

Reporting Instrument

OMB Approval No.: 0985-0043
Expiration Date: January 31, 2021

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

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

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

Part I

INSTRUMENT

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

Reporting Fiscal Year: 2020

State: IN

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

SUBPART I - ADMINISTRATIVE DATA

Section A - Sources and Amounts of Funds and Resources

Sections 704(c) and 704(m)(3) and (4) of the Act; 34 CFR 364.35 and 364.36

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

Item 1 - All Federal Funds Received

(A) Title VII, Ch. 1, Part B	\$367367.00
(B) Title VII, Ch. 1, Part C - For 723 states Only	\$0.00
(C) Title VII, Ch. 2	\$612691.00
(D) Other Federal Funds	\$1631023.00
Subtotal - All Federal Funds	\$2611081.00

Item 2 - Other Government Funds

(E) State Government Funds	\$925694.00
(F) Local Government Funds	\$288737.00
Subtotal - State and Local Government Funds	\$1214431.00

Item 3 - Private Resources

(G) Fees for Service (program income, etc.)	\$78655.00
(H) Other resources	\$7212.00
Subtotal - Private Resources	\$85867.00

Item 4 - Total Income

Total income = (A)+(B)+(C)+(D)+(E)+(F)+(G)+(H)	\$3911379.00
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Item 5 - Pass Through Funds

Amount of other government funds received as pass through funds to consumers (include funds, received on behalf of consumers, that are subsequently passed on to consumers, e.g., personal assistance services, representative payee funds, Medicaid funds, etc.)	\$288737.00
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Item 6 - Net Operating Resources

Total Income (Section 4) <minus> amount paid out to Consumers (Section 5) = Net Operating Resources	\$3622642.00
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Section B - Distribution of Title VII, Chapter 1, Part B Funds

What Activities were Conducted with Part B Funds?	Expenditures of Part B Funds for Services by DSU Staff	Expenditures for Services Rendered By Grant or Contract
(1) Provided resources to the SILC to carry out its functions	\$0.00	\$121695.00
(2) Provided IL services to individuals with significant disabilities	\$0.00	\$0.00

What Activities were Conducted with Part B Funds?	Expenditures of Part B Funds for Services by DSU Staff	Expenditures for Services Rendered By Grant or Contract
(3) Demonstrated ways to expand and improve IL services	\$0.00	\$0.00
(4) Supported the general operation of CILs that are in compliance with the standards and assurances set forth in subsections (b) and (c) of section 725 of the Act	\$0.00	\$245672.00
(5) Supported activities to increase capacity to develop approaches or systems for providing IL services	\$0.00	\$0.00
(6) Conducted studies and analyses, gathered information, developed model policies, and presented findings in order to enhance IL services	\$0.00	\$0.00
(7) Provided training regarding the IL philosophy	\$0.00	\$0.00
(8) Provided outreach to unserved or underserved populations, including minority groups and urban and rural populations	\$0.00	\$0.00
Totals	\$0.00	\$367367.00

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

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

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

Name of Grantee or Contractor	Use of Funds (based on the activities listed in Subpart I, Section B)	Amount of Part B Funds	Amount of Non-Part B Funds	Consumer Eligibility Determined By DSU or Provider	CSRs Kept With DSU or Provider
accessAbility	Support General CIL Operations	\$24567.20	\$195669.00	Provider	Provider
ATTIC	Support General CIL Operations	\$24567.20	\$195669.00	Provider	Provider
Everybody Counts	Support General CIL Operations	\$24567.20	\$153485.00	Provider	Provider
Everybody Counts North	Support General CIL Operations	\$24567.20	\$153485.00	Provider	Provider
Future Choices	Support General CIL Operations	\$24567.20	\$379378.00	Provider	Provider
ILCEIN	Support General CIL Operations	\$24567.20	\$379378.00	Provider	Provider
SICIL	Support General CIL Operations	\$24567.20	\$195669.00	Provider	Provider
SIILC	Support General CIL Operations	\$24567.20	\$275169.00	Provider	Provider
The League	Support General CIL Operations	\$24567.20	\$195669.00	Provider	Provider
WILL Center	Support General CIL Operations	\$24567.20	\$379378.00	Provider	Provider
INSILC	Resources to carryout it's functions	\$121695.00	\$166217.00	N/A	N/A

Name of Grantee or Contractor	Use of Funds (based on the activities listed in Subpart I, Section B)	Amount of Part B Funds	Amount of Non-Part B Funds	Consumer Eligibility Determined By DSU or Provider	CSRs Kept With DSU or Provider
Total Amount of Grants and Contracts		\$367367.00	\$2669166.00		

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

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

Describe the objectives, activities and results for each Part B grant or contract awarded for purposes other than IL services or the general operation of centers.

During the reporting year, no Part B grant agreements or contracts were awarded for purposes other than the general operations of Centers for Independent Living and resources for the Indiana SILC to carryout it's functions.

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

34 CFR 80.40(a)

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

The DSE executed a grant agreement with each CIL for Part B funds for general operations. These grant agreements consist of boilerplate language requiring each CIL to maintain accurate and up to date accounting records and provide monthly fiscal claim reimbursements reports. The grant agreement language also ensures the CILs follow policies and procedures in accordance with federal uniform guidance and the Indiana Department of Administration. Additionally, as private, nonprofit 501c3 entities, the CILs are to conduct an annual independent audit as required by the Indiana State Board of Accounts and to submit a copy of their audit report (including any findings) to the Family and Social Services Administration (FSSA) State Auditor, annually.

The CIL and SILC contracts/grants were distributed in accordance with the SPIL for FFY20. Like in FFY19, during FFY20, the DSE and the SILC conducted quarterly meetings. These meetings were conducted virtually because of the pandemic. The DSE conducted virtual meetings with all 10 of the CILs on three occasions. Additionally, the DSE met with the individual CIL Directors to discuss questions and concerns related to the contract/grant development of payment point/deliverables. The DSE and SILC discussed feedback shared between their entities during these quarterly meetings regarding the SILC contracts and grants for FFY20.

As a reminder - during the last quarter of FFY19, the SILC and DSE were able to come to a consensus on the SILC funding contract/agreement which was amended and given full approval by the SILC. The changes implemented per the new FFY20 funding contract/agreement (in line with federal regulations, federal DSE/SILC assurances, and Indiana State Code) were successful in allowing the SILC more

flexibility and autonomy and earlier reimbursement receipt and advancement of its funds while still meeting all federal and state requirements.

Section F - Administrative Support Services and Staffing

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

Item 1 - Administrative Support Services

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

The DSE employs an IL Program Director who works with the Indiana CILs and is supervised by the DSE Director of Program Improvement for the Bureau of Rehabilitation Services (BRS) to perform/provide the following duties:

1. Responds to requests by the Administration for Community Living (ACL) in a timely manner, meeting all deadlines.
2. Reviews quarterly and annual reports (from CILs) and those completed/ submitted to ACL.
3. As requested, research and reviews laws/regulations pertinent to Indiana's Independent Living Program for implementation and clarification purposes.
4. May review Indiana's IL Program to ensure compliance with the Indiana State Plan for Independent Living (SPIL) and federal and state requirements.
5. Works with/supports Indiana's IL Program grantees/contractors, as needed. Provides follow-up/clarification to questions, issues and concerns.
6. Assists with research and development of federal IL applications, conducts with requests for proposals (RFP) and/or IL grant contracts and monitors IL grantees/ contractors.
7. Reports to supervisor on status of Indiana's IL Program, and projects.
8. Reviews/Approves grantee claim reimbursement submissions and submits to appropriate entity within department for payments to contractors.

