

**STATE PLAN FOR
INDEPENDENT LIVING
(SPIIL)**

**Chapter 1, Title VII of the Rehabilitation Act of 1973,
as Amended**

**STATE INDEPENDENT LIVING SERVICES (SILS) PROGRAM
PART B**

**CILs FOR INDEPENDENT LIVING (CIL) PROGRAM
PART C**

FISCAL YEARS 2014-2016

Effective Date: October 1, 2013

OMB NUMBER: 1820-0527

TABLE OF CONTENTS

Part I: Assurances

Section 1: Legal Basis and Certifications	3
Section 2: SPIL Development	3
Section 3: Independent Living Services	5
Section 4: Eligibility	5
Section 5: Staffing Requirements	5
Section 6: Fiscal Control and Fund Accounting	6
Section 7: Recordkeeping, Access and Reporting	6
Section 8: Protection, Use and Release of Personal Information	7
Section 9: Signatures.....	7

Part II: Narrative

Section 1: Goals, Objectives and Activities.....	8
Section 2: Scope, Extent, and Arrangements of Services	12
Section 3: Design for the Statewide Network of Centers	14
Section 4: Designated State Unit (DSU)	14
Section 5: Statewide Independent Living Council (SILC)	15
Section 6: Service Provider Requirements	16
Section 7: Evaluation	17
Section 8: State-Imposed Requirements	17

PART I: Assurances

State of: OREGON

Section 1: Legal Basis and Certifications

- 1.1 The designated State unit (DSU) eligible to submit the State Plan for Independent Living (SPIL or the plan) and authorized under State law to perform the functions of the State under the State Independent Living Services (SILS) and Centers for Independent Living (CIL) programs is the Vocational Rehabilitation Program (VR). *34 CFR 76.104(a)(1) and (2); 34 CFR 364.22(a)*
- 1.2 The separate State agency eligible to submit the plan and authorized under State law to provide vocational rehabilitation (VR) services to individuals who are blind is Oregon Commission for the Blind. *34 CFR 76.104(a)(1) and (2); 34 CFR 364.20(d) and 364.22(c)*
- 1.3 The Statewide Independent Living Council (SILC) that meets the requirements of section 705 of the Act and is authorized to perform the functions outlined in section 705(c) of the Act in the State is Oregon State Independent Living Council. *34 CFR 364.21(a)*
- 1.4 The DSU and, if applicable, the separate State agency authorized to provide VR services to individuals who are blind, and the SILC are authorized to jointly develop, sign and submit this SPIL on behalf of the State, and have adopted or otherwise formally approved the SPIL. *34 CFR 76.104(a)(7); 34 CFR 364.20(c) and (d)*
- Yes*
- 1.5 The DSU, and, if applicable, the separate State agency authorized to provide VR services to individuals who are blind, may legally carry out each provision of the plan and will comply with all applicable Federal statutes and regulations in effect with respect to the three-year period it receives funding under the SPIL. *34 CFR 76.104; 34 CFR 80.11(c)*
- Yes*
- 1.6 The SPIL is the basis for State operation and administration of the program. All provisions of the SPIL are consistent with State law. *34 CFR 76.104(a)(4) and (8)*
- Yes*
- 1.7 The representative of the DSU and, if applicable, of the separate State agency authorized to provide VR services to individuals who are blind, who has the authority under State law to receive, hold, and disburse Federal funds made available under the SPIL and to submit the SPIL jointly with the SILC chairperson is Stephaine Parrish Taylor (Vocational Rehabilitation Program Director) and Dacia Johnson (Oregon Commission for the Blind Executive Director). *34 CFR 76.104(a)(5) and (6)*

Section 2: SPIL Development

- 2.1 The plan shall be reviewed and revised not less than once every three years, to ensure the existence of appropriate planning, financial support and coordination, and other assistance to appropriately address, on a statewide and comprehensive basis, the needs in the State for:
- The provision of State independent living services;

- The development and support of a statewide network of centers for independent living; and
- Working relationships between programs providing independent living services and independent living centers, the vocational rehabilitation program established under title I, and other programs providing services for individuals with disabilities. *34 CFR 364.20(f)*

Yes

2.2 The DSU and SILC conduct public meetings to provide all segments of the public, including interested groups, organizations and individuals, an opportunity to comment on the State plan prior to its submission to the Commissioner and on any revisions to the approved State plan. *34 CFR 364.20(g)(1)*

Yes

2.3 The DSU and SILC establish and maintain a written description of procedures for conducting public meetings in accordance with the following requirements. The DSU and SILC shall provide:

- appropriate and sufficient notice of the public meetings (that is, at least 30 days prior to the public meeting through various media available to the general public, such as newspapers and public service announcements, and through specific contacts with appropriate constituency groups and organizations identified by the DSU and SILC);
- reasonable accommodation to individuals with disabilities who rely on alternative modes of communication in the conduct of the public meetings, including providing sign language interpreters and audio-loops; and
- public meeting notices, written material provided prior to or at the public meetings, and the approved State plan in accessible formats for individuals who rely on alternative modes of communication. *34 CFR 364.20(g)(2)*

Yes

2.4 At the public meetings to develop the State plan, the DSU and SILC identify those provisions in the SPIL that are State-imposed requirements beyond what would be required to comply with the regulations in 34 CFR parts 364, 365, 366, and 367. *34 CFR 364.20(h)*

Yes

2.5 The DSU will seek to incorporate into, and describe in, the State plan any new methods or approaches for the provision of IL services to older individuals who are blind that are developed under a project funded under chapter 2 of title VII of the Act and that the DSU determines to be effective. *34 CFR 364.28*

Yes

2.6 The DSU and SILC actively consult, as appropriate, in the development of the State plan with the director of the Client Assistance Program (CAP) authorized under section 112 of the Act. *34 CFR 364.20(e)*

Yes

Section 3: Independent Living Services

3.1 The State, directly or through grants or contracts, will provide IL services with Federal, State, or other funds. *34 CFR 364.43(b)*

Yes

3.2 Independent living services shall be provided to individuals with significant disabilities in accordance with an independent living plan mutually agreed upon by an appropriate staff member of the service provider and the individual, unless the individual signs a waiver stating that such a plan is unnecessary. *34 CFR 364.43(c)*

Yes

3.3 All service providers will use formats that are accessible to notify individuals seeking or receiving IL services under chapter 1 of title VII about:

- the availability of the CAP authorized by section 112 of the Act;
- the purposes of the services provided under the CAP; and
- how to contact the CAP. *34 CFR 364.30*

Yes

3.4 Participating service providers meet all applicable State licensure or certification requirements. *34 CFR 365.31(c)*

Yes

Section 4: Eligibility

4.1 Any individual with a significant disability, as defined in 34 CFR 364.4(b), is eligible for IL services under the SILS and CIL programs authorized under chapter 1 of title VII of the Act. Any individual may seek information about IL services under these programs and request referral to other services and programs for individuals with significant disabilities, as appropriate. The determination of an individual's eligibility for IL services under the SILS and CIL programs meets the requirements of 34 CFR 364.51. *34 CFR 364.40(a), (b) and (c)*

Yes

4.2 Service providers apply eligibility requirements without regard to age, color, creed, gender, national origin, race, religion or type of significant disability of the individual applying for IL services. *34 CFR 364.41(a)*

Yes

4.3 Service providers do not impose any State or local residence requirement that excludes any individual who is present in the State and who is otherwise eligible for IL services from receiving IL services. *34 CFR 364.41(b)*

Yes

Section 5: Staffing Requirements

5.1 Service provider staff includes personnel who are specialists in the development and provision of IL services and in the development and support of centers. *34 CFR 364.23(a)*

Yes

5.2 To the maximum extent feasible, a service provider makes available personnel able to communicate:

- with individuals with significant disabilities who rely on alternative modes of communication, such as manual communication, nonverbal communication devices, Braille or audio tapes, and who apply for or receive IL services under title VII of the Act; and
- in the native languages of individuals with significant disabilities whose English proficiency is limited and who apply for or receive IL services under title VII of the Act. *34 CFR 364.23(b)*

Yes

5.3 Service providers establish and maintain a program of staff development for all classes of positions involved in providing IL services and, if appropriate, in administering the CIL program. The staff development programs emphasize improving the skills of staff directly responsible for the provision of IL services, including knowledge of and practice in the IL philosophy. *34 CFR 364.24*

Yes

5.4 All recipients of financial assistance under parts B and C of chapter 1 of title VII of the Act will take affirmative action to employ and advance in employment qualified individuals with significant disabilities on the same terms and conditions required with respect to the employment of individuals with disabilities under section 503 of the Act. *34 CFR 364.31*

Yes

Section 6: Fiscal Control and Fund Accounting

6.1 All recipients of financial assistance under parts B and C of chapter 1 of title VII of the Act will comply with applicable EDGAR fiscal and accounting requirements and will adopt those fiscal control and fund accounting procedures as may be necessary to ensure the proper disbursement of and accounting for those funds. *34 CFR 364.34*

Yes

Section 7: Recordkeeping, Access and Reporting

7.1 In addition to complying with applicable EDGAR recordkeeping requirements, all recipients of financial assistance under parts B and C of chapter 1 of title VII of the Act will maintain records that fully disclose and document:

- the amount and disposition by the recipient of that financial assistance;
- The total cost of the project or undertaking in connection with which the financial assistance is given or used;
- the amount of that portion of the cost of the project or undertaking supplied by other sources;
- compliance with the requirements of chapter 1 of title VII of the Act and Part 364 of the regulations; and
- other information that the Commissioner determines to be appropriate to facilitate an effective audit. *34 CFR 364.35(a) and (b)*

Yes

7.2 With respect to the records that are required by 34 CFR 364.35, all recipients of financial assistance under parts B and C of chapter 1 of title VII of the Act will submit reports that the Commissioner determines to be appropriate. *34 CFR 364.36*

Yes

7.3 All recipients of financial assistance under parts B and C of chapter 1 of title VII of the Act will provide access to the Commissioner and the Comptroller General, or any of their duly authorized representatives, to the records listed in 34 CFR 364.37 for the purpose of conducting audits, examinations, and compliance reviews. *34 CFR 364.37*

Yes

Section 8: Protection, Use, and Release of Personal Information

8.1 Each service provider will adopt and implement policies and procedures to safeguard the confidentiality of all personal information, including photographs and lists of names in accordance with the requirements of 34 CFR 364.56(a)(1-6). *34 CFR 364.56(a)*

Yes

Section 9: Signatures

After having carefully reviewed all of the assurances in sections 1 - 8 of this SPIL, the undersigned hereby affirm that the State of Oregon is in compliance and will remain in compliance with the aforementioned assurances during October 1, 2013-September 30, 2016 (specify the three-year period covered by this SPIL).

The effective date of this SPIL is October 1, 2013 (year)

SIGNATURE OF SILC CHAIRPERSON DATE

Ann Balzell

NAME OF SILC CHAIRPERSON

SIGNATURE OF DSU DIRECTOR DATE

Stephaine Parrish Taylor, Vocational Rehabilitation Program Director

NAME AND TITLE OF DSU DIRECTOR

SIGNATURE OF DIRECTOR OF THE SEPARATE STATE AGENCY FOR INDIVIDUALS WHO ARE BLIND DATE

Dacia Johnson, Oregon Commission for the Blind Executive Director

NAME AND TITLE OF THE DIRECTOR OF THE SEPARATE STATE AGENCY FOR INDIVIDUALS WHO ARE BLIND

Part II: Narrative

Section 1: Goals, Objectives and Activities

1.1 Goals and Mission – 34 CFR 364.42(b)(1)

Describe the overall goals and mission of the State's IL programs and services. The SPIL must address the goals and mission of both the SILS and the CIL programs, including those of the State agency for individuals who are blind as they relate to the parts of the SPIL administered by that agency.

Mission Statement: Oregonians with disabilities direct their lives, access their communities and fulfill their responsibilities as independently as possible.

Goal Name: Funded Services

Goal Description: Independent Living services are supported through effective funding strategies.

Goal Name: Maximized and Effective Services

Goal Description: Independent Living service providers maximize the reach and effectiveness of services.

Goal Name: Changed Systems and Attitudes

Goal Description: Consumers and Independent Living program staff engage in changing systems and attitudes to create a society consistent with Independent Living philosophy.

1.2 Objectives – 34 CFR 364.42(a)(1) and (d); 34 CFR 364.32; 34 CFR 364.33

1.2A Specify the objectives to be achieved and the time frame for achieving them.

Goal(s) from Section 1.1	Objective to be achieved	Time frame start date	Time frame end date
Funded Services	Objective 1.1-The Designated State Units, the State Independent Living Council, and the Network of Centers for Independent Living (CILs) collaboratively develop program administration strategies to support funding of Independent Living services. Outcome measures: 70% of IL program partners will be satisfied with initial implementation of protocols for IL program budget requests and for determination of annual funding allocations in the first year of implementation, increasing to 100% satisfaction by the end of the SPIL period.	10/01/2013	03/31/2014
Funded	Objective 1.1 Activities:	10/01/2013	03/31/2014

<p>Services</p>	<p>Activity 1.1a. The DSU/VR, SILC and Network of CILs collaboratively establish/implement time lines for tasks necessary to develop the IL program funding requests for the state biennial budget. This includes establishing opportunities for input and information sharing among IL program partners. (Purposes include support of consensus building, transparency, the ability of CILs to advocate with appropriate parties regarding CIL budget-related needs, the ability of the SILC to evaluate SPIL implementation, and the ability of the DSU/VR to provide agency budget proposals during the state budget development process.)</p> <p>Lead: The SILC will take responsibility to hold necessary joint meetings and invite representatives selected by the above listed partners and facilitate needed work plans to guide completion of this activity.</p>		
<p>Funded Services</p>	<p>Activity 1.1b. The DSU/VR, SILC and Network of CILs collaboratively establish times lines and processes for tasks related to determining the annual state IL program funding allocations. This includes establishing opportunities for input and information sharing among IL program partners. (Purposes include support for consensus building, CIL organizational planning, the ability of the SILC to evaluate SPIL implementation, and the ability of the DSU/VR to negotiate the SILC's Resource Plan.)</p> <p>Lead: The SILC will take responsibility to hold necessary joint meetings with and invite representatives selected by the above listed partners and facilitate needed work plans to guide completion of this activity.</p>	<p>10/01/2013</p>	<p>03/31/2014</p>
<p>Funded Services</p>	<p>Objective 1.2-Independent Living program partners, including DSUs/VR and OCB, the SILC and the Network of CILs use credible data to develop funding strategies to maximize the number of geographic regions receiving Independent Living services.</p> <p>Outcome measures:</p>	<p>10/01/2013</p>	<p>10/31/2015</p>

