looking at programs that are funded only by Title VII? Is that where the CSR is, or if there is, for example, a funded program, would those records be expected to meet ‑‑

>> Paula: If you count those numbers in your 704 report, then the records would be open to their review. If you do not count those numbers in your 704 report and you can keep a very distinct record, one for this funding source, one for that funding source, then it would not be subject to their review. Does that make sense? Other comments or questions? Yeah?

>> Audience: I have a couple of comments for those of you that haven't been reviewed lately. When you receive your draft report with the findings, it does say immediately your funding can be relinquished and that was different ‑‑ we had our last review 15 years ago, and then we had one last September. And the detail and intensity is there and it's real, but it's fair. I found RSA to be really fair and very communicative. They will talk to you and explain which is really important if you're going to take corrective action. The one thing I will say when you get your draft report as CILs, be proactive. What we did is we had actually two findings and CSR was taking the CSR training and, you know, tweak up your CSRs so we said exactly. But what we did is we developed a plan and we developed a time frame. That way they don't have to come back to you and say you need to do it here. You need to do that. And what we did in ours is we said, you know, in about two years in our report, they're going to see all these changes that we made, but in the meantime, we're going to give you progress reports on an annual basis. So still, even though you're getting audited and you're ‑‑ and I did not look at it as a bad audit. I always look at audits as it's a way to learn, it's a way to refresh, it's a way just to look at, take different perspective for your center. But again, you know, the fairness was there, the communication was there. So I really think they are seriously interested in helping, you know, the center become better centers. Like you said, they are in trouble for being behind on audits, so.

>> Paula: They don't have enough staff or funding to do what they're supposed to be doing as far as coming out and seeing all the centers. That's why there's such long periods of time a lot of times between the federal reviews. But I can tell you that you have people who really sincerely want you to be in compliance with the required law, and they want to help you to get there. And when they come to your center, how you receive them probably does have an impact on how your survey will go. So you heard what Mary described. I see every audit as a positive experience to improve. If you take that approach, you'll do much better than, what are they doing coming in here, and we've been all right and we've never had any complaints. Don't go there because they are your funder and you need to comply with the regulations. So let's find a way to do it. Richard?

>> Audience: That point about being proactive, if you do have findings, get to them early and make sure that your initial responses are made just as soon as you can make them. Because even if you're operating in good faith, if you miss a deadline because you are going back and forth about what the resolution of that issue is, you still may fail to comply with the findings. You may fail to resolve them in your corrective action plan. You may have put the plan together and you may be working on it and you can still run out of time. And we've seen at least one center where the board was really asleep at the wheel, didn't realize that they were under the gun. And even after the fact were trying to say, look, we'll fix things, we'll fix things, and their time was done. It was all over for them. So early proactive, get things worked on so that you don't run out of time.

>> Paula: And the RSA staff that are assigned to you, and they are usually who leads the team when they come in is the one that's in your region, they are ‑‑ they are your partner in resolving and checking off what you've completed in your plan of correction. So see them as partners. It's an important thing. You do not want to be under conditions. If you've not heard this term, let me tell you what it means. Right now we have huge freedom to draw down as we need to our federal funds, right? As we spend them within a very short window. If you don't know about how that ought to be done, we have a great financial workshop in May, and we'll post stuff up on our website after that. You can't take it out ahead of time. There's things you can't do. Some of the center's findings were around misusing that privilege of drawing down that money. So the condition that RSA put them under until they can correct is that every expense has to be preapproved by RSA. Now, just think for a minute. I want you to take a minute and think, what would that do to my cash flow? Yeah, so use the money properly because you do not want to be under conditions at all. Because it's very difficult, especially if you don't have a lot of variation in your funding sources, it's a very difficult position to be in.

>> Audience: Going back to the three‑year plan ‑‑ going back to the three year plans, is that the responsibility of the ED and should staff be involved in that, or is it...

>> Paula: You get to decide how that comes together, but the expectation is the board will be involved and you have consumer input and staff input. Who does the writing and whether or not you do retreats and how many days you take to do it, that's all up to you as an individual center. They are going to be looking at how you get input from the persons that you served and how do you get input from the staff and was the board involved ‑‑ is the board involved in guiding the future of your organization? So if you can show how those pieces work, you can determine for yourself. We can talk more. I need to stop now and let Roger talk. So let me tell you this. There you go. You have my contact information. What I do is technical assistance for centers. I work with centers that are what we call intensive support centers first because those are the ones who are under plans of correction and who are in need of some support from us, but I also work with self‑referred centers which can be you. And you can call me. Actually, you can call most anybody.

