COMPLIANCE AND OUTCOME MONITORING PROTOCOL

CENTERS FOR INDEPENDENT LIVING

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Preface

The Compliance and Outcome Monitoring Protocol (COMP) is the guidebook used to conduct CIL oversight and monitoring. The guidebook is a resource for Office of Independent Living Programs (OILP) staff, Centers for Independent Living (CILs), and non-federal reviewers. The guidebook is divided into the following sections:

Section 1:   Program Overview

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There are a number of resources included with the guidebook that provide additional information and tools related to the COMP. For example, the guidebook includes a list of acronyms and a glossary. This information will help with understanding words and concepts associated with the COMP. Tools such as the Grantee Dashboard, the fiscal review tool and note-taking tips are also included. These resources enhance transparency and consistency of the monitoring process.

The objectives of CIL oversight and monitoring include:

- Assess compliance with the assurances and evaluation standards in Sections 725(b) and 725(c)(3) of the Act;

- Study the program operation, organizational structure and administration of the CIL, under Section 725(c)(1), (2), (5), and (6) of the Act;

- Review documentation sufficient to verify the accuracy of the information submitted in the most recent annual program performance report (PPR);

- Verify that the CIL is managed in accordance with federal program and fiscal requirements;

- Assess CIL conformance with its work plan, developed in accordance with Section 725(c)(4) of the Act, conditions of the CIL's approved application, and consistency with the State Plan for Independent Living (SPIL);

- Identify areas of suggested or necessary improvements in the CIL's programmatic and fiscal operation and provide TA resources available on the local, state, regional and national level; and

- Identify areas of exemplary work, projects and coordination efforts and make this information available to the larger CIL community.

Section 1: Program Overview

Overview of the Rehabilitation Act of 1973, as amended, and the Office of Independent Living Programs

The Rehabilitation Act of 1973, as amended

Independent living (IL) may be considered a movement, a philosophy, or a program. IL programs are authorized by the Rehabilitation Act of 1973, as amended (the Act) and provide funding to the States for services and activities that support many aspects of independent living.

Title VII, Chapter 1 of the Act states the purpose of the program is to "promote a philosophy of independent living including a philosophy of consumer control, peer support, self-help, self-determination, equal access, and individual and system advocacy, in order to maximize the leadership, empowerment, independence, and productivity of individuals with disabilities, and the integration and full inclusion of individuals with disabilities into the mainstream of American society."

The Act contains two complementary grant programs to carry out the purpose. The two grant programs are:

1. Independent Living Services (ILS)
2. Centers for Independent Living (CILs)

Independent Living Services State program (ILS)

The Independent Living Services program is authorized Under Title VII, Chapter I, Part B of the Rehabilitation Act of 1973, as amended.

The ILS program provides financial assistance, through formula grants, to states and territories for providing, expanding, and improving the provision of independent living services. To be eligible to receive financial assistance, states must:

> (1) Develop, submit, and receive approval on a State Plan for Independent Living (SPIL); and
> (2) Establish and maintain a Statewide Independent Living Council (SILC).

The Act sets forth key provisions of the ILS program that include: responsibilities of the Designated State Entity (DSE), provisions for the Statewide Independent Living Council (SILC), and requirements for the State Plan for Independent Living (SPIL).

To receive ILS formula funding, states must develop and submit a SPIL, which is a three-year plan for providing independent living services in the state. The SILC and the CILs within the state jointly develop a SPIL. The SILC is an independent entity responsible to monitor, review, and evaluate the implementation of the SPIL.

The DSE is the agency that, on behalf of the state, receives, accounts for, and disburses funds received under Title VII, Chapter 1, Part B of the Act.

The ILS program funding provides resources to the state to support the work of the SILC and the Designated State Entity (DSE). The remainder of funds may be used for the following activities as reflected in an approved SPIL:

1. Providing independent living (IL) services to individuals with significant disabilities, particularly those in unserved areas of the state;

2. Demonstrating ways to expand and improve IL services;

3. Supporting the operation of CILs;

4. Increasing the capacity of public or nonprofit organizations and other entities to develop comprehensive approaches or systems for providing IL services;

5. Conducting studies and analyses, developing model policies and procedures, and presenting information, approaches, strategies, findings, conclusions, and recommendations to federal, state, and local policymakers;

6. Training individuals with disabilities and individuals providing services to individuals with disabilities and other persons regarding the IL philosophy; and

7. Providing outreach to populations that are unserved or underserved by programs under this title, including minority groups and urban and rural populations.

The Act also authorizes funds for the provisions of training and technical assistance to SILCs.

Centers for Independent Living (CILs)

The Centers for Independent Living discretionary grant program is authorized Under Title VII, Chapter I, Part C of the Rehabilitation Act of 1973, as amended.

The Act sets forth key provisions of the CIL program that include CIL standards and assurances, and the requirement that CILs are consumer-controlled, community-based, cross-disability, nonresidential private non-profit agencies.

At a minimum, CILs funded by the program are required to provide the following core services:

- Information and referral;

- IL skills training;

- Peer counseling;

- Individual and systems advocacy; and

- Services that facilitate transition from nursing homes and other institutions to the community, provide assistance to those at risk of entering institutions, and facilitate transition of youth to postsecondary life.

CILs may provide other IL services such as psychological counseling, assistance in securing housing or shelter, personal assistance services, transportation referral and assistance, physical therapy, mobility training, rehabilitation technology, recreation, and other services necessary to improve the ability of individuals with significant disabilities to function independently in the family or community and/or to continue in employment.

A population-based formula determines the total funding available to each state to support CILs in the state. Subject to the availability of appropriations, ACL is required to provide continuation funding to existing CILs at the same level of funding they received the prior fiscal year and to provide them with a cost-of-living increase. Funding for new CILs in a state occurs competitively, based on criteria identified in the state's SPIL.

To receive continued funding, among other federal requirements, CILs must demonstrate minimum compliance with the following evaluation standards:

- Promotion of the IL philosophy;

- Provision of IL services on a cross-disability basis;

- Support for the development and achievement of IL goals chosen by the consumer;

- Efforts to increase the availability of quality community options for IL;

- Provision of IL core services and, as appropriate, a combination of any other IL service;

- Building community capacity to meet the needs of individuals with significant disabilities; and

- Resource development activities to secure other funding sources.

The Act also authorizes funds for the provisions of training and technical assistance to CILs.

Office of Independent Living Programs (OILP)

The Office of Independent Living Programs (OILP) is located within the Administration on Disabilities, Administration for Community Living, the Department of Health and Human Services. OILP is responsible for the implementation of the Independent Living programs set forth in the Act. The IL programs support community living and independence for people with disabilities across the nation based on the belief that all people can live with dignity, make their own choices, and participate fully in society. These programs provide tools, resources, and supports for integrating people with disabilities fully into their communities to promote equal opportunities, self-determination, and respect.

