

Corrective Action Plan for

Federal Fiscal Year 2023 Monitoring Report on Puerto Rico Vocational Rehabilitation Administration (VRA) And Supported Employment Programs

Initial CAP - current status:

Monitoring Report PDF format:

Monitoring Report Publication Date:

Submitted by:

Submitted on:

Completed by:

Completed on:

Approved by:

Approved on:

CAP Resolved Date:

Number of findings:

Number of resolved findings:

Percent resolved:

Finding 2.1

Finding Headline: Inaccurate Reporting of Data

Finding: Pursuant to 2 C.F.R. § 200.303, VR agencies are required to develop an internal controls process to provide reasonable assurances regarding the effectiveness and efficiency of operations, reliability of reporting for internal and external use; and to be implemented as a measure of checks and balances to ensure proper expenditures of funds, including the evaluation and monitoring of compliance with statutes, regulations and the terms and conditions of Federal awards. Furthermore, a State VR agency must assure, in the VR services portion of the Unified or Combined State Plan, that it will employ methods of administration that ensure the proper and efficient administration of the VR program.

Mandated Corrective Action:

2.1.1 Develop and implement formal written data collection and validation policies and procedures to safeguard data integrity, promote the timely resolution of data anomalies and inaccuracies, and ensure the accurate reporting of data collected through the RSA-911 in accordance with 34 C.F.R. § 361.40 and RSA-PD-19-03, including services purchased through contracts and agreements, provided through comparable benefits or directly by VR counselors, pre-ETS coordinators, regular transition analysts, occupational therapists, vocational evaluators, assessment and adjustment center staff, support centers and employment modalities analysts, orientation and mobility teachers, and other VRA staff, as well as measurable skill gains, credential attainment, and post-exit measures. These procedures must include:

- A description of the process for identifying and correcting errors or missing data (e.g., electronic data checks, regular data validation training for appropriate program staff prior to uploading the RSA-911 report;
- A monitoring component (i.e., monitoring protocol) consistent with 2 C.F.R. § 200.328, to ensure that program staff are following the written data validation procedures and a process for taking appropriate corrective action(s), if those procedures are not followed;
- A regular review (e.g., at least quarterly) of program data for errors, missing data, range values and anomalies, and documentation that missing and erroneous data identified during the review process have been corrected; and
- A regular assessment of the effectiveness of the data validation process (e.g., at least annually) and allow for process revisions, as needed.

2.1.2 Revise policies and guidance to align with Federal requirements and timeframes discussed in this finding, including Normative Communication 2022-16 (periodic monitoring and case reviews) and case review instrument (ARV 62, issued August 2006)

2.1.3 Develop and implement internal control procedures for all performance measures that ensure VRA maintains an accurate record of services for all applicants and eligible individuals in accordance with 34 C.F.R. § 361.47 (a) and 34 C.F.R. § 361.56, and establish performance targets (e.g., MSG, credential attainment, post-exit measures):

2.1.4 Develop and implement adequate and complete quality assurance procedures to identify the cohorts for all performance measures and report them accurately in RSA-911 and

2.1.5 Conduct staff training on revised policies and written internal controls related to the collection and reporting of services delivered through contracts and agreements, comparable benefits and directly by VRA staff, and conduct case reviews to ensure accurate reporting of these data on the RSA-911.

RSA Focus Area: Performance of the State Vocational Rehabilitation Services and State Supported Employment Services Program

CORRECTIVE ACTION 2.1.1

Action:

1. Regarding the timely resolution of data anomalies and inaccuracies and ensure the accurate reporting of data collected through the RSA-911, the Quality Control and Project Management Office (QCPMO) will collaborate with the Vocational Rehabilitation Counseling Services Office (VRCSO) and Fiscal Division in the development of a written procedure including verification, by identified VR staff, of accurate Pre-ETS services registry in the system, registry of In-house services and certification of those services authorizations as “service provided” during the program year.
2. Regarding accurate reporting of MSG, Credentials and Post Exit Employment data, the PRVRA will develop a procedure to be followed by VR Counseling Supervisors, including their responsibility to report (twice a year) to the QCPMO the progress of data registry by caseload, staff not following data validation procedures and corrective actions.
3. As part of the procedure, the QCPMO recommends the implementation of strategies such as the followings:
 - Development of a Pre-ETS generated from the case management system to compare data entries with invoices and students per activity.
 - Include in the case management system an alert or to do list, at least once a year, of active cases without a certified counseling service authorization.
 - Include in the case management system an alert or to do list, at least once a year, of participants in training status without MSG registry.
 - Implementation of a “Release for information of Credentials and MSG” to be signed by the participant allowing PRVRA to request the information from the educational institution in case the participant doesn’t provide it. Also, explore if PR’s postsecondary educations are part of the National Students Clearinghouse and, if included, establish an agreement to obtain credentials attained information.
 - Upload into the case management system, by programming, of the local DOL’s UI Lists for the second and fourth quarter after exit.

Standard to be Met and Method of Evaluation:

Action 1:

Standard: Increase to at least 60% the number of participants who receive VR Counseling and Guidance service (In-House)

Method of evaluation: Twice a year review of a report generated from the case management system showing number of participants and number of those with at least one counseling service authorization certified as service provided.

Standard: Increase certification of other In-house services provided by CAA and CSEM.

Method of evaluation: Quarterly review of certified and uncertified service authorizations.

Standard: Accurate reporting of Pre-ETS services.

Method of evaluation: Quarterly review, by Pre-ETS staff, of services registered in the case management system vs vendors invoices and report of results to the VRCSO. .

Action 2:

Standard: Increase the percentage of MSG, Credentials and Post Exit data registry to comply with negotiated levels of performance.

Method of evaluation: Reports generated from the case management system showing, by caseload/counselor, the percentage of participants in training status and at least one MSG registry during the program year, percentage of participants with a Credential registered before exit and up to one year after exit and percentage of post exit employment rate. Reports sent by the VRC supervisors explaining caseloads with low percentages, reasons and corrective actions taken.

Action 3:

Standard: Strategies implemented.

Method of evaluation: Alerts programmed; UI list uploaded, percentage of compliance.

Planned start date: 07/01/2024

Actual start date:

Projected completion date: 07/01/2025

Actual completion date:

Quarterly Updates:

RSA state team comments:

Resolved

CORRECTIVE ACTION 2.1.2

Actions: VRA will revise policies and guidance to align with Federal requirements and timeframes

1. VRA will review the procedure for the Vocational Rehabilitation Counseling Services Center Manual:
2. VRA Will review the procedure for the Counseling Services Center Supervision Manual
3. VRA will review the Normative Communication No. 2022-16: Procedure to Ensure Quality Control Through the Review/Monitoring of Applicant and Consumer Services Files of Vocational Rehabilitation Administration (VRA)
4. VRA will review the Normative Communication No. 2006-13: Regional Advisory Committee (RAC) and Control Advisor Committee (CAC)
5. VRA will review Normative Communication No. 2007-30: Procedure for Transferring Applicant/Consumer Services Record
6. VRA will review the Document for File Review (VRA 62). VRA Instrument 62: Document for File Review of Records, the updated document with the recommendations made from the 2019 Monitor was sent to RSA. At present, the recommendations of the Economic Survey are tempered (attachment included)

Standard to be Met and Method of Evaluation:

Standard: Revised policies

Method of evaluation: Normative communications published, implementation of procedures, validation by means of evidence sheets and meeting minutes

Planned start date: 05/20/2024

Actual start date:

Projected completion date: 12/31/2024

Actual completion date:

Quarterly Updates:

RSA State team comments:

Resolved

CORRECTIVE ACTION 2.1.3

Actions:

1. Continue to apply, by VRC Supervisors and the QC Specialist, the targeted Case File Review/Monitoring Process for RSA-911 Data Quality Control.
2. Establishment of percentages of compliance with WIOA performance indicators by caseload/counselor and annual assessment of compliance.
3. Development of a guide regarding the registering, documentation and report of MSG, CA and Post Exit measures.

