

REPORTING INSTRUMENT

OMB Control Number: 1820-0606
Expiration Date: July 31, 2011

UNITED STATES DEPARTMENT OF EDUCATION
OFFICE OF SPECIAL EDUCATION AND REHABILITATIVE SERVICES
REHABILITATION SERVICES ADMINISTRATION

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: 2008 _____

State: ARIZONA _____

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; 34 CFR 364.35 and 364.36

Indicate amount received by the DSU as per each funding source. Enter “0” for none.

Item 1 - All Federal Funds Received

(A) Title VII, Ch. 1, Part B	\$ 336,132
(B) Title VII, Ch. 1, Part C – For 723 states Only	\$ 0
(C) Title VII, Ch. 2	\$ 606,661
(D) Other Federal Funds	\$ 20,012

Item 2 - Other Government Funds

(E) State Government Funds	\$2,247,800
(F) Local Government Funds	\$ 0

Item 3 - Private Resources

(G) Fees for Service (program income, etc.)	\$ 0
(H) Other resources	\$ 0

Item 4 - Total Income

Total income = (A)+(B)+(C)+(D)+(E)+(F)+(G)+(H)	\$ 3,210,605
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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	\$ 3,210,605
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Section B – Distribution of Title VII, Chapter 1, Part B Funds

Section 713 of the Act; 34 CFR 364.22, 365.1, 365.20, and 365.21

What Activities were Conducted with Part B Funds?	Expenditures of Part B Funds for Services by DSU Staff	Expenditures for Services Rendered By Grant or Contract
(1) Provided resources to the SILC to carry out its functions	\$ 0	\$ 34,393
(2) Provided IL services to individuals with significant disabilities	\$ 306,194	\$ 0
(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	\$ 0
(5) Supported activities to increase capacity to develop approaches or systems for providing IL services	\$ 0	\$ 20,000
(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

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

Sections 704(f) and 713 of the Act; 34 CFR 364.43, and 34 CFR 365 Subpart C

Enter the requested information for all DSU 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 DSU or Provider	CSRs Kept With DSU or Provider
AZ SILC	<p>Supported activities to increase capacity to develop approaches or systems for providing IL services</p> <p>Conducted studies and analyses, gathered information, developed model policies, and presented findings in order to enhance IL services</p> <p>Provided training regarding the IL philosophy</p> <p>Provided outreach to unserved or underserved populations, including minority groups and urban and rural populations</p>	\$ 34,393.00	\$242,797.00		

Cybercil	Establish and develop a virtual CIL		\$ 20,000.00		
Cochiseability	Establish and develop a traditional CIL in an underserved area of Arizona	\$ 20,000.00			
Total Amount of Grants and Contracts		\$ 54,393.00	\$262,797.00		

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

Section 713 of the Act; 34 CFR 365.1 and 34 CFR 365.20

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.

With reference to SUBPART I, Section C, the Arizona Statewide Independent Living Council (SILC) utilized Part B funds to support the following:

Response:

1. Supported activities to increase capacity to develop approaches or systems for providing IL services.
 - (a) SILC staff serves on various boards of directors of organizations that have programs and services for people with disabilities. SILC's purpose is to promote and support the inclusion of an Independent Living (IL) perspective into service program delivery and address cross-disability issues. Those organizations include:
 - The Arizona Technical Assistance Project, **AZ Loans for Assistive Technologies**
It is an alternative loan program to provide resources for consumers to acquire Assistive Technology (AT). SILC staff review and evaluate consumer loan applications, as well as, review and recommend revisions to the program policy and procedures.
 - **Arizona Center for Disability Law (ACDL)**
ACDL is the federally funded protection and advocacy organization for the state. The SILC Executive Director (ED) serves on the board's executive committee and is the chairperson for a subcommittee.
 - **Arizona Disability Advocacy Coalition (AZDAC)**
AZDAC is a coalition of 20 disability related organizations that assess and vet community/system issues that impact specific disability populations and/or all disability populations. SILC hosts and coordinates AZDAC's monthly meetings and the SILC Executive Director serves as chairperson.
 - **ArtAbility, Accessing Arizona Arts** is a coalition of art and disability related organizations that address full inclusion in the arts statewide. ArtAbility monitors and oversees facility accommodations as well as promotes programmatic accessibility. SILC participates by reviewing and recommending revisions to program policy and procedures and providing direct consumer personal testimony.

- **Arizona Assistive Technology Project (AZTAP)**
The Arizona Technology Access Program (AzTAP) was created in 1994 and operates under the mandate of the Assistive Technology Act of 1998 as amended (P.L. 108-364). Its mission is to increase access to assistive technology devices and services for individuals with disabilities and their families.
- (b) SILC staff participate on the steering committees of various conferences, initiatives, and/or projects to promote and support the inclusion of an IL perspective and address cross-disability issues. They include among others:
- The Arizona Technical Assistance Project, **Annual A.T. Conference**
The conference is an annual statewide event for consumers, service providers, rehabilitation therapists and other professionals. SILC participates on the steering committee to develop the theme and agenda. The SILC ED and other Council members also present and/or facilitate specific workshops related to IL.
 - **The Governor’s Office on National and Community Service**
It is a program which provides opportunities for people with disabilities to serve as interns/volunteers on various Americorp projects. SILC participates by recruiting volunteers, reviewing and recommending revisions to program policy and procedures, and conducting presentations about the program at conferences and workshops.
 - **Arizona Long Term Care System**
The Arizona Health Care Cost Containment System (AHCCCS) has a pilot program to develop a Consumer Directed Care program that provides an option for consumers who receive Medicaid funded Personal Assistance Services to elect to recruit, hire, train, supervise and discharge their personal care attendants. SILC participates by reviewing and recommending revisions to program policy and procedures, and providing direct consumer personal testimony.
 - **Arizona Aging and Disability Resource Center**
It is a program that establishes cross disability and aging access to services. SILC participates by reviewing and recommending revisions to program policy and procedures and provides direct consumer personal testimony.
- (c) SILC developed and maintains, and promotes the **Arizona Disability Post** website. It is located at www.azdisabilitypost.org. The purpose of the site is to provide any disability organization in the state with an opportunity to list their activities and events free of charge on a web-based calendar. The website is a vehicle to provide consumers from across the state with a place to obtain information about the activities and events in the disability community. It also assists disability related organizations as a clearing house to avoid conflicts in scheduling their activities and events with other disability related organizations. The Disability Post is a free standing website. It is SILC’s intention to support it until such time that it can be an independent and

self-sustaining enterprise. To that end, SILC is currently exploring strategies that will establish the Arizona Disability Post as an independent nonprofit entity.

(d) SILC, in collaboration with the CILs, researched and identified the recent changes in the disability demographics in Arizona, the service delivery capacity of the five Arizona CILs, and the need for additional branch offices of the current centers. It concluded that the best strategy would be to propose funding of additional branch offices with a state appropriation. After exploring how various other states secure an appropriation of state general funds, SILC and the CILs were of the opinion that a Missouri statute would best serve Arizona as a model. A proposal was drafted for the Governor's Office and the State Legislature to consider. However, it was not submitted to the Governor's Office or State Legislature. In meetings that the SILC Executive Director had with key advisors in the Governor's Office and the State Legislature to discuss and explore the feasibility of the proposal prior to its submission, it was advised that due to the impending budget crisis it was not an opportune time to pursue any new state funding. The proposal is being held in abeyance until the economic crisis diminishes.

2. Conducted studies and analyses, gathered information, developed model policies, and presented findings in order to enhance IL services.

(a) SILC established an Emergency Preparedness Planning Committee that met monthly at the SILC office. The composition of the subcommittee includes representatives from consumer advocacy organizations, community volunteers, emergency service personnel, policy-makers, and state agencies, as well as consumers and other stakeholders. Serving on the subcommittee are representatives from:

- AZ Department of Economic Security – Emergency Coordinator
- Department of Administration – 911 Director
- AZ Department of Transportation – Emergency Planner
- AZ Bridge to Independent Living (ABIL) – Advocate (Consumer)
- AZ DES/RSA – Program Manager
- Consumer Advocates
- SILC staff (Consumer)
- SILC Treasurer (Consumer)
- AZ Division of Emergency Management – Public Information Officer
- AZ Department of Administration – A.D.A. Director (Consumer)
- AZ DES/Division of Developmental Disabilities
- AZ Division of Emergency Management – Emergency Planner
- City of Surprise – A.D.A. Director
- AZ Technical Access Program (Consumer)
- AZ Commission for the Deaf & Hard of Hearing (Consumer)
- Scottsdale Fire Department – Emergency Medical Technician
- Raising Special Kids – Program Coordinator

In collaboration with the Arizona Department of Economic Security, the committee developed an assessment survey questionnaire related to Emergency Preparedness for People with Disabilities (PWD). It was composed of ten questions related to registries of People with Disabilities. The purpose of the registries is to provide first responders with information for the planning, deployment, and delivery of emergency services. Those questions were posed to state agencies in 33 other states plus the District of Columbia in a telephone survey. The focus of the survey was to assess the practices conducted in other states. The data collected and compiled indicated that there seems to be no coordinated system in the country to establish and maintain a statewide registry of people with disabilities. Having found no best practices to use as a model for a registry and because the committee believes a statewide registry is critical, a proposal was drafted that Arizona create a registry within the Department of Transportation. The proposal was submitted to the Governor's Emergency Preparedness Oversight Council (EPOC), sub committee workgroup on Vulnerable Populations. Prior to submitting that document to EPOC it was presented to the SILC Emergency Preparedness Committee for their editorial review and comment. EPOC is currently reviewing and assessing the efficacy of the SILC recommendations.

- (b) In the fall of 2007, the Statewide Independent Living Council, Arizona Bridge to Independent Living, and the Arizona Center for Disability Law, in their roles as advocates for people with disabilities, received numerous requests for individual assistance that included access to needed durable medical equipment (DME) and having repairs completed for users of wheelchairs. Because of the volume of requests for assistance, a community forum was held in October 2007 to discuss the issues surrounding delivery and repair of durable medical equipment. The focus of the forum, based on consumer input, was dominated by issues related to mobility devices with an emphasis on wheelchairs, both manual and power. Among the issues identified were:
- Lack of communication or incorrect communication from DME suppliers to consumers,
 - Delays, in some cases months, in obtaining critical wheelchair repairs resulting in loss of work, potential for increased health issues, and an inability of consumers to attend to their day to day responsibilities,
 - Lack of choice among DME suppliers because of limited contracting on the part of health plans resulting in consumers without options to “find a better alternative,” and
 - Delays in discharge from hospital or rehabilitation facilities due to delays in receiving needed equipment and supplies.

