

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: 2025

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	\$348,060.00
(B) Title VII, Ch. 1, Part C - For 723 states Only	\$0
(C) Title VII, Ch. 2	\$0
(D) Other Federal Funds	\$129,500.00
Subtotal - All Federal Funds	\$477,560.00

Item 2 - Other Government Funds

(E) State Government Funds	\$0
(F) Local Government Funds	\$0
Subtotal - State and Local Government Funds	\$0.00

Item 3 - Private Resources

(G) Fees for Service (program income, etc.)	\$0
(H) Other resources	\$0
Subtotal - Private Resources	\$0.00

Item 4 - Total Income

Total income = (A)+(B)+(C)+(D)+(E)+(F)+(G)+(H)	\$477,560.00
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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	\$477,560.00
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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	\$104,418.00
(2) Provided IL services to individuals with significant disabilities	\$0	\$73,092.60
(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	\$153,146.40
(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	\$17,403.00
Totals	\$0.00	\$348,060.00

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
SILC	Res plan systemic underserved outreach education	\$104,418.00	\$11,602.00	N/A	N/A
DAC-NW	Statewide education outreach resource development	\$17,403.00	\$1,933.67	N/A	N/A
LINC	General CIL Operations	\$85,274.70	\$9,474.97	N/A	N/A
LIFE	General CIL Operations	\$67,871.70	\$7,541.30	N/A	N/A
ICBVI	Direct IL services outreach education	\$73,092.60	\$8,121.40	N/A	N/A
Total Amount of Grants and Contracts		\$348060	\$38673.34		

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.

No Title VII, Part B grants or contracts were issued by the DSE for purposes outside of direct IL services or general CIL operations during the reporting period.

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.

As the Designated State Entity (DSE), the Idaho Division of Vocational Rehabilitation (IDVR) maintained oversight of Title VII, Chapter 1, Part B funds during the reporting year. Given the small dollar amount and low-risk nature of the subaward, IDVR implemented a right-sized, light-touch monitoring strategy consistent with federal requirements.

Oversight activities included:

- * Reconciliation of passthrough expenditures;
- * Review of financial documentation submitted by the SILC and ICBVI;
- * Periodic communication with subrecipients regarding program performance and allowability; and
- * Participation in statewide IL planning and assessment activities.

A DSE representative also serves on the SILC and actively participates in quarterly Council meetings. During the reporting year, the representative assisted in monitoring activities and collaborated with the SILC on survey development and ongoing assessment efforts that support State Plan for Independent Living (SPIL) implementation and evaluation.

No findings or corrective actions were required during the reporting period. Beginning next year, due to federal requirements the DSE (IDVR) will implement a Administrative Time-Based Cost Recovery rate to reflect administrative oversight in accordance with its federally approved indirect cost structure. This is anticipated to be less than one half of one percent for time spent on the grant.

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.

During the reporting year, the State Independent Living Council (SILC) reported 1.0 FTE charged to Title VII, Part B funds in a decision-making capacity. This position is filled by an individual with a disability and reflects administrative and leadership responsibilities directly supporting the independent living program.

The Designated State Entity (IDVR) provided administrative oversight for the grant, including reconciliation of passthrough funds and light-touch fiscal monitoring. However, no IDVR staff time was charged to the grant during the reporting period. Beginning next year, due to federal requirements the DSE (IDVR) will implement a Administrative Time-Based Cost Recovery rate to reflect administrative oversight in accordance with its federally approved indirect cost structure. This is anticipated to be less than one half of one percent for time spent on the grant. No costs were charged for this year.

In addition to fiscal oversight, the DSE maintained an active role in the implementation and monitoring of the IL program.

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	1	1
Other Staff	0	0

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	81
(2) Enter the number of CSRs started since October 1 of the reporting year	27
(3) Add lines (1) and (2) to get the <i>total number of consumers served</i>	108

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	3
(2) Withdrawn	0
(3) Died	0
(4) Complete Goals	14
(5) Other	7
(6) Add lines (1) + (2) + (3) + (4) + (5) to get <i>total CSRs closed</i>	24

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	84

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	106
(2) Number of consumers with whom an ILP was developed	2
(3) <i>Total number of consumers served during the reporting year</i>	108

Section E - Age

Indicate the number of consumers in each category below.

