

State: FLORIDA

STATE PLAN

FOR

INDEPENDENT LIVING

FISCAL YEARS 2004 - 2007

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

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ATTACHMENTS

The following is a list of the attachments in the SPIL. The attachments listed are numbered to coincide with their section. It is recommended that these attachments not exceed a combined total of 40 pages in length.

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Section 1: Purpose of the State Plan for Independent Living (SPIL), under Chapter 1 of Title VII

1.1 Philosophy of the Programs (Sec. 701 of the Act; 34 CFR 364.2)

The State assures that in the implementation of this plan the State will:

- (a) Promote a philosophy of independent living (IL), including a philosophy of consumer control, peer support, self-help, self-determination, equal access, and individual, and system advocacy, to maximize the leadership, empowerment, independence, and productivity of individuals with significant disabilities, and to promote and maximize the integration and full inclusion of individuals with significant disabilities into the mainstream of American society by providing financial assistance to States;
- (b) Provide financial assistance for providing, expanding, or improving the provision of IL services;
- (c) Provide assistance to develop and support a Statewide network of centers for independent living (CILs), operated by consumer-controlled, community-based, cross-disability, nonresidential private nonprofit agencies that are operated within local communities by individuals with disabilities and that provide an array of IL services; and
- (d) Advocate for improving working relationships among the various entities providing services to and for people with significant disabilities.

1.2 Participation in the Programs (Sec. 704(a)(1) of the Act; 34 CFR 364.10)

- (a) The DSU and SILC understands that no Federal funds or other benefits can be made available under Chapter 1 unless the State conforms with all applicable statutory and regulatory requirements.
- (b) This SPIL reflects the State's commitment to carry out an IL plan under Chapter 1 of Title VII of the Rehabilitation Act of 1973, as amended (Chapter 1)¹, and also the State's planning and implementation activities related to the plan.

¹ Public Law 93-112, as amended by Public Laws 93-516, 93-651, 95-602, 98-221, 99-506, 100-259, 100-630, 101-336, 102-569, 103-73, and 103-218.

Section 2: Legal Basis and State Certifications (Sec. 704 of the Act)

(a) As a condition to the receipt of financial assistance under Chapter 1, the

_____ Florida Independent Living Council, Inc. _____

_____ (Name of Statewide Independent Living Council) _____

jointly with the DSU is authorized to develop and sign the SPIL. The DSU and SILC agree to administer the programs in compliance with the provisions of the Act, all applicable regulations, policies, and procedures promulgated by the Secretary, and the provisions of this SPIL.

- (b) The State legally may carry out each provision of the SPIL and the DSU has the authority under State law to perform the functions of the plan.
- (c) All provisions of the SPIL are consistent with State law.
- (d) Commissioner of the Florida Department of Education _____

(Title of State Official) (acting on behalf of DSU)

has authority under State law to receive, hold, and disburse Federal funds made available under the SPIL.

- (e) The SPIL being submitted has been adopted or otherwise formally approved by the DSU and SILC.
- (f) The SPIL is the basis for State operation and administration of the Chapter 1 programs, as appropriate,² and is available for public inspection.
- (g) The effective date of this SPIL is October 1, 2004.

² If a State's expenditures earmarked to support the general operation of CILs is equal to or greater than the amount of Federal funds allotted to the State for this purpose, and the State has applied in SPIL Section 8 to administer the Part C, Ch. 1 program pursuant to section 723 of the Act, then the DSU must provide administrative support to the CILs; otherwise, the Secretary administers the CIL program pursuant to section 722 of the Act and the approved SPIL and the DSU is not required to provide administrative support services. §704(c)(2) of the Act)

SIGNATURE OF SILC CHAIRPERSON	DATE
<u>Donna Sumlin, President</u>	904-278-8180
NAME OF SILC CHAIRPERSON	PHONE NO.

SIGNATURE OF DESIGNATED STATE UNIT DIRECTOR	DATE
<u>Loretta Costin, Vocational Rehabilitation Director</u>	850-245-3400
NAME AND TITLE OF DESIGNATED STATE UNIT DIRECTOR	PHONE NO.

SIGNATURE OF DESIGNATED STATE UNIT DIRECTOR	DATE
<u>Craig Kiser, Director, Division of Blind Services</u>	850-245-0331
NAME AND TITLE OF DESIGNATED STATE UNIT DIRECTOR	PHONE NO.

This document incorporates by reference FLSPIL04.627 filed 6/27/04 by Executive Director, FILC, Inc., Tallahassee, Florida.

Section 3: Plan Submittal

3.1 Frequency of Submittal (Sec. 704(a)(3) of the Act; 34 CFR 364.11, 364.20(b))

- (a) This SPIL is for fiscal years 2004-2007. A three-year plan must be submitted every three years by July 1 of the year preceding the first fiscal year for which the plan is submitted, (i.e., July 1, 2004).
- (b) Plan amendments are submitted whenever the Secretary determines an amendment to the SPIL is essential during the effective period of the plan; or when there is a significant and relevant change that materially affects the information or the assurances in the plan, the administration or operation of the plan, or the organization, policies, or operations of the DSU or SILC.

3.2 State Plan Development (Sec. 704(a)(2) of the Act; 34 CFR 364.20(c))

The State plan is jointly developed and signed by the director of the DSU and the chairperson of the SILC or other individual acting on behalf of and at the direction of the Council.

3.3 Public Hearings (Sections 17, 704(m)(6) of the Act; 34 CFR 364.20(g), (h))

- (a) The State conducts public hearings to provide all segments of the public, including interested groups, organizations, and individuals, an opportunity to comment on the SPIL prior to its submission to RSA, and on any substantive review or revision of the approved SPIL. The DSU and SILC may meet the public participation requirement by holding the public hearings before a preliminary draft State plan is prepared or by providing a preliminary draft State plan for comment at the public hearings.
- (b) The State establishes and maintains a written description of procedures for conducting public hearings in accordance with the following requirements:
 - (i) The DSU and SILC shall provide appropriate and sufficient notice of the public hearings. Appropriate and sufficient notice means notice provided 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.
 - (ii) The DSU and SILC shall make reasonable accommodation to individuals with disabilities who rely on alternative modes of communication in the conduct of the public hearings, including providing sign language interpreters and audio-loops.
 - (iii) The DSU and SILC shall provide the notices of the public hearings, any written material provided prior to or at the public hearings, and the approved State plan in accessible formats (e.g., Braille, large print, on disk) for individuals who rely on alternative modes of communication.
 - (iv) At the public hearings to develop the State plan, the DSU and SILC will identify those provisions in the State plan that are State-imposed requirements. For purposes of this section, a State-imposed requirement includes any State law, regulation, rule, or policy relating to the DSU's administration or operation of IL programs under Title VII of the Act, including any rule or policy implementing any Federal law, regulation, or guideline, that is beyond what would be required to comply with the regulations in 34 CFR Parts 364, 365, 366, and 367.
- (c) The State identifies State imposed requirements resulting from the application of any State rule or policy relating to the administration or operation of the programs under Chapter 1. Following are descriptions of the State imposed requirements included in the SPIL, if any:

The State has negotiated contract deliverables to be reported by the CILs as a part of their payment request procedure. The state requires the CILs to report achievements on their contract using three deliverables. The three deliverables are Consumer Service Hours,

Community Service Hours, and Outreach Activities. The Network of CILs have constructed definitions for each deliverable category. Each deliverable category is made up of various Independent Living Services. The funds received by a CIL under a contract with the state are represented by hours of service in each category. The CIL has to report its achievements towards the total deliverables hours within that contract. If all the hours are accomplished by the end of the contract, the CIL will receive the total amount of the contract. If CIL has not accomplished all the deliverable hours, their payment under the contract will be reduced for the hours they were not able to accomplish.

Opportunity for Review and Comment Under State Review Process (34 CFR 76.141-142)

If the SPIL or an amendment to the plan is subject to the State review process, such materials are reviewed, and commented on, in accordance with the provisions of Executive Order 12372. Comments provided through the State review process will be transmitted to RSA.

Section 4: Statewide Independent Living Council (SILC) (Sec. 705(a) and (b) of the Act)

4.1 Composition of the SILC (Sec. 705(b) of the Act; 34 CFR 364.21(b))

(1) State the total number of persons on the SILC.	17
(2) State the number of SILC members with disabilities, as defined in 34 CFR 364.4 (b), and not employed by a State agency or a CIL	11
(3) Is a representative of the DSU an ex-officio, member of the SILC?	<u>Y</u> N
(4) State the number of voting members on the SILC.	14
(5) State the number of different disability groups (physical, mental, cognitive, sensory, or multiple) represented by members of the SILC (up to five).	3
(6) Is a CIL director chosen by CIL directors within the State appointed to the SILC?	<u>Y</u> N
(7) Does the SILC include representatives from other State agencies that provide services for individuals with disabilities?	<u>Y</u> N
(8) Does the council have a voting membership that is knowledgeable about CILs and IL services?	<u>Y</u> N

(9) Do Council members provide statewide representation?	<u>Y</u> N
(10) Is the Council Chairperson elected from among the voting members of the Council by the voting members of the Council or the Governor, pursuant to section 705(b)(5) of the Act?	<u>Y</u> N

4.2 Placement of the SILC (Sec. 705(a) of the Act; 34 CFR 364.21(a)(2))

The SILC is not established as an entity within any State agency, including the DSU, and is independent of the DSU and all other State agencies. Following is a brief description of the legal status and placement of the SILC:

The Florida Independent Living Council, Inc., is a not-for-profit 501(c)3 corporation. The administrative offices for FILC, Inc. staff are independent of both DSUs and the Council has full autonomy in meeting its federal mandates. Funding is contracted through the Division of Vocational Rehabilitation through the Florida Department of Education.

4.3 Plan for Provision of Resources to the SILC (SILC Budget) Sec. 705(e) of the Act; 34 CFR 364.21(i))

- (a) In conjunction with the DSU, the SILC will prepare a Resource Plan Attachment 2 (SILC Budget) for the provision of resources, cash or in-kind, including staff and personnel, rent, supplies, telephone expenses, travel, and other expenses (e.g., child care, personal assistance services, and compensation to a member of the SILC, if the member is not employed or must forfeit wages from other employment, for each day the member is engaged in performing SILC duties) that will be necessary to carry out the functions of the SILC during the term of the SPIL.
- (b) The SILC will be responsible for the proper expenditure of funds and the use of resources it receives under the SILC Budget.
- (c) No conditions or requirements are included in the SILC Budget that will compromise the independence of the SILC.
- (d) While assisting the SILC in carrying out its duties under the SPIL, staff and other personnel assigned to the SILC under the SILC Budget will not be assigned duties by the DSU or other agency or office of the State that would create a conflict of interest.

Attachment 2 - Describes the SILC Budget.

Attachment 2 must include a description of the SILC's Budget for the three years covered by the SPIL, including the sources of funds, staff, supplies, and other resources made available under parts B and C of Chapter 1, Part C of Title I of the Act, and from State and other public and private sources, that may be necessary for the SILC to carry out its responsibilities under section 705 of the Act and the SPIL. No conditions or requirements may be included in the SILC's resource plan that may compromise the independence of the SILC. The SILC is responsible for the proper expenditure of funds and use of resources that it receives under the resource plan. The SILC shall, consistent with State law, supervise and evaluate its staff and other personnel as may be necessary to carry out its functions. While assisting the SILC in carrying out its duties, staff and other personnel made available to the SILC by the DSU may not be assigned duties by the designated State agency or DSU, or any other agency or office of the State, that would create a conflict of interest.

Section 5: Designation and Responsibilities of the State Unit(s)

5.1 Designation (Sec. 704(c) of the Act; 34 CFR 364.22)

The State unit(s) designated to receive, account for, and disburse funds, and provide administrative support services is (are):

Division of Vocational Rehabilitation

5.2 DSU Responsibilities under the SPIL (Sec. 704 (c) of the Act; 34 CFR 364.22)

The DSU:

- (a) Receives, accounts for, and disburses funds received by the State under Chapter 1 in accordance with the SPIL;
- (b) Provides administrative support services for the part B State IL services (SILS) program and the part C, Chapter. 1, CIL program in a case in which the program is administered by the State under section 723 of the Act;
- (c) Keeps such records and affords such access to such records as the Secretary finds to be necessary with respect to the programs; and
- (d) Submits the SPIL and such additional information or provides such assurances as the Secretary may require with respect to the programs.

