NCIL‑ILRU

Ready for Review ‑ Part II

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>> TIM FUCHS: All right.

Hello, everyone.

Welcome.

I'm Tim Fuchs with the National Council On Independent Living and I want to welcome you all back to Part II of our webinar series ready for review, using ACL's Compliance & Outcome Monitoring Protocol, AKA the COMP tool, to achieve excellence.

I know most of you were here yesterday.

I will go through this quickly.

I do still want to mention for those much you not able to join live yesterday, we are recording today's call so that we can archive it on ILRU's website.

We're in presentation mode right now but we have plenty of time for questions an answers, so I hope you will take advantage of that.

There is a few ways you can ask questions today.

I know a lot of you ‑‑ if you weren't familiar with Zoom a month ago, I bet you are now.

Things have changed rapidly.

That Q&A tab in your menu bar is the best way to ask questions.

Let me talk about some alternatives is that's not accessible for you.

You are welcome to submit questions in the full screen CART captioning at Streamtext.

So those of you that use CART I am sure you know that you can turn those captions on in Zoom, but that box is only so large, and so I know some of you prefer to use the full‑screen captioning at Streamtext.

That link was sent to you in the confirmation email.

Streamtext is nice.

It allows you to manipulate the font size and color and contrast, but there is a chat box there, and I'm logged in as Tim Fuchs.

You can submit your questions or comments there and I'll voice them for you during the Q&A break.

And then ‑‑ there is a chat feature in Zoom.

We prefer you not submit your questions there, especially with an audience as large as we have today.

Got over 500 people registered.

There's already 263 people on.

We'll probably have over 300 people with us.

Try to use the Q&A tab if it's accessible to you.

If you are on the phone today or you have an access problem with Zoom and the Q&A tab is truly not accessible to you, you can press star 9 on the phone.

It will raise your hand.

Press star 9 to raise, press star 9 to lower, but I am going to ask a favor you reserve that for people that need it as an accommodation because with so many people on the phone it can be a lot for me to literally just find who has their hand raised in this list of 300 people.

I literally have to scroll down and find the icon.

I am happy to do that if you need as an accommodation.

But please reserve that for folks that need it.

The Streamtext link a little too long to read out but we'll put that in the chat in a second.

That was in the confirmation, so you should have it.

Finally, evaluation form, satisfaction survey.

We do have a separate satisfaction survey for today's presentation, even if you participated in yesterday's, that's great, but we have a presentation, a new presentation today.

You might feel differently about Part II.

Please do fill that out.

It will come up on your screen when the webinar closes, but you can also access the link in the confirmation email.

So everything was there.

I had some folks ask about the PowerPoint yesterday.

All of you should have received that PowerPoint in the confirmation email.

So please don't miss that.

It was attached as a PDF because the accessibility features in that PDF are a little bit better than PowerPoint.

So we choose to send it out that way along with plain text.

But please don't miss that.

So if you're on the webinar, the slides are going to display automatically for you, but please don't miss the PowerPoint if you want to download it or print it and, of course, when we archive the recorded training on ILRU's website the PowerPoint will live there as well.

Okay.

Want to move ahead and introduce Paula.

You guys all know Paula.

Most of were on yesterday.

Most have you worked with her closely.

Paula is IL Net's Technical Assistance Coordinator.

Thanks for putting this together and being back for Part II.

I want to go ahead to the next slide here.

There's Paula's email which she has been generous enough to share and as I mentioned yesterday, ma law and I are both staff on the IL Net project.

We're happy to take your questions any time, not just today's presentation.

Please don't hesitate to reach out.

Then here on slide 4 I just wanted to mention the learning objectives for today.

We're going to review the regulatory requirements to perform annual CIL reviews and how to adequately communicate adherence to compliance during a review, the 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 review by conducting an organizational self‑assessment using AC L's COMP tool, COMP is Compliance & Outcome Monitoring Protocol, and finally before we move on, if you were not able to join yesterday's webinar, just remember that that was completely recorded.

So we are going to do a short review in these first few slides, but whether you want to go back and watch it or whether a colleague missed it, you can always access that video.

So that's it for my housekeeping.

I'm going to go ahead to slide 5 and turn it over to Paula.

Paula?

>> PAULA McELWEE: Okay.

Thanks, Tim.

I had to unmute my mic.

We are going to talk about this a little more.

We are going to hit the high points of what this is so anyone who is new today can be up to speed.

The entire process is downloadable at CL's website.

The link is there for you to copy and paste when you are ready to do that.

ACL has come up with this tool so that they can do on‑site reviews and, in fact, reviews have happened at every level.

It includes reviews of your PPR, your Program Performance Report that you turned in in December and some of you are still working to correct some of the information there.

Those were all reviewed this year.

So all of the program officers, all of them, looked at the PPRs for their states or their region.

So that's really kind of important to know.

They looked at it with some of these checklists in mind.

Some of these tools in mind.

And if they review you informally or formally by email or in person, by phone, or however they do the review, it allows for all those levels of review to happen, the review is going to be based on this tool.

So we feel like it's a great tool for you to look at to improve your own performance whether or not they're going to come this year and see your Center.

Right?

Because we all want to be at a place where we can have the kind of a maximum effectiveness, and these tools are going to help you do what you're required to do.

So it's in effect now.

Reviews have happened at all the levels we're going to talk about.

Tim, next slide.

So the purpose is not to get you, but to help all of us improve our performance, our program performance, and so the office of Independent Living programs is using this so that the oversight that they do of all of our ‑‑ all of the grantees, all the Centers is consistent.

They use the same tool, they have several different ways to achieve the information, you can prepare using the same tool.

So we find that it's really useful in that respect.

Now, we mentioned here not federal reviewers will also use that as a tool.

At that point in time non‑Federal reviewers have not been selected as far as I know but that is an intent that will be part of the process as soon as they can make those arrangements, arrangements meaning training and so forth.

Okay.

Next slide.

So there's a federal review of program ‑‑ of your outcomes, of your money and of your technical assistance ‑‑ provision of technical assistance related to any of these areas.

We're going to spend a little of time talking about those fiscal operations today which we didn't talk about yesterday.

Yesterday we talked mostly about the program compliance with the assurances.

We're going to pick up with the last assurance, though.

Let's go to the next one.

You will be told if you're being reviewed.

They will let you know in writing, probably in an email, if you're being evaluated regarding specific or overall risk.

It will identify what concerns they have.

So they have reviewed some of your information.

They may have gone back and forth asking you to clarify things.

And then they will say, okay, we're still concerned about this, what steps are you going to do to meet these places where you're not up to date.

Like I said, you'll be notified if you're going to undergo a focused or on‑site review, otherwise it's kind of a routine they're looking at your PPR, your draws, whatever you report to them, and so they're just responding if they see an issue of concern.

If your review of those initial areas place you in a high risk, you will have to do a Corrective Action Plan.

So any time you see that language in an email from your program officer where they say here is your deadline and you will need to get me a Corrective Action Plan, that means you are ‑‑ are being considered high risk.

They don't do that unless you are being considered high risk.

That's when you would call me if you haven't already.

Hopefully you did back when they first expressed the concern.

But if not, we will help you to develop an implement that Corrective Action Plan.

Next slide.

All right.

So if you're not responsive, as I said, you become high risk.

But the other thing that happens is your funds become restricted.

So we'd all like to avoid this place, and we would like to be proactive, right, in using this tool instead.

Okay, slide 10.