	# of Consumers
(1) Under 5 years old	0
(2) Ages 5 - 19	5
(3) Ages 20 - 24	5
(4) Ages 25 - 59	97
(5) Age 60 and Older	1
(6) Age unavailable	0
(7) <i>Total number of consumers served by age</i>	108

Section F - Sex

Indicate the number of consumers in each category below.

	# of Consumers
(1) Number of Females served	63
(2) Number of Males served	45
(3) <i>Total number of consumers served by sex</i>	108

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	3
(4) Native Hawaiian or Other Pacific Islander	1
(5) White	92
(6) Hispanic/Latino of any race or Hispanic/Latino only	8
(7) Two or more races	0
(8) Race and ethnicity unknown	2
(9) <i>Total number of consumers served by race/ethnicity</i>	108

Section H - Disability

Indicate the number of consumers in each category below.

	# of Consumers
(1) Cognitive	17
(2) Mental/Emotional	31
(3) Physical	23
(4) Hearing	12

	# of Consumers
(5) Vision	108
(6) Multiple Disabilities	19
(7) Other	35
(8) <i>Total number of consumers served by by disability</i>	245

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	2	2
(B) Assistive Technology	14	10
(C) Children's Services	0	0
(D) Communication Services	9	6
(E) Counseling and related services	10	8
(F) Family Services	0	0
(G) Housing, Home Modification, and Shelter Services	0	0
(H) IL Skills Training and Life Skills Training	20	15
(I) Information and Referral Services	14	12
(J) Mental Restoration Services	0	0
(K) Mobility training	14	10
(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	2	1
(Q) Recreational Services	0	0
(R) Rehabilitation Technology Services	12	9
(S) Therapeutic Treatment	0	0
(T) Transportation Services	1	1
(U) Youth/Transition Services	0	0
(V) Vocational Services	0	0
(W) Other	0	0
Totals	99	75

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	13	3	10
Communication	54	10	44
Mobility/Transportation	65	14	51
Community-Based Living	11	2	9
Educational	4	1	3
Vocational	4	3	1
Self-Care	15	2	13
Information Access/Technology	56	14	42
Personal Resource Management	6	0	6
Relocation from a Nursing Home or Institution to Community-Based Living	1	0	1
Community/Social Participation	6	3	3
Other	24	8	16
Totals	259	60	199

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	8	8	0
(B) Health Care Services	1	1	0
(C) Assistive Technology	12	11	1

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 ____ / did not **X** 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.

During FFY2025, the Independent Living (IL) program at ICBVI experienced a year marked by meaningful accomplishments as well as notable challenges. One of the most persistent barriers facing Idahoans who are blind or visually impaired continues to be the limited availability of accessible public transportation, especially in rural and underserved regions of the state. Many communities simply do not have structured transit systems, and options such as Uber or Lyft either do not operate in those areas or are priced far beyond what many individuals can reasonably afford. This lack of reliable mobility significantly restricts access to essential services, employment opportunities, medical appointments, and community participation.

Compounding these transportation challenges, the continually rising cost of living has placed additional strain on individuals seeking to maintain their independence. Housing costs in Idaho have increased at an unprecedented rate over the past several years, creating substantial financial pressure and making it difficult for many people to secure stable, affordable housing. These increases are mirrored in the cost of food, insurance, utilities, and other basic expenses, making routine daily living more burdensome for those already navigating vision loss.

Finally, recent federal funding cuts--implemented with the passage of the One Big Beautiful Bill Act--have further affected individuals' access to essential supports such as personal care services. These reductions have created gaps in assistance that many people rely on to manage daily activities safely and independently. Together, these factors underscore the ongoing need for comprehensive advocacy, resource development, and collaboration to ensure that Idahoans who are blind or visually impaired can continue to thrive and live independently in their communities.

Despite these types of barriers and obstacles, the IL program continues to provide essential services for our clients, with many having wonderful and important successes. One example of this is an IL client, who for the purpose of confidentiality we will call Amy.

For nearly two years, Amy has been receiving IL services through ICBVI. When she first came to the program, she was fairly new to her vision loss and had recently been declared legally blind. The rapid changes in her vision left her feeling overwhelmed and unsure of how she could continue caring for herself and her family. Everyday tasks that had always been second nature, navigating her community, transportation, preparing meals, managing family finances, just to name a few, were extremely difficult and at times, overwhelming. She reported that her independence was "slipping away" and that she felt somewhat of a burden because her husband was having to perform many of the tasks that she had, up to that point, always done.