Section 2: Compliance and Outcome Monitoring Protocol

Overview of COMP

The Office of Independent Living Programs (OILP) uses a three-tier system to evaluate and monitor CIL grantees. Tier one includes a grantee dashboard completed over the course of the fiscal year. Tier two reviews focus on specific program(s) or fiscal issues. Tier three are comprehensive program and fiscal reviews. The COMP provides transparency and consistency in the oversight of CIL grantees, helps identify training, and technical assistance needs across the network.

Purpose

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

CIL Oversight Components

Federal oversight of CIL grantees include four broad components:

1. Federal review of program compliance
2. Federal review of outcomes
3. Federal review of fiscal operations
4. Provision of technical assistance

Figure: CIL Oversight Components

Program Compliance

OILP is the federal steward that ensures centers for independent living operate consistent with the Act and applicable regulations. Compliance is seen as the minimum at which a CIL grantee must operate. Throughout the fiscal year, grantee information is reviewed to determine whether a grantee meets compliance requirements.

The program compliance element of oversight asks the question:

Are the CILs doing what the law requires?

Program Outcomes

While it is important to ensure compliance, compliance in and of itself does not guarantee effectiveness and achievement of the purpose of the Act. It is not sufficient to only meet program compliance. Programs must also how that they are achieving the goals of the Act and making an impact on the lives of people with disabilities. Therefore oversight is also concerned with outcomes. The program outcomes review element of oversight asks the question:

Are the CILs making a difference in people's lives?

Assessment of grantee outcomes is guided by two principles:

1) The extent to which the grantee is achieving the purpose of the Act: *The purpose of this title is to empower individuals with disabilities to maximize employment, economic self-sufficiency, independence, and inclusion and integration into society.*

2) The extent to which the outcomes data collected and submitted by the grantee in the annual PPR can be validated.

Fiscal Operations

The fiscal management element is concerned with monetary tracking and accountability. Grantees must demonstrate sound fiscal management at all times. The fiscal management element of oversight asks the question:

Are CILs adhering to federal fiscal management requirements?

Technical Assistance

The T&TA element is concerned with the program's operations that will improve compliance and/or the grantees' outcomes/impact. Technical assistance is a coordinated process between OILP, its grantees, and the IL program's T&TA provider(s).

The technical assistance element of oversight asks the question:

What technical assistance will bring CILs into compliance and/or enhance program outcomes?

Oversight Three-Tier Model

The four components of oversight are incorporated into the three-tier monitoring review model described below.

Tier 1: Standard Monitoring

Tier 1 is standard annual oversight of all CIL grantees. Federal staff use the Tier 1 Grantee Dashboard review tool to assess select program, operational and fiscal management data. It is the basis for the federal office-grantee relationship and is essential for understanding the operation and impact of the federally funded program. Tier 1 monitoring activities are those that federal staff carry out as a standard business practice with regards to all grantees – e.g., the review of annual PPRs, review of fiscal documents and drawdowns, regular communications with the grantee and program stakeholders. Tier 1 is used to enhance federal stewardship, to identify program concerns, and to identify specific program and network TA needs.

OILP incorporates TT&A into Tier 1 by identifying trends in the review of the PPRs and other grantee activities. OILP shares this information with the T&TA provider for designing T&TA to address areas for improvement across the network. OILP may also identify specific CILs with areas of need and will coordinate with the T&TA provider to provide T&TA where needed.

Tier 2: Focused Review

Tier 2 focused reviews focus on specific areas of concern and will be individualized based on the issue(s) with the program. Tier 2 reviews may be conducted by desktop or onsite. High-risk grantees present significant concerns about compliance and/or a lack of responsiveness to federal staff and/or TA efforts to address programmatic, fiscal, or operational concerns. Any information that OILP receives that raises serious concerns about a grantee could result in a Tier 2 review. For example, allegations of grant fraud or mismanagement reported in news articles, social media, or by members of the public may merit a Tier 2 review. Results from Tier 1 activities may be used to identify area(s) for focus in Tier 2. Findings from a Tier 2 review may conversely be used to identify broader concerns and the need for a Tier 3 comprehensive review.

Tier 3: Comprehensive Review

Tier 3 is a standardized component of the COMP. Led by an OILP program officer, it is a team approach to a comprehensive CIL review that can be conducted by desktop or on site. The comprehensive review is intended to verify compliance, assess outcomes, and identify any program or fiscal concerns. It is also a way to identify best practices that can be shared with the network. The Tier 3 review is an interactive process between the review team and the CIL. Activities include document collection, board and staff interviews, client interviews, conference calls, webinars and the development by the grantee of state and CIL profiles.

On an annual basis, OILP will identify CIL grantees to receive a comprehensive review. The process to select CIL grantees for a comprehensive review will be a combination of random selection, director's discretion, staff recommendation, geographic area, and grantee request.

OILP will issue a CIL Tier 3 report. The Tier 3 report will include any program, fiscal or operational findings and make recommendations for TA. A formal corrective action plan (CAP) will be required to correct findings. TA will be made available by the TA provider to assist with the CAP and/or issues identified in the final report to the CIL. The report will include recommendations for areas to be addressed through TA; however, the CIL can also identify other areas for TA. The TA provider will work directly with the CIL to plan for the TA and both the CIL and the TA provider will be asked to provide information back to OILP about the TA activities.

OILP may recommend a Tier 2 follow-up onsite visit if determined necessary to verify ongoing program compliance or completed corrective action plans.

Oversight Tools

Given the variety of elements related to CIL oversight, OILP created the Grantee Dashboard and the Self-Evaluation Tool to streamline the processes. They are the tools OILP uses to review the programs annually and periodically but can be used by the grantees at any time to conduct self-evaluation. In a comprehensive review, grantees will complete and submit the Self-Evaluation Tool as part of the review process. This process is described in more detail in Section 4 of the guidebook.

Grantees can refer to the Self-Evaluation Tool at any time to assess program, fiscal and operational data.   Use of the Self-Evaluation Tool may assist the CILs in meeting the assurance that requires a CIL to conduct annual self-evaluations (Sec. 725 (c)(8).

Monitoring Activities and Timeline

In general, monitoring spans the federal fiscal year (October 1 – September 30). The COMP helps organize and manage the monitoring activities for the year. Preparation for monitoring activities include identifying the CILs to be reviewed, whether a review will be a desktop or onsite review, confirming the OILP monitoring budget, establishing review teams where appropriate, and preparing the CILs for reviews. The general monitoring timeline is as follows:

- *October – December:*
  a. *Tier 1 Standard Monitoring Activity.*
      i. OILP staff review previous FY Grantee Dashboard results and make Tier 2 and Tier 3 recommendations.
  b. Tier 2 Focused Review Activities
      i. OILP staff identify programs for Tier 2 reviews and notify grantees that they will have a Tier 2 review.
  c. *Tier 3 Comprehensive Review Activities.*
      i. OILP staff identify grantees for Tier 3 reviews and notify grantees that they will have a Tier 3 review.
- *January – March:*
  a. *Tier 1 Standard Monitoring Activity.*
      i. OILP staff annually review the CIL PPRs for compliance and outcomes. OILP staff analyze the data across the programs to verify the accuracy of the data and to identify trends in the data. Analysis may result in a Tier 2 or Tier 3 review recommendation.

     b. *Tier 2 Focused Review Activities.*
- i. OILP staff identify programs for Tier 2 reviews and notify programs that they will have a Tier 2 review.

     c. *Tier 3 Comprehensive Review Activities.*
- i. The review team conducts conference calls with each selected grantee regarding the Tier 3 review. The grantee completes the Tier 3 Self-Evaluation Tool and provides all requested documents to the review team, no later than March 1.