Based on the dialogue at the forum, the challenges identified related to DME were not only individual consumer challenges, but system-wide delays and barriers to effective delivery of DME and services. These system wide delays and barriers could potentially impact the almost one million people in Arizona with disabilities.

With that information, the Statewide Council on Independent Living, in collaboration with Arizona Bridge to Independent Living, the AZ Governor's Council on Developmental Disabilities and the Arizona Center for Disability Law decided to convene a Durable Medical Equipment Task Force.

Prior to establishing the DME Task Force, SILC conducted 10 key informant face-to-face interviews. The interviewees included representatives from each of the major stakeholder groups in the issue, i.e., consumers, DME vendors, medical professional, health plan providers, and state agencies. The data collected and compiled from the interviews was the basis for the agenda of the Task Force. The Task Force met monthly from March through July 2008.

The role of the Task Force was to research and develop goals and recommendations to improve the delivery and maintenance of durable medical equipment services in Arizona. SILC invited individuals and organizations representing stakeholders throughout the delivery system. They included consumers, their family members, payer sources, insurers, health plans, program contractors, durable medical equipment vendors and manufacturers, and state agencies to participate on the Task Force.

Members of the Task Force included representatives from the following organizations:

- Mercy Care Plan (Health Plan Provider)
- Raising Special Kids (Parent Support Group)
- St. Joseph's Hospital, Neuro Rehabilitation (Medical)
- Southwest Medical and Rehab (DME Vendor)
- AZ Division of Developmental Disabilities
- Preferred Home Care (DME Vendor)
- Bridgeway (Health Plan Provider)
- AHCCCS (AZ Medicaid)
- Evercare (Health Plan Provider)
- Southwest Mobility (DME Vendor)
- PRN Medical (DME Vendor)
- ABIL (CIL)
- AZ Spinal Cord Injury Association
- Pacific Rehab (DME Manufacturer)
- Arizona Center for Disability Law (AZ P&A)
- SCAN (Health Plan Provider)
- United Seating and Mobility (DME Vendor)
- AZ Department of Health Services
- AZ DES/RSA
- SILC
- Consumers

“Superior Customer Service” is the vision of the DME Task Force. “Superior Customer Service” applies to all of the customers involved in the DME service delivery process including the consumers of DME and their family members, the

physicians that prescribe DME, the suppliers who provide DME, the health plans and program contractors, and the insurers who pay for DME. The Task Force identified six goals that are intended to result in system change and should not be interpreted to mean that none of the actions are currently taking place - just that they are not taking place system-wide or at a level that results in "Superior Customer Service". Those goals are:

- Goal I: Communication: To provide direct, specific, and timely communication that is responsive to consumers, suppliers, health plans, program contractors, medical personnel, and insurers across the DME service system.
- Goal II: Standards and Practice Protocols: To improve the effectiveness of DME suppliers, health plans, program contractors and insurers through a system of uniform standards, reasonable expectations, and streamlined processes.
- Goal III: Consumer Choice and Advocacy: To empower consumers of DME to be informed advocates through choice, education, and knowledge of standards, practice, and policies of their insurer and DME supplier.
- Goal IV: Quality Assurance and Timeliness: To provide quality durable medical equipment within acceptable timeframes.
- Goal V: Training and Education: To provide clear and consistent training and education throughout the DME delivery system.
- Goal VI: Repairs and Maintenance: To complete durable medical equipment repairs timely and accurately and in settings which are respectful of and responsive to the needs of consumers.

The Task Force concluded that the current system of DME service delivery is likely a microcosm of the larger health care system. The system involves multiple layers, partners, policies, and approaches to accessing durable medical equipment. This complexity inherently brings a lack of predictability for the consumer of services since policies and practices varies among insurers, health plans, and DME suppliers.

A draft of the goals and recommendations of the Task Force was widely distributed to solicit public review and comment. After the public comments were received the draft was revised. The Task Force has defined an implementation strategy, and will issue the complete report in October 2008.

- (c) SILC continues to coordinate and host quarterly full-day meetings of the **Arizona CIL Network**. All the CIL Executive Directors, the SILC Executive Director, and the AZRSA Administrator participate. The agenda in the morning segment is focused on individual reports from the respective centers about their current activities, events, and/or issues. Also discussed and reviewed are statewide IL initiatives, problems and

projects. If an issue is identified that requires intervention, remediation, or other action, the CIL Network explores how it can collectively and mutually be strategic in addressing the issue. It also explores in what areas it can work collaboratively in order to effectively and economically expend resources and maximize efforts. As an example, three of the five CILs who serve rural areas are implementing the same data collection software to coordinate and retrieve information in order to present a broad geographic profile when needed. In the afternoon segment of the meeting, the AZRSA administrator participates and presents a report to the directors regarding current activities and any changes in policy at AZRSA. Also explored with AZRSA are common issues and potential collaborations of the respective organizations. The CIL ED meeting is held the day after our full Council meeting to minimize expenses and resources in order provide an opportunity for the CIL EDs to attend the full Council meetings.

3. Provided training regarding the IL philosophy.

(a) SILC members and/or staff provided 22 IL trainings that were presented verbally and augmented with printed materials. Frequently, the components of the presentations included:

- an overview of SILC and CILs,
- The Movement for Independent Living, by Maggie Shreve, with an emphasis on the Medical and IL paradigms,
- an overview of the Rehabilitation Act,
- disability awareness and etiquette, and
- citations for websites for further information, particularly Independent Living Research Utilization website.

The presentations were held with following groups:

- 10/10 **National Service Inclusion Team**, participated on an Americorp panel at ABIL in Phoenix, 6 attendees
- 10/15 **Emergency Preparedness for People with Disabilities**, at the SILC office, 8 attendees, included the Deputy Director of the Arizona Department of Transportation and his senior management team
- 10/18 **Arizona State University (ASU)**, Glendale, 21 attendees which included 20 students and the professor of the class
- 10/21 **Scottsdale Center for the Arts**, Scottsdale Theatre, front line staff, 15 attendees
- 11/6 **Touchstone**, (Behavioral Health Provider), Phoenix, 200 staff
- 11/7 **Pima County Health Department**, Tucson, 12 attendees
- 11/7 **National Service Inclusion Team**, SILC office, 20 attendees, project managers
- 11/28 **AZ Rehabilitation Services Administration**, Mesa, 19 attendees' counselors, support staff, and program managers.
- 01/12 **City of Surprise Emergency Preparedness Summit**, Surprise, 30 attendees

- 02/04 **Southwest Institute for Families and Children with Special Needs**, Phoenix, 15 attendees, focus was on transition of young people with disabilities into adulthood.
- 02/05 **Maricopa County Integrated Health Systems**, Phoenix, 2 attendees, emergency coordinator
- 02/05 **Arizona Consumer Legislative Training**, Phoenix, 105 consumers attended
- 02/15 **ASU**, Tempe, 6 attendees, including Disability Resource Center staff, ASU Fire Marshall, Facility Director and other ASU Managers
- 02/18 **International Association of Assembly Managers (IAAM) Annual Conference**, Phoenix, approximately 200 attendees
- 03/18 **121 Project Directors**, SILC office, 6 attendees
- 05/27 **ASU**, Tempe, 4 attendees, history faculty
- 06/03 **AZTAP Annual A.T. Conference**, conducted a workshop related to the DME issues and Task Force, attended the conference at the Wigwam conference Center
- 07/17 **United Cerebral Palsy**, Phoenix, 3 attendees, managerial staff
- 7/30 **Yuma County Recorder's Office**, Yuma, 8 attendees, local precinct poll workers
- 7/31 **Yuma County Recorder's Office**, Yuma, 6 attendees, local precinct poll workers
- 08/13 **Arizona Medical Facilities Emergency Planners**, Phoenix, 20 attendees
- 09/27 **Aurora Foundation**, Phoenix, 6 attendees

(b) SILC was an exhibitor at the following conferences/expositions. SILC staff and/or council members presented IL information and materials to attendees of the event.

- 10/27 **Mesa Adaptive Sports Exposition**, ASU Tempe, approximately 100 attendees
- 02/23 **Joni & Friends – Fishing with Friends**, Tempe, approximately 200 attendees
- 02/06 **Arizona Legislative Awareness Day**, Phoenix, approximately 700 attendees
- 02/20 **Arizona Disability Expo**, Phoenix, approximately 900 attendees
- 03/13 **State Capitol, Care Givers' Rally**, Phoenix, approximately 200 attendees
- 03/19 **Native American Urban Disability Summit Meeting**, Phoenix, 75 attendees
- 04/30 **Cochise County Youth Transition Fair**, Sierra Vista, approximately 100 attendees
- 05/30 **Day on the Lake, Adaptive Aquatic Sports**, Carefree, 120 participants
- 06/02 **Annual Statewide A.T. Conference**, Litchfield, 375 attendees
- 07/25 **Annual ADA Anniversary Celebration**, Phoenix, approximately 200 attendees
- 09/22 **Arizona Department of Education Transition Conference**, Scottsdale, approximately 700 attendees