Amy began receiving some Orientation and Mobility training, to allow her to better navigate her surroundings, as well as her husband and children learning sighted guide techniques. Her ICBVI

Rehabilitation Teacher also provided extensive instruction in activities of daily living, helping her learn non-visual techniques for organization, labeling, meal preparation, and household tasks. Part B funds were used to purchase essential items that supported her progress, allowing her to practice and implement these new skills.

Assistive technology training became another turning point for her. With hands-on instruction in using the accessibility features on her smartphone, Amy learned to manage communication, scheduling, and information independently again. What once felt like an impossible learning curve evolved into an empowering tool that she uses daily to stay connected with her children's school events, communicate with her spouse, manage appointments, and be more independent.

Today, Amy's independence has grown to a level she once believed she had lost permanently. Her progress has allowed her not only to maintain her home and family roles but to engage in a fuller, more active life. She now feels more comfortable moving through her community, preparing meals, managing her devices, and structuring her day with far less assistance. What once seemed overwhelming has gradually become manageable.

Amy has even started to consider possibilities she had completely dismissed when her vision changed. For the first time since her vision loss, she is thinking about whether vocational skills training or employment might be part of her future. While she is not yet sure what type of job she wants, she now believes that work could be possible. Something that felt entirely out of reach before she began IL services.

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	26.00	Provide education and outreach	Educated professionals, providers, and individuals about blindness and visual impairment to help expand expectations for people with vision loss.
Independent Living	One on one and group communication	ICBVI	38.00	Provide education and outreach to medical providers	Provided education to physicians, hospitals, and clinic staff across Idaho about ICBVI services and effective practices for working with blind or visually impaired patients.
Independent Living	Community, Health and Senior fairs	ICBVI	109.00	Provide education, outreach and develop partnerships	Increased public awareness and referrals to the IL program by sharing information, resources, and maintaining connections with local service providers.

Issue Area	Activity Type	Primary Entity	Hours Spent	Objective(s)	Outcome(s)
Community Access	Transportation	ICBVI	83.00	ICBVI staff sit on a variety of public transportation committees/groups in different local areas advocating for better public transportation access and services.	Collaborated with community leaders and organizations to raise awareness and advocate for accessibility improvements that benefit individuals who are blind or visually impaired.
Housing access	Community Systems	SILC	80.00	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 re: lack of affordable, accessible housing due to pop. growth, lost wages, substantial increase in property values and rent, reduced HCBS settings due to closure of assisted living facilities and certified family homes.
Community access	ADA, Fair Housing Act (FHA) and Rehab Act, including 508	SILC	75.00	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.
Community access	HCBS	SILC	700.00	Address growing crisis and loss of HCBS due to loss of housing, lack of funding for transition from facilities and direct support professional workforce crisis.	Collaborated with ID DD Council to address the loss of DSP workforce, especially in rural areas. Addressed increased institutionalization of PWD, including the loss of transition services and subpar care management through Medicaid waivers.

Issue Area	Activity Type	Primary Entity	Hours Spent	Objective(s)	Outcome(s)
Emergency Planning	Community Systems and technical assistance	SILC	112.00	Disability inclusion is built into all aspects of emergency management.	Participated in LEPC meetings around the state and Idaho Voluntary Organizations Active in Disaster (VOAD). Participated in Idaho Office of Emergency Management events and exercises.
Independent Living	Financial Planning	SILC	624.00	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 15 workshops to 172 people and provided technical assistance (TA) to 312 people with disabilities or their families/guardians in opening accounts. Follow up indicates the majority opened an account.
Emergency Preparation	Emergency Preparation Workshops and Technical Assistance (TA)	SILC	98.00	Increase personal awareness, understanding and preparation for people with disabilities in all phases of disaster.	Presented to 24 people on developing personal preparedness plans. Worked with CILs to increase information about plans to consumers. Participated in planning session for an Emergency Preparedness conference geared toward young adults.

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 frequently works with Public Health, other health care systems, the Community Council of Idaho (serving migrant farm workers) and various organizations serving people who are unhoused, such as the Boise/Ada Homeless Coalition to increase access to care and resources, such as providing

COVID Tests to migrant farm workers and people accessing homeless shelters. Additionally, we work with Public Health to educate health care providers about the barriers people across disability types face when trying to access healthcare. Council members and SILC staff provided a workshop based on real world examples of discrimination in healthcare settings for people with autism, people with mental health conditions, people who are blind, people who are Deaf and people with ambulatory disabilities at the Idaho Health Priorities Summit, attended by more than 300 health care providers, educators and health care students.