>> Audience: Now, aren't you really glad you came to this training? She was this quiet little lady in the back of the room up until now, right?

>> Paula: Actually, everybody in the ILRU office is very helpful. I'm not in that office. I happen to be in California. So if you call that number, they'll give you another number, but you can e‑mail me. I'll give you my contact information in more detail and you can come by and get a card. But if you feel you need more assistance to apply what you've been hearing around this kind of information, remember the CSR information online. There's some online training on that topic with the handouts with all the information. Be sure you look at that, and feel free to call and I better give Roger what time is left. Oh, man, sorry.

>> Audience: Five minutes?

>> Paula: I know. I said I'm sorry.

>> Roger: Well, it almost takes longer when you've got really good questions and comments and they're very much appreciated. One of the things I don't like about these mikes, I was at a presentation recently and I read the presenter forgot to take it off and went to the bathroom. You could hear, "Wow, this is a nice bathroom." So the ‑‑ the report that Paula referred to was an inspector general ‑‑ U.S. Inspector General's report where they were actually investigating whether RSA was living up to its obligations to monitor centers. And as part of that, inspector general's office went out and did RSA style reviews on selected centers randomly chosen around the country. And if you think an RSA review is bad, the inspector general's reviews were very, very difficult for those centers to go through. And the results show that centers were not often meeting their obligations in terms of their CSRs and things like that. The report lays the blame squarely on RSA, but it makes ‑‑ as Paula said, RSA is now, you know, very much interested in doing a better job. And as a matter of fact, you know, we're under the Rehabilitation Act of 1973 as amended and, you know, we're ‑‑ it's divided up into titles. Title I is employment. We're in Title VII. If you haven't read the rehab act, or at least Title VII of the rehab act, I would really encourage you to do that because it spells out where a lot of these requirements come from. And because of amendments it's not that way anymore, but it used to be this Title VII, Section 704, it has ‑‑ and the simple statement is still there. It's now located in a different part of the rehab act, but it simply says, and I'm paraphrasing, centers for independent living funded with federal Part C dollars shall provide to the commissioner of RSA a report annually that shows they meet the standards, assurances and are in compliance. That's pretty much all it says. And that is now the 704 report based on that one little deal. Now, I am going to ‑‑ oh, I have to do my thing here. Please pardon if a couple of the things I say are redundant, but some of the stuff is important. And on those things, I'm going by the old Army way of training which is tell them, tell them what you ‑‑ no, tell them what you're going to tell them, tell them, then tell them what you told them. And I'm kind of the tell them what you told them person for a few of these things right now.

As Deb has said and Paula has said, in terms of your CSR goals and core services, core services and other services are not considered goals. Core services are the vehicles or outputs by which consumers may work towards and achieve their goals which are then successful or unsuccessful outcomes. And an example would be, most consumers would not choose to list peer support as a goal. But they might use peer support and/or IL skills training as a way to reach a goal of using the public transportation system.

When you're doing a report, one of the problems that we often see is there's a part where you put in goals set by your consumers from their plans or their ILPs and goals met. Well, obviously goals set will always be equal to and almost always will be less than goals met because you can't meet more goals than you set.

>> Audience: No, you said that backwards. You said it backwards. Look at it again.

>> Roger: You can't meet more goals than you set is what I had said.

>> Audience: That's what you're trying to say, but not what you said.

>> Roger: All right. Okay.

>> Audience: Thank you.

>> Roger: And as Paula has said and Deb has said as well, it's really important to be proactive because during reviews, and as those of you who have been through reviews know ‑‑ and I assume they're still doing it. It's been a year or two since I've been on a review, but RSA brings a ‑‑ a member of the team as a reviewer. So having gone on those, I'm talking about some of the things I see. And one of the biggest problems that we see is when we're reviewing the CSRs, it's really difficult to find evidence. Even when goals were put in and well written, there's very little evidence that shows the person is working towards those goals or has at some point met that goal or changed that goal or modified that goal. And so I would, you know, encourage people to look at their CSRs as kind of a living document. And oftentimes when you're looking through a CSR, you'll see case notes. I don't know what else to call them, and that's where staff are entering in, I met with this person, this is what we did. They can be short and sweet and to the point, and I think they should be, but they should clearly relate to the goals by the consumers. And I bring that up because in reviewing CSRs, people say it says right here, that we worked towards this goal. And I say, "It doesn't read that way to me. Maybe that's what you meant, but I'm not seeing it."