You can find out a lot more about this process ‑‑ of course, this training will be online as we said, but if you're notified that a review is pending, I hope you'll reach out to me and I can assist you with finding even more detail and, of course, that link that was earlier in the show will also allow you to find that detail as well.

Today we're discussing how you can use these materials to improve your performance, but you can also use it to prepare for a pending review if you end up being one of the Centers reviewed in a given year.

Okay.

>> TIM FUCHS: All right.

So ‑‑

>> PAULA McELWEE: Too early for questions.

>> TIM FUCHS: Yeah, we'll move quickly here.

We'll give just a minute to see if there are any questions from that quick recap from yesterday's webinar.

You can type your questions in the Q&A tab or if you are in Streamtext, you can type them there.

That's fine.

Just an early check‑in.

So we'll go ahead and keep moving.

I'll go to slide 12.

>> PAULA McELWEE: Just wanted to make sure we're all on the same page.

So we suggest you use all of the tools that are given to you in that ‑‑ at that website and that includes checklists of different sorts.

There is actual a checklist for consumer records, there's a checklist for some of the fiscal review, some policies and procedures that you are required to do, and if you look at that checklist seriously and don't just go through checking, oh, yeah, we're good there, good there, but actually look it up in your own records to verify that you are meeting those requirements, that will serve you very well.

I always suggest you either put the reference right on the checklist ‑‑ okay, this is covered in policy such and such.

Or the board did this on such and such a date and it's found in the minutes for that meeting.

Whatever it is that you know validates your compliance, write it down, because you'll never be more serious about looking at it than the first time you see it.

So really take the time to say, ooh, you know, I'm not sure our policy really does what they're asking here, let me do a review.

Or let me call Paula and see if she has an example or she would review it for me because I do that for you when you need to.

If there ‑‑ so the paper side is one.

Write down wherever your documents verify the information.

If there's a person who would verify that information in an interview or an email, write down that person's name so you know, oh, yeah, we did this with so and so, so that would be a good person to validate this if we have somebody come on site.

As I said, policy numbers, working drafts should have lots of notes.

These are not meant to be pretty.

So I have seen that sometimes where people are getting ready for review and they do it, oh, on a checklist and they go through and type it all.

If you need to do that, I guess you can.

But what I find is more valuable is keeping it as a working document so that if something new happens in that area you can go back and make a note, oh, yeah, this has happened here.

Just keep it a working document and you'll be able to utilize it consistently so you can have lots of notes, you can demonstrate what you're doing, and show how you're going to do that by writing it on that checklist.

So more of that is available on Part I also.

Next slide, Tim.

So the last of the standards from the Rehab Act is resource development.

Now, you are required, therefore, by the Rehabilitation Act itself to obtain funding sources from other than Title VII Part C.

And you have to conduct resource development activities to do that.

That can include grant writing, it can include partnerships, business ventures.

All of those would seem to fall under resource development.

But resource development at this moment in time is not defined in either law or regulations.

It's just listed there.

And so how the Centers have treated this requirement has been different from one place to the next.

But all Centers must do resource development and yet fundraising is not allowable use of those federal funds.

It's something interesting we saw with your program performance reports is that when you listed what you were doing in the area of ‑‑ for resource development, some of your program officers said, well, wait a minute, how did you pay for that because that's fundraising.

Now, I think they will be getting us some more clarity on that issue, but you need to know that that discussion is taking place around what is fundraising and what is resource development and at this point it looks like they're going to make sure they're operate, that they're distinct from each other.

Which isn't what we used to say.

What we used to say is that, oh, yeah, we have an exception to that prohibition on fundraising because we're required to do resource development.

But now we've seen a shift and the answer to which is resource development and which is fundraising appears to be forthcoming.

So I think you want to be aware of that.

Because the fundraising is not allowable.

We have to have a definition.

And the Centers must, and the SILCs may, if it's in their spill, conduct resource development with federal funds but not fundraising with federal funds.

You can fund raise all you want but just can't pay for it with your grant.

Next slide.

So you're also required to have program and financial planning objectives.

You need this because you reported them in your Program Performance Report, your PPR.

What are those objectives?

And they're going to look at that.

What are your program and financial planning objectives?

Now, some Centers have a more formal planning process than others.

Some of you have very nice written three or five‑year plans and you really have a robust planning process, but whether you use a robust process or not, you have to have program and planning objectives, and report on them, yes, in your PPR, but also to have those in place so that when the conversation with your program officer comes up, well, what did you do?

It includes your goals.

It includes your mission or vision or both.

The stuff that you enter into your PPR with the assumption it flows from your consumer controlled Board of Directors.

So it's real clear in the instrument itself, but that's the expectation, that it flows from your Board of Directors.

So ‑‑ does it?

Did it?

Or did you just plug it into the PPR and you can't really show your process or you can't really identify how the board was involved?

Examine that, because I think when they come on site, or when you are preparing your best practices you're going to want make sure your consumer controlled Board of Directors directed the planning process.

So you're going to want to really watch that.

So do you have a current work plan for achieving the goals and mission?

And did you include specific activities to meet those requirements?

Some of the requirements in the standards and assurances on the different points ought to be part of your goal.

And have you done that?

You know, have you taken a look at that?

Next slide.

A little bit more on this.

Does your work plan include specific services or types of services, priorities, how you're going to approach them?

Certainly it should ‑‑ could ‑‑ should address ‑‑ I'll get that word out ‑‑ address anything you identified when you were looking at the program services piece that was not yet in place ought to find itself represented in your plan.

So if you decided, oh, you know, it's not really clear that we're providing youth transition, we need a way to distinguish between youth who are post‑secondary and youth who are 14 to ‑‑ when they leave school ‑‑ we need to make a distinction there, you might have a goal, then, for how you are going to make that distinction.

What is it?

Because you are required to make that distinction in your service reporting.

And does your plan ‑‑ is your plan consistent with the current SPIL?

And I think that was one that not all of you had thought of before.

It is in the PPR.

It has been for some time.

But it's one of those things where if you don't stop and ask the question, you haven't really sorted it out.

So you should be able to see a line between your goal and the SPIL's goal.

So you should be able to say we're going to do this clarification and improvement of our youth transition services, and this falls under what goal in the SPIL and what's the connection between what you do and what the SPIL says because you want to be consistent with it.

You're not repeating every objective, but what you do must be consistent with what the SPIL says is going to happen in IL and in your state.

Also you need objectives and goals for obtaining or increasing non‑Title VII funds.

That's that resource development we were just talking about.

It needs to also flow into your plan.

So how you're going to do that, what you're going to do in order to increase those funds need to be part of your written plan.

And then also did you address board, staff and volunteer training?

And we used to say staff training was the only one that used to be in the list, and we looked around and said, oh, yeah, board needs training, too.

So we need to make sure that all of those are represented in a training plan of some sort so that you identify what it is and how you do it and anything new that's changing, anything that costs money needs to be addressed there.

The financial planning objectives, I saw quite a few responses to the PPR that said you didn't have financial planning objectives, and then when I began to work with some of you, I found you did have them, you just didn't have enough space for all of your objectives to go in that space in the PPR.

Then say so.

Make sure that you have at least one example of what you're doing with your services, priorities, how you're congruent with the SPIL, how you're going to raise those funds, and how you address training.

So financial objectives as part of that.

That's that increasing non‑Title VII funds.

Make sure those at least are in your PPR in the future.

Okay, Tim.

So, we saw quite a bit of activity around the accuracy and documentation in your PPR and one of the interesting things that happened is I usually talk to the Executive Directors, so program officer sends a note to the Executive Director and says "I didn't see these things in your PPR," and then you should talk to Paula to figure out what you want to do about that.