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.

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 Center Manager- Customer Center South Central represents the DSE as an ex-officio member. The DSE representative is an active member of the assessment and planning committee. His participation on the committee and planning activities helps 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 LINC, the Deputy Director from Life, A Center for Independent Living and an IL specialist from DAC-NW serve on the SILC
- The Idaho Commission for the Blind and Visually Impaired (ICBVI) Administrator serves on the Council.
- Center Directors from DAC-NW and Life, A Center for Independent Living 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, staff and directors participate in statewide assessment planning as well as SPIL planning meetings.

Other administrators from the Department of Health and Welfare/Medicaid 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 ICBVI 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 Advocacy 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, regularly works on housing issues across Idaho. The SILC E.D. serves on the governing board for the Intermountain Fair Housing Council (IFHC) and is a member of the Ada County Homeless Coalition.

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 E.D. participates in several 1915c/i workgroups, including the statewide collaborative, Our Care Can't Wait, and Department of Health and Welfare workgroups to address workforce shortages of direct support professionals, case managers and department staff.

The Council hosted state legislators on a panel during our October quarterly Council meeting, providing an opportunity for Legislators to learn more about the SILC and people with disabilities, and for Council members to have an opportunity to meet our state legislators as real people. Council members had the opportunity to ask questions to the Legislators and have candid conversation. The Council plans to invite legislators again in 2026.

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
JEREMY MAXAND	CIL	CIL Director - LINC	Voting	05/28/2025	05/28/2027
JOSEPH VINCENT	CIL	CIL Rep - Life	Voting	03/25/2025	03/25/2028
MICHAEL LEFEVOR	CIL	CIL Director - Life	Voting	05/28/2022	05/28/2025
SHERRI BOELTER	CIL	CIL Rep - DAC	Voting	05/28/2022	05/28/2028
ALAN AAMODT	State Agency	Ex-Officio - DSE	Non-Voting	05/28/2021	05/28/2027
BETH CUNNINGHAM	State Agency	Ex-Officio - ICBVI	Non-Voting	07/09/2024	07/09/2027
ERIN OLSEN	State Agency	Ex-Officio - Aging	Non-Voting	04/07/2021	05/28/2027
RUSSELL SALYARDS	State Agency	Ex-Officio - DHW	Non-Voting	05/28/2022	05/28/2028
ANHORA SNODGRASS	Neither	At Large - PWD Reg II	Voting	01/24/2023	01/24/2026
BRITTANY SHIPLEY	Neither	PWD - Parent Advocate Reg V	Voting	12/27/2021	05/28/2027
ERIK KIMES	Neither	Reg III - PWD	Voting	12/11/2020	05/28/2026
FAITH NEIBERT	Neither	Reg VII - PWD	Voting	07/09/2024	09/15/2025
IAN BOTT	Neither	Reg IV - PWD	Voting	02/01/2024	05/26/2026
JULIE ANTHONY	Neither	At Large - PWD Veteran	Voting	09/23/2025	09/23/2028
JUSTYNE COLLINS	Neither	Reg I - PWD	Voting	05/01/2023	05/01/2026
KYLIE REED	Neither	At Large - PWD Youth Reg IV	Voting	07/09/2024	07/09/2027
SHILOH BLACKBURN	Neither	Reg VI - PWD	Voting	05/06/2019	05/28/2025
TARA ROWE	Neither	Reg V - PWD	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?	18
(B) How many members of the SILC are individuals with disabilities not employed by a state agency or a center for independent living?	10
(C) How many members of the SILC are voting members?	14
(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?	10

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. Council representation comes from mostly rural parts of the state and Idaho's most populous area, the Treasure Valley, which includes Caldwell, Nampa and Boise. 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.

Idaho has three regionally located CILs. Each CIL has a representative on the Council, including one executive director chosen by the CIL directors.

We currently have vacancies in three regions and open at large seats to be filled from underserved communities. These vacancies are not represented in the table above as the ID SILC bylaws state that membership is 17-24 members. Further, the table above includes a CIL director who termed off the Council in May and his replacement who came on board the same date.