- *March-April:*

     a. *Tier 1 Standard Monitoring Activity.*
- i. OILP debriefs from the Tier 1 PPR review to identify areas for TA – both at the individual program level and across the programs. These areas are discussed with the TA provider. The TA provider develops and implements appropriate TA.

     b. *Tier 2 Focused Review Activities:*
- i. OILP staff identify programs for Tier 2 reviews and notify programs that they will have a Tier 2 review.

     c. *Tier 3 Comprehensive Review Activities:*
- i. The review team reviews the Tier 3 Self-Evaluation Tool submitted by the grantees. The review team conducts conference calls with the grantees regarding the Tier 3 review. The review team meets to discuss findings.

- *May-June:*

     a. *Tier 3 Comprehensive Review Activities:*
- i. The program officer develops a report that is reviewed by the review team and the Director of OILP. The report is shared with the CIL for response. Final reports will be issued to CILs no later than July 1.

- *July – September:*

     a. *Tier 1 Standard Monitoring Activity.*
- i. OILP makes changes to the next FY Tier 1 Grantee Dashboard and discusses TA with the TA provider.

     b. *Tier 2 Focused Review Activities.*
- i. OILP staff identify programs for Tier 2 reviews and notify programs that they will have a Tier 2 review.

     c. *Tier 3 Comprehensive Review Activities.*
- i. The review team conducts the Tier 2 follow-up onsite visit and prepares a report that is issued by September 15. TA is discussed with the TA provider who works with the program to develop a plan for TA based on findings from the review.

Activities that may occur at any time throughout the fiscal year include:

1. OILP staff complete and review grantee dashboards
2. Identifying grantees for Tier 2 or Tier 3 review activities
3. Developing, reviewing, and approving corrective action plans
4. Recruiting and training non-federal reviewers

Section 3: Tier 1 Standard Monitoring

Standard monitoring activities are those that federal staff carry out over the course of the fiscal year with regard to all grantees – e.g., the review of annual performance reports, review of fiscal documents and drawdowns, regular check-in emails and/or phone calls. Standard monitoring is the basis for the federal office-grantee relationship and is essential for understanding the operation and impact of the federally funded program.

Risk assessment is a key component to standard monitoring. A strong approach to risk assessment will help federal staff determine a grantee's level of risk based on a variety of factors[1], including

- Financial stability
- Financial dependence on federal support
- Strength of the program or business management system
- History of performance
- Adherence to programmatic or fiscal terms and conditions of the grant
- Timeliness and quality of required reports
- Program experience
- Commitment to appropriate advocacy roles

Through use of the Grantee Dashboard, federal staff can identify elements of risk. The level of risk identified will determine recommendations for Tier 2 or Tier 3 reviews and/or level of TA required. The Grantee Dashboard is intended to assess:

- Program Data
- Fiscal Data
- Operational Management

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[1] The list here reflects factors included in an HHS-ACL Grants Management Cycle Memo issued on September 30, 2014.

FY2020

Section 4: Tier 2 Focused Reviews

Tier 2 focused reviews are intended to provide OILP a process for conducting reviews of programs that are at-risk or have focused compliance issues identified. Tier 2 provides OILP a clear course of criteria and action for addressing grantee issues that fall outside the standard review process in Tier 1 and the comprehensive review process of Tier 3. It allows OILP to customize the type and level of monitoring required to address specific and narrow grantee issues.

Quality Assurance Criteria

Although Tier 2 is intended to address specific situations and circumstances that require individualized approaches, it is still important to have criteria that will ensure quality when carrying out Tier 2 activities. Below is a description of the quality assurance criteria for Tier 2:

- *Establishing equal expectations of grantees and staff:* This section outlines the steps and general expectations for Tier 2 for both grantees and OILP staff to provide clarity and guidance for Tier 2 activities. This includes proactive participation on the part of the grantee to work towards resolving issues before they escalate further. For OILP, it includes providing grantees with fair notice of escalating consequences associated with high-risk status.
- *Replicable process:* This section provides guidance for conducting Tier 2 activities so that they can be replicated with some level of consistency across the different and unique situations in Tier 2. This will help OILP ensure reliability in the Tier 2 process that can withstand scrutiny by internal and external leaders and stakeholders.
- *Process for documenting information.* It is important for OILP to have good historical records about any monitoring activities and when there are concerns about grantee compliance and/or performance. Tier 2 should have a process that includes how to document both the activities and outcomes.

Tier 2 Steps

Step 1: Determine Tier 2 Status and Category

A first important step in Tier 2 is determining whether a grantee will be placed into Tier 2 status. A grantee can be identified for Tier 2 review at any point and time. OILP will review and consider information from multiple sources before making a Tier 2 determination. Specifically, OILP may take the following steps:

- Consider the results of the review and analysis of the PPR and related fiscal reports
- Interview report source if an outside source has expressed concern about a program
- Interview grantee if appropriate
- Interview the TA provider if TA has been or is being provided

- Query IL network partners about grantee
- Review past state and federal monitoring reports and other related documents (e.g., onsite visit reports)
- Request additional documentation from grantee
- Conduct fiscal review of previously submitted documents
- Review Tier 3 reports
- Review Tier 1 grantee dashboard activities and related documents

After conducting fact-finding, the program officer and fiscal specialist (as applicable) will write a memo detailing reasons why the situation poses a risk and decide the threat level based on investigation. The team will identify the appropriate Tier 2 category for the grantee based on criteria (see below). After review by the OILP Director, the grantee is assigned to Tier 2.

Tier 2 Category Criteria

Risk Evaluation
- Risk actions reported or identified

Focused Review
- High likelihood of risk identified
- Narrow program deficiencies identified

High Risk Designation
- Confirmed area of non-compliance

Tier 2 Source Documentation

Risk Evaluation
- Tier 1 Grantee Dashboard review
- T&TA reports
- Stakeholder reports
- PO recommendation
- Self-reporting

Focused Review
- Tier 3 tools as appropriate
- Information and documents provided by the grantee

High Risk Designation
- Notice to grantee
- Corrective Action Plan

Step 2: Develop Tier 2 Plan

Once the program has been identified for Tier 2 activities, OILP will develop a plan for carrying out the Tier 2 activities. The plan will be specific to the program, situation, and category, but each will include at a minimum:

- Grantee award number, name, and state
- CIL and OILP contact information
- Summary of issue/concern (full memo developed in Step 1 included as appendix to plan)
- Goal, objectives, actions/steps, timeline

The summary should include what action/steps have been taken and are anticipated by ACL/OILP staff, i.e., careful review of the PPRs, fiscal reports, review of consumer emails, etc.