Item 2 - Staffing

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

Type of Staff	Total Number of FTEs	FTEs filled by Individuals with Disabilities
Decision-Making Staff	9.84	6.08
Other Staff	24.49	15.16

Section G - For Section 723 States ONLY

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

Item 2 - Administrative Support Services

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

Item 3 - Monitoring and Onsite Compliance Reviews

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

Item 4 - Updates or Issues

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

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

In this section, provide data from all service providers (DSU, grantees, contractors) who received Part B funds and who were listed in Subpart I, Section C of this report, except for the centers that receive Part C funds. Part C centers will provide this data themselves on their annual 704 Reports, Part II.

Section A - Number of Consumers Served During the Reporting Year

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

	# of CSRs
(1) Enter the number of active CSRs carried over from September 30 of the preceding reporting year	729
(2) Enter the number of CSRs started since October 1 of the reporting year	894
(3) Add lines (1) and (2) to get the <i>total number of consumers served</i>	1623

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

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

	# of CSRs
(1) Moved	56
(2) Withdrawn	25
(3) Died	79
(4) Complete Goals	857
(5) Other	24
(6) Add lines (1) + (2) + (3) + (4) + (5) to get <i>total CSRs closed</i>	1041

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

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

	# of CSRs
Section A(3) <minus> Section (B)(6) = Section C	582

Section D - IL Plans and Waivers

Indicate the number of consumers in each category below.

	# of Consumers
(1) Number of consumers who signed a waiver	19
(2) Number of consumers with whom an ILP was developed	1604
(3) <i>Total number of consumers served during the reporting year</i>	1623

Section E - Age

Indicate the number of consumers in each category below.

	# of Consumers
(1) Under 5 years old	0
(2) Ages 5 - 19	31
(3) Ages 20 - 24	25
(4) Ages 25 - 59	329
(5) Age 60 and Older	1238
(6) Age unavailable	0
(7) <i>Total number of consumers served by age</i>	1623

Section F - Sex

Indicate the number of consumers in each category below.

	# of Consumers
(1) Number of Females served	1084
(2) Number of Males served	539
(3) <i>Total number of consumers served by sex</i>	1623

Section G - Race And Ethnicity

Indicate the number of consumers in each category below. ***Each consumer may be counted under ONLY ONE of the following categories in the 704 Report, even if the consumer reported more than one race and/or Hispanic/Latino ethnicity).***

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

	# of Consumers
(1) American Indian or Alaska Native	5
(2) Asian	7
(3) Black or African American	123
(4) Native Hawaiian or Other Pacific Islander	0
(5) White	1463
(6) Hispanic/Latino of any race or Hispanic/Latino only	12
(7) Two or more races	9
(8) Race and ethnicity unknown	4
(9) <i>Total number of consumers served by race/ethnicity</i>	1623

Section H - Disability

Indicate the number of consumers in each category below.

	# of Consumers
(1) Cognitive	44
(2) Mental/Emotional	59
(3) Physical	200
(4) Hearing	13

	# of Consumers
(5) Vision	299
(6) Multiple Disabilities	976
(7) Other	32
(8) <i>Total number of consumers served by by disability</i>	1623

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

Sections 13 and 704(m)(4); 34 CFR 364.53; Government Performance Results Act (GPRA) Performance Measures

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

Section A - Individual Services and Achievements

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

Services	Consumers Requesting Services	Consumers Receiving Services
Advocacy/Legal Services	499	1103
Assistive Technology	1215	1163
Children's Services	11	11
Communication Services	159	142
Counseling and related services	119	20
Family Services	13	9
Housing, Home Modification, and Shelter Services	121	93
IL Skills Training and Life Skills Training	605	434
Information and Referral Services	4232	4094
Mental Restoration Services	3	3
Mobility training	156	138
Peer Counseling Services	1011	963
Personal Assistance Services	168	141
Physical Restoration Services	901	895
Preventive Services	147	139
Prostheses, Orthotics, and other appliances	3	3
Recreational Services	32	32
Rehabilitation Technology Services	34	34
Therapeutic Treatment	0	0
Transportation Services	75	54
Youth/Transition Services	26	24
Vocational Services	49	44
Other	132	96
Totals	9711	9635

Section B - Increased Independence and Community Integration

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

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

Significant Life Area	Goals Set	Goals Achieved	In Progress
Self-Advocacy/Self-Empowerment	823	746	59
Communication	223	183	36
Mobility/Transportation	163	104	49
Community-Based Living	1082	912	151
Educational	802	767	33
Vocational	25	12	7
Self-Care	517	430	82
Information Access/Technology	1142	1014	118
Personal Resource Management	212	149	53
Relocation from a Nursing Home or Institution to Community-Based Living	22	19	2
Community/Social Participation	781	736	42
Other	71	40	27
Totals	5863	5112	659

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

(A) Table

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

Areas	# of Consumers Requiring Access	# of Consumers Achieving Access	# of Consumers Whose Access is in Progress
(A) Transportation	62	42	15
(B) Health Care Services	154	136	17
(C) Assistive Technology	1305	1244	58

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

(B) I&R Information

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

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

Section C - Additional Information Concerning Individual Services or Achievements

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

1. One individual's world was becoming overwhelming for her. The COVID-19 pandemic had changed not only her daily routines, but her entire lifestyle. She found herself stuck in her home for weeks on end, only leaving to attend vital doctor's appointments. She tried to find her "new normal," but it came with many challenges. She was finding it hard to balance her home life, her family, and the personal things she wanted to accomplish for herself, along with finding alternatives to her daily activities. Being stuck in her home made her feel secluded at times. She decided to make it her goal to attend the Healthy Community Living: Living Well in the Community workshops via Zoom in July. She thought it would be a great way to communicate with new people and develop her lifestyle skills, while staying safe in her home.

Learning to use Zoom was the first step. She had used similar apps recently for virtual doctor's appointments, so she used this knowledge to master Zoom. In the beginning, she would only join the workshop for the last 30-60 minutes. As the weeks went on and she became more comfortable, she began logging on earlier and joining in on all the conversations. She found she enjoyed listening and learning about the others in the group. They were all going through similar struggles surrounding dealing with a new COVID-19 world. She began to create lists of the tasks she needed to accomplish and efficiently create goals to accomplish these tasks. She realized by listening to the content of the workshops, that although sometimes roadblocks will pop up in her way, she should not get discouraged. She began setting goals for herself, such as filling out her worksheet packet that went along with the Living Well in the Community workshop, putting on makeup once a week, and writing in her journal a few nights a week. A few weeks into the workshop, she was participating fully and helping other participants find resources and new opportunities. After completing the 11-week workshop, she left with the skills needed to maintain her goals and continue moving forward. She knew that she could conquer her "new normal."

