

Reporting Instrument

OMB Approval No.: 0985-0043
Expiration Date: March 31, 2024

**UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR COMMUNITY LIVING
OFFICE OF INDEPENDENT LIVING PROGRAMS**

**SECTION 704
ANNUAL PERFORMANCE REPORT
For
STATE INDEPENDENT LIVING SERVICES
PROGRAM**

(Title VII, Chapter 1, Part B of the Rehabilitation Act of 1973, as amended)

Part I

INSTRUMENT

**(To be completed by Designated State Units
And Statewide Independent Living Councils)**

Reporting Fiscal Year: 2023

State: ID

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. Public reporting burden for this collection of information is estimated to average 35 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The obligation to respond to this collection is required to obtain or retain benefit (P.L. 105-220 Section 410 Workforce Investment Act). Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Rehabilitation Services Administration, LBJ Basement, Attention: Timothy Beatty, PCP Room 5057, U.S. Department of Education, 400 Maryland Ave, SW, Washington, DC 20202-2800 or email timothy.beatty@ed.gov and reference the OMB Control Number 1820-0606. Chapter 1, Title VII of the Rehabilitation Act.

SUBPART I - ADMINISTRATIVE DATA

Section A - Sources and Amounts of Funds and Resources

Sections 704(c) and 704(m)(3) and (4) of the Act

Indicate amount received by the DSE as per each funding source. Enter "0" for none.

Item 1 - All Federal Funds Received

(A) Title VII, Ch. 1, Part B	\$348060
(B) Title VII, Ch. 1, Part C - For 723 states Only	\$0
(C) Title VII, Ch. 2	\$225000
(D) Other Federal Funds	\$129500
Subtotal - All Federal Funds	\$702,560.00

Item 2 - Other Government Funds

(E) State Government Funds	\$246805
(F) Local Government Funds	\$0
Subtotal - State and Local Government Funds	\$246,805.00

Item 3 - Private Resources

(G) Fees for Service (program income, etc.)	\$0
(H) Other resources	\$18950
Subtotal - Private Resources	\$18,950.00

Item 4 - Total Income

Total income = (A)+(B)+(C)+(D)+(E)+(F)+(G)+(H)	\$968,315.00
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Item 5 - Pass Through Funds

Amount of other government funds received as pass through funds to consumers (include funds, received on behalf of consumers, that are subsequently passed on to consumers, e.g., personal assistance services, representative payee funds, Medicaid funds, etc.)	\$0
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Item 6 - Net Operating Resources

Total Income (Section 4) minus amount paid out to Consumers (Section 5) = Net Operating Resources	\$968,315.00
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Section B - Distribution of Title VII, Chapter 1, Part B Funds

Section 713 of the Act; 45 CFR 1329.10

What Activities were Conducted with Part B Funds?	Expenditures of Part B Funds for Services by DSE Staff	Expenditures for Services Rendered By Grant or Contract
(1) Provided resources to the SILC to carry out its functions	\$0	\$71824
(2) Provided IL services to individuals with significant disabilities	\$0	\$66431
(3) Demonstrated ways to expand and improve IL services	\$0	\$0
(4) Supported the general operation of CILs that are in compliance with the standards and assurances set forth in subsections (b) and (c) of section 725 of the Act	\$0	\$104234
(5) Supported activities to increase capacity to develop approaches or systems for providing IL services	\$0	\$0
(6) Conducted studies and analyses, gathered information, developed model policies, and presented findings in order to enhance IL services	\$0	\$0
(7) Provided training regarding the IL philosophy	\$0	\$0
(8) Provided outreach to unserved or underserved populations, including minority groups and urban and rural populations	\$0	\$0
Totals	\$0.00	\$242,489.00

Section C - Grants or Contracts Used to Distribute Title VII, Chapter 1, Part B Funds

Sections 704(f) and 713 of the Act

Enter the requested information for all DSE grants or contracts, funded at least in part by Part B funds, in the chart below. If a column is not applicable to a particular grant or contract, enter "N/A." If there were no non-Part B funds provided to this grantee or contractor for the purpose listed, enter "\$0" in that column. Add more rows as necessary.

Name of Grantee or Contractor	Use of Funds (based on the activities listed in Subpart I, Section B)	Amount of Part B Funds	Amount of Non-Part B Funds	Consumer Eligibility Determined By DSE or Provider	Consumer Service Records (CSRs) Kept With DSE or Provider
Idaho SILC	Res Plan systemic underserved outreach education	\$71,824.00	\$231,238.00	N/A	N/A
DAC-NW	Statewide education outreach resource development	\$19,150.00	\$1,934.00	N/A	N/A
LINC	General CIL operations	\$34,354.00	\$9,475.00	N/A	N/A
LIFE	General CIL operations	\$50,731.00	\$7,541.00	N/A	N/A
ICBVI	Direct IL services outreach education	\$66,430.00	\$15,567.00	N/A	N/A
Total Amount of Grants and Contracts		\$242489	\$265755		

Section D - Grants or Contracts for Purposes Other than Providing IL Services or For the General Operation of Centers

Section 713 of the Act

Describe the objectives, activities and results for each Part B grant or contract awarded for purposes

other than IL services or the general operation of centers.

Note: Web-based meeting options and activities have continued beyond the PHE, providing a greater opportunity for statewide participation, especially connecting with rural communities.

Goal 1: The Idaho IL Network will promote and advocate for the integration, inclusion and equity of all Idahoans with disabilities across communities, lifespan and cultures.

Objective 1.1: State and local emergency officials include individuals with disabilities and address their unique needs in emergency planning: mitigation, preparation, response and recovery.

1.1.a. Continue and increase participation with emergency management groups and in emergency activities that lead to the full inclusion of people with disabilities in all stages of emergency/disaster: Increase the number of people with disabilities involved with emergency planning by 25% annually. Baseline: 9 people - Survey participants quarterly, requesting information about the value of participation, barriers addressed, successes and lessons learned.

1.1.b. Educate and support Idahoans with disabilities in making personal emergency plans and the importance of local involvement in planning. Collect and evaluate surveys from 60% of people trained in Emergency Preparedness, demonstrating that they have or plan to complete a personal emergency plan; and would like to connect to statewide or local emergency planning.

Benchmark(s) - Met

Objective 1.2.: The IL Network will represent the voice of individuals with disabilities in improving the availability of housing, transportation, health care and community access.

Benchmarks/Indicators: For each year of the Plan, staff from each Center, the SILC and ICBVI will participate in a minimum of three boards, councils or policy workgroups addressing barriers to inclusion of people with disabilities in their community. Survey will request information about barriers addressed, successes and lessons learned. Annually, 25% of the surveys will indicate that barriers were reduced, or access was improved through advocacy/education efforts.

Benchmark(s) - Met

Objective 1.3.: The Idaho SILC, the Network of Centers, ICBVI, and the DSE will promote financial independence, including ABLE and other savings programs, and health care options, including the Medicaid for Workers with Disabilities program, by providing information and education to Idahoans with disabilities, service providers and community organizations.

Benchmarks/Indicators: Collect and evaluate surveys from 40% of people trained or provided individual technical assistance in areas of financial independence, demonstrating 20% of those surveyed have or plan to take additional steps furthering their financial independence.

Benchmark(s) - Met

Goal 2: The Idaho IL Network will work to strengthen effective Network operations that are adequately funded and increases capacity.

Objective - 2.1: Years 1 and 2: Address Subchapter Part C funding inequities, Years 1 and 2 Note: Objective 2.2 Years 1-3 is the first phase of what will likely go into the 2024 -2026 SPIL and possibly beyond in a different form, dependent on Reauthorization of the Rehabilitation Act of 1973, as amended.

Benchmarks/Indicators: The CIL Directors will meet at least quarterly over the next three years to determine and agree upon Subchapter C funding formula for Idaho. The Directors will provide an annual written progress report to their boards and the SILC due October 31, 2022, and October 31, 2023.

Benchmark(s) - Met

Objective - 2.2: Year 3: Address Subchapter Part C funding inequities Note: Objective 2.2 Years 1-3 is the first phase of what will likely go into the 2024 -2026 SPIL and possibly beyond in a different form, dependent on Reauthorization of the Rehabilitation Act of 1973, as amended.

Benchmark - Met in advance.

The CILS determined that the best way to proceed should there ever be a process would be to equally distribute Part C funding so each CIL receives the exact same amount as federal "seed" money with a three-to-five-year process of equalization to minimize immediate impact on the CIL losing funding.

Objective 2.3: The three Idaho Centers: Living Independence Network Corporation (LINC), LIFE, A Center for Independent Living and Disability Action Center-Northwest (DAC-NW) and the Idaho Commission for the Blind and Visually Impaired (ICBVI) will collaborate and work to identify other resource development options to enhance providing independent living services to the citizens of Idaho.

Benchmarks/Indicators: Agencies will meet at least once per quarter for all three years resulting in one new funding stream annually for a minimum of one agency.