At large seats help the SILC maintain a 51% majority of people with disabilities not working for the state or a CIL and cross disability representation.

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, disabled veterans or combinations of the afore mentioned. We are actively seeking representatives from unserved/underserved communities as defined in our SPIL for regional or at large positions.

We continue to make inroads with immigrant populations, the Tribes and Disabled Veterans. One Council member is a Tribal member and one is a combat disabled Veteran. Outreach and recruitment

to underserved communities remains slow and on-going.

Above indicates nine current voting members (09/23/2025), all 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. These seats help provide broad representation and ensure a quorum of people with disabilities as required by the Act. 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, other disability organizations, current and former members, SILC staff and other 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.

As per SILC policy, Council members are encouraged to develop their skills and knowledge of the independent living philosophy, history, and implementation in our communities. As such, members must complete two (2) trainings per calendar year outside of trainings completed during council meetings. Each member is asked to complete a Member Training Plan identifying trainings that would be of benefit to them in their role as a member of the SILC. The Member Training Plan form must be submitted to SILC staff and be signed by the Chair annually.

First year council members are required to complete New Member Orientation, SILC 101 and IL History. These required trainings must be completed within three (3) months from the first meeting member is expected to attend following appointment. As the member training plan form states, New Member Orientation is available through SILC staff and the SILC 101 and IL History trainings are available through the IRLU archive or the IL Training & Technical Assistance Center (IL T&TA). After their first year, Council members in good standing are encouraged to apply to attend national conferences as resources allow to further their knowledge and meet others in the IL movement.

Additional trainings are provided at least twice a year during Council meetings, often on topics requested by Council members. Training in 2025 included a panel on Idaho's transition to Medicaid managed care and another on housing instability.

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) full-time 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 related to direct, IL services. IDVR fiscal staff enters DSE data prior to submission. The IDVR administrator reviews the PPR prior to submission. The DSE fee for services is 1% of the 30% ILSG directed to the SILC in the SPIL.

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.

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 2025-2027 SPIL.

The IL Network and SPIL planning committee began SPIL drafting meetings in early October 2022, concluding the end of September 2023. A total of seven SPIL drafting meetings provided additional public input opportunities which included further review of the statewide assessment, recent PPRs and other updated local data (affordable and assessable housing/homelessness data, reports issued by state oversight committees related to the direct care workforce shortage and loss of home and community based services, etc.). All meetings were held virtually and posted publicly on the SILC website, social media platforms and on the Idaho Townhall website.

Further, SPIL development reports and opportunities for comment were provided during quarterly SILC business meetings held through January 2024, prior to posting the draft for the 30-day public comment period. Several members of the public frequently attended Council meetings during this timeframe. Members of the public are permitted time to comment and ask questions at the discretion of the chairperson as was allowed during SPIL development discussion. A draft of the Plan contained herein was reviewed and approved for the publicly posted comment period during a public Council meeting on January 19, 2024. The Plan was posted to the SILC and CIL websites, and shared widely via CIL, SILC and partner email lists and newsletters during the 30-day comment period January 30 - February 28, 2024. An additional public hearing via Zoom was held on February 5, 2024 to review any concerns, questions or receive further public input. ASL was provided for this meeting. The meeting notice was posted on the SILC website, the State of Idaho Townhall website and via partner organizations' communication channels, including the Consortium of Idahoans with Disabilities, Disability Awareness Day at the Capitol on February 2, 2024.

The SPIL planning committee continues to meet and the Statewide Assessment for the 2028-2030 SPIL has been underway since July 2025. It will run through September 15, 2026.

(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 survey is directly tied to the SPIL goals and activities and allows us to monitor progress quarterly. Each group completes a unique survey depending on whether they are Part B subrecipients of individual members. The planning committee develops and works to 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 reviewed and

reported by

the Planning Chair 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 monitored and reviewed the 2025-2027 SPIL monthly. The SILC meets at least quarterly to review, monitor and potentially revise the SPIL as needs warrant. Expectations in 2025 were met or exceeded within the goals. Some activities may be modified based on shifting resources and emerging issues, such as the housing crisis, the direct support professional shortage across Idaho impacting Idahoans with disabilities and their family's disproportionality and increased institutionalization as a result of reduced home and community based services. We anticipate further adjustments based on funding reductions for the SILC.