Then when I talk to the Executive Director, often I find that you've delegated this process to someone else.

So someone else is doing at least the numerical part of it.

You know, your whole database, the numbers that you do.

One of the things that we found is that a lot of times the staff have not received training to make sure that their stuff is accurate.

The ol' garbage in, garbage out.

If you don't have good training, your staff don't put in what you need them to capture it, and it doesn't show up anywhere, and then when you run the report and somebody else plugs it into the PPR and you're not paying attention, this is a really interesting time, because sometimes you find out, well, you know you did that, so why isn't it in the report, right?

So as you look at that whole question of how you accurately capture information, I think that you'll find that you really want to put some quality assurance policies in place.

Don't wait until October 30th or after to look at your PPR raw data.

Do it now.

You're almost six months into the next year.

You have fresh on your mind whatever it was that your program officer indicated was not complete.

This is a good time to check the accuracy.

In fact, your staff may never have a better time to look back through the case records and make sure that the content is being reflected in your electronic database.

I'm not going to get into today whether or how they can access all that information.

That's a topic for another day because remotely you have some additional confidentiality concerns.

But it's a good time to check the accuracy of those individual records and take a look.

Did they actually put in ‑‑ did they actually put the information in as they should?

Take a look at it.

Use the questions that are the most frequent that show up, which have to do with the youth transition being different from youth services, because transition is post‑secondary after they left school.

Then also nursing home transition.

Some of you did a lot of good work on nursing home transition but it didn't show up.

We had to come back and say, you have to do all the services, where is your nursing home transition.

So take the time now to go back and figure out ‑‑ I think we're going to have a little time to do these quality assurance activities in some way.

It's a good time to look at it.

You can actually run the report by staff member.

So you can run the numbers per staff member, and it's not a bad thing for them to look at those numbers and say, well, what did I do this last year?

Or what have I done so far this current year?

And see if they're really up to date on that data entry.

I know I'm spending a little more time on this, but this is one of your key reporting documents.

If your PPR and other accuracy of your electronic database is not current, it really does not show you in a good light.

So this is one of those things where I understand why executive directors want to delegate it, but you really need your hands in there enough to know it's being done right.

So I don't know what that looks like.

I suggested some things on this slide.

You know, providing the staff with the data to look at their own errors.

I also suggested you close records according to your policy.

If you always keep all your consumer records open perpetually even if you haven't heard from them for two yards because you think you might need to at some point, no, look at your policy.

Probably if you haven't heard from them in six months and you can't reach them, send them a later and say I'm going to close your record, we can always reopen it at any time you would like but wanted to let you know we haven't heard from you in six months.

Please contact us if there is anything you would like to work with us on and go on from there.

Because it's not an accurate record if it's carrying over numbers from prior years who haven't even received services in the current year.

So do take some time to look at all this.

And be sure you submit your PPR on time.

Any of you who tried to do it late found out it was closed and you couldn't get back in without special permission.

So make sure you take care of that.

Then, did you provide a copy of it to the SILC?

That's required.

All of the Centers are required to give a copy of the PPR to their SILC.

Not just the Part B Centers, although, of course, because Part B is overseen by that SPIL, you do want to have that as well.

But, yep, have to have it.

I'm seeing quite a few questions show up.

Should we take a little break for these, Tim?

>> TIM FUCHS: Yeah, that's fine with me.

Let's go through a few.

>> PAULA McELWEE: Let's look at a couple.

>> TIM FUCHS: The first question, Paula, Hilda is asking, when we raise funds, we do program dissemination, I&R, outreach et cetera, how can you charge all this effort?

>> I think you need to make a distinction.

In the same way you make a distinction with lobbying and you're doing advocacy right up to the point that you lobbied, it all has to be lobbying, if lobbying is part of the activity.

Fundraising is part ‑‑ a specific activity, then all that activity time, all the staff time, has to be charged to the fundraising goal, and you need to pay for it with other than federal funds.

If you have outreach activities that might result incidentally in fundraising, people might give you money because you're there presenting it, maybe you went to the Rotary Club and they gave you a $50 check, you went to the rotary club for the if you were of outreach, not fundraising.

It's a straight donation.

And so you have to think about how to sort that all out.

If it's an event, staff time cannot be paid with federal dollars.

So if you're having a big gala and people pay so much for a dinner and your staff have been the ones that serve that, you really do need to stop and take time to figure it out, because it's ‑‑ I will say this, though.

You can hold it off a little bit because I do think we're going to get some clarification from ACL very soon that will help us make these distinctions more clearly.

Right now I'm guessing.

But I know that so many of you got questions about that on your PPR report.

So there is a distinction coming, a distinction being made at ACL between the two.

As far as the specificity of financial goals, your own plan needs to be very detailed.

What you report on to ACL in your PPR by virtue of the size of those blocks of type, you cannot report everything.

So you have to decide, and I just want to say do include at least one financial goal there because that's part of what they're looking for.

So do take time to make sure that you've done that, but ‑‑ Susan is ‑‑ from ACL is a project officer there and wants to know, does CIL suite differentiate between youth in school and youth out of school and might be eligible for that transition service.

It can, and if you're not doing that now, your software vendor and find out how they wanted you to do that so you know you did that correctly.

CIL suite is not the only vendor.

There are about half a dozen different vendors.

It's probably the most common but not the most common one.

So whatever software you are using, if you didn't find an easy way to make a distinction between youth services and youth transition you need to talk to your software vendor and find out how they make that happen.

They made the fix in 2014.

So it can be done.

They changed the software when we did the WIOA, so you have to realize it's there, but you may not have received the training in order to be able to show your staff how to do it.

Julia wants to know, is it required to send a copy of the SPIL to our DSE like it was for our DSU?

I don't know.

You have to send it to your SILC.

And I don't remember.

Sorry.

Somebody else maybe can jump in and tell me what you know about that.

Dan asks, distinction between financial planning objectives and the resource development objectives, and at this point anything that has to do with money is considered a financial objective.

And you can certainly have a resource development objective that's financial in nature, if that makes sense.

And then ‑‑ what else?

Is that it, Tim?

We got them caught up?

>> TIM FUCHS: We had a couple in the chat.

Let me see if I can find them.

Dan is wondering what's the distinction between the financial plan objectives and resource development objective.

>> PAULA McELWEE: It really is just a distinction you make, if it's money related it is a financial objective they are looking for.

Susan said, yeah, I'm seeing a lot of this.

So she is reviewing PPRs.

This is sort of her first year to do that.

>> TIM FUCHS: And then Alexa is wondering, any tips for getting executive directors more involved in the Program Performance Report process?

So you were encouraging ED's be involved.

I think that's smart.

What can staff do if they are the ones that have been designated with doing it.

>> PAULA McELWEE: That's a little more of a challenge, Alexa.

You can tell them to watch this training and then they'll hear me say it.

Does that work?

But, no, the executive directors out there, you have to, I know, balance your time.

I know you don't have enough time to do everything you would like to do.

But this rises to the level of being important enough that you need to take the time.

You can quote me on that, if you would like to.

I see a lots of situations where we've got EDs who have been hands off and then they get that letter from the project officer ‑‑ or program officer, and the program officer says, you didn't do this, and they say, what do you mean we didn't do that?

I was sure that was okay.

Then they go and check and, no, they did not do whatever it was that was there because somebody else did the work.