Section 6: Staff and Staff Development

6.1 Personnel Administration (Sec. 12(c), 704(m) of the Act; 34 CFR 364.23)

- (a) The staff of service providers will include personnel who are specialists in the development and provision of IL services and in the development and support of CILs.
- (b) To the maximum extent feasible, each service provider will make available 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 tape, and who apply for or receive IL services under the SPIL; 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 the SPIL.

6.2 Personnel Development (Sec. 12(c), 704(m) of the Act; 34 CFR 364.24)

The State assures that service providers will 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 program will emphasize improving the skills of staff directly responsible for the provision of IL services, including knowledge of the IL philosophy.

6.3 Affirmative Action (Sec. 704(m)(2) of the Act; 34 CFR 364.31)

All recipients of financial assistance under Chapter 1 take affirmative action to employ and advance in employment qualified individuals with disabilities on the same terms and conditions required with respect to the employment of individuals with disabilities under section 503 of the Act.

6.4 Nondiscrimination (34 CFR 76.500)

No individual will, on the basis of race, color, national origin, gender, age, or disability be excluded from participation in, denied the benefits of, or otherwise be subjected to discrimination under this SPIL.

Section 7: Financial Administration

7.1 General Provisions (Sec. 704(m)(3) of the Act; 34 CFR 364.34)

All recipients of financial assistance under Chapter 1 will adopt such fiscal control and fund accounting procedures as may be necessary to ensure the proper disbursement of and accounting for funds paid to the State under Chapter 1.

7.2 Source of State Funds (Sections 712(b)(2) and 7(7)(C) of the Act; 34 CFR 365.12, .13 and .14, 367.11, .42)

- (a) The one to nine non-Federal share of the cost of any project that receives assistance through an allotment under part B, Chapter 1 will be provided in cash or in kind, fairly evaluated, including plant, equipment, or services, consistent with 34 CFR 365.13, .14, and .15.
- (b) For the purpose of determining the Federal share with respect to the State, expenditures by a political subdivision of the State will, subject to regulations prescribed by the Secretary, be regarded as expenditures by the State.
- (c) The State may not condition the award of a grant, subgrant, or contract under part B, Chapter 1 or a grant, subgrant, or assistance contract under part C, Chapter 1 on the requirement that the applicant for the grant or subgrant make a cash or in-kind contribution of any particular amount or value to the State. Furthermore, an individual, entity, or organization that is a grantee or subgrantee of the State, or has a contract with the State, may not condition the award of a subgrant or subcontract under part B, Chapter 1 or part C, Chapter 1 on the requirement that the applicant for the subgrant or subcontract make a cash or in-kind contribution of any particular amount or value to the State or to the grantee or contractor of the State.

7.3 Financial Record Keeping (Sec. 704(m)(4)(A) and (B) of the Act; 34 CFR 364.35)

All recipients of financial assistance under Chapter 1 will:

- (a) Maintain records that fully disclose--
 - (1) the amount and disposition by each recipient of the proceeds of such financial assistance,
 - (2) the total cost of the project or undertaking in connection with which such financial assistance is given or used, and
 - (3) the amount of that portion of the cost of the project or undertaking supplied by other sources; and
 - (4) compliance with the requirements of Chapter 1 and 34 CFR Parts 364, 365, 366, and 367.

(b) Maintain such other records as the Secretary determines to be appropriate to facilitate an effective audit.

7.4 Access to Financial Records (Sec. 704(m)(4 & 5) of the Act; 34 CFR 364.37)

All recipients of financial assistance under Chapter 1 will afford access to the Secretary and the Comptroller General or any of their duly authorized representatives, for the purpose of conducting audits and examinations, to all records maintained pursuant to section 7.3 of the SPIL immediately above and any other books, documents, papers, and records of the recipients that are pertinent to the financial assistance received under Chapter 1.

7.5 Financial Reports (Sec. 704(m)(4)(D) of the Act; 34 CFR 364.36)

All recipients of financial assistance under Chapter 1 will submit reports with respect to records required in section 7.3 of the SPIL, as the Secretary determines to be appropriate.

Section 8: State Administration of Part C Program³

NOTE - THIS SECTION APPLIES ONLY TO §723 STATES.

8.1 Funds Earmarked to Support CILs (Sec. 723(a) of the Act; 34 CFR 366.32)

In the second fiscal year preceding fiscal year 2000, the general operations of CILs in the State were supported by the following amounts of earmarked funds⁴:

³ (a) To meet the requirements in section 723(a)(1)(B) and (2) of the Act, a **§723 State must submit this section of the SPIL for approval each year** subsequent to the first year of approval to administer the Part C, Chapter 1 program.

(b) Unless the provisions of Attachment 8 are materially changed, submittal of this Section shall not constitute a material revision of the SPIL requiring public hearings or State review under SPIL Section 3.

⁴ The amount of State funds earmarked by a State to support the general operation of centers does not include: (1) Federal funds used for the general operation of centers; (2) State funds used to purchase services from a CIL, including State funds used for grants or contracts for personal assistance or skills training; (3) State attendant care funds; (4) Social Security Administration reimbursement funds; or (5) funds used to support an entity that does not meet the definition of a CIL in section 702 of the Act, e.g. funds used to support a single disability (If a State or outlying area is operating a CIL pursuant to section 724 of the Act,

State Funds _____ Federal Allotment _____

8.2 State Applies to Administer Part C Program (Sections 704(h) and 723 of the Act; 34 CFR 366.32)

The director of the DSU hereby applies to award grants or assistance contracts to eligible agencies in the State that comply with the standards and assurances set forth in section 725 of the Act. The grants are to be made from the funds allotted to the State for the planning, conduct, administration, and evaluation of CILs under part C, Chapter 1.

8.3 State administers funds in compliance with §723 (Sec. 704(h) of the Act; 34 CFR 366.32, .35)

- (a) If Section 8.2 is answered in the affirmative, the director of the DSU awards grants or assistance contracts under section 723 of the Act to any eligible agency that was awarded a grant under part C, Chapter 1 on September 30, 1993, unless the director makes a finding that the agency involved fails to comply with the standards and assurances set forth in section 725 of the Act or the director of the DSU and the chairperson of the SILC, or other individual designated by the SILC to act on behalf of and at the direction of the SILC, jointly agree to another order of priorities.
- (b) The State assures that any assistance contracts issued to eligible agencies will not add any requirements, terms, or conditions to the assistance contract other than those that would be permitted if the assistance contract were a subgrant consistent with grants issued by RSA under section 722 of the Act.
- (c) In administering the part C, Chapter 1 program, the State will not enter into any procurement contracts with CILs to carry out section 723 of the Act.

8.4 Monitoring and Oversight. (§§704(h), 723(g) and (h) of the Act; 34 CFR 366.38)

The State assures that periodic and on-site compliance reviews will be conducted to determine CIL compliance with section 725 of the Act as described in Attachment 3.

Attachment 4 describes the policies, practices, and procedures, which comply with section 723 of the Act, that the State utilizes for awarding continuation and new grants.

the funds used to support this CIL can be considered "earmarked" for purposes of section 723(a)(1)(A)(i) of the Act.) or residential facility cannot be counted as earmarked funds.

Section 9: Information on Use of Part B, Chapter 1 Funds

9.1 Use of §711 funds in support of §713 purposes (Sec. 713 of the Act; 34 CFR 365.1)

Part B Funds are to be used only for any one or more of the following purposes (all optional):	Directly by DSU	<u>Grant/Contract</u>	Dollar Amt.
(a) Fund the resource plan for SILC (SPIL Section 4).	Y <u>N</u>	<u>Y</u> N	\$68,335
(b) Provide IL services to individuals with significant disabilities	Y N	Y N	
(c) Demonstrate ways to expand and improve IL services.	Y N	Y N	
(d) Support the general operation of CILs.	Y <u>N</u>	<u>Y</u> N	\$875,000
(e) Support activities to increase capacity of public or nonprofit agencies and organizations and other entities to develop comprehensive approaches or systems for providing IL services.	Y N	Y N	
(f) Conduct studies and analyses, gather information, develop model policies and procedures, and present information, approaches, strategies, findings, conclusions, and recommendations to Federal, State, and local policy makers to enhance IL services.	Y N	Y N	
(g) Train individuals with significant disabilities, individuals providing services to individuals with significant disabilities, and other persons regarding IL philosophy.	Y N	Y N	
(h) Provide outreach to unserved or underserved populations, including minority groups and urban and rural populations.	Y N	Y N	

Attachment 1 describes the uses, objectives, and amounts of part B, Chapter 1 funds supporting each purpose.

Section 10: Outreach (Sections 704(l) and 713(7) of the Act; 34 CFR 364.32)

The State reaches out to populations, including minority groups and urban and rural populations, that are unserved or underserved by the programs funded under Chapter 1.

Attachment 1 describes the steps that will be taken regarding outreach to populations, including minority groups and urban and rural populations, that are unserved or underserved by the programs funded under Chapter 1. Attachment 1 also describes populations designated for special outreach efforts and the geographic areas in which they reside (e.g., individuals with significant disabilities residing on land controlled by American Indians.)

Section 11: Extent and Scope of IL Services (Sections 7(30), 704(e) and 713(1) of the Act; 34 CFR 364.43)

- (a) Attachment 1 describes all IL services to be provided under the SPIL to meet the objectives in Section 10.
- (b) The State provides the following IL core services to individuals and groups of individuals with significant disabilities:
 - (1) Information and referral;
 - (2) IL skills training;
 - (3) Peer counseling (including cross-disability peer counseling); and
 - (4) Individual and systems advocacy,
- (c) The IL core services may be provided directly by the DSU, or through grant or contract. While the State is required to provide these services, it may fund the services using funds from any source, e.g., part B or part C, Chapter 1, State funds, or other funds.

(d) In addition, the State provides the following IL services to individuals and groups of individuals with significant disabilities⁵:

- (1) Counseling services, including psychological, psychotherapeutic, and related services;
- (2) 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);
- (3) Rehabilitation technology;
- (4) Mobility training;
- (5) Services and training for individuals with cognitive and sensory disabilities, including life skills training, and interpreter and reader services;
- (6) Personal assistance services, including attendant care and the training of personnel providing such services;
- (7) Surveys, directories, and other activities to identify appropriate housing, recreation opportunities, and accessible transportation, and other support services;
- (8) 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;
- (9) Education and training necessary for living in the community and participating in community activities;
- (10) Supported living;
- (11) Transportation, including referral and assistance for such transportation;
- (12) Physical rehabilitation;

⁵ Insert an "X" or check mark for each IL service that will be made available. It is not necessary to insert any projection of numbers of consumers to be served.

- (13) ___ Therapeutic treatment;
- (14) X Provision of needed prostheses and other appliances and devices;
- (15) X Individual and group social and recreational services;
- (16) X 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;
- (17) X Services for children with significant disabilities;
- (18) X 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;
- (19) X Appropriate preventive services to decrease the need of individuals with significant disabilities assisted under this Act for similar services in the future;
- (20) X Community awareness programs to enhance the understanding and integration into society of individuals with disabilities; and
- (21) X Such other services as may be necessary and not inconsistent with the provisions of this Act.

Attachment 1 describes the extent and scope of the IL services identified above, and how they meet the State's objectives for IL. The attachment also describes any arrangements of grants or contracts made by the State for providing such services.

Section 12: Eligibility, Records, IL Plans, and Notice of Client Assistance Program

12.1 Eligibility for Receipt of Services (Sections 7(15)(B) and 703 of the Act; 34 CFR 364.51)

- (a) Individuals with significant disabilities are eligible for services provided under the SPIL.
- (b) To be eligible, an individual is one:
 - (1) Who has a significant physical, mental, cognitive, or sensory impairment;
 - (2) Whose ability to function independently in the family or community or whose ability to obtain, maintain, or advance in employment is substantially limited; and

- (3) For whom the delivery of IL services will improve the ability to function, continue functioning, or move towards functioning independently in the family or community or to continue in employment.

12.2 Consumer Service Record (Sections 704(m)(4)(B), 725(c)(8) of the Act; 34 CFR 364.53)

A consumer service record (CSR) will be maintained for each consumer of services, other than information and referral, which will contain documentation that the consumer is eligible or ineligible for IL services, the information required for the annual performance report under 34 CFR 364.36 and 366.50(h), and an IL plan (ILP) or a waiver as described in SPIL Section 13.3.

12.3 IL Plans (Sec. 704(e) and 725(c)(14) of the Act; 34 CFR 364.52)

The State provides IL services under Chapter 1 to individuals with significant disabilities in accordance with an ILP 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.