2. Our participation in the Work to Include project has resulted in the City of Terre Haute choosing to designate itself a model employer per the project and has used its designation to encourage local employers to do the same. Our ramp construction project slowed considerably in 2020. The pool of volunteer carpenters understandably shrank thanks to the pandemic's requirements. Funding continues to be a serious concern as the state made additional cuts to IL funding. The regularity of our work as a vendor with Vocational Rehabilitation slowed during the pandemic as well, but we continue to provide low vision services to VR clients as well as BINs assessments. Our BINs liaison has also provided reports to consumers at our partner IL centers in Indiana.

3. During the intake process, Service Coordinators meet with consumers to discuss their needs. Goals are written at the discretion of the consumer and steps to achieve these goals are discussed. ILCEIN uses CIL Suite Management database to record consumer data and to assist with tracking the stated goals and services. Goals are tracked in individual consumer records and marked as completed when goals are accomplished. Consumers are contacted regularly and their information is reviewed to

ensure they are still on target for meeting their goals. If changes are required, the consumer and service coordinator will make necessary revisions in the plan.

Consumers are surveyed upon the closing of their case files and/or once a year depending on the requirements of the funding source in order to ensure they were happy with the services that they received from ILCEIN. Results of the survey summaries are shared with staff and board.

Complaints/concerns are forwarded to staff for resolution and, if need be, to the program directors for review and follow up. ILCEIN's management team reviews outcomes and reports to the board of directors at their monthly meetings.

ILCEIN completes an annual Consumer Satisfaction Survey at the end of each fiscal year to review the quality of work staff produces. IL Consumers and OIB Consumers are surveyed separately utilizing their specific required survey tools. The surveys are conducted by phone by staff members or through the mail. 75 Consumers completed a 10-question survey in FY 2020. Results show overall satisfaction with the Center's staff and services.

4. On behalf of our visually-impaired consumers, SIILC initiated a ticket with the State Department of Transportation to advocate for the installation of an audible accessible pedestrian signal at the local intersection next to our facility to assist with equal and ease of access to our programs and services. The ticket has been approved and is currently pending installation at this time. The challenge presented to our Center at this time is that the DOT prefers to wait until they have planned other project(s) in the area scheduled for year 2021 prior to completing the approved request. SIILC finds this unacceptable that the request is approved yet consumers are expected to wait for DOT's convenience before implementing the installation because this is an inconvenience to the DOT. SIILC advocates are reviewing the appeals procedure to complete the necessary steps to advocate for the expedition of the approved ticket for installation in a timelier manner.

SUBPART IV - COMMUNITY ACTIVITIES AND COORDINATION

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

Section A - Community Activities

Item 1 - Community Activities Table

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

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

Issue Area	Activity Type	Primary Entity	Hours Spent	Objective(s)	Outcome(s)
Health Care	Community Sys Adv	WILL	7.00	Assist consumer with accessing healthcare in their community.	Attended monthly meetings & reviewed plans for clinic expansion.
Housing	Community Systems Advocacy	WILL	3.50	Educate Consumers on how to request accessible housing 	Participated in panel discussion. Provided IL perspective on issues of discrimination.
Inclusion	Community Systems Advocacy	WILL	10.75	Educate consumers with disabilities and the community about IL. 	Communicated with editor of newspaper and offered advise/assistance. Monthly board meeting attendance. Corrected use of language that isn't people first, joined group to outreach to disability and LGBTQ community

Issue Area	Activity Type	Primary Entity	Hours Spent	Objective(s)	Outcome(s)
Inclusion	Community Systems Advocacy	WILL	10.00	Educate consumers with disabilities and the community about IL.	Spoke to group about finding issues associated with Disability. Provided info on IL at mtg with legislators & the public. Increased knowledge of the workings of county government. Training at ISU- 25 faculty/staff/student s on disability awareness.
Accessible Technology	Technical Assistance	WILL	1.00	Help consumers understand how to use AT to increase their independence. 	Visit Community Christian Counseling. Provided advice/information about making their reception desk accessible for wheelchair user they hired.
Health Care	Technical Assistance	WILL	2.00	Assist Consumer with navigating healthcare system	Review planned expansion. Moved plans to contractor for final drawings
Inclusion	Technical Assistance	WILL	2.00	Provide assistance in accessing IL services	To review the interview guidelines for the position. Review applications for program with the VCSC
Accessible Tech	Collaboration	WILL	6.00	Educate community, consumers & families regarding IL services and the availability of these services. 	Leadership Class. Discussed the last six months operations and goals/successes at with INDATA.

Issue Area	Activity Type	Primary Entity	Hours Spent	Objective(s)	Outcome(s)
Health Care	Collaboration	WILL	20.50	Educate community, consumers & families regarding IL services and the availability of these services. 	Mtgs to discuss budget/policies/project. Spoke re:clinic's impact on our comm. Provide input/support clinic activities & goals. Met w/committees & Board re:COVID-19 add fund & plan. Review materials/established guidelines/protocol-reopening clinic.
Inclusion	Collaboration	WILL	18.00	Educate community, consumers & families regarding IL services and the availability of these services	Met with Lynn Hughes and Mel Brooks at Hamilton Center to discuss See you in Terre Haute 2025. Assisted School Corp plan family activities, & an eval process. Develop goals & obj for the state plan. Attended monthly mtgs for 'work to Include'.
Accessible Technology	Community Education	WILL	3.00	Educate community, consumers & families regarding IL services and the availability of these services	Moved to take over statewide NPF. Staff learned of the AT offerings from the agency.
Health Care	Community Education	WILL	5.25	Educate community, consumers & families regarding IL services and the availability of these services	FSSA presented new computer system-will roll out in April 2020. New info on eligibility guidelines. Explored interactive snapshot of the health of 2 counties. Group created several areas for + resources in the counties & opportunities for growth.

Issue Area	Activity Type	Primary Entity	Hours Spent	Objective(s)	Outcome(s)
Inclusion	Community Education	WILL	44.00	Educate community, consumers & families regarding IL services and the availability of these services	WILL Center & Youth Empowerment Services were discussed at Ryves Youth Center. Collected 42 entries for I&R's. 10 persons learned of fire safety tips for seniors & the sensory challenged. 12 persons learned of daily challenges for sensory challenged
Inclusion	Community Education	WILL	20.00	Educate community, consumers & families regarding IL services and the availability of these services	Learned new guidelines/info on eligibility guidelines. An overview of the Workforce Cabinet and how it can help implement WIO in accordance with the State plan. Learned of better pathways to assist persons with a disability.
Inclusion	Community Education	WILL	24.00	Educate community, consumers & families regarding IL services and the availability of these services	11 persons learned about Diabetes- 6 persons learned about Glaucoma. Learn of Heart Health approaches to quality of life/effects of Medicaid during pandemic.. Learn about library program-Big Read. Increased knowledge-March Disability Awareness Month.
Accessible Technology	Outreach	WILL	1.50	Educate community, consumers & families regarding IL services and the availability of these services	Met with faculty and discussed potential of AT to support student accommodations.