Benchmark - partially met, quarterly meetings including the four subrecipients have been challenging to coordinate, email correspondence and individual phone calls seem to work best. However, CILs identified and are pursuing at least five additional funding streams with at least one, through the Idaho Department of Education secured for all three Centers.

Goal 3: Idahoans with disabilities receive the community-based supports they need to live in their community of choice with greater independence.

Objective 3.1: Provide Independent Living services to people with disabilities to increase community access in rural areas and/or unserved and underserved populations identified in section 3.2.

Benchmarks/Indicators: Each Center and ICBVI will provide services in at least one unserved/underserved area and/or to at least one member of an identified population (may be living in an urban area), per quarter demonstrating greater access, inclusion, independence and/or peer connections in previously unserved/underserved communities.

Benchmark - Met

Objective 3.2: The Idaho SILC, Network of Centers and ICBVI will expand cultural competence by participating in events, listening and learning about community specific concerns/issues, to/with unserved/underserved populations. See SPIL Section 3.2 definitions.

Benchmarks/Indicators: Each Center, the SILC and ICBVI will participate in a minimum of two events annually held by locally identified marginalized communities. Through the survey, staff will share community visited, what they learned, community strengths, how their perspective may have changed and how they might better serve the community visited. Annually, 10% of the surveys will indicate lasting connections were made with the potential to serve otherwise unserved populations.

Benchmark - Met

Objective 3.3: Increase demonstrable community connections by the number of, and participation in, community cross disability peer to peer mentoring and learning groups.

Benchmarks/Indicators: Each Center and ICBVI will stand up and support at least one peer to peer or IL learning (workshop) opportunity monthly either in-person or via web-based technology. The Centers and ICBVI will provide surveys for completion after meetings/workshops with the goal of 50% of participants completing a survey and at least 40% of those indicating they learned something new about Independent Living, disability issues and/or made meaningful peer connections.

Benchmark - Met. In addition to surveys, organizations explored better methods to demonstrate outcomes, observation, one-on-one conversations and anecdote. This has resulted in better information from which to learn about barriers and improve outcomes.

Section E - Monitoring Title VII, Chapter 1, Part B Funds

Provide a summary of the program or fiscal review, evaluation and monitoring conducted by the state of any of the grantees/contractors receiving Part B funds during the reporting year.

The SILC Executive Director (E.D.) and fiscal specialist review all accounts weekly. Further, the SILC financial specialist works closely with the DSE, the Idaho Division of Vocational Rehabilitation (IDVR), fiscal specialist who is assigned to our grants to ensure accurate and timely processing of SILC activities. The SILC has an internal accounting process through required state tracking systems.

The Idaho SILC, the Idaho Commission for the Blind and Visually Impaired (ICBVI), LINC, LIFE and DAC- NW forward a detailed invoice/billing to the DSE for evaluation of expenses prior to reimbursement to ensure that expenses are directly related to Title VII, Part B. The process for the SILC and ICBVI differs somewhat from the process followed by the CILs. As state agencies/entities, SILC and ICBVI use the state financial accounting systems for billing and reimbursement from the DSE.

IDVR/DSE also has an MOU with the SILC: IDVR provides \$129,500 in Innovation and Expansion (I&E) funds to support the SILC fiscal specialist and office management.

The fiscal specialist is well versed in GAAP and state accounting MIS. The fiscal specialist is housed in the Idaho SILC office and is an employee of the Idaho SILC.

The following explanation applies to both Section 2. Distribution of Title VII... and Section 3. Grants or Contracts Used to Distribute.

The PPR for FFY 2023 has expenditures from two grants - 2201IDILSG and 2301IDILSG. The amounts reported in FFY23 for Section 2 and 3 do not agree with the NOA for grant 2301IDILSG. This occurs because IDVR met the match requirement for the grant 2201IDILSG in the first Federal year (FFY22) of the award and has carry-over that IDVR expended in FFY23. Distributed funds do not match the funds received because IDVR expends funds prior to seeking reimbursement so expenditures (distributions) always equal or exceed the funds received.

IDVR (the DSE) involves SILC and the CILs and other interested parties in producing the SPIL which defines the percentages of the IL grants that the SILC and the CILs will receive. IDVR enters agreements with dollar amounts assigned so that each group knows the exact amount that they will receive from the grant. IDVR has made it clear that we meet match in the beginning of a grant so we

will always have carry-over, if needed, to use the grant funds. In FFY22 and FFY23 the original awards did not get fully spent within the original grant years but IDVR communicated with SILC and CILs to continue using their assigned FFY22 funds within the IL22 carry-over period of performance. IDVR also let SILC and CILs know to use their FFY23 funds through the extended IL23 carry-over year. The SILC and CILs do not have administrative issues that caused underspending they simply needed more time to effectively use the grants.

The SILC is subject to an annual audit which is conducted by an external CPA as required by state law. Idaho SILC's SFY 2017 - 2021 audits reported no findings. 2022 is behind schedule because the auditor retained was unable to complete the audit due to staffing shortages. The SILC is in the process of retaining a new auditor for the 2022 and 2023 audits as well as the upcoming SFY 2024 audit. The Council and DSE have been updated frequently regarding the audits and worked with other state personnel to ensure we are proceeding as required by state law.

Section F - Administrative Support Services and Staffing

Section 704(c)(2) and 704 (m)(2) and (4) of the Act

Item 1 - Administrative Support Services

Describe any administrative support services, including staffing, provided by the DSE to the Part B Program.

Grant monitoring and reimbursement occur through state required tracking systems. The DSE does not provide day-to-day operational support to any Part B recipients.

I & E funds are used to supplement wages for SILC staff in combination with Part B and State General Funds. Three SILC staff are under the direct supervision of the SILC E.D. The SILC E.D. is under the direct supervision of the Council. The DSE has no authority over any SILC staff related to hiring/retaining SILC employees.

The DSE did not charge the 5% fee allowed under the grant in FFY2023.

Item 2 - Staffing

Enter requested staff information for the DSE and service providers listed in Section C, above (excluding Part C funded CILs)

Type of Staff	Total Number of FTEs	FTEs filled by Individuals with Disabilities
Decision-Making Staff	2	2
Other Staff	2	1

Section G - For Section 723 States ONLY

Section 723 of the Act, 45 CFR 1329.12

Item 2 - Administrative Support Services

Section 704(c)(2) of the Act

Item 3 - Monitoring and Onsite Compliance Reviews

Section 723(g), (h), and (i)

Item 4 - Updates or Issues

SUBPART II - NUMBER AND TYPES OF INDIVIDUALS WITH SIGNIFICANT DISABILITIES RECEIVING SERVICES

Section 704(m)(4) of the Act; 45 CFR 1329.12(a)(3-4)

In this section, provide data from all service providers (DSE, grantees, contractors) who received Part B funds and who were listed in Subpart I, Section C of this report, except for the centers that receive Part C funds. Part C centers will provide this data themselves on their annual CIL PPRs.

Section A - Number of Consumers Served During the Reporting Year

Include Consumer Service Records (CSRs) for all consumers served during the year.

	# of CSRs
(1) Enter the number of active CSRs carried over from September 30 of the preceding reporting year	62
(2) Enter the number of CSRs started since October 1 of the reporting year	24
(3) Add lines (1) and (2) to get the <i>total number of consumers served</i>	86

Section B - Number of CSRs Closed by September 30 of the Reporting Year

Include the number of consumer records closed out of the active CSR files during the reporting year because the individual has

	# of CSRs
(1) Moved	4
(2) Withdrawn	0
(3) Died	3
(4) Complete Goals	6
(5) Other	6
(6) Add lines (1) + (2) + (3) + (4) + (5) to get <i>total CSRs closed</i>	19

Section C - Number of CSRs Active on September 30 of the Reporting Year

Indicate the number of CSRs active on September 30th of the reporting year.

	# of CSRs
Section A(3) <minus> Section (B)(6) = Section C	67

Section D - IL Plans and Waivers

Indicate the number of consumers in each category below.

	# of Consumers
(1) Number of consumers who signed a waiver	79
(2) Number of consumers with whom an ILP was developed	7
(3) <i>Total number of consumers served during the reporting year</i>	86

Section E - Age

Indicate the number of consumers in each category below.

	# of Consumers
(1) Under 5 years old	0
(2) Ages 5 - 19	4
(3) Ages 20 - 24	1
(4) Ages 25 - 59	81
(5) Age 60 and Older	0
(6) Age unavailable	0
(7) <i>Total number of consumers served by age</i>	86

Section F - Sex

Indicate the number of consumers in each category below.

