**Section 530.APPENDIX A Standards Survey for Community Rehabilitation Programs**

**STANDARDS SURVEY FOR COMMUNITY REHABILITATION PROGRAMS (CRP)**

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| CRP Name: |  | Date |  |
| Address: |  | Phone |  |
| CRP Contact |  | Email |  |
| Person: |  |  |  |
| DHS-DRS Reviewer: |  | Review Date |  |

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| **Corporate Status:**(Sole proprietor, LLC, Corporation, etc.) |  |
| **Requested Contract Type:**(Milestone, customized employment, etc.) |  |
| **Anticipated Number to be Served:** |  |

**Directions:** Initial or check reviewer box whenever the applicant does **NOT** meet the stated criteria.

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| **Reviewer** | **Applicable Standards** |
|  | Applicant has been in operation for at least one year |
|  | Applicant has not previously held a DHS-DRS placement contract |
|  | CRP agrees to meet DHS Contract Administration requirements |
|  | CRP agrees to meet Non-Discrimination Compliance Requirements(89 Ill. Adm. Code 525.10) |
|  | CRP agrees to meet Fiscal Requirements/Management (89 Ill. Adm. Code 509.30) |
|  | CRP agrees to meet On-Site Fiscal/Administrative Reviews (89 Ill. Adm. Code 509.70) |
|  | CRP agrees to meet Administrative Requirements(89 Ill. Adm. Code 509.80) |
|  | CRP agrees to meet Life Safety Standards and Requirements(89 Ill. Adm. Code 509.90) |
|  | CRPs earning more than $100,000 (cumulative) or more from DHS-DRS contracts, agrees to become accredited by a national accrediting organization, pursuant to 89 ILCS 530.5(b), by the expiration of interim approval (three years from date of initial contract) |

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| RECOMMENDATIONS (COMMENTS): |
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**PROGRAM STANDARDS**

**Directions:** Initial or check reviewer box whenever the applicant does **NOT** meet the stated criteria.

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| **1. ORGANIZATION AND ADMINISTRATION** |
| **Reviewer** | **Applicable Standards** |
|  | **A. Mission Statement** |
|  | [INSERT STATEMENT HERE] |
|  | **B. Governing Body** |
|  | 1. The governing body's responsibility for establishing the CRP's mission, policies, and necessary financial support must be in writing. |
|  | 2. The governing body shall employ a full-time Director and a designee responsible for the management of the CRP. |
|  | 3. Documentation of regularly scheduled meetings which include leadership and staff representation. |
|  | 4. The governing body shall review and approve the CRP budget annually, including an annual independent audit. |
|  | 5. The governing body shall review income and expense reports at least quarterly. |
|  | 6. The CRP must have insurance to protect assets and to ensure compensation for staff, individuals with disabilities, volunteers, and the public, in the event such compensation would be required for occurrences for which the CRP is liable. The Insurance documentation must be reviewed and submitted to DHS annually. |
|  | **C. Administration** |
|  | 1. Annual evaluations of all program and services including: |
|  | a. review of the quality and appropriateness of the services offered |
|  | b. review of the effectiveness of services provided, including outcomes |
|  | c. customer satisfaction |
|  | d. review of employment outcomes achieved |
|  | 2. CRP staff shall receive in-service training annually. |
|  | 3. The CRP shall provide adequate program supervision and personnel to carry out the program of services. |
|  | 4. The CRP shall have public information materials that identify: |
|  | a. the programs and services available; |
|  | b. the population to be served; |
|  | c. how programs and services can be obtained; and |
|  | d. its non-discrimination policy. |
|  | **D. Federal and State Regulations** |
|  | 1. The CRP shall offer programs and services that are accessible to persons with disabilities in accordance with Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794), the Americans with Disabilities Act, and the Illinois Accessibility Code (71 Ill. Adm. Code 400). |
|  | 2. The CRP shall engage in an Affirmative Action Program that provides documentation of its non-discrimination policy and staff characteristics as required by Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794). |
|  | 3. The CRP shall show evidence of compliance with both federal and State Department of Labor rules and regulations governing wage reimbursement and the Workers' Compensation Act [820 ILCS 305]. |
|  | 4. The CRP shall comply with the Department of Human Services rules regarding Fiscal/Administrative Recordkeeping and Requirements (89 Ill. Adm. Code 509). |