- (c) On February 5, 2008, SILC worked collaboratively with the Arizona Commission for the Deaf and Hard of Hearing to coordinate the logistics and program of a **Consumer Legislative Training**. Support was provided to facilitate bringing 109 consumers from across the state into the State Capitol area. Efforts were targeted at populations representing unserved and underserved consumers. The criteria for selecting the participants included ethnic, geographic, and disability diversity. The agenda for the day long training included among other things:
- an overview of the legislative process,
 - a review and assessment of IL issues, and
 - identification of the impact of legislative action on IL issues.
4. Provided outreach to unserved or underserved populations, including minority groups and urban and rural populations.
- (a) SILC conducted outreach workshops in 3 communities/populations that it identified as unserved/underserved. They were: the African American Community in South Phoenix, the Native American Community on the Salt River/Pima Reservation, and the Latino Community in West Phoenix. For each event a SILC member directly connected to the respective communities provided the leadership and facilitated introductions for SILC staff to community leaders. The planning process for each event started with the SILC Outreach Committee and staff meeting with leaders from the respective communities to draft an agenda. The community leaders presented their assessment of particular independent living issues they thought needed attention. They also identified potential community sites for the location. SILC staff and council members coordinated the logistics and invited specific organizations to present information related to the issues that the community identified. Additionally, for each specific community SILC established, in collaboration with the community representatives, presentation guidelines to ensure that all materials and information were presented in accessible and culturally competent language formats, and to the extent possible, presented in the primary language of the attendees. The following is a brief description of each Workshop:
- African Americans. Although densely populated, South Phoenix seems to be one of the most underserved areas of Arizona. The area has a considerable African American population but, for whatever reasons, there are a disproportionate number of African Americans accessing IL services. A SILC member, who is African American and lives in South Phoenix, provided the leadership in coordinating the event. He, along with local community leaders, identified the HOPE VI Community Center, located in a recently federally funded revitalized neighborhood in South Phoenix, as the best venue. The event occurred there on May 16, 2008. Fifty-seven attendees heard presentations from nine disability related organizations that collaborated with SILC. They included representatives from:
 - AZ Commission on Deaf and Hard of Hearing
 - AZ Governor's Council on Developmental Disabilities

- AZ Center for Disability Law
- Raising Special Kids, (support group for parents of children with disabilities)
- Area Agency on Aging
- AZ Technology Access Program
- AZ Bridge to Independent Living
- AZ Long Term Care System
- City of Phoenix Adaptive Recreation Services

A Town Hall Meeting comprised the second half of the agenda. The local district State Representatives and Senator, U.S. Congressman, Phoenix City Council Representative, and the County Emergency Management Director attended and agreed to answer questions from the attendees. The primary focus of the audience's questions were related to education, transportation and racial issues.

- Native Americans. SILC has two members who are Native American and three members who work on reservations. They have advised the council that IL information and services are not readily accessible on many reservations. There are 21 tribal nations, living on 17 different reservations in Arizona. The Arizona Center for Disability Law partnered with SILC to coordinate an independent living workshop and Individual Education Plan training on the Salt River Pima Maricopa Reservation. It was held on May 21, 2008. Fifty-two residents attended to hear presentations from eight other disability related organizations that collaborated with SILC. They included representatives from:

- AZ Governor's Council on Developmental Disabilities
- AZ Center for Disability Law
- Raising Special Kids, support for parents of children with disabilities
- AZ Bridge to Independent Living
- AZ Rehabilitation Services Administration
- AZ Technology Access Project
- Area Agency on Aging

Lunch for the event was provided by members of Community Outreach Information Network (COIN). They are a grassroots organization promoting independent living skills on the reservation.

- Latinos. SILC has one council member who is Latino. She advised the council of various issues that individuals, who are primarily Spanish speaking, have that impact their accessing IL services. With her leadership, SILC coordinated an event that was conducted in Spanish with an interpreter available for those who needed an English translation. It was held at the Golden Gate Community Center Phoenix, Arizona, on September 12, 2008. Fifty consumers attended to hear presentations from eight other disability related organizations that collaborated with SILC. They included representatives from:

- AZ Governor's Council on Developmental Disabilities

- AZ Center for Disability Law
- Raising Special Kids
- AZ Bridge to Independent Living
- AZ Rehabilitation Services Administration
- AZ Technology Access Project
- Area Agency on Aging
- AZ Health Care Cost Containment System (AHCCCS – Medicaid)

Following the morning program, two break-out sessions ran concurrently after lunch.

The first session addressed special education in Arizona’s schools. It was conducted by the Arizona Center for Disability Law and was attended by about thirty people.

The second break out session addressed Arizona’s Medicaid program in detail. This session was attended by about twenty-five people and extended beyond the allotted time. An important and unexpected outcome from this session identified “guardianship” as a significant concern for Latino families.

After the extended breakout sessions there was a Town Hall meeting. The local district State Representatives and Senator, U.S. Congressman, Phoenix City Council Representative, and a representative of the regional Transportation System attended and agreed to answer questions from the attendees. The primary focus of the audience’s questions was related to housing and transportation.

o Other Outreach activities included:

- SILC provided IL materials to tribal members during their “Special Abilities Day” on September 3, 2008, on the Hopi Reservation. Approximately 800 tribal residents attended. A SILC Member, who is Native American, represented the council at the event.
- The Project Director for the Fort Mohave reservation, who is a SILC member, coordinated “Honoring Abilities Day” on September 17, 2008. She addressed disability awareness and independent living as a lifestyle choice for hundreds of Native Americans living on reservations along the Colorado River Basin.
- AZ SILC’s Outreach Committee supported the transposition of Independent Living information from print onto a CD providing an audio translation in Navajo. A SILC member, who is Navajo and lives on the reservation, provided the translation.
- SILC continues to host and coordinate quarterly meetings with the **COIN**, a community-based, consumer-controlled organization on the Salt River Pima Maricopa Reservation. They meet quarterly at SILC’s office. The SILC ED

and two members of SILC meet with 12 Native Americans who reside on the reservation plus two social services staff who work on the reservation. All of the attendees are individuals who have disabilities or are parents of individuals with disabilities. The focus of the meetings and the topics include a broad overview of the Independent Living philosophy with specific attention on Independent Living Centers.

5. AZRSA has provided support to CILS in an effort to extend the provision of IL services to underserved areas of the State.
 - CochiseAbility: AZRSA provides funding to the CIL Direct to assist with developing a satellite office in Cochise County, which will be transitioned into a stand alone CIL called CochiseAbility.
 - CyberCil: AZRSA provides funding to the CIL Arizona Bridge to Independent Living (ABIL) to assist with developing a virtual satellite office designed to provide IL services via the internet. This will be transitioned into a standalone CIL called CyberCil.

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

34 CFR 80.40(a)

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 Designated State Unit (DSU) receives quarterly reports on the use of Part B funds that have been dispersed to the SILC in accordance with the SILC's contract requirements. These reports highlight the activities related to the State Plan for Independent Living and the expectations of the DSU for the use of Part B funds. These reports are reviewed by the DSU liaison as well as by the financial and contract staff for the DSU. The quarterly reports include the activities the SILC has been involved in and the progress made within these activities for the quarter.

During May 2008 Federal RSA performed a review of AZRSA's Vocational Rehabilitation services program, Independent Living Rehabilitation Services program, and SILC. Two findings from this review impacted AZRSA's contract with SILC.

1. AZRSA and SILC must ensure that the contract governing SILC activities with Part B dollars does not include activities that are outside the scope of duties described in Section 705(c).
 - To address this AZRSA amended the contract with SILC to require SILC to itemize and delineate their expenditures of funds received through Title VII Part B and Title I(7.1(a)).
2. The SILC must ensure that it utilizes standards for financial management systems sufficient to demonstrate that all activities funded by Title VII, Part B funds are in accordance with SILC duties described in Section 705(C) of the ACT. EDGAR

80.20 describes the applicable standards for financial management systems for subgrantees of the state, including the SILC.

- To address this SILC has modified their accounting system, adding suffixes that indicate specific allocations as well as setting up various separate bank accounts for their varied revenue streams, which will allow them to detail the specific activities that specific funding went towards.

Section F – Administrative Support Services and Staffing

Section 704(c)(2) and 704 (m)(2) and (4) of the Act; CFR 364.22(a)(2) and 34 CFR 364.31

Item 1 – Administrative Support Services

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

Administrative support is provided by AZRSA staff for Independent Living Services to individuals with significant disabilities. SILC staff provides administrative reports for the activities administered by SILC with Title VII, Chapter 1, Part B funds.

Item 2 – Staffing

Enter requested staff information for the DSU 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	8	3
Other Staff	0	0

Section G – For Section 723 States ONLY

Section 723 of the Act, 34 CFR Part 366, Subpart D

Item 1 – Distribution of Part C Funds to Centers

In the chart below, please provide the following information:

- A) name of each center within your state that received Part C funding during the reporting year;
- B) amount of Part C funding each center received;
- C) whether the Part C funding included a cost-of-living increase;

- D) whether the Part C funding included any excess funds remaining after cost-of-living increases were provided;
- E) whether any of the centers received its Part C funding pursuant to a competition for a new center in the state; and
- F) whether the center was the subject of an onsite compliance review conducted by the DSU during the reporting year.

Name of CIL	Amount of Part C Funding Received	Cost of Living Increase? (Yes/No)	Excess Funds After Cost of Living Increase? (Yes/No)	New Center? (Yes/No)	Onsite Compliance Review of Center? (Yes/No)

Add additional rows as necessary.

Item 2 – Administrative Support Services

Section 704(c)(2) of the Act; 34 CFR 364.22(a)(2)

Describe the administrative support services used by the DSU to administer the Part C program.

Item 3 – Monitoring and Onsite Compliance Reviews

Section 723(g), (h), and (i); 34 CFR 366.38, 366.40 – 46

Provide a summary of the monitoring activities involving Part C centers conducted by the state during the current reporting year, including the onsite reviews of at least 15% of centers receiving Part C funds under section 723. The summary should include, at least, the following:

- A) centers’ level of compliance with the standards and assurances in Section 725 of the Act;
- B) any adverse actions taken against centers;
- C) any corrective action plans entered into with centers; and
- D) exemplary, replicable or model practices for centers.

Item 4 – Updates or Issues

Provide any updates to the administration of the Part C program by the DSU, if any, including any significant changes in the amount of earmarked funds or any changes in the order of priorities in the distribution of Part C funds. Provide a description of any issues of concern addressed by the DSU in its administration of the Part C program.

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

Section 704(m)(4) of the Act; 34 CFR 364.53

In this section, provide data from all service providers (DSU, 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 704 Reports, Part II.

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	1736
(2) Enter the number of CSRs started since October 1 of the reporting year	1146
(3) Add lines (1) and (2) to get the <i>total number of consumers served</i>	2882

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	9
(2) Withdrawn	21
(3) Died	14
(4) Completed all goals set	1366
(5) Other	44
(6) Add lines (1) + (2) + (3) + (4) +(5) to get <i>total CSRs closed</i>	1454

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	1428

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	565
(2) Number of consumers with whom an ILP was developed	2317
(3) <i>Total number of consumers</i> served during the reporting year	2882

Section E – Age

Indicate the number of consumers in each category below.

	# of Consumers
(1) Under 5 years old	0
(2) Ages 5 – 19	87
(3) Ages 20 – 24	47
(4) Ages 25 – 59	854
(5) Age 60 and Older	1894
(6) Age unavailable	0

Section F – Sex

Indicate the number of consumers in each category below.