Another thing that I want to mention that steps outside the bounds of RSA and the 704 report and RSA reviews, I want to ask if anybody in the room has ever had a CSR or a consumer subpoenaed by a court for a criminal proceeding? I have. And we had to provide that CSR to the prosecutor's office and to the defense attorney. And as I went to pull it out of the file, the first thing I thought is, what's in this thing? Because they're not caring about whether we meet RSA guidelines and stuff like that. What they're looking for are comments that somebody's made and what context those comments are in. As in, should we have known? You know, did we have a duty to report and didn't do it? And this was a very bad case. It was 3a murder. The individual had a traumatic brain injury and he took another fellow out into the desert and executed him with a shot to the head. Now, when he came to our center, because of his traumatic brain injury, he had this big box, huge files of stuff, you know. Which we handed over along with our CSRs. We don't collect that kind of stuff. You know, we're a CIL. We don't look through four binders of medical records that are this thick. Well, he's eligible for our services, you know, but we had that stuff. And so I started looking through it. Well, it turned out he acquired his brain injury by being taken out in the woods and shot in the head. So history had repeated itself. The second person did not survive. So I'm pointing that out because sometimes staff are putting stuff in to the case notes that shouldn't be there, or are worded bad, and sometimes it's just dumb stuff like, you know, Patricia had a bad day. Well, why does that belong in the CSR? You know what I mean? Does a bad day mean a bad hair day, a bad haircut or did she just come from the emergency room because she was in a status ‑‑ asthmatic and thought she was going to die, you know? And even that, I don't know why that would have to be in the CSR. I bring it out, it's a staff training issue you want to be careful about ‑‑ have staff be careful about what they're putting in there. Yes?

>> Audience: You said you had boxes of material that was generated by someone else that came with the consumer and you released all of the records you generated plus those. It may just be a state by state difference, but we can only in Alabama release what we generate.

>> Roger: We were asked to provide them with all information pertinent to the individual. You know, and that's ‑‑ I mean, you know, we thought we did what the court told us. You know.

>> Audience: And we've had records subpoenaed, and it may be a difference between whether it's criminal or civil case too.

>> Roger: And we've talked a little bit ‑‑ sometimes when we talk about integrating core and other services into a ‑‑ kind of a seamless package, it can kind of lead to confusion by staff because they're not sure what to report. What exactly am I doing here? Is working towards a goal of increased transportation options. Is it peer counseling? Is it independent living skills training? Is it advocacy? My thing says here, probably both. I'm going to say maybe both. Maybe all three.

>> Audience: So, Roger, I have a question there. So, like, I get what you're saying about output versus the outcome and that core services are vehicles or methods. So are you saying that, like, let's say the goal is transportation training, that you want to write in the CSR that this person has a goal for learning how to use the bus system and we're going to help him using peer support or IL skills training to get to that goal? So that you stated in there the method that you're using as one of the core services to get to the goal that they've identified?

>> Roger: Well, what I'm getting at is this slide here which are examples of what we were just talking about. The person has a goal to use public transportation. Okay? And as part of that, they want to know ‑‑ they've never used it before and they want to know how the system works, how to navigate the system. How long do I wait and where do I wait and, you know, all that kind of stuff. How do these bus schedules work? Well, I would tell my staff if you're working on that part of it, in the CSR, I would say we did independent living skills towards that goal. It may turn out that the person is very frightened, very uneasy, very uncomfortable about using the public transportation system rather than Paratransit. And I don't know how many of you live in a town that has Paratransit, but Paratransit tends to get really bogged down.

>> Audience: We call it dial a wait instead of dial a ride.

>> Roger: And, you know, just as citizens of the country and IL workers, we kind of have ‑‑ if we can encourage somebody to step out of their comfort zone, out of using Paratransit and used a fixed route when it's appropriate for them to do so, then it's better for all of us as people with disabilities who need Paratransit. So it may take some peer counseling to work with that person to get them to the point where they feel not only comfortable, but enjoy using the fixed route system. And then as you're going along, you maybe have a conversation about, you know, the reason you wanted to do this is because your transportation options are so limited. Have you ever thought about trying to do something about that? There's several transportation planning groups who are looking for active members. They want your input. And so, you know, the person could find themselves in kind of an individual advocacy situation where, you know, they're advocating on behalf of themselves to increase transportation options which also works with systems advocacy.

>> Audience: Roger, you may be getting to this, so, but, one thing too is, it's really wise in your notes not just to say get independent living skills training with dah, dah, dah, but to say what the person achieved toward the goal in that particular activity. If it's practice boarding and exiting a bus to help them achieve the goal of using the main line transportation system or road, three routes.