Issue Area	Activity Type	Primary Entity	Hours Spent	Objective(s)	Outcome(s)
Inclusion	Outreach	WILL	14.25	Educate community, consumers & families regarding IL services and the availability of these services	Special effort to bring in grandparents of foster kids w/disabilities as consumers. Center staff introduced the IvyTech faculty to paths for Independence & Advocacy. Feedback to Art Space re:potential artist for water sculpture @ Gov site in Vigo Co.
Accessible Technology	Community Systems Advocacy	SIILC	1.50	To remind legislation what IL is and how we are beneficial to the State.	Provided handout from ILP, demonstrative statistics and cost-savings. State Representative Randy Frye advised to see him again before General Assembly when ILP requests funding.
Health Care	Community Systems Advocacy	SIILC	7.50	To conduct open interviews to hire for Personal Care Attendants	Interviewed 4 potential candidates. Hired 2 of them
Accessible Technology	Collaboration	SIILC	2.00	To attend a meeting at LifeTime Resources, our Area on Aging Agency, to proactively discuss changes we feel are required to better serve consumers in our region.	Intro to the New ADS Director, Director of Operations, & Exec Director. Shared frustrations w/ how the system is working, gave feedback on ideas, & what improvements we thought need to be made in order to help things run more smoothly for everyone.

Issue Area	Activity Type	Primary Entity	Hours Spent	Objective(s)	Outcome(s)
Accessible Technology	Community Education	SIILC	16.50	Provide consumer with updated information regarding AT devices and software	Learned about ECHO program & services, provided info on IL & services to other attendees. Discussed disability awareness & presented info to the students at Jeff Craig Elem School.
Health Care	Community Education	SIILC	1.00	Attend an online training about Medicaid Eligibility and understanding the essential concepts.	Gained knowledge understanding the essential concepts of Medicaid eligibility, which were as follows: Basic understanding of eligibility criteria for I/DD waiver & Medical Model Waivers, IDing & monitoring annual re-determination, RE-establishing.
Accessible Technology	Outreach	SIILC	16.00	To promote Independent Living Programs and Services. To present materials and describe programs and services available. Meet and identify prospective recipients in need of services.	Signed up 31 consumers, 12 new & 19 re-opened. Signed up 13 consumers for visual assist tech, 9 new & 4 re-opened files. Presented Ch. 2 items. Signed up 16 new consumers-need of visual assist tech & re-opened 2 in need of visual assist tech.
Health Care	Outreach	SIILC	11.00	Recruitment of staff members to provide Personal Assistance Services to Home Care recipients requiring homemaking and attendant care services.	Provided information about IL Programs and Services to community members with emphasis pertaining to in-home personal assistance services.

Issue Area	Activity Type	Primary Entity	Hours Spent	Objective(s)	Outcome(s)
Education	Community Systems Advocacy	Future	2.00	Information regarding persons with low vision and trauma to brain.	Learn why a person with low vision react in term of how they may recall childhood or any memory which may cause depression.
Other	Community Systems Advocacy	Future	3.00	Updates to families regarding COVID-19. Learn how to make your organizations social media accessible to all.	Helped individuals stay social while social distancing as well as accessing telehealth. Learned how to help businesses use alt-text, video captioning, and other ways to make social media accessible.
Accessible Tech	Technical Assistance	Future	1.00	Learn about a variety of assistive technology for blind and low vision users, including electronic for devices.	Received information to share with consumers about devices that may be compatible with computer and cell phone.
Housing	Technical Assistance	Future	20.00	Sign up for rental assistance through Indiana Housing Now.	70 Families and individuals have applied for rental assistance and will get a Follow up email or phone call from IHN.
Other	Technical Assistance	Future	6.00	Learn of information and assistance opportunities in our community to share and support individuals in the community.	We helped 13 people apply for the utility / rental assistance. 70 Families and individuals have applied for rental assistance and will get a Follow up email or phone call from IHN.
Education	Community Education	Future	19.50	Learn about disability and mental health experience.	Built empathy and increased ability to counsel consumers.

Issue Area	Activity Type	Primary Entity	Hours Spent	Objective(s)	Outcome(s)
Other	Community Education	Future	29.00	Bring awareness to the community, community leaders and community providers.	Several leaders presented topics that are going on in the community. Gave winter bags to 100 people in the community & brought information into the community about our services. Learned how to find & use transportation data and census.gov/fasttrack.
Education	Outreach	Future	1.00	To learn about Psychological First Aid	Staff are better equipped to recognize signs of stress in kids and adults and how to help.
Other	Outreach	Future	25.00	Share information about our program and give personal items needed to community.	Gave out information about our program and gave away 135 bags with personal items- filled with essentials (socks, toothbrush/toothpaste, deodorant, etc.) and information about Future Choices.
Other	Collaboration	ILCEIN	133.50	Educate community, consumers & families regarding IL services and the availability of these services.	385 people were collaborated and/or networked.
Other	Community Education	ILCEIN	129.50	Educate community, consumers & families regarding IL services and the availability of these services.	49,396 indiv were reached & provided with info re: our programs & services via T.V. PSA, social media & Internet postings. 124 indiv were provided oppor to socialize & to allow for peer mentoring. 10 indiv received increased awareness about ILCEIN.

Issue Area	Activity Type	Primary Entity	Hours Spent	Objective(s)	Outcome(s)
Other	Outreach	ILCEIN	19.50	Educate community, consumers & families regarding IL services and the availability of these services.	2 people received information about available services and technology for persons with disabilities. 49,786 people received information about how to create systemic change. 3 people received information on how they can access assistive technology.

Item 2 - Description of Community Activities

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

ILCEIN conducted or participated in 110 events in FY 2020: 18 social/recreational events, 30 community education events, 9 outreach events, 1 presentation to community agencies, 46 networking events, 6 community systems advocacy events, and 18 consumer support groups. A total of 50,385 persons received information via these events. These events include a TV show discussing our programs and services for seniors and people with disabilities produced by Whitewater Community Television (WCTV), which is broadcast throughout Wayne County Indiana. In addition to these events ILCEIN has a highly active Facebook page. Over 40,000 people were reached by ILCEIN's Facebook page during FY 2020. This indicates the number of people who were served any activity from the page including posts, posts by other people, Page like ads, mentions and check-ins. This continues to be a wonderful way to reach both our consumers and the community at large. The WILL Center's executive Director continues to serve as Board President for the Wabash Valley Health Center, providing technical assistance and voice to our peers with disabilities. One staff members serves on the board of the Western Indiana Community Action Agency, an umbrella agency for several state and federal grants serving people with disabilities, conditions of aging and living in poverty. Another staff member serves on the board of the local Purdue Extension office, and on the advisory board for the Indiana State University Occupational Therapy council. Another staff member has been a participant in the "Turn to the River project," a redesign of the City of Terre Haute's Wabash River access, providing technical assistance and a voice for our peers with disabilities. SIILC works daily with LifeTime Resources (Area on Aging Agency) to coordinate with Case Management and ensure quality assurances for Personal Care services for in-home care recipients as well as to make and receive referrals for individuals in need of Independent Living services. SIILC has established successful relations with local organizations such as Lions & Kiwanis Clubs, VFW's, American Legions, Clearing House and more to better serve its consumers and collectively provide a variety of services to consumers needing multiple options available to them to better help them achieve their goals and objectives. SIILC worked with the local Switzerland County School Corporation to develop a program to educate students about equal access, inclusion, as well as resources and encourage their involvement in helping others.