The other place you might be able to influence that would be to ask more questions before you submit it and to go back in and say, I know we need to have all of the core services reflected and I'm not seeing anything here on transition.

You know, can we figure out what to do about that?

Because you don't want to turn in a report that says you didn't do all the core services.

So you might be able to do it from that approach.

>> TIM FUCHS: Paula, John is saying, while WIOA was passed our database developers held off stating they are waiting for regulations and guidance from ACL.

>> PAULA McELWEE: It depends on what it is.

I have seen some guidance from ACL on some topics, lobbying being one of the ones that we have seen.

We have not seen guidance yet on this differentiation between fundraising and resource development but I believe it's pending because I don't think otherwise it would be so confidently cited when the program officers are reviewing your PPRs.

So I'm pretty sure that that's coming shortly.

I would, though ‑‑ you know, 2014, folks, I would push your ‑‑ I would push your provider a little bit on that, and if they're not sure about some specific distinction, then let's see if we can get them clarity because you need to be able to use your database information accurately as you go along.

So it's easy to pass the buck, but I think we need to push for that with whoever your provider is.

>> TIM FUCHS: Michael is wondering if they can use funds raised through state or local government contracts for fundraising, and that would depend on any state or local rules.

>> PAULA McELWEE: Yeah.

They also are very possibly resource development and not fundraising, because those are resource, right?

That you have on a regular basis.

Typically you cannot use that for fundraising activities.

Okay.

Let's go on.

We'll come back around.

So do you use sound organizational and personnel assignment practices?

This would be job descriptions, organizational charts.

Can you see the lines of authority clearly?

Sometimes people do creative things with organizational charts to reflect a philosophical point of view re rated to who is really in charge, putting the consumers on top kind of thing.

That's fine, but you also need to know who has got the line of authority.

Who is my boss?

Who is it I report to.

Where is that designated?

Performance appraisals at least annually for all employees, and that includes the Executive Director.

So make sure you have those practices in place.

Policy for affirmative action to employed an advance employment qualified individuals with significant disabilities.

We don't always think of.

But we always to have a policy saying it's our priority to bring in and advance in employment qualified individuals with significant disabilities, is the language.

So when you look at all your personnel policies and procedures, when you're going through this checklist, you should be able to write all see 1.2, policy 3.9, right next to those questions on your checklist.

So that you can remember where it is and then pull that policy out and read it right then and see if it actually says what you need to say.

Pull out your organizational chart.

Is it current?

Pull out those job descriptions.

Are they all up to date?

Because so often we see that they're not.

So it's just easy to say, oh, yeah, we've got a job description.

Look at it.

Please, look at it.

Next one, Tim.

Slide 18.

So there are some other pieces that you have ‑‑ you have to have in that personnel policy.

So that includes wage and salary practices.

It includes fringe benefits.

It includes incentive pay if applicable and I want to stop a second on that one.

Some of you may have had a practice of at the end of the year using the leftover money that was in the personnel line item to give bonuses to your personnel.

That structure is not allowed.

You have to have an actual structure of incentive pay.

You can be ‑‑ the amount might vary based on what you have left at the end of the year, but you have to say how it is decided that somebody gets incentive pay.

What did they have to do?

And is this a reward for something actually accomplished or did you just split up the money at the end of the year?

You can't just split up the money at the end of the year.

Some people will say, you can't do bonuses.

That's not really true.

You can do incentive pay, but you have to have a policy before you can.

It has to be adopted.

It has to be followed so that it's done consistently for everybody.

Vacation and sick leave, extended absences from the workplace.

That would include paternity leave.

Sometimes your states have requirements around some of this and sometimes they don't.

But it would also include family leave, family medical leave and there are some other things that might fall there.

You want a Code of Ethics of some sort for your staff.

You want to state that it's a drug‑free workplace.

That's a requirement as a federal grantee.

You want to have nondiscrimination.

Some of the language is there for you on the slide.

You need to know what training is required.

So a lot of times you have some new staff orientation training.

We've got a section of rapid courses on that topic and you can go in and have ‑‑ require that all of your staff go through at least that training.

But then, you know, how often, how many hours do they have to have, how do they let you know.

Some kind of performance appraisal process and some kind of disciplinary action process.

Now, different states are different related to whether they're at will or not, whether employment is at will or not in that state, and that will affect some of these policies.

So you do want to make sure that you check your personnel policies related to state law.

However you do that.

Sometimes there's a personnel attorney who will draft them for you.

Sometimes there's a nonprofit group in your state that will give you drafts that cover those ‑‑ you know, the state's approach to some of those issues that are state related only.

So kind of keep that in mind.

Let's look at 19.

One of the questions that you want to ask around training, development and training, this is more of that same requirement, is who specializes in that?

And do you have someone who does?

With most of your smaller Centers, the person who specializes in that is the Executive Director, a lot of times.

They've been there the longest, some of them from the beginning.

So they have a real nice view of what the Independent Living movement has been from then until now.

So that's a real good person.

Sometimes you'll have different specialists provide different information.

So some of the ‑‑ person who does all the personnel training might be somebody who only does that.

But make sure that you offer some kind of initial training, new staff orientation, whatever you want to call it, and some kind of ongoing training that help them improve their skills as far as being a provider of Independent Living Services.

So they need to know Independent Living philosophy, they need to know process ability awareness and some things related to that.

They need to know what the IL services are and how they might be provided.

And some of those have some flexibility as we said in the first session.

When you look at those core services, some of them are not defined.

So you do define them locally.

Like peer support is defined locally.

But how is it defined?

And what do people do to accomplish that service?

What does the staff receive in training for people who are underserved or unserved?

People who culturally are very different than the staff member, what do they need to know in order to be in touch with that?

And what about your new board members.

Do they get training?

It also is a real important thing, right?

You want a board that understands what it is you do.

And so we do have some online training and also some training modules for boards.

You ought to look them up.

If you don't know what they are, I post it in my BLOG from time to time and I'll do that again one of these days, but look at those training modules for your board and make sure your board gets training.

With board, I have a suggestion ‑‑ maybe with staff, too ‑‑ and that is that you make training a standard agenda item and that you do a 10 or 15‑minute training on a topic at every single meeting.

Longer if it's something that's pressing.

But always do a training module at your board meetings.

We're doing that ‑‑ I'm the chair of one of the boards of one of the Centers.

I just think everybody is coming up to meet that.

They're kind of eager to know that ‑‑ the ins and outs of what Independent Living is.

And so you just do a short module and you say, here is what the Rehab Act says it is.

This is where our focus ought to be.

Then you do the next one‑on‑one of the core services.

And you do the next one on board operation.

So take a look at doing something, because it's harder to get board members to come to a special training than it is to get them to come to the meetings.

So you probably want to do both, but never miss the opportunity to do something at your board meetings.

Slide 20.

So, there is a checklist.

I have been mentioning checklists.

There is one specifically for the personnel records.

So you want to make sure that you review your personnel files against that checklist.

It's in the appendices for the COMP program.

It does ask all of these questions, but they're going to be different for ‑‑ or could be different for every record.

So this may be a time where you want to take a look at a sampling of the records and the ED or personnel manager and the associate director, somebody may want to take time to pull a sampling and run this checklist against that sampling because that's going to be harder to do for everyone because of the level of confidentiality.

But is it appropriate to have a conflict of interest form?

And were they informed of the conflict of interest policy, that they had to disclose if they have a conflict of interest?

What about confidentiality?

What about other codes of ethical conduct?

Those are key operational things you need to make sure are covered.