	# of Consumers
(1) Number of Females served	51
(2) Number of Males served	35
(3) <i>Total number of consumers served by sex</i>	86

Section G - Race And Ethnicity

Indicate the number of consumers in each category below. ***Each consumer may be counted under ONLY ONE of the following categories in the Program Performance Report, even if the consumer reported more than one race and/or Hispanic/Latino ethnicity).***

**This section reflects a new OMB directive.
Please refer to the Instructions before completing.**

	# of Consumers
(1) American Indian or Alaska Native	2
(2) Asian	0
(3) Black or African American	1
(4) Native Hawaiian or Other Pacific Islander	1
(5) White	74
(6) Hispanic/Latino of any race or Hispanic/Latino only	6
(7) Two or more races	0
(8) Race and ethnicity unknown	2
(9) <i>Total number of consumers served by race/ethnicity</i>	86

Section H - Disability

Indicate the number of consumers in each category below.

	# of Consumers
(1) Cognitive	0
(2) Mental/Emotional	0
(3) Physical	0
(4) Hearing	0

	# of Consumers
(5) Vision	86
(6) Multiple Disabilities	0
(7) Other	0
(8) <i>Total number of consumers served by by disability</i>	86

SUBPART III - INDIVIDUAL SERVICES AND ACHIEVEMENTS FUNDED THROUGH TITLE VII, CHAPTER 1, PART B FUNDS

Sections 13 and 704(m)(4); 45 CFR 1329.12(a)(3-4); Government Performance Results Act (GPRA) Performance Measures

Subpart III contains new data requests. Please refer to the Instructions before completing.

Section A - Individual Services and Achievements

For the reporting year, indicate in the chart below how many consumers requested and received each of the following IL services. Include all consumers who were provided services during the reporting year through Part B funds, either directly by DSE staff or via grants or contracts with other providers. Do not include consumers who were served by any centers that received Part C funds during the reporting year.

Services	Consumers Requesting Services	Consumers Receiving Services
(A) Advocacy/Legal Services	1	1
(B) Assistive Technology	18	14
(C) Children's Services	0	0
(D) Communication Services	6	4
(E) Counseling and related services	6	2
(F) Family Services	0	0
(G) Housing, Home Modification, and Shelter Services	0	0
(H) IL Skills Training and Life Skills Training	26	18
(I) Information and Referral Services	22	14
(J) Mental Restoration Services	0	0
(K) Mobility training	10	7
(L) Peer Counseling Services	1	1
(M) Personal Assistance Services	0	0
(N) Physical Restoration Services	0	0
(O) Preventive Services	0	0
(P) Prostheses, Orthotics, and other appliances	1	0
(Q) Recreational Services	0	0
(R) Rehabilitation Technology Services	10	6
(S) Therapeutic Treatment	0	0
(T) Transportation Services	3	2
(U) Youth/Transition Services	0	0
(V) Vocational Services	1	1
(W) Other	1	1
Totals	106	71

Section B - Increased Independence and Community Integration

Item 1 - Goals Related to Increased Independence in a Significant Life Area

Indicate the number of consumers who set goals related to the following significant life areas, the number whose goals are still in progress, and the number who achieved their goals as a result of the provision of IL services.

Significant Life Area	Goals Set	Goals Achieved	In Progress
Self-Advocacy/Self-Empowerment	11	7	4
Communication	49	14	35
Mobility/Transportation	55	14	41
Community-Based Living	9	1	8
Educational	4	1	3
Vocational	4	2	2
Self-Care	18	9	9
Information Access/Technology	42	11	31
Personal Resource Management	6	3	3
Relocation from a Nursing Home or Institution to Community-Based Living	0	0	0
Community/Social Participation	7	5	2
Other	21	7	14
Totals	226	74	152

Item 2 - Improved Access To Transportation, Health Care and Assistive Technology

(A) Table

In column one, indicate the number of consumers who required access to previously unavailable transportation, health care services, or assistive technology during the reporting year. Of the consumers listed in column one, indicate in column two, the number of consumers who, as a result of the provision of IL services (including the four core services), achieved access to previously unavailable transportation, health care services, or assistive technology during the reporting year. In column three, list the number of consumers whose access to transportation, health care services or assistive technology is still in progress at the end of the reporting year.

Areas	# of Consumers Requiring Access	# of Consumers Achieving Access	# of Consumers Whose Access is in Progress
(A) Transportation	6	5	1
(B) Health Care Services	2	2	0
(C) Assistive Technology	6	6	6

Note: For most IL services, a consumer's access to previously unavailable transportation, health care and assistive technology is documented through his or her CSR. In some instances, consumers may achieve an outcome solely through information and referral (I&R) services. To document these instances as successful outcomes, providers are not required to create CSRs for these consumers but must be able to document that follow-up contacts with these consumers showed access to previously unavailable transportation, health care and assistive technology.

(B) I&R Information

To inform ACL how many service providers engage in I&R follow-up contacts regarding access to transportation, health care services or assistive technology, please indicate the following:

The service provider did **X** / did not ___ engage in follow-up contacts with I & R recipients to document access gained to previously unavailable transportation, health care or assistive technology.

Section C - Additional Information Concerning Individual Services or Achievements

Please provide any additional description or explanation concerning individual services or achievements reported in subpart III, including outstanding success stories and/or major obstacles encountered.

In fiscal year 2023 (FFY 2023), the Idaho Commission for the Blind and Visually Impaired (ICBVI) delivered a comprehensive range of services across Idaho, catering to visually impaired individuals while also disseminating information and resources to the general public. ICBVI utilized Part B funds to offer financial assistance, supporting clients with fiscal needs in acquiring aids and appliances that enhance their ability to increase or sustain independence. Rehabilitation Teachers played a key role in imparting blindness skills training, covering essential areas such as Orientation and Mobility, Activities of Daily Living, Braille instruction, and facilitation of assistive technology.

ICBVI grapples primarily with funding constraints, as the received Part B funding does not fully meet program expenses. To bridge this financial gap, we have successfully leveraged alternative resources, including social security reimbursements, in-kind donations, and cash contributions. It's essential to recognize that while these sources have provided relief, their permanence is uncertain, and their availability may fluctuate annually.

One success story is of a client that moved to Idaho to be closer to take care of his ailing father. For the purpose of this example, we will call him Alex.

Alex reported that he is a 44-year-old male facing the challenges of having significant vision loss as well as having a major seizure disorder. Alex's journey towards greater independence began when he sought assistance from the Idaho Commission for the Blind and Visually Impaired (ICBVI). The unique combination of his vision loss, diabetes and having a seizure disorder presented some complex issues which made Alex reach out and contact our agency.

Alex met with a Rehabilitation Teacher (RT) from our agency. He indicated that his vision loss stemmed from diabetic retinopathy, and that he recently lost more vision and was having significant issues doing many tasks that he was previously able to do independently. Along with his retinopathy, he also had significant physical issues such as neuropathy in both his lower extremities due to his diabetes. He stated that his diabetes has been under control for some time with his A1C levels staying consistent the last few years. Along with his diabetes Alex reports of having a seizure disorder, adding an additional layer of complexity to his situation.

During their initial conversation Alex and his RT discussed his difficulties and they prioritized these difficulties to which they would work together to establish a framework to be able to find solutions for these difficulties.

One of the first tasks was for Alex to participate in a Low Vision Evaluation with a Low Vision Specialist that ICBVI contracts with. During this evaluation it was determined that Alex would benefit from some different magnifiers, as well as purple filtered lenses to help with glare issues. These items along with

other aids and appliances were purchased with Part B funds, since Alex did not have the financial resources to purchase them.

Along with these aids and appliances Alex also received training on how to use these devices properly as well as training in the areas of ADL and assistive technology.

Alex's focus on learning different skills in Activities of Daily Living (ADLs), with an emphasis on practical tasks, such as cooking independently and managing personal care routines for both he and his father since he was now his father's primary caretaker. These foundational skills not only empowered Alex in his daily life but also laid the groundwork for enhanced autonomy.

A talking glucometer was also purchased for Alex and he received training from his RT on this device in order to assist him in being able to maintain his blood sugar levels independently.

As stated previously, Alex also received training in the area of assistive technology. Given the visual impairment caused by diabetic retinopathy, his RT implemented screen magnification tools to facilitate Alex's navigation with his personal computer and android phone. This technological empowerment assisted him in feeling more connected to family, friends, and his community. It assisted with being able to manage his and his father's medical appointments and needs. It also greatly assisted his financial independence by allowing him to pay most of his bills online and balance his bank accounts.

Alex's case was closed as a success after Alex determined that he was successful in attaining the goals he established. Through financial assistance with Part B funds, and ADL and assistive technology training, Alex has reported that he is more self-confident and independent, which he attributes to the services he received from ICBVI.

SUBPART IV - COMMUNITY ACTIVITIES AND COORDINATION

Section 704(i), (l), and (m)(4) of the Act; 45 CFR 1329.17(c)

Section A - Community Activities

Item 1 - Community Activities Table

In the table below, summarize the community activities involving the DSE, SILC and CILs in the Statewide Network of Centers (excluding Part C fund recipients) during the reporting year. For each activity, identify the primary disability issue(s) addressed as well as the type of activity conducted. Indicate the entity(ies) primarily involved and the time spent. Describe the primary objective(s) and outcome(s) for each activity. Add more rows as necessary.