12.4 Notice about the Client Assistance Program (Sections 20 and 704(m)(1) of the Act; 34 CFR 364.30)

All recipients of financial assistance under Chapter 1 that provide services to individuals with significant disabilities advise those individuals seeking or receiving IL services about the availability of the Client Assistance Program under section 112 of the Act, the purposes of the services provided under such program, and information on the means of seeking assistance under such program.

Section 13: Statewide Network of Centers for Independent Living (CILs)

13.1 Network Design (Sec. 704(g) of the Act; 34 CFR 364.25(a))

The State has developed a design for the establishment of a statewide network of CILs that comply with the standards and assurances set forth in section 725 of the Act.

13.2 Unserved and Underserved Areas and Priorities (Sec. 704(g) of the Act; 34 CFR 364.25(b))

(a) The network design:

- (i) identifies unserved and underserved geographic areas of the State; and
- (ii) includes an order of priority for the establishment of CILs in those areas.

Attachment 1 describes the design for the establishment of a statewide network of CILs and the order of priorities for the establishment of new CILs. This attachment should be visionary. If the State believes the network is complete, the attachment describes the network, including how it complies with §725 of the Act. future plans for expansion of the network to serve populations that are currently unserved or underserved.

Section 14: Communication, Cooperation, and Coordination (Sections 704(I-k) of the Act; 34 CFR 364.26 and .27)

- (a) The State takes steps that maximize the communication, cooperation, coordination, and working relationships among --
 - (1) the SILS program, the SILC and CILs; and
 - (2) the DSU, other State agencies represented on the SILC, other councils that address the needs of specific disability populations and issues, and other public and private entities, including Indian Tribal Councils, determined to be appropriate by the SILC.
- (b) The State ensures that services funded under Chapter 1 will complement and be coordinated with other services to avoid unnecessary duplication with other Federal, State, and local programs, including the IL program for older individuals who are blind funded under Chapter 2 of Title VII.
- (c) The State coordinates Federal and State funding for CILs and SILS.

Section 15: Evaluation Plan (Sec. 704(n) of the Act; 34 CFR 364.38)

- (a) The State establishes a method for the periodic evaluation of the effectiveness of the SPIL:
 - (1) In meeting the State's objectives and timelines for meeting those objectives;
 - (2) In the satisfaction of individuals with disabilities; and
 - (3) In meeting the objectives established in Section 9 of the SPIL.
- (b) The State agrees to annually submit the results of DSU and SILC evaluation activities, including the most recent evaluation of Title VII consumer satisfaction, with the annual performance report to RSA.

ATTACHMENT 1: Goals, Missions and Objectives

The mission of the Independent Living Program in the state of Florida is to actively promote a philosophy of independent living, including the philosophy of consumer control, peer-support, self-help, self-determination, equal access, and individual and system advocacy, in order to maximize opportunities for individuals with disabilities, and the integration and full inclusion of individuals with disabilities into the mainstream of society.

The goals and objectives jointly developed by the Florida Independent Living Council, Inc. (FILC, Inc.), the Division of Vocational Rehabilitation, the Division of Blind Services and the Centers for Independent Living (CILs) reflect this mission statement by providing the opportunity for people with disabilities in the state of Florida to maximize their opportunities to allow for integration and full inclusion in the mainstream of society in all aspects of daily life. The Council, in conjunction with the Centers and the DSUs, has decided that the focus for the next three years will include transition from nursing homes to community-based living, increasing awareness of barriers that block full inclusion and outreach to unserved and underserved populations in the state.

All Centers for Independent Living will provide the four core services and, as appropriate, a combination of any other services to assure full integration and inclusion for people with disabilities in the state of Florida. Advocacy in the areas of transportation, housing, education and employment will be top priorities during this three-year State Plan.

Florida Division of Blind Services (FDBS)

To promote a philosophy of Independent Living (IL), which includes consumer control, peer support, self-help, self-determination, equal access, and individual and system advocacy, to maximize the leadership, empowerment, independence and productivity of individuals with visual disabilities and the integration and full inclusion of individuals into the mainstream of American society.

The goal of this project is to provide independent living services for blind and visually impaired individuals who reside in the state of Florida. The current funds utilized to operate this program come from three sources. Independent Living Title VII Chapter 2, Independent Living "Part B" and State General Revenue. The funds are used to assist these individuals with adjustment to blindness and to enable them to live more independently in their homes and communities with a maximum degree of self-direction. The Florida Division of Blind Services (DBS) has established three objectives for the Independent Living Adult Program (ILAP).

GOAL 1: Initiate and/or facilitate systemic and/or institutional change at the local, state and national levels to advance the philosophy and mission of independent living as it applies to persons with disabilities.

Objective 1A: To positively influence public and personal attitudes of persons with disabilities.

STRATEGY: Education: Develop a presentation/seminar program that embodies this philosophy.

STRATEGY: Develop a position paper that supports this growth in philosophy.

BENCHMARK: October 2005, October 2006

The Council will develop a presentation/seminar to educate persons with disabilities to focus on their positive abilities. Positive, proactive, self-determined persons with disabilities can educate policy makers and the general public on the possibilities of this population. A position paper will be developed to provide positive information about persons with disabilities to facilitate a shift in the thinking of others to be more accepting and provide more opportunities.

Objective 1B: To increase technology access for persons with disabilities.

STRATEGY: Create at least one position paper on the need for accessible technology for persons with disabilities and how accessible technology affects education and employment.

STRATEGY: At least two speaking engagements addressing accessible technology.

BENCHMARK: October 2005, October 2006

Educating policy makers at the state and local level through at least one position paper and two speaking engagements on the importance of assistive technology for persons with disabilities, it is hoped the importance of the need for assistive technology will be seen and thus provided on a more consistent basis.

Objective 1C: To increase the knowledge of policy makers, persons with disabilities and the general public on how the lack of resources affect programs and services that support independent living.

STRATEGY: Deliver at least two speaking engagements addressing the lack of resources for programs serving persons with disabilities.

BENCHMARK: October 2005, October 2006

Through speaking engagements, the Council will educate persons with disabilities, policy makers and the general public on how the lack of resources affect persons with disabilities.

Responsibility:	FILC Advocacy Committee, FILC members, FILC staff, DSU staff, CIL staff, boards of directors and consumers.
Timeline:	September 2007
Evaluation:	Quarterly report to FILC

Cost: \$10,000.00 over three years
Funding: Resource Plan

The FILC Advocacy Committee will be taking the lead on the above listed objectives (1A-1C) and will report at each quarterly meeting on progress. The cost will cover travel expenses for speaking engagements and the development of the presentation on the positive abilities of persons with disabilities.

Objective 1D: To improve the Council's visibility by developing and implementing the Council's Image Plan to enhance the public acceptance of a cross disability philosophy.

STRATEGY: Provide at least twelve reports to policy makers and others on the activities of the Council.

BENCHMARK: October 2005, October 2006

Responsibility: FILC Outreach Committee, FILC members, FILC staff, DSU staff, CIL staff, boards of directors and consumers.
Timeline: September 2007
Evaluation: Quarterly report to FILC
Cost: \$10,000.00 over three years
Funding: Resource Plan

An Image Plan was developed and unanimously accepted by the Council. The Outreach Committee is responsible for the implementation of this plan and will provide at least 12 reports to policy makers and others to highlight the activities of the Council. At this time the Council is working to get this activity underwritten so the cost may be minimal. It is important that the Council become better known throughout the state of Florida in order to promote the independent living philosophy and the public acceptance of a cross disability philosophy.

Objective 1E: To continue the development and implementation of the Standards and Definitions to assure the Centers for Independent Living services are being recorded accurately.

STRATEGY: Review and/or revise the Standards and Definitions tool used during the technical assistance exchange visits with the Centers for Independent Living.

BENCHMARK: October 2005, October 2006

Responsibility: FILC Evaluation Committee, FILC members, FILC staff, DSU staff, CIL staff, boards of directors and consumers.
Timeline: September 2007
Evaluation: Quarterly report to FILC
Cost: \$10,000.00 over three years

Funding:

Resource Plan

The Standards and Definitions have been developed through a cooperative effort between the Council, CILs and the DSUs. These standards and definitions are currently being used to provide technical assistance exchange visits with the CILs. Each team conducting the visits will provide input to the Evaluation Committee regarding use of this tool and will revise as needed. The Evaluation Committee will report quarterly to the full Board on progress. Costs will cover travel expenses for members attending the CIL visits.

FDDBS will:

- Provide independent living services by contracting with Community Rehabilitation Programs for services to individuals who are blind or have a substantial visual impediment.
- Conduct activities that will increase services to individuals who are blind and underserved or who are members of groups that have been traditionally under-represented including members of racial or ethnic minority groups; and
- Conduct activities to help improve public understanding of the problems of older individuals who are blind and visually impaired.

The target population is individuals, who are blind or have severe visual impairments that substantially impede their ability to live independently.

The core services provided through the Independent Living Adult Program (ILAP) can include:

- Information & Referral Services
- Independent Living Skills Training
- Adjustment to Blindness Counseling
- Advocacy Training
- Low Vision Services
- Public Education & Information
- Prevention & Restoration

During the three-year period of the plan, the expected benefits resulting from these activities include:

- A 5% increase in the number of blind individuals that will successfully achieve objectives of a FDDBS plan of service;
- Increase by 5% the number of eligible individuals who are underserved members of groups that have been traditionally under-represented , including members of racial or ethnic minority groups;

- Each of FDBS 12 districts will conduct community education activities that will increase public understanding of problems faced by blind/visually impaired individuals.

MANDATORY AREA 1 – SCOPE AND INTENT OF INDEPENDENT LIVING SERVICES

To assure quality independent living services and to promote the independent living philosophy, the Council will work with the Centers for Independent Living to provide independent living services to persons with disabilities in the state of Florida according to the needs and priorities in each area of the state. Such independent living services will include the High School/High Tech program sponsored by the Able Trust, supported employment, ticket-to-work activities and other services determined by the CIL consumers.

In Mandatory Area 1, the goals and objectives of the Council reflect the needs of persons with disabilities in Florida in the areas of transportation and affordable accessible housing. If these two needs are not met, persons with disabilities will be unable to access education or employment.

GOAL 1-1: To increase awareness of barriers adversely impacting the lives of persons with disabilities.

Objective 1-1A: To improve the transportation system in order to support independent living in the areas of, but not limited to, employment, education, healthcare and recreation.

- a) To increase the knowledge of policy makers, agency personnel, the media and others on the importance of transportation as a fundamental necessity of independent living.

STRATEGY: Create at least one position paper to be distributed to various entities.

STRATEGY: Deliver at least two speaking engagements to educate the above named entities.

BENCHMARK: September 2005, September 2006

- b) To increase transportation funding as it applies to persons with disabilities.

STRATEGY: Research and collect data and educate policy makers as to the need for sufficient transportation for persons with disabilities.

BENCHMARK: October 2005, October 2006

- c) To change the philosophy of the transportation system to the “money follows the person” philosophy.

STRATEGY: Research and collect data to educate policy makers regarding the cost effectiveness of individuals making their own transportation decisions.

BENCHMARK: October 2005, October 2006

Responsibility: FILC Advocacy Committee, FILC, CILs
Timeline: September 2007
Evaluation: Quarterly Report to FILC
Cost: \$10,000.00 over three years
Funding: Resource Plan

Transportation is mentioned at every public forum as a major barrier to employment, education and other life activities for persons with disabilities. The Council decided to focus on educating policy makers, agency personnel and others on the impact of the lack of affordable, accessible public transportation on persons with disabilities. Through speaking engagements and the development of a position paper it is hoped that this will lead to an increase in funding. The Council will also encourage the adoption of “the money follows the person” philosophy embraced by MiCASSA to determine the cost effectiveness of persons with disabilities making their own transportation decisions.

The FILC Advocacy Committee will be responsible and will report quarterly on its progress. The cost listed will cover research and data collection as well as travel expenses for speaking engagements over the next three years.

Objective 1-1B: To increase the availability of accessible affordable housing for persons with disabilities by promoting the enforcement of current housing laws and regulations that provide for accessible affordable housing.

- a) Through collaboration with the Advocacy Center, the Governor’s ADA Working Group, Real Choice Partnership, Florida Housing Coalition, Florida Supportive Housing Coalition, the Florida Housing Finance Corporation, Housing Authorities, policy makers and other housing organizations to educate the above listed entities on the application of laws and regulations concerning affordable accessible housing.

STRATEGY: Research and collect data to educate the above referenced entities regarding the need for affordable accessible housing for persons with disabilities.

STRATEGY: Create at least one position paper addressing the need for affordable accessible housing for persons with disabilities.

STRATEGY: Deliver at least two speaking engagements to educate the entities.