Step 3: Monitoring Notifications

The OILP project officer will notify the grantee in writing that they are in a Tier 2 Risk Evaluation status. The notice will provide a summary of the Tier 2 categories. The notification will provide a summary of the OILP concerns, the steps taken to date and next steps. OILP will identify next steps for the grantee and provide timelines as applicable.

Focused Review Notification
The grantee will be notified in writing from the OILP Director that they will undergo a focused review by the OILP staff. The notification will identify the OILP concerns, the focus areas and the timeline for the review. The OILP will follow up with the grantee to further discuss the focused review and to begin planning for the review. Components of the Tier 3 review process will be utilized as appropriate.

High-Risk Notification
OILP will notify the grantee of the concerns identified that place the grantee in high-risk status. High-risk status requires a corrective action plan. The grantee will be provided 30 days post review to develop a corrective action plan to address compliance issues. The grantee is strongly advised to work with the T&TA center in the development of a CAP. OILP will have 30 days from receipt of the CAP to review and approve the CAP. (See Content of a Corrective Action Plan)

Step 4: Implement Tier 2 Plan

For each Tier 2 category, the OILP project officer will implement activities based on the plan; however, each Tier 2 category will have some standard aspects as described below.

Risk Evaluation:

- Relevant documents will be reviewed carefully by the OILP project officer

Focused Review:

- OILP will conduct a review in specific areas of concern (desktop or onsite as appropriate)
- ACL fiscal unit will conduct fiscal review of previously submitted documents, as appropriate
- The OILP PO will prepare a recommendation for a Focused Review that will be reviewed by the Office of Independent Living Director, ACL Chief Grants Management Officer, and the OILP Director to determine next steps.

Step 5: Assessment and Resulting Tier 2 Actions

Implementation of the Tier 2 plan and grantee progress in addressing the issues will be assessed periodically.

Focused Review

After conducting the focused review, OILP will determine whether the grantee is assigned to the High Risk category. This determination will depend on severity of issues identified during the focused review. The grantee will be notified once a determination is made.

High Risk

For grantees that are responsive and make timely, necessary corrections to address the compliance issues, OILP and the ACL fiscal unit will remove the High Risk designation on the grant. The OILP project officer will write a memo detailing how the concerns were resolved and include a recommendation to remove the grantee from High Risk status.

For grantees that are not responsive, OILP and the ACL fiscal unit will restrict grantee access to federal funds. The OILP program officer will write a memo for the OILP Director and ACL Chief Grants Management Officer detailing the lack of progress and the severity of situation. Once a grantee's funds are restricted, the grantee will be a timeline to demonstrate progress before OILP takes additional action. If the problems are still not resolved at the end of the timeline period, OILP will move to terminate the federal award if no progress is shown after placement on High Risk status with funds restricted.

For High Risk:

- OILP will evaluate the CAP submitted by the grantee to determine whether it will be approved or denied.
- Once there is an approved CAP, the OILP project officer will work with the grantee to develop a TA plan within 30 days of approving the CAP.
- The OILP project officer will check in bi-monthly with an OILP triage team to review the grantee's progress and review next steps.

- OILP will notify the grantee quarterly whether progress is sufficient and if additional sanctions may happen. This notification will be provided in writing.
- There will be TA call at least quarterly with the grantee to discuss progress and identify barriers to progress.
- OILP will notify the TA providers and discuss areas for TA.

Tier 2 Resulting Actions

Risk Evaluation
- Issues are corrected by grantee, and grantee moved to standard review process
- Focused Review recommended, as appropriate

Focused Review
- Issues are corrected, and grantee moves back to the standard review process
- Grantee continues demonstrating high-risk activities
- Grantee moves to High Risk if little to no progress is demonstrated

High Risk Designation
- Issues are corrected by grantee, and grantee moved to standard review process
- If issues are not adequately addressed by grantee, OILP takes action to terminate award

Section 5: Tier 3 Comprehensive Review

Quick Overview: Steps of the Tier 3 Process

Step 1	OILP Planning, Preparation, and Notification
Step 2	Review Team Teleconference with Grantee
Step 3	Grantee Completes the Self-Evaluation Tool
Step 4	Grantee State of the CIL Webinar
Step 5	OILP Review of the Evaluation Tool

Step 6	OILP Completes CIL Compliance Review
Step 7	Tier 3 Review Team Preliminary Summary
Step 8	Review Team Teleconference with Grantee
Step 9	Review Team Development of the Tier 3 Report
Step 10	Grantee Response to the Tier 3 Report
Step 11	Technical Assistance
Step 12	Post-Tier 3 Review Monitoring

Tier 3: 12-Step Process

Tier 3 Comprehensive Review steps are generally carried out over specific periods in the federal fiscal year. A tier 3 review may occur via a desktop or onsite review   Common steps are described in more detail below.

Step 1: OILP Planning, Preparation, and Notification

Selecting CILs to Review

Staff from OILP may recommend CILs for review throughout the fiscal year. CILs most likely to be recommended and selected for review are those with:

- Concerns identified during the Tier 1 review;
- Identified significant program and/or fiscal deficiencies;
- Problems implementing federal requirements; and
- Significant consumer/stakeholder complaints.

In addition recommendations can be made based on:

- Time since last review;
- Random selection;
- Director's discretion; and
- Grantee request.

The number of CILs reviewed and the manner in which they will be reviewed (desktop or onsite) in a year depends in part on the availability of federal funds to cover review expenses e.g., onsite travel, reviewer accommodations, non-federal reviewer expenses. It also depends

on the availability of OILP staff to conduct the reviews. OILP attempts to conduct a review of every CIL approximately once every seven years.

OILP Staff Assignments and Preparations

Once CILs have been identified for the Tier 3 Comprehensive Review, OILP makes staff assignments for conducting the Tier 3 review. The Program Officer serves as the lead for the Tier 3 review. Several factors are taken into consideration when making staff assignments, including programmatic concerns, grant assignments, and workload. OILP may assign additional staff to the review team as co-leads or trainees.

The Tier 3 review lead engages in a variety of activities to prepare for and conduct the Tier 3 review. The Tier 3 review lead ensures that overall logistics are managed and communicates across the team and with the grantee. The Tier 3 review lead also has responsibility for the final analysis of the Tier 3 Review Tool; report writing; and any related follow up onsite visit activities.