Standard to be Met and Method of Evaluation:

Action 1:

Standard: Reviews completed

Method of evaluation: Number of quarterly case files reviews and results reports submitted by supervisors at least twice a year.

Action 2:

Standard: Compliance with performance percentages established by Caseload/VRC.

Method of evaluation: Formal notification to VRC regarding the establishment of performance percentages by caseload; and compliance report results yearly.

Action 3:

Standard: Guide development

Method of evaluation: Guide published.

Planned start date: 07/01/2024

Actual start date:

Projected completion date: 07/01/2025

Actual completion date:

Quarterly Updates:

RSA state team comments:

Resolved

CORRECTIVE ACTION 2.1.4

Action 1: Development of written instructions and a report regarding the cohorts for all performance measures and sharing it with the VRC Staff and the MIS staff to ensure timely reporting of data.

Standard to be Met and Method of Evaluation:

Standard: Cohorts for data reported

Method of evaluation: Comparison of a report developed by cohort and a sample of those cases in the RSA-911.

Planned start date: 10/01/2024

Actual start date:

Projected completion date: 07/01/2025

Actual completion date:

Quarterly Updates:

RSA state team comments:

Resolved

CORRECTIVE ACTION 2.1.5

Action 1: VRA will conduct a collaborative effort of between all Service’s Office and Fiscal Offices, for staff training on all revised policies and written internal controls related to the collection and reporting of services delivered through contracts and agreements, comparable benefits and directly by VRA staff.

Standard to be Met and Method of Evaluation:

Standard: Training sessions and presentations

Method of evaluation: Training Plans, webinars, employee surveys on understanding, and attendance validation

Action 2: VRA will conduct case reviews to ensure accurate reporting of these data on the RSA-911.

Standard to be Met and Method of Evaluation:

Standard: Testing phase of new policy

Method of evaluation: Reviews completed, successful Testing phase of policy implementation and results validated.

Planned start date: 11/01/2024

Actual start date:

Projected completion date: 07/01/2025

Actual completion date:

Quarterly Updates:

RSA state team comments:

Resolved

Finding 3.1

Finding Headline: Lack of Internal Controls and Inaccurate Reporting of Pre-Employment Transition Services

Finding: Grant recipients are required to ensure provision of pre-employment transition services for all students with disabilities. Pre-employment transition services, as defined at Section 7(30) of the Rehabilitation Act, “means services provided in accordance with Section 113.” Section 110(d)(1) of the Rehabilitation Act establishes the 15 percent minimum reservation requirement for the State from its VR allotment. Grantees must have formal written policies, procedures, and internal controls necessary to track, validate and report the provision of pre-employment transition services. VRA does not maintain effective internal controls over the Federal awards necessary to provide reasonable assurances that is s managing the Federal award in compliance with Federal statues, regulations, and the terms and conditions of the award.

Mandated Corrective Action:

Corrective Action 3.1 RSA requires that VRA —

- 3.1.1 Develop processes to merge unique IDs used for potentially eligible students and VR-applicants and written verification procedures to ensure VRA is able to verify and accurately report pre-employment transition services provided to each student in receipt of such services;
- 3.1.2 Develop pre-employment processes and internal controls to close service records when students are no longer interested in receiving pre-employment transition services
- 3.1.3 Address case management system deficiencies to allow service authorizations to be generated for pre-employment transition services purchased and provided directly by VRA staff to potentially eligible and VR-eligible students;
- 3.1.4 Revise processes to allow for auxiliary aids and services to be purchased for potentially eligible and VR-eligible students when needed to participate in pre-employment transition services;
- 3.1.5 Develop internal controls to ensure all staff who offer direct pre-employment transition services to potentially eligible and VR-eligible students are accurately tracking and reporting actual time spent providing or arranging for the provision of pre-employment transition services (i.e., required activities, pre-employment transition services coordination activities, and authorized activities) in accordance with the statutory and regulatory requirements in sections 7(30), (37), (42), and 113(a) of the Rehabilitation Act, 34 C.F.R. §§ 361.40(a), 361.5(c)(42) and (51), 361.48(a)(2), 361.50 and in the grant award notice; and
- 3.1.6 Conduct staff training on revised policies and written internal controls related to the collection and reporting of pre-employment transition services purchased through contracts, agreements and authorizations, and provided directly by VRA staff; and conduct case reviews to ensure accurate reporting of these data on the RSA-911.