Subpart IV contains new data requests. Please refer to the Instructions before completing.

Issue Area	Activity Type	Primary Entity	Hours Spent	Objective(s)	Outcome(s)
Community Living	One on one and group communication	ICBVI	41.00	Provide education and outreach	Educate K-12 teachers, parents, students and providers regarding blind and visually impaired issues to expand expectations for those with visual impairments, increasing better outcomes for students as they advance from their secondary education.
Independent Living	One on one and group facilitation	ICBVI	36.00	Provide education, outreach and partnering to medical providers.	Educated physicians, hospital and clinic staff throughout the state of Idaho in regard to ICBVI services and recommendations on working with individuals with visual impairments.

Issue Area	Activity Type	Primary Entity	Hours Spent	Objective(s)	Outcome(s)
Independent Living	Health Fairs	ICBVI	58.00	Provide education, outreach and developed partnerships with local residents, professionals, potential clients, agencies and organizations.	Increased individual awareness and referrals to the Independent Living program. Provided information and resources to the public and networked with other service providers in local communities.
Emergency Planning	Community systems and technical assistance	SILC	66.00	Disability inclusion is built into all aspects of emergency management.	Hosted 10 Idaho Inclusive Emergency Coalition meetings.
Healthcare Access	Health care settings and systems	SILC	45.00	Improve health access and equity, reaching underserved communities, including migrant farm workers, immigrants/refugees and people who are unhoused.	Distributed more than 30,000 COVID tests to established and new partners including: CILs, public health departments, community partners serving immigrants and farm workers, homeless shelters, Idaho Harm Reduction and people in recovery.
Community Access	Transportation	ICBVI	72.00	ICBVI staff sit on a variety of public transportation committees in different regions throughout the state advocating for better public transportation access.	Work with civic leaders and other disability leaders to bring awareness and solutions of accessibility issues to improve access for public transportation services.

Issue Area	Activity Type	Primary Entity	Hours Spent	Objective(s)	Outcome(s)
Housing Access	Community systems	SILC	140.00	Retain and increase affordable, accessible housing options addressing the lack of housing and increasing evictions, including evictions from nursing homes, group homes and assisted living facilities.	Increase public awareness about the lack of affordable accessible housing due to population growth, lost wages, substantial increase in property values and rent increases, reduced HCBS settings due to closure of assisted living facilities.
Independent Living	Financial Planning	SILC	640.00	Provide information and Technical Assistance regarding how to open ABLE accounts in other IRS approved state programs. Note: Idaho does not have an ABLE savings program.	Increased savings access through seven workshops to 108 people and provided technical assistance (TA) to 298 people with disabilities or their families/guardians in opening accounts. Follow up indicates the majority opened an account.
Community Access	ADA, Fair Housing Act (FHA) and Rehab Act, including 508	SILC, ICBVI	39.00	Increase/improve community access to governmental systems and community infrastructure.	Brought awareness of city, county, state and federal accessibility issues including lack of broadband access for people with disabilities living in rural and frontier communities.

Issue Area	Activity Type	Primary Entity	Hours Spent	Objective(s)	Outcome(s)
Emergency Preparation	Emergency Preparation Workshops and Technical Assistance (TA)	SILC	210.00	Increase personal awareness, understanding and preparation for people with disabilities in all phases of disaster.	Presented to 252 people on developing personal preparedness plans, including 5 high schools in Boise and Eastern Idaho. Participants are better prepared for a personal or community wide emergency or disaster. Distributed 138 emergency bags

Item 2 - Description of Community Activities

For the community activities mentioned above, provide any additional details such as the role of the DSE, SILC, CIL, and/or consumers, names of any partner organizations and further descriptions of the specific activities, services and benefits.

The SILC works with and hosts workgroups addressing increased loss of affordable accessible housing and evictions across settings, including skilled nursing facilities, assisted living, rental housing and groups homes. Workgroups include the Intermountain Fair Housing Council, Idaho Housing and Finance Association, Public Health, the state Protection and Advocacy system, the Idaho Council on Developmental Disabilities, the Idaho Hospital Association and many other local community organizations. The SILC and our partners continue to engage in housing issues made worse during the public health emergency and explosive population growth across Idaho. There continues to be a crisis of people being evicted from skilled nursing facilities (SNFs), Residential Assisted Living Facilities (RALFs) as well as other community settings due to the reduced number of Medicaid beds available and a sharp loss of personal care and community support workers. The SILC, CILs and other partners are working to help families and individuals address these issues and access assistance from the appropriate organizations.

The Idaho Inclusive Emergency Coalition continues to meet monthly via Zoom platform. The group includes FEMA Region X Disability Integration Specialist, local emergency managers, public health, Center staff and community members with disabilities. The IIEC hosts subcommittee meetings as issues of need are identified, if not addressed in other forums. Engagement increased and is made up of a majority of people who have disabilities.

The Health Equity Coalition was hosted as a subcommittee of the SILC meeting monthly via Zoom. This group began during the public health emergency and in January 2023, the SILC turned over hosting to the CIL serving the northern part of the state, Disability Action Center NW. Dubbed Health Equity Plus, the group remains statewide and includes several SILC members, representatives from public health, the Council for the Deaf and Hard of Hearing, the DD council and other community partners. The group works to identify and address health disparities across our state.

Section B - Working Relationships Among Various Entities

Describe DSE and SILC activities to maximize the cooperation, coordination, and working relationships among the independent living program, the SILC, and CILs; and the DSE, other state agencies represented on the SILC, other councils that address the needs of specific disability populations and issues, and other public and private entities. Describe the expected or actual outcomes of these activities.

The DVR General Supervisor for the Customer Center Southwest represents the DSE as an ex-officio member. The DSE representative is an active member on the assessment and planning committee. His participation on the committee and planning activities helped the team enhance quarterly council member surveys, the effectiveness of the statewide assessment and on-going effectiveness of the SPIL.

- The SILC Program Specialist serves as a voting member of the State Rehabilitation Council (SRC).
- The Center Director from Life, A Center for Independent Living and the IL manager, also from LIFE, an IL specialist from DAC-NW serve on the SILC.
- The IL coordinator from the Idaho Commission for the Blind and Visually Impaired (ICBVI) is an ex-officio member of the SILC.
- Center Directors from DAC-NW and LINC frequently attend SILC meetings as invited guests.
- A clinician from the Department of Health and Welfare, Family and Children's crisis services serves on the SILC as an ex-officio member.
- The Outreach and Education Specialist from the Idaho Commission on Aging ICOA serves as ex-officio Council member.

Exchanges between the organizations and constituents named above provide opportunities to learn more about what each organization does and how we may best support each other, thereby improving services and opportunities to our constituents. All the above-mentioned administrators and directors participate in statewide assessment planning as well as SPIL planning meetings.

Other administrators from the Department of Health and Welfare/Medicaid programs and the Administrator of ICBVI programs attend Council meetings as guests as their availability allows. Such participation provides DHW and other agency administrators with information and perspectives that they might not otherwise have in order to enhance community living for people with disabilities.

The IDVR Administrator serves on the Idaho Workforce Development Council (WDC) as a voting member as required under WIOA. Such involvement ensures that employment of people with disabilities is considered beneficial for business and industry.

The Directors or other agency staff of the above-named organizations are active members in Consortium for Idahoans with Disabilities (CID) - a statewide organization that sponsors Fred Riggers - Disability Awareness Day at the Idaho State Capitol. This event provides an introduction for many people with disabilities and their families to the legislative process, advocacy and activities at the statehouse during the legislative session. It also provides an opportunity for legislators to see what we're doing and to meet the people impacted by the advancement (or loss) of services and supports in the community. The CID works throughout the year to systemically improve services for people with disabilities by helping people who receive Medicaid services educate policy makers. The SILC E.D. serves on the CID executive board.

The exponential loss of affordable and accessible housing in recent years disproportionately impacts people with disabilities, families and care providers (workforce) across our state. The SILC director, at

the direction of the Council and via SPIL priorities, works on housing issues across Idaho on a nearly daily basis. The SILC E.D. serves on the governing board for the Intermountain Fair Housing Council (IFHC). SILC staff participate in monthly Idaho Asset Building Network meetings working to address housing shortages across our state through positive, systemic change at the state and federal level. Such partnerships help us have a better understanding of housing needs, specific locations where there are housing shortages and to bring awareness about areas of disability discrimination in housing.