BENCHMARK: October 2005, October 2006

Responsibility: FILC Advocacy Committee, FILC, CILs

Timeline:	September 2007
Evaluation:	Quarterly Report to FILC
Cost:	\$5,000.00 each year
Funding:	Resource Plan

The lack of affordable accessible housing is another major barrier for persons with disabilities in moving into the community. A lack of enforcement of current housing laws has helped create this shortage. By educating those enforcing the laws, it is hoped more affordable accessible housing will become available so that persons with disabilities can live in the least restrictive setting possible.

The FILC Advocacy Committee will be responsible for assuring that a position paper is developed and that speaking engagements will be arranged for educational purposes. A report will be made quarterly regarding progress. Costs again will include speaking engagement travel expenses.

FDDBS

FDDBS will use vendor contracts with 17 Community Rehabilitation Programs (CRP) and a network of 12 district offices statewide to provide comprehensive services to blind and visually impaired persons. The DBS contract efforts target blind/visually impaired individuals who are members of groups that have traditionally been identified as under-represented, including members of racial or ethnic minority groups.

The FDDBS State Office carries out the administrative activities associated with service delivery for the ILAP. The Program Specialists assigned assist the SILC with the development of the State Plan, develop agency policies and procedures consistent with the Federal and State requirements, and provide guidance and training statewide to the 12 district's staff.

Florida will collaborate with the network of 17 community rehabilitation providers who along with the district specialist provide the core rehabilitation services. We will use a combination of service delivery methods, including comprehensive center-based, satellite, and itinerant service models. Where contracting CRP's provide only center-based training, FDDBS Rehabilitation Specialists will supplement services with home-based instruction.

Both FDDBS and the contract providers' deliver outreach services, with priority given to underserved areas and populations. Activities may include participation in community affairs, minority churches, senior and cultural centers, specialized local projects, and through various media outlets.

Participation in community awareness activities by FDDBS and providers will utilize several venues such as; civic groups, public meetings, Chamber of Commerce, health fairs, conferences, and interagency collaborations. Specialized print and Brailled materials, radio interviews, televised public services announcements, internet web sites are also utilized to inform the general public and targeted sectors, of blindness and the needs of blind individuals.

The community capacity activities by FDBS and providers vary depending on local needs. Common collaboration include partnerships with Centers for Independent Living, Transportation Disadvantaged providers, Councils on Aging, regional resource teams, United Way, minority religious affiliations, civic groups, peer support groups, and other interagency networks often associated with accessibility issues. Participation includes monthly meetings, special task force committees, offering in-service training, and providing information and referrals.

MANDATORY AREA 2: COOPERATION, COORDINATION AND WORKING RELATIONSHIPS AMONG VARIOUS ENTITIES

The Florida Independent Living Council, Inc. has been developing working relationships with various entities to strive to meet the mission of full inclusion for people with disabilities in the state of Florida. Examples of the Council's commitment to continue this cooperation are to continue a close relationship with all the Centers for Independent Living throughout the State. Each committee of the Council has a representative from the Florida Association of Centers for Independent Living (FACIL) as a voting member. Other activities such as the Grassroots Forum, held every two years, include representatives from state agencies, Councils and other disability-related organizations, as well as people with disabilities on the Steering Committee and the other committees to plan the Forum. The Council has representation on the Florida Rehabilitation Council (FRC) and the Division of Blind Services Rehabilitation Council. The Council has representation on the Florida Real Choice Partnership to develop the Olmstead Plan in Florida and has been very involved in the Voter Education Task Force through the Department of State. As other issues of importance arise, the Council will become actively involved and assure that the Centers for Independent Living are involved as well.

GOAL 2-2: To increase collaboration on local, state and national levels.

Objective 2-2A: Increase collaborative efforts to provide voter education, registration and the development of resources that support the participation of persons with disabilities in the entire electoral process.

- a) Increase the knowledge of political candidates through the Secretary of State, Supervisors of Elections and other affiliated entities in making campaigns accessible.

STRATEGY: Provide the above referenced entities with accessibility guidelines to be distributed to individual candidates.

BENCHMARK: January 2005, January 2006

b) Increase the knowledge of individuals with disabilities to self advocate for accessibility in the electoral process.

STRATEGY: Provide training in electoral process accessibility.

BENCHMARK: January 2005, January 2006

c) Increase collaboration with the League of Women Voters, Supervisors of Elections, Secretary of State, civic organizations, et al, to identify and provide accommodations needed by persons with disabilities to facilitate the voting process.

STRATEGY: Educate the above named entities to the need for providing accommodations. Make recommendations regarding options for accommodations.

BENCHMARK: January 2006

Responsibility:	FILC Planning Committee, FILC Outreach Committee
Timeline:	January 2006
Evaluation:	Quarterly Report to FILC
Cost:	\$20,000.00 over three years
Funding:	Resource Plan

Voter education is of utmost importance to persons with disabilities in order for their voices to be heard. In order to assure persons with disabilities are provided access to the entire electoral process, the Council will focus on collaboration, communication and developing working relationships with all entities involved in this process. Political candidates will be provided accessibility information, persons with disabilities will be educated to self advocate for accessibility and all entities and persons with disabilities will be educated on providing appropriate accommodations.

The FILC Planning Committee will report quarterly on progress. Costs will cover the development of needed materials to distribute and the provision of education to the above listed entities.

Objective 2-2B: Increase collaboration with the DSU to conduct a series of biennial technical assistance exchange visits with each CIL to enhance the CILs performance.

STRATEGY: Conduct at least eight technical assistance exchange visits with the CILs.

BENCHMARK: September 2005

Responsibility:	FILC Evaluation Committee, FILC staff, DSU staff, CIL staff, boards of directors and consumers.
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Timeline: September 2007
Evaluation: Quarterly report to FILC
Cost: \$10,000.00 over three years
Funding: Resource Plan

FILC Evaluation Committee members will participate in the technical assistance exchange visits with the DSU. At least two members of the Council will participate in these visits for the purpose of developing best practices that can be shared with the other CILs. Those attending the reviews will report quarterly to the full Council. The cost listed will cover travel expenses for those attending the visits.

Objective 2-2C: Increase accessible, affordable housing in order to promote the transition for people with disabilities to community based living in the State of Florida.

STRATEGY: Collaborate with other agencies and organizations (Real Choice Partnership, etc.) to increase the number of people, statewide, that transition out of nursing homes by 5% over established baseline.

BENCHMARK: December 2005

Responsibility: CILs/FILC, Inc. Planning Committee
Timeline: September 2007
Evaluation: Progress Report at Quarterly Meeting
Cost: \$2,000
Funding: Resource Plan

In accordance with the Olmstead decision and the IL philosophy of consumer control, the Council, DSUs and Centers determined that a high priority for the upcoming Plan would be transitioning people with disabilities to community-based living if that is the person's choice.

The Council has used Part II of the 704 reports from the CILs to establish a baseline of consumers transitioned from nursing homes in fiscal year 2002-2003 and will continue to collect this date annually. This data will allow the Council to determine if a 5% increase has been achieved over the three-year period.

Strategies to achieve this goal will include, but will not be limited to, collaboration with the Real Choice Partnership, Brain and Spinal Cord Injury Program (BSCIP), Florida Housing Coalition, Florida Supportive Housing Coalition, Florida Housing Finance Corporation, etc.

The FILC Planning Committee will be responsible for reporting on the progress of this goal at each quarterly meeting. The cost will cover the collaborative efforts of the Council.

MANDATORY AREA 3: OUTREACH TO UNSERVED OR UNDERSERVED POPULATIONS OR MINORITY GROUPS

The Florida Independent Living Council, Inc. realizes that many disability populations are unserved and underserved in the state of Florida. Through collaborative efforts with these populations and the organizations and agencies that serve them, the Council will support and develop strategies to reach these populations by conducting the biennial Florida Grassroots Forum, depending on available funding. A Needs Assessment/Consumer Satisfaction Survey will be distributed to determine what populations require outreach strategies.

Goal 3-3: Through collaborative efforts, support and develop outreach strategies to unserved and underserved persons with disabilities, including but not limited to minorities, homeless, deaf-blind, rural/urban populations and youth, et al.

Objective 3-3A: Continue to conduct a statewide Grassroots Forum, contingent on continued funding, and increase participation of minorities, homeless, deaf-blind, rural/urban populations and youth overall by 5% above the 2002 baseline for these populations that attended the 2004 Grassroots Forum.

- a) Increase funding from other entities to support the ongoing efforts of the Grassroots Forum.

STRATEGY: Identify grant opportunities, sponsorships, and to increase fiscal participation.

BENCHMARK: October 2006

- b) Encourage council members and CIL Directors to enlist one sponsor each for the Grassroots Forum.

STRATEGY: Compose and distribute a formal letter with information packets from the FILC president to CIL directors and FILC members.

BENCHMARK: October 2006

Responsibility:	FILC Outreach Committee, FILC Development Committee, FILC, CILs
Timeline:	May 2006
Evaluation:	Quarterly Report to FILC

Cost: \$25,000.00 each year
Funding: Resource Plan

The Florida Grassroots Forum is a biennial event that brings together persons with disabilities throughout the state to strategize on ways to remove barriers on the local, state and national levels. By reaching out to organizations and agencies serving populations that are currently unserved and underserved by the independent living program it is hoped these populations will become more involved in this effort. The Council is committed to this event and will be working to sustain it by increasing sponsorships and identifying grant opportunities.

The Outreach Committee is responsible for Objective 3A. The chairs of the Outreach Committee and the Development Committee will report to the full Council quarterly, on progress made toward reaching this objective. The cost for 3 years will be \$5,000 to cover the submission of grant proposals, contacting other agencies and organizations and to develop and distribute the information packets to increase the support of the Grassroots Forum.

Objective 3-3B: Conduct a Needs Assessment/Consumer Satisfaction Survey and/or cost benefit analysis to assure that independent living services are being provided to unserved and underserved populations.

STRATEGY: Distribute, analyze and report data received from the Needs Assessment/Consumer Satisfaction Survey and/or cost benefit analysis if funds are available.

BENCHMARK: October 2006

Responsibility: FILC Outreach Committee, FILC Evaluation Committee, FILC, CILs
Timeline: September 2007
Evaluation: Quarterly Report to FILC
Cost: \$25,000.00 for three years
Funding: Resource Plan

The Council has developed a Needs Assessment/Consumer Satisfaction Survey to be distributed to consumers of the CILs. Upon funding being available to distribute, analyze and report the data from these surveys, the Council will better be able to ascertain the needs and satisfaction of CIL consumers.

The FILC Outreach Committee is responsible for the above listed objectives and will report quarterly regarding progress. The cost will cover the distribution, analysis and reporting of data.

Objective 3-3C: Increase the awareness of other agencies and organizations to the need for services for youth transitioning from state sponsored programs.

STRATEGY: Develop a position paper regarding the lack of services for youth with disabilities leaving foster care.

BENCHMARK: November 2005

Responsibility:	FILC Advocacy Committee, FILC, CILs
Timeline:	September 2007
Evaluation:	Quarterly Report to FILC
Cost:	None
Funding:	

During a public forum a comment was made regarding the lack of services for youth with disabilities leaving foster care. Upon reaching age 18 this population is in danger of becoming homeless due to the lack of supports. The Council felt it was important to educate other agencies and organizations on the need for continued support for those transitioning out of foster care.

The FILC Advocacy Committee is responsible for reporting quarterly to the Council on any progress made. There is no cost associated with this objective.

ATTACHMENT 2: Plan for the Provision of Resources to the SILC (SILC Budget)
(34 CFR 364.21(i) and (j))

In accordance with the Rehabilitation Act, as amended, the Florida Department of Education/Division of Vocational Rehabilitation (FDOE/DVR) will contract with the Florida Independent Living Council, Inc. (FILC, Inc.) from an Innovation & Expansion (I&E) grant in the amount of \$344,726 for Fiscal Year 2004 – 2005 as requested and justified by FILC, Inc. In FY 2005 – 2006 and FY 2006 – 2007 respectively, DOE/DVR will continue to contract with FILC, Inc. for I&E grant funds in the amount of \$361,962 and \$380,060 as requested and justified by FILC, Inc., unless further negotiations are necessary due to changes in circumstances for the Council.

The resources for the agreed upon SILC budget are transferred to the SILC through a contract signed by the SILC and the Designated State Units (DSUs).

The Division of Blind Services will continue to provide an amount equal to 17% of its Part B appropriation for administrative costs of the SILC.