(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 DVR Center Manager- Customer Center South Central serves on the SILC to ensure communication and participation with each other.
- 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 chair serves on the Youth Crisis and Youth Empowerment Services (YES) Project and Idaho State Juvenile Justice Commission.
- Other council members serve on the Idaho Council on Domestic Violence and Victim Assistance, the National Alliance on Mental Illness, the Behavioral Health Planning Council, Emergency Planning and response boards, the Autism Society of Idaho and several local interagency workgroups.
- 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.
- 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 participates in several public health and Department of Health and Welfare committees and workgroups, primarily focused on HCBS improvements, Medicaid managed care, monitoring, quality assurance and safety issues around paid family care givers and the direct care workforce shortage.
- The SILC executive director serves on the Intermountain Fair Housing Council, the Boise - Ada County Homeless Coalition and 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 holds quarterly Council meetings, quarterly Executive Committee meetings (one month before each Council meeting), and other gatherings such as SPIL planning sessions and ABLE Idaho stakeholder meetings. Meeting dates are scheduled each summer and posted on the SILC website once confirmed. Notices and agendas are shared with stakeholders and the public at least 3-5 days in advance, often two weeks ahead, and are also posted on the SILC website, Facebook page, and the State's Townhall site, in compliance with Idaho's public meeting laws. Council meetings are held in person twice a year, with January and July meetings conducted online to reduce travel and save resources. Online meetings require pre-registration for security purposes. ASL interpretation is provided for all Council meetings, though technical challenges like poor broadband can affect accessibility. Captioning has also had mixed results, especially for hybrid meetings. SILC continues to invest in technology and collaborate with the Deaf and hard of hearing community to improve access. Meeting materials are mailed in advance to Council members who prefer hard copies or large print, and are available to non-members upon request.

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, to offset administrative costs. The SILC financial specialist and the administrative assistant are funded primarily through Innovation and Expansion funds.

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 mealtimes, 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 support 1 FTE Program Specialist who provides emergency preparedness and recovery education and training, technical assistance and training in opening ABLE accounts 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 as the SPIL allows. 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 on rare and Council approved occasions, also use state general or unrestricted funds when there may be concern about an activity falling within federal grant requirements, as allowed by state law.

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	
Community/Grassroots Organizing	6
Systems Advocacy	8
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
Evaluation	
Community Needs Assessment	10
Networking Strategies	
Among CILs & SILCs	3
Outreach to Unserved/Underserved Populations	
Rural	4
SILC Roles/Relationship to CILs	
Development of State Plan for Independent Living	1
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 Idahoans with disabilities across 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.

In Progress

Barriers addressed

- Transportation and communication gaps in rural areas
- Limited understanding of CIL roles among officials
- Inconsistent LEPC meeting availability and community hesitation
- Information deficits for emergency managers and first responders

Successes and lessons

- Demonstrated alternatives (e.g., walkie-talkies) to bridge communication gaps
- Positive feedback led to repeat presentations for New Americans
- Distribution of preparedness binders spurred meaningful consumer engagement
- In-person outreach proved more effective than remote communication
- Collaborative development of inclusive volunteer activity lists

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.

In Progress

Key activities

- Participation in local housing coalitions and boards and advocating for accessible, affordable units
- Continuation and expansion of rural transportation through FTA-funded 5310 models
- Training consumers on the GIFT Transit app for independent trip reservations
- Information and referral support for housing applications and health-care navigation
- Best practices and innovations
- Blending volunteer private vehicles with accessible van services to cover vast rural areas
- "Visitable housing" advocacy and ensuring compliance with accessible parking requirements
- Development of condition-specific resource guides (e.g., Parkinson's, MS)

- "Assume the best" collaborative approach to foster positive stakeholder relationships
- Installation of accessible pedestrian signals at high-need intersections

Objective #1.3: The Idaho SILC and identified community partners and stakeholders will explore opportunities for potential legislation establishing an Idaho ABLE program.

Achieved

Stakeholder engagement

- Quarterly workgroup meetings by SILC and partners
- Community forums with the State Treasurer's office to refine legislation talking points
- Analysis and advocacy
- Development and distribution of ABLE talking points to policymakers
- Presentations to legislative subcommittees and the Senate Health & Welfare Committee
- Referral pathways established from ICBVI and CILs for client ABLE account enrollment
- Meetings with and outreach to policymakers
- Direct contacts with legislators yielding broad support
- House Bill 26 (ABLE) passed and advisory council appointments finalized

Goal #2: The Idaho IL Network will work to strengthen effective network collaboration, leadership development and resources.