The SILC Program Specialist works extensively with ICBVI, the CILs, the Idaho Office of Emergency Management, the FEMA Region X Regional Disability Integration Specialist and local emergency planners regarding emergency mitigation, planning and recovery. The Program Specialist coordinates the Idaho Inclusive Emergency Coalition (IIEC). The IIEC is made up of statewide representatives, the majority of whom have a disability, as well as representatives from the Red Cross and other volunteer organizations, County Emergency coordinators and Federal Emergency Management Agency staff. The group meets monthly to increase local participation in preparedness projects and activities. The Program Specialist also works with the above groups, providing training to ensure that the disability community is not forgotten in an emergency. Work within emergency preparedness builds relationships and inclusion in all aspects of emergency planning. It is through these relationships that we have been able to more quickly respond to issues related to the Public Health Emergency.

The SILC E.D. continues to serve on the State of Idaho Disaster Medical Advisory Committee (SIDMAC). This gubernatorial appointed committee develops, reviews and revises (as needed), the state Crisis Standards of Care.

SUBPART V - STATEWIDE INDEPENDENT LIVING COUNCIL (SILC)

Section 705 of the Act; 45 CFR Part 1329.14-16

Section A - Composition and Appointment

Item 1 - Current SILC Composition

In the chart below, provide the requested information for each SILC member. The category in which the member was appointed can be described, for example, as ex-officio state agency representative, other state agency representative, center representative, person with a disability not employed by a center or state agency, section 121 funded project director, parent of person with a disability, community advocate, other service provider, etc. Include current vacancies, along with the corresponding appointment category for each. Add more rows as necessary.

Name of SILC member	Employed by CIL, State Agency or Neither	Appointment Category	Voting or Non-Voting	Term Start Date	Term End Date
Brianna Tamayo	CIL	CIL Rep Reg VII Life, A Center	Voting	05/28/2022	05/28/2025
Michael Lefevor	CIL	CIL Director Reg VI Life, A Ce	Voting	05/28/2022	05/28/2025
Sherri Boelter	CIL	CIL Rep Reg I, DACNW	Voting	05/28/2022	05/28/2025
Alan Aamodt	State Agency	Ex-Officio DSE	Non-Voting	05/28/2021	05/28/2024
Erin Olsen	State Agency	Ex-Officio Commission on Aging	Non-Voting	04/07/2021	05/28/2024
Russell Salyards	State Agency	Ex-Officio	Non-Voting	05/28/2021	05/28/2024
Steve Achabal	State Agency	Ex-Officio Commission for the	Non-Voting	05/28/2021	05/28/2024
Anhora Snodgrass	Neither	Person with a disability at La	Voting	05/28/2023	05/28/2026
Brittany Shipley	Neither	Parent Advocate Reg V	Voting	12/27/2021	05/28/2024
Candy Harris	Neither	Reg IV person with a disabilit	Voting	05/28/2020	05/28/2023
Eric Peterson	Neither	Reg II person with a disabilit	Voting	03/10/2022	05/28/2025
Erik Kimes	Neither	Reg III person with a disabili	Voting	05/28/2023	05/28/2026
Justyne Collins	Neither	Reg I person with a disability	Voting	05/01/2023	05/01/2026
Larry Henrie	Neither	Reg IV person with a a disabil	Voting	05/28/2023	09/25/2023
Shannon Morgan	Neither	Person with a disability at La	Voting	05/28/2023	05/28/2026
Shiloh Blackburn	Neither	Reg VI person with a disabilit	Voting	05/28/2022	05/28/2025

Name of SILC member	Employed by CIL, State Agency or Neither	Appointment Category	Voting or Non-Voting	Term Start Date	Term End Date
Tara Adams	Neither	Person with a disability at La	Voting	05/28/2023	05/28/2026
Tara Rowe	Neither	Reg V person with a disability	Voting	05/01/2023	05/01/2026

Item 2 - SILC Composition Requirements

Please provide the information requested in the chart below. Include any current vacancies in a particular appointment category.

SILC Composition	# of SILC members
(A) How many members are on the SILC?	16
(B) How many members of the SILC are individuals with disabilities not employed by a state agency or a center for independent living?	9
(C) How many members of the SILC are voting members?	12
(D) How many of the voting members of the SILC are individuals with disabilities not employed by a state agency or a center for independent living?	9

Section B - SILC Membership Qualifications

Section 705(b)(4) of the Act; 45 CFR 1329.14(a)

Item 1 - Statewide Representation

Describe how the SILC is composed of members who provide statewide representation.

The Idaho SILC follows the State Department of Health and Welfare boundaries. These boundaries divide Idaho's 44 counties into seven regions. Ideally, each region is represented on the SILC by at least one voting member with a disability who is not employed by a Center or the state. Additionally, two of the CILs are represented: Disability Action Center-Northwest (DAC- NW) to the north currently has one appointed staff member, an IL specialist; and from Life, A Center for Independent Living in Eastern Idaho a Center Director and the IL Program Manager serve on the SILC. Representation comes from mostly rural parts of the state and Idaho's most populous area, the Treasure Valley, which includes Caldwell, Nampa and Boise.

There are currently three at large seat openings from otherwise marginalized populations such as immigrant or Native American community member, young adult and underserved or veteran. There are currently two vacancies for a person with a disability in Region IV and VII and we're in the process of filling the Region IV position and are awaiting Governor appointment. This position was previously filled in May when the council member termed off. Unfortunately, the recently appointed member in Region IV resigned for personal reasons.

Our appointment process in cooperation with the Governor's office continues to be difficult and even slower due to required and in-depth criminal background checks and internal delays at the office of the Governor. Given the difficulty, we've begun telling people that an in-depth background check is conducted and if they anticipate anything coming up, we'd appreciate knowing in advance so we can support them through the process. We do not discourage people from applying. However, some have

opted out once learning of the process involved. Complicating the process, due to the length of time appointments may take, some people lose interest or due to gaining employment are no longer able to join us once the appointment has been secured.

The SILC requires all members to be at least 18 years of age. There is no age requirement for Community members who participate in the SILC ad hoc committees or emergency exercises.

Item 2 - Broad Range of Individuals with Disabilities from Diverse Backgrounds

Describe how the SILC members represent a broad range of individuals with disabilities from diverse backgrounds.

The Idaho SILC is comprised of people across the disability spectrum, including people from the Deaf community; individuals who are blind; people with mental illness, Traumatic Brain Injury, intellectual and developmental disabilities, rare illness and people with ambulatory disabilities or combinations of the afore mentioned. We are actively seeking three representatives from an unserved/underserved community as defined in our SPIL and Veterans, for regional or at large positions as well as a person with a disability from Region VII. A current Council member is a Veteran, who is appointed to a regional seat.

The Idaho Inclusive Emergency Coalition (IIEC) and the Health Equity Coalition are a broadly inclusive SILC ad hoc committee that includes people from across the state and disability spectrum. Members include some Council members, advocates from other state and community organizations, such as the Department of Health and Welfare, Caregivers Alliance, FEMA, representatives from state and local public health, and emergency managers.

We continue to make inroads with immigrant populations and the Tribes. One Council member is a Tribal member. This process is slow and on-going.

Above indicates twelve voting members, nine of whom are people with disabilities who do not work for a CIL or the state. The Council may also elect to add other at-large seats to ensure cross disability representation and majority. Specific at-large seats are not added into our by-laws. The Council values the input of new members, especially young adults and those from communities otherwise not well represented.

Item 3 - Knowledgeable about IL

Describe how SILC members are knowledgeable about centers for independent living and independent living services.

Council applicants are initially referred for SILC membership through the Centers or other disability organizations and stakeholder groups. Most frequently, applicants have received services from a CIL or other disability organization which promotes disability rights, or they may have participated in an IL event.

Applications include a resume (or similar document explaining interest and experience). Upon review, the membership committee recommends an interview to be conducted by the membership chair(s) to learn more about the applicant's experience and understanding of IL. Upon final review by the committee, a recommendation is made to the full Council. Upon successful Council approval, applicants complete paperwork for a Gubernatorial appointment. SILC staff submit the appointment form to the Governor's office. Upon successful completion of the background check, applicants are appointed and swear an oath of service to the state of Idaho.

New Council members are provided with a Council orientation including an in-depth workshop on general and Idaho specific disability and Independent Living history, and an introduction into IL philosophy within the context of the SILC. These introductory workshops are provided by members of the executive committee and SILC staff. Public notice is provided for the orientation and current members and the public are invited to participate.

During our two-day Council meetings (twice a year) most of day two is dedicated to training on topics requested by Council members. In 2023 the executive committee decided that training should focus on information that would help Council members become more knowledgeable about the SPIL and their duties as SILC members, and training to improve communication within the Council. In 2023, a trainer recommended from the Idaho Division of Human Resources provided an interactive workshop on Active Listening Skills. The SILC hosted an additional two day training session with the help of ILRU for 47 SILC and Center board members and staff that dove deeper into the importance of the SPIL and federal mandates. Additional training topics included: introduction to the resources, training and services available through the Association of Programs for Rural Independent Living, building relationships and working together, understanding SILC committees, roles and responsibility, Emergency Preparedness, and sections of the SILC member handbook. Most of trainings are provided by staff from outside agencies, including some of our national partners and CIL/SILC staff who are subject matter experts.