The WILL Center's executive Director continues to serve as Board President for the Wabash Valley Health Center, providing technical assistance and voice to our peers with disabilities. One staff members serves on the board of the Western Indiana Community Action Agency, an umbrella agency

for several state and federal grants serving people with disabilities, conditions of aging and living in poverty. Another staff member serves on the board of the local Purdue Extension office, and on the advisory board for the Indiana State University Occupational Therapy council. Another staff member has been a participant in the "Turn to the River project," a redesign of the City of Terre Haute's Wabash River access, providing technical assistance and a voice for our peers with disabilities.

SIILC has developed relationships with many community organizations and agencies with similar civic missions to better serve community members who may better benefit from multiple resources available to them such as the collaborative effort to expand Older Blind services from ILCEIN in Richmond to our underserved service area to allow individuals with vision impairments to become more independent by the utilization of assistive technology devices. ILCEIN and SIILC continue a collaborative venture to expand Richmond's services into the Southeastern Indiana region which had previously been unserved for such a program.

SIILC works daily with LifeTime Resources (Area on Aging Agency) to coordinate with Case Management and ensure quality assurances for Personal Care services for in-home care recipients as well as to make and receive referrals for individuals in need of Independent Living services.

SIILC has established successful relations with local organizations such as Lions & Kiwanis Clubs, VFW's, American Legions, Clearing House and more to better serve its consumers and collectively provide a variety of services to consumers needing multiple options available to them to better help them achieve their goals and objectives.

SIILC worked with the local Switzerland County School Corporation to develop a program to educate students about equal access, inclusion, as well as resources and encourage their involvement in helping others.

Futures CIL staff, board members and consumers played the role as volunteers and community leaders to provide gift bags, and literature to hand out during our community activities. We partnered with 2nd Harvest, and the Senior Center by giving back to our community and providing food to those who were in need. We also gave blankets during the cold months of the year and had opportunities to learn and have open discussion with our consumers.

Section B - Working Relationships Among Various Entities

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

To enhance and maximize cooperation, coordination, and working relationships, the Indiana SILC Membership consists of members from the DSE, CILs, Indiana Department of Transportation (INDOT), and the National Federation of the Blind - Indiana Chapter. Additionally, SILC members and SILC staff share/receive information with/from the ARC of Indiana, Self Advocates of Indiana, AARP of Indiana, Back Home in Indiana Alliance, Fair Housing Center of Central Indiana (FHCCI), Health by Design, Indiana Disability Rights, Indiana Governor's Council for People with Disabilities, Indiana Institute on Disability & Community, and the State Rehabilitation Commission. The DSE and INSILC Executive Director and Council Members leadership continue to hold quarterly meetings to discuss ILS Program SILC-related items as a means to continue troubleshooting challenging issues and cultivating an ongoing collaborative working relationship.

As a result of these relationships, the INSILC Executive Director has had the opportunity to work with these various entities to leverage opportunities and space for more Hoosiers with disabilities to get engaged in the work of some of these organizations and strengthen their leadership and advocacy skills.

SUBPART V - STATEWIDE INDEPENDENT LIVING COUNCIL (SILC)

Section 705 of the Act; 34 CFR 364.21

Section A - Composition and Appointment

Item 1 - Current SILC Composition

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

Name of SILC member	Employed by CIL, State Agency or Neither	Appointment Category	Voting or Non-Voting	Term Start Date	Term End Date
Cynthia Rockwell	Neither	Community Advocate	Voting	01/01/2019	12/31/2021
Joe Gun	Neither	Person with a Disability	Voting	01/01/2019	12/31/2021
Kevin Burk	Neither	Person with a Disability	Voting	01/01/2020	12/31/2022
Fred Vaiana	Neither	Person with a Disability	Voting	01/01/2019	12/31/2021
Abigail Fleenor	Neither	Person with a Disability	Voting	01/01/2019	12/31/2021
Kelsey Cowley	Neither	Person with a Disability	Voting	01/01/2020	12/31/2022
Tammy Themel	CIL	CIL Director Representative &	Voting	01/01/2019	12/31/2021
Erin Hall	State Agency	Representative for IN DOT & Pe	Non-Voting	01/01/2019	12/31/2021
Theresa Koleszar	State Agency	DSE Representative	Non-Voting	01/01/2019	12/31/2021
Derek Deckman	Neither	Person with a Disability	Voting	01/01/2019	12/31/2022

Item 2 - SILC Composition Requirements

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

SILC Composition	# of SILC members
(A) How many members are on the SILC?	10
(B) How many members of the SILC are individuals with disabilities not employed by a state agency or a center for independent living?	6
(C) How many members of the SILC are voting members?	8

SILC Composition	# of SILC members
(D) How many of the voting members of the SILC are individuals with disabilities not employed by a state agency or a center for independent living?	6

Section B - SILC Membership Qualifications

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

Item 1 - Statewide Representation

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

As a result of a new SILC member appointment and existing SILC member re-appointments for a second term (all officially made by the Governor on January 1, 2020), the Indiana SILC maintained its composition compliance for FFY 2020 and had membership representation from the North, South, East, West, and Central parts of the State from both rural and urban areas. However, the SILC recognizes the existing ten members do not fully represent the state. As such, when the SILC conducted its annual Membership Recruitment Campaign in May and June of 2020, peers with disabilities from underrepresented and unrepresented parts of the state were an area of priority when vetting/selecting new members for appointment recommendation to the Governor.

The Indiana SILC received several new membership applications from various areas of the state and the Membership Nomination Committee interviewed/vetted ALL individuals who submitted membership applications. The committee selected eight new members for SILC appointment recommendation from areas of the state currently represented and not currently represented on the Indiana SILC. The eight individuals selected for appointment recommendation represent the following areas of the state:

Northwest - Currently Unrepresented
 Central - Currently Underrepresented
 Southeast - Currently Unrepresented
 East - Currently Underrepresented

IF all eight individuals recommended for appointment were officially appointed by the Governor, the Indiana SILC would have statewide representation from the following areas of the state:

North
 South
 East
 West
 Central
 Northwest
 Southeast

On June 30, 2020 - The Indiana SILC Executive Director submitted the names of the selected eight individuals along with their membership applications/supporting documentation to the Governor for recommendation of appointment to the Indiana SILC. The Indiana SILC Executive Director continued to communicate and follow-up on the progress of appointing the recommended individuals via email with the Governor Appointment Liaison regularly (July 17, 2020; July 20, 2020; July 28, 2020; August 4, 2020; September 1, 2020).

As of the end of FFY20 (September 30, 2020) - NONE of the recommended eight individuals had yet to

be appointed to the Indiana SILC.

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

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

During the reporting year, the Indiana SILC was comprised of eight individuals with disabilities and two without disabilities. Indiana SILC members identified as having disabilities ranging from visual loss/blindness, mobility disabilities, mental health/emotional disabilities, intellectual/developmental disabilities and various other physical disabilities. In addition, several Indiana SILC members with disabilities identified as part of and represented the following additional marginalized communities:

- * Female
- * LGBTQ
- * Low-income

While the SILC was disability-directed for the reporting year and represented various areas of the state, both urban and rural, the Indiana SILC was comprised of all White/Caucasian individuals and greatly lacking the voices of its peers with disabilities who are most marginalized, its BIPOC peers with disabilities.