	<ul style="list-style-type: none"> • 100% of state budget requests for Independent Living program funding were supported by measurable performance data. • 80% of IL partners believe there was adequate data to support development of CIL funding strategies identified in the State Plan. 		
Funded Services	<p>Objective 1.2 Activities:</p> <p>Activity 1.2a. Independent Living service providers develop performance measures to support State Independent Living program funding requests, as well as requests to private funders.</p> <p>Lead: Association of Oregon CILs will be lead for facilitating the identification of performance measures related to the services of Oregon CILs and communicating them to Oregon’s CIL directors, the SILC and the VR program’s IL Program Coordinator. Oregon Commission for the Blind will be lead for identifying their agency’s IL service performance measures.</p>	10/01/2013	03/31/2014
Funded Services	<p>Activity 1.2b. The DSUs, SILC and the Network of CILs collaboratively analyze the gap between existing resources and the resources needed to provide services statewide. This includes analysis of how funding needs may be impacted by such factors as geographic locations, etc.</p> <p>Lead: The SILC will have responsibility to hold joint meetings and invite representatives selected by the above listed partners, facilitate needed work plans to guide completion of this activity, and coordinate collection of required data in order to provide a basis for collaborative analysis related to this activity.</p>	04/01/2015	06/30/2015
Funded Services	<p>Activity 1.2c. The DSUs, SILC and Network of CILs collaboratively identify and implement feasible strategies to optimize the availability of Independent Living services. This may include adjustments in state-funded service areas and strategies for shared administrative services between CILs, etc.</p>	07/01/2015	10/31/2015

	<p>Lead: The DSU/VR will have responsibility to hold joint meetings and invite representatives selected by the above listed partners, and facilitate needed work plans to guide completion of this activity. The DSU and CILs may have responsibilities for specific aspects of implementation for the strategies ultimately selected.</p>		
Maximized and Effective Services	<p>Objective 2.1-The Network of CILs continue to improve, innovate and modernize their service models, with a focus on reach and effectiveness.</p> <p>Outcome measure: 60% of Oregon’s Network of CILs will be able to identify a service innovation that resulted in an increase in the number of consumers or populations served by their CIL.</p>	04/01/2014	09/30/2016
Maximized and Effective Services	<p>Objective 2.1 Activities:</p> <p>Activity 2.1a. The Network of CILs and the SILC will examine new strategies and needed resources for serving consumers, including those experiencing difficulty accessing CILs. Examples: virtual CILs, video conferencing, etc.)</p> <p>Lead: The Network of CILs will have responsibility to hold a meeting with representatives from the SILC, to establish a means of facilitating needed work plans to guide completion of this activity and provide data related to estimated costs of the strategies being examined. Depending on strategies selected for examination, the SILC may assist in gathering data and assessing various service strategies.</p>	04/01/2014	09/30/2014
Maximized and Effective Services	<p>Activity 2.1b. The SILC will produce a report summarizing strategies examined in 2.1a, and identifying promising service methods that could be implemented pending additional funding. The report will be shared with each of the IL program partners.</p> <p>Lead: SILC</p>	10/01/2014	11/30/2014
Maximized and Effective	<p>Activity 2.1c. CILs will implement feasible service delivery options.</p>	10/01/2014	06/30/2016

Services	Lead: CILs will be responsible for final decisions related to feasibility of options and implementation in their respective CILs. The SILC may participate in the assessment of feasibility.		
Maximized and Effective Services	Objective 2.2-CILs continue to improve their organizational management through use of effective practices. Outcome measure: 60% of Oregon’s Network of CILs implemented one or more practices recommended by Oregon’s Network of CILs related to administration of a CIL.	03/01/2014	09/30/2016
Maximized and Effective Services	Objective 2.2 Activities: Activity 2.2a The SILC will provide the Network of CILs with an annual report describing any effective practices in CIL administration identified during SPIL evaluation/monitoring activities. Lead: SILC	03/01/2014	04/30/2014
Maximized and Effective Services	Activity 2.2b. The Network of CILs will recommend effective practices for administration of a CIL, using resources such as reports provided by the SILC. Lead: The Network of CILs	05/01/2014	10/30/2014
Maximized and Effective Services	Activity 2.2c. Individual CILs will implement recommended practices identified by Oregon’s Network of CILs, as appropriate for their CIL. Lead: Individual CILs	11/01/2014	09/30/2016
Maximized and Effective Services	Objective 2.3-The DSUs, SILC and CILs increase collaboration with other service systems to improve delivery of services. Outcome measure: 60% of Oregon’s Network of CILs implemented a new structured agreement with one or more partner service systems.	10/01/2013	09/30/2016
Maximized and Effective Services	Objective 2.3 Activities: Activity 2.3a. The SILC will suggest potential partners for coordination of services with partner	10/01/2013	09/30/2016

	<p>agencies or groups, for example: Aging and Disability Resource Connections, Area Agencies on Aging, Aging and People with Disabilities, Coordinated Care Organizations, Addiction and Mental Health programs, Family Networks, Child Welfare Differential Approach.</p> <p>Lead: SILC</p>		
Maximized and Effective Services	<p>Activity 2.3b. The Network of CILs will assess CIL capacity and establish recommendations for coordination of services.</p> <p>Lead: The Network of CILs</p>	10/01/2013	09/30/2016
Maximized and Effective Services	<p>Activity 2.3c. The Network of CILs will initiate collaborative efforts, based on capacity assessments, using various strategies. For example: designating a lead facilitator and/or establishing structured partner agreements.</p> <p>Lead: The Network of CILs, with assistance as needed from the SILC.</p>	10/01/2013	09/30/2016
Changed Systems and Attitudes	<p>Objective 3.1-Independent Living program partners develop methods for engagement in systems change.</p> <p>Outcome measure: 60% of Oregon’s Network of CILs will have established an advocacy network for their staff and consumers, with a 10% increase in the number of participants by the second year.</p>	01/01/2014	09/30/2016
Changed Systems and Attitudes	<p>Objective 3.1 Activities:</p> <p>Activity 3.1a. The Network of CILs, with collaboration from the SILC, will develop an IL advocacy network to facilitate consumer and IL program staff involvement. For example, this may include methods for broadcasting IL calls-to-action, conducting advocacy leadership training and/or educating staff about the lobbying restrictions of certain funding streams.</p> <p>Lead: The Network of CILs will be responsible to initiate discussions with the SILC to identify strategies for collaboration and sharing of relevant information from national and state levels that would be of interest to advocates.</p>	10/01/2014	03/31/2015

<p>Changed Systems and Attitudes</p>	<p>Activity 3.1b. The Network of CILs will improve the coordination of advocacy and information sharing by designating lead facilitators for various critical statewide and national issues.</p> <p>Lead: The Network of CILs. The SILC will provide support in identifying critical issues that the Network of CILs may wish to address as advocates.</p>	<p>04/01/2014</p>	<p>07/31/2014</p>
<p>Changed Systems and Attitudes</p>	<p>Activity 3.1c. The SILC will engage with other groups/councils, state agency administrative staff, and other policy makers and advisors on key pertinent issues, keeping IL service providers informed of its partner involvements and opportunities that may arise for specific systemic change activities.</p> <p>Lead: SILC</p>	<p>01/01/2014</p>	<p>03/31/2014</p>

1.2B Describe the steps planned regarding outreach to populations in the State that are unserved or underserved by programs under title VII, including minority groups and urban and rural populations. This section of the SPIL must:

- Identify the populations to be designated for targeted outreach efforts;
- Identify the geographic areas (i.e., communities) in which the targeted populations reside; and
- Describe how the needs of individuals with significant disabilities from minority group backgrounds will be addressed.

Outreach to Unserved Areas:

Currently, approximately 26% of Oregon’s population, and 17% of the state’s square miles are unserved by a CIL, as defined in the Act in Section 702. See section 3.2 – Expansion of Network. Until additional funding is likely to be available, outreach to these areas will be limited to research that may be conducted to determine the existence of consumer groups providing some form of peer services or groups interested in bringing IL services to a particular area. Within these “unserved” areas, the Network of CILs will sometimes engage in outreach related to provision of specific services through contracts/agreements with various entities. Section 1.2A identifies objectives and activities that may result in these types of collaborations, including Objective 2.3, Activities 2.3a through c, and Objective 3.1, Activity 3.1c. Section 1.5 details examples of working relationships that will be continued or developed with the intent to provide limited services in currently unserved areas.

Outreach to Underserved Areas:

Section 3.1 - Existing Network, identifies the specific service areas where core IL services are currently available through the Oregon Network of CILs, and lists traditionally underserved populations within each CIL’s service area. Of these underserved populations, those identified

for targeted outreach efforts are listed below, along with the geographic regions where each targeted population resides. Each CIL prepared individual plans to address various target populations. To assist each CIL to identify service gaps and develop these targets, demographics of current consumers in each service area were compared to region-specific demographics of the general population, including the estimated size of populations experiencing certain types of disabilities within the service areas.

Geographic areas where targeted populations reside:

Ethnic Groups:

- Native Americans with disabilities in eastern and central Oregon
- Asians with disabilities in eastern Oregon, and the communities of Lakeview and Klamath Falls
- Hispanic/Latino individuals with disabilities in eastern Oregon, and in the Eugene-Springfield metro area
- Black/African Americans primarily in the communities of Lakeview and Klamath Falls

Age Groups:

- Youth 19 and under in eastern Oregon, in the Portland Metro area school districts, and in the Eugene-Springfield metro area
- Youth experiencing cognitive and or physical disabilities in the communities of Lakeview and Klamath Falls
- 20-24 year olds in the communities of Lakeview and Klamath Falls
- Individuals 18-30 in Douglas County
- Individuals over 60 in the communities of Lakeview and Klamath Falls
- Older individuals who are blind from Hispanic and Asian communities in Lakeview and Klamath Falls

Disability Types:

- Individuals who are deaf or hard of hearing in eastern Oregon, and in the communities of Lakeview and Klamath Falls
- Individuals experiencing mental/emotional disabilities in eastern Oregon
- Individuals experiencing vision loss in Jackson and Josephine Counties, and in the Eugene-Springfield metro area.

Underserved Homeless Individuals with Disabilities in Deschutes, Crook & Jefferson Counties

Veterans in Jackson and Josephine Counties

Addressing the Needs of Individuals with Significant Disabilities from Minority Backgrounds:

Some of the methods to address the needs of individuals from minority backgrounds are included in outreach plans of each CIL, for the targeted underserved populations. Other approaches include the following.

- **Minority Populations in General:** Working relationships will be developed with other service providers that have previously established service relationships within these communities. This ensures consumers, at a minimum, are aware of IL services and may be referred to their

local CIL by a trusted individual/provider. In addition, language translators will be sought when needed to serve non-English speakers when a staff member fluent in the consumer’s language is not available.

- **Hispanic Community:** Community members and organizations will be engaged to help dispel the tendency within this population to view CILs as governmental entities. This creates a barrier, due to fear of informing on undocumented individuals. One CIL will provide connections with “English as a Second Language” tutors, as an “on request” service for individuals with disabilities from this minority population.

1.3 Financial Plan – 34 CFR 364.42(a)(2) and (3); 34 CFR 364.29

Describe in sections 1.3A and 1.3B, below, the financial plan for the use of Federal and non-Federal funds to meet the SPIL objectives.

1.3A Financial Plan Tables

Complete the financial plan tables covering years 1, 2 and 3 of this SPIL. For each funding source, provide estimated dollar amounts anticipated for the applicable uses. The financial plan table should include only those funding sources and amounts that are intended to support one or more of the objectives identified in section 1.2 of the SPIL. To the extent possible, the tables and narratives must reflect the applicable financial information from centers for independent living. Refer to the SPIL Instructions for additional information about completing the financial tables and narratives.

- Insert additional rows for the specific funding sources and amounts expected within the categories of Other Federal Funds and Non-Federal Funds.

Year 1 - Approximate Funding Amounts and Uses

Sources	SILC Resource Plan	IL Services	General CIL Operations	Other SPIL Activities
Title VII Funds - Chapter 1, Part B		38,971	351,385	31,413
Title VII Funds - Chapter 1, Part C			962,653	
Title VII Funds - Chapter 2, OIB (only those provided by the OIB grantee to further a SPIL objective)				

Sources	SILC Resource Plan	IL Services	General CIL Operations	Other SPIL Activities
Other Federal Funds - Sec. 101(a)(18) of the Act (Innovation and Expansion)	288,425			
Other Federal Funds - Other				
Non-Federal Funds -State Funds	77,575	4,330	277,425	35,311
Non-Federal Funds - Other				

Year 2 - Approximate Funding Amounts and Uses

Sources	SILC Resource Plan	IL Services	General CIL Operations	Other SPIL Activities
Title VII Funds - Chapter 1, Part B		38,971	239,904	32,894
Title VII Funds - Chapter 1, Part C			857,435	
Title VII Funds - Chapter 2, OIB (only those provided by the OIB grantee to further a SPIL objective)				
Other Federal Funds - Sec. 101(a)(18) of the Act (Innovation and Expansion)	288,425			
Other Federal Funds - Other				
Non-Federal Funds -State Funds	77,575	4,330	277,425	35,311
Non-Federal Funds - Other				

Year 3 - Approximate Funding Amounts and Uses

Sources	SILC Resource Plan	IL Services	General CIL Operations	Other SPIL Activities
Title VII Funds - Chapter 1, Part B		38,971	239,904	32,894
Title VII Funds - Chapter 1, Part C			857,435	
Title VII Funds - Chapter 2, OIB (only those provided by the OIB grantee to further a SPIL objective)				
Other Federal Funds - Sec. 101(a)(18) of the Act (Innovation and Expansion)	288,425			
Other Federal Funds - Other				
Non-Federal Funds -State Funds	77,575	4,330	277,425	35,311
Non-Federal Funds - Other				

1.3B Financial Plan Narratives

1.3B(1) Specify how the part B, part C and chapter 2 (Older Blind) funds, if applicable, will further the SPIL objectives.

\$311,766 Title VII, Part B funds (with an additional \$110,000 of FFY2013 Part B carryover in year 1), and \$812,592 Title VII, Part C funds (with an additional \$150,061 Title VII, Part C ARRA expensed by CILs in year 1 of the SPIL period), and \$857,435 Title VII, Part C funds expenses by CILs in years 2 & 3 will assist in furthering SPIL objectives by providing the DSU/VR, CILs and OCB’s IL program with administrative funds to support staff costs and infrastructure needed to plan and carry out all assigned activities, including interaction with partners and consumers, and to provide data for measuring progress on all of the following SPIL objectives:

1.1 - Development of state-level funding strategies for Independent Living Services

- 1.2 - Development of credible data to support funding strategies maximizing geographic scope of services
- 2.1 – Improvement, innovation and modernization in service models, with focus on reach and effectiveness
- 2.2 – Improvement in organizational management of CILs
- 2.3 – Improvement of service delivery through collaboration with other service systems
- 3.1 – Facilitation of engagement in systemic change

No chapter 2 (Older Blind) funds are committed to further the objectives of the SPIL.