The Council may recommend to the DSU, allocation of Title VII, Part B funds granted to the DSU when the above resources are not sufficient to carry out its responsibilities under the approved State Plan for Independent Living. The DSU will approve such a recommendation to the full extent as permitted by applicable law when the recommendation is within the parameters of the responsibilities of the Council and Title VII and this SPIL.

The FILC, Inc. will be responsible for the proper expenditure of funds under this resource plan (Attachment 2, Page 2). The funds will be used for staff, meeting and travel expenses and other costs associated with Council operations, including its office expenses.

The Council will approve the operating budget.

FILC, Inc. shall, consistent with State law, hire, fire, supervise and evaluate its staff and other personnel as may be necessary to carry out its functions.

Florida Grassroots Forum funds are solicited and obtained through sponsorships from state agencies and other organizations that provide services to persons with disabilities, grant applications, registration fees and vendor fees. These funds are utilized to provide scholarships to attendees and to pay for other expenses associated with this event. Any funds not used to directly support the Grassroots Forum event are used to continue work on solutions to issues on the local level. This would include providing training to delegates, travel and other legitimate expenses in meeting the goals established at the Forum.

ATTACHMENT 3 – Evaluation Plan (34 CFR 364.21(g) and 364.38)

Describes the methods used for these evaluations including projected Designated State Unit (DSU) evaluation activities, SILC monitoring, review, and evaluation activities and plans for the evaluation of consumer satisfaction.

Evaluation Plan

The Florida Independent Living Council, Inc., (FILC, Inc.) has established an Evaluation Committee to monitor progress on all goals and objectives to be achieved, including associated timelines, under the State Plan for Independent Living (SPIL) and the Cooperative Agreements with the Designated State Units (DSUs).

The purpose of all the evaluation activities is to determine if independent living services in the State are meeting the needs of consumers and to recommend changes, that if implemented, maximize the independence of individuals with significant disabilities.

Committees with the responsibility for a specific objective in Attachment 1 will report quarterly to the full Council on its progress towards meeting the objective. The Evaluation Committee will use the information received from the Committee Reports to continually monitor progress on all goals and objectives.

Upon acceptance of the State Plan for Independent Living by the Rehabilitation Services Administration (RSA), the Evaluation Committee will develop a tool to use as an attachment to the 704 Report.

In monitoring the implementation of the SPIL, the Evaluation Committee will:

- a) Develop the questions, evaluative criteria and procedures for monitoring and evaluation of SPIL implementation for each year, based on the timelines and evaluation guidelines presented in Attachment 1;
- b) Conduct monitoring and evaluation activities as planned;
- c) Analyze the information and present an evaluation report to the Council;
- d) Analyze Parts I and II of the 704 reports received from the previous year to present a report of its analysis to FILC, Inc., specifically information to evaluate the goals and objectives in Attachment 1; and
- e) The Council will facilitate the collection and analysis of consumer satisfaction data

Consumer satisfaction data will be gathered from each of the Centers for Independent Living in the State on an annual basis. The survey will be distributed to all attendees at the Florida Grassroots Forum held biennially, contingent on funding for this event. This data will be compiled to determine the needs of people with disabilities in the State currently utilizing independent living services and to determine how to reach individuals with significant disabilities in the State not using services offered by the Centers for Independent Living.

Consumer satisfaction data will be collected through a consumer satisfaction survey, if funds permit, being conducted by the Council in order to assure that independent living services are being offered throughout the state of Florida. The CIL 704 Reports data will continue to be used for consumer satisfaction, as well.

In evaluation of the annual 704 Report the Evaluation Committee will:

- a) Receive DSU sections of the Annual Report, reviewing them and making recommendations as appropriate; and
- b) Receive any recommendations for revision of the SILC report sections, reviewing them and revising as appropriate.

This information will be utilized by the Council to:

- a) Develop and submit the Council's portion of the 704 report; and
- b) Develop the agendas of standing Council committees (Advocacy, Development, Evaluation, Finance, Outreach and Planning) and associated activities.

The DSU will monitor and provide technical assistance to the Centers under scope of the Social Security and Part B contracts that a CIL receives from the DSU. Each CIL will receive an on site monitoring and technical assistance visit once every two years. In monitoring the Centers for Independent Living, the DSU IL Program Coordinator, will be accompanied by representatives from FILC, Inc. This practice will give FILC representatives an opportunity to become more familiar with the services provided at a given Center. The FILC, Inc. representatives will be responsible for reporting to the Evaluation Committee as well as the Full Council so these visits may be used to continue improving independent living services in the State.

In order for the Florida Independent Living Council, Inc., to monitor its implementation of the requirements outlined in Title VII of the Rehabilitation Act of 1973, as amended, the Council has adopted the SILC Congress Standards and Indicators. These Standards and Indicators were developed and approved at the 2004 SILC Congress. This document will be reviewed annually to assure the Council continues to meet its mandates under the law.

Division of Blind Services

The Division of Blind Services performs formal on-site reviews of all service providers of independent living services on a biennial basis. Cumulative quarterly reports from providers enable the Division to track provider progress in meeting contractual performance goals and negotiate associated contracts annually.

The Division of Blind Services balances Federal requirements for streamlining with State requirements for promoting provider accountability at the individual consumer level. The Council is kept apprised of developments in this regard.

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SECTION 13: Statewide Network of Centers for Independent Living (CILs)

Members of the Florida Independent Living Council, Inc. and representatives of the DSUs and the Centers for Independent Living met and agreed on the following priorities for providing independent living services on a statewide basis. All existing Centers, as well as newly established Centers, will provide the core services required by the Rehabilitation Act and other services needed in the area of the State they serve. Three new Centers for Independent Living have recently been funded to serve three areas of the State that are unserved and underserved.

All existing Centers as well as newly created Centers for Independent Living will be required to meet the definition of a Center for Independent Living as stated in Section 702 and the standards and assurances set forth in Section 725 of the Rehabilitation Act, as amended. Other services identified by consumers in the area may be provided within the constraints of available funding. All new CILs will be monitored by the DSU and the Rehabilitation Services Administration (RSA), as are the existing Centers for Independent Living.

Below are the definitions established by the Florida Independent Living Council, Inc., the DSUs and the Centers for Independent Living for a new Center for Independent Living. Minimum funding amounts, including all State and Federal funding sources, are listed for opening new Centers for Independent Living in order for the Council and the DSUs to determine, when new money becomes available, the best use of the increased funds to meet the needs of persons with significant disabilities in the state of Florida.

CURRENT CENTERS FOR INDEPENDENT LIVING

1. CIL of Northwest Florida – Pensacola, Florida
2. Ability 1st – Tallahassee, Florida
3. Disability Resource Center – Panama City, Florida
4. CIL of North Central Florida – Gainesville, Florida
5. Independent Living Resource Center of Jacksonville – Jacksonville, Florida
6. Independent Living Resource Center of Volusia – Daytona Beach, Florida
7. CIL in Central Florida – Winter Park, Florida
8. CIL of West Central Florida – Lakeland, Florida
9. Space Coast CIL – Cocoa Beach, Florida
10. Self-Reliance CIL, Inc. – Tampa, Florida
11. Caring & Sharing CIL - Largo, Florida
12. Suncoast CIL – Sarasota, Florida
13. CIL of Southwest Florida – Fort Myers, Florida
14. Coalition for Independent Living Options, Inc. – West Palm Beach, Florida
15. CIL of Broward – Tamarac, Florida
16. CIL of South Florida – Miami, Florida
17. CIL of the Florida Keys – Islamorada, Florida

DEFINITIONS

CENTER FOR INDEPENDENT LIVING

Meets the definition of a Center for Independent Living stated in Section 702 and all standards and assurances in Section 725 of the Rehabilitation Act, as amended.

NEW CENTER FOR INDEPENDENT LIVING (State Funds)

- Must provide Core services as defined by the Rehabilitation Act
- Staffed with a minimum of two staff, at least one full time
- If mentored by an existing CIL, has an advisory board with two voting members on mentoring CIL board
- If mentored by an existing CIL, will meet all standards to become a full CIL within a minimum of one but not to exceed five years

FUNDING DETERMINATIONS (Includes all State and Federal funding sources)

To open a new Center for Independent Living: \$150,000

When the Center for Independent Living becomes its own fiscal agent, meets all the standards and assurances and meets the definition of a Center for Independent Living and is approved by the Florida Independent Living Council, Inc. and the DSU: \$250,000

PRIORITY FOR FUNDING FOR CENTERS FOR INDEPENDENT LIVING

The DSU, FILC, Inc. and the Network of Centers have agreed that all new Part C funds coming to the State of Florida will be divided between the existing Centers according to the agreed upon Part C state formula approved for year 2004-2005, to be revisited annually (see attached Part C Funding Formula). It was also agreed that for the present time the existing Network of Centers is complete and all new Part C funds will be used to enhance the current network.

The DSU, FILC, Inc. and the Network of Centers have agreed that Part B and SSA funds will be divided between the existing Centers according to the agreed upon Part B and SSA state funding formula agreed upon for the duration of this State Plan. (See attached Part B and SSA Funding Formula)

SSA AND PART B FUNDING FORMULA

Process of Arriving at the Formula

- Network of CILs in the state were given an opportunity to construct and discuss various ways of running the formula for the Part B and Social Security Administration Reimbursement (SSA) dollars.
- The Network of CILs voted on a formula to recommend to the Funding Formula Task Force established by the Florida Independent Living Council (FILC). The formula that was recommended from the Network of CILs to the Funding Formula Task Force passed with 11 yeas and 3 nays within the Network.
- The Funding Formula Task Force within FILC was asked to review the formula proposed by the Network of CILs and come up with other formula alternatives by communicating with other states.
- After reviewing the various alternatives, the Funding Formula Task Force of FILC recommended that the formula proposed by the Network of CILs would be the one proposed to the entire Council for a vote.
- On February 20, 2004, FILC passed the formula unanimously with one member abstaining from the vote.
- This is the process that was used for arriving at the formula that would be used to allocated Part B and SSA funds.

SSA Formula Explained and Part B Formula Explained

The SSA formula and the Part B formula are combined into one formula process. The state starts by allocating the SSA funds first in Steps 1 through 13 and then allocates the Part B funds in Steps 14 thorough 18. The various steps and the process within each step are described below.

For the purposes of the formula the \$3,500,000 that have been received from SSA funds in previous fiscal years is to be used as a base threshold amount for SSA funds. If the CILs received funds equal to or less than \$3,500,000 in SSA, the formula would be run as follows.

Step 1 (Start of SSA allocation)

Determine how many counties within the state have a population of less than 100,000 individuals. For each county allocate \$2500 for a sparsity factor. Multiply the number of counties that would require a sparsity factor (population less than 100,000) by \$2500 to determine how much in total funds would be needed for the Sparsity Factor. Deduct the total amount needed for sparsity from the total funds. The remaining amount is what is available for distribution under Step 6.

Step 2

Take the population of each county from the most recent official Census and multiply it by 19.3% to come up with an estimated Most Significantly Disabled Population within a given county. The 19.3% figure was arrived at from the 2000 Census for the state of Florida.

Step 3

Multiply each county's Most Significantly Disabled Population (Step 2 results) by the Cost Differential Rate (CDR) that is published by the Florida Department of Education. This rate accounts for the difference in the cost of living between counties within the state. The numbers arrived at from this calculation is each county's adjusted population figure after the Most Significantly Disabled Population and the Cost Differential Rates between the counties is taken into consideration.

Step 4

Match up each CIL with the counties in the state that they are charged with serving. Add the adjusted population numbers (Step 3 results) for the counties that fall in the service area for a given CIL. This will give you the adjusted population for a given CIL.

Step 5

Add the adjusted population for all the CILs to arrive at a total adjusted population figure for the state.

Step 6

Take each CIL's adjusted population figure (Step 3 results) as a percentage of the total adjusted population for the state (Step 4 result). This will give you each CIL's adjusted population as a percentage of the total adjusted population for the state.

Step 7

Take the percentage for each CIL (Step 5 results) and multiply by the funds available for distribution after sparsity funds were reserved in Step 1.

Step 8

If a CIL serves a county that receives a sparsity factor (\$2500) under Step 1, add these funds to the total received for the CIL under Step 6. If a CIL serves 2 or 3 counties that receive a sparsity allocation, they will receive \$2500 for each county.

Step 9

The amount arrived at for each CIL after Step 7 is the SSA allocation for each CIL if the total SSA funding is less than or equal to \$3,500,000.

Step 10

Determine if there are additional SSA funds above the \$3,500,000 base threshold. If there are, continue with Step 10 and Step 11, if not skip to Step 12.

