Process for Conducting On-site Compliance Reviews

The following process has been agreed to by the Massachusetts Statewide Independent Living Council (MASILC) and, Massachusetts Rehabilitation Commission and the Massachusetts Commission for the Blind (the DSUs) as equal partners in the development, monitoring and evaluation of the State Plan for Independent Living.

- Two Independent Living Centers (ILCs) will be reviewed per federal fiscal year (FFY)
- The MASILC SPIL committee will determine which two ILCs shall be reviewed.
- MRC sends the ILC a copy of the compliance review tool electronically at least 30 days prior to the dates of review negotiated with Executive Director (ED).
- MRC sends ILC ED a letter, hard copy and electronic, detailing required preparation for on-site review at least 30 days prior to review. MRC is satisfied with reviewing this material onsite during the actual review process.

MRC identifies the members on the review team to the ED, in writing, at least 30 days prior to the review. Should the ED determine that there is a conflict of interest with any member of the review team, he/she must notify MRC within three (3) days of receipt of the letter to disclose potential conflict or to request a change in team composition.

Members of Review Team

a) Three to four (3-4) staff from MRC Independent Living (IL) Department.

b) Possibly MRC Assistant Commissioner for Community Living

c) One staff from MCB

d) SILC designee, as observer

e) One (1) outside reviewer who is knowledgeable about the operation of an ILC. MRC must locate this outside reviewer who is then paid by the SILC.

According to the Rehab Act, Each team that conducts onsite compliance review of centers for independent living shall include at least one person who is not an employee of the designated state agency, who has experience in the operation of centers for independent living, and who is jointly selected by the director of the designated state unit and the chairperson of or other individual designated by the Council acting on behalf of and at the direction of the Council.

Members of ILC Team

a) ED - about ¾ of first day for the initial interview and review of the Standards and Indicators with the review team and for about one to two hours either
late morning or early afternoon on 3rd day of the review for an exit interview/initial presentation by the review team (TBD as review progresses).

b) Three (3) staff (varying job titles and levels of experience)

c) Three (3) Board

d) Three (3) consumers scheduled by the ILC in advance for interviews in person (preferably) or via phone.

e) Staff, board members, and consumers may invite someone else to be present as well during the interview process.

f) Center should plan on having one (1) staff person available to serve as liaison to Review Team to gather additional documents or support materials if necessary.

**On-site Review Process and Procedures**

On-site review takes 2 ½ -3 days to complete. Refer to list of needed documents in compliance review tool also known as Onsite Review Guide (ORG).

a. Team member assignments made approximately one (1) week prior to review (after ED has informed team leader of interview schedule) and team leader provides any needed orientation to team via email and/or phone.

b. Team will be provided with the compliance review tool and ILC’s 704 report for the year under review prior to the site review.

CSR’s and IDMS need to be available to reviewers while on site, approximately 10% or 30 (whichever is less) CSR’s will be reviewed from FY for which review is being conducted.

Private interview room and private work space and place to secure papers overnight made available.

a) Team leader brings all necessary forms (interview questionnaires, CSR review sheets, compliance review tool) to review.

b) Team leader assigns specific sections of compliance review tool to each team member (except SILC Observer) as well as board, staff and consumer interviews.

c) Entire team begins with a tour of facility by ED and interview with ED who verbally reviews each item in the compliance review tool indicating whether the ILC is in compliance or not and where the team can find its verification.
d) Materials gathered in preparation for site review are reviewed according to team member assignments as are sample of CSRs, individual consumer IDMS records, community advocacy information in IDMS and IDMS reports.

e) Team meets upon completion of all assignments (usually sometime during morning of 3rd day) to report findings and synthesize them into a brief oral report for ED.

f) Debriefing held with ED to summarize findings.

Written Report

a) Each team member submits a report to the team leader: their sections of compliance review tool form completed, narrative, CSR review sheets and/or interview questionnaires.

b) Team leader synthesizes all reports and notes from on-site review in order to fill out compliance review tool and write a narrative report indicating corrective actions required (where compliance not met) and recommendations where possible changes or improvements were noted by review team). ILC’s strengths and exemplary practices also noted.

c) Report is to be completed as close to 30 working days after site review as possible.

d) Report reviewed by Director of ILC.

e) Draft report distributed to review team and to ED for review. Notification is sent to SILC that draft report has been completed and sent to ILC.

f) Team leader will send a notification that the initial draft report is completed and has been sent to ILC, to the SILC Chair, SILC SPIL Committee Chair, and SILC Coordinator.

g) ED responds to report as close to 30 working days as possible indicating corrections, disagreements, or requested changes if necessary.

h) Team Leader makes changes as necessary and resubmits to ED and Board Chair as close to 30 working days as possible as final report. Final report also includes suggestions of sources for technical assistance if needed.

i) The Team Leader sends a copy of the final report at the same time as (g) above to the SILC Chair, SILC SPIL Committee and SILC Coordinator.

j) The final report will be shared with the SILC SPIL committee for review/identification of developing trends and training issues to be included in the annual Part I 704 report.
k) ED submits corrective action plan if required, to MRC with time frames for completion of actions(s).
   1.) MRC staff make follow up site visit at end of time frame for CAP to ascertain whether or not all CAP items successfully completed.

   2.) Letter sent to ILC indicating results of this visit. If all CAP items completed, review process is complete. If not, changes to CAP, another follow up visit, etc. are needed.