



SUBJECT	Program Monitoring
Policy #:	30-QA-03
Code/Rule Reference:	ORC 3304.16; 34 CFR §361.5(2)(i)
Date:	November 30, 2012
Approved:	Kevin L. Miller, Executive Director
Origin:	Division of Performance and Innovation – Program Integrity & Evaluation
Supersedes:	N/A
History:	N/A
Review date:	November 30, 2013

I. AUTHORITY

This policy is issued in compliance with Ohio Revised Code §3304.16 which establishes the power and authority of the Ohio Rehabilitation Services Commission (RSC) and its executive director to develop all necessary rules and policy in furtherance of its statutory duties.

II. PURPOSE

The purpose of this policy is to provide guidelines about monitoring Vocational Rehabilitation (VR) programs in accordance with the Rehabilitation Act, federal law, state law, and agency policies and procedures.

This policy provides guidance regarding internal expectations for ensuring and monitoring VR programs by Program Integrity and Evaluation (PIE) staff and Vocational Rehabilitation Program Specialists (RPS). The reviews assist in monitoring implementation of the VR program by evaluating agency staff, planning processes, VR services, and employment outcomes.

Additionally, findings from the program monitoring process are intended to assist in evaluating, maintaining, and improving quality VR services with programmatic service providers as well as to identify statewide patterns and trends which will help determine the VR program's concentration on areas of high performance, areas of discussion, and areas of improvement for planning and training purposes.

III. APPLICABILITY

This policy applies to all Program Integrity and Evaluation (PIE) staff, VR staff and Vocational Rehabilitation Public and Private Partners (VRP3) staff.

IV. DEFINITIONS

Quality Assurance System Application: the electronic system that stores and manages information related to case reviews, consumer surveys, and program monitoring.

V. POLICY

It is the policy of RSC to implement a process to assess VR programs to ensure high quality service provision to consumers; attainment of contract deliverables; and compliance with federal and state laws and agency policies.

VI. PROCEDURES

A. Program Monitoring

The Division of Performance and Innovation (DPI), PIE staff, and VR staff will monitor programs using the following methods:

1. Program Monitoring Tools

The following tools are to be used to evaluate programs and to provide guidance as to how programs are consistently measured.

- a. Program Monitoring Review Form (30-QA-03.A) is to be completed electronically and saved into the QA web-based application.
- b. Program Monitoring Review Form Guide (30-QA-03.B) is to be used as a reference guide when completing the "Program Monitoring Review Form".
- c. RSA Monitoring and Technical Assistance Guide - a guide through which RSA will assess the performance of VR agencies in the operation of the program and compliance with pertinent federal programmatic and fiscal requirements. This document is to be used as a reference when monitoring VR programs and can be found at www.rsa.ed.gov.

2. VR/VRP3 Rehabilitation Program Specialists Program Monitoring Reviews

- a. VR/VRP3 RPS staff shall complete the "Program Monitoring Review Form" (30-QA-03.A) for each contract for which he/she is responsible based upon if the contractor is determined as a high, medium or low risk. Initially the risk levels will be determined by the Program Manager based upon the contractors' compliance in submitting acceptable quarterly reports, review of acceptable program deliverables, review of acceptable budgetary status, current case review results, consumer satisfaction ratings, and whether or not the contract is a new contract.
- b. All contracts that are within the first year of start-up should be evaluated at least twice during the initial year with the initial review being conducted within the fourth through sixth month of start-up, and the second review being conducted

approximately six months thereafter. Those contracts determined as medium risk are to be monitored on at least an annual basis, while those considered a low risk will be monitored at least every other year.