Step 11

Per the approved formula, any new SSA monies above the \$3,500,000 will be distributed with 50% of the increase divided evenly among all CILs and the remaining distributed per the formula driven percentages in Step 5.

Step 12

Add the funds received as a result of Step 10 to the SSA allocation that was arrived at for the CILs under Step 7. The sum of Steps 7 and Step 10 for each CIL will result in

the total allocation figure for each CIL if there are SSA funds beyond the threshold of \$3,500,000.

Step 13 (End of SSA allocation)

Add the result from Step 9 (If SSA funds are less than \$3,500,000) or Step 11 (If SSA funds are more than \$3,500,000) to the Part C allocation that each CIL will receive.

Step 14 (Start of Part B allocation)

After Step 12 determine which CILs do not have the required base funding of \$250,000. To those CILs, allocate funds from the Part B grant that would boost their funding to the minimum of \$250,000. This is the Part B allocation for the Centers that need a boost.

Step 15

Subtract the Part B funds that were used in Step 13 to bring centers up to the minimum of \$250,000 from the total Part B Grant.

Step 16

Remaining Part B dollars (Step 14 result) are what is remaining to be distributed to the Centers that did not receive a boost in Step 13.

Step 17

Establish adjusted population percentages for the Centers that did not need a boost as was done in Steps 2 through Step 5. Do not include the population figures for the CILs that received a boost under Step 13.

Step 18 (End of Part B allocation)

Multiply the adjusted population percentages under Step 16 to the remaining Part B funds in Step 13. This is the Part B allocation for each CIL that did not receive a boost.

SECTION 3.4 – Summary of Comments Received at the Public Hearings

JACKSONVILLE, FLORIDA

February 25, 2004

10:00 a.m. – 12:00 p.m.

On Wednesday, February 25, 2004, The Independent Living Resource Center of NE Florida (ILRC) hosted a public forum on behalf of the Florida Independent Living Council (FILC). The meeting began at 10:05am. The purpose of this forum was to inform the disability community of the three year State Plan. It was noted that once the committee has finalized the draft it will be distributed to all Council member for a vote at the March 2004 quarterly meeting in order to meet the June 30, 2004 deadline for submission to RSA. Matt Motko, Executive Director of the ILRC provided the welcome and introduction. He made reference to the SPIL accommodations format availability. He introduced the FILC members in attendance who were Dr. Donna Sumlin and Chip Wilson.

Dr. Donna Sumlin, President of FILC, explained that FILC is a statewide council, with members who are appointed by the governor. FILC's purpose is to promote independent living opportunities for persons with disabilities throughout the state of Florida. The primary responsibility of the council is to meet its various legal obligations that are covered in both the Federal Rehabilitation Act of 1973 and Florida Statutes, Chapter 413, Part II. She made reference that the draft presented today was only the meat of the plan. Pam Hodge, Director of Program and Services for ILRC served as the Facilitator of the forum. She made reference to the attachments provided during sign in which included the goals, missions and Objectives of the 3-year agenda. (Copies attached)

Pam Hodge opened the floor to questions after she completed reading each goal.

At 10:20a.m. Mr. Bell from NE Florida Adapt mentioned the need to educated the policy makers about the formula that distributes funding among the state. It appears to be based on general population not the population of people with disabilities.

Pam Hodge mentioned that we were here to discuss the state plan not funding issues.

Chip Wilson, FILC representative, mentioned that the funding formula base has changed from 10% to 19.8% of the population of people with disabilities. Dan O'Connor, ILRC staff member, raised a question about how FILC planned to carry out the strategy to educate the public and consumers focusing on PWD's and what the setting would be.

Dr. Donna Sumlin, FILC President stated to "remember these strategies are just the basics. They do not include the narrative. We understand that other things need to be done. Our goal is to focus on image and perception. This will be a major overtaking".

Dan O'Connor, ILRC staff member, questioned if we as CIL's will encourage and include consumer in presentations.

Dr. Donna Sumlin, FILC, replied by saying "we should try what ever is possible".

Chip Wilson provided an example of law changes in California where women who are in their 3rd trimester of pregnancy can utilize disabled parking spaces. He stated that we all know pregnancy is not a disability.

Dan O'Connor, ILRC staff member, asked what is a white paper?

Chip Wilson stated that it is a position paper. "The technical Assistance Exchange Team who rotates members, the DSU and other council member who visit CIL's will use it. They are responsible for checking into the CIL plans, book keeping, the CIL's compliance as RSA requires. The position paper will also be used as a best practice paper. One should be completed for all 17 CIL's in the State. This center has done this and can be used as a model center".

Dr. Donna Sumlin stated "we plan to visit 9 centers this year".

Matt Motko, Executive Director, asked "Is the best practice paper available?"

Chip Wilson, FILC stated no not this year.

Dr. Donna Sumlin said that Standard Definitions are provided for the 704 report that are completed by the CIL's. Although a checklist exist, not all CIL's define them the same. The current standards are counting apples to apples and oranges to oranges. By developing definitions for CIL's by looking at available stand similar to CARF. We will become more unified and CILS will start to report properly.

Pam Hodge asked for more questions. No questions so she began reading Goal #2. Upon completion she asked for questions.

A member of the audience asked what is a DSU?

Chip Wilson, FILC answered "Designated State Unit".

Angie Miller, ILRC staff member, asked what kind of presentations are we going to give to make them aware of housing needs?

Dr. Donna Sumlin, "presentations to other organizations that are not familiar with Independent Living. When you say IL, people do not have a clue, since several organizations have that in their name. We will explain what IL really means. What we are talking about referring back to Title 7 of the Rehab Act. We are pushing to get on the agenda to spread the word. We will us Board members and individuals at CIL's. It will be a joint effort of collaboration and communication. This will start at FILC and go on down. Staff-Board-Consumers."

Matt Motko, Executive Director, "Is the cost to complete each objective planning to be funded and distributed to CIL's?"

Dr. Donna Sumlin, FILC President, stated that "the funds will be coming out of your resource plan. Part B tell us how much. This will come out of your budget. There are times where we will chip in if the funds are available. We will work with you".

Dan O'Connor, ILRC staff member, commented that "Transportation", It seems we are saying the system is broke. Is there a plan to change the system and involve Legislatures? Possibly changing how it operates in each county? Could we have a better quality of service? We have a big bugged down system. Is there a possible different method be used?

Chip Wilson, FILC representative, "The money will follow the person. That way they control the use of XYZ transportation and not ABC transportation. Yes, consumers should be able to choose. Possibly educate policy makers and help them to see the light".

Dr. Donna Sumlin, FILC President, "We need to help consumers to get on CTC Boards. Get consumer involved! They have very few on their Board". Audience asked what is the CTC?

Dan O'Connor, ILRC staff member, stated that he was on the committee, which is the Community Transportation Coordinating Board. They are responsible for making sure transportation services follow the law.

Pam Hodge, Facilitator, Read goal #3. Then opened the floor to questions by stating that she wanted to make a comment, and asked if that was ok?

She mentioned that we (ILRC) could use more education and training on Mental Illness. We (ILRC) are seeing more and more of that disability come through our door for services.

Dr. Donna Sumlin, FILC President, stated that "she is also on the Florida Rehabilitation Council and they are looking into services for the mentally ill. There is a push. We have (FRC) have only existed a little while. In fact one meeting was last week in Tallahassee. Since I am the Chair/President of FILC, I automatically serve on the Board of FRC. VR services are also being addressed under this task force."

Pam Hodge, Facilitator, asked could they clarify what the term "transition" means?

Dr. Donna Sumlin, FILC President, mentioned youth transition. There is talk of one additional core service. "Transition" example youth between the ages of 22-24 do not get a vocational plan.

Pam Hodge, Facilitator, "Youth Transition. Some consumers get left behind because they do not have developmental disabilities".

Donna Sumlin, FILC President, "I will be meeting with an aid next month. Government does not see any other disability groups. That's a real problem".

Germon Vivos, consumer stated "I went through rehab, and they could not help me. I came here to this center and I got more from them and their website. I finally came up with the answer on my own".

Donna Sumlin, FILC President, "Contact Loretta Costin, Director of VR. She will be interested in what you have to say".

Chip Wilson, FILC representative, "The groups mentioned in this goal are not all inclusive. So many groups out there are underserved. Mental Illness will be included".

Dan O'Connor, ILRC staff member, asked to include deaf blind. "We need to do more outreach on how to assist this population. They have needs and we need to know all the resources".

Chip Wilson, FILC representative, asked "the population, where is the most located"?

Dan O'Connor, ILRC staff member, "St Augustine, Florida, School for the deaf and blind. I am not sure of the population. I know the needs are there. I know they need special interpreters. I have heard the Helen Keller Center is good".

Chip Wilson, FILC representative, Do they use tactile interpreters?

Dan O'Connor, ILRC Staff member, "I am not sure".

Angie Miller, ILRC Staff member, "The people who work at CIL's need to make situations known to FILC to make you all aware of the need for certain types of disabilities".

Dr. Donna Sumlin, Example, a lawsuit in Florida for \$180,000,000,000.00. The services are broader in range for Developmental Disabilities; they have the attention of the Governor. The needs survey has been developed, we are looking for consumer satisfaction surveys. All the data has not been analyzed. Funding is an issue. FRC states that they will need more than \$100,000 to complete the survey.

Steve Briant, ILRC staff member, reported that Baker County has a need to complete a needs survey. It is being handled through the Department of Health. Hopefully, to be completed by May or June 2004.

Dr. Donna Sumlin, FILC President, "we have an evaluation committee".

Steve Briant, ILRC staff member, stated "this may not be a full blown survey".

Dr. Donna Sumlin, FILC President, "give us what you got"

Germon Vivos, consumer, "Tell me about the white papers? Will they come out of Tallahassee?"

Dr. Donna Sumlin, FILC President, It is a collaborative effort and will come out of FILC.

Germon Vivos, consumer, "What about the position, employment?"

Dr. Donna Sumlin, FILC President, "It means taking a stand on issues".

Pam Hodge stated "it summarizes data collected".

Dr. Donna Sumlin, FILC President, "We all just can't go out and say things as members of FILC. We need position papers on all topics. We need to know how FILC stands on different issues. We use this so all members can be on the same page".

Pam Hodge, Facilitator, "Are there any other questions?"

Edgardo Kiesel, consumer, "How do I contact Chip Wilson?"

Chip Wilson, FILC representative, "my number is 904-693-9302".

Dr Donna Sumlin, FILC President, "he is chair of the planning committee".

Germon Vivos, “I have a copy of the quality of life report- which flags needs in Jacksonville. It reports that 70% of people with disabilities are unemployed. JCCI, gave that to me.” (www.jcci.org)
With no further comments or suggestions, the forum ended at 10:40 a.m.
Notes submitted by Pam Williams, ILRC, Director of Administration and Finance
2/25/2004

TALLAHASSEE, FLORIDA
Wednesday, March 3, 2004
5:30 p.m. – 7:00 p.m.

Mr. Tom Hemphill, Ability 1st Director, opened the forum by introducing the facilitator, Casie Moran and the Executive Director of the Florida Independent Living Council, Inc., Beth Schultz. Mr. Hemphill explained the purpose of the Forum and then turned the floor over to Ms. Moran.

There were no immediate questions so Ms. Moran began by going through each of the goals and objectives.

GOAL ONE, OBJECTIVE 1A

Who exactly is responsible for assuring the goals are met since so many groups are listed under responsibilities? Ms. Schultz explained that the first name listed was ultimately responsible for assuring the goal or objective is met.

There was a concern on the number of position papers being used in the plan. The Council needs to look at the big picture and how to affect consumers statewide.

The word “initiate” should be changed since this is being done by the CILs.

Not sure why a position paper will help, need more action included.

Should include the general population.

GOAL ONE, OBJECTIVE 1B

Add training to include disability awareness and how to communicate with people with disabilities.

Need to look at the benchmarks in order to assure goals and objectives are being met in a timely manner.

Should be more specific on venues of accessible technology such as voting, phone systems, etc.

GOAL ONE, OBJECTIVE 1C

Another objective was suggested that would ensure parity of funding for various disabilities. Another objective could be to make people with disabilities aware of the services available.

Add in IL philosophy.

GOAL ONE, OBJECTIVE 1E

Research should be done on the uneven distribution of funds. These are two different educational streams.

GOAL TWO, OBJECTIVE 2A

It was suggested that a seminar on best practices for transportation systems be provided. County, state and city systems collide in Tallahassee.

It's not just transportation but curb cuts, sidewalks, etc., the infrastructure.

Change "educate" to "persuade" under a).

The grassroots needs to get involved to get things changed. Personal stories are always better.