>> Roger: Right, Richard. That's exact ‑‑ thank you very much. Today we practiced how to get from the person's home to the nearest bus stop. And as part of that, to make sure that they selected the correct bus for their destination, and then work on them, you know, practice boarding and things like that. But, again, when I talk about be careful about your case notes, you know, we talk about time management with Darrel in his I&R presentation. And sometimes when I'm reviewing a center or looking at my own center CSRs, I see this page that somebody has written, you know, for they met with a person for an hour to do, just like Richard and I were talking about, when four sentences would have done, and they're saying how the person felt about it and so on and so forth. And, you know, I think we can save ourselves a lot of time and energy by being a little bit smarter and entering in the information that's necessary and that shows work toward and achievement of the goal like Richard just said. And sometimes it will be hard for staff to label their work with a consumer which can lead to all services being lumped under one service category which can result in, in parentheses, (too much peer support and not enough IL skills training). Now, when we've been talking about RSA review of our centers, we've used the word "finding." Well, when you get your feedback, you get findings which are basically things where you're out of compliance and you also get recommendations. Okay? And sometimes the recommendations are almost more important than the findings. The findings can sometimes be an easy fix. But I have recently ‑‑ I know of a center who was dinged because they didn't do enough peer support. And their answer was, how much peer support ‑‑ I mean, you know, again, there's no ‑‑ there's no hard‑and‑fast thing. And RSA, I have to say, they were kind of right. They said, well, you know, I know it when I see it, and you're a center for independent living and it's a core service. You've reported, like, 15 units of peer support for the whole year, you know. Well, it turned out in working with them, it was a question ‑‑ the problem was people ‑‑ staff were not categorizing what they were doing correctly. And so with some retraining, staff started like, for instance, they wouldn't ‑‑ in helping the person overcome their uncomfortableness and their fear about using the fixed route, they just call it IL skills training when they could have easily called it a peer support session.

>> Amina: Roger, so, like ‑‑ this is Amina. When we participated in one of the test runs for a different way of setting goals and stuff and they looked over our records and, so, we have a big home mod program. More home mods get done than people support and independent living skills. So a larger portion of the cases that got reviewed were in the home mod area where they didn't have an independent living plan. Probably 80 percent of them didn't. They just had a waiver and, therefore, they weren't identifying methods of peer support IL skills or advocacy for that service. Do you have any thoughts about that?

>> Roger: Yes, I do, and it's probably one that RSA will like which is the person waived their stuff, they just wanted home mods, they got their home mods, it's documented. What's the problem? You know. And it's a large program. You know, and you're trying to balance that and say, you know, that resulted in too many waivers? You know, I don't know.

>> Audience: It wasn't a question of waivers, but was a question of, how does that fit in with core services? And this wasn't RSA, this was in our own, within CIL centers.

>> Paula: Logistically if you label your records in some way, categorize them by core service, then the reviewer will pull a sampling from each core service. If you don't have a way for them to know that, they're just going to pull a sample. But they pull their sampling, but if you give them the tools to know these are the records of people who receive these services, these are the records of people who receive these services, they'll pull the names off of those lists and get you a real broad spectrum of your review.

>> Audience: That's good information.

>> Audience: I have a question for Amina. When you guys do home mods and you do an intake, do you ever explore independent goals with the folks?

>> Audience: We always offer it to them. It just is the nature. I've seen home mods over 20 years. It used to be that they helped do them. Now it's like just give me, give me and get out of there. Yes, we always do that, but like I said, probably 80 percent or more choose just to get the service. Same thing with, like, benefits counseling. They're going to choose to get the work of the counseling and then they're out of here. So there's just certain services that kind of lend that kind of consumer more, but we always offer it to them.

>> Roger: Yeah. And what we do, a lot of home modifications as well, we do the specs. We go out and draw up the specs for people, and then we find the ways to pay for the modifications. But we find that in just doing that and talking with the person, a lot of questions about what else do you guys do come around, and that can really spur some additional involvement with the center. And that is an interesting thing to bring up though, because a lot of people see our centers through a real narrow lens. If the primary or only thing they're getting through the center is personal assistance services, they don't necessarily see the center as a center for independent living. They see it as home health agency, you know. And if a person's only contact with the center is getting a home mod, they think of it more as some kind of a construction outfit or architectural firm. So I think it's really important to make sure folks realize, while this is the only thing they're requesting, there's a lot more that's available if they want or need it.