RSA Focus Area: Fiscal Management of the State Vocational Rehabilitation Services and State Supported employment Services Programs

CORRECTIVE ACTION 3.1.1

Action 1: Configure, in the RSA-911 data file, a “merge” of potentially eligible students and VR eligible students with the same unique ID to prevent reporting in separate rows of the file.

Standard to be Met and Method of Evaluation:

Standard: Elimination of duplicate unique ID for students with disabilities in more than one row of the data file. *The only instance for reporting the same Unique ID in separate rows will be for those applicants or participants with a closed case (exiters) and a new active case.*

Method of evaluation: Certification by the computer programmer that the RSA-911 data file does not include students with disabilities duplicates.

Planned start date: 07/01/2023

Actual start date:

Projected completion date: 07/01/2023

Actual completion date: This action was completed in 2023.

Quarterly Updates:

RSA state team comments:

Action 2: Case management system change implementation (from CRIS to CMIS) removing two separate screens to register students with disabilities.

Standard to be Met and Method of Evaluation:

Standard: Zero duplicates of unique ID for students with disabilities.

Method of evaluation: New case management system implemented and validation through review of data file samples.

Planned start date: 07/01/2024

Actual start date:

Projected completion date: 07/01/2025

Actual completion date:

Quarterly Updates:

RSA state team comments:

Resolved

CORRECTIVE ACTION 3.1.2

Action 1: PR VRA will develop process and internal controls to close service records when students are no longer interested in receiving pre-employment transition services in collaboration with Service Counseling Service and Quality Control and Program Management Office.

Standard to be Met and Method of Evaluation:

Standard: Policies Revised

Method of Evaluation: Publication of new policy, implementation of procedures, evidence of orientation to staff, training, attendance sheets and minutes

Planned Start Date: May 20, 2024

Actual Start Date:

Projected completion date: October 31, 2024

Actual completion date:

Quarterly Updates:

RSA state team comments:

Resolved?

CORRECTIVE ACTION 3.1.3

Action 1: Identify changes to be configured within the new case management system to allow service authorizations to be issued for all pre-employment transition services purchased and provided directly by VRA staff to potentially eligible and VR-eligible students.

Standard to be Met and Method of Evaluation:

Standard: Availability of functions within the new case management system to allow for authorizations issuance.

Method of evaluation: Validation of functionality during testing phase

Action 2: Develop written procedures regarding authorization issuance for pre-employment transition services purchased or provided directly by VRA staff

Standard to be Met and Method of Evaluation

Standard: Normative communication issued

Method of evaluation: Normative communication published.

Planned Start Date: May 20, 2024

Actual Start Date:

Projected completion date: December 31, 2024

Actual completion date:

Quarterly Updates:

RSA state team comments:

Resolved

CORRECTIVE ACTION 3.1.4

Action 1: PRVRA will revise its policies for further detail regarding auxiliary aids and services to be purchased for potentially eligible and VR eligible students when needed to participate in pre-employment transition services.