There has to be an annual drug‑free workplace statement that you give out to all of the staff.

So have you done that?

And is it in their record so that they can sign off that they received that?

Is there a signed duty statement or acceptance of a job description?

Do they know what you expect them to do and can you document that?

Is there a training plan and evidence that the employee did receive training?

Are personnel records kept safe, locked, confidential?

Limit the personnel file access?

So those are some of the things that will be looked at when they look at the personnel files.

All right.

Next slide.

Just a little bit more about ethical conduct.

We have some samples.

You can easily get them.

If you say nonprofit ethical conduct in your search, up comes all of the stuff that you want to take a look at.

We suggest that you have a written code of ethical conduct, that you have one for both employees and board members and sometimes they can be the same document.

Sometimes not because you have differentiated between their roles and it doesn't work out.

But everybody ought to have training annually on what is ethical and what is not allowed, and should sign that they went through that training, agreed ‑‑ that they agreed to the code of ethical conduct, including conflict of interest, but also just other ethical decisions and ethical approaches to things.

That usually includes policies that safeguard against a person participating in a decision that might benefit them or someone in their immediate family.

And if your Center is a Center that has relatives on your staff, this deserves a little examination on your part.

Because if I'm an Executive Director, I better not hire my kid.

You know?

Am I willing for somebody else to supervise him?

Can I completely step out of the role?

Probably not.

So what are we going to do about that?

You have to have a policy that describes what you're going to do, who makes the decision, and if it's ‑‑ if it's ‑‑ if it has the appearance of conflict of interest, there's a good chance it is a conflict of interest.

So just really look at this carefully and take a look at what you think.

22.

Confidentiality.

Of course you need confidentiality policies.

I hope that's routine at your place of business.

Confidentiality of the personnel information, personal information of the consumers as well as the staff.

You know, you have to have permission to use photographs, to do releases, to use their name.

You shouldn't have lists of names posted someplace to tell you who each person works with.

That better be in a confidentiality or secure place.

So take a look at what you do both with stored information, current information, and information that people keep on their desks in order to do their job.

Maybe it shouldn't be on their desk.

Maybe it should be in a drawer.

Because if I'm sitting next to somebody at my desk working on a document, I don't want them to be able to look over and see confidential information about someone else.

So take a look at policies that inform everything about confidentiality, how you protect it and how you release information if you do release information.

This also especially important with family members of adults with disabilities because sometimes they want to know things that are confidentiality and you don't have the right to give mom that information unless the son approved it first.

So he needs to sign that release of information.

I would suggest that that release of information be done ‑‑ what's the right word ‑‑ be done separate from mom.

You know, say, well, he has the right to this information, let me go over these rights with him and see what he says, and could you give us some privacy while we do that, please?

I know, hard to do.

But there are family members who are not legal representatives who continue to try and assume that role.

So you do have to kind of be conscious of that.

And do you have confidence which will meeting space in cubicles are great for maximizing space and ‑‑ not that any of us have a cubicle today, huh?

Not very many of us.

Most of us are home.

But, yeah, you want to make sure you have some confidential meeting space that's sufficient for your staff to do their job.

Let's look at 23.

Somebody asked a little while ago for the link to the prohibition against lobbying.

The actual prohibition is in the federal regulations which are at 45 CFR 75 in the appendix around allowable and non‑allowable costs.

But in addition to that, the office of Independent Living programs has issued and FAQ around advocacy.

That's where you'll find it listed, that also addresses lobbying and the fact it cannot be done with federal funds.

This is another similar situation, isn't it?

We must do advocacy.

We cannot do lobbying with federal funds.

So we have to come up with that balancing act.

I'm not going to spend a whole bunch of detail on this because I'm running a little behind.

We have whole sessions of training just on lobbying.

So I would suggest that you look at those.

But if you don't have written policies and procedures that prevent the use of federal funds in a lobbying manner, which is asking somebody to make a decision, you need to be able to show that any lobbying was done with other funds and you are not using federal funds for that purpose.

Let's look at 24.

So there is a fiscal review tool.

Maybe we ought to answer some of these piled up questions first.

What do you think, Tim?

Oh, you're trying to help me out by doing some of them.

I saw that.

>> TIM FUCHS: I was typing ‑‑ I sent some links and whatnot.

But, yeah, let's go through a few more.

So the last one from where we left off was regarding incentive pay.

Susan is wondering: Could the policy be contingent on if there are available funds, for instance?

>> PAULA McELWEE: Absolutely.

Absolutely.

You can budget money for it and not have the budget.

So you certainly want to take a look at that.

Yes.

>> TIM FUCHS: The next question comes from one of the DSEs.

They say we already have a review tool in place to conduct compliance reviews.

Can we use the COMP tool instead of our own so that it's ‑‑ so there is consistency there?

>> PAULA McELWEE: It's probably more current to use the COMP tool because the ‑‑ the one we used in the past was the RSA review tool appear lot of states adopted, and it's close, but there have been enough changes you hate to use an old tool if you have a new one at hand.

>> TIM FUCHS: Marie is asking about confidentiality for things like speakerphones and sound carrying outside of offices.

I think that's very much in line with your example about having something not on your desk.

You still need to keep these things confidential.

>> PAULA McELWEE: Somebody needs to address that.

If you have a staff person who does this on a speakerphone on a regular basis, talking about the consumer by name, listening to their voice mail where the example is given, you really don't want to do that.

You have to be confidential.

So remind people somehow.

Have a way to say, you know, we're going to update our confidentiality.

Let's play a game.

You have to put a quarter in the bucket every time you say somebody's name out ‑‑ maybe it's too serious to do that kind of thing but some awareness it's not okay would be important.

>> TIM FUCHS: Jackie is wondering, can we get a break on training requirements if we have tons of experience?

So for folks with five, 10, 12 years of experience ‑‑

>> PAULA McELWEE: You set your own training requirements.

So that's up to you.

>> TIM FUCHS: Yeah.

Well, and looking ‑‑ there are like ‑‑ some trainings that might be more appropriate for someone with more experience.

So whether it's you or whether it's asking a manager to consider that, that if you are going to require those CEUs, that you make sure people are getting things that aren't a waste of their time.

>> PAULA McELWEE: But that's a local decision.

So you decide if you need CEUs or not and how many hours.

It's up to you and your policy.

>> TIM FUCHS: Maureen has a couple more questions.

Do we need releases of confidentiality for the on‑site reviews to review their files, interviews or are they waived as if they're required by ACL ‑‑

>> PAULA McELWEE: They are required ‑‑ I suggest that you put that language in your intake documents.

Because then the consumer is signing that they understand that they're waiving or accepting a planned and they understand XYZ.

As they state they understand that, they understand that the funder can review their information.

You can signed separate releases if you want to do that.

I know that the reviewers will not look very kindly on that if they have come to investigate a complaint and you won't let them see that person's record because you don't have a release.

Not going to fly.

So I would suggest you put it right in the intake documents.

>> TIM FUCHS: Those are the questions for now, Paul law.

So let's go ahead.

>> PAULA McELWEE: Fiscal tools, another topic.

So this is the checklist the fiscal team uses to do the review.

So there is checklist to take a look at.

Part of these are notes for the reviewer.

So the reviewer has context.

So they aren't always an am I in compliance.

They are, how do you do it?

Not necessarily a right or wrong answer.

You just want to take the time to describe it, tell what policy it's in, whatever.

For example, one of questions in there that has no right or wrong answer is whether you use an accrual or a cash basis for your financial transactions.

Good question.