- c. This review will involve requesting specific information from the RSC Liaison Counselor who works directly with the VRP3 staff as well as documentation from the Program Administrator of the contract service provider.
 - d. Upon completion of the Program Monitoring Form, an email will be sent to the Program Administrator of the contract communicating the evaluation results. The contract provider will then have the opportunity to provide clearly-defined written documentation supporting any finding(s) in question. RPS staff will be able to edit the form based on this feedback.
 - e. Once RPS staff have made desired changes to the form, an email will be sent to PIE staff who will examine the program monitoring review results entered into the QA system application, enter any additional observations/comments, and sign off on the review. The form will then be sent back to RPS staff for finalization.
 - f. When the monitoring process identifies areas of high risk, corrective action needs will be documented and followed up on during the next review, or more expediently depending on the issue. Such circumstances could result in monitoring above what is defined above based on the seriousness of the finding.
3. PIE Staff Program Monitoring
- a. Technical Assistance and Training
 - i. PIE staff will assist VRP3 RPS staff and the Program Administrator of the contract service program in completing the "Program Monitoring Review Form" by providing technical assistance as needed. Specifically, PIE staff will provide examples of documentation and other measurements that can be used to evaluate the performance indicators in each area of the review form.
 - ii. PIE staff will be responsible for developing and updating the "Program Monitoring Review Form" and the "Program Monitoring Review Form Guide" as needed.
 - iii. When monitoring reveals quality and/or compliance related issues, PIE staff will develop and provide training programs as indicated.
 - b. Program Evaluation
 - i. Aggregate program evaluation and assessment of individual contract performance data will be analyzed by PIE staff each quarter and a summary provided to program staff which shall be utilized in making programmatic decisions.
4. Continuous Program Improvement Activities
- a. PIE staff will provide updates to VR Managers and Supervisors on an ongoing basis to include feedback from program evaluation efforts. These updates may

include, but are not limited to, analysis and summaries of current findings and reports, and technical assistance and/or direct consultation for quality and compliance subjects.

- b. VRP3 staff will hold regular mentoring meetings with contract service providers to offer instruction and guidance, which in turn will be the basis of technical assistance and training activities throughout the program review process.

These meetings will be an opportunity for VRP3 RPS staff and contractors to work together on the "Program Monitoring Review Form". The regional representative/VR supervisor of the contract should bring documentation needed to fill out the form and come prepared to provide feedback and discuss program progress and issues. VRP3 RPS staff will bring documentation and ask questions needed to complete the form while reviewing the program's progress, following up on corrective action items, and discussing any pending issues.

B. Administrative Review and Resolution Process

1. If a contract service provider disagrees with the results of the program monitoring review completed by the RPS, he/she shall contact the RPS within ten business (10) days of the completion of the review and provide supporting written documentation contrary to the findings.
2. The RPS shall then discuss the situation with his/her supervisor to determine if the results of the review will be revised. The supervisor shall contact the contract service provider to discuss the issue in further detail prior to making a decision.
3. If there is still disagreement related to the results, the contract service provider must complete the "Request for Administrative Review" (30-QA-01.C) form within ten business (10) days of the written request and send it to the attention of the RSC Supervisor.
4. The RSC Supervisor shall review the request and rescind or revise the results if the documentation warrants such action.
5. If the RSC Supervisor does not rescind or revise the results, he/she shall convene a panel including a representative from the following areas: contract service provider, legal counsel, VR Administration or designee, PIE, and RPS.
 - a. The panel shall meet so each member may state his/her opinion and the rationale for the opinion.
 - b. If all panel members are in agreement, no further discussion takes place. However, if there is disagreement, the panel should discuss the issues amongst themselves and then vote as to what the decision should be. The vote does not have to be a secret ballot, but should be kept confidential. The majority rules when the result of the vote is not unanimous.
 - c. After a decision has been reached, the VR Administrator (or designee) shall prepare a written summary of the decision within ten (10) working days and

forward to the members of the panel for review to ensure the written decision is in accordance with what the panel had decided.

- d. This entire process shall be completed so the final decision can be responded to in writing within thirty (30) calendar days from the date of receipt of the "Request for Administrative Review".

FORMS:

30-QA-03.A – Program Monitoring Review Form

30-QA-03.B - Program Monitoring Review Form Guide

REVIEW

It is the responsibility of the Deputy Director, or designee, to annually review this policy, on or before, the date listed in the header and if applicable, make any necessary revisions. The Deputy Director or designee shall document the annual review as required in RSC Policy 10-ADM-01 "Policy and Procedure Development, Review, Dissemination and Acknowledgement".