Council members are encouraged and supported to provide training during Council meetings and to provide workshops at area conferences and events, including national, state, regional IL and other conferences. Executive committee members provided training on disability history and shared lived experiences growing up before the accommodations we have today existed and how that impacted their lives.

The SILC generally sends 3-10 Council members to local, state and national training as resources allow. Further, SILC staff and the executive committee share training opportunities available on-line through HHS, ACL, ILRU, NCIL and APRIL. These are shared through a monthly newsletter emailed to all council members. Council members keep a log of completed training in their Council binders and report activity in quarterly surveys.

Section C - SILC Staffing and Support

Item 1 - SILC Staff

Please provide the name and contact information for the SILC executive director. Indicate the number and titles of any other SILC staff, if applicable. Also indicate whether any SILC staff is also a state agency employee.

Mel Leviton, FTE Executive Director 120 South Cole Road Boise, Idaho 83709 208.334.3800
mel.leviton@silc.idaho.gov

FTE One Administrative Assistant, FTE One Program Specialist/Planner, FTE One Financial Specialist,

Total of four (4) employees

The Idaho SILC is a governmental entity, yet not a state agency. The SILC does not operate from within another state agency or organization. The Idaho SILC is not a 501c3. Idaho SILC staff are state employees, receiving state benefits such as health insurance, public retirement, vacation and sick leave. SILC staff, except for the executive director (E.D.), are protected by state employee human resources department guidelines. The E.D. serves at the will of the Council with no such assurances for employment or opportunity for interdepartmental transfer.

Item 2 - SILC Support

Describe the administrative support services provided by the DSE, if any.

The Division of Vocational Rehabilitation (IDVR) - the DSE - disburses Title 7, Part B funds on a reimbursement basis. IDVR reviews invoices submitted for reimbursement. IDVR staff respond to questions or concerns related to allowable expenses and accounting questions.

The IDVR administrator provides access to the PPR for the DSE fiscal staff and Idaho Commission for the Blind and Vision Impaired staff to enter the appropriate sections of the PPR. IDVR fiscal staff enters DSE data prior to submission. The IDVR administrator reviews the PPR prior to submission.

Beginning in 2020 and continuing through the 2021-2024 SPIL, the DSE does not charge the 5% allowable administrative fee.

Section D - SILC Duties

Section 705(c); 45 CFR 1329.15

Item 1 - SILC Duties

Provide a summary of SILC activities conducted during the reporting year related to the SILC's duties listed below:

(A) State Plan Development

Describe any activities related to the joint development of the state plan. Include any activities in preparation for developing the state plan, such as needs assessments, evaluations of consumer satisfaction, hearings and forums.

The three Idaho Centers, the Idaho SILC, ICBVI and the DSE, IDVR, began preliminary work on what we thought would be the 2024-26 State Plan for Independent Living (SPIL) in the fall of 2021. There was agreement that the SPIL should address the statewide needs of Idahoans across disabilities and lifespan; and the Idaho SILC conducted a statewide survey of the needs of people with disabilities January 25 - September 16, 2022. Given the extension of the 2021-23 SPIL, we had time to drill deeper and develop a more meaningful response to address needs through the next SPIL phase.

We received input from a total of 871 Idahoans representing 34 of the 44 counties. The majority of the responses came from individuals between the ages of 41- 50 and 67% were between 21 - 60. Surveys generally collect quantitative data and while important, the responses received demonstrate a qualitative perspective often missed through such surveys. One open-ended question in the survey was, "If you could educate (teach) people (businesses, government, family, friends, other people with disabilities) on ONE topic, what would it be?" We expected and received answers such as: disability etiquette, Americans with Disability Act (ADA) laws, and disability rights, etc. However, the responses which we received the most, centered around connection and acceptance. Statements like, "We are just like everyone else", "Patience", "Kindness", "Inclusion", and "Respect" were mentioned repeatedly.

The SILC contracted with the Boise State University Center on Aging and worked with an intern to more thoroughly evaluate responses received from the survey, interviews and listening sessions. The greater depth provided helped the SPIL Planning Committee better build goals and objectives for the upcoming 2025-2027 SPIL.

The SPIL Planning Committee continued to meet through 2023 and into 2024, refining the 2025-2027 SPIL. Once reviewed during the January 2024 quarterly Council meeting, the draft plan will be released for a 30-day public comment period, followed by committee revision based on comment received. The final version will be presented to the Council at the April quarterly meeting for review and approval for submission prior to the June 30 deadline.

(B) Monitor, Review and Evaluate the Implementation of the State Plan

Describe any activities related to the monitoring, review and evaluation of the implementation of the state plan.

The Planning Committee, Executive Committee and SILC staff continue to improve the quarterly online survey to increase participation and ease quarterly reporting for Council members and Part B subrecipients. The planning committee strives to develop and improve questions best suited to match the SPIL and provide meaningful information to the Council during quarterly meetings. Surveys are sent out during the first week of each new quarter during the SPIL cycle. The SPIL is reviewed and monitored first by the executive director and the planning committee chair. The report is then shared with the executive committee for input, suggestions and review and finally reported during SILC Quarterly Business Meetings. Goals and objectives are reviewed for activity updates and review of success/barriers by the germane committees during the quarterly committee meetings.

Idaho SILC staff monitor and review the 2021-2024 SPIL monthly, followed by quarterly reviews conducted by the planning committee; then the full SILC during Council meetings. The SILC meets at least quarterly to review, monitor and potentially revise the SPIL as needs warrant. Expectations in 2023 were met or exceeded within the goals. Some activities are modified based on shifting resources, response to the health emergency and emerging issues, such as the imploding housing crisis and

direct care worker shortage across Idaho impacting Idahoans with disabilities and their family's disproportionality.

(C) Coordination With Other Disability Councils

Describe the SILC's coordination of activities with the State Rehabilitation Council (SRC) established under section 105, if the state has such a Council, or the commission described in section 101(a)(21)(A), if the state has such a commission, and councils that address the needs of specific disability populations and issues under other Federal law. Please state whether the SILC has at least one representative serving as a member of the SRC and whether the SILC has any members serving on other councils, boards or commissions in the state.

- The SILC Program Specialist serves on the SRC, ensuring representation from the IL community and communication between the SRC and the SILC. A regional DVR General Supervisor serves on the SILC to ensure communication and participation with each other. They also participate in Neighbors United, a collaborative of individuals, community leaders, organizations and companies who strengthen refugee resettlement resources locally as well as many behavioral health workgroups.

- The Council chair serves on Community NOW!, a project through the Department of Health and Welfare, Medicaid improving Developmental Disabilities waiver services (HCBS).

- The Council vice-chair serves on the Youth Empowerment Services (YES) Project and Idaho State Juvenile Justice Commission.

- Other council members serve on the Saint Alphonsus Deaf and Hard of Hearing advisory board, the Idaho Council on Domestic Violence and Victim Assistance and National Alliance on Mental Illness, to name a few.

- The SILC and the Idaho Council on Developmental Disabilities frequently serve on many of the same Medicaid waiver workgroups. The two Councils frequently partner on statewide projects. During the summer of 2023, the two Councils hosted a bi-weekly lunch and learn series to help people with disabilities and family members better understand Idaho's two adult Medicaid waivers (DD and A&D), which waiver they are on and how to advocate for improved training and wages to address the direct care workforce crisis. The two Councils have discussed member exchanges to learn from each other about needs and how respective Council operate.

- Several Council members are also members of local community groups, including faith based and political organizations. Council members are committed to highlighting the need for meeting space access and disability issues within these forums.

- CIL Directors and several CIL staff serve on a variety of local, regional and state boards and committees to elevate the issues and concerns of the disability community, including local ADA advisory committees through city councils and highway districts.

- The SILC executive director is a gubernatorially appointed member of the State of Idaho Disaster Medical Advisory Committee, the State Vaccine Advisory Committee, and several other public health and Department of Health and Welfare committees and workgroups, primarily focused on HCBS improvements and the direct care workforce shortage. The SILC executive director serves on the Intermountain Fair Housing Council and the St. Alphonsus Hospital board as well as several other housing committees and workgroups across the State.

(D) Public Meeting Requirements

Describe how the SILC has ensured that all regularly scheduled meetings and other public hearings and forums hosted by the SILC are open to the public and sufficient advance notice is provided.

The Idaho SILC held quarterly council meetings, quarterly executive committee meetings (one month prior to Council meetings) and other meetings, such as SPIL development and planning meetings and the Idaho Inclusive Emergency Coalition.

Quarterly meetings are scheduled annually during the summer meeting and posted on our website as soon as dates and locations are confirmed. Notice of scheduled SILC meetings, including agendas are emailed to stakeholders, Council members and other community groups a minimum of 3 - 5 days in advance of public meetings, though generally two weeks prior at the request of Council members.