The Indiana SILC believes the missing voices of its BIPOC peers with disabilities is unacceptable and recognizes the critical need to center and elevate the voices of its peers with disabilities with intersecting identities as BIPOC. Committed to changing, enhancing and expanding the diversity of the Indiana SILC, it targeted its outreach efforts for its 2020 Membership Recruitment Campaign on recruiting its BIPOC peers with disabilities. The Indiana SILC was dedicated to selecting/submitting a majority slate of BIPOC with disabilities (NOT employed by a CIL or State Agency) for recommendation of appointment to the Governor.

Again, the Indiana SILC received several new membership applications. Majority of the applicants identified as individuals with disabilities and as BIPOC. The Membership Nomination Committee interviewed/vetted ALL individuals who submitted membership applications. The committee selected eight new members for SILC appointment recommendation, none of which were employed by a CIL or State Agency. The known identity breakdown of the eight individuals selected for recommendation of appointment follows (these identities are not all inclusive):

1. K.M.: PWD; Female; African-American; Low-Income Individual
2. S.S.: PWD; Female, Black
3. R.M.: PWD; Male; Black; Veteran
4. L.M.: PWD; Male; Black; Veteran
5. L.P.: PWD; Female; Latinx
6. A.C.: PWD; Female; White
7. S.J.: PWD; Male; White; LGBTQ; Student/Youth
8. L.P.: Male, White

The Indiana SILC followed-through on its commitment and selected a majority of BIPOC with disabilities (NOT employed by a CIL or State Agency) for recommendation of appointment to the

Governor and on June 30, 2020 - the Indiana SILC Executive Director submitted the eight slate of names consisting of a majority its BIPOC peers with disabilities (five of the eight) along with their membership applications/supporting documentation to the Governor for recommendation of appointment to the Indiana SILC. The Indiana SILC Executive Director continued to communicate and follow-up on the progress of appointing the recommended individuals via email with the Governor Appointment Liaison regularly (July 17, 2020; July 20, 2020; July 28, 2020; August 4, 2020; September 1, 2020).

As of the end of FFY20 (September 30, 2020) - NONE of the recommended eight individuals had yet to be appointed to the Indiana SILC.

Item 3 - Knowledgeable about IL

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

The Indiana SILC has a policy that requires ALL newly appointed members of the SILC (even those working for a CIL or State Agency) MUST complete mandatory New Member Orientation Training prior to attending their first public meeting of the Council and/or engaging in any official INSILC-related business or activities as a Council Member. This training is based on ILRU's SILC Guidebook for Chairpersons and Members. In addition, Council Members and Council Staff received intensive training on equity and anti-oppression with a strong emphasis on the intersection of Race and Disability and rooting out racism in Independent Living from National IL Leader/Trainer, Reyma McCoy McDeid.

To ensure the SILC maintained its composition compliance with members knowledgeable about Independent Living, it followed the protocol identified in the SPIL 2017-2020 for membership recruitment and vetting and conducted a Membership Recruitment Campaign in the spring of 2020. The SILC Membership Nomination Committee lead the charge on vetting every individual who applied for SILC appointment and selected individuals to recommend directly to the Governor's office that met the qualifications regarding the knowledge required to serve on the SILC. The SILC Executive Director provided the Governor Appointment Liaison with these appointment recommendations and maintained regular communication with the Governor Appointment Liaison to ensure applicants appointed to the SILC have a strong, base knowledge of Independent Living allowing it to maintain its composition compliance for FFY 20. The SILC recommended eight individuals (seven with disabilities, with five of these individuals self-identifying as BIPOC).

SILC Council Members/Staff also received IL-related training at its SILC Meetings in FFY20 conducted by the SILC Executive Director and SILC Director of Public Policy & Systems Advocacy.

SILC Council Members attended and took part in the November 2019 Disability Listening Session (organized/conducted by the SILC Executive Director) at the pre-conference for the Indiana Conference on Disability in an effort to learn and better understand the challenges their Hoosier peers face with living independently (with or without supports) in their communities. In addition, SILC Council Members/Staff attended the Indiana Conference on Disability and several of its workshops within the Independent Living track.

SILC Council Members/Staff completed relevant ILRU trainings and also attended other IL/ disability-related trainings and conferences during FFY 20.

SILC Council Members/Staff attended a 1-day, intensive SILC Policy Planning Retreat on Intersectional

Section C - SILC Staffing and Support

Item 1 - SILC Staff

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

Executive Director - Amber O'Haver (Person with a disability)
January 2016 - Current
(844) 4INSILC or (844) 446-7452
aohaver@insilc.org

Director of Public Policy & Systems Change - Morgan Daly, JD, MPA (Person with a disability)
February 2019 - Current
(844) 4INSILC or (844) 446-7452
mdaly@insilc.org

Director of Community Education & Training - Amy Sekhar, PhD (Person with a disability)
January 2018 - March 2020
(844) 4INSILC or (844) 446-7452
asekhar@insilc.org

Project & Policy Initiatives Coordinator - Hayden Smith (Person with a disability/Deaf/HoH)
November 2019 - July 2020
(844) 4INSILC or (844) 446-7452 - Voicemails transcribed to text
hsmith@insilc.org

NOTE 1

In July 2020, the Indiana SILC was notified by the DSE it would be receiving a 15% cut to its Innovation & Expansion (I&E) funding for FFY21. The Indiana Governor issued a funding directive to all state agencies to cut 15% from their spending to replenish state surplus funds that had been used to address the COVID-19 pandemic. The 15% cut to I&E funds may extend into subsequent fiscal years and further cuts to the Indiana SILC funding beyond the 15% remained a threat depending on future funding cut directives from the Indiana Governor.

As a result of the definitive 15% cut to its I&E funds and with the uncertainty of additional funding cuts, staffing cuts were made in the last quarter of FFY20. The Indiana SILC Executive Director also paused on plans to recruit/hire a new Director of Community Education & Training.

With cuts to its I&E funding for FFY21 and with the uncertainty of further funding cuts, the Indiana SILC began operating at HALF its staff capacity in August of 2020 and plans to remain at this depleted staff capacity level for majority, if not all, of FFY21.

NOTE 2

No SILC staff were state agency employees.

Item 2 - SILC Support

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

The Indiana SILC is delighted to report it experienced a much improved relationship and strengthened communication with the DSE during FFY20. The Indiana SILC believes this is a direct result of the agreed upon changes in FFY19 to the Indiana SILC funding contract and the revised payment structure/procedures for FFY20. The innovative payment structure and procedures provided the Indiana SILC with the operational flexibility it required to function independently and autonomously and mitigate DSE interference. For example, the new funding contract allowed the SILC to receive advance payment of its fund improving the cash flow issues experienced by the Indiana SILC in its previous fiscal years. The Indiana SILC was able to process its payroll and vendors on time for all of FFY20.

Quarterly meetings continued for FFY20 between the SILC Chair or Vice-Chair, SILC Executive Director, SILC CIL Rep, DSE Director, DSE Director of Program Improvement and DSE Manager of Specialized Supports. Due to the COVID-19 pandemic, most of these meetings took place virtually. The meetings were essential and beneficial in providing a platform for the Indiana SILC and DSE to discuss/address important issues related to any funding contract needs, adherence of DSE/SILC Assurances, and other administrative-related items or challenges - the COVID-19 pandemic FFY21 funding cuts for the Indiana SILC being one of these items.