Standard to be Met and Method of Evaluation:

Standard: Policies developed

Method of Evaluation: Policies published, Implementation of new Procedures validation by means of evidence of orientation, attendance sheets and minutes

Planned Start Date: May 20, 2024

Actual Start Date:

Projected completion date: June 30, 2024

Actual completion date:

Quarterly Updates:

RSA state team comments:

Resolved

CORRECTIVE ACTION 3.1.5

Action 1: VRA developed normative communication tempering the recommendations provided by the RSA during the FFY 2023 Monitoring visit. Changes were informed in sections 1, 2 and 4 of the Section 107 CAP which is waiting for RSA's approval before implementation

Standard to be Met or Method of Evaluation:

Standard: Policies reviewed and developed

Method of evaluation: Implementation of Procedures, Evidence of orientation, attendance sheets and minutes

Planned Start Date: January 2024

Actual Start Date:

Projected completion date: October 30, 2024

Actual completion date:

Quarterly Updates:

RSA state team comments:

Resolved

CORRECTIVE ACTION 3.1.6

Action: PRVRA will be providing training in revised policies and written internal controls related to the collection and reporting of pre-employment transition services.

Standard to be Met and Method of Evaluation:

Standard: Training sessions and presentations

Method of evaluation: Training Plans, evaluation sheets, and attendance validation

Planned Start Date: August 5, 2024

Actual Start Date:

Projected completion date: December 31, 2024

Actual completion date:

Quarterly Updates:

RSA state team comments:

Resolved

FINDING 3.2

Finding Headline: Audit Resolution Requirements Not Met

Finding: The Uniform Guidance states that grantees who are subject to 2 C.F.R. § 200, Subpart F (audit requirements) must promptly follow up and take corrective action on audit findings, including preparation of a summary schedule of prior audit findings and a corrective action plan (2 C.F.R. §§ 200.508(c) and 511(b)).

Mandated Corrective Action:

- 3.2.1 Within 90 days following the final monitoring report issuance date, develop and implement written processes, procedures, and internal controls sufficient to ensure compliance with the requirement to promptly follow-up on audit findings; and
- 3.2.2 Within 120 days following the final monitoring report issuance date, develop and implement written processes, procedures, and internal controls sufficient to ensure accurate, correct, and timely submission of RSA-911 reports, as described in corrective action 2.1.1 in section 2 of this report, and pre-employment transition service expenditures reported on the RSA-17.

RSA Focus Area: Fiscal Management of the State Vocational Rehabilitation Services and State Supported employment Services Programs

CORRECTIVE ACTION 3.2.1

Action 1: PRVRA will develop and implement written procedures and internal controls sufficient to ensure compliance with the requirement to promptly follow-up on audit findings within 90 days following the final monitoring report.

Standard to be Met and Method of Evaluation:

Standard: CAP follow-up guide

Method of evaluation: Guide implemented and published

Planned start date: 06/01/2024

Actual start date:

Projected completion date: 07/15/2024

Actual completion date:

Quarterly Updates:

RSA state team comments:

Resolved

CORRECTIVE ACTION 3.2.2

Action 1: The Quality Control & Program Management Office will collaborate with other offices in the development of the required procedure, as established under corrective action 2.1.1. (**see corrective action 2.1.1 details**)

Planned start date: 07/01/2024

Actual start date:

Projected completion date: 07/01/2025

Actual completion date:

Quarterly Updates:

RSA state team comments:

Resolved

FINDING 3.3

Finding Headline: Internal Controls over Development, Implementation, and Monitoring of Contracts Issue

Finding Requirements: Pursuant to 2 C.F.R. § 200.303, VR agencies are required to develop an internal controls process to provide reasonable assurances regarding the effectiveness and

efficiency of operations, reliability of reporting for internal and external use; and to be implemented as a measure of checks and balances to ensure proper expenditures of funds, including the evaluation and monitoring of compliance with statutes, regulations and the terms and conditions of Federal awards. Further, a State VR agency must assure, in the VR services portion of the Unified or Combined State Plan, that it will employ methods of administration that ensure the proper and efficient administration of the VR program.