1.3B(2) Describe efforts to coordinate Federal and State funding for centers and IL services, including the amounts, sources and purposes of the funding to be coordinated.

In an attempt to coordinate Federal and State funding for CILs and IL services, the Designated State Unit (Vocational Rehabilitation) and the Oregon Commission for the Blind each request General Funds from the Oregon Legislature to match Federal Title VII, Part B funding. VR requests \$30,311 of State General Funds to match Part B Federal funds of \$272,798 per year, which is used to support grants for the general operation of CILs, with the exception of \$61,724 used by VR to support its IL program administrative tasks in year 1, and \$63,205 in years 2 and 3. OCB requests \$4,330 of State General Funds to match Part B Federal funds of \$38,971 per year. These funds are used to support OCB's IL services.

VR also submits budget requests for additional IL program State General Funds in the amount of \$360,000 per year, as a partial continuation of funding originally allocated for IL services in 2001 and later reduced to this amount. \$77,575 per year of that total is allocated to the SILC Resource Plan to match \$286,625 in Title I Innovation & Expansion funds provided by the VR program for support of SILC duties.* An additional \$5,000 annually of the remaining \$282,425 in unmatched State General Funds are provided to the SILC to support any activities that benefit both CILs and the consumers they serve, but may fall outside of the SILC's duties outlined in section 705 of the Rehabilitation Act. This leaves \$277,425 of unmatched State General Funds to support the general operation of CILs, as a supplement to \$241,385 Title VII, Part B funds (plus \$110,000 Part B FFY2013 carryover) in year 1 and \$239,904 in years 2 and 3, plus \$812,591 Title VII, Part C funds in Year 1 and 857,435 in Years 2 & 3. In the first year of the SPIL, CILs will also be using the final year of the 5-year Title VII, Part C American Recovery and Reinvestment Act (ARRA) distribution, which is \$150,061.

Breakdown of funding for each type of activity

Support for the general operation of CILs in year 1 will be \$1,591,463 including:

- \$241,385 Title VII, Part B
- \$110,000 Title VII, Part B Carryover from FFY2013
- \$812,592 Title VII, Part C continuation
- \$150,061 Title VII, Part C ARRA
- \$277,425 Additional IL State General Funds*

In years two and three, the amount of each year's support for the general operation of CILs

will be \$1,374,764. This decrease is due to ARRA funds no longer being available and the allocation of administrative funds used by the DSU being increased by \$1,481 (2.4%).

Support for IL services through OCB will be \$43,301 per year, including:

- \$38,971 Title VII, Part B
- \$4,330 State General Fund Match for Part B

Support for VR's IL Program Administration will be \$61,724 in year 1, including:

- \$31,413 Title VII, Part B
- \$30,311 State General Fund Match for Part B

In years 2 and 3, the total will be \$32,894 in Title VII, Part B funds, bringing the overall level of administrative support funds to \$63,205.

Support for the SILC's Resource Plan will be \$366,000 per year, including:

- \$1,800 Title I Innovation & Expansion funds from OCB
- \$286,625 Title I Innovation & Expansion funds from VR
- \$77,575 State General Fund to Match VR Title I Innovation & Expansion

*Should carryover of a given year's Title I Innovation & Expansion fund contribution from VR exist in the SILC's Resource Plan, the SILC would use less State General Fund match the following year and therefore, more of the original \$360,000 IL Program State General Funds would become available for the general operation of CILs in that fiscal year.

Support for the SILC's non-705 activities includes \$5,000 per year of State General Fund:

Should it be anticipated the SILC will not use all of this allocation in a given period, the SILC may release some of these funds for the general operation of CILs.

These figures may fluctuate based on actual Rehabilitation Services Administration grant awards, and State General Fund appropriations.

1.3B(3) Describe any in-kind resources including plant, equipment or services to be provided in support of the SILC resource plan, IL services, general CIL operations and/or other SPIL objectives.

An inter-governmental agreement between DHS, VR, OCB and the SILC, will provide the following in-kind support for the SILC Resource Plan:

- Services to receipt, deposit, and disburse State and Federal funds allocated for the SILC Resource Plan or SILC activities utilizing non-Resource Plan funds, including check-writing services through the State's payment system.
- Administrative support services including contracting services, payroll services, and legal liaison services with the Attorney General's office, as needed.
- Provision of employee position authority for an Executive Director, Program Coordinator, Administrative Specialist, and half-time Community Partner Liaison, or other position authority as the SILC deems necessary.

- Provision of office space and equipment for SILC staff including desks, filing cabinets, computers (if available), basic computer software and IT services, copiers, printers, general office supplies (i.e. paper, envelopes, postage for regular mail), phone, fax, e-mail, internet, janitorial services, and use of publication design services.

OCB may receive donated items, mostly related to low vision, that are in-kind resources for IL services.

CILs may receive in-kind donations of equipment, vehicles, etc. that will support their general operations.

1.3B(4) Provide any additional information about the financial plan, as appropriate.

Fluctuation of figures in section 1.3 may occur due to reductions or increases in actual Rehabilitation Services Administration grant awards and State General Fund allocations. Depending on the severity of the change, this may require renegotiation by SPIL partners of amounts appropriated for certain activities.

1.4 Compatibility with Chapter 1 of Title VII and the CIL Work Plans – 34 CFR 364.42(c) and (e)

1.4A Describe how the SPIL objectives are consistent with and further the purpose of chapter 1 of title VII of the Act as stated in section 701 of the Act and 34 CFR 364.2.

The following objectives support the chapter 1 purpose of promoting the IL philosophy through:

- provision of financial assistance to develop and support a statewide network of CILs
- improving working relationships among the State independent living rehabilitation service programs, centers for independent living and the State Independent Living Council

Objective 1.1- The Designated State Units, the State Independent Living Council, and the Network of Centers for Independent Living (CILs) collaboratively develop program administration strategies to support funding of Independent Living services.

Objective 1.2- Independent Living program partners use credible data to develop funding strategies to maximize the number of geographic regions receiving Independent Living services.

The following objectives support the chapter 1 purpose of promoting the IL philosophy through:

- providing, expanding and improving the provision of independent living services
- improving working relationships among centers for independent living, State independent living rehabilitation service programs, State vocational rehabilitation programs receiving assistance under Title I, and programs funded under other federal law and through non-federal sources.

Objective 2.1- The Network of CILs continues to improve, innovate and modernize its

service models, with a focus on reach and effectiveness.

Objective 2.2- CILs continue to improve their organizational management through use of effective practices.

Objective 2.3- The DSUs, SILC and CILs increase collaboration with other service systems to improve delivery of services.

The following objective supports the chapter 1 purpose of promoting the IL philosophy through:

- promotion of consumer control, peer support, self-help, self-determination, equal access and individual and system advocacy, in order to maximize leadership, empowerment, independence, and productivity of individuals with disabilities, and the integration and full inclusion of individuals with disabilities into the mainstream of American society, via engagement in the change and development of general societal attitudes and systems.

Objective 3.1- Independent Living program partners develop methods for engagement in systems change.

1.4B Describe how, in developing the SPIL objectives, the DSU and the SILC considered and incorporated, where appropriate, the priorities and objectives established by centers for independent living under section 725(c)(4) of the Act.

Prior to development of SPIL priorities and objectives, staff of IL program providers participated in an IL needs assessment. This assessment provided information for development of SPIL goals and objectives. Besides participating in three statewide planning sessions to establish goals and priorities, Oregon's CIL directors worked with the SILC to conduct an analysis of IL program strengths, weaknesses, opportunities and threats (SWOT). The SWOT analysis was used to further develop goals and objectives and make recommendations to SPIL partners. Having CILs involved in development of the objectives and activities provided a familiarity of SPIL objectives that can be used by CILs to create work plans consistent with the SPIL. It also allowed IL partners to avoid creating SPIL activities for CILs that are not reasonable to pursue with the limited funding and staff available to achieve the desired outcomes. The philosophy was to give the CILs an equal, if not more weighted voice in the development process. This is in recognition of the fact that the core of the IL program lies within the CILs, through service delivery.

In addition, the Network of CILs was asked to make a recommendation for the funding priorities established in section 3 of the SPIL. Whenever these recommendations were believed to be consistent with established SILC goals and activities as well as IL program regulations, the recommendations were incorporated into the plan.

1.5 Cooperation, Coordination, and Working Relationships Among Various Entities – 34 CFR 364.26

Describe the steps that will be taken to maximize the cooperation, coordination and working

relationships among the SILS program, the SILC, and centers; the DSU, other State agencies represented on the SILC and other councils that address the needs of specific disability populations and issues; and other public and private entities determined to be appropriate by the SILC.

- The description must identify the entities with which the DSU and the SILC will cooperate and coordinate.

IL Program Partner Collaboration & Coordination:

- **Role coordination:** The SILC maintains documents on the role of each IL partner which will be reviewed during SPIL development and as needed to facilitate a well-managed IL program, which avoids duplication of roles.
- **Collaboration and input:** The SILC's membership structure, including representatives of the DSU, Oregon Commission for the Blind, and representatives of CILs, will provide opportunities to cooperatively plan effective strategies that have been evaluated through the lens of each partner's role.

To the extent possible, SPIL development tasks will include representation of each of the three types of program partners to ensure plans are representative of each partner's views.

All IL program partners will be included in annual SPIL evaluation meetings to discuss SPIL progress and implementation data supplied by the various partners.

CILs that do not receive Federal Part C funds, VR, OCB and the SILC will share data to develop an annual 704 report on SPIL progress.

A variety of SPIL objectives are designed to improve collaboration in areas such as development of protocols to ensure involvement of all program partners in tasks related to funding strategies, including legislative funding requests and program budget design. Coordination of engagement with various non-IL entities is another activity that will be conducted during this SPIL period to facilitate better coordination, especially between the SILC and IL service providers.

- **Communication:** The DSU will host monthly IL Web conferences that include CIL directors and SILC representatives, in order to coordinate funding/grant issues related to the general operation of CILs and assure effectiveness of granting/contracting strategies. The Association of Oregon Centers for Independent Living (AOCIL) will hold regular in-person and Web conferences to coordinate planning among the CILs, and foster cooperation and information sharing. As needed, the DSU and/or SILC representatives will be included in AOCIL meetings for the purpose of maintaining lines of communication and sharing information about current topics relevant to the IL program. Additionally SPIL objectives have been designed to develop the means to share information and strategies on relevant IL issues that may need specific advocacy or action.

Collaborations with non-IL entities:

During the SPIL period, IL program partners intend to engage with the following specific entities in order to develop a better understanding of IL services; infuse the IL philosophy into other service systems; reach populations unserved or underserved by the IL program; and engage decision-makers who can assist in removing barriers, developing cooperative service agreements, and jointly developing strategies to address service gaps.

- **State Rehabilitation Council (SRC) and Vocational Rehabilitation program:** The SILC will hold a seat on the SRC and supply reports from SRC meetings to CIL directors and SILC members to increase their knowledge of the issues being addressed by the SRC. Participation on the SRC will provide the SILC with connections for expanded networking with a variety of groups/populations such as Vocational Rehabilitation counselors, developmental disability advocates, rehabilitative technology providers, youth transition educators, the Oregon Brain Injury Association, Oregon's Parent Training & Information program, advocates for consumers who are deaf or hard of hearing, community rehabilitation providers, family advocates, mental health program representatives, Section 121 tribal program staff, Department of Education representatives, Oregon Client Assistance Program staff, and other business community representatives. CILs will independently organize meetings with staff of the general and blind VR programs, both at the state and local levels, as appropriate to address needs for cooperation and coordination between the IL and VR programs and to improve working relationships.
- **Oregon's Aging and People with Disabilities Division (APD):** Planned interactions with specific APD projects/programs are detailed below.

Money Follows the Person (MFP):

The SILC will serve on the MFP Steering Committee, and will provide information to CILs, to assist them in establishing connections with key MFP staff so that a role for CILs and peer support services can be reestablished following a redesign of the MFP project, which supports individuals who are transitioning or considering a transition from institutions to home or community-based environments.

State Unit on Aging & the Aging and Disability Resource Center Grant (ADRC):

The SILC will serve on two State Unit on Aging committees including the ADRC Statewide Advisory Committee, and the steering committee which will oversee the administration of a new 3-year, \$2.3M grant from the Administration for Community Living, in coordination with the Centers for Medicare and Medicaid Services (CMS), and the Veterans Administration, which furthers work on ADRC projects that began in Oregon in 2008. The grant is designed to support rapid expansion of statewide ADRCs serving all ages and populations, and develop systems for sustainable options counseling through multiple payment sources, including Medicaid. The steering committee is critical in addressing systems and policy changes needed to not only meet the grant goals, but also create a sustainable statewide ADRC infrastructure that will serve Oregonians for years to come. Both an Association of Oregon Centers for Independent Living representative and a CIL director will serve on the new grant steering committee, which includes a variety of partnering entities. In addition, Oregon's CILs will meet individually and collectively with regional and various state ADRC partners to undertake collaborative planning processes, as needed. Oregon's CILs will also engage in trainings

provided for ADRC options counseling and information and referral specialists, to advance the ADRC project mission and enhance skills of IL program staff. These trainings can include staff from various entities that partner in the ADRCs, including partners from developmental disabilities programs, Area Agencies on Aging, veterans services, etc.

Oregon Community Options Design and Implementation Council:

APD is undergoing major operational and staffing changes and has expanded the role of its many stakeholders. One such example is the formation of this new council, which has been in consultation with APD for several months on the various opportunities around the “State Plan K Option.” The SILC will continue to serve on this group, which has partnered in the development of a “K Option” application and design of the new structure, including Oregon’s various waivers, which are currently being negotiated with CMS. Other partners the SILC is able to engage with through this council include: the Governor’s Commission on Senior Services, Association of Area Agencies on Aging and Disability, Oregon Disabilities Commission, Oregon Brain Injury Association, Oregon Council on Developmental Disabilities, Department of Human Services Developmental Disabilities Program, Association of County Mental Health Providers, Oregon Health Care Association, Leading Age Oregon, Community Pathways, Inc., Center for Health and Disability Policy Consultant, Oregon Rehabilitation Association, State Employees International Union, American Association of Retired Persons, Oregon Home Care Commission, Oregon’s Long-Term Care Ombudsman, and consumer representatives.