The Indiana SILC greatly appreciated the increased engagement and communication directly from the DSE Director for FFY20. The Indiana SILC and SILC Executive Director believe the appointment of the DSE Director to the SILC (instead of a DSE Liaison) contributed to the improved communication and relationship between the Indiana SILC and DSE. Having the DSE Director at the table for SILC public meetings and front-and-center for SILC-related business has been vital to rebuilding and cultivating trust between the two entities. The Indiana SILC and SILC Executive Director have been grateful for the time, energy and efforts the DSE Director invested in the Council during FFY20 and continue to look forward to the meaningful involvement of the DSE Director for FYY21.

On a final note - the Indiana SILC/SILC Executive Director/SILC staff continued to enjoy communicating and working with the DSE Director of Program Improvement who did whatever she could to address any SILC-DSE related administrative needs, concerns or issues the Indiana SILC experienced during FFY20. Same goes for the DSE Manager of Specialized Supports.

Section D - SILC Duties

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

Item 1 - SILC Duties

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

(A) State Plan Development

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

SPIL 2017 - 2020 AMENDMENT & EXTENSION

Since the Indiana SPIL 2017 - 2020 was conditionally approved by ACL-ILA on September 30, 2019, the Indiana SILC worked to address all necessary changes to address the conditional approval of the 2020 Amendment & Extension during early FFY20.

1 - The Indiana SILC determined that SUBSTANTIAL & MATERIAL CHANGES needed to be made to the SPIL for the extension and amendment/addition of FFY2020 based on its conditional approval and the necessary changes needed, per ACL. SPIL Committee Meetings took place over the course of the first quarter of FFY20 to assist the Indiana SILC in making these changes to SPIL 2017 - 2019 for FFY2020.

2 - The Indiana SILC publicly posted an amended SPIL 2017 - 2020 for written public comment on Nov. 10, 2019. Written comment could be mailed or emailed to the Indiana SILC for 30 days (until Dec. 9, 2019). A SPIL public hearing to gather additional input from people with disabilities and other stakeholders regarding the SPIL 2017 - 2020 was also held on Dec. 5, 2019.

3 - The Indiana SILC received the final draft of the amended SPIL 2017 - 2020 document for review and any final feedback for the SPIL Committee on Dec. 9, 2019, which included any/all changes made to the plan based on public input from its peers with disabilities and other stakeholders provided during October/November/December of 2019. No additional feedback was provided by the Indiana SILC to the SPIL Committee. As such, the SILC Chair signed off on the SPIL 2017 - 2020 on behalf of the full Indiana Council.

4 - All 10 CIL Directors were provided opportunity to share direct input/feedback with the Indiana SILC and its SPIL Committee on the SPIL 2017 - 2020 prior to their opportunity to sign off on the amended plan document. Majority of the Indiana CIL Directors (8 of 9) signed off on the SPIL 2017 - 2020.

5 - The DSE (VR) Director reviewed the final draft of the SPIL 2017 - 2020 document and signed off on the plan document on behalf of the DSE.

6 - The Indiana SILC Executive Director submitted the SPIL 2017 - 2020 final plan document in Track Changes via email to ACL on Dec. 12, 2019. SPIL 2017-2020 Extension & Amendment notes were attached to the email submission to ACL and referenced the changes made in response to the conditional approval necessary changes request received on Sept. 30, 2019.

SPIL 2021 - 2023 DEVELOPMENT

The Indiana SILC SPIL Committee worked diligently to lead the drafting of the SPIL 2021 - 2023 during FFY 20. The SPIL Committee consisted of Council Members, Council Staff, CIL Directors (inclusive of the SILC CIL Director Representative) and CIL Staff.

1 - During the beginning of FFY2020, the SPIL Committee met a handful of times in-person and at length to develop SPIL Goals & Objectives and determine the best way to monitor and evaluate the implementation of the SPIL. As a result of COVID-19, the SPIL Committee had to shift how it met and communicated to finish the drafting of SPIL 2021 - 2023 and met virtually, as needed. In addition, the

SPIL Chair and SILC Executive Director worked one-on-one between SPIL Committee meetings to further support the development efforts of the plan.

2 - The Indiana SILC and the SPIL Committee utilized the large amount of feedback it received from its peers with disabilities (and other stakeholders) at its Disability Listening Session in November 2019 and other feedback it received at its public meetings prior to and during FFY 20 to assist it with the development/drafting of the plan.

3 - All 10 CIL Directors were provided opportunity to share direct input/feedback with the Indiana SILC and its SPIL Committee on the SPIL 2021 - 2023 prior to their opportunity to sign off on the plan document. The CIL Director from Northwest Indiana responded in writing to the SILC/SPIL Committee she refused to provide input to the plan. Majority of the Indiana CIL Directors (8 of 9) signed off on the SPIL 2021 - 2023.

4 - The DSE (VR) Director reviewed the final draft of the SPIL 2021 - 2023 document and signed off on the plan document on behalf of the DSE.

5 - The Indiana SILC received the final draft of the SPIL 2021 - 2023 from the SPIL Committee for review and any final feedback in June 2020. No additional feedback was provided by the Indiana SILC to the SPIL Committee and no changes were made to the final draft plan. As such, and with a majority of the Center Directors and DSE in agreement to sign the plan, the SILC voted/approved for the SILC Chair to signed the SPIL 2021 - 2023 on behalf of the full Indiana Council and for the SILC Executive Director to submit the SPIL 2021 - 2023 to ACL-OILP at its public meeting on June 24, 2020.

6 - The Indiana SILC Executive Director submitted the SPIL 2021 - 2023 final plan as a 508 compliant document along with the needed CIL Director signatures to ACL-OILP on June 30, 2020.

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

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

For this reporting year, the following activities took place to assist the SILC with monitoring, reviewing and evaluating SPIL implementation:

The Indiana SILC partnered with the Indiana Governor's Council for People with Disabilities and hosted and conducted a Disability Listening Sessions specifically for its peers with disabilities in November of 2019 as part of the pre-conference for the state annual Indiana Conference on Disability at the Marriott in downtown Indianapolis, Indiana. Over a hundred individuals from all over the state registered to attend with a large majority being people with disabilities. More than eighty individuals attended the event. This Listening Session was facilitated by the INSILC Executive Director.

The SILC ensured members of the public had the opportunity to share IL-related feedback at all its quarterly public meetings for FFY 2020 by adding a meeting agenda item for public comment.

The SILC used the feedback it received from its public meetings and at its Disability Listening Session

to support the SILC with monitoring, reviewing and evaluating the implementation of SPIL 17-20.

Unfortunately, once again, the Indiana SILC continued to experience challenges with CIL Directors when trying to capture data/information from their Centers activities related to SPIL implementation. Most CIL Directors were only willing to provide the SILC with copies of their PPR (704) reports for the SILC to use to monitor, review and evaluate the SPIL.