	# of Consumers
(1) Number of Females served	1810
(2) Number of Males served	1072

Section G – Race and Ethnicity

Indicate the number of consumers served in each category below. *Each consumer may be counted under ONLY ONE of the following categories in the 704 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	70
(2) Asian	14
(3) Black or African American	80
(4) Native Hawaiian or Other Pacific Islander	2
(5) White	2341
(6) Hispanic/Latino of any race or Hispanic/ Latino only	375
(7) Two or more races	0
(8) Race and ethnicity unknown	0

Section H – Disability

Indicate the number of consumers in each category below.

	# of Consumers
(1) Cognitive	95
(2) Mental/Emotional	67
(3) Physical	451
(4) Hearing	149
(5) Vision	865
(6) Multiple Disabilities	1253
(7) Other	2

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

Sections 13 and 704(m)(4); 34 CFR 364.53; 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 DSU 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	298	253
(B) Assistive Technology	682	579
(C) Children’s Services	0	0
(D) Communication Services	4	4
(E) Counseling and Related Services	114	97
(F) Family Services	0	0
(G) Housing, Home Modifications, and Shelter Services	190	161
(H) IL Skills Training and Life Skills Training	110	93
(I) Information and Referral Services	261	222
(J) Mental Restoration Services	47	40
(K) Mobility Training	12	10
(L) Peer Counseling Services	9	8
(M) Personal Assistance Services	7	6
(N) Physical Restoration Services	232	197
(O) Preventive Services	0	0

Services	Consumers Requesting Services	Consumers Receiving Services
(P) Prostheses, Orthotics, and Other Appliances	9	8
(Q) Recreational Services	1	1
(R) Rehabilitation Technology Services	0	0
(S) Therapeutic Treatment	33	28
(T) Transportation Services	71	60
(U) Youth/Transition Services	0	0
(V) Vocational Services	11	9
(W) Other Services	155	132

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
(A) Self-Advocacy/Self-Empowerment	389	153	223
(B) Communication	1138	738	375
(C) Mobility/Transportation	827	506	300
(D) Community-Based Living	288	132	141
(E) Educational	356	124	224
(F) Vocational	116	20	91
(G) Self-care	1713	983	689
(H) Information Access/Technology	523	198	313
(I) Personal Resource Management	479	326	131
(J) Relocation from a Nursing Home or Institution to Community-Based Living	0	0	0

Significant Life Area	Goals Set	Goals Achieved	In Progress
(K) Community/Social Participation	0	0	0
(L) Other	540	325	126

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	267	131	136
(B) Health Care Services	610	357	253
(C) Assistive Technology	148	72	76

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 RSA 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.

AZRSA operates a statewide Independent Living Rehabilitations Services (ILRS) program. This program provides a wide range of services to allow clients to live and function more independently within their homes and communities. The following success stories reflect some of the work done by ILRS counselors.

- A man who had experienced a severe stroke when he was 30 years old is one example of a successful rehabilitation. His cognition, concentration, and right side motor function were all significantly impaired. He was unable to work or to live on his own. Upon starting in ILRS, he attended speech and occupational therapies for approximately eight months. He improved markedly in all areas. He returned to school and entered the RSA Vocational Rehabilitation program. Eventually he will be able to live on his own as a self-supporting individual.
- Another individual, prior to becoming an ILRS client, woke up one morning with no ability to move despite having gone to bed with full mobility and no symptoms of the paralysis. She has been through multiple surgeries to resolve her physical limitations. She believes she will walk again, and have full normal use of her hands. During this time however she was unable to bathe other than a sponge bath given by her mother, was unable to use the sink, and she had trouble navigating her wheelchair in the home. IL provided an occupational/physical therapist to evaluate her needs. The evaluation provided guidance for a contractor to perform home modifications intended to assist the client in being more independent in the home. Construction involved moving the shower wall into a computer room, thus allowing a large roll-in shower capable of being maneuvered, widening three doors to provide damage free maneuvering, and shortening the width of a closet to allow a wider door and corner maneuverability. IL also provided a shower/toilet chair. The customer is now much more independent. In addition, the mother/caregiver has a much needed reprieve.
- A former professor for a local university was also referred to the ILRS program recently. This individual was suffering due to seasonal exacerbation of her Multiple Sclerosis, which decreased her dexterity to the point that it was causing extreme social isolation and infringing on the ability of the woman to even operate her computer. Her Independent Living Counselor suggested an occupational assessment to determine what sort of home modifications would be most beneficial. The assessment was conducted by the Assistive Technology Center at Northern Arizona University and included recommendations ranging from an easy push vacuum cleaner, special adapted key holders, jar openers, and devices to open the oven door and computer adaptations. A ramp replaced the steps that posed a safety hazard each time she walked out the front door and a remodeled shower allowed her to bathe more frequently and for longer periods of time. Prior to the new

shower, the client would have to limit how often she could bathe because she would become too fatigued. Although she benefited from each of the adaptive items, she will be the first to tell you "...having personal care assistance changed my life." Several times a week, the ILRS paid for an assistant to come to the home and help her with cleaning, organizing, shopping, cooking, etc. This service enabled her to maintain some small amount of stamina to be able to leave her bed daily, eat, bathe and speak to her beloved pet birds. During the summer of 2007 she was not hospitalized for the first time in many years.

- A fourth client is a woman who has post-polio syndrome. The post-polio syndrome was starting to progress. She used a manual wheelchair and was becoming weaker so it was harder to perform daily tasks. She recently divorced and her son that lived with her started college and wanted to move out. Her goals were to be able to have some modifications done in her bathroom, closet, kitchen, and front/back entrances, which would allow her to perform her daily tasks without expending as much energy and also to allow her to enter/exit her home easily with her wheelchair. She was also requesting adaptations be done to her van that would accommodate her wheelchair and her increased weakness. Services provided included home modifications such as ramps/lowering thresholds at each entrance, a roll-in shower, widening of the bathroom & bedroom doors, and lowering the closet rods. An Occupational Therapist (OT) assisted her in organizing her bedroom closet and the kitchen to assist her in being able to have more access to what she needed. The OT also taught her skills to increase her ability to perform everyday tasks without getting too fatigued. A physical therapist assisted her in getting a power wheelchair through her insurance. Prior to this she used a manual wheelchair, which was very fatiguing. Adaptations were made to her van, including low-effort steering, a six-way power seat, and a tie down system for her wheelchair which allowed her to drive and transport her wheelchair in the van easier and more safely. She was also provided community resources that she may utilize in the future. Her independence was greatly increased in her home and in the community. She states that she feels that she has more energy and more confidence because she doesn't need to ask for help anymore.

SUBPART IV – COMMUNITY ACTIVITIES AND COORDINATION

Section 704(i), (l), and (m)(4) of the Act; 34 CFR 364.26, 364.27, and 364.32

Section A – Community Activities

Item 1 – Community Activities Table

In the table below, summarize the community activities involving the DSU, 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)	Outcomes(s)
Transportation	Community/ System Advocacy	Arizona Bridge to Independent Living (ABIL)	120	A proposal was submitted to the regional transportation authority requesting that ABIL receive an award to fund the development and implementation of a Regional Alternative Transportation System for people with disabilities that would provide taxi vouchers, mileage reimbursement, and travel training.	The proposal was submitted to the regional transportation system for funding but did not receive an award
Transportation	Community/ System Advocacy	Arizona Bridge to Independent Living (ABIL)	80	A proposal was submitted to the regional transportation authority requesting that ABIL receive an award to fund a Quality of Assurance program to assess and monitor the program previously cited.	Pending
Health Care	Community/ System Advocacy	Governor's Council on Develop-	20	Retain the Arizona Health Care Cost Containment	The state legislature approved the expanded services,

		mental Disabilities		System- AHCCCS Arizona Long-Term Care System program that provides three federal dollars for each state dollar. The program is for basic preventative dental care coverage. The coverage would allow for up to \$1000 per person, per year, for basic diagnostic services and related services. Over 32,000 people with disabilities in Arizona are eligible for those services.	however, funding is in abeyance because of the current state budget crisis
Health Care	Community/ System Advocacy	AHCCCS	100	AZ Long Term Care System pilot program to design Consumer Directed Care (CDC). The intent is to provide consumers who are Medicaid eligible to receive Personal Assistance Services the option to recruit, train, hire, supervise, and discharge their own attendant care employees.	The program was successfully tested in two Arizona counties and is currently being implemented statewide.
Health Care	Community/ System Advocacy	AHCCCS	60	Retain the Arizona Ticket to Work/AHCCCS Freedom to Work Medicaid buy-in program that provides two federal	The state legislature approved program, however, funding is in abeyance because of the current state budget crisis.

				dollars for each state dollar. The program allows people with disabilities who are working and cannot afford to buy medical insurance to pay proportionally for Medicaid coverage. Currently there are 1079 people with disabilities in Arizona who are in the program and might not otherwise be employed.	
Assistive Technology	Community/ System Advocacy	SILC	240	To research and develop goals and recommendations to improve the delivery and maintenance of durable medical equipment (DME) in Arizona.	A Task Force was convened and will issue a final report of their findings in October 2008. Implementation of their recommendations is pending.
Emergency Preparedness for People with Disabilities	Community/ System Advocacy	SILC	60	To address the policies and procedures of Arizona State University related to accessibility and in particular, planning for the evacuation of people with disabilities in emergency situations.	Those policies are currently under review for revisions
Emergency Preparedness for People with Disabilities	Technical Assistance	AZ Department of Economic Security	60	To assist with the development and implementation of a registry for people with disabilities who are served by	A pilot program has been implemented.

				the Divisions within the Department.	
Voting	Technical Assistance	SILC	240	Assist CILs and other disability related nonprofit organizations with registering their consumers to vote.	Facilitated the enhancement of the mailing list for 7 organizations. Their enhanced lists identified consumers who are not registered to vote.