Long-Term Care 3.0 Initiative:

The SILC will serve on Oregon’s LTC 3.0 Design Advisory Committee, which oversees this initiative. LTC 3.0 advances Oregon’s well-known history of national leadership in forwarding programs that support the right of seniors and individuals with disabilities to live at home. This new initiative was developed to continue supporting those rights through various program changes, providing new choices and removing existing barriers to home and community-based living. One of the most exciting options Oregon is considering is a proposition that the new “entitlement” be home and community-based care versus institutional care, reversing the historical approach. LTC 3.0 began with introduction of a bill in the 2013 Oregon legislative session, which would require a new formal plan for long-term care services and supports, with specific requirements for implementation, including time lines. The bill is intended to build on the very strong vision described in Oregon law under Oregon Revised Statute (ORS) 410, outlining the right of seniors and people with disabilities to have health, honor, dignity, and lives of maximum independence. Examples of representatives on this committee include providers of adult day care, adult foster care, adult group homes, assisted living facilities, foster care for children with developmental disabilities, day habitation, children’s group care homes, home delivered meals, non-medical transportation, residential mental health treatment, and supported living; as well as representatives of the State Employees International Union, American Association of Retired Persons, Oregon Home Care Commission, Oregon’s Long-Term Care Ombudsman, the Governor’s Commission on Senior Services, Association of Area Agencies on Aging and Disability, Oregon Disabilities Commission, and consumer representatives.

Oregon Project Independence (OPI):

This is a state project providing services to seniors who are not eligible for Medicaid, yet need in-home support in order to remain in their own homes. During the 2007 legislative session, expansion of this program to individuals with disabilities occurred. Since funds for this program come totally from the State General Fund, this project has yet to be financed at a level sufficient to add people with disabilities. The SILC is poised to participate in steering committees within APD when changes in administrative rules, directives to local providers, etc. begin to be developed and implemented.

Oregon Office of Equity & Multicultural Services (OEMS):

OEMS is charged with providing leadership and direction supporting equity, diversity and inclusion for the Oregon Department of Human Services (DHS). Strategically, OEMS is currently organized around three major areas: 1) Civil Rights, Affirmative Action, and Equal Opportunity; 2) Workforce Diversity Development; and 3) Service Equity. Individual CILs will be connected with the local Diversity Committees set up to serve each DHS district. At the state level, the SILC recently assisted with the hiring of a new administrator for OEMS, and for a manager that will be solely focused on ADA in general disability issues. The SILC intends to continue to engage OEMS to assure disability is considered/included at each step of the process that will soon be ramping up to develop priorities and strategies for addressing the three individual subject areas that have been established. The SILC also plans to work with OEMS to identify the most pressing issues around disability in service delivery to consumers, as well as collaborate around assessment of organizational structures, programs and policies; and the development of metrics to assess current disparities and outcome measures, compliance monitoring, community outreach and engagement, and workforce recruitment and training.

Oregon Home Care Commission (HCC):

Individual CILs will engage with the Home Care Commission as contractors to provide training services to individuals who employ state-funded in-home service providers.

The Oregon Disabilities Commission (ODC):

The SILC will fill two seats on this Governor's commission, which includes representatives of major public and private agencies who are experienced in or have demonstrated particular interest in the needs of individuals with disabilities, the majority of whom experience a personal disability. The ODC acts as a coordinating link between and among public and private organizations serving individuals with disabilities, and is charged with advising the Department of Human Services, the Oregon Health Authority, the Governor, the Legislative Assembly, local elected officials, private entities and appropriate state agency administrators regarding services and resources needed to serve individuals with disabilities and issues related to achieving full economic, social, legal and political equity for individuals with disabilities.

The Oregon Council on Developmental Disabilities (OCDD) and Developmental Disability Brokerages:

The Network of CILs will work directly with their local Developmental Disability Brokerages to coordinate services for potentially shared consumers. The SILC will meet with the Oregon Council on Developmental Disability to evaluate the differences and similarities between DD and IL program services, and identify potential gaps or duplicative services. The SILC will also explore how IL services interact with Oregon's

Employment First Initiative. In addition, the SILC will engage with OCDD as a co-member of various committees and advisory groups for which there is a common interest. Examples include the Oregon Disabilities Commission, the State Rehabilitation Council, the ADRC Statewide Advisory Committee, the Statewide Expansion/Options Counseling Grant Steering Committee, and the Oregon Community Options Design and Implementation Council.

- **Oregon Association of Area Agencies on Aging and Disability (O4AD) and its individual members:**

The SILC will engage with O4AD mainly as a co-member of various committees and advisory groups for which there is a common interest. At times, ad-hoc work groups may be developed to undertake activities that improve options for people with disabilities wishing to maximize their independence. Examples include work with other groups interested in maintaining funding for and developing policy around Oregon Project Independence, examination of “Pre-Medicaid” services that can be provided through the ADRC network, and Oregon’s Health System policy development. The Network of CILs will mostly engage with this group in relation to ADRC activities under the oversight of the State Unit on Aging, as mentioned earlier. However, other connections may be developed by CILs with their local Area Agencies on Aging to accomplish shared service goals.

- **The Oregon Health Authority (OHA) and Oregon Health System Transformation:**

This includes mental health and public health issues, as well as housing issues, and Medicare and Medicaid services. Planned interactions with specific OHA projects/programs are detailed below.

Oregon Office on Inclusion & Equity (OIE) and Addictions and Mental Health (AMH) Services:

OIE has been staffing one of Oregon’s Health Systems Transformation subcommittees, which addresses rules for non-traditional health workers (NTHW). The work of this subcommittee created a relationship between the SILC, OIE, the AMH Mental Health Peer-Delivered Services Coordinator and the Oregon Health Authority Ombudsman, as the result of work by the SILC and CILs to encourage the NTHW Subcommittee to define NTHWs as cross-disability peers as opposed to only mental health peers. The SILC will continue engagement through meetings with OIE staff and the OHA Ombudsman, as appropriate, to facilitate work on issues relevant to inclusion and equity of people with disabilities served through programs and projects detailed throughout this section. The Network of CILs will work directly with the AMH Mental Health Peer-Delivered Services Coordinator on relevant issues detailed in this section and in section 1.6, and the SILC will facilitate and/or participate in these meetings as needed. The connection with the AMH Mental Health Peer-Delivered Services Coordinator will also be used by the SILC and CILs to reach out to mental health peer service groups, in the interest of forming more collaborative relationships.

Organizations Providing Services Related to Housing:

During the previous SPIL period, CILs and the SILC were involved in collaborative activities with the Oregon Health Authority’s Building Sustainable Partnerships in

Housing grant; a Real Choices Systems Change grant, designed to develop pathways for people with disabilities to access housing via community partners with awareness of housing options and programs, including initiatives of Oregon Housing and Community Supports (OHCS, the public housing agency), Aging and People with Disabilities (APD, the Department of Human Services unit serving people with physical and developmental disabilities), and the Oregon Health Authority (OHA, the state Medicaid agency). It is expected that the Network of CILs will continue to work with the local communication networks for housing partners, developed through this grant, which were designed to enhance housing-related services for consumers. Collaboration with these partner networks will be localized and designed to help service organizations coordinate in meeting the needs of each area's consumers who are seeking appropriate housing resources.

Oregon Public Health System:

Various CILs will serve on advisory committees of regional Coordinated Care Organizations, established as part of Oregon's Health Transformation System. When possible, the Network of CILs will establish vendor roles with their local CCO's, supplying peer-delivered services. It is unknown exactly what form Oregon's Public Health System will take during this SPIL period or whether there will be ongoing committees or advisory groups related to Oregon's Health Care Transformation System. Should there be ongoing opportunities, the SILC will seek involvement in appropriate committees and advisory groups, including those related to the Insurance Exchange ("Cover Oregon").

- **Western Oregon University (WOU) Traumatic Brain Injury (TBI) Project:**

This grant-funded WOU project is supported by a committee on which the SILC will participate. The committee will provide contacts with groups including some medical model organizations, and allows the SILC to connect partners and consumers to CILs within their own communities. This work will also bring the SILC into contact with various state agency directors and the Governor's Task Force on Traumatic Brain Injury, which will address coordination of services through the creation of joint policies between 1) state agencies providing services to persons with TBI, 2) healthcare delivery entities including coordinated care organizations, and 3) the Oregon Department of Veterans' Affairs. The Task force will also address awareness and prevention, education, employment, and housing as they relate to TBI.
- **The Oregon Office on Disability and Health (OODH):**

The Network of CILs will work directly with OODH on projects related to the current OODH grant from the Centers for Disease Control (CDC), mostly related to collection of data on the health of people with disabilities. The SILC will serve on the advisory committee for the OODH grant from the CDC, and assist OODH staff in locating appropriate partners for specific projects, when needed.
- **Veterans Service Organizations:**

The Network of CILs will work with their local veterans organizations, sometimes serving on work groups/committees, but mainly by partnering in the provision of services for veterans who experience disabilities. The SILC will maintain links with Oregon

Paralyzed Veterans of America and Disabled American Veterans to discuss potential service gaps or duplicative services and to identify ways to improve coordination of services to veterans.

- **Local Special Transportation Fund Advisory Committees and Councils of Government:**
CILs will generally work directly with local Special Transportation Fund Advisory Committees to improve services to people with disabilities through funded projects. Often this will involve connections with regional Councils of Governments.
- **Special Education, Family and Community Together (FACT) Parent Training and Information Center (PTI), and Oregon Consortium of Family Networks:**
CILs will meet individually with local Special Education staff and local Family Networks to establish service relationships. The SILC is a supporting partner for the FACT/Parent Training and Information CIL grant, and as such, will meet with FACT/PTI to develop potential activities for cooperative training of families on both PTI and IL program services.

1.6 Coordination of Services – 34 CFR 364.27

Describe how IL services funded under chapter 1 of title VII of the Act will be coordinated with and complement other services to avoid unnecessary duplication with other Federal, State, and local programs, including the OIB program authorized by chapter 2 of title VII of the Act, that provide IL- or VR-related services.

Depending on local opportunities, CILs will accomplish coordination of services in various ways. Examples of coordination efforts include: membership on county mental health boards, county social service planning committees, local community housing planning committees, youth transition workgroups, accompanying youth and their families to many IEP (Individualized Education Program) meetings, and service on local MTD (Multi-Disciplinary Teams). All Oregon CILs offer services in addition to the four core IL services, based on service gaps within their communities. If a service exists in the community, but lacks the accessibility, knowledge or practice of equal access, consumer empowerment or other aspects of IL philosophy, CILs will advocate with these entities to bring those needed components into the existing services. This collaborative approach increases the effectiveness of local services, promotes inclusion and minimizes duplication of services.

- **Vocational Rehabilitation programs:**
The IL and VR programs function as complementary services to one another, and a cross-training video has been created to train staff of the VR program regarding the role and working relationship between the IL and VR programs. In addition, the general VR Program's Policy Manual provides guidance for VR counselors related to services for consumers experiencing blindness, and when it is appropriate to purchase employment-related services from CILs. These help to establish clear lines of responsibility for IL services versus the services from each of the VR programs. The general VR program is the primary service for consumers with disabilities that create barriers in obtaining or

maintaining employment consistent with their abilities and interests, or who need supports such as training or job search assistance to obtain employment. Oregon Commission for the Blind (OCB) serves vocational rehabilitation consumers who are legally blind or have a condition that leads to legal blindness. In relationship to the VR programs, CILs refer appropriate consumers to either the general VR program or to OCB's VR program. When appropriate, CILs function as VR vendors, providing purchased, peer-delivered, employment-related IL services that are included in a consumer's Individual Plan for Employment. In addition, as VR staff identify issues impacting the consumer's independence that are not specifically employment-related and not in the consumer's IPE, the consumer may be referred to their local CIL, if there is one serving that area. In addition, at times the VR programs will enter into fee-for-service or contractual agreements with various CILs to provide specific services to VR consumers, including pre-employment services, which may include such services as work incentive counseling and work readiness workshops, even in areas outside of a CIL's general service area.

- **Oregon's Aging and People with Disabilities Division (APD) Programs:**

Money Follows the Person (MFP):

If it can be negotiated, CILs will provide complementary services to this project as a vendor. At this time the project is still in a phase of establishing its newly designed services, so specifics are unknown.

Aging and Disability Resource Connection (ADRC):

At this time it appears that Area Agencies on Aging (AAAs) will be the lead organizations in the ADRC project, except in areas where the AAA for that region does not provide Medicaid services. Detailed plans for those unique areas have not been fully developed at this time. However, it appears that the approach in the ADRC project is to distribute the workload across a network of trained Options Counselors and Information and Referral Specialists who are staff of various ADRC partner agencies. Then referrals for specific services would be made based on the consumer's need. i.e., the local AAA or the Aging and People with Disabilities (APD) office for Medicaid issues, CILs for IL services, Veterans' Affairs for veteran services, etc.

State Operated Medicaid Services including Area Agencies on Aging:

In general, CILs will refer consumers needing Medicaid services to the local agency providing those services (AAA or APD), and then provide complementary services, such as helping consumers who need assistance with advocacy or skill development related to filling out forms or communicating with Medicaid agency staff. Generally, CILs provide needed peer services for individuals who are Medicaid eligible, except in areas where no IL services are available. In these unserved areas, there may be a form of peer services delivered by the AAA. CILs work directly with local Medicaid offices to coordinate if issues arise with duplication of services.

Oregon Home Care Commission (OHCC) STEPS Trainings:

The STEPS to Success with Your Home Care Worker project was originally designed collaboratively between OHCC and the IL program as a peer-delivered service. Following the removal of "peer" training criteria from the contracts, AAAs were awarded some of the STEPS project contracts. Service coordination is implemented by awarding

the contracts to specifically defined service areas.

Developmental Disability Brokerage Services:

In 2001, what is known as the Staley Settlement Agreement was implemented in Oregon, as a result of a lawsuit against the State of Oregon, claiming individuals with developmental disabilities were unfairly being denied access to services they were entitled to receive. The Staley Agreement created community-based support brokerages that are designed to provide planning support, and help adults with developmental disabilities link with community resources and locate and purchase needed services, such as job development or assistance for personal care needs. Though some of these services are consistent with IL services, the brokerages are the first option for the population of consumers eligible for these services and the financial supports that are included with them. However, CILs function as one of the optional providers of services identified in the plans of brokerage consumers, and work directly with brokerages to establish the services CILs provide. It appears there may be some brokerages developing additional services for people with disabilities, beyond their mandated services, that could be seen as duplicative of IL services. As noted in section 1.5, the SILC will be working with the developmental disability service system to examine issues around potential service duplication.