Objective #2.1: Increase engagement of transition age youth and young adults with disabilities to expand our community and develop future leaders in the movement.

Year one: In progress

CIL coordination

- Mixed responses and participation in quarterly meetings to align data collection and reporting methods
- Participation in Pathways to Partnership statewide project led by the Department of Education

Barriers for transition-age youth

- Unreliable or unavailable transportation, especially for evening and rural events
- Scheduling conflicts with work or school commitments
- Limited family and school awareness of transition services' value
- Social anxiety and gaps in self-advocacy skills

Objective #2.2: Ensure qualified and effective Idaho IL Network personnel hold at least one team and skills building educational event within the three-year plan with the participation of network members that include in-person and hybrid attendance options when possible and as resources allow.

In progress

Q1 - Joint CIL-SILC virtual SPIL review and SILC virtual training on SPIL contributions in the daily work of CIL staff. Approximately 80 CIL staff attended.

Objective #2.3: The Idaho SILC will explore alternative business models of operation to enhance the Council's effectiveness within the IL Network.

In progress

Goal #3: Idahoans with disabilities receive the community-based supports and services they need to live in their community 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.

Achieved

Individuals served from identified population each quarter

- Q1: DAC 9; LINC 49; LIFE 34
- Q2: LINC 44; LIFE 57 (race/ethnicity focus), 28 (county focus)
- Q3: DAC 26 rural + 30 less-served groups; LINC 822; LIFE 13
- Q4: DAC 103; LINC 49; LIFE 11; ICBVI ~18

Objective #3.2: Build and promote community connections and participation in peer to peer mentoring and learning groups.

Achieved

- All CILs and ILS programs consistently provided at least one mentoring group per quarter.

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.

N/A

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.

ABLE

Since 2017, the SILC has used state general funds to provide technical assistance to Idahoans wishing to join ABLE programs in other states. The current SPIL included provision to "explore" the potential for an Idaho ABLE program. The opportunity arose to work with stakeholders and the treasurer's office to pass legislation establishing a program as already reported earlier.

Part of the legislation establishing the program also established an advisory committee for Idaho's ABLE program. The SILC provided input into the makeup of the committee and who would be appointed to the first convening which will happen in spring of 2026. The accomplishment is

noteworthy in 2025 with the passage of the legislation from which we drew heavily on IL philosophy of nothing about us without us as demonstrated in the committee composition and duties in statutes as follows:

56-709. ESTABLISHMENT OF AN ABLE ACCOUNT ADVISORY COUNCIL -- APPOINTMENT OF MEMBERS -- MEETINGS -- COMPENSATION -- DUTIES. (1) There is hereby established in the office of the state treasurer an ABLE account advisory council. The ABLE account advisory council shall consist of the state treasurer, who shall act as chair, the executive director of the Idaho state independent living council, who shall serve in an ex officio capacity, and members appointed by the governor after considering recommendations of the state treasurer.

(2)(a) The members of the ABLE account advisory council subject to appointment shall be:

- (i) Two (2) members who are knowledgeable and have experience or a background in but are not currently employed by the department of health and welfare or the division of vocational rehabilitation;
- (ii) One (1) member who is knowledgeable and has experience or a background in education;
- (iii) One (1) member who is knowledgeable and has experience or a background with disabled veterans;
- (iv) One (1) ABLE account owner; and
- (v) One (1) parent or guardian of an ABLE account owner.

(b) Appointed members shall serve at the pleasure of the governor for four (4) year terms. Initial appointments shall be staggered as follows:

- (i) One (1) member shall serve for one (1) year;
- (ii) One (1) member shall serve for two (2) years;
- (iii) Two (2) members shall serve for three (3) years; and
- (iv) Two (2) members shall serve for four (4) years.

(c) If there is a vacancy for any reason in the seat of an appointed member, the governor shall make an appointment to become effective immediately for the duration of the unexpired term.

(3) The meetings of the ABLE account advisory council shall be held quarterly and at other times upon the call of the chair or a majority vote of the council. A majority of the members of the council shall constitute a quorum for the transaction of business.

(4) The council members appointed pursuant to this section shall be compensated as provided by section 59-509(a), Idaho Code.