Item 2 – Description of Community Activities

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

Response:

(a). **Community/System Advocacy – Health Care**

SILC hosts and supports monthly meetings of the **Arizona Disability Advocacy Coalition (AZDAC)**. Additionally, the SILC Executive Director is the current chair of the coalition. The mission of AZDAC is to focus on Community/ System Advocacy issues that impact the disability community in Arizona. With reference to the matrix in Subpart IV the issues areas identified there are vetted by the coalition. The coalition has 20 members. In addition to SILC, they include:

- Arizona Bridge to Independent Living (ABIL)
- DIRECT Center for Independent Living
- SMILE Independent Living Center
- New Horizons Center for Independent Living
- Arizona Center for Disability Law
- Raising Special Kids
- Pilot Parents of Southern Arizona
- Arizona Governor’s Council on Developmental Disabilities
- Arizona Commission for the Deaf and Hard of Hearing
- State Rehabilitation Council
- Arizona Council of the Blind
- The Institute for Human Development
- Arc of Arizona
- The Mental Health Association of Arizona
- People First, Self Advocacy Group
- Connecting Arizona Advocates
- Epilepsy Foundation of Arizona
- Behavioral Health/Consumers in Action
- National Multiple Sclerosis Society

(b) **Community/System Advocacy – Emergency Preparedness**

SILC staff continues to serve on the AZ Division of Emergency Management Task Force Committee that designs and evaluates emergency exercises and drills. Their function is to represent the disability community and address concerns and issues that are disability-related. Additionally, they provide advice on the development, implementation and evaluation on emergency preparedness policy and procedures from a disability perspective. SILC council members and/or staff regularly participated in various local and statewide table top and other exercises related to emergency preparedness planning.

- (c) SILC provides voter registration technical assistance to CILs and others with reference to the provisions of the 1992 National Voters Registration Act (Motor Voter). That statute requires nonprofit organizations, which receive state funding and provide services and programs to people with disabilities, to actively assist their consumers to register to vote. SILC staff conducted voter registration trainings to the staff of those organizations and worked with them on registration protocols and strategies. After the next general election SILC will collaborate again with the CILs to assess the efficacy of their voter registration activities.

Section B – Working Relationships Among Various Entities

Describe DSU and SILC activities to maximize the cooperation, coordination, and working relationships among the independent living program, the SILC, and CILs; and the DSU, 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.

Response:

- An AZRSA staff member was the President of the Board of Directors at DIRECT CIL in Tucson, AZ. During the year he resigned his position as President, but still remains an active member of the Board of Directors. This same staff member is also a member of the Statewide Independent Living Council.
- An AZRSA staff member is a member of the Board of Directors of CyberCIL. CyberCIL is a virtual CIL administered by the CIL ABIL.
- The AZRSA Administrator participates in quarterly Executive Director Meetings with CILs and SILC. Meetings are held the day before the SILC Quarterly Meetings to discuss issues and concerns in Independent Living across the state. The AZRSA administrator also attends the SILC Quarterly Meetings.
- The Arizona Governor’s Council on Spinal and Head Injuries (GCSHI) serves as a resource for information and referral, provides education, collects demographic information, funds direct care services, and coordinates activities about prevention of spinal and head injuries. The GCSHI works in partnership with AZRSA, providing targeted funds for traumatic brain injury (TBI) for Vocational Rehabilitation and both TBI and Spinal Cord Injury funds for AZRSA’s Independent Living program. The

GCSHI contracts services of information and referral, education, social activities, and peer mentoring through both the Arizona Spinal Cord Injury Association and the Brain Injury Association of Arizona for survivors of spinal and head injuries, their families, their caregivers, and the health professionals who serve them. Through a partnership with the Department of Health Services Office for Children with Special Health Care needs, the GCSHI supports the family resource coordinator program for children and youth (birth to age 21) with spinal or head injuries. The GCSHI advises Arizona State agencies regarding spinal cord and head injury matters and the needs of the people with spinal and head injuries. The GCSHI also provides trainings for AZRSA staff in relation to TBI.

SUBPART V – STATEWIDE INDEPENDENT LIVING COUNCIL (SILC)

Section 705 of the Act; 34 CFR 364.21

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
1. Rudy Buchanan	Neither	Community Advocate	Voting	6/30/07	6/30/10
2. Randy Collins	Neither	Person w/ a disability	Voting	6/30/06	6/30/09
3. Sherri Collins	State Agency	Person w/ a disability	Voting	6/30/06	6/30/09
4. Fernando Cruz	CIL	Person w/ a disability	Voting	6/30/06	6/30/09
5. E Mari Daniels	Neither	Parent of a child w/ a disability	Voting	6/30/07	6/30/10
6. Wendy Dewey	CIL	CIL ED Person w/ a disability	Voting	6/30/06	6/30/09
7. Ken Edwards	Neither	Person w/ a disability	Voting	6/30/06	6/30/09
8. Ted Garland	Neither	Person w/ a disability	Voting	6/30/06	6/30/09
9. Gene Heppard	Neither	Person w/ a disability	Voting	6/30/06	6/30/09

Name of SILC member	Employed by CIL, State Agency or Neither	Appointment Category	Voting or Non-Voting	Term Start Date	Term End Date
10. Ken Jacuzzi	State Agency	Person w/ a disability	Voting	6/30/06	6/30/09
11. Suzanne Malson	Neither	121 Project Director Person w/a disability	Voting	6/30/07	6/30/10
12. Kim March-Force	Neither	Person w/ a disability	Voting	6/30/06	6/30/09
13. Georgia McLaughlin	Neither	Person w/ a disability	Voting	6/30/07	6/30/10
14. Ed Myers	Neither	Person w/ a disability	Voting	6/30/06	6/30/09
15. Alan Straus	Neither	Community Advocate	Voting	6/30/07	6/30/10
16. Jenn-Yun Tein	Neither	Community Advocate	Voting	6/30/07	6/30/10
17. Ashleigh Turner	Neither	Person w/ a disability	Voting	6/30/07	6/30/10
18. Gail Wilt	Neither	Person w/ a disability	Voting	6/30/07	6/30/10
19. Joe Lee Yazzie	Neither	Person w/ a disability	Voting	6/30/07	6/30/10
20. Al Zulli	State Agency	AZ RSA Counselor	Voting	6/30/07	6/30/10
21. Kathy Levandowsky DSU Administrator	State Agency (AZRSA)	ex-officio	Non-Voting	N/A	N/A

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?	21
(B) How many members of the SILC are individuals with disabilities not employed by a state agency or a center for independent living?	15
(C) How many members of the SILC are voting members?	20
(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?	11

Section B – SILC Membership Qualifications

Section 705(b)(4) of the Act; 34 CFR 364.21(c)

Item 1 – Statewide Representation

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

Response:

- (a) To recruit appropriate candidates to recommend to the Governor for appointment to the Council, AZ SILC staff constructed a matrix with fields to identify particular profiles that the Council may need on its roster to ensure that the composition of SILC represents the diversity of the state. Those fields include Age, Disability, Ethnicity, Gender, and Geography.

For statewide representation, our criteria for appointment recommendations include among other considerations:

- The Council should be composed of representatives from five basic geographic regions of the state. Those regions respectively are the Central, East, North, South, and West. The five regions that our Council has identified correlate to the service area of the state’s five respective Centers for Independent Living. Our current roster of members includes:
 - 12 members from the Central region
 - 1 member from the East
 - 2 members from the North
 - 5 members from the South
 - 1 from the West
- The Council has representation that reflects the density of the disability population in the state. According to 2005 U.S. census data:
 - 58% of people with disabilities in Arizona live in the Central region
 - 25% percent live in the Southern region
 - 10% in the Northern region and
 - 7% in the other areas (East & West).

- Our current roster partially reflects that density profile
 - 55% of the members live in the Central region
 - 5% in the East
 - 10% in the Northern region
 - 25% in the Southern region
 - 5% in the West
- The five regions that our Council has identified correlate to the service area of the state's five respective Centers for Independent Living. Our current roster has members from the Central, Eastern, Northern, Southern and Western regions who are not employed at the regional Center for Independent Living
- There are 15 counties in Arizona; SILC members reside in seven of those counties.

Arizona Counties	SILC Members' Residence
● Apache (Northern)	1
● Coconino (Northern)	1
● Cochise (Southern)	2
● Gila (Eastern)	0
● Greenlee (Eastern)	0
● La Paz (Western)	0
● Maricopa (Central)	12
● Mohave (Northern)	1
● Navajo (Northern)	0
● Pima (Southern)	3
● Pinal (Southern)	0
● Santa Cruz (Southern)	0
● Yavapai (Northern)	1
● Yuma (Western)	0

- (b) Our current roster includes a representative from one of the state's 121 projects.
- (c) As previously referenced, AZ SILC staff constructed a matrix with fields to identify the various profile characteristics of Council members. The SILC Membership and Nominating Committee periodically review the matrix to assess how the composition of the Council reflects the diversity of the population in Arizona. Their review is presented as a report with recommendations to the full Council for their consideration. After the full Council evaluates the recommendations of the Membership and Nominating committee, that committee then identifies and recruits appropriate candidates to recommend to the Governor's Office for an appointment.

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

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

Response:

(a) Characteristics that are indicative of the diverse backgrounds of the people who serve on the SILC include age, disability, employment, ethnicity, gender, and geography.

The following characteristics reflect the current composition of the Council for the period relevant to this report:

- **Age:**
 - 2 members under the age of 30
 - 16 members between the ages of 30 - 64
 - 3 members 65 or older
- **Disabilities:**
 - 12 members who have a physical disability
 - 8 wheelchair users
 - 2 crutch/cane users
 - 2 with no Assistive Technology
 - 2 members who have a sensory disability
 - 1 person who is blind
 - 1 person who is deaf
 - 2 members who have a cognitive disability
 - 1 member who with multiple disabilities
 - 6 members with no disability
- **Employment:**
 - 15 members who are employed fulltime
 - 2 members who are employed part-time
 - 4 members who are not employed
- **Ethnicity:**
 - 16 members who are Caucasian
 - 2 members who are Native American
 - 1 member who is African America
 - 1 member who is Latino
 - 1 member who is Asian
- **Gender:**
 - 11 members are male
 - 10 members are female
- **Geography:**
 - Urban – approximately 75% of the Council reside in an urban area.
 - Rural – approximately 25% of SILC members reside in the rural areas of the state
 - Approximately 80% of the population in Arizona is urban (live in the metropolitan areas of Phoenix and Tucson, Maricopa, and Pima counties respectively) and approximately 20% of the population in Arizona is rural.