Visitors on the SILC website and Facebook page can also view meeting Notices. All meetings and agendas are posted on our website, Facebook page and exterior doorway at least 24 hours in advance of meetings in compliance with Idaho's Public Meetings laws, with a stated goal of providing notice 72 hours in advance when possible. Members of the public are welcome to attend all meetings, except executive sessions that address human resource issues. Additionally, all meetings and agendas are posted on the state's Townhall website in compliance with state public meeting law.

The quarterly council meetings are held in-person three times a year, and the January meeting is held on-line to alleviate travel worries in the wintertime and conserve resources. ASL is provided for all Council meetings. Given Idaho's often poor broadband, ASL doesn't always work well for some participants. However, captioning also has proven to have limited success. While we have experimented with various means to provide ASL and captioning for our public meetings, we've yet to find a solution that works for everyone, especially for hybrid (in-person & virtual) meetings. We have purchased technology to help us address these concerns and will continue to work with our Council members and constituents from the Deaf and hard of hearing community to improve access.

Meeting materials are mailed out to Council members who prefer hard copy documents in advance or for virtual meetings. Large print materials are sent to Council members who request the format. Documents are also provided to participants who aren't Council members in advance on request prior to or after a meeting.

Item 2 - Other Activities

Describe any other SILC activities funded by non-Part B funds.

The SILC uses state general funds to provide our match for Title 7 Part B and support program staffing and Title 1, Innovation and Expansion funds, which helps offset administrative costs.

Additionally, the SILC maintains a small, unrestricted fund in which donations and interest deposits accumulate and support activities such as extra ASL interpreters for community events (not hosted by the SILC), supplies for youth activities, food purchase for groups meeting for a short period of time during meals times, such as an evening SILC orientation and other activities the Council deems

appropriate.

The program specialist position is largely supported through state general funds. These funds fully support 1 FTE Program Specialist who provides emergency preparedness and recovery education and training, technical assistance in opening ABLE accounts in other state programs (Idaho doesn't have an ABLE program) and financial literacy education.

Activities under these two programs are generally funded through state funds only, though there may be some overlap with programs funded under Title 7 Part B funds. State funds may also be used to support publications in languages other than English. These activities, funded by the state provide other avenues for the SILC to take the IL message and resource information to our frontier communities. State General funds are used to support SILC operations, conferences and other community events and activities above Part B allocated resources.

The Idaho SILC Executive Director may also use state general funds or unrestricted funds if there is concern about an activity falling within federal grant requirements.

Section E - Training and Technical Assistance Needs

Section 721(b)(3) of the Act

Please identify the SILC's training and technical assistance needs. The needs identified in this chart will guide the priorities set by ACL for the training and technical assistance provided to CILs and SILCs.

Training And Technical Assistance Needs	Choose up to 10 Priority Needs --- Rate items 1-10 with 1 being most important
Advocacy/Leadership Development	
Systems Advocacy	8
Legislative Process	6
Applicable Laws	
Rehabilitation Act of 1973, as amended	5
Data Collecting and Reporting	
PPR/704 Reports	7
Performance Measures contained in Program Performance Report	9
Marketing and Public Relations	
Community Awareness	1
Networking Strategies	
Among CILs & SILCs	10
Outreach to Unserved/Underserved Populations	
General Overview	4
SILC Roles/Relationship to CILs	
Implementation (monitor & review) of SPIL	3
Role and Responsibilities of General Members	2

SUBPART VI - STATE PLAN FOR INDEPENDENT LIVING (SPIL) COMPARISON AND UPDATES, OTHER ACCOMPLISHMENTS AND CHALLENGES OF THE REPORTING YEAR

Section 704(n) of the Act

Section A - Comparison of Reporting Year Activities with the SPIL

Item 1 - Progress in Achieving Objectives and Goals

Describe progress made in achieving the objectives and goals outlined in the most recently approved SPIL. Discuss goals achieved and/or in progress as well as barriers encountered.

Goal 1: The Idaho IL Network will promote and advocate for the integration, inclusion and equity of all Idahoans with disabilities across communities, lifespan and cultures.

Objective 1.1: State and local emergency officials include individuals with disabilities and address their unique needs in emergency planning: mitigation, preparation, response and recovery.

Objective 1.2: The IL Network will represent the voice of individuals with disabilities in improving the availability of housing, transportation, health care and community access.

Objective 1.3: The Idaho SILC, the Network of Centers, ICBVI, and the DSE will promote financial independence, including ABLE and other savings programs, and health care options, including the Medicaid for Workers with Disabilities program, by providing information and education to Idahoans with disabilities, service providers and community organizations.

Notes:

Objective 1.1 - It is increasingly difficult to get people with disabilities to local emergency planning group meetings and exercises due to a lack of community support workers for ADLs and community activities. Benchmarks were achieved due to the availability of statewide virtual meetings. However, it is worth noting that in person works better for many people with disabilities and others do not have access to technology to participate.

Objective 1.3 - The benchmarks for this objective are primarily driven by SILC staff activities. CILs and ICBVI complete this work generally driven by one-on-one work with individuals.

Objectives 1.1-1.3: Benchmarks Achieved

Goal 2: The Idaho IL Network will work to strengthen effective Network operations that are adequately funded and increase capacity.

Objective 2.1 - Years 1 and 2: Address Subchapter Part C funding inequities, Years 1 and 2

Note: Objective 2.2 Years 1-3 are complete and now dependent on Reauthorization of the Rehabilitation Act of 1973, as amended.

Objective 2.2 - Year 3: Address Subchapter Part C funding inequities

Note: Objective 2.2 Years 1-3 are complete and now dependent on Reauthorization of the Rehabilitation Act of 1973, as amended.

Objective 2.3: The three Idaho Centers: Living Independence Network Corporation (LINC), Life, A Center for Independent Living and Disability Action Center Northwest (DAC-NW) and the Idaho Commission for the Blind and Visually Impaired (ICBVI) will collaborate and work to identify other resource development options to enhance providing independent living services to the citizens of Idaho. On-going.

Note:

Benchmarks Achieved

Goal 3: Idahoans with disabilities receive the community-based supports they need to live in their community of choice with greater independence.

Objective 3.1: Provide Independent Living services to people with disabilities to increase community access in rural areas and/or unserved and underserved populations identified in section 3.2 of the 2021-24 SPIL.

Objective 3.2: The Idaho SILC, Network of Centers and ICBVI will expand cultural competence by participating in events, listening and learning about community specific concerns/issues, to/with unserved/underserved populations. See Section 3.2 of the 2021-24 SPIL definitions.

Objective 3.3: Increase demonstrable community connections by the number of, and participation in, community cross disability peer to peer mentoring and learning groups.

Benchmarks achieved through revised survey process recommended by the planning committee, and Part B partners.

Item 2 - SPIL Information Updates

If applicable, describe any changes to the information contained in the SPIL that occurred during the reporting year, including the placement, legal status, membership or autonomy of the SILC; the SILC resource plan, the design of the statewide network of centers; and the DSE administration of the ILS program.

SILC Resource Plan updates for FY2024: The Governor's office and state legislature increased wages for state employees beginning July 1, 2023.

The increase was beyond the ability of the SILC to cover. The administrator of DVR, our DSE and the SILC executive director negotiated an increase in Innovation and Expansion funds beginning October 1, 2022 to cover the increased budgetary expense. It will likely be an ongoing challenge to meet wage increases implemented by state government without sufficient state fund increases.

There is an understanding that if Idaho DVR were to go into order of selection, the increase would cease and call all I&E funds directed toward the SILC resource plan into question. Order of Selection is not an imminent threat at this time.

Section B - Significant Activities and Accomplishments

If applicable, describe any significant activities and accomplishments achieved by the DSE and SILC not included elsewhere in the report, e.g. brief summaries of innovative practices, improved service delivery to consumers, etc.

The DSE and the SILC continue to work together to find innovative ways to reach our most underserved areas. We consider opportunities to aid in contracts between the DSE and the CILs as they are presented. We're generally well informed of the other's efforts and how we may assist each other in our common goals of independent living for Idahoans with disabilities. We often consult each other as issues arise, addressing our concerns with other disability service organizations, as well as with state and congressional policy makers.

CMS was to visit Idaho to conduct Heightened Scrutiny of Statewide Transition Plans (STP), HCBS settings in May of 2023. The SILC partnered with the Idaho Triad (Council on Developmental Disabilities, Disability Rights Idaho and the Center on Disabilities and Human Development) and our Federal partners at ACL and OILP to meet with CMS staff in preparation for the visit. CMS cancelled the visit with little explanation. The SILC worked with our state and federal partners to get CMS to reengage with Idaho and convince them to visit, which they did September 11-14, 2023. Of significant concern since initial approval of the transition plan was person centered planning, loss of case management on the A&D waiver (in 2011) and settings which were often isolating. The SILC ED participated in the Medicaid workgroup that developed the transition plan and in 2015 and argued to no avail that the survey method used to determine compliance was tantamount to the proverbial fox guarding the henhouse.