Mandated Corrective Action:

- 3.3.1 Develop and implement written policies governing the nature and scope and rates of payment for purchased VR services, including pre-employment transition services, in accordance with 34 C.F.R. § 361.50:
- 3.3.2 Revise contract template language to clearly state the scope of allowable services to be provided, including the specific pre-employment transition services, auxiliary aids and services, and VR services that align with RSA-PD-19-03 and the RSA-911; the allowable costs based on the written policies governing the rates of payment (to be submitted under corrective action 3.3.1); and that only VR-eligible students with an IPE may receive VR services necessary to participate in pre-employment transition services;
- 3.3.3 Develop, implement, and monitor internal control processes to ensure that only allowable services are provided through contracts, and only allowable contract costs are billed to and paid by VRA. The written internal controls should ensure that contract costs are reasonable, necessary, and allowable, and that contracts contain the required Federal clauses; and
- 3.3.4 Finalize and submit for RSA review all policies and procedures specific to the provision, tracking and reporting of VR services and pre-employment transition services provided by VRA through contracts for each student in receipt of such services, that ensure compliance with the statutory, regulatory and policy requirements cited in the “Requirements” section of this finding.

RSA Focus Area: Fiscal Management of the State Vocational Rehabilitation Services and State Supported employment Services Programs

CORRECTIVE ACTION 3.3.1

Action 1: The Pre-Employment Transition Area has a Cost Manual, which was shared in June 2023 Monitoring visit. The Manual is currently awaiting final approval of the Corrective Action Work Plan (Noncompliance with Pre-Employment Transition Service OMB No. 1820-0693) Section 1.2.4.1(b).

Standard to be Met or Method of Evaluation:

Standard: Revised Policy

Method of Evaluation: Implementation of Procedures. Evidence of orientation, personnel training, attendance sheets and minutes.

Planned Start Date:

Actual Start Date:

Projected completion date: December 31, 2024

Actual completion date:

Quarterly Updates:

RSA state team comments:

Resolved

CORRECTIVE ACTION 3.3.2

Action: On April 15, 2024, PRVRA included a folder with the information that was requested by RSA during a Teams meeting in response to the Pre employment Transition Services CAP. (Activities time required in the contracts, validating hours-time, procedures for evaluation of reasonableness).

Standard to be Met or Method of Evaluation:

Standard: Contracts Revised

Method of Evaluation: Publication of new policy, implementation of procedures, evidence of orientation to staff, training, attendance sheets and minutes

Planned Start Date: August 15, 2023

Actual Start Date:

Projected completion date: December 31, 2024

Actual completion date:

Quarterly Updates:

RSA state team comments:

Resolved

CORRECTIVE ACTION 3.3.3

Action: PRVRA awaits approval for the Procedures and Policies Manual for the evaluation of the reasonableness and allocation of costs submitted to RSA in response to the Corrective Active Plan (Noncompliance with Employment Transition Services OMB No. 1820-0694, Section 1.2.4.1(b). Similarly, controls have been tempered with the recommendations received in June 2023, where draft contracts were included in the Corrective Active Work Plan 1820-0694, Section 1.2.2.1, 1.2.7.1, 1.2.7.3 which also awaits the approval and/or recommendations of the RSA.

Standard to be Met or Method of Evaluation:

Standard: Revised Process

Method of Evaluation: Implementation of procedures, evidence of orientation to staff, training, attendance sheets and minutes

Planned Start Date: January 8, 2024

Actual Start Date:

Projected completion date: December 31, 2024

Actual completion date:

Quarterly Updates:

RSA state team comments:

Resolved

CORRECTIVE ACTION 3.3.4

Action: PR VRA submitted for RSA all review policies and procedures specific to the provision, tracking and reporting of VR services and pre-employment transition services provided by VRA through contracts for each student in receipt of such services with the collaboration of Counseling Services Office and Quality Control Office and the Information System Office.

Standard to be Met or Method of Evaluation:

Standard: Revised Process

Method of Evaluation: Publication of new policy, implementation of procedures, evidence of orientation to staff, training, attendance sheets and minutes

Corrective Action Plan for FFY 2023 Monitoring Report on Puerto Rico Vocational Rehabilitation Administration (VRA) And Supported Employment Programs
Initial CAP – Draft

Planned Start Date: January 8, 2024

Actual Start Date:

Projected completion date: December 31, 2024

Actual completion date:

Quarterly Updates:

RSA state team comments:

Resolved