One strategy is to get the grassroots to work on this, the scope of the system is also important.

The plan is heavy on position papers but not results.

Should make attempts toward changing the system.

Don't see a lot of organizing by grassroots.

We need to create opportunities and improve accessibility. Need tangible results that RSA can see.

GOAL THREE

There is ongoing debate that IL funds are distributed by population only and pits rural against urban CILs.

FILC and the CILs collaborated on a funding formula. Tallahassee covers a large rural area which is begrudged by the larger cities.

Under this goal it was felt that the deaf population, people with mental disabilities and crime victims with disabilities should be added.

An additional objective was suggested to goal 3 and is attached.

MANDATORY AREA 3: OUTREACH TO UNSERVED OR UNDERSERVED POPULATIONS OR MINORITY GROUPS

Goal 3: Through collaborative efforts, support and develop outreach strategies to unserved and underserved persons with disabilities, including but not limited to minorities, homeless, deaf-blind, rural/urban populations, crime victims with disabilities, and youth, et. al.

Objective 3 C: Conduct outreach activities with the criminal justice system that result in increased supports and services for people with disabilities that are victims of crime or become disabled as a result of being a victim of crime.

MIAMI, FLORIDA
Saturday, March 6, 2004
11:00 a.m. – 2:00 p.m.

The Public Forum regarding Recommendations for the FILC 2004-2007 Year State Plan commenced on March 6th, 2004 from 11:00 a.m. to 2:00 p.m. at the Center for Independent Living of South Florida. Staff members at the center chose to hold three separate rooms so that consumers and stakeholders would all have an opportunity to voice their recommendations for State Plan in the communication format of their choice: English, Spanish, and American Sign Language.

I. Scope and Intent of Independent Living Services

***Employment**

1. Funding - There should be some sort of incentive for hiring people with disabilities. In many cases, people with disabilities apply for jobs and are never called back or given an equal opportunity to work. Give potential employers information on tax incentives for hiring persons with disabilities.
2. Monitoring - There should be some sort of program to monitor whether people with disabilities are treated the same as people who do not have disabilities in the work place. In several cases people with disabilities may be given a job but not given raises like other employees. Often people with disabilities are not given any straight answer as to why they are treated this way.
3. Funding - To allow persons who work in places such as: banks and phone companies (public services) to answer telephones also using TTY for people with hearing disabilities.
4. Funding – To provide more training and counseling programs that teach persons with disabilities to be more aware of their abilities and how to sell themselves to employers

***Education**

1. Funding for Teachers and ASL Certification - There needs to be more teachers that are ASL certified so that each student that is deaf is allowed more one on one help and attention from their teachers. By having teachers that are deaf, they can understand more of the concerns of deaf students.
2. Funding - Maintain funding to support the Life Long Learning programs that assist individuals with disabilities to acquire education, independent living skills, peer counseling, socialization skills, transportation, i.e. If these programs are available to individuals with disabilities they can assist them in living as independently as possible and for others to maintain there educational level.

3. Assistive Technology - There needs to be more assistive technology within school systems so that deaf students have an equal opportunity to participate in all of the activities that the hearing students do.

- more web cameras for computers so that ASL students can talk through an interpreter (video relay)

4. Funding - To provide more money for programs that educate persons with disabilities. Increase the amount of staff and resources so that more persons with disabilities can benefit from the training skills that Centers for Independent Living provide.

5. Resources - Many people with disabilities are not aware of their needs. There should be some way to compile information regarding the different needs of individuals with different types of disabilities. The resources that are available in the community for persons with disabilities should be more visible and easily accessed by persons with disabilities.

***Technology**

1. Funding – needs to be allocated for individuals with disabilities so that they have access to the latest technology. Programs are needed to ensure accessibility to technology through schools and educational programs/centers that are solely for people with disabilities.

2. Funding – for the state to review and create more web-sites that are accessible by individuals with disabilities. Individuals who are illiterate would also like to have access to these sites. A suggestion would be to have websites that are vocal and read out the information for viewers; this could also be useful for persons who are blind. It is of utmost importance that all technology be accessible to individuals with disabilities.

***Advertisement**

1. Funding –To increase the public’s awareness and respect for the Disability Community, Centers for Independent Living need funding to publicize their existence and services to the community. Public school systems also need to know where to refer individuals with disabilities for services, especially when they are ready to graduate or leave the school system.

2. Outreach - To alert media outlets about the use of pejoratives when referring to persons with disabilities. The media needs to become informed that these uses of language affect the stereotyping of persons with disabilities and imparts upon them second class citizenship in the community.

II. Cooperation, Coordination and Working Relationships Among Various Entities

***Transportation**

1. Funding - for more public transportation because there are not enough buses and trains to serve all areas. It is important for people with disabilities who want to live independently to have access to a transportation system that caters to people with disabilities being that all persons with disabilities do not qualify for STS.
2. Funding - Many Special Transportation Services and public transportation drivers need to take some sort of sensitivity training to become more aware of sensitivity issues. The trip would be more tolerable/enjoyable for persons with disabilities if the drivers only improved their attitudes and tardiness (drivers are always late).
3. Funding – to make public and para-transit vehicles available with extended hours of service and more accessible for individuals with disabilities.
3. Funding – There needs to be better maintenance of public transportation servicing persons with disabilities. There have been several instances where drivers do not pick up potential riders because of broken or malfunctioning equipment.
4. Assistive Technology - There needs to be some sort of devices that flash and show announcements such as: the train/bus is late, broken or full for people that are deaf.
5. Monitoring – Special Transportation Service offices need to be monitored so that they deliver the services they promise. STS users often find themselves waiting for hours (up to 3 and 4 hrs) for pick-ups. Reservations are sometimes cancelled or changed without the consent of the person requesting them. When it comes to STS, there needs to be more emphasis on customer service.
6. Funding - For persons with disabilities to easily acquire public transportation bus passes if they do not qualify for STS. Many persons with disabilities can not afford to take the bus to all of the places they may need to go. Not being able to travel to needed destinations such as physician's offices, grocery stores and jobs does not promote independent living. There also needs to be more benches for persons waiting for the buses that can not stand for prolonged periods of time.

***Housing**

1. Funding - There needs to be more financial resources for persons with disabilities who are trying to obtain housing. The waiting lists for Section 8 are too long and are often closed. There needs to be some sort of emergency shelter services designated for persons with disabilities who find themselves homeless.
2. Interpreter - There needs to be some sort of interpreting services for people with hearing disabilities within Section 8 offices and other means of obtaining housing assistance. Many people that are deaf have lost their opportunities to receive these financial resources because they were promised an interpreter that never showed up.

3. Funding - to help build affordable and accessible housing for individuals with disabilities. There should be programs designated for persons with disabilities that will allow them to purchase or own their own home.
4. Monitoring – for landlords/contractors who receive county or federal funds for rent payment to be investigated to see if they deliver their accessibility construction and or reconstruction promises.
5. Funding – to mandate that contractors/landlords construct the appropriate amount of accessible housing units.

***Group Home/Nursing Home**

1. Interpreters – There needs to be more interpreters within group and nursing homes so that consumers and persons who are deaf can have open lines of communication to express themselves and their needs.
2. Assistive Technology - there needs to be more assistive technology so that people who are deaf can participate in the same activities that the hearing do. In many or most cases people that are deaf are isolated from the larger groups of the hearing. This is unfair because it does not allow people who are deaf to get to know and socialize with most of the people that they live with.

III. Outreach to Unserved or Underserved Populations or Minority Groups

***Interpreters**

1. Funding - There needs to be some sort of funding set aside to pay interpreters to motivate them to come out to the locations where they are needed. If this is not possible, public places of business such as: DCF, SS office, Courtrooms and Medical offices should be equipped with web cameras so that people who are deaf can communicate through an interpreter (video relay).

***Social Security Office/DCF/
Court System/ Hospitals/Dr.'s offices**

1. Interpreter - When people who are deaf make their appointments to meet with these services, they often request to have an interpreter present but when they arrive, the interpreter is not there. We suggest that there be some sort of mandate where people who are deaf can bring their own interpreter and the facility (SS office, DCF, and other entities) be responsible for paying for the interpreting services.
2. Programs - There needs to be some sort of disability sensitivity training for people who work in the above organizations so that they can be more sensitive and aware of issues concerning persons with disabilities.

***Police/Fire Rescue**

1. Assistive Technology - If a person who is deaf is out on the street and there is an emergency or accident, there is no way for this person to contact 911. One of the most commonly used forms of communication for people that are deaf is to use a pager or email. Currently emails and pagers can not contact 911 during times of crisis. When 911 dispatchers receive distress calls, they transfer the information into a computer. If the operators are already in front of a computer, why not give them internet access so that 911 emails and pager messages can be received.

2. Assistive Technology - In public places such as hotels and restaurants, there needs to be some sort of flashing light that alerts people who are deaf that there is a fire or emergency. Most homes and apartment buildings must have properly working smoke detectors that alert family members with a loud buzzing sound. People that are deaf should have the same opportunity to feel comfortable and safe in their home in case of a fire by having some sort of flashing lights to alert them of a fire or emergency.

3. Assistive Technology – Many hotels, pay phones and public places do not have TTY. These public places/phones should be equipped with TTY. In public places such as hotels, there is no way of knowing that someone is knocking at the front door. Hotels should be equipped with a device that flashes when someone is knocking or ringing the doorbell.

WINTER PARK, FLORIDA
Wednesday, March 10, 2004
3:00 p.m. – 5:00 p.m.

FILC Representatives: Wendi Herzman, Marion Neal
CILCF Facilitator: Jeannette Gassie, Program Director
4 Public attendees

Public Forum held to get input on the three year State Plan for Independent Living.

Three Goals:

1. Increase accessible affordable housing in order to promote the transition for people with disabilities to community based living in the state of Florida
2. Promote and encourage collaboration with other councils, agencies and organizations on a statewide basis to increase awareness of barriers adversely impacting the lives of people with disabilities in the State of Florida.
3. Support and develop outreach strategies to minorities, homeless, rural populations and youth with disabilities through collaborative efforts.

Process for arriving at these three goals was read to attendees (Attachment 1)

Comments

- Transportation Disadvantaged usually has pretty good attendance by local committees and consumers at meetings. See many of the same people at these meetings – would like to see different groups attend.
- Ticket to Work was explained. Goodwill does monthly orientation to the program.
- CILCF does yearly disability awareness days in service area and also did one at the Oviedo Mall about three months ago.
- Quarterly mailing to businesses about being “TDD relay friendly” and we keep list of participating businesses to promote to our consumers.
- FILC website: www.flailc.org
- Communication: missing a very simple area of communication that could have a big impact- business newsletters, agency newsletters, churches, etc. Mr. Neal commented that this would be good for their Outreach Committee.
- Affordable housing: Question about voucher restrictions. Must stay in the county issued for one year and then voucher goes with consumer. Must stay in Florida.
- Money for State Plan comes from RSA, VR.
- Mr. Neal asked if work about Grassroots Forum is getting out. Attendees assured him that being discussed at disability group’s meetings. This CIL is getting the word out.
- Would like to see more involvement-need fresh ideas. More proactive people, not “moaners and groaners.”
- Attendees asked if FILC representatives would return with updated progress.

- Question about drugs in public housing. Recommended contacting the sheriff's department for suggestions. Call HUD directly, as housing organization must follow rules of HUD. Will do an inspection. Asked if housing owner can live out of state- yes, but must have manager locally.

LARGO, FLORIDA

Thursday, March 11, 2004

3:00 p.m. – 6:00 p.m.

Doug Towne and Wendi Herzman were present as members of the Florida Independent Living Council, Inc.

Mr. Towne explained that the purpose of the public forum was to take comments on the proposed 2004-2007 State Plan for Independent Living.

Goal 1

Recommendation: promote classes, create effective programs for autism. Special training needed for school districts.

Goal 2

Florida needs 508 type law.

85% of homeless are people with disabilities.

70% unemployment rate.

Goal 3

Mr. Towne explained tax exemptions and the need to review.

Real Choice Project: need to educate policy makers so understand the need for people with disabilities to live in the community. A coalition is needed.

People need to get registered to vote so voice is heard-legislators want to hear from constituents.

Mr. Towne explained the Grassroots Forum and the importance of getting involved.

There was a discussion on the prohibition of lobbying. SILCs are supposed to be systems change advocates according to the Rehabilitation Act but if you get money from a state contract in Florida can't lobby. Federal law should trump state law. 501(c)3's can spend 20% of their budget on lobbying.

Disability groups need to join together rather than having a lot of small groups.

Need to be proactive rather than reactive.