(5) The ABLE account advisory council shall advise the state treasurer and the executive director of the Idaho state independent living council regarding policies and actions that enhance the outreach, marketing, and education of the Idaho ABLE account program. The chair of the council shall provide an annual report to the legislature.

History:

[56-709, added 2025, ch. 35, sec. 2, p. 173.]

ADVOCACY

Disability advocacy involves educating policymakers - such as legislators, members of Congress, and city council members - about how laws and policies affect people with disabilities.

When advocating as part of an organization like the SILC or a Center for Independent Living (CIL), the goal is to inform and educate, not to influence votes or outcomes.

This distinction is important because:

- Individuals can freely express opinions, such as saying, "Don't vote for House Bill XYZ."
- Publicly funded organizations, however, are restricted. If they attempt to influence legislation, it is considered lobbying, which cannot be done using public funds.

Council members may still advocate as private citizens, but they must be clear that they are speaking on their own behalf, not as representatives of the SILC.

During the second half of FFY2025, six SILC members - none of whom are employed by the state or a Center for Independent Living - contacted policymakers more than 45 times. They shared personal stories and insights about how Medicaid helps them manage chronic health conditions, access necessary medications, and maintain their mental health. They also emphasized the importance of:

- Inclusive education for children with disabilities
- Community-based placements for children with disabilities in the foster care system
- Accessible healthcare that meets individual needs without adding unnecessary bureaucratic barriers
- The challenges of working through managed care organizations to get the care coordination needed to maintain health and wellbeing
- Predatory activities of health insurance companies regarding Medicare supplemental insurance

In conversations with Idaho's congressional delegation, legislators, and local policymakers, SILC disability advocates also highlighted the urgent need for reliable transportation in rural areas - especially for individuals who cannot drive due to vision loss, cognitive disabilities, or financial hardship.

Perhaps most importantly, disability advocates engaged in advocacy in ways that worked best for them. Some made phone calls, others sent emails, and several met directly with policymakers. Many attended listening sessions and town halls - gathering information and speaking up when they felt ready and comfortable to do so.

Disability advocates learn from and teach each other and the broader community that living with a disability is just that - living. We are a vital thread in the fabric of our communities. When the doors are easier for us to get through, they open to a world where everyone is valued and welcome.

Council members had more than 40 conversations with policy makers about Medicaid and Managed Care; at least 30 conversations about education issues; 15 conversations about children's mental health, ten (10) conversations about disability rights concerns and at least five (5) conversations about other issues such as health insurance and issues related to the Department of Health and Welfare.

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.

The SILC, along with other state agencies and entities was ordered to reduce state general fund appropriations by 3% for state fiscal year 2026 which has overlap with FFY 2026. The reduction was effective three months into the SFY and is ongoing and may increase in SFY 2027 due to shortfalls in state revenue.

A legislative interim work group continues to push for combining the SILC with the DD Council and possibly other disability and aging service agencies which are all established through different federal laws.

The DSE has had ongoing challenges related to an RSA designation as high risk. The Idaho Division of Vocational Rehabilitation recently opened the waitlist for services and is on an order of selection (OOS). The DSE has been operating with an interim administrator for two years and who also serves as the administrator for the Commission on Aging. The DSE anticipates the hiring of a new administrator early in 2026. The DSE has had significant staff turnover across all departments.

Section D - Additional Information

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

The Idaho SILC, like other Statewide Independent Living Councils, needs dedicated federal funding to achieve true coordinated statewide planning and full implementation of systemic change which will lead to independent living, personal choice and full community inclusion for people with disabilities across the lifespan.

PUBLIC HEALTH WORKFORCE (PHWF) - DATA REPORTING REQUIREMENTS

Grant Number	10/01/2024 - 09/30/2025 ID
Reporting Period	
State	

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.

Brittany Shipley - Signed Digitally

SIGNATURE OF SILC CHAIRPERSON

12/24/2025

DATE

Brittany Shipley - Chairperson

NAME AND TITLE OF SILC CHAIRPERSON

(208) 720-4004

PHONE NUMBER

Eric Bjork - Signed Digitally

SIGNATURE OF DSE DIRECTOR

01/05/2026

DATE

Eric Bjork - Financial Officer

NAME AND TITLE OF DSE DIRECTOR

(208) 287-6449

PHONE NUMBER