So do you use accrual or cash?

But it's your decision.

You just tell them which one it is and they will adjust accordingly when they look at your records.

I suggest you use this checklist to look at your own fiscal policies and procedures.

Your CFO, your accountant, if you have a contracted person that does some of your finances, they might be able to do this as a workgroup, go through and just examine, do we have all the policies in place, is it clear, have we met all the requirements of this fiscal tool?

It would be a good self‑examination to do.

Next slide, 25.

So here are the ones that they're looking at.

They're looking for policies and procedures around your payroll process, including accounting, including approval of time worked.

You may or may not also use a personnel activity report.

If you're spreading the payroll costs across different fund objectives, you're going to find a situation where you do have to keep track of which time was spent where.

As we've just said, fundraising and lobbying might be their own category because you can't pay them with federal funds.

So you are keeping track of time including lobbying and including fundraising.

If some that your ‑‑ some of your ‑‑ how are you allocating personnel time across different fund objectives is going to be a piece of this.

Whatever your procurement policies are, and those have been changed quite a bit at the federal level.

If you have anything in your policies and procedures that uses the number 34, CFR 34, CFR whatever, it's out of date.

So it should say 45.

Financial stuff is in CFR 75.

The other program regulations are in 45 CFR 1329.

Those are the numbers you ought to be looking for.

If your policies reference 34, they're out of date.

So you need to at least change that.

If you have trouble finding regulations, that's one of the questions you can always ask us and we'll be happy to guide you to the right place for that.

But the procurement policies have changed quite a bit and the limits are higher than what they used to be.

You may not want to make your limits higher.

You might be very comfortable with how purchases are being approved now, but there is more ‑‑ a higher threshold amount than they used to be in the regulations.

How do you do travel reimbursements?

What are your policies and procedures around travel reimbursements?

Do you do a per diem or do you do a straight reimbursement with everyone having a receipt for everything?

Which ways do you actually deal with that?

And then are you consistent in that?

And with credit card accounts, are you looking at receipts of all of the individual purchases, not just the summary?

So you should be able to see the receipt from the gas station that shows that I didn't buy a case of beer with it when I bought my gas, right?

With the company card.

So whatever you buy with the company card, you need a detailed original receipt.

So when you look at policies and procedures, make sure about that.

But that would be true in travel reimbursement and procurement.

Sometimes somebody goes to the office supply store.

Do they bring back the itemized receipt?

Because you want to show what you actually purchased.

If that ‑‑ that office supply store has lots of other things besides office supplies.

So you may or may not be keeping everybody on task on that.

If you don't see that details report you're not.

Explain how you review changes of key personnel.

This is a requirement ACL has.

The term is key personnel.

We usually translate that as a new Executive Director but it may not be just the Executive Director.

You may have other key personnel depending on the size of the organization.

ACL has to approve that and you have to make a request for approval and there is a process for that.

Any time you start into that, let your program officer, me or Tim know that you want those checklists and we'll give you that information for how do you get approval for new staff.

Key personnel meaning at least the Executive Director.

Do you have a process to update your registration in Sam.gov.

>>> Any of the new you are executive directors that haven't done this yet, you have to do it every year.

If you are the new Executive Director, start now because it will expire at some point, depending on when it was last time.

You want to make sure that you're the person that they contact when it expires.

So it's a registration of government grantees, and you have to review the information to make sure it's accurate as well as update your registration annually, and sometimes that means, again, new key personnel.

Policies and procedures for the operation of roles, duties and responsibilities regarding financial management.

So you'll see that separation of duties is an accounting concept for making sure that you can't ‑‑ just limits the possibility of anybody stealing anything because two people see everything, or almost everything.

So keep that in mind.

And practices for what you do with earned program income.

Another topic we haven't talked about yet.

So if you have a grant ‑‑ now, we'll talk about fee‑for‑service in just a second.

But if you have a grant that you use some of that money to get money.

So you are ‑‑ you do a start‑up for an employment program, and you do that out of your grant funds, but the employment program brings in income but doesn't entirely pay for itself, but any time you're subsidizing a money making project like a fee‑for‑service or other grant out of your Part C funds, any income you make has the same restrictions apply.

It's considered program income.

I believe there's, you know, more clarification we could probably drill down to on this and I'm not going to take the time today.

But program income means if you use your Part C or Part B money to make money, then you have to count that as program income.

And so if you hired the employment specialist with the grant that you just got but that employment specialist supervisor, part of their time is applied to that grant, and isn't paid for by ‑‑ then it's paid for by Part C and it's program income.

26, Tim.

So, we mentioned some of these, but ‑‑ who is designated to access the Payment Management System to request funds and who does the report on that?

That's something you need to have in your policies and procedures or in the job descriptions for that person.

How do you review your working budget against actual expenditures?

So you have a budget that was approved by your board.

Your budget versus actual comparison should tell you how you are doing on that.

How do you do that should be in a policy or procedure.

Now, we have financial sample ‑‑ sample financial policies and procedures on our website.

You can go there or ask for information and we'll help you.

And record retention, this is interesting a minimum of three years from the date of the submission to the final expenditure report, or after litigation claims or audit findings are resolved and final action taken.

Three years after that time.

We say five.

I just think you'll do better if you do five years.

But, of course, if you are in the middle of a lawsuit, you keep it until everything has been resolved and five years after that.

So just kind of keep in mind.

But your record retention is not forever.

I will say this, though.

Anybody who is going in there and taking care of records, destruction of old records, if you have the original grant and some original correspondence, it has some historical and maybe emotional value.

So you may want to keep that original Board of Directors because when you have your 50th anniversary you want to recognize them all.

So do recognize if you have some things of historical value to you, it's okay to keep those.

You don't have to shred everything that's over five years old.

So the big thing is you have to do what you said you were going to do.

So your policy is being reviewed ‑‑ that paper policy, writing it is the first step.

Once the reviewers read those policies they're going to follow up and look and see if you did it.

If you said board approval was required for a certain thing, they're going to say, where are the minutes?

And if you don't have the minutes of board approval for whatever that was, then you are out of compliance that your own policies.

So ‑‑ there's a link there for those sample fiscal policies and procedures I mentioned.

You can copy that and take a look at that.

But do remember to change the name of the Center because we have a fake Center in those policies and the titles might not match, and if you just lift those policies and put them into place without any adjustments, that's not good.

But then once you adopt them, you have to do them.

So make sure it makes sense to you, it looks good to you, so that you're in compliance.

Recordkeeping.

Evidence of resource development, evidence of how you track program income.

So this is for re ‑‑ a repeat of some of what we said but they will be looking for these.

So put where you have that information, right?

Personnel record system, how personnel time and leave is entered, how you allocate it, how you verify it, how you approve it.

Notice, personnel time, if the person's time is split between grants, allocated, in other words, so does their leave time.

So keep that in mind.

It all needs to be allocated properly.

Then can your accounting system report revenue and expenditures separately by federal and non‑Federal funding source.

I had someone approach may and say we have a separate ‑‑ you need to have a single budget that lists each one of your funding sources and the expenses and the ‑‑ you know, how much you had, revenue and expenses in that system.

Otherwise it's really easy to double bill for things.

You think, okay, 10% of this person's salary is here and 80% of it's here and 30 percent of it's here and, whoops.

Make sure you have a single budget and you can report all of your expenditures separately, not just by federal and non‑Federal, although you do need that figure, but also by funding source.

Let's look at 29.

So when they review the accounting system, they're going to look at this whole list of things.