Item 3 – Knowledgeable about IL

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

Response:

SILC members are/become knowledgeable about CILs and IL services in a combination of ways:

- (a) New Member Orientation and Training – Each Council member must participate in a SILC Orientation and Training workshop. The curriculum includes:
 - the history of IL,
 - IL philosophy,
 - an overview of the national and statewide IL network,
 - a description of each Arizona CIL
 - the SILC policies, procedures, and By-laws,
 - an overview and summary of the Rehabilitation Act, Titles I through VI,
 - a review of the Title VII of the Rehabilitation Act, with particular emphasis focused on Parts B & C, and
 - concluding with a review of the I.L.R.U. test – “What Every SILC Should Know”

- (b) Previous Experience – included in the composition of the Council there are:
 - 5 members who receive(d) services from a CIL
 - 5 members who previously served as CIL board members
 - 1 member who is a retired CIL executive
 - 1 member who is a CIL executive director
 - 1 members who is employed by a CIL
 - 1 member who is employed at AZRSA as an ILRS counselor

- (c) CIL Networking Committee – One of the ad hoc SILC committees is the CIL Networking Committee. It is comprised of the CIL Executive Directors who meet quarterly. As previously cited in this report the primary focus of their agenda at meetings include:
 - updating reports from each of the respective CILs about their individual center’s activities, accomplishments, and issues,
 - assessing collaborative resource development and sharing,
 - exploring how to increase statewide capacity to deliver IL services,
 - enhancing and expanding their communication network, and
 - discussing IL related legislative issues.

They elect a representative of their committee to be nominated for an appointment as a member of the Council. The representative of the CIL Networking Committee regularly provides the Council with a report that reflects the discussions from their meetings.

- (d) The DSU quarterly report – At each full Council Meeting the administrator of the DSU presents a report about the activities, accomplishments and issues of the Statewide Independent Living Services (SILS) program.
- (e) Presentations at the full Council meetings – There are presentations from various guest speakers at each full council meeting that address issues, initiatives, programs, and/or services relative to some aspect of IL. Presentations in this reporting year have included:
- an overview of the Medicare/Medicaid Health Care Billing Code System
 - the DME Task Force, and
 - exploring the production of a video documenting IL in Arizona.

IL NET – SILC staff will alert members about various IL NET trainings and within budgetary parameters, SILC will support members in registering for those trainings.

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.

Response:

- Tony DiRienzi
Executive Director
AZ Statewide Independent Living Council
2400 North Central Ave., Suite 105
Phoenix, AZ 85004
602-262-2900, voice/TTY
602-271-4100, fax
silctonyd@qwestoffice.net

- Sharon Engelhardt
Executive Assistant
AZ Statewide Independent Living Council
2400 North Central Ave., Suite 105
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602-262-2900, voice/TTY
602-271-4100, fax
silcsharon@qwestoffice.net

- Donna Powers
Program Coordinator
AZ Statewide Independent Living Council
2400 North Central Ave., Suite 105

Phoenix, AZ 85004
602-262-2900, voice/TTY
602-271-4100, fax
silcdonna@qwestoffice.net

- None of SILC staff are employed by a state agency

Item 2 – SILC Support

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

Response:

None. However, we meet frequently, either in person or by teleconference.

Section D – SILC Duties

Section 705(c); 34 CFR 364.21(g)

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.

Response:

The activities for the development of the State Plan included among other things:

(a) Collaborations

As cited and referenced previously in this report (i.e., Subpart I, Section D. 1 & 2, Subpart IV, Section A. item 2), SILC works collaboratively statewide with many disability-related organizations. As SILC staff and/or members work individually or collectively with many other groups, they become aware and informed about a broad range of specific issues. Consequently, SILC is in a unique position to assess the commonality and intersections of specific issues. Additionally, because SILC has a cross-disability orientation and perspective, it serves as a nexus and is able to articulate and present the issues in a global disability context. The goals and objectives in the SPIL reflect that process.

(b) Policy Analyses and Assessments

With reference to the response provided in Subpart I, Section D 2, of this report, SILC conducted surveys and established work groups to assess issues related to Emergency Preparedness Planning for People with Disabilities and the Delivery and Maintenance of Durable Medical Equipment. Individual consumers and organizations that represent consumer interests requested that SILC conduct these studies and establish the work groups. The findings of the assessments and the recommendations of the work groups will be incorporated into the planning process of the SPIL.

(c) Expositions

As previously cited, SILC participates in conferences, expositions, meetings, and other related community activities as a coordinator, exhibitor, facilitator, and/or presenter. During this report year those activities have included:

- Mesa Adaptive Sports Exposition,
- Joni & Friends – Fishing with Friends Fair,
- Arizona Disability Expo,
- State Capitol, Care Givers’ Rally,
- Native American Urban Disability Summit Meeting,
- Cochise County Youth Transition Fair,
- Day on the Lake, Adaptive Aquatic Sports Event,
- Annual Statewide A.T. Conference,
- Annual ADA Anniversary Celebration,
- Arizona Department of Education Transition Conference,
- National Service Inclusion Team,
- Emergency Preparedness for People with Disabilities,
- Touchstone Behavioral Health,
- Pima County Health Department,
- City of Surprise Emergency Preparedness Summit,
- Southwest Institute for Families and Children with Special Needs,
- Maricopa County Integrated Health Systems,
- Arizona Consumer Legislative Awareness Day,
- International Association of Assembly Managers (IAAM) Annual Conference,
- 121 Project Directors,
- AZTAP Annual A.T. Conference,
- United Cerebral Palsy,
- Yuma County Recorder’s Office,
- Arizona Medical Facilities Emergency Planners,
- Aurora Foundation.

At each of these events, SILC distributes printed materials that have SILC contact information. As brochures are distributed, SILC staff and/or members request recipients to contact SILC with comments and suggestions related to IL programs and services. Visitors at the exhibition booth/table have the option to sign the mailing list.

Information that has been received in connection with this activity is accordingly incorporated into the SPIL.

(d) Outreach Presentations

SILC annually targets specific unserved or underserved populations for outreach presentations. Please reference response provided in Subpart I, Section D, 4. As part of the planning process for each outreach event, consumers identify various disability-related issues they want addressed. Among the primary issues that consumers identified were guardianship, accessing assistive technologies, duplicative and nonintegrated access to related programs and services, and community inclusion. All of those issues are incorporated into the SPIL.

(e) Consumer IL Training Workshops

SILC helped facilitate a town hall meeting with participants as part of the agenda at the Consumer State Legislative Advocacy Training that was previously cited in this report. Participants were asked to identify various issues that they thought policy makers should address. The primary issues identified were guardianship, complicated systems for accessing services, as well as the non-integration of services and not being treated with dignity when applying for and receiving services, housing, and transportation.

(f) CIL Executive Directors Quarterly Meetings

As cited in Subpart IV, Section B of this report, SILC coordinates and hosts full-day meetings of the CIL Executive Directors.

(g) Rehabilitation Services Administration ILRS

SILC staff meets periodically with the Administrator of Arizona Rehabilitation Services Administration. Additionally, the SILC staff confers weekly with the various managerial levels of AZRSA.

(h) Disability Resource Center of the University of Arizona

The SILC ED met with the Executive Director of the University of Arizona, Disability Resource Center on two occasions. The focus of the meetings was to discuss youth-oriented IL issues, establishing a disability “think tank,” and Disabilities Studies curricula. The collaboration between SILC and the University of Arizona to address these issues was explored.

(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.

Response:

Procedures that SILC has developed and implemented to monitor, review and evaluate the goals and objectives of SPIL include:

(a) Goal specific SILC Committees.

The oversight and responsibility for each SPIL goal which SILC was designated, was assigned to a specific SILC ad hoc committee. The goals and respective committees are:

- Goal A, Promote and support advocacy strategies that impact Independent Living. – Public Policy Committee.
- Goal B, Enhance and expand collaborations among organizations to promote and support disability diversity awareness training and/or education – Community Collaboration Committee.
- Goal C, Enhance and expand outreach to promote and support community inclusion of PWD with an emphasis on unserved and underserved populations – Outreach Committee.
- Goal D, Promote and Support IL Resource and Organizational Capacity Building – IL Networking Committee.

Additionally, the council allocates a budget for each goal that the committee oversees. To assist council members with the process, SILC staff constructed an individual matrix for each committee. The fields in those matrices indicate the goals, objectives, action steps, timeframe for completion, budget, and issues. Each committee's chairperson is a council member. The remaining committee membership is comprised of other council members and interested public members.

The committees meet in the intervals between the full Council meetings. At the beginning of each meeting, the goal matrix is reviewed to assess if progress is being made in accordance with the timeframe for and within the budget allocations. If the objectives are not in accordance with the matrix, the committee discusses alternative strategies to comply with the SPIL and makes adjustments accordingly or explores recommendations to present to the full council for any revision considerations.

(b) Quarterly Full Council Meetings.

At each of the quarterly full council meeting each of the committees presents a report to the council relative to their progress and/or issues with respect to accomplishing the goals and objectives of the SPIL.

(c) CIL ED Meetings.

At each of the quarterly CIL ED meetings, a portion of the agenda is related to the SPIL. Refer to Subpart IV, Section B.

(d) Quarterly Reports to AZRSA.

SILC staff drafts and delivers quarterly reports with supporting documentation to the Administrator of AZRSA that presents the progress of the goals and objectives as specified in the SPIL.

(e) Meeting with AZRSA

As referenced previously, SILC staff and/or Council members meet periodically with the administrator and/or managers at AZRSA. Frequently the agenda of the meetings is the focus on the status of the SPIL.

(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.

Response:

- (a) A member of SILC has been appointed by the Governor to the SRC. That Council member is the SILC liaison to SRC and attends all of their meetings. At each of the SRC and SILC meetings, the representative presents a report about the activities of each group. Additionally, the representative explores collaborations as appropriate and identifies for both groups issues of common interest and concerns.
- (b) Staff of the Arizona Commission for the Deaf and Hard of Hearing, Arizona Technical Access Project, Arizona Office for American with Disabilities, and the Arizona Center for Disability Law serve as members of SILC.
- (c) The SILC ED serves on the Arizona Center for Disability Law Board of Directors.
- (d) The SILC ED participates on committees of the Governor's Council on Developmental Disabilities.

(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.

Response:

SILC complies with the Open Meeting Law of Arizona. It faxes an agenda to the Arizona Department of Administration Management Services Division for public posting prior to each of our full Council meetings, committee meetings, and any other meeting convened or coordinated. A copy of each fax confirmation is kept on file in the SILC office. SILC also electronically distributes the agenda for every meeting to various stakeholders in the community and request they circulate it as they think appropriate and germane.