Notification to Grantee

A formal notification of a Tier 3 Comprehensive Review is sent to each grantee in most cases. The confirmation letter describes the purpose of the review, suggests a time frame for an informational teleconference, provides the due dates for the document request and Tier 3 Self-Evaluation Tool, and reminds the grantee of the State of the CIL webinar. Copies of the notification are distributed to the following:

- CIL Executive Director
- State Independent Living Council
- Designated State Entity
- OILP Review team

ACL and the OILP has the authority and reserves the right to make unannounced site visits. In limited circumstances when the OILP has documented grantees exhibiting actions that would reasonably lead the OILP to believe a formal review notification would compromise the integrity of records, staff input, consumer information files, and/or to protect the federal interest, , an unannounced site visit will occur.

Tier 3 Team Members

The Tier 3 review may be conducted by the following team of federal staff and non-federal reviewers:

- OILP Project Officer
- ACL fiscal specialist
- Other federal staff as appropriate
- Non-federal reviewers

There may be instances when fewer or additional people participate on the team. For example, an OILP Director may participate in administering the COMP. There may be additional OILP and/or Regional Office staff who participate in the review as trainees or participants. Individuals with disabilities may request to bring a personal support person to an onsite visit. The personal support person is not an active participant in the review.

The OILP program officer manages and is the lead for the COMP Tier 3 Review Team. The ACL fiscal specialist works in conjunction with the program team. The fiscal specialist will work with the program team and the grantee to schedule the fiscal portion of a review.

Selection of Non-Federal Team Members
According to the Act, to the maximum extent practicable, at least one member of the onsite review team shall be an individual who is not a government employee and has experience in the operation of centers for independent living. Non-federal reviewers are not part of a desktop review team. Once a CIL is identified for an onsite review, OILP will identify and select eligible non-federal team members.

Some non-federal team members may be selected from a pool of individuals who have participated in a prior review. Other reviewers may be individuals who are newly trained in the monitoring process and participate as reviewers for the first time.

Using available information, OILP will maintain a list of eligible non-federal reviewers. Once an onsite review has been identified, non-federal reviewers who are approved to participate, will be contacted to determine their availability in participating in the scheduled review.

When all review members are confirmed, the OILP review lead develops a contact information sheet and provides copies to the grantee and team members.

Review Team Member Responsibilities
Each member of the review team has specific responsibilities.

The OILP program officer is responsible for the following:

- Determining the review team composition
- Coordinating logistics such as review scheduling, grantee and team meetings, and report writing
- Facilitating team meetings
- Making individual team member assignments
- Determining the agenda for respective program review
- Coordinating the initial conference call with the grantees and subsequent team calls
- Coordinating the webinar for the State of the CIL Overview
- Drafting the report following the review
- Arranging TA

- Monitoring progress following the review
- Maintaining confidentiality of all information shared during the process, including consumer information files.

The non-federal member of the team is assigned responsibility for:

- Functioning as an agent of the Federal Government with a monitoring and oversight responsibility
- Reviewing the Tier 2 Self-Evaluation Tool and related materials submitted by the grantee and providing input to the team
- Participating in discussions with team members about the review tools to identify areas of inquiry and providing input to the team
- Identifying recommendations for TA
- Providing expertise to the team on the CIL program and disability issues
- Participating in training, videoconferences, teleconferences, the onsite visit (where applicable), and report writing
- Sharing responsibilities for conducting interviews and providing input to the team
- Providing notes to the project officer for use in drafting report
- Maintaining confidentiality of all information shared during the process, including consumer information files

With these responsibilities comes a time commitment associated with the review. Non-federal reviewers must participate in annual webinar training, the entrance meeting video/teleconference, at least one team meeting to review grantee materials, at least one conference call with the grantee, and the onsite visit. In addition, reviewers must read the materials relevant to their specific assignment. Non-federal reviewers contribute to and comment on the draft report. Non-federal reviewers are compensated for time associated with review activities.

Standards of Conduct
Review team members have access to a great deal of sensitive information about the CIL program and its activities. *All information and materials received and reviewed are considered confidential.* Team members will only discuss information from the review with other team members. At no time during the review should members of the review team share ongoing review information with other grantees, members of the public, or representatives from membership associations.

Non-Federal Reviewer Training
OILP conducts training for all non-federal reviewers (NFR). The training is a desktop access training for up to one day (8hrs). The training agenda covers the major provisions of the Rehabilitation Act, as amended, the activities associated with each phase of the review, and

each element of the review including but not limited to, collaboration, compliance, accountability, fiscal management, technical assistance, and innovative practices.

Grantee Preparations

In addition to the work that OILP and the review team members do to prepare for the review, the grantee has an important role in planning and preparing for the review. Grantees have numerous responsibilities in preparing for the review, including:

- Working with review team members to help with logistics for all aspects of the review;
- Preparing a State of the CIL webinar; and
- Completing the Self-Evaluation Tool and providing other materials for the review, as requested.

A checklist is available to help grantees manage most aspects of review preparations.

Step 2: Review Team Teleconference with Grantee

Following the notification, the review lead contacts the CIL Executive Director to begin coordinating activities that will take place during the review. The Review Lead will schedule a conference call with the grantees and their staff to provide an overview of the review process and discuss logistical issues.

Step 3: Grantee Completes the Self-Evaluation Tool

The Tier 2 Self-Evaluation Tool contains prompts for the CIL and reviewers in two primary areas: 1) Standards and Assurances; and 2) Organization and Administration of the CIL. The prompts are designed to assess compliance with the Act, measure outcomes for the CIL program, and to ensure that the CIL is providing quality services through its federal funding.

The CIL should complete the Self-Evaluation Tool to the best of its ability and include BRIEF narrative information in the CIL SUPPORTING RESPONSES section as appropriate. CILs should be prepared for follow up discussion on each item with the Review Team. The CIL may think of the tool as a preliminary interview, and supply BRIEF information as appropriate in such a manner that an individual unfamiliar with the program can understand the CIL's response. The CIL's response may cite and refer to additional documentation, such as a policy manual. This makes it clear to the reviewer where information can be found as evidence of program compliance. Each response in this section should guide the review team through all the materials and provide a context for how the CIL program uses policies to achieve outcomes.

Any documents cited in the response should be clearly labeled and included in the CIL's submission of the review tool. The CIL Executive Director (ED) should coordinate with the Review Lead to ensure all submitted documents are in an accessible, secure, electronic format. Files in JPEG format will not be accepted.

Step 4: Grantee State of the CIL Webinar

It is helpful if the State of the CIL webinar occurs before the Tier 2 team members begin review of the Self-Evaluation Tool and related review documents. The entire review team should participate in this meeting. The grantee coordinates the webinar agenda providing information about the CIL's service area and CIL, such as:

- State political/legislative challenges
- Economics
- Geography
- Demographics (including cultural and unserved/underserved)
- Service delivery system
- Program emphasis and other information that will help the review team understand CIL-related issues during the review
- Implementation of core services
- State network collaborations
- CIL support of the SPIL
- Other pertinent issues/challenges

The webinar may also include information on youth, aging and other disability network collaboration, with a brief overview of the strategies that support collaboration and information on outcomes of collaborative efforts.