One of the things that I've done at my center is when I realize somebody's having trouble, pretty much everything they're writing down in the CSR is pure support. So I pull from the 704 report instructions the definitions that RSA has for the four core services. And this is the one for peer counseling, and these definitions are not just for the four core services, but for the entire list of 23 or 24 services that are fundable using Part C, Title VII money. Peer counseling, counseling, teaching, information sharing, similar kinds of contact provided to consumers by other people with disabilities. Key chain is in there so you can see that they're starting to, oh, maybe I was not ‑‑ maybe it was peer counseling, not IL skills. Advocacy. This is the definition that RSA has on the instructions. Assistance and/or representation in obtaining access to benefits, services and programs to which the consumer may be entitled. We find that, at least at my center, folks usually don't have trouble mis-categorizing this one. They know when they're doing an advocacy thing or not. IL skills/life skills. May include instruction to develop IL skills in areas such as personal care, coping, financial management, social skills, household management and education or training necessary for community living and participating in community activities. Well, one of the things in this definition is coping. To me that's more of a peer support type of a thing. So I'm just pointing these out that there is a little bit of interface. You have some latitude, but I always tell folks that work at my center, think about it. And if you're tending to just categorize stuff over and over, if the person's job was peer support specialist, then that's what they would be reporting on primarily, right? Or if they were a housing specialist. But our folks are generalists and they help people with housing and transportation and personal care, financial management and the whole bit, you know. I know time is running short so I'm not going to go into great detail in the rest of this stuff, but in addition to the four core services, most reviewers look for in addition a combination of two or more of the following which is the rest of those ones that are on the list from the rehab act which is the same list of services that are in that contact sheet that we passed out yesterday. And I just included these because these are probably the most common services that centers provide in addition to the four core services: Housing, transportation, personal assistant services, recreation and assistive technology. When they talk about mental restoration, you know, I mean, there's a definition for that, but I don't know if my staff has ever checked off that we've provided any mental restoration for anything. And as part of that same subpart of the 704 report, it can make it a lot easier for you to report if you align how you enter stuff in your CSRs with the reporting tool itself. Because there's a whole section when they ask, you know, goals set/goals met for self‑advocacy, communication, mobility, transportation, community‑based living, education, vocational stuff. So if you have a way of putting in your CSR that, you know, the goal was, you know, it's more like a goal category, if you will. You know, vocation isn't the goal, it's the goal category which enables you to punch that service that you're providing in the proper part of the report itself. A new 704 report, the NCIL outcome measures task force has completed and field tested to a great degree a new and more appropriate way to measure CIL's effectiveness and the achievement of outcomes for consumers than the tool that we're currently using, and that information has been forwarded to RSA. When we talked with them just in February, they indicated that they expected to have an easier to use reporting tool that's more reflective of what CILs actually do perhaps in late 2014. With the idea being that starting October of 2014, if they can get it together because, you know, this report's been the same for quite a long time and doing an overhaul of it is very important to a lot of us, but it's going to take some time to get it right. And we believe that the outcome measures task force, which was primarily led by our friend Bob Michaels who was here yesterday, did a very, very good job of trying to reflect what we really do and how we should be recording it to show that our ‑‑ what's that horrible term? It's not goals not met.

>> Audience: Compliance.

>> Roger: Results not demonstrated from several years ago in looking at all of the 704 report because of the way the feds evaluate stuff, looking at all of this data, they said, for independent living results not demonstrated, you know. So that's a really important reason why we need to reform this reporting tool. But up until then, I hope we've given you some ideas about what to watch out for with reviews to maybe make your reporting a little bit easier for you because none of us wants to spend any more time on this kind of stuff than we have to. But we want to do it right because, you know, even if it's just red‑flags, why do you want to spend time defending stuff during an RSA review when you can just, you know, show them what your policy is and they go, "Okay." You know?

And in addition to great resources like Paula, APRIL, the Association of Programs for Rural Independent Living has its peer to peer mentor program that centers can apply for. And one of the things that centers often apply for is that they're aware that they're going to get an RSA review, so they ask for someone with experience to come in for a couple, three days and walk them through the process and actually catch stuff so they can fix it beforehand. I would suggest waiting if you know you need to address some of these things and do it over the next, you know, course of the year. But having somebody come in who's been on reviews can really make the RSA review go so much easier and really give the staff a lot bigger comfort level and actually be able to welcome then the reviewers in so that the results of the review are, you know, a good thing for everybody.

>> Paula: And as of a week ago, even though the deadline had passed, they still had two slots left for this year. If that has changed, I haven't heard yet so she may still have one or two. You can all compete with each other, take a look. We post that on our website as well, and APRIL is the one that does that particular peer review stuff.

[APPLAUSE]

Thank you.