There is a calendar of all meetings listed on our website and the AZ Disability Post website. Additionally, the meeting minutes from our Executive Committee and full Council meetings are posted on our website.

Item 2 – Other Activities

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

Response:

- (a) SILC served as the fiscal agent for **The Arizona Disability Vote Coalition.**
- (b) Incidental and miscellaneous expenses (e.g., refreshments) that are not within the parameters of our other revenues are supported by unrestricted contributions.
- (c) SILC has separate bank accounts that they use to segregate funding accordingly. All funds received by the DSU are deposited in and disbursed from a separate account. Restricted and unrestricted funds are not co-mingled.

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 RSA for the training and technical assistance provided to CILs and SILCs.

	Choose up to 10 Priority Needs — Rate items 1-10 with 1 being most important
Training and Technical Assistance Needs	
Advocacy/Leadership Development	
General Overview	7
Community/Grassroots Organizing	10
Individual Empowerment	6
Systems Advocacy	2
Legislative Process	
Applicable Laws	
General overview and promulgation of various disability laws	1
Americans with Disabilities Act	
Air-Carrier's Access Act	
Fair Housing Act	
Individuals with Disabilities Education Improvement Act	
Medicaid/Medicare/PAS/waivers/long-term care	
Rehabilitation Act of 1973, as amended	
Social Security Act	
Workforce Investment Act of 1998	
Ticket to Work and Work Incentives Improvement Act of 1999	
Government Performance Results Act of 1993	
Assistive Technologies	
General Overview	
Data Collecting and Reporting	
General Overview	
704 Reports	
Performance Measures contained in 704 Report	
Dual Reporting Requirements	
Case Service Record Documentation	
Disability Awareness and Information	
Specific Issues	8

	Choose up to 10 Priority Needs — Rate items 1-10 with 1 being most important
Training and Technical Assistance Needs	
Evaluation	
General Overview	
CIL Standards and Indicators	
Community Needs Assessment	
Consumer Satisfaction Surveys	
Focus Groups	
Outcome Measures	
Financial: Grant Management	
General Overview	
Federal Regulations	
Budgeting	
Fund Accounting	
Financial: Resource Development	
General Overview	9
Diversification of Funding Base	
Fee-for-Service Approaches	
For Profit Subsidiaries	
Fund-Raising Events of Statewide Campaigns	
Grant Writing	
Independent Living Philosophy	
General Overview	5
Innovative Programs	
Best Practices	4
Specific Examples	
Management Information Systems	
Computer Skills	
Software	
Marketing and Public Relations	
General Overview	
Presentation/Workshop Skills	
Community Awareness	

	Choose up to 10 Priority Needs — Rate items 1-10 with 1 being most important
Training and Technical Assistance Needs	
Networking Strategies	
General Overview	
Electronic	
Among CILs & SILCs	
Community Partners	
Program Planning	
General Overview of Program Management and Staff Development	
CIL Executive Directorship Skills Building	
Conflict Management and Alternative Dispute Resolution	
First-Line CIL Supervisor Skills Building	
IL Skills Modules	
Peer Mentoring	
Program Design	
Time Management	
Team Building	
Outreach to Unserved/Underserved Populations	
General Overview	3
Disability	
Minority	
Institutionalized Potential Consumers	
Rural	
Urban	
SILC Roles/Relationship to CILs	
General Overview	
Development of State Plan for Independent Living	
Implementation (monitor & review) of SPIL	
Public Meetings	
Role and Responsibilities of Executive Board	
Role and Responsibilities of General Members	
Collaborations with In-State Stakeholders	

Training and Technical Assistance Needs	Choose up to 10 Priority Needs — Rate items 1-10 with 1 being most important
CIL Board of Directors	
General Overview	
Roles and Responsibilities	
Policy Development	
Recruiting/Increasing Involvement	
Volunteer Programs	
General Overview	
Optional Areas and/or Comments (write-in)	

SUBPART VI – SPIL COMPARISON AND UPDATES, OTHER ACCOMPLISHMENTS AND CHALLENGES OF THE REPORTING YEAR

Section 704(m)(4) of the Act; 34 CFR 76.140

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.

Response:

This report provides a summary overview of how the Arizona Statewide Independent Living Council (SILC) achieved the goals and objectives of the 2008 – 2010 AZ SPIL that it was responsible for completing within the fiscal year 2008.

1. GOAL A

Promote and support advocacy strategies that impact Independent Living.

Objective A1: Identify and prioritize IL issues related to Assistive Technology, Emergency Preparedness

- (a) SILC convened a summit meeting to explore issues related to the delivery and repair of Durable Medical Equipment (DME) that consumer, hospital rehabilitation staff, and advocates had reported to SILC. The meeting occurred in October 2007. Sixty people representing various stakeholders related to the issue participated in the summit. Following the summit a task force was established. Members of the task force included consumers, DME vendors, health care plans, state agencies, medical professionals, and disability advocacy organizations. The facilitator of the task force conducted key informant surveys of representatives from each stakeholder group. The information from the surveys was the basis for the agenda and focus of the task force. The Task Force has been meeting monthly since March. A fifty seven page report with recommendations has been drafted. It is currently being reviewed and edited. SILC will distribute the report to appropriate policy makers who have the authority to effect systemic changes related to the delivery and/or repair of DME.
- (b) SILC established an Emergency Preparedness Planning Subcommittee of the Public Policy Committee. It met monthly at the SILC office. The composition of the subcommittee includes representatives from consumer advocacy organizations, community volunteers, emergency service personnel, policy makers, and state agencies, as well as consumers and other stakeholders. The committee identified the lack of information related to the location and needs of people with disabilities (PWDs) for first responders and emergency planners as a priority issue. SILC in

conjunction with the Arizona Department of Economic Security (DES) conducted a survey of 33 other states to explore what protocols and/or programs were in place for registries of PWDs. On the basis of its research, SILC drafted a proposal for the implementation of a statewide registry in Arizona. That proposal was presented to a Governor's cabinet committee. The proposal is currently being reviewed and considered by the Governor's Office.

Objective A2: Promote and support statewide advocacy projects that address IL issues.

- (a) SILC, in collaboration with Arizona Bridge to Independent Living (ABIL) and the Arizona Center for Disability Law, established the Just Vote Arizona! Disability Coalition Project (JVA). The focus of the project is voter registration of people with disabilities. The goal of JVA is to establish a statewide network of local, grassroots disability-related organizations that will actively engage in voter registration activities at the local community level across the state. JVA activities include compiling and distributing non-partisan information about issues; continually expanding the coalition membership; facilitating the education of individuals, organizations, and service providers about voter registration protocols and general voting information; and ensuring accessibility at polling locations and voting equipment at election times. We have enhanced the mailing lists of seven members and are currently exploring protocols to do list enhancements for other members that will meet their needs related to security and privacy.

Objective A3: Establish and/or expand communication networks with IL stakeholders and policy makers.

- (a) In addition to the distribution of reports and documents referenced in the response to Objective A1, SILC posts all of its reports and documents on its website and distributes the same through the Arizona Disability Advocacy Coalition listserv.
- (b) On February 5, 2008, SILC supported a consumer workshop training focused on the Arizona Legislative Information System (ALIS) at the Arizona Disability Advocacy Coalition Consumer Legislative Training held at the Black Canyon Conference Center in Phoenix; 105 consumers attended the training.

Objective A4: Participate in, promote, and/or support national advocacy organizations/projects that address IL issues

- (a) SILC participates in and supports national advocacy organizations that address IL issues and is a member of the following organizations:
- National Council on Independent Living – NCIL
 - The Association of Programs for Independent Living – APRIL
 - SILC Congress

The National Council on Independent Living (NCIL) is the longest-running national cross-disability, grassroots organization run by and for people with disabilities.

Founded in 1982, NCIL represents thousands of organizations and individuals, including: Centers for Independent Living (CILs), Statewide Independent Living Councils (SILCs), individuals with disabilities, and other organizations that advocate for the human and civil rights of people with disabilities throughout the United States. NCIL promotes a national advocacy agenda set by its membership and provides input and testimony on national disability policy.

The Association of Programs for Rural Independent Living (APRIL) is a national, grassroots, consumer-controlled, nonprofit membership organization consisting of centers for independent living, their satellites and branch offices, statewide independent living councils, and other organizations and individuals concerned with the independent living issues of people with disabilities living in rural America.

SILCs across the country are a vital part of the Independent Living movement, and the 2008 SILC Congress was dedicated to providing sessions that specifically focus on SILCs and their unique role in IL service planning and implementation. They encourage sessions that feature SILC-to-SILC mentorship strategies as well as constructive methods to facilitate positive working relationships with SILCs' IL partners.

AZ SILC annually sends a delegation of AZ SILC members and/or staff to attend the conferences of each of the respective abovementioned organizations. In addition, AZ SILC participates in planning of and provides resources to support each of the annual conferences.

2. GOAL B

Enhance and expand collaborations among organizations to promote and support disability diversity awareness training and/or education.

Objective B1: Establish a Business/AZ SILC Partnership Program.

(a) This objective is scheduled to start in fiscal year 2009.

Objective B2: Promote and support events and/or programs that enhance the cultural/societal images of PWD.

(a) In January 2008 the SILC Executive Director met with three University of Arizona administrators in Tucson. They represented the University's Disability Resource Center and College of Education. The focus of the discussion was their proposal related to establish a University of Arizona Center for Disability. The SILC Executive Director conveyed to the university administrators that the council is supportive of their proposal and would be eager to promote and support its adoption and implementation. At the conclusion of the meeting it was agreed that more discussions will follow and SILC will collaborate with the university staff when the time was propitious. SILC recommended to the Governor that one of those administrators be appointed to the council. His appointment was confirmed in

September 2008. Additionally, the SILC chair is on the adjunct faculty at NAU and teaches a course on Disability Law. The SILC Executive Director assists in that course with presentations related to Independent Living philosophy and history.

Objective B3: Enhance and expand the multi-organizational disability-related event calendar.