The webinar should last no more than 2 hours. The grantee should develop a draft agenda to share with the Tier 3 Review Lead for feedback prior to the webinar.

Step 5: OILP Review of the Self-Evaluation Tool

Once the CIL has submitted its completed Self-Evaluation Tool and supporting documents to the review team, each team member should review the materials on their own and prepare comments using the "Review Team Comments" sections of the tool. When reviewing the responses, team members should note if they need more information to answer the question posed in the prompt. They should also note if they think the response is adequate or needs more explanation.

The Review Lead will then schedule a meeting where the review team members discuss their feedback and comments on the CIL's responses. The Review Lead will then draft the final responses for the "Review Team Comments" section, based on the feedback of all team members. The comments should indicate whether the CIL's answers are satisfactory or if the team has concerns. Additionally, the comments should note if additional information is needed. It is helpful to begin drafting the responses while the team meets together. At this stage, the review team may identify additional documents that the team needs from the CIL before concluding the review.

Step 6: OILP Completes CIL Compliance Review

The review of a sampling of consumer information files to ensure that the CIL is in compliance with the Standards and Assurances is a required element of the Tier 3 Comprehensive Review. A review of documents may include but are not limited to:

- Consumers are eligible for services
- Services are consumer driven
- Services are timely and reasonable
- Data is stored in compliance with privacy and confidentiality requirements

OILP reviewers are authorized access to all CIL documents for purposes of monitoring system compliance with the Act (Section 704(m)(C) and 704 (m)(5)). OILP respects consumer confidentiality and thus does not require that identifying information such as name, address, and social security number be disclosed.

The CIL will provide to the Review Lead a complete list of consumers and status (including open and closed) for which Part C funds are/were used during the last fiscal year. File review will be limited to consumers funded by Part C funds because the review is narrowly focused on compliance with the requirements of Part C funds. There may be reasonable overlap in situations where a consumer's services are funded by more than one funding source. The review team may also review consumer information files of non-Part C funded consumers to verify consumer counts reported on the annual PPR. The CIL should make an effort to include consumers in a variety of living settings and disabilities and that also reflect the full range of services provided to consumers by the CIL. The Review Lead will select at least 10 percent and no more than 50 consumers at random for review.

The CIL and the Review Lead will agree upon the logistics for the consumer review, during which the CIL staff who are knowledgeable about the selected consumers will be available to participate as needed in the review to answer questions. At no time will the review team seek or have access to personal identifying information. The desktop and onsite review of consumers will be guided by the CIL Evaluation Tool.

After the review team has selected the files to review, the Executive Director should arrange for up to 3 consumers to be interviewed. Of the three consumers selected, one consumer can serve as an alternate in the event that another consumer becomes unavailable for the interview. Current or former consumers should be informed that OILP, as a federal funder, seeks to learn about the quality of the CIL's services and hear about the consumer's personal experience with the CIL. While guardians may be present during the interview OILP will speak to consumers directly. Consumers may be interviewed on site or through the use of technology that is accessible for the consumer.

Interviews are a vital part of the Tier 3 Comprehensive Review process and are important in verifying the accuracy of the written material provided by a grantee. Interviews allow the team to collect information on many topics including:

- Mission and purpose
- Planning priorities and goals
- Program evaluation and monitoring
- Outcomes and progress on goals
- Individual advocacy work
- Outreach
- Engagement with self-advocates
- Program administration
- Policies and procedures
- Staff hiring and supervision
- Training
- Recordkeeping and reporting

Review teams may interview the following people individually or in groups:

1. CIL Executive Director
2. CIL staff
3. CIL board members
4. Individuals with disabilities who were or are consumers of the CIL
5. Key stakeholders, i.e., representatives of the DSE, SILC, key disability and aging organizations in the state

Identifying People to Interview

The review team and the CIL Executive Director should discuss people to be interviewed. Interviews with staff will primarily be based on the areas the team will pursue during the review. The CIL should provide the OILP team lead with a list of 5 - 10 stakeholders to interview. The stakeholders can be a group and/or organization. At the very least, the list should include the following:

- State self-advocacy organization (if none, then local/regional self-advocacy group or a group of self-advocates
- State agency representative(s)
- Key disability groups with which the center has worked (e.g., state/local ADAPT, Mayor's Council on Disabilities, ARC, etc.)
- Key State collaborators

OILP understands that those being interviewed may not have a positive endorsement of the CIL. The importance is placed on the individual having an understanding of the individual or system issues the CIL is working on or has worked on in the past.

Interviews with Staff and Board Members

The review team will seek information from the staff and Board to understand how CIL policies are put into practice. Team members will also ask for more information about areas of concern. Staff members and board members can be interviewed individually or in groups depending on the staff or review team's preference, and interviewee availability.

Interviews with Consumers

As discussed above, the review team will interview consumers of the CIL. Consumer interviews are an important way of measuring the quality of CIL services. The purpose of the consumer interview is to understand how the CIL assists people with disabilities. The interview is brief and should last about a half hour. The goal of the interview is to understand how the individual interacted with the CIL, the quality and accessibility of the services, and whether the CIL was able to provide the assistance as needed/desired and as appropriate.

Interviews with Stakeholders

The purpose of the stakeholder and community outreach review protocol is to assist the team in evaluating the CIL leadership in the state/territory, their systems change efforts, and their general outreach, including presence throughout the service area. The CIL should give a list or no less than 5 stakeholders to be interviewed. The Review Team Lead will choose no more than 3 stakeholders to be interviewed. The Executive Director will arrange for the stakeholders to be interviewed after they are chosen by the Review Team Lead. We understand that some stakeholders may not know about all of the CIL's work; however, all stakeholders interviewed should be allowed the opportunity to answer the interview questions and be assured that it is not a problem if they cannot answer all the questions. In addition, because stakeholders may not be familiar with the acronym "CIL," the team should replace CIL in the interview protocol with the actual name of the CIL.

Step 7: Tier 3 Review Team Preliminary Summary

Based on the review team's discussions, the Review Lead will finalize the "Review Team Comments" section of the review tool. The Review Lead will then prepare a 2- to 3-page summary of the review team's findings at this stage that: 1) identifies which areas are believed to be satisfactory; 2) which areas need more information; and 3) which areas raise concerns for the review team, including preliminary findings.

The Review Lead should provide all team members with a draft of the summary and review tool for their approval before providing to OILP leadership for review. After the OILP leadership review and edit process is complete, the Review Lead will then submit the summary, the Tier 2 tool with the team's comments and requests for any additional documents to the CIL Executive Director.