No firm numbers on consumers using transportation-recommendation: do a survey of consumers.

Asked if there was any documentation on advocacy for children and adults transitioning into the workforce.

Someone asked why no press was present. Mr. Towne stated they were invited but there was little interest.

A report by the Pointer Institute on discrimination mentioned nothing about discrimination of people with disabilities.

Need specific language to cover enforcement of the ADA and 504 enforcement.

Transportation – trying to get changes made locally. Hard to get inter county transportation.

There is a problem with housing for people on SSI and SSDI.

Florida is among the worst in housing-need accessibility too.

Need to provide housing voucher applications on the web.

Have to use a voucher in two months and can't find housing in that amount of time.

People need help getting through the housing maze.

Objective 2C Voting

19.3% of population is disabled. 25% in Pinellas County.

1,000 people with visual impairments in Pine City.

Those with mental health issues declared incompetent, guardians should let them vote and those in institutions.

Need to add therapeutic foster care-those turning 18 are placed in community and then become homeless.

Transition programs are set up to fail so the child fails.

Florida needs "Money Follows the Person" concept. The federal government gets it but Florida doesn't.

Need to create a group for parents, especially single parents and parents with disabilities. This is an underserved group. Judges are taking children away from parents with disabilities. Professionals don't have the knowledge to deal with children with disabilities.

Objective 3B Needs Assessment

No comments.

Mr. Towne stated any additional could be sent to Caring & Sharing CIL. Ms. Herzman stated that written comments could be sent to the Florida Independent Living Council, Inc. office or call the toll free number, 877-822-1993, with any additional comments

TAMPA, FLORIDA
Thursday, March 25, 2004
10:00 a.m. – 12:00 p.m.

Location: Tampa Workforce Center, 9215 N. Florida Avenue, Tampa, FL 33612
Facilitator: Vivian D. Martin, Self Reliance Center for Independent Living
FILC Representative: Wendi Herzman
Attendees: 5 present and 1 gave input via telephone.

Mandatory Area 1- Scope and Intent of Independent Living Services

Objective 1D: good idea, but also prefer is all CILS had one database or software system and would have access to state wide information on services provided. All need to have a common database so the consumer doesn't have to remember everything they did with one particular CIL. This would also help the coordinators so they would know what type of services have been provided previously for repeat consumers.

Objective 1E: this should not be a priority of the council. The general public will know who FILC is when FILC, the CILS, and other community partners made a difference; such as accomplish goals and make a way for person with disabilities to get jobs, training, homes, medical services, etc. Then and only then will they understand the council's role. Developing an image plan just to say we are here and we are mandated by federal is not enough. We need to provide reports, tapes, or some kind of back up of the changes in the community that we have made. This can be included in the outreach and should not be a separate priority.

Mandatory Area 2 - Cooperation, Coordination and Working Relationships Among Various Entities

This cooperation and collaboration is critical, however you must start at the TOP and reach the major decision makers of the various organizations. Start at the top and find ways that FILC and the CILS can collaborate with these agencies; how to show them the benefit of being in partnership with us. Often times we are trying to collaborate at the wrong level or with persons who cannot effect change within that organization. Also a better relationship and cooperation among the CILS themselves should be sought. Sometimes it appears that the CILS are not working in the best interest or in common goals for person with disabilities. Why can't one neighboring CIL borrow from another or help each other with fundraisers? OR do they? There are hundreds of disability organizations in Florida and FILC should seek to reach the upper level persons so they can include the resource of CILs in their initial training with Directors and staff.

Can we also collaborate with entities involved in sports and recreations like the city/county parks? This is often overlooked among persons with disabilities yet a vital part of independence. We need to make the recreation divisions aware that persons with disabilities would still like to be able to participate in recreational events.

Definitely agree with the priority to facilitate the creation of a transportation system that supports independent living and educating policymakers. The speaking engagements to educate entities is a good idea.

Mandatory Area 3 – Outreach to Unserved Or Underserved Populations Or Minority Groups

This is a good priority and needs to include developing detailed, strategic outreach plans that are specific to each unserved/underserved population. The plan should include those with disabilities who have been released from prison or jails, which then leads to the need to do outreach among the judicial and criminal systems. While incarcerated, they may receive treatment but they are not receiving information on their particular disability and being linked to other social service providers. Also funding should be provided to the CILS so they can recruit persons for the statewide grassroots forum and seek to reach the unserved/underserved populations.

In developing the outreach plan, do not forget the literature and information that is needed relating to each group such as in Spanish, Creole, youth related jargon. Each CIL should have this material and also an updated website that could be accessed from anywhere.

PENSACOLA, FLORIDA

Friday, April 2, 2004

5:30 p.m. – 7:00 p.m.

Mr. Frank Cherry opened the public forum by welcoming all in attendance. He introduced the DVR Area Director, David Riley and the DBS representative, Denise Vaughn. He then introduced Darlene Maynard, FILC board member, as the facilitator of the forum.

Ms. Maynard began by again thanking those in attendance and explained the purpose of the forum was to receive public comments regarding the draft State Plan for Independent Living (SPIL). The SPIL is a collaborative effort between the Council, the CILs, DVR and DBS so all input is considered in developing the Plan.

Ms. Maynard read each of the goals and objectives and asked for comments.

Attachment One- this is attachment that lays out the goals and objectives that the Council and CILs will be working on in the next three years. The SPIL is due to the Rehabilitation Services Administration (RSA) July 1, 2004. The Plan covers the period of October 1, 2004 through September 30, 2007. The Preprint of the Plan covers the assurances the Council makes to RSA as well as what each attachment to the Plan must cover.

Ms. Maynard read the letter from the President of the Council regarding the need for public input regarding the goals and objectives of the Plan.

Goal 1

Objective 1A – no comments

Objective 1B – no comments

Objective 1C – a question was asked about who is ultimately responsible for the completion of goals and objectives since several entities are listed under who is responsible. It was explained that all FILC members are responsible for the goals and objectives and if these are not being met then FILC is not fulfilling its responsibilities.

Objective 1D – this objective is to ensure that all the Centers in Florida count services the same way and that the definitions of different services and other terms are uniform as well.

Objective 1E – a question was asked about who trains on assistive technology. The DVR and DBS representatives said they provide training upon request.

How are goals and objectives measured – does FILC report to someone. Mr. Cherry explained that any activities performed by the CILs are in the monthly reports, which go to FILC to be recorded.

Ms. Maynard explained that reports on the goals and objectives are provided to other FILC members at each quarterly meeting.

Goal 2

Objective 2A – Ms. Maynard stated she had spoken with Representative Evers two years ago regarding transportation and was informed that if there was a problem then solutions also need to be provided. She then applied and was appointed to the Santa Rosa Transportation Disadvantaged Board in order to address some of the problems.

Objective 2B – Ms. Maynard noted that the Florida Developmental Disabilities Council and the Florida Housing Coalition collaborated on a workshop on accessible affordable housing. No persons with disabilities attended but mostly service providers.

Objective 2C – Ms. Maynard pointed out that the CIL had provided education to poll workers regarding assistance to people with disabilities in the voting process.

Objective 2D – no comments

Objective 2E – A question was asked about addressing the aging population as this population will be dealing with disability issues as they age. The next 3-5 years will be acute and this person wondered if there were any AARP statistics regarding age and disability. Ms. Maynard stated this is something she will be addressing.

Another comment had to do with educating homebuilders on doing accommodation features in new homes. Ms. Maynard stated that universal design is one solution and will be consumer driven. She remarked that the Council is also focusing on getting youth with disabilities more involved and will be a facilitator at the Youth Leadership Forum being held in Tallahassee in July.

A question was asked of what to do with amputees being discharged before they should be and how can this be changed. Ms. Maynard replied she has been impressed with the local rehab hospital because no one person makes decisions regarding patients' treatment. She also noted that in the area there is a Rehabilitation Foundation that if you submit an application will cover inpatient costs. It was noted that this issue has more to do with Medicare and Medicaid and that they need to help out.

Someone stated the need to know how to advocate for yourself. Patients need to know their rights but the hospital case managers are not helpful with this. Education needs to happen before someone ends up in the hospital. It is important to be aggressive and have a strong presence. Ms. Maynard suggested writing up complaints regarding the case managers or treatments and get this to the hospital administrators to be dealt with. It was suggested that a component be added to the plan to educate medical personnel and the medical community on people with disabilities and the services available in the community. There is also a need for peer counseling. Mr. Cherry

suggested there be a collaborative effort between the CIL, DVR and DBS to educate the medical community in the area.

Objective 2F – It was asked whether this goal had to do with all youth or mainly youth with disabilities. It was suggested that the objective specify youth with disabilities to clarify this objective.

Goal 3

Objective 3A – Ms. Maynard stated she had information regarding the Florida Grassroots Forum that is sponsored by the Council. She also provided registration and scholarship forms for those in attendance.

Other comments were solicited at this time.

There was discussion of the lack of affordable housing and that everyone assumes when you talk about affordable accessible housing that the person has a physical disability when there are other people with disabilities who need this as well.

Another mentioned the length of time it takes to get approval from Medicaid for certain equipment and the amount of money spent on keeping someone in the hospital as compared to sending someone home and providing rehabilitation. There was no answer as to how to remedy this.

Ms. Maynard commented that the Real Choice Partnership (which deals with the Olmstead decision in Florida) is meeting in Gainesville and would appreciate knowing the issues that people are dealing with in transition for people with disabilities into the community. There are some things being done but there is a lack of funding for this. There is a need for proper supports for people getting out of nursing homes and institutions.

Mention was made of the need for education and sensitivity training for transportation people. There is a problem with attitudes of dispatchers and drivers. A representative from transportation in attendance said she thought this had been dealt with but would begin reeducation. Ms. Maynard again pointed out the need to get complaints to the Transportation Disadvantaged Boards. There was a mention of someone making a complaint then having more difficulty because of the complaint. There is fear that there will be more problems if complaints are made. Ms. Maynard suggested having people be like secret shoppers and ride the transportation system to see how things are really working. This could be used for any issue such as housing. She stressed the need for people with disabilities to get on boards in order to educate people on the issues being dealt with by people with disabilities. It was suggested that a list of boards be compiled and put in the CIL newsletter in order to let people know what boards are looking for members.

Education of the law profession was another suggestion. This profession needs to be made aware of disability laws such as the ADA, 504 and the Florida Constitution that it is illegal to discriminate

against people with disabilities if receiving state funds. Education of bar associations should be added to the list of those needing this training.

Ms. Maynard thanked all those in attendance for their participation and stated that any further comments could be provided to the CIL, by calling the FILC toll free number or e-mailing the FILC office. She reminded everyone that she had registration and scholarship forms for the Grassroots Forum and would be happy to talk to anyone interested in attending. She also provided the FILC Legislative Update for anyone interested in the status of bills affecting persons with disabilities.

WEST PALM BEACH, FLORIDA

Monday, May 3, 2004

2:30 p.m. – 4:00 p.m.

The Forum was attended by 2 FILC representatives: Kristi Chapman, who acted as facilitator, and Roberta Van Sickle. Also in attendance were Shelley Gottsagen, Executive Director of the Coalition For Independent Living Options (where the Forum was held) and Laura Capazzal, a representative from Goodwill. Seven consumers (not including the two FILC reps. (who are also consumers of this Center) were in attendance.

Kristi Chapman explained the reason for a State Plan and why consumers are urged to comment. She explained what would happen to their comments and the process for producing a final draft of the Plan.

Kristi Chapman read the goals, one by one, explained them, read each objective and asked for comments from consumers. The following comments were received:

1A & 1B, no comment. **1C**, CILO and FILC need to educate legislators so they don't cut funds for transportation. R. Van Sickle said that transportation has not been cut but consumer insisted that it has. **1D & 1E**, no comment.

2A, transportation providers refusing rides to consumers who need to shop – not providing safety (protecting one consumer from another). **2B**, process is unfair for obtaining public housing. Section 8 is closed for next 5 years. CIL should identify one staff member who will specialize in housing. Was told that this is being done. **2C**, Poll workers are not properly trained in the use of the accessible features of touch-screen voting machines. Consumers involved in class action suit are not being notified timely of court dates. **2D**, no comment.

3A, need to add crime victims with disabilities to the underserved populations. **3B**, No comment.

When "Any other comments" were asked for, the following comments were made:

Lack of access to health care, drug benefits, long-term rehabilitation, HMO problems, Medicare & Medicaid should all be looked into. Funding distribution unfair.

Participants were urged to register to vote, to attend the Grassroots forum and to contact CILO with the individual problems and situations that were mentioned during the meeting.