Sometimes this whole list is kept ‑‑ it's all in your accounting software, in your QuickBooks or whatever.

You may or may not use the same titles, and you may not see it as a separate journal, but it is a document that you can generate within your QuickBooks, but make sure you can.

Your general ledger, can you pull out cash receipts separately?

Do you have a way that that's recorded by two people?

What's your income or sales or revenue?

What are you purchasing?

You ought to be able to show all of this stuff within your accounting system.

This is what they're going to ask for.

So take it to your accountant and ask, "Can we do all these reports?

If we're asked to, can we do a report just on cash receipts?

And how can we show that it was properly safeguarded?"

All right.

Next slide, 30.

Winding down.

How much time do we have?

If you spent more than $750,000 in federal funds, you have to have a different kind of audit than if you spent less.

It's called a single audit.

You probably remember this from some of the other information that you've seen.

It's definitely ‑‑ has to be submitted to the federal ‑‑ to the federal government.

There's a place there.

And there's some restrictions on how quickly you must get it done.

That's only if you spend $750,000 for federal for the year you're auditing.

We do recommend that you get a financial statement audit even if you don't have that kind of revenue because it's certainly going to give you that accountability.

But you can't do this kind of financial statement unless you have this kind of revenue.

So just kind of keep in that mind.

31.

I hope that made sense.

So here are the questions they will be asking about property.

Did you use IL funds to purchase real property?

Real property is, what?

Real estate?

That's what makes it real.

Were IL funds used for alteration or renovation with current building and a cost that exceeded $150,000?

They're going to look at some of your bidding processes if you had these kind of he can spends.

So there's an actual requirement that you do this.

Same is true with equipment.

Equipment being defined as $5,000 or more.

So sometimes we get a lot of equipment that's a lot less than that, and, really, you don't have to have the same kind of recordkeeping on it that you do with these higher expenses.

These higher expenses you have to be able to show that you got prior approval.

Do you have good insurance coverage for property and equipment?

And do you do an inventory least every two years?

I usually suggest that your control system be expanded beyond just the equipment that's worth more than $5,000, because what walks away the most easily is what?

It's going to be your ‑‑ you know, your smaller stuff, your laptops, your tablets.

They don't cost anywhere close to that $5,000, but you want to keep track.

So kind of keep that in mind.

32.

All right.

Indirect cost rate.

I am not going to cover that today.

We've had multiple trainings on this.

It is a big topic.

But here are some of the things that are in their checklist to look at.

They are expecting to see an indirect cost rate or a 10% de minimus.

If you don't know what I'm talking about, you need to contact me so that I can get you on the right track.

Indirect costs are shared costs that have to do with that same allocation I mentioned earlier and you have to be sharing it according to an approval formula.

We used to use what was called a cost allocation plan.

That is no longer accepted by ACL.

They want to see an indirect cost rate or want to see that you're doing the 10% de minimus.

We cannot answer questions about that here because it's very individualized to the Center.

So contact me and show me what you have and haven't done and we'll look at that, but there is one bullet here that I want you to notice.

Does your approved indirect cost rate agreement cover the duration of your grant period?

So, for us, we're renewed every year but we have a three‑year cycle.

So they want to make sure it's that same period of time.

If not, you can apply for a ‑‑ an extension of up to four years to get it to even how so that your cost allocation rate lasts for the periods of your grant, and then you update it and it lasts for the next period of the grant, which is a piece I'm not sure everybody is aware of.

33, no indirect cost rate questions, you guys.

Subrecipients or subcontractors.

Now, if you give any of your grant must not tee another organization, you need to have an MOU or an MOA, a memorandum of agreement or Memorandum of Understanding between your organization and anyone else you pay to do some of your grants work.

Most of your you are not involved in this.

Where it does apply is with the SILC.

The SILC is a subgrantee of the ‑‑ or a subrecipient of the DSE's money that's the Part B money.

So you also would need to have that.

We're not going to talk about that review because that's not what the COMP system is for but that's just an example.

Money comes to the DSE, it all gets passed on ‑‑ or much of it passed on to the SILC and that would require some agreement between the recipient and the one receiving the money.

So keep that in mind and there are several policies you have to do.

So take a look at those requirements if you do anything like that.

It's very uncommon, so I'm not going to spend any time for it.

How about 34?

We also have items that need to be included in that MOA or MOU, but like I said, most of you aren't doing this, so let's skip over that, and if you are, you can look back at that and we'll talk about it more another time.

This is what I already said about the Part B money.

So I said it early, we don't need to go back.

Let's go to 36.

>> TIM FUCHS: Okay.

I would like to suggest we just get through to slide 40 and do our final Q&A.

Does that work, Paula?

>> PAULA McELWEE: Perfect.

There's not much left here.

>> TIM FUCHS: So we are on 37 now.

>> PAULA McELWEE: Perfect.

You need to know that PPR is a key document, right?

So to make sure that content is complete and shows you're in compliance with the requirements is important.

And if you're the person who does that PPR, you should not be doing it alone.

So keep that in mind.

Your Payment Management System entries and your draws also tell your program officer some things about your Center, and some of you received emails from your program officer that said that your draw‑down amount for the first quarter of the year didn't make sense.

Either none or too high, and what was that about?

You're not allowed to just draw the same amount of money every time, but it ought to be close because you're operating for a year, and if you have a whole bunch of up front costs, are you going to have enough to finish your year?

Some of you are getting those kind of questions.

You may be asked to clarify either of those or provide new information that isn't on the PPR, and don't be surprised at that.

That's part of their review process.

It's actually the first part of the review before they decide about the on‑site piece.

I know a bunch of you have heard it from that because I heard from you.

38.

So your CIL can be reviewed at any time.

It can occur for cause.

It used to be prior to WIOA it could only occur randomly.

That was specified in the old law.

Now it's specified that it can be randomly or for cause.

And so sometimes it will be in a situation where there's been some kind of complaint.

But sometimes it will just be because they were in your neighborhood and they decided to do you, too.

So any of those can happen.

You must fully cooperate with any requests.

You promised that when you signed your agreement to accept the funds, that you would cooperate with any requests for information, either for the DSE, those of you who are Part B or receive Part B funds, or the federal agency.

And if you're selected for that top‑level of review where they are reviewing in detail, they don't always do that on site.

But you must follow full access to all the records, all the people, all the information.

You don't get to say, oh, no, we won't cooperate.

If you don't cooperate, your funding will immediately be at risk.

So if they come on site, you need to give them a good space to work in, a conference room is common, but they need a place where they can access a phone because you probably gave them a list of interviews they can do to prove different things.

So make sure they have work space and a phone access if they need it.

All right.

A couple more.

We're almost there.

It's okay to be proactive.

If somebody informs you that there's a visit coming back and you look back at this checklist, you can collect most of the documents that are needed.

So there's no reason why as soon as you know that you can't start putting them together.

Copy them for them.

Make notes 'their copy and say, you know, they have the full policy and procedure manual here, but this policy is here and I've highlighted the part you needed to know for that question.

I make copies, put them in a banker's box, put them in folders that are labeled so they can actually easily find the information they are looking for.

If you make the review simple, that's always a good thing.

And if they can back up and see, oh, yeah, they really did this, they didn't just create it for us, that's a good thing as well.

So, highlight them, and even if you aren't informed of a visit, you can still to this for yourself if you want to.

So you can check your own performance against these requirements and see, do I have everything, or do I need to make some improvements now?

Because striving for excellence is the point, right?

So take a look at that.

All right.

40.