In the summer and into the fall of 2023, the SILC and DD Council directors hosted a lunch and learn series to help people understand what services they were getting (many people don't know what waiver they get or what services for which they could be eligible) and to educate them on ways to advocate for improved access to home and community based services, i.e.: direct care workers. As is true across the U.S., Idaho is facing a critical direct care workforce shortage. According to a study conducted by our own Office of Performance Evaluations, Idaho's direct care workforce shortage is more than three times worse than the national average. You can learn more about the OPE study here: <https://legislature.idaho.gov/ope/reports/r2202/>

As part of the lunch and learn series, the SILC director, DD Council staff and advocates met with the administrator of the division of financial management who develops and determines the governor's budget recommendations, including Medicaid reimbursement rates and the director of cabinet affairs to address the workforce shortage and impact of the shortage on people with disabilities. Advocates have not previously done a good job of helping the general public and by extension, policy makers understand the difference between Medicaid expansion and HCBS. While we wholeheartedly support Medicaid expansion as it serves many people with disabilities, direct care workers, families and others, it is important to make a distinction between HCBS and state plan Medicaid. As reflected in the budget recommendation, case management is included in the proposed 2025 Medicaid budget as well as some form of rate increase. We believe the successful inclusion of these two budget areas is at least in part to the advocacy work which was strengthened through the lunch and learn series. It remains to be seen if these recommendations will be approved by policy makers.

Section C - Substantial Challenges

If applicable, describe any substantial problems encountered by the DSE and SILC, not included elsewhere in this report, and discuss resolutions/attempted resolutions, e.g., difficulty in outreach efforts; disagreements between the SILC and the DSE; complications recruiting SILC members; complications working with other state agencies or organizations within the state.

Given the increased need for education, outreach and services across our state, the lack of mandated and designated federal funding for the SILC is a growing concern. The CILs and ICBVI do not have enough Part B funding to support Part C and Older Blind programs. While the Council and the planning team have granted the SILC 30% of part B funding annually as allowed by the Act, these funds could be used to increase direct services and support to Idahoans across disabilities and lifespan. We recognize that Part C, B and Older Blind funding is not enough to serve our communities. Without increased funding for IL services and CIL operations and dedicated funding to support the SILC's outreach, education and advocacy operations, it is hard to see how we can improve outcomes in underserved communities, especially in a state with a population growth of 1.3% in the year, including at least two metro areas with growth over 30% in ten years. We're hopeful that these funding concerns will be addressed in the next reauthorization of the Rehabilitation Act. Until then, we strive to reach and teach independent living to people with disabilities and the communities they enrich. As it is our nature to find a way.

We have previously described challenges getting timely appointments to the SILC from the Governor's office.

The governor's office has determined that it will complete the evaluation of the SILC ED, thus removing the autonomy of the Council to do so as directed by federal and state law. The Governor's office reviews the Council's evaluation of the SILC executive director and reviews their recommendations. However, the Governor's retains final authority over the evaluation and recommended salary increase, if any. While this is in conflict with the autonomy of the Council in regard to full oversight of the Executive Director, the Council has thus far determined it is prudent to continue to work to resolve the issue internally and not request the assistance of ACL to address these concerns.

Further impacting SILC autonomy is increased pressure in the form of directive(s) from the Governor's office that state agencies, among which the SILC is included by statutes, shall not testify or communicate with the press without advance notice and approval from the Governor's office. This is not only in direct conflict with federal law, but also state law:

Â§56-1204. ADDITIONAL POWERS AND DUTIES.

The council shall carry out those powers and duties set forth in the rehabilitation act of 1973, as amended. The council shall also:

- (1) Assess the need for services for Idahoans with disabilities and advocate with decision makers;
- (2) Supervise and evaluate such staff as may be necessary to carry out the functions of the council;
- (3) Ensure that all regularly scheduled meetings of the council are open to the public and that sufficient advance notice of meetings is provided pursuant to the open meeting law;
- (4) Prepare reports and make recommendations, as necessary;
- (5) Perform other activities the council deems necessary to increase the ability of Idahoans with disabilities to live independently;
- (6) Promulgate rules, as may be necessary, in compliance with chapter 52, title 67, Idaho Code.[56-1204, added 2004, ch. 327, sec. 1, p. 979; am. 2016, ch. 224, sec. 2, p. 619.]

As an independent state entity not embedded within another we are sometimes challenged by the increasing bureaucracy of the state government. As an agency staffed by four people it is often daunting to fit into structures designed for agencies with hundreds of personnel. The challenge has increased recently due to changes in state financial and human resource software as well as a

statewide push to increase transparency. We of course applaud all efforts to improve transparently to our financial activities, the increased workload has impacted the director's ability to work with policy makers on issues of import to the disability community.

Further, due to increased political scrutiny, we are concerned about our ability to access and address issues impacting underserved communities including communities of color, people who are non-native English speakers and people from LGBTQIA+ communities, and others facing health disparities across disability communities. For example, we shared earlier in our PPR that we worked with established community partners to distribute more than 30,000 COVID tests in 2023 through a grant from HHS. We prepared an in state annual report publication with an eye toward educating policy makers about the disability community and the work of the SILC. We deliberately chose not to include our successful work with partners distributing COVID tests because the public health emergency has often been politicized in our state. Further, calling out some underserved populations to which we directed much of this work (and other work in the SPIL) is often deemed unworthy at best and sacrilege at worst. Doing the work and dodging the politicization of the work can be daunting.

Section D - Additional Information

Include any additional information, suggestions, comments or explanations not included elsewhere in the report.

Below is the conclusion of our Assessment report issued in 2023.

The SILC reviews progress on the current State Plan for Independent Living (SPIL) at least quarterly. Through this process the Council and our partners are aware of on-going and emerging issues within the disability community. The statewide assessment allows a deeper dive into the issues we may anticipate, typically issues around housing access and affordability, physical access to public spaces, transportation, access to home and community supports, employment, education/training and healthcare rise to the top as well as those of which we may have little prior knowledge. It is no surprise that these concerns have grown given the recent pandemic, resulting in isolation and loss of once relied upon resources, i.e.: volunteer driver programs which remain virtually non-existent across Idaho. The loss of affordable housing due to our state's phenomenal growth is perhaps the most pronounced concern, impacting people with disabilities and the direct support professionals who help them stay in their homes. As people move further from resources to maintain affordability, they lose connections, transportation and lifesaving services.

The assessment voices pleas for help while also demonstrating the depth and resilience of the disability community.

The State Plan for Independent Living can be a meaningful piece of how we connect Independent Living services to the people who need them. The Plan can be a roadmap, guiding us to meet people where they are. We can use the information from people who took time to offer it through surveys, interviews and meetings during the 2022-2023 assessment. When drafting the Plan, we can correlate the information gathered with other significant reports that include county demographics about housing, transition youth, Medicaid Home and Community Based Services, public access and transportation.

The loss of connection remains overwhelming for many. Independent Living is about connecting people with disabilities to each other via peer to peer support, including teaching each other how to cook, shop, find support workers, voice our needs to policy makers AND fly fishing, "facts about cats" and basic car repair. It's about helping each other get the services and supports we need in a way that works for us in communities of our choosing.

The State Plan is our opportunity to demonstrate that we heard and are willing to act. Independent Living is not about who saves the day - it is about how we save the moment with and for each other.

PUBLIC HEALTH WORKFORCE (PHWF) - DATA REPORTING REQUIREMENTS

Grant Number	
Reporting Period	10/01/2022 - 09/30/2023
State	ID

Item 1 - Total Number of Full-Time Equivalents (FTEs)

Total Number of Full-Time Equivalents (FTEs)	0
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Item 2 - Type of Public Health Professional(s) Hired

Type	#
Case Investigator	0
Contact Tracer	0
Social Support Specialist	0
Community Health Worker	0
Public Health Nurse	0
Disease Intervention Specialist	0
Epidemiologist	0
Program Manager	0
Laboratory Personnel	0
Informaticians	0
Communication and Policy Experts	0

Item 3 - The Activities They Are Engaged In To Advance Public Health

SUBPART VII - SIGNATURES

Please sign and print the names, titles and telephone numbers of the DSE directors(s) and SILC chairperson.

Shiloh A Blackburn - Signed Digitally
SIGNATURE OF SILC CHAIRPERSON

01/24/2024
DATE

Shiloh A Blackburn - SILC Chair
NAME AND TITLE OF SILC CHAIRPERSON

(208) 360-7241
PHONE NUMBER

Jane Donnellan - Signed Digitally
SIGNATURE OF DSE DIRECTOR

01/25/2024
DATE

Jane Donnellan - Administrator
NAME AND TITLE OF DSE DIRECTOR

(208) 334-3390
PHONE NUMBER