Step 8: Review Team Teleconference with Grantee

The Review Team and grantee will participate in a teleconference to discuss the team's review of the Self-Evaluation Tool and the Summary of Findings. The grantee will have the option of including the training and TA center on the call. The call will review the corrective action plan process, if applicable, or any other next steps for the review team, grantee, or TA center. This teleconference is also an opportunity to discuss a follow-up onsite visit to confirm future compliance.

Facilities
Grantees should prepare for the review and subsequent onsite visit (as applicable) by making certain adequate facilities are available for the review activities. If the grantee does not have adequate meeting space, they should inform OILP so that alternative arrangements can be made that satisfy all needs.

Accessibility
The grantees must ensure that all aspects of the review are accessible to individuals with disabilities. This includes the method or facility used for interviews and all other meetings and events that occur in public or at the grantee's location. Any instances in which there are barriers preventing the full participation of individuals with disabilities in any review event will be noted in the final report.

Preparing Staff
The CIL Executive Director should invite staff, as appropriate, to participate in the initial grantee/OILP conference call so that they can be informed of the purpose of the visit, their role, and what they can expect from members of the review team. The Executive Director should follow up with staff and ensure they know the time and place they are scheduled to appear or participate in a meeting or interview.

Conducting Interviews
Before beginning the interviews, the review Lead discusses the interview process with team members and alerts them to any specific issues that require attention. The Review Team determines who will lead the interview process. Each interview should be time-limited to accommodate the schedule of review activities. Review Team members should keep the interview moving smoothly from topic to topic so that vital questions are addressed before the interview ends.

Review Team members should put interviewees at ease by introducing themselves and providing information about the purpose of the review. Interviewees should be advised that review findings are based only in part on interviews and that the Federal Government and the Review Team will protect the confidentiality of those who are interviewed.

Note-taking

In order to summarize what is learned during a review and to record sufficient detail to support their findings and recommendations, Review Team members should take thorough notes. Resources are available to Review Team members that are intended to be helpful for recording impressions of their meetings, interviews, and document reviews. To ensure accuracy, notes should be taken when information is fresh in Review Team members' minds.

Tier 3 Comprehensive Review Team Meetings

The Tier 2 review includes team meetings. Tier 3 review team meetings are held, as needed, to discuss interviews, presentations, strengths, weaknesses, TA needs, and recommendations. Each team member should participate in this process so that all perspectives are included. If a Tier 3 comprehensive onsite review is being conducted, teams must meet the last afternoon of the onsite review timetable to develop a brief overview of the findings from the Tier 3 review that will be shared with the grantee at the Exit De-briefing.

Tier 3 Comprehensive Onsite Exit De-briefing (where applicable)

The onsite review timetable includes an Exit De-Briefing. At this de-briefing, the Tier 3 review team presents to the OILP grantee a brief overview of major findings, including strengths, area of satisfactory performance, and areas of concern. In this way, the grantees are alerted to what to expect in the final Tier 3 report.

PLEASE NOTE: Findings are based on point-in-time information and document reviews. This means that offers of proof to resolve findings during the Exit De-Briefing will not be accepted.

Step 9: Review Team Development of the Tier 3 Report

After each Tier 3 Comprehensive Review, the OILP program lead prepares a written report covering all aspects of the review.

Content of the Report

The report outlines the purpose of the review and describes the procedures followed, findings from the Tier 3 review and recommendations. The recommendations section will include the following information:

- Findings related to program and fiscal compliance;
- Recommendations for improving compliance and outcomes as appropriate;
- Recommendations for TA, which can be a range of focused TA to address specific issues to an organizational review of the program; and
- Whether the team recommends the program for a follow-up onsite visit to verify subsequent compliance.

Format of the Report

The format is the following:

> Section I: Summary of Findings
> Section II: Overview of the Compliance and Outcome Monitoring Protocol
> Section III: Tier 3 Process
> Section IV: Tier 3 Findings
> > Strengths
> > Satisfactory Program Aspects
> > Compliance Issues
> > Other Concerns
> Section V: Recommendations
> Tab 1: Copy of the State of the CIL power point
> Tab 2: Copy of Desk Review Timetable
> Tab 3: Copy of Completed Tier 3 Review Tool

Process and Timeframes for Developing the Final Report

Developing and finalizing the final report should be accomplished within 60 days after the review. Some reports may require more time to finalize pending review of compliance issues. The table below outlines the general times for completing the final report; however, it is understood that other work priorities may affect the completion of the report.

Table: Timeline for Issuing Report

TIMELINE	OILP Review Team Lead	Review team INCLUDING Non-federal Team Member(s)	OILP Director
7 days post review	N/A	Submit review summary and notes to the Review Lead	N/A
21 days post review	Complete draft report and circulate to review team	N/A	N/A
28 days post review	N/A	Complete review of draft report and provide feedback to Review Lead	Complete review of draft report and provide feedback to Review Lead
35 days post review	Incorporate revisions and finalize report	N/A	N/A

TIMELINE	OILP Review Team Lead	Review team INCLUDING Non-federal Team Member(s)	OILP Director
45 days post review	Submit full report to OILP Director for de-briefing and sign off	N/A	OILP Director reviews report and participates in de-briefing
60 days post review	Finalize report, prepare cover letter	N/A	OILP Director issues e-copy of report to grantee on behalf of the ACL Administrator

Report Distribution

The OILP Director issues the final report. The final report is distributed to the following:

- CIL Executive Director
- Review Team Members
- Training and Technical Assistance Center
- Designated State Entity

Step 10: Grantee Response to the Tier 3 Report

The Tier 3 Comprehensive Review report will identify strengths, satisfactory program aspects, compliance issues, and recommendations. The report will include compliance issues if the team has determined that the grantee has not complied with the requirements in the Act or other federal program or fiscal requirements.

The CIL submits a response to the Review Lead addressing the findings in the report and any noted factual errors. The response should include a corrective action plan if there were any findings, how recommendations listed in the report will be addressed, and any plans for TA (with timelines). If the report includes recommendations on collaboration, OILP recommends the network develop a joint action plan together.

The response should be submitted to the review lead within 30 days of receipt of the Tier 3 report.

Content of the Corrective Action Plan (CAP)

If a program is found to be out of compliance with the Act or Uniform Guidance [HHS regulations at 45 CFR Part 75], they must submit an approvable corrective action plan (CAP) to OILP within 60 days of receiving the final report. The T&TA Center should be utilized in the

development of corrective action plans and in developing the plan for TA. The CAP must include the following:

- Each factor associated with compliance where improvement is needed
- A plan or strategy to bring each factor into compliance, including action steps, timeframes for action steps and responsible staff
- Measurable benchmarks of progress that indicate when compliance is achieved
- Description of how progress on the plan will be evaluated and reported to OILP

If the amount of progress to be achieved through the CAP appears to be insufficient, OILP will provide feedback to the grantee to identify steps that sufficiently move the grantee towards the expected type or level of progress. When determining the amount of progress to be achieved, consideration should be given to current or prior efforts to improve performance.