If you're reviewed you may need to make some changes.

That's often the last part of the review, is the response of what they found that they need to ‑‑ that you need to correct.

Now, there is a written report you'll get that says this.

Be patient.

The process is somewhat time consuming to get from when they visit you to a written report to an approved report before they can give it to you.

So it will take some time.

When you get it, though, there will be a deadline.

So if you heard things in the exit interview or the exit conference with your team, then you know, right, that those things need to be done.

Don't wait for the letter to fix them.

I'm only talking to a few of you right now because not many of you have been reviewed, but for all of us in the future, this is no reason why we need to fix something ‑‑ if they point something out, let's fix it now.

And then when they write the report, we can say, yes, on this day we did this and it's been in place now for two months, or whatever.

And then they will refer you to us and we'll help you in any way we can to do the corrective action plan and set the target dates.

Some of us you'll have us support you in some of the steps, too.

Next slide.

Final questions.

>> TIM FUCHS: Q&A.

10 minutes.

Perfect.

The first question is from Julie and she was wondering, going back to one of your recommendations for the last Q&A break, does anybody actually have a notation on their intake paperwork or consumer paperwork that says, hey, this might be reviewed by a reviewer at some point?

I don't have a way to quickly poll the audience.

I don't know if it's COMP, but it doesn't mean it wouldn't be something useful to consider.

>> PAULA McELWEE: I think it's helpful to cover that with the consumer up front.

I think that's fair.

I'm sure we can find it but not right off.

>> Lisa is wondering, when reviewers come ‑‑ will they offer identification?

Should we ask for it?

How do we handle that?

>> That's a good question.

Usually they've connected with you quite a bit in advance.

So you don't have any question.

But usually they're going to be wearing a tag, you know, when they come in, and you know their names, and you've set a time for them to arrive.

So there probably isn't any question.

I don't know that you would need to ask for it just because they always have I.D. visible.

But if for some reason it isn't visible because it's cold and they have a coat on, it's always okay to ask for I.D.

>> TIM FUCHS: Mary volunteered they do not have that in their consumer information but they're going to make the change to do that.

She also said that when they had their on‑site review they were well aware in advance that they were coming and who they were.

>> PAULA McELWEE: It's usually not a surprise, although they can do an unannounced visit.

I haven't known them to do that at this point.

>> TIM FUCHS: Laura volunteered their agency has a release of information from all consumers stating funders have the right to review consumer files.

Thanks, Laura.

I've answered some questions in writing, but those are the live questions that I had.

If you had further questions, you can enter them in the Q&A tab.

Or on the full‑screen CART.

Dorr on is wondering if the DSE choose to use the COMP tool instead of their own tool hopefully we would all be ready because of wonderful trainings like this, however, should there be an announcement their review tool has changed?

>> PAULA McELWEE: That's a good question.

That's kind of between you and the DSE and your relationship with the DSE.

You can be proactive on this also, though.

You can say to the DSE, we have the new in instrument from the feds around this money.

Here it is.

And hopefully they will ‑‑ it's easiest if everybody is using the same tool.

That's all.

It's easier.

>> TIM FUCHS: Cheryl was ‑‑ Cheryl Simpson had asked a question about inventory.

I thought you had answered it, Paula.

She asked if we could revisit.

She was asking about inventory can we just do our computers or do we need to do every chair, desk, bulletin board, et cetera.

>> PAULA McELWEE: You are only required to do ‑‑ inventory every two years and only on equipment over $5,000 value.

My suggestion that you adds your easily absconded with stuff, like laptops and tablets, that's not a requirement.

It's just extra.

>> TIM FUCHS: Maureen is wondering will reviewers expect to review any or all consumer files at random from any programs or funding sources with or without releases?

Any expectations or limits on that?

>> PAULA McELWEE: I can't tell you what's happened this last time but I know in the past ‑‑ in the past it was surely a part of the process that they saw any that they wanted.

They asked for a list of consumers and they checked off four boxes and said, bring me these files.

And typically that's whatever services, because you're reporting to them on all the services.

However, I think that could be discussed.

I think you could ‑‑ that could be part of your question with the team that's coming to your site, is what files are you expecting to have available to you?

And does it include our employment program or where somebody is only receiving that and it's not a core service, do you expect to see those or don't you?

I would find that out from the team, for sure.

>> TIM FUCHS: Yes.

Dan says the 15‑minute board training is a great idea.

Does IL Net have a curriculum that could be easily divided into 15‑minute intervals.

>> PAULA McELWEE: We do.

Drop me a note.

Maybe I'll make appear topic sometime.

There are a lot of things that can be divided up that have a good piece right here that can be ‑‑ so what you do is you go into one of these videos or one of the older PowerPoint things and you decide you're going to do slides 3‑9 because that's going to be appropriate to what your board wants to look at.

Yeah.

So, I have some of those suggestions, yeah.

>> TIM FUCHS: All the on‑location trainings we do which are much longer are broken down into modules, too.

So you can get a sense in these three‑day trainings where the content lives and, again, Paula ‑‑

>> PAULA McELWEE: It's not hard to find it.

>> TIM FUCHS: We would be happy to help you with that.

Okay.

All right.

Hilda asks: Paula, can you tell us more about allowable advertising expenses?

>> PAULA McELWEE: Okay.

This is another one of those advertising outreach questions, right?

So outreach is allowed, but advertising of the sort of buying lots of T‑shirts or give‑aways at a booth, typically would be considered non‑allowable advertising expenses.

Advertising expenses around hiring, getting those ads out, that's always allowable.

Advertising expenses about securing property, securing bids for something you are going to purchase, if you have an expense at that level, that will always be allowed.

The biggest question comes to those promo items, and it really is difficult sometimes to sort that out, but if you feel like that's an essential part of outreach, you need to describe it that way in your documentation for that purchase and tell us why, because if somebody comes in and reviews and sees that you bought flash drives for everybody with your name on it, they're going to say, why did you buy flash drives with your name on it.

You're going to say, this is what we said, we put all the presentations from this event on to that flash drive and that was giving them an accessible format of the information they required.

We put our name on it.

Didn't cost us any more.

We put our name on it for future reference if they need to get back with to us, but it had a purpose, a program purpose.

They will want to know what your program purpose is for the materials you buy.

>> TIM FUCHS: Great.

I see Carl has his hand raised.

Karl I'm going to open up your line and you can voice your question in just a second.

It's not allowing me to unmute you.

You might be muted on your end.

I'm going to lower your hand.

If you still have a question you can raise your hand again and I'll come back to you.

Those are the questions I see for now, Paula.

We've got two minutes left to give 10 seconds here to see if any other questions come in.

Let me mention, too, while we're waiting, you guys are welcome to submit your questions after the call.

I know a number of you may still be thinking this through.

Some of you may be watching the recorded version.

So please know that Paula and I are happy to take your questions after the fact and we'll get back to you.

Okay, Paula, I don't see any other questions.

We're at 4:29 here on the East Coast.

This has been really, really helpful.

Today's presentation and Part I yesterday.

Thank you so much for taking the time to put this together to go through the new COMP tool.

I know it is a lot, so I hope you all will be in touch with us to let us know if any other questions come up.

And with that, I'll let you have your day back.

Please do take a minute to fill out that evaluation.

So when you close the webinar, you should see that evaluation in your web browsers, an if you don't see it, or for any reason, it was in the confirmation email sent to you all as well.

All right.

Thanks so much, everyone.

Have a great day.

>> PAULA McELWEE: Bye‑bye.