- **Oregon Health Authority (OHA) and Local County Services (including mental health and other public health services):**
When appropriate, CILs will typically refer consumers needing public health/mental health services to either their local county service office or to OHA offices, and then provide complementary services, such as helping consumers who need assistance with advocacy or skill development related to filling out forms or communicating with staff of various agencies. In addition, individual CILs may provide various peer supports, including mental health drop-in sites, skills training, etc., which reduce the need for certain types of health services, especially preventable emergency or crisis services. Some CILs will also provide durable medical equipment loans that reduce consumer health care costs.

- **Veterans Service Organizations:**
Services provided by CILs will be complementary to those available through the Department of Veterans' Affairs (DVA). CILs will work with DVA staff/case managers when necessary to determine the full extent of DVA services available to veterans with disabilities and provide information about potential assistance that the IL program can offer, so that services can be better coordinated. In some cases, CILs will function in a vendor role to provide services that are funded by DVA.

- **Transportation Services:**
In most cases CILs provide services that allow consumers to take advantage of local transportation services, such as provision of skills training related to use of transportation options, or providing pass-through transportation stipends for those who are unable to afford needed transportation. In some CILs, particularly in rural areas where transportation services are not readily available, transportation may be directly provided as a CIL service to individuals with disabilities, particularly those needing rides for such

things as medical appointments.

- **Special Education, Family and Community Together (FACT) Parent Training and Information Center, and Oregon Consortium of Family Networks:**

Depending on whether a Family Network exists in a specific area, CILs may or may not be the primary source of services for those needing support for issues related to the education system, such as advocacy and support for Individual Education Plan (IEP) issues. One example of how services are coordinated in some areas is that joint events are held at the CIL, where IL program staff can provide activities/training/support for youth with disabilities while their parents receive training support through their Family Network or PTI staff.

1.7 Independent Living Services for Individuals who are Older Blind – 34 CFR 364.28

Describe how the DSU seeks to incorporate into, and describe in, the State plan any new methods or approaches for the provision of IL services to older individuals who are blind that are developed under the Older Individuals who are Blind program and that the DSU determines to be effective.

The Oregon Commission for the Blind's Independent Living Older Blind program serves individuals statewide who are 55 and older with visual impairments. Services are provided directly, primarily through Oregon Commission for the Blind (OCB) field teachers who meet with consumers where they live in the community. These services consist of adaptive skills related to vision loss such as orientation and mobility, cooking, labeling, reading with magnification, other modes of communication, daily living skills, household organization, self-care skills, etc. The focus is always on helping the individual to maintain or increase their independence in their living environments and community. Additional services are also provided working with partners in the community through group presentations or individually, to provide information and consultation as needed regarding low vision and blindness issues.

Because OCB resources are limited in providing services by a small number of staff throughout the state, this agency will continue to seek ways to provide group instruction when possible. A few OCB field teachers are doing group instruction of adaptive skills in rural communities and are also using these sessions to address adjustment issues. This has been an effective learning method for participants who are able to learn from and support each other, and has been a time savings to the teacher who can provide instruction that benefits multiple people at once. Sometimes family members or significant others sit in on the sessions and can serve to reinforce skills in the home that are learned in class.

There is an increased interest and need to provide adaptive technology training. Agency field teachers are usually so busy providing various independent living services while traveling across the state that they don't have time to provide significant technology training, which can be quite time consuming. OCB will use its rehabilitation center technology teachers to provide group iPhone classes to OCB Independent Living consumers as these teachers have time available.

Section 2: Scope, Extent, and Arrangements of Services

2.1 Scope and Extent – 34 CFR 364.42(b)(2)(3); 34 CFR 364.43(b); 34 CFR 364.59(b)

2.1A Check the appropriate boxes in the SPIL Instrument table indicating the types of IL services to be provided to meet the objectives identified in section 1.2 of this SPIL, and whether the services will be provided by the CILs or by the DSU (directly and/or through contract or grant).

Table 2.1A: Independent living services

	Provided by the DSU (directly)	Provided by the DSU (through contract and/or grant)	Provided by the CILs (Not through DSU contracts/ grants)
Table 2.1A: Independent living services			
Core IL Services - Information and referral	Yes	Yes	Yes
Core I L Services - IL skills training	Yes	Yes	Yes
Core IL Services - Peer counseling	Yes	Yes	Yes
Core IL Services - Individual and systems advocacy	Yes	Yes	Yes
Counseling services, including psychological, psychotherapeutic, and related services	No	No	Yes
Services related to securing housing or shelter, including services related to community group living, and supportive of the purposes of this Act and of the titles of this Act, and adaptive housing services (including appropriate accommodations to and modifications of any space used to serve, or occupied by, individuals with significant disabilities)	Yes	Yes	Yes
Rehabilitation technology	Yes	No	No
Mobility training	Yes	Yes	Yes
Services and training for individuals with cognitive and sensory disabilities, including life skills training, and interpreter and reader services	Yes	Yes	Yes
Personal assistance services, including attendant care and the training of personnel providing such services	Yes	No	Yes
Surveys, directories and other activities to identify appropriate housing, recreation, accessible transportation and other support services	Yes	Yes	Yes
Consumer information programs on rehabilitation and IL services available under this Act, especially for minorities and other individuals with disabilities who have traditionally been unserved or underserved by programs under this Act	Yes	Yes	Yes

	Provided by the DSU (directly)	Provided by the DSU (through contract and/or grant)	Provided by the CILs (Not through DSU contracts/ grants)
Table 2.1A: Independent living services			
Education and training necessary for living in the community and participating in community activities	Yes	Yes	Yes
Supported living	No	No	Yes
Transportation, including referral and assistance for such transportation	Yes	Yes	Yes
Physical rehabilitation	No	No	No
Therapeutic treatment	No	No	No
Provision of needed prostheses and other appliances and devices	Yes	Yes	Yes
Individual and group social and recreational services	Yes	Yes	Yes
Training to develop skills specifically designed for youths who are individuals with significant disabilities to promote self-awareness and esteem, develop advocacy and self-empowerment skills, and explore career options	No	Yes	Yes
Services for children with significant disabilities	No	Yes	Yes
Services under other Federal, State, or local programs designed to provide resources, training, counseling, or other assistance of substantial benefit in enhancing the independence, productivity, and quality of life of individuals with significant disabilities	No	Yes	Yes
Appropriate preventive services to decrease the need of individuals with significant disabilities for similar services in the future	Yes	Yes	Yes
Community awareness programs to enhance the understanding and integration into society of individuals with disabilities	Yes	Yes	Yes
Other necessary services not inconsistent with the Act	Yes	Yes	Yes

2.1B Describe any service provision priorities, including types of services or populations, established for meeting the SPIL objectives identified in section 1.2.

Oregon’s SPIL objectives are designed to maximize independent living services with respect to both their reach and their quality, for all eligible populations. This includes maximization of services in currently funded areas, as well as seeking funding to expand IL services into new areas. Service provision priorities within these parameters include:

- Seeking the resources to maintain core independent living services in current areas.

- Seeking methods that expand the quality and the reach of core independent living services to as many underserved populations as possible, particularly those identified in section 1.2B who experience difficulty accessing their local independent living services.

In areas where independent living services are provided, access to the services may be limited by the rural location of the consumer, their lack of transportation, or simply a disability-related challenge that limits the consumer's ability to travel beyond their residence. Due to the rural nature of much of the state, travel costs to connect consumers with a local service provider are often prohibitive both for consumers and for providers with minimal funding. The rural nature of Oregon also means public transportation mechanisms are unavailable in many areas. Therefore, it is important to find effective models for service provision to these individuals, including use of technology, and to develop collaborative relationships with the various service providers who may have contact with these consumers. Examples of these service providers include state disability service programs, Aging and Disability Resource Connection partners, regional veteran service organizations, developmental disability brokerages, family networks, the Coordinated Care Organizations managing coordination of state-provided health services, etc.

2.1C If the State allows service providers to charge consumers for the cost of services or to consider the ability of individual consumers to pay for the cost of IL services, specify the types of IL services for which costs may be charged and for which a financial need test may be applied, and describe how the State will ensure that:

- Any consideration of financial need is applied uniformly so that all individuals who are eligible for IL services are treated equally; and
- Written policies and consumer documentation required by 34 CFR 364.59(d) will be kept by the service provider.

N/A

2.2 Arrangements for State-Provided Services – 34 CFR 364.43(d) and (e)

2.2A If the DSU will provide any of the IL services identified in section 2.1A through grants or contractual arrangements with third parties, describe such arrangements.

Except for services provided through other federal, state or local programs, the DSU provides the contracted services in section 2.1A through grants supporting the general operation of CILs. Based on available revenues, Oregon's CILs that continue to meet Section 725 Standards and Assurances will be eligible to receive funding that supports administrative and service needs including core and non-core independent living services. The amount of each grant will be determined by the funding priorities outlined in section 3 of this state plan. Sources used to fund these grants include Title VII, Part B and State General Funds allocated for Independent Living program services.

Should appropriate opportunities arise, the DSU may enter into agreements with other federal, state or local programs to facilitate contracts with CILs for specific services designed to provide resources, training, counseling, or other assistance of substantial benefit in enhancing the independence, productivity, and quality of life of individuals with significant disabilities.

2.2B If the State contracts with or awards a grant to a center for the general operation of the center, describe how the State will ensure that the determination of an individual's eligibility for services from that center shall be delegated to the center.

Determination of an individual's eligibility for independent living services will be delegated to CILs providing the service via the grant mechanism, which requires that CILs comply with Rehabilitation Act, Section 725 Standards and Assurances, including the following requirements in the Provision of Services section of Section 725: "The center shall provide services to individuals with a range of significant disabilities. The center shall provide services on a cross-disability basis (for individuals with all different types of significant disabilities, including individuals with significant disabilities who are members of populations that are unserved or underserved by programs under this title). Eligibility for services at any center for independent living shall be determined by the center, and shall not be based on the presence of any one or more specific significant disabilities."

This responsibility is monitored by the State through evaluation of Consumer Service Records during on-site compliance reviews and through other reporting mechanisms required under the grants.

Section 3: Design for the Statewide Network of Centers

3.1 Existing Network – 34 CFR 364.25

Provide an overview of the existing network of centers, including non-Part C-funded centers that comply with the standards and assurances in section 725 (b) and (c) of the Act, and the geographic areas and populations currently served by the centers.

Oregon's Network of CILs consists of seven (7) entities.

Each Oregon CIL is required to be in compliance with Section 725 Standards and Assurances to 1) be included in the Network of CILs; and 2) be eligible to receive any IL dollars through Oregon's DSU/Vocational Rehabilitation. Oregon CILs operate with various combinations of the following funding sources:

1. Title VII Part C funds - provided directly from RSA to eligible CILs. At the submission of this state plan, Oregon has five CILs that receive federal Part C funds: Abilitree (previously CORIL), HASL, ILR, SPOKES Unlimited, and UVdN.
2. Title VII Part B funds - matched with required 10% state funds, administered by the DSU per the SPIL, and in consultation with the SILC and Oregon Commission for the Blind (OCB).
3. State IL General Funds - included in the DSU's state budget, administered by the DSU per the SPIL, and in consultation with the SILC and OCB.
4. Other state agency funds, where appropriate - these funds may be provided to CILs for specific services or special projects through contracts.
5. Other public and/or private funding sources - funding developed by the CILs such as fee for services, contracts with cities or counties, corporate and foundation grants, etc.

OREGON'S NETWORK OF CILS:

ABILITREE

Dianna Hansen, IL Director • PO Box 9425, Bend, OR 97708 (Mailing Address)

2680 NE Twin Knolls Drive, Suite 150, Bend, OR 97701 (Physical Address)

541-388-8103 (voice/TTY) • 541-388-1226 (Fax)

abilitree@abilitree.org • www.abilitree.org

Service Area: Deschutes, Crook and Jefferson Counties

Square Miles: 7,778

Population: 202,948

Source(s) of Funding: Title VII, Part B; Title VII, Part C; State IL and Other funds

Particular populations the CIL serves, especially populations that are traditionally underserved:

Individuals with traumatic brain injuries, youth and their families, and individuals needing assistance with advocacy around education rights.

Underserved areas or populations: Native American and Latino/Hispanic populations, the homeless, and individuals in rural portions of this service area (especially where no public transportation exists).

EOCIL (Eastern Oregon Center for Independent Living)

Kirt Toombs, Director • 1021 SW 5th Ave., Ontario, OR 97914

541-889-3119 (voice/TTY) • 541-889-4647 (Fax)

EOCIL Pendleton Branch Office

322 SW 3rd Street, Pendleton, OR 97801 • 541-276-1037 (voice) • 541-276-1185 (fax)

***EOCIL The Dalles Branch Office**

400 East Scenic Dr., Suite 2349, P.O. Box 422, The Dalles, OR 97058

541-370-2810 (Voice) • 541-370-2811 (Fax) • 1-855-516-6273 (Toll-free)

eocil@eocil.org • www.eocil.org

Service Area: Baker, Gilliam, Grant, Harney, Malheur, Morrow, Umatilla, Union, Wallowa and Wheeler Counties. *The Dalles Office, outside these areas, is funded with resources other than basic federal or state IL program dollars.

Square Miles: 40,967

Population: 185,873

Source(s) of Funding: Title VII, Part B; State IL and Other funds

Particular populations the CIL serves, especially populations that are traditionally underserved:

Individuals with disabilities who are leaving correctional institutions and those living in rural counties.

Underserved areas or populations: Counties of Gilliam, Hood River, Morrow, Sherman, Wallowa and Wheeler, as well as the population of individuals that live within the Burns Paiute Tribal colony and the Confederated Tribes of the Umatilla Indian Reservation.

HASL (Independent Abilities Center)

Randy Samuelson, Director • 305 NE E St., Grants Pass, OR 97526

541-479-4275 (voice) • 541-479-7261 (fax)

haslstaff@yahoo.com • www.haslonline.org

Service Area: Jackson and Josephine Counties

Square Miles: 4,423

Population: 287,809

Source(s) of Funding: Title VII, Part B; Title VII, Part C; State IL and Other funds

Particular populations the CIL serves, especially populations that are traditionally underserved: Hispanics, veterans, individuals who are blind or have vision loss, and deaf populations.

Underserved areas or populations: Individuals in the smaller, isolated communities including Wolf Creek, Sunny Valley, Cave Junction, Williams, Murphy, Rogue River, Selma, Merlin, Shady Cove, Gold Hill, Applegate Valley, Wonder, Kerby, OBrien, Union Creek, Butte Falls, Prospect, Sams Valley, Ruch and Trail.