- (a) AZ SILC continually promotes the calendar by distributing printed materials at all public presentation and/or community meeting. SILC reserved an exhibition booth exclusively dedicated to promoting the calendar website at the Disability EXPO that occurred on February 20, 2008, at the Phoenix Convention Center. SILC has also recently drafted new promotional materials that will be widely distributed to various disability-related organizations and will be the basis for a print media advertising campaign that is currently being explored. Additionally, the SILC program coordinator is scheduling a series of PowerPoint presentations. The current plan is to target two organizations a month during FY 2009 to conduct presentations to the staff of those organizations. Please visit www.azdisabilitypost.org.

3. GOAL C

Enhance and expand outreach to promote and support community inclusion of PWD with an emphasis on unserved and underserved populations.

Objective C1: Transpose and present AZ SILC and SILS and CIL programs presentation/promotional materials in accessible and culturally competent language formats.

- (a) Suns Sounds Radio of Arizona has agreed to collaborate with SILC to present IL materials in an accessible and culturally competent language format. We are exploring how to produce and distribute CDs with an audio presentation of IL information in the Navajo language. SILC has discussed the logistics and content of the translation with members of the Navajo nation who reside on the reservation. They are currently assessing the efficacy of the project with other members of their local community. During the interim a council member who is Navajo and lives on the reservation has completed an audio translation of IL information that was recorded and reproduced on a limit edition of CDs.

Objective C2: Identify populations for outreach efforts that are considered unserved and underserved (as defined and published by U.S. OSERS/RSA in their instruction manual for the 704 report).

- (b) Three outreach meetings/workshops to unserved and/or underserved populations that SILC coordinated were:
- o African-Americans: On May 16, 2008, SILC coordinated a day-long workshop and Town Hall meeting in South Phoenix that targeted members of the African American community; fifty seven people attended. The agenda included presentations from nine disability-related organizations that provide programs and

services. Additionally, a representative from the U.S. Congressional office for the district, two of the three state legislators for the district, the county emergency planner, and the district's city council official participated in the Town Hall meeting.

- Native Americans: On May 20, 2008, SILC coordinated and collaborated with Arizona Center for Disability Law to present a day-long workshop at the Salt River Pima Maricopa Reservation; fifty two people attended. The morning sessions focused on several different programs and services available to the residents of the reservation. The afternoon session was dedicated to an intensive training on developing and implementing an Individual Education Plan.
- Latinos: SILC coordinated a workshop that was conducted in Spanish with an interpreter available for those who needed an English translation. It was held at the Golden Gate Community Center in Phoenix, AZ, on September 12, 2008 from 9:00am until 4:00pm. Fifty consumers attended to hear presentations from eight other disability related organizations that collaborated with SILC.
- Populations that have been identified for outreach efforts in the next fiscal year include Asian Americans and Women. The locations, logistics, and agendas are currently under consideration.

Objective C3: Collaborate annually in at least four community events, e.g., complex/nursing homes, college Disability Resource Services, rehabilitation units, disability expositions, and/or legislative sessions.

- As previously cited, SILC participated as an exhibitor in various community conferences and/or expositions. They included among others:
 - 10/27/07 – Mesa Adaptive Sports Conference & Exposition, Mesa
 - 01/12/08 – City of Surprise, Emergency Preparedness Conference, Surprise
 - 01/26/08 – Multiple Sclerosis Association, annual statewide meeting, Scottsdale
 - 02/20/08 – Disability Expo, Phoenix
 - 02/23/08 – Joni & Friends, Fishing without Bounds, Tempe
 - 03/19/08 – Urban Native American VR Conference & Exposition, Phoenix
 - 06/02/08 – AZTAP AT Conference & Exposition, Litchfield Park
- SILC staff conducted presentations or workshops focused on Independent Living. The programs included among others:
 - 10/18/07 – ASU West, Disability Culture Class, Phoenix
 - 11/06/07 – Touchstone Behavioral Health Staff Training, Phoenix
 - 01/12/08 – City of Surprise, Emergency Preparedness Conference, Surprise
 - 01/18/08 – International Arts Auditorium Managers (IAAM) Conference, Phoenix
 - 02/06/08 – Legislative Awareness Day, State Capitol
 - 03/13/08 – Caregivers' Rally, State Capitol
 - 06/02/08 – AZTAP AT Conference & Exposition, Litchfield Park

4. GOAL D:

Promote and Support IL Resource and Organizational Capacity Building

Objective D1: Analyze and review IL statistical data, demographics, and funding.

- (a) SILC staff constructed a matrix that reflected the demographic and geographic service areas of each Arizona Center for Independent Living (CIL). The matrix was presented to the CIL executive directors for their consideration and revisions.
- (b) SILC staff in collaboration with the CIL executive directors reviewed Part C state funding for Independent Living Services. SILC staff and the CIL executive directors identified an amount to propose to the Governor's Office for a state general fund appropriation to support additional CIL offices.

Objective D2: Promote and support expanding the IL network.

- (a) In collaboration with all the CIL executive directors, SILC drafted a proposal for a state general fund appropriation to support CIL branch offices. It was the intent of SILC to submit the document to the Governor's Office and state legislators for their consideration; however, it was not submitted to the Governor's Office or the legislature. The SILC Executive Director met with key allies in the Governor's Office and legislature prior to submitting the document to discuss and explore the feasibility of the proposal. He was strongly advised by those allies that because of the state's fiscal crisis, it was not an opportune time to pursue any new state funding.

Objective D3: Develop an Arizona marketing plan for IL.

- (a) SILC conducted research to collect data about how many and what kinds of organizations in Arizona have the phrase "independent living" as part of their identity. We discovered that there are 19 organizations in Arizona registered with the Secretary of State using the term in their name and business branding. Only three of those registered were independent living centers; most were service providers of either nursing homes facilities or DME vendors. The name has been co-opted by commercial interests. SILC is currently considering what other strategies might be explored to brand our philosophical perspective and mission. One project under consideration is producing a film for TV broadcast that thematically focuses on our perspective.

Objective D4: Promote and support a statewide disability youth advocacy training program.

- (a) This objective is scheduled to start in fiscal year 2009.

Objective D5: Promote and support the development of comprehensive approaches or systems for providing IL services.

(a) dependent on Objective E2 and E3 and cannot be implemented or completed until E3 and E4 have progressed.

(a) SILC staff serves on the boards of directors of the following organizations:

- **Arizona Center for Disability Law**
- **Arizona Loans for Assistive Technology**
- **ArtAbility – Accessing Arizona Arts**
- **Arizona Disability Advocacy Coalition and**
- **Arizona Assistive Technology Project**

Their function is to address cross-disability issues and explore how the respective agendas and missions of these organizations might be connected to or integrated into the agenda/mission of SILC and other stakeholders in the disability community.

(b) SILC staff serves on the steering committees of the following:

- **The Annual Statewide Consumer Legislative Advocacy Training**
- **The Arizona CIL Coalition**
- **The Arizona National & Community Service Inclusion Project**
- **The Arizona Aging and Disability Resource Center – AZ Links Project**
- **The Arizona Long Term Care, Personal Assistance Services Consumer Directed Care**
- **The Annual Statewide Assistive Technology Conference**
- **Community Outreach and Information Network**
- **Southwest Institute for Families and Children, Set Yourself Free Project.**

Their function is to address cross-disability issues and explore how the respective agendas and missions of these organizations might be connected to or integrated into the agenda/mission of SILC and other stakeholders in the disability community.

Objective E1: Create and distribute a matrix of SILS and CIL programs/services

(a) This objective is scheduled to start in fiscal year 2009.

Objective E2: Assess gaps in SILS and CIL programs for unserved and underserved population with particular attention to the deaf/blind population

Objective E3: Collaborate with stakeholders in the deaf/blind community to ameliorate identified gaps in services

(b) AZRSA has been unsuccessful in hiring a Deaf/Blind State Coordinator at this point. AZRSA has made two attempts to hire a Deaf/Blind State Coordinator which led to two separate interview sessions. The position was offered to two different people in this hiring process. Both of these individuals declined the position. AZRSA is now in the process of contracting with outside agencies for comparable services that a Deaf/Blind State Coordinator would provide as well as for direct services for the deaf/blind community, hourly follow-ups, and consultation for AZRSA. Negotiations for this contract are currently ongoing. The tasks that a Deaf/Blind State Coordinator would complete have not been completed due to this lack of personnel.

Objective E4: Advocate for the implementation of strategies to address deaf/blind SILS and CIL programs issues.

This objective is **Objective E5:** Review and evaluate annually the preceding Objectives and Action Steps and modify or revise accordingly as needed.

- (a) This objective is dependent on Objective E2 and E3 and cannot be implemented or completed until E3 and E4 have progressed.

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 DSU administration of the SILS program.

- The council voted unanimously to relocate the offices of SILC and delegated the authority to SILC staff to effect that relocation.

Section B– Significant Activities and Accomplishments

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

Response:

One current ILRS counselor is co-facilitator of a group called Compass, which is a support/informational group that meets monthly and hosts speakers on disability related topics, member discussions, and/or social activities.

This same ILRS counselor is also a co-facilitator of the East Valley Brain Injury Support Group, which meets monthly to provide information and support to survivors of brain injury and their families.

Another AZRSA counselor hosts a support group in the community of Flagstaff, Arizona for people with disabilities. This support group has been ongoing for 13 years. They hold regular meetings as well as special events such as a celebratory potluck every July in recognition of the American’s with Disabilities Act.

Section C – Substantial Challenges

If applicable, describe any substantial problems encountered by the DSU 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 DSU; complications recruiting SILC members; complications working with other state agencies or organizations within the state.

Response:

Section D – Additional Information

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

The SILS has been unable to serve all eligible applicants to the ILRS program in a timely manner. This delay in service exists due to a lack of sufficient funding. A waitlist of clients whose needs total approximately \$1.3 million exists due to this lack of sufficient funding. This has created a strain on the program and a deficit in the community related to promoting independence.

SubPART VII - SIGNATURES

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

SIGNATURE OF SILC CHAIRPERSON	DATE
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Edward L. Myers, III	602-262-2900
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NAME AND TITLE OF SILC CHAIRPERSON	PHONE NUMBER
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SIGNATURE OF DSU DIRECTOR	DATE
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Tracy L. Wareing, DES Director	602-542-5757
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NAME AND TITLE OF DSU DIRECTOR	PHONE NUMBER
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SIGNATURE OF DSU DIRECTOR (Older Blind Program)	DATE
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NAME AND TITLE OF DSU DIRECTOR (Older Blind Program)	PHONE NUMBER
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