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| **ORGANIZATION AND ADMINISTRATION RECOMMENDATIONS (COMMENTS):** |
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| **2. PROGRAMS AND SERVICES** |
| **Reviewer** | **A. Applicable Standards** |
|  | 1. Description of services offered |
|  | 2. Information provided on evaluations, trainings, and placements provided to individuals with disabilities. |
|  | 3. Requirements of all CRPs: |
|  | a. Maintain confidential case files made available only to authorized personnel. |
|  | b. Designated staff responsible for administrative decision making. |
|  | c. Persons on waiting lists shall be contacted monthly, apprised of their status, and given sufficient information to decide whether to remain on the waiting list or seek services elsewhere. |
|  | d. Clearly defined entrance and exit criteria for each service provided. |
|  | e. Individuals referred for services shall be notified in writing of their acceptance or nonacceptance into the program. |
|  | f. Individuals will be informed of rights and remedies, including the right to appeal an agency decision. |
|  | **B. 89 Ill. Adm. Code 530.130** |
|  | 1. Applicant provides at least one employment service: job placement, supported employment, customized employment, services and training, and/or job retention. |
|  | 2. Applicant holds regular and appropriate staffings to allow for review and discussion of the individual's progress towards achieving their employment goal and objectives. |
|  | 3. Participants are given the opportunity to be present at each staffing and participate in the development of the service plan through informed choice, commiserate with 89 Ill. Adm. Code 572 and 89 Ill. Adm. Code 590.40. |
|  | 4. Applicant is able to provide reports to demonstrate customers continued stability in employment pursuant to 89 Ill. Adm. Code 595.40. |

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| **PROGRAM AND SERVICES RECOMMENDATIONS (COMMENTS):** |
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| **3. SAFETY** |
| **Reviewer** | **A. Applicable Standards** |
|  | 1. Applicant meets standards as identified in 89 Ill. Adm. Code 509.90:Life Safety Standards and Requirements. |
|  | 2. Applicant has documentation of an accessibility report provided by a certified third party. |
|  | 3. All services are provided in a safe environment. |
|  | 4. Documented safety and emergency plan is updated annually. |
|  | 5. Independent, comprehensive safety reviews are conducted at least every two years by a qualified safety specialist and reports submitted to DHS-DRS. |
|  | 6. Staff will be certified in first aid, CPR, and AED and present in the facility where customers are present. |

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| **SAFETY RECOMMENDATIONS (COMMENTS):** |
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| **4. CONTRACTS** |
| **Reviewer** | **A. Applicable Standards** |
|  | 1. Applicant will continue to meet DHS Contract Administration requirements. |
|  | 2. All fiscal and customer files must be maintained for a minimum of five years. |
|  | 3. Contract monitoring information, which includes utilization, will be maintained by DRS. |
|  | 4. CRP's will be reviewed at minimum every three years to ensure compliance with contractual requirements. |
|  | 5. Executed contracts will require review of customer files, at minimum, once every three years and will include the following information: |
|  | a. Copy of Referral (if applicable) sent to DRS |
|  | b. Release of Information signed by customer and program staff |
|  | c. Copies of all forms related to DRS customers, including services paid on a voucher. |
|  | d. Monthly billing |
|  | e. Customer Progress notes |
|  | f. Staffing Notes signed by all parties. |
|  | g. CRP Service Plan signed by customer and program staff. |
|  | h. Copies of Individualized Plan for Employment (IPE) with customer and DRS signatures. |
|  | i. Copies of Notification of Services (NOS) signed by DRS, including cancellation NOS if applicable. |

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| **CONTRACT RECOMMENDATIONS (COMMENTS):** |
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| **SUMMARY:** |
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**APPLICATION DECISION**

Reviewer check only one:

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|  | **APPROVED** |
|  | **CONDITIONALLY APPROVED**(Contingent on the receipt of additional materials or revisions needed to remedy any minor deficiencies in the proposed program as described below) |
|  | **NOT APPROVED** |

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| **CONDITIONS TO REMEDY OR REASONS FOR DENIAL:** |
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| CRP Representative / Date |  | DHS-DRS-TCRS Contract Advisor / Date |
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| DHS-DRS-TCRS Manager / Date |  | DHS-DRS Assistant Bureau Chief / Date |
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| DHS-DRS Bureau Chief / Date |  | DHS-DRS Director or Designee / Date |

**NOTIFICATION:**

Final notice will be sent to potential CRP within 30 calendar days of Initial Contract Standards Survey completion. If there are areas to be corrected, a corrective action plan will be developed by the CRP and submitted to DRS. The plan shall indicate timeframes in which the areas shall be compliant. The CRP must notify DRS when corrections have been made and are ready for follow-up review. Once the potential CRP is compliant, a final determination on a contract will be made and the potential CRP will be notified within 10 calendar days.

**APPEAL PROCESS:**

The CRP has the right to appeal the evaluation report under 89 Ill. Adm. Code 510.

(Source: Added at 48 Ill. Reg. 3129, effective February 16, 2024)