ILR (Independent Living Resources)

Barry Fox-Quamme, Director • 1839 NE Couch St., Portland, OR 97232

503-232-7411 (voice) • 503-232-8408 (TTY) • 503-232-7480 (fax)

info@ilr.org • www.ilr.org

Service Area: Multnomah, Washington and Clackamas Counties

Square Miles: 3,026

Population: 1,668,648

Source(s) of Funding: Title VII, Part B; Title VII, Part C; State IL and Other funds

Particular populations the CIL serves, especially populations that are traditionally underserved: Individuals with multiple disabilities, individuals who are blind or have vision impairments, mental health disabilities, traumatic brain injuries, the homeless, and veterans.

Underserved areas or populations: Individuals in rural portions of the Clackamas, Multnomah, and Washington County service area (especially where no public transportation exists), youth under age 18, and individuals who are deaf and/or hard of hearing.

LILA (Lane Independent Living Alliance, Inc.)

Sheila Thomas, Director • 99 W. 10th Ave. #117, Eugene, OR 97401

541-607-7020 (voice) • 541-345-7021 (fax)

lila@lilaoregon.org • www.lilaoregon.org

Service Area: Lane County

Square Miles: 4,553

Population: 353,416

Source(s) of Funding: Title VII, Part B; State IL and Other funds

Particular populations the CIL serves, especially populations that are traditionally underserved: The homeless, veterans, individuals who are deaf, individuals who are blind or have vision loss, rural populations, individuals over 60, and individuals who are Hispanic or Black/African American.

Underserved areas or populations: Individuals who are deaf or hard of hearing; individuals who are blind or have vision loss; individuals living in the rural areas of Oakridge, Veneta, Florence, and McKenzie Bridge; individuals who are Hispanic or African American, and individuals age 5–20.

SPOKES Unlimited

Christina Fritschi, Director • 1006 Main Street, Klamath Falls, OR 97601

541-883-7547 (voice) • 541-885-2469 (fax)

christina.fritschi@spokesunlimited.org • www.unlimited.org

SPOKES Unlimited Lakeview Branch Office

100 North D St, Lakeview, OR 97630 • 541-947-2078 (voice)

Service Area: Klamath and Lake Counties

Square Miles: 14,080

Population: 74,207

Source(s) of Funding: Title VII, Part B; Title VII, Part C; State IL and Other funds

Particular populations the CIL serves, especially populations that are traditionally underserved:

The homeless, Hispanics, veterans, individuals who are blind or have vision loss, rural populations and individuals over 60.

Underserved areas or populations: Individuals who are Black/African American or Asian; youth under age 18; individuals who are deaf; the communities of Lakeview, Christmas Valley, Silverlake, Paisley; individuals with significant disabilities ages 5-24 or over 60; youth experiencing cognitive and/or physical disabilities; and older individuals who are blind, especially those from Hispanic and Asian communities.

UVdN (Umpqua Valley disAbilities Network)

David Fricke, Director • P.O. Box 507, Roseburg, OR 97470 (mailing address)

736 SE Jackson Street, Roseburg, OR 97470 (physical address)

541-672-6336 (voice) • 541-440-2882 (TTY) • 541-672-8606 (fax)

uvdn@uvdn.org • www.uvdn.org

Service Area: Douglas County

Square Miles: 5,036

Population: 107,490

Source(s) of Funding: Title VII, Part B; Title VII, Part C; State IL and Other funds

Particular populations the CIL serves, especially populations that are traditionally underserved:

Individuals with mental health disabilities, traumatic brain injuries or multiple disabilities.

Underserved areas or populations: Native Americans in south Douglas County, the Hispanic/migrant community, the more rural portions of Douglas County - more than 20 miles outside of Roseburg, non-Medicaid populations, and individuals ages 18-25.

3.2 Expansion of Network – 34 CFR 364.25

Describe the design for the further expansion of the network, including identification of the unserved and underserved areas in the State and the order of priority for serving these areas as additional funding becomes available (beyond the required cost-of-living increase).

Fourteen (14) of Oregon's thirty-six (36) counties, which contain approximately 26% of Oregon's population and 17% of the state's square miles are not served by a CIL, as defined in the Rehabilitation Act, section 702. Counties not covered as part of any CIL's service area include:

- Benton
- Clatsop
- Columbia
- Coos
- Curry
- Hood
- Lincoln
- Linn
- Marion
- Polk

- Sherman
- Tillamook
- Wasco
- Yamhill

Oregon's IL program partners place great value on grass root principles. All of Oregon's CILs have been developed from grass root consumer initiatives and any new CIL would be expected to demonstrate an active, engaged and committed grass root component and attest to a desire by members of the area to have a CIL in their community. Additionally, any entity wishing to be recognized as a new CIL would need to demonstrate their ability to establish and manage a CIL built on a strong philosophical, programmatic, and financial foundation.

Oregon renews its goal to address statewide coverage in this SPIL through building on the work started during the 2011-2013 SPIL period. Progress on this goal has been limited due to a number of factors including the rapidly changing environment of health care transformation and service model redesign; the weak, unstable economy that has decreased charitable giving and state revenues; and the increasing demand for IL services from a growing senior population and from consumers impacted by the weak economy. Ultimately, the primary hindrance to expansion of IL services will likely continue to be lack of adequate funding to address even the need in current service areas. Oregon's Network of CILs has independently, and in collaboration with the SILC and DSU, engaged in conversations throughout the current SPIL period regarding various strategies to expand access to IL services to unserved areas of the state. The approach that appears most feasible, without weakening the significantly underfunded current network, is to use existing CILs, with established administrative/operational structures, to develop IL services in those counties still unserved. This will be undertaken with the clear understanding that consideration must be given to the needs and input of consumers from the fourteen unserved counties as well as the currently served counties. The long-range vision of Oregon is to obtain sufficient resources so that the Network of CILs has a clear presence and can provide a full array of IL core services and supports to meet consumer and community needs across the state. It is projected that significant portions of the state will remain underserved until sufficient state/federal funding exists. At the time of this writing, the Oregon Legislature is holding its biennial session, and a bill is being considered which would supply additional IL funding to CILs. Should this be successful, and the priority funding goals listed below are achieved, more active and creative strategies will be developed and implemented to address areas of the state currently unserved.

IDENTIFIED UNDERSERVED:

In each of the service areas of the CILs in Oregon's network, there is a significant underserved population. These include both underserved populations and geographic portions of each CIL's service area. Many of the specific "underserved" are listed earlier in this section under the description of each Oregon CIL, with some also appearing as outreach targets in section 1.2B of this SPIL. The severe lack and fluctuation of IL funds is an ongoing barrier to creating a stable network of CILs in Oregon. In working toward that goal, the SPIL program partners will:

- Continue to advocate for increased federal and state IL funding. Currently the AOCIL (Association of Oregon Centers for Independent Living) has garnered support and had a bill introduced in the 2013-15 state legislative session, which seeks to increase the state general funds provided for IL services.

- Identify partnership opportunities, when they arise, for grants and other developmental options that might supplement funding to Oregon’s CILs, as well as expand IL services.

ORDER OF PRIORITY FOR EXPANSION OF THE NETWORK OF CILS TO ADDRESS UNSERVED AND UNDERSERVED POPULATIONS AND AREAS

As part of the long-term strategy to address statewide coverage with IL services, VR, OCB and the SILC made a conscious decision years ago to focus on 1) bringing Part C-funded CILs to a base funding level, to begin addressing the underserved populations in their current service areas and 2) elevating the non-Part C-funded CILs to the minimum base funding level, to address the underserved in their service areas.

The strategy for expansion of IL services into unserved areas is to expand services through current CIL administrations, when possible. We believe that within a largely rural state, we must explore strategies that make IL services accessible to residents of even the most remote regions of Oregon, especially since these rural residents usually have access to very few service providers of any kind, have little or no accessible public transportation, and experience under-funded service delivery systems in general.

We understand, as illustrated in a policy directive issued by RSA in August, 2003, RSA-PD-03-06, that awards of new Part C funds to provide services in any unserved or underserved area (including areas served by non-Part C-funded CILs) must be done through a competitive process conducted by RSA, and both Part C and non-Part C-funded CILs are among eligible applicants. As section 366.22(a)(1) states, “the new center serving the designated geographic area awarded Part C funds will be considered a new center rather than an existing center, even though the new center may share the same governing board with an existing center.”

The nuances contained in the policy directive, law and regulations cited in the previous paragraph will be especially pertinent as Oregon moves forward to implement what we have determined is the most efficient, economical and long-term productive approach to expanding services to areas of the state without IL services. Building upon the infrastructure of sound, well-managed, seasoned CILs is key and will enable statewide IL services to be provided more rapidly and with fewer dollars.

As stated, the initial step toward realizing this goal must be to assure that current CILs, those receiving any combination of program funding, are supported at levels that enable them to operate a solid organization and begin to address the underserved areas of their currently defined service areas. These plans, and rationale for such, have driven the long-standing funding priority philosophy in Oregon.

OREGON’S ESTABLISHED MINIMUM BASE CIL FUNDING LEVELS:

When establishing a “Minimum Base Funding Level” for CILs, Oregon has a 2-level standard to reflect the difference between what is a realistic base operating budget for a CIL (“**Preferred Minimum Base Funding**”- **\$250,000**) that must provide the four core IL services and comply with the requirements of the law and regulations governing centers for independent living under

section 725 of the Rehabilitation Act of 1973, as amended, versus the reality of funding presently available for the general operations of a CIL (“**Standard Minimum Base Funding Level**” - \$200,000).

- “**Standard Minimum Base Funding Level**” is established at \$200,000 and includes any combination of Title VII, Part B, C or state IL funding, but does not take into consideration any other funding sources a CIL may receive, except when granting Title VII, Part B and State General Funds to EOCIL and LILA according to CIL Funding Priorities B.3 and 4.
- “**Preferred Minimum Base Funding**” is established at \$250,000 and includes any combination of Title VII, Part B, C or state IL funding, but does not take into consideration any other funding sources a CIL may receive. *This funding level will only be implemented once all Oregon CILs have achieved the “Standard Minimum Base Funding Level” of \$200,000.*

CIL FUNDING PRIORITIES:

Oregon’s SPIL Partners have agreed that CIL base funding priorities can only responsibly be established based on funding that appears to be stable/on-going. We also recognize that allocation decisions about time-limited funds, such as those made available recently through the ARRA (American Recovery and Reinvestment Act), need to be addressed under the state’s SPIL, but aren’t easily folded into general base funding priorities. For this reason, our response to this section on CIL funding priorities is broken down into the following components:

A. Funding priorities for distribution of on-going NEW PART C funds:

1. Priorities for distribution of Part C funds that **are sufficient** to fund a new Part C-funded CIL at the Standard Minimum Base Funding Level of \$200,000 (Note: Part C funding to any new CIL is \$200,000, with any remainder reverting back to follow the overall priorities):
 - Underserved counties of Baker, Gilliam, Grant, Harney, Malheur, Morrow, Umatilla, Union, Wallowa and Wheeler. *Currently, a non-Part C-funded CIL serves this area.*
 - Underserved county of Lane. *Currently, a non-Part C-funded CIL serves this area.*
 - *Unserved counties of Marion, Polk and Yamhill
 - *Unserved counties of Coos, Curry, Linn, Benton and Lincoln
 - *Unserved counties of Clatsop, Columbia, Hood, Sherman, Tillamook and Wasco**During this SPIL period, Objective 1.2 calls for the Network of CILs, SILC, VR and OCB to partner in gathering more timely data on all unserved counties in the state and examining the need for IL services, including disability population statistics, the existence of current service systems such as accessible transportation and local consumer knowledge/interest in IL services. That information will be used to develop strategies through which all unserved counties can be more accurately prioritized, including realistic, functional groupings in some cases.*
2. Priorities for distribution of Part C funds that **are not sufficient** to fund a new Part C-funded CIL at the Standard Minimum Base Funding Level of \$200,000:

- a. Supplement funds for ILR in amount required to bring its funding level as close to the following as fund availability allows (including Part C and these dollars): Up to \$396,121 in federal fiscal year 2014 and \$388,031 in subsequent years, adjusted down by the percentage of any cumulative Part C reductions implemented after the federal fiscal year 2012 award notices,* and offset by any Part C increases during that same period.
** Since Part C funds are "forward funded," it should be understood in this document that the Part C "award notices" in specific federal fiscal years describe the amount of funding that will be "distributed" or "allocated" to a CIL in the year following the award. Part B and state funds are not forward funded, so are awarded and distributed/allocated in the same year.*
- b. Supplement the smallest Part C award until it has reached a level equal to the next lowest Part C award(s).
- c. If funds are still remaining, supplement the smallest Part C awards equally until they reach a level equal to the next lowest Part C award(s).
- d. If funds are still remaining, continue to apply funds as noted in b & c above until all Part C-funded CILs have reached the "Standard Minimum Base Funding Level" of \$200,000.
- e. Once all Part C-funded CILs are supported at the Oregon established "Standard Minimum Base Funding Level" of \$200,000, divide available Part C funds equally among all Part C-funded Oregon CILs until each have received an additional \$50,000.
- f. If all Part C-funded CILs reach \$250,000 (or higher for CILs having Part C continuation awards greater than \$250,000 when the addition \$50,000 distribution in item e begins), the process described below under priority C, for Time-Limited Title VII Part B and C funds, will be implemented to determine the appropriate distribution of additional Part C continuation funds.

B. Funding priorities for distribution of **Title VII, Part B and State IL General Funds** available for the general operation of CILs. *Eligibility is contingent on CILs achieving and maintaining compliance (determined by the DSU) with the Rehabilitation Act, Title VII, section 725 Standards and Assurances:*

1. Supplement funds for ILR in amount required to bring its funding level as close to the following as fund availability allows (including Part C and these dollars): Up to \$396,121 in federal fiscal year 2014 and \$388,031 in subsequent years, adjusted down by the percentage of any cumulative Part C reductions implemented after the federal fiscal year 2012 award notices, and offset by any Part C increases during that same period.
2. Supplement funds for Part C-funded CILs in amounts required to bring their total base funding (including Part C and these dollars) to \$200,000, or as close to such level as fund availability allows. Should funds be insufficient to bring all C-funded CILs to \$200,000, the available funds will be distributed using the process described in funding priority A.2.b through d above. *See "Additional Funding Parameters" below, regarding sequestration.
3. Fund EOCIL at \$100,000, or as close to such as fund availability allows. *This award is subject to the requirement that the CIL be able to demonstrate that their funding year*

budget, combined with this award, would bring EOCIL to the Standard Minimum Base Funding Level of \$200,000 as a total agency budget.