OILP will review the corrective action plan and notify the grantee in writing of approval or disapproval within 30 days. If OILP determines that revisions to the CAP are needed, the grantee must develop and submit the revisions to OILP within 30 calendar days of receiving written notice that the action plan was not approved.

Step 11: Technical Assistance

Once the report is issued to the grantee, the OILP Team lead provides a copy of the report to the T&TA center and discusses recommendations for TA. Following this discussion, the T&TA center follows up with the grantee to plan for TA. This plan should be incorporated into the response to the Tier 3 Comprehensive Review report (see Step 12). The T&TA center will also provide a report back to OILP on the TA process and outcomes.

Step 12: Post-Tier 3 Review Monitoring

After the close of the Tier 3 review, the OILP project officer will continue monitoring the program. Post-Tier 3 monitoring will include monitoring of the Corrective Action Plan as appropriate, review of T&TA center reports on the TA provided to the program, progress in areas of non-compliance, and review of grantee program performance reports to assess whether recommendations are being addressed by the grantee.

Monitoring of Timeframes for Implementing the Corrective Action Plan
One aspect of the CAP the OILP project officer will monitor is the timeframe for addressing the compliance issues. It is expected that the time period for completing the CAP will not exceed 1 year from the point when OILP approves the CAP. Not all components of the plan will require a full year to implement, and this timeframe is provided as an outside limit for those elements of the corrective action plan requiring more extensive planning and action steps.

Evaluating the Implementation of the Corrective Action Plan

The OILP program officer will monitor and evaluate the grantee's compliance with the terms and conditions of its approved CAP, including the achievement of the benchmarks included in the plan.

The grantee must provide quarterly written progress reports to OILP staff. Grantees may be required to submit reports more frequently depending on the nature of the compliance issues. The progress reports must include sufficient detail to describe the progress made during the reporting period and must indicate whether specific timeframes in the CAP are not being met.

Other Post-Tier 3 Monitoring

In cases where there were no compliance issues, but recommendations were made to the program, OILP will still want to understand what the program did after the onsite visit and where changes, if any, were made. OILP will use the PPR for collecting information about any actions carried out by the CIL after a review was completed.

Fiscal Review

The fiscal review will be conducted by a fiscal specialist from the ACL fiscal unit.

ACL's fiscal review activities will focus on the CIL's internal controls and supporting documentation consistent with HHS regulations and Uniform Guidance for ensuring that Part C funds expenditures are allowable, allocable, and reasonable in accordance with the federal cost principles. The review will also address the CIL's compliance with federal requirements in the areas of procurement, property, budgeting, program income, indirect costs, etc.

As part of its fiscal grants management review, the fiscal specialist will evaluate the CIL's written policies and procedures and the extent to which they are being implemented. The fiscal specialist will also review funding sources and amounts, expenditure forms, receipts and vouchers, drawdowns, accounting ledgers, other relevant documentation and interviews with staff and board members. CILs are encouraged to review the fiscal tool for additional guidance.

Section 6: Onsite Monitoring Reviews

Purpose of the Onsite Visit

Sections 706(c) and 722 of the Rehabilitation Act of 1973, as amended (the Act) mandate that the Administration for Community Living (ACL) annually conduct onsite compliance reviews of at least 15 percent of the centers for independent living (CILs) that receive funds under Section 722 of the Rehabilitation Act. The purpose of COMP is to establish uniform procedures and a format for the conduct of reviews of CILs.

Onsite visits enable OILP to review the CIL. The information obtained during the onsite visits helps OILP:

- Verify grantee compliance
- Gauge overall effectiveness and consumer satisfaction
- Assess grantee fiscal management
- Identify recommendations for TA
- Promote quality
- Gather information that answers the gaps and issues identified during the Tier 2 comprehensive desk review
- Document the impact grantee's efforts have on people
- Further explore potential compliance and other issues not identified or fully understood prior to or during the desk review.
- Validate outcomes/completion of the corrective action plan

The onsite visit gives OILP the opportunity to gather information directly from CILs as well as from their partners and the public, where appropriate. Meetings, interviews, document reviews, presentations, and observations are the main components of the information-gathering process. Presentations about grantee activities and accomplishments, along with first-hand observation of grantee progress, provide significant insight about the compliance and outcomes of the grantee.

Onsite Monitoring Reviews

Onsite monitoring reviews can occur as part of a Tier 2 Focused Review, Tier 3 Comprehensive Review, or as post review follow-up to assess whether compliance has been achieved. Onsite monitoring reviews will follow desktop review processes with the following exceptions:

1. Agenda development
2. Interviews

Agenda Development

The OILP team will develop the onsite visit agenda in partnership with the grantee.

The agenda should include all activities (e.g., interviews, document reviews, case reviews, peer-to-peer discussions, team meetings) needed to make a determination about grantee performance and fulfill all the expectations of the onsite review. Timeframes for each activity should be realistic so all that is needed is accomplished.

Section 7: Continuous COMP Improvement

Annual Assessment of COMP to Ensure Quality

Central to oversight and monitoring is promoting _**quality**_. A system to promote quality must be based on quality. Therefore, COMP has a process for continuous improvement to ensure that OILP is using the most effective and efficient system for monitoring its grantees. Key to this is ensuring that the COMP review tools are asking the right questions and incorporating the right elements. The COMP continuous improvement process will aim to assess whether this is being achieved and will allow for adjustments to ensure we have a high quality Compliance and Outcome Monitoring Protocol.

Annual Assessment Process

Each year, OILP will conduct an analysis of COMP by collecting information from OILP staff, review team members, TA providers, and grantees to discuss the process and tools and to identify areas needing improvement.

In analyzing the results from the review, OILP will compare results with those from previous years in terms of process and tools. This will help OILP assess the reliability and validity of COMP process and tools.

The annual assessment will also examine how resources are being utilized including use of time and other costs associated with COMP.

OILP will also keep current on how other federal agencies are conducting their monitoring to assess whether there are other approaches that would help to improve COMP.

Annual Report

The OILP Director will provide the Administrator of the Administration for Community Living an annual report that includes:

- The extent to which CILs receiving funds under Part C have complied with standards and assurances, identifying individual CILs contained in the information
- Results of onsite compliance reviews, identifying individual CILs reviewed

The OILP Director will assist in ensuring monitoring review reports are timely completed to ensure availability of data for the annual CIL report.

COMP Panel Discussion

OILP will annually convene a panel of experts to discuss recommendations for changes to the COMP. The panel will be comprised of a variety of experts that may include:

- OILP staff
- ACL staff
- OILP grantees
- TA providers
- National associations

Other stakeholders or experts, such as evaluation experts, may be invited to participate on the COMP panel.

Final Revisions

OILP will take the information from the panel to make final revisions to COMP. This may include revisions to the tools and/or process based on findings from the annual assessment and COMP panel discussions.

Re-launch

After making the adaptations to COMP, OILP will re-launch COMP with the next period of reviews.