4. Fund LILA at \$100,000, or as close to such as fund availability allows. *This award is subject to the requirement that the CIL be able to demonstrate that their funding year budget, combined with this award, would bring LILA to the Standard Minimum Base Funding Level of \$200,000 as a total agency budget.*
5. Fund EOCIL at \$200,000, or as close to such as fund availability allows (not considering any other funds).
6. Fund LILA at \$200,000, or as close to such as fund availability allows (not considering any other funds).
7. Once all of Oregon's CILs are funded at the Oregon established "Standard Minimum Base Funding Level" of \$200,000, divide available funds equally among all Oregon CILs until all are funded at the "Preferred Minimum Base Funding Level" of \$250,000 (*or greater for CILs that were already receiving more than the Preferred Minimum Base Funding Level when the \$200,000 threshold was reached by the final CIL.*)
8. Once all of Oregon's CILs are funded at the Oregon established "Preferred Minimum Base Funding Level" of \$250,000 (*or greater for CILs that were already receiving more than the Preferred Minimum Base Funding Level when the \$250,000 threshold was finally reached by the final CIL*), funds shall be used to address optimization of IL service availability, through implementation of strategies being developed and formalized during this SPIL period, related to Objective 1.2.

C. Funding priorities for distribution of **Time-Limited Title VII, Part B or C** funds (e.g. ARRA):

Should one-time/time-limited Title VII, Part B or Part C funds become available, a committee of representatives comprised as follows shall meet and determine a recommendation for their allocation:

SPIL SIGNATORIES (voting members):

- Director, Vocational Rehabilitation program (VR), or their designee
- Executive Director, Oregon Commission for the Blind (OCB), or their designee
- Chairperson, State Independent Living Council, or their designee

INTERESTED PARTIES (non-voting members):

- Representative staff of the VR-IL program
- Representative staff of the OCB-IL program
- Executive Director, State Independent Living Council (SILC) or their designee
- Three (3) CIL representatives (elected by CILs), who serve as SILC members

Oregon believes the best utilization of one-time funds can be made by a timely examination of current IL needs, CIL funding levels, current status of the Network of CILs' infrastructure, the outcomes expected with said funds and other factors not easily predicted. The above committee represents the mandatory SPIL signatories serving as voting members, with others identified serving as subject experts and/or interested parties.

ADDITIONAL FUNDING PARAMETERS:

NON-COMPLIANT CILs - If any CIL fails to maintain compliance with section 725 Standards and Assurances during the course of this SPIL, and the DSU (VR), in consultation with the SILC and OCB, determines it unlikely a corrective action plan will result in timely compliance, or a corrective action plan fails to remediate non-compliance, state-issued grants will either not be implemented, or the existing grant will be terminated. RSA will be notified of the state's findings and action taken. Any non-compliant CIL(s) will be removed from the SPIL's identified Network of CILs and not be eligible for reconsideration of network status and IL funding until the following SPIL period.

DISCONTINUATION OF CIL SERVICES – If, for any reason, including non-compliance and loss of funding, a CIL ceases to provide IL services, funding allocated for the area they served *may be* made available in the amount deemed appropriate, to an eligible CIL or combination of CILs, to continue services in that service area. If this is determined not to be the appropriate action to take, funds will be allocated based on the funding priorities listed above. This determination shall be made by the SPIL signatories, or their designees, at the time of this event.

SEQUESTRATION-The federal sequestration of IL program funds creates an extraordinary, potentially temporary impact on Oregon's CIL funding priorities. Funding priority B.2. requires the State to backfill the sequestration cuts experienced by C-funded CILs receiving federal grants below \$200,000. This means the combined total of those sequestration cuts would likely fall primarily on one non C-funded CIL, Eastern Oregon Center for Independent Living (EOCIL). Not wanting to compromise EOCIL's sustainability, the four C-Funded CILs funded through priority B.2, along with the other members of the Association of Oregon Centers for Independent Living, made a recommendation that was agreed to by the SPIL signatories. As a result, the Standard Base Funding Level of \$200,000 for priority B.2 will be reduced by the amount of sequestration reduction experienced by the respective C-funded CILs. This would only be in effect during the period that sequestration levels are in place. This would not change unless additional IL funds are received, beyond those estimated in this State Plan, and in an amount sufficient to maintain EOCIL at a grant level equal to or greater than \$175,000.

CARRYOVER-When a given year's Part B allocation is not fully spent, such as when a CIL accepts a grant of less than the amount available under the SPIL funding priorities, the unspent Part B funds will become carryover into the following year's budget and allocated along with the next fiscal year's revenues, according to the funding priorities in this SPIL.

3.3 Section 723 States Only – 34 CFR 364.39

3.3A If the State follows an order of priorities for allocating funds among centers within a State that is different from what is outlined in 34 CFR 366.22, describe the alternate order of priority that the DSU director and the SILC chair have agreed upon. Indicate N/A if not applicable.

N/A

3.3B Describe how the State policies, practices and procedures governing the awarding of grants to centers and the oversight of these centers are consistent with 34 CFR 366.37 and 366.38.

N/A

Section 4: Designated State Unit (DSU)

4.1 Administrative Support Services – 34 CFR 364.4; 34 CFR 364.22(b)

4.1A Describe the administrative support services to be provided by the DSU for the SILS (Part B) program and, if the State is a Section 723 State, for the CIL (Part C) program.

- Refer to the SPIL Instructions for additional information about administrative support services.

Administrative support services provided by the DSU for the SILS (Part B) program includes the following:

VR Administrative Support Services

- Staff to participate in SPIL implementation activities.
- Staff to serve as an ex-officio member of the SILC.
- Staff to assist in budget planning related to the needs of the SILC Resource Plan, as well as grants for the general operation of CILs.
- Staff to participate in RSA reviews of the IL program.
- Staff to work with the Department of Human Services (DHS) in development of an overall agency budget recommendation to include sufficient State General Funds to match Title VII, Part B funds.
- Staff to participate in legislative budget hearings and legislative Emergency Board activities related to allocations for IL program funding.
- Costs related to financial accounting responsibilities for the IL program.
- Staff to participate in planning regarding policies being considered by the DSU and SILC, and on other committees within DHS as they relate to SPIL objectives.
- Staffing costs to develop and administrate grants or contracts with CILs.
- Staffing costs to respond to technical assistance needs of CILs.
- Staffing costs to coordinate/conduct on-site reviews and other CIL monitoring tasks.
- Any necessary legal costs associated with the administration of the IL program.
- Overhead costs for office space, maintenance costs on office equipment, as well as supplies and various services related to VR's IL program administration.

OCB Administrative Support Services for the Portion of Title VII Funds Provided to the Agency Administrating VR Services for Individuals Who are Blind

- Staff to participate in SPIL implementation activities.

- Staff to serve as an ex-officio member of the SILC.
- Staff to assist in budget development, legislative budget hearings, and legislative Emergency Board activities related to allocations for IL program funding.
- Staff to participate in RSA reviews of the IL program.
- Costs related to financial accounting responsibilities for the IL program.
- Staff to participate in planning regarding policies being considered by the DSU and SILC, and on other committees as they relate to SPIL objectives.
- Staffing costs to develop and administrate agreements with service providers.
- Any necessary legal costs associated with administration of the OCB IL program.
- Overhead costs for office space, maintenance costs, office equipment supplies and various services necessary for the OCB IL program administration.

4.1B Describe other DSU arrangements for the administration of the IL program, if any.

VR employs a .50 FTE IL Program Coordinator to perform the administration of VR's IL program and related grants to CILs. Likewise, OCB employs a 0.01 FTE staff to perform the administration of OCB's IL program.

Section 5: Statewide Independent Living Council (SILC)

5.1 Resource plan – 34 CFR 364.21(i)

5.1A Describe the resource plan prepared by the SILC in conjunction with the DSU for the provision of resources, including staff and personnel, made available under parts B and C of chapter 1 of title VII, section 101(a)(18) of the Act, and from other public and private sources that may be necessary to carry out the functions of the SILC identified in section 705(c). The description must address the three years of this SPIL.

– Refer to the SPIL Instructions for more information about completing this section.

The Resource Plan will consist of the following funding sources:

- \$1,800 per year contributed by OCB from Title I Innovation & Expansion funds
- \$77,575 per year contributed by VR from the State General Fund*
- \$286,625 per year contributed by VR from Title I Innovation & Expansion funds*

*Actual distribution between Title I and State General Funds may vary from year to year depending on the existence of prior year Title I carryover.

With this allocation, the SILC will fund all personnel, supplies and services needed to conduct activities consistent with section 705(c). In addition to these funds, the DSU/VR will provide in-kind resources for basic supplies (copier & printer paper, etc.), phones, faxes, computers, IT support, work station furnishings, copiers, printers, work space, janitorial services, some postage and mailing services, contracting services, payroll services, position authority, and Attorney General liaison services to support resources needed by the SILC. The DSU will also

provide accounting services, which are part of their Rehabilitation Act duties as fiscal agent for the State's Title VII, Chapter 1 program. The SILC will use its Resource Plan to supply all specialized supplies and equipment.

SILC staff positions consist of a full time Executive Director, a full time Operations Coordinator, a full time Administrative Assistant, and a 0.50 FTE Community Collaboration Liaison.

5.1B Describe how the following SILC resource plan requirements will be addressed:

- The SILC's responsibility for the proper expenditure of funds and use of resources that it receives under the resource plan.

The SILC has delegated its Executive Director to oversee development of a draft budget, including the SILC Resource Plan for conducting Rehabilitation Act, section 705 duties. The SILC's Executive Committee will work with the Executive Director to develop a final Resource Plan recommendation for the full Council's approval. The SILC's Executive Director has authority granted by the Council to approve day to day Resource Plan expenditures, in keeping with the Code of Federal Regulations, the Rehabilitation Act, EDGAR, and the approved SILC budget. The SILC provides assurance that Resource Plan expenditures are appropriate for the purpose and funding period through standard accounting practices and maintenance of all financial records necessary for auditing by appropriate state or federal entities. Quarterly financial reports are provided to the SILC for review and approval. In addition, the DSU receives, disburses, and accounts for Resource Plan funds and expenditures, on behalf of the SILC, through the State Financial Management System. Resource Plan expenditures are subject to audits conducted by the Designated State Agency (DSA) and the Oregon Secretary of State.

- Non-inclusion of conditions or requirements in the SILC resource plan that may compromise the independence of the SILC.

An inter-agency agreement between the DSA, DSU and SILC specifies, in relationship to the SILC, that "DHS and VR shall not interfere with...[the SILC's] budget."

- Reliance, to the maximum extent possible, on the use of resources in existence during the period of implementation of the State plan.

In order to sustain resources over the three years of the SPIL period, a separate SILC Resource Plan is negotiated with the DSU/VR for each year of the SPIL by looking at historical trends in available state and federal funds and projecting expected revenues and need for each year. The Resource Plan also contains a contingency line item as a means of supporting very basic functions of the SILC in times when bureaucratic issues or financial emergencies could interfere with a consistent flow of resources necessary to carry out the SILC's responsibilities.

5.2 Establishment and Placement – 34 CFR 364.21(a)

Describe how the establishment and placement of the SILC ensures its independence with respect to the DSU and all other State agencies.

– Refer to the SPIL Instructions for more information about completing this section.

The SILC is established by Executive Order of the Governor, as a separate governmental entity, independent of any State agency, including the DSU and all other State agencies. As a governmental entity, the SILC is responsible to adhere to general administrative policies that are legal requirements of all Oregon governmental entities. Following is a brief description of the legal status and placement of the SILC:

After establishment of the SILC through Executive Order of the Governor, one goal of the 1999-2001 SPIL was to identify the best option for placement of the SILC to meet the intent of the Rehabilitation Act. After extensive research, consideration and clarification from the Oregon Department of Justice, a determination was made that it is not possible for the SILC to be a 501(c)3, under current Oregon law. Given this reality, the SILC focused on the best location for its offices as a governmental entity. Oregon's Department of Human Services (DHS) had developed a practice of partner integration through cohabitation agreements. This develops effective partnering and strategic use of resources. The SILC determined that an offer of shared office space between DHS and the SILC would be beneficial to both entities, and would allow for better coordination with VR, the SILC's fiscal agent, as well as providing increased visibility for the IL program and collaboration/networking opportunities with various programs within DHS. An inter-governmental agreement was subsequently developed to formalize the SILC's relationship with DHS and the VR program, including the provision of office space and services to support the arrangement, and protect the autonomy of the SILC, consistent with 34 CFR 364.21(a)(2).

Status of SILC Placement and Location: The current location of the SILC has proven extremely beneficial for partnering and financial management. The SILC's IL focus on the holistic needs, abilities, and issues concerning individuals with all types of disabilities and of all ages is consistent with the DHS values. The SILC has earned a reputation with the various agencies of DHS as a valuable partner, bringing consistent reminders of the need for inclusion of consumer input/direction and promotion of consumer independence.

Although the SILC realizes numerous financial and programmatic benefits from its office location, there are some negative aspects, as well. The negative aspects are mainly due to the complexities of having a fiscal agent that must follow DHS regulations, while attempting to process payments for an entity that is not bound by those regulations. Consistent communication is necessary to ensure that current DHS staff members, who are involved in some of the bureaucratic processes, are familiar with the difference between SILC expenditures and DHS program expenditures.

The placement of the SILC in government also produces certain legal complexities when it comes to obtaining position authorities from the legislature and obtaining contract authority. When requesting position authority, out of state travel, requesting specific state investments during legislative budget development, determining mandatory agency-wide cuts etc., the DSU,

acting as the SILC’s fiscal agent, is sometimes placed in a position of having to balance the general VR program’s needs with the SILC’s needs.

Thus far, DHS has assisted in overcoming these issues by officially providing needed authorizations for such things as staff positions, while the SILC conducts oversight and management responsibilities. This establishes some degree of risk for DHS as the legally responsible party for certain activities conducted and managed by the SILC. It also provides some inherent complexities for the SILC in adding a layer of bureaucracy relating to hiring, as well as contracting. There is also ongoing risk that leadership changes within the DSA and DSU could reduce the level of partnering and assistance offered to the SILC in accomplishing these activities.

Future Placement and Location: During this SPIL period, the SILC will conduct a routine evaluation of placement and location options that could reduce the bureaucracy necessary to fulfill the duties and mission of the SILC and assure the SILC’s autonomy, while maintaining the numerous benefits outlined above.

5.3 Appointment and Composition – 34 CFR 364.21(b) – (f)

Describe the process used by the State to appoint members to the SILC who meet the composition requirements in section 705(b).

- Refer to the SPIL Instructions for more information about completing this section.

The SILC conducts specific recruiting activities, then screens and makes recommendations on each applicant to the Governor, in an effort to maintain a balanced and qualified council, consistent with the representation required by section 705 (b) of the Rehabilitation Act. To that end, the SILC and the Governor’s office each maintain and reconcile their records to demonstrate that Oregon’s SILC is fully constituted. This includes tracking member terms to insure compliance with the Rehabilitation Act’s section 705(b)6 - “Terms of Appointment.” Based on need, the SILC seeks applicants to fill required representation positions and at large positions in a manner that insures knowledge of IL services and philosophy, as well as diversity in geographical representation, disability type, race, gender, and age. The Oregon Governor’s office sends the SILC copies of any applications for SILC appointment received, and awaits screening and a recommendation from the SILC prior to any appointments. The SILC also coordinates ongoing assessments of SILC composition, and conducts initial orientations, ongoing trainings and knowledge assessments of members to assist in development of a knowledgeable and effective council. The SILC’s Chairperson and other officers are elected by the membership, per the SILC’s bylaws.

5.4 Staffing – 34 CFR 364.21(j)

Describe how the following SILC staffing requirements will be met:

- SILC supervision and evaluation, consistent with State law, of its staff and other personnel as may be necessary to carry out its functions.

By nature of the legal complications related to the SILC's status as a governmental entity, noted above in Section 5.2, it has been necessary to obtain position authority for SILC staff through the DSA's position authority. However, the written agreement between the DSA, DSU and the SILC clearly gives authority for hiring, supervision and evaluation to the SILC.

The SILC, through their Chairperson and Executive Committee, perform supervision of the SILC's Executive Director, and ensures that all personnel rules and evaluation processes are conducted in accordance with state law. The SILC's Executive Committee maintains a defined procedure for performing annual performance evaluations, including biannual surveys of SILC partners.

The SILC's Executive Director is charged with the responsibility of hiring, supervising and evaluating all SILC staff, and ensuring that all personnel rules and evaluation processes are conducted in accordance with state law.

Due to state legal complications related to SILC placement, which prevent the SILC from having contracting authority, an agreement between the DSA, DSU and SILC allows the SILC to obtain necessary contracts for staffing services through the DSU's authority, when needed. The SILC develops the necessary contracts, then SILC staff, as state employees, administer these contracts.

- Non-assignment of duties to SILC staff and other personnel made available by the DSU, or any other State agency or office, that would create a conflict of interest while assisting the SILC in carrying out its duties.

Among other things, the inter-governmental agreement each SPIL period between DHS, VR, OCB and the SILC identifies the legal purpose of the SILC, establishes the SILC as a distinct, autonomous, and separate entity from DHS and VR, and designates the respective functions and responsibilities of and between the parties with regard to the implementation of the goals and objectives of the State Plan for Independent Living (SPIL). The agreement also states that "DHS and VR shall not interfere with...personnel management..." In any case where a conflict would arise, this document provides the SILC with authority necessary to ensure that its ability to direct its staff is not overridden, in regards to performance of duties in keeping with the interests and needs of the SILC.

Section 6: Service Provider Requirements

Describe how the following service provider requirements will be met:

6.1 Staffing – 34 CFR 364.23; 34 CFR 364.24; 34 CFR 364.31

- Inclusion of personnel who are specialists in the development and provision of IL services and in the development and support of centers.

Entities receiving SPIL-related federal and/or state funding for the purpose of service provision

individually develop their policies and procedures necessary to insure service requirements are met.

Oregon's IL providers, listed in the SPIL, develop position descriptions for staff, whom provide IL services. These give a clear picture of the expertise, skills and expectations for performing individual jobs related to service provision. These are used both as a guide for hiring staff, and for evaluating staff performance. In addition, IL providers implement affirmative action practices in keeping with their individual policies and procedures related to this legal requirement. DSU grants to CILs also require compliance with 34 CFR 364.23(a).

Since Rehabilitation Act, section 725 Standards and Assurances and various CFR citations are included in services grants between the DSU and Network of CILs, these requirements are monitored under the contracts. In addition, the DSU includes these requirements in grants to CILs for specific services or projects, outside of base funding, when the grant is awarded by virtue of the CIL being part of Oregon's Network of CILs.

In addition to routine monitoring of grants, these requirements are included in all periodic on-site reviews of CILs, as compliance measurements. The DSU additionally uses 704 reports to evaluate issues regarding compliance with these requirements. These monitoring practices apply to all service provider requirements in section 6.

The SILC, in its SPIL implementation monitoring and evaluation processes, reviews the 704 reports and consumer satisfaction surveys of CILs, and provides information to the CILs and DSU when it appears improvements are needed in these areas.

- Availability, to the maximum extent feasible, of personnel able to communicate (1) with individuals with significant disabilities who rely on alternative modes of communication, such as manual communication, nonverbal communication devices, Braille, or audio tapes and (2) in the native languages of individuals with significant disabilities whose English proficiency is limited and who apply for or receive IL services under title VII of the Act.

Entities receiving SPIL-related Federal and/or State funding for the purpose of service provision individually develop their policies and procedures necessary to insure service requirements are met.

Appropriate modes of communication to consumers are addressed in policies and procedures, requiring alternatives such as non-English translations, Braille, or other alternate formats of information. Statements regarding the provider's commitment to providing these formats are posted in the agencies and noted in publications.

DSU grants to CILs also require compliance with 34 CFR 364.23(b).

- Establishment and maintenance of a program of staff development for all classes of positions involved in providing IL services and, where appropriate, in administering the CIL program, improving the skills of staff directly responsible for the provision of IL services, including knowledge of and practice in the IL philosophy.

Entities receiving SPIL-related federal and/or state funding for the purpose of service provision individually develop their policies and procedures necessary to insure service requirements are met.

Plans for ongoing staff development are included in agency annual and three-year work plans. DSU grants to CILs also require compliance with 34 CFR 364.24.

- Affirmative action to employ and advance in employment qualified individuals with significant disabilities on the same terms and conditions required with respect to the employment of individuals with disabilities under section 503 of the Act.

State grants to CILs include language requiring compliance with Rehabilitation Act section 725(c)(5), which states, "The applicant will use sound organizational and personnel assignment practices, including taking affirmative action to employ and advance in employment qualified individuals with significant disabilities on the same terms and conditions required with respect to the employment of individuals with disabilities under section 503."

6.2 Fiscal Control and Fund Accounting – 34 CFR 364.34

- Adoption of those fiscal control and fund accounting procedures as may be necessary to ensure the proper disbursement of and accounting for funds made available through parts B and C of chapter 1 of title VII of the Act, in addition to complying with applicable EDGAR fiscal and accounting requirements.

Oregon's IL providers maintain individual policies and procedures to achieve the above requirements. DSU grants to CILs also require compliance with the following:

- Financial Administration (sec. 704(m)(3) and 725(c)(7) of the Act; 34 CFR 364.34 & 364.35)

6.3 Recordkeeping, Access and Reporting – 34 CFR 364.35; 34 CFR 364.36; 34 CFR 364.37

- Maintenance of records that fully disclose and document the information listed in 34 CFR 364.35.

In addition to individual IL provider policies and procedures to ensure compliance with CFR 364.35, DSU grants to CILs require compliance with sec. 704(m)(4)(A) and (B) of the Act; 34 CFR 364.35.

- Submission of annual performance and financial reports, and any other reports that the Secretary determines to be appropriate

In addition to individual IL provider policies and procedures to ensure compliance with CFR 364.35, DSU grants to CILs require compliance with sec. 704(m)(4)(D) and 725(c)(8), (12) and

(13) of the Act (with the exception that reports from state-funded CILs are not sent to RSA); 34 CFR 364.36.

- Access to the Commissioner and the Comptroller General, or any of their duly authorized representatives, for the purpose of conducting audits, examinations, and compliance reviews, to the information listed in 34 CFR 364.37.

In addition to individual IL provider policies and procedures to ensure compliance with CFR 364.35, DSU grants to CILs require compliance with secs. 704.(m)(4) and (5) of the Act; 34 CFR 364.37.

6.4 Eligibility – 34 CFR 364.40; 34 CFR 364.41

- Eligibility of any individual with a significant disability, as defined in 34 CFR 364.4(b), for IL services under the SILS and CIL programs.

IL service providers include, in their consumer service records (CSRs), the paperwork related to how eligibility was determined, in keeping with federal laws, 34 CFR 364.4(b). DSU grants to CILs also require compliance with sections 7(21)(B) and 703 of the Act.

- Ability of any individual to seek information about IL services under these programs and to request referral to other services and programs for individuals with significant disabilities.

Individual IL service providers include, in their consumer service records (CSRs), information provided to consumers about their rights, including the ability to be referred to other relevant programs. All service providers will supply any individual with information and referral to other services and programs for individuals with significant disabilities, as noted in their individual service policies. DSU grants to CILs also require compliance with 34 CFR 364.40(b).

- Determination of an individual's eligibility for IL services under the SILS and CIL programs in a manner that meets the requirements of 34 CFR 364.51.

Individual IL service providers maintain service policies and procedures to ensure compliance with 34 CFR 364.51 and in their consumer service records (CSRs), information is documented as to consumer eligibility. In addition, DSU grants to CILs require compliance with secs. 7(21)(B); 703 of the Act and 34 CFR 364.51

- Application of eligibility requirements without regard to age, color, creed, gender, national origin, race, religion, or type of significant disability of the individual applying for IL services.

Individual CILs maintain service policies and procedures to ensure that eligibility requirements

are applied without regard to age, color, creed, gender, national origin, race, religion or type of significant disability of the individual applying for IL services. In addition, the DSU grants to CILs require compliance with sec. 725(b)(2) of the Act; 34 CFR 364.41(a).

- Non-exclusion from receiving IL services of any individual who is present in the State and who is otherwise eligible for IL services, based on the imposition of any State or local residence requirement.

Individual IL service providers maintain service policies and procedures to ensure compliance with 34 CFR 364.41. In addition, DSU grants to CILs require compliance with 34 CFR 364.41(b).

6.5 Independent Living Plans – 34 CFR 364.43(c)

- Provision of IL services in accordance with an IL plan complying with Sec. 364.52 and mutually agreed upon by the individuals with significant disabilities and the appropriate service provider staff unless the individual signs a waiver stating that an IL plan is unnecessary.

Oregon’s IL providers keep CSRs, which include documentation of the consumer’s knowledge of their right to develop an IL plan or sign a waiver. For those consumers requesting an IL plan, the CSR also includes the plan, jointly signed by the consumer and the IL staff members assisting them. DSU grants to CILs also require compliance with the following:

- Consumer Service Reports (sec. 704(m)(B), 725(c)(8) of the Act; 34 CFR 364.53)
- Independent Living Plans (sec. 704(e) and 725(c)(14) of the Act; 34 CFR 364.52)

6.6 Client Assistance Program (CAP) Information – 34 CFR 364.30

- Use of accessible formats to notify individuals seeking or receiving IL services under chapter 1 of title VII about the availability of the CAP program, the purposes of the services provided under the CAP, and how to contact the CAP.

Oregon’s IL providers each maintain copies of brochures provided by Disability Rights Oregon, the agency that operates Oregon’s CAP, and these brochures are provided to consumers according to policies of each provider that require the use of accessible formats. CSRs contain documentation, signed by consumers, verifying that the consumer has received this information. DSU grants to CILs require compliance with the following:

- Notice about the Client Assistance Program (sec. 20 & 704(m)(1) and 725(c)(9) of the Act; 34 CFR 64.30)

6.7 Protection, Use and Release of Personal Information – 34 CFR 364.56(a)

- Adoption and implementation of policies and procedures meeting the requirements of 34 CFR 364.56(a), to safeguard the confidentiality of all personal information, including photographs and lists of names.

Oregon’s IL providers individually develop policies and procedures, adopted by their Boards of Directors, for informing consumers of their agency’s methods of safeguarding the confidentiality of consumer personal information. The standard practice is to also include a consumer’s statement in the CSR, which indicates they have been notified of the confidentiality policies. DSU grants to CILs require compliance with 34 CFR 364.56.

Section 7: Evaluation

Describe the method that will be used to periodically evaluate the effectiveness of the plan in meeting the objectives established in Section 1. The description must include the State’s evaluation of satisfaction by individuals with significant disabilities who have participated in the program. 34 CFR 364.38

Goal(s) and the related Objective(s) from Section 1	Method that will be used to evaluate
Funded Services Maximized and Effective Services Changed Systems and Attitudes	SPIL Evaluation Reports: Each SPIL partner will provide periodic SPIL Evaluation Reports to the SILC in order to facilitate evaluation of SPIL implementation & progress toward objectives. CILs will report quarterly; the SILC, VR & OCB will report biannually; and the Client Assistance Program (CAP) will report annually. The SILC will assess these reports and follow up with questions or interviews to gather additional details when needed to measure progress toward objectives and determine areas needing change or improvement. Progress measurement in achieving objectives will be made at least annually using data from these reports.
Funded Services Maximized and Effective Services Changed Systems and Attitudes	SILC Committee/Work Group Progress Reports: Each SILC Committee/Work Group will provide SPIL progress reports at quarterly SILC meetings, allowing the SILC to evaluate implementation of the SILC’s specific obligations under the SPIL. The SILC will use these reports to identify areas of implementation needing change or improvement.
Funded Services Maximized and Effective Services Changed Systems and Attitudes	Annual 704 Reports: CIL 704 reports will be reviewed by the DSU for information on provider compliance. The SILC will review 704 reports from CILs for statistical and narrative information on trends, barriers and progress related to SPIL objectives. The SILC will use this information to assess areas where improvement or training may be needed.

<p>Funded Services Maximized and Effective Services Changed Systems and Attitudes</p>	<p>Statewide Consumer Satisfaction Surveys: The Network of CILs and OCB will conduct an annual statewide survey of consumer satisfaction. Besides measuring consumer satisfaction, the SILC will use the results to evaluate statewide and local trends and identify areas needing improvement. Individual service providers will use data from their particular organizations to evaluate their individual services and make program improvements.</p>
<p>Funded Services Maximized and Effective Services Changed Systems and Attitudes</p>	<p>Quarterly Service Reports & On-site Compliance Reviews: The DSU will use quarterly grant service reports along with conducting on-site compliance reviews to determine appropriateness of IL services. Compliance reports will be shared with the SILC as an additional source for evaluating implementation and effectiveness of the State Plan.</p>
<p>Funded Services Maximized and Effective Services Changed Systems and Attitudes</p>	<p>Statewide Evaluation Meetings: Each year the SILC will prepare a Statewide SPIL Evaluation Report, including appropriate interim outcome measures, and will meet with SPIL partners to conduct in-depth discussions regarding effectiveness of SPIL implementation, progress in meeting SPIL objectives, barriers, and overall effectiveness of strategies. These evaluation sessions will allow SPIL partners to formulate new strategies for achieving objectives that are not progressing as well as expected.</p>

Section 8: State-Imposed Requirements

Identify any State-imposed requirements contained in the provisions of this SPIL. Indicate N/A if not applicable. [34 CFR 364.20\(h\)](#)

N/A