(C) Coordination With Other Disability Councils

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

INDIANA STATE REHABILITATION COMMISSION

- SILC Council Member, Fred Vaiana - serves as a Commission Member in an ex-officio seat for the SILC as its designee
- SILC Executive Director, Amber OHaver - serves as a Commission Member as a community advocate with a disability; is also the Chair of the Outreach and Membership Committee

INDIANA DISABILITY RIGHTS - INDIANA PROTECTION & ADVOCACY SERVICES COMMISSION

- SILC Executive Director, Amber OHaver - serves as the Chair of the Commission and as the Chair of the Membership Committee

INDIANA INSTITUTE ON DISABILITY & COMMUNITY (INDIANA UCEDD)

- SILC Executive Director, Amber OHaver - serves as a Member of its Consumer Advisory Committee

(D) Public Meeting Requirements

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

All Indiana SILC regularly scheduled public meetings and all SILC public hearings/forums hosted by the SILC were posted in accordance with Indiana's Open Door/Public Access laws. Additionally, these meetings, hearings, and forums were posted several weeks, sometimes several months, in advance on the SILC website. Annual public meeting schedules for the SILC were posted on the SILC website just prior to both calendar years of the reporting year.

The SILC ensured its Disability Listening Session hosted in November of 2019 hosted in downtown Indianapolis, Indiana was also open to the public and sufficient advanced notice of this event was provided a month in advance.

To further ensure Open Door compliance by the Indiana SILC, it worked with the Indiana Public Access

Counselor (Director/Lead of the state's Open Door agency/department) on a regular basis for technical assistance/guidance for both the SILC and maintain its compliance with Indiana Open Door/Public Access Laws. Even as COVID-19 Executive Orders issued by the Governor of Indiana temporarily changed sections of the Open Door law impacting the ability of the Indiana SILC to meet in-person and post notice of its public meetings at onsite meeting locations, the SILC shifted its public meetings to a virtual format and diligently worked with the Indiana Public Access Counselor to ensure it remained in compliance with the Open Door law.

The SILC also contacted the Indiana Public Access Counselor in between its meetings for additional Open Door/Public Access technical assistance related to other SILC-related business.

Item 2 - Other Activities

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

The Indiana SILC utilized funds outside of Part B funds to conduct Resource Development and Public Policy and Systems Advocacy activities by the SILC Executive Director and other SILC staff in line with SPIL 2017 - 2020.

The SILC secured fee-for-service opportunities and contracts where the SILC was compensated for conducting disability-related presentations, trainings and workshops for universities/colleges and fellow non-profit and for-profit entities in Indiana. For one contract, the SILC was compensated for conducting and organizing systemic advocacy efforts to address disability-related transit and mobility issues.

The SILC also secured a large grant for FFY 19 and FFY 20 from the Indiana Developmental Disabilities Council (the Indiana Governor's Council for People with Disabilities) to develop and conduct an advanced systems advocacy leadership training pilot for its Hoosier peers with disabilities from all over the state.

The SILC Executive Director and SILC Director of Public Policy & Systems Advocacy also in engaged in a minimal amount of lobbying with members of the Indiana General Assembly during FFY 20 for a bill attempting to eliminate/mitigate discrimination against Parents with Disabilities in Indiana. Funds used to support these efforts/activities were non-federal, unrestricted funds.

Section E - Training and Technical Assistance Needs

Section 721(b)(3) of the Act

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

Training And Technical Assistance Needs	Choose up to 10 Priority Needs --- Rate items 1-10 with 1 being most important
Advocacy/Leadership Development General Overview	

Training And Technical Assistance Needs	Choose up to 10 Priority Needs --- Rate items 1-10 with 1 being most important
Community/Grassroots Organizing	1
Individual Empowerment	2
Systems Advocacy	3
Legislative Process	4
Applicable Laws	
General overview and promulgation of various disability laws	
Americans with Disabilities Act	
Air-Carrier's Access Act	
Fair Housing Act	
Individuals with Disabilities Education Improvement Act	
Medicaid/Medicare/PAS/waivers/long-term care	
Rehabilitation Act of 1973, as amended	
Social Security Act	
Workforce Investment Act of 1998	
Ticket to Work and Work Incentives Improvement Act of 1999	
Government Performance Results Act of 1993	
Assistive Technologies	
General Overview	
Data Collecting and Reporting	
General Overview	
PPR/704 Reports	
Performance Measures contained in Program Performance Report	
Dual Reporting Requirements	
Case Service Record Documentation	
Disability Awareness and Information	
Specific Issues	10
Evaluation	
General Overview	
CIL Standards and Indicators	
Community Needs Assessment	
Consumer Satisfaction Surveys	
Focus Groups	
Outcome Measures	
Financial: Grant Management	
General Overview	
Federal Regulations	
Budgeting	
Fund Accounting	
Financial: Resource Development	
General Overview	
Diversification of Funding Base	
Fee-for-Service Approaches	
For Profit Subsidiaries	

Training And Technical Assistance Needs	Choose up to 10 Priority Needs --- Rate items 1-10 with 1 being most important
<p>Collaborations with In-State Stakeholders</p> <p>CIL Board of Directors</p> <p>General Overview</p> <p>Roles and Responsibilities</p> <p>Policy Development</p> <p>Recruiting/Increasing Involvement</p> <p>Volunteer Programs</p> <p>General Overview</p> <p>Other</p> <p>Optional Areas and/or Comments (write-in)</p> <ul style="list-style-type: none"> - Virtual Accessibility Best Practices - An In-Depth View - Exercising and Expanding SILC Activities and Advocacy, Per its Authorities - Abuse, Drama & Trauma within Independent Living - Innovative Practices and Collaborations to Address LTC/LTSS/HCBS, Caregiver Crisis & Institutional Bias 	9

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

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

Section A - Comparison of Reporting Year Activities with the SPIL

Item 1 - Progress in Achieving Objectives and Goals

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

Goal: Grow the Independent Living Network

Objectives & Activities to be Achieved:

A) Establish at least one new Center for Independent Living (CIL) in an unserved area. (Accomplished)

- 1) Educate the General Assembly on Independent Living. (Accomplished)
- 2) Arrange meetings for ongoing discussions with Designated State Entity (DSE). (Accomplished)
- 3) Arrange meeting with consumer grassroots disability groups, Division on Disability and Rehabilitative Services (DDRS), and legislators. (Accomplished)
- 4) Conduct outreach and identify existing consumer grassroots disability groups in unserved areas. (Accomplished)

B) Update Demographic Study of People with Disabilities and Funding Formula Allocation Model Strategy for Centers for Independent Living. (No progress to report)

- 1) Research and request a proposal and scope of work from potential contractors. (Accomplished)

C) Develop and implement Independent Living Outreach and Awareness plan, with an emphasis on unserved areas. (No progress to report)

- 1) Redevelop and update INSILC website as needed. (Accomplished)
- 2) Establish a social media presence with postings. (Accomplished)
- 3) Research and request proposals and scopes of work for plan development. (Accomplished)
- 4) Design, print, and distribute new marketing materials and update as needed. (Accomplished)
- 5) Host Independent Living action track within an Indiana Disability Conference. (Accomplished)
- 6) Organize and conduct presentations and educational clinics on IL and disability issues within underserved and unserved areas. (Accomplished)
- 7) Present at Indiana conferences, seminars, sessions, and classes on IL and disability issues. (Accomplished)
- 8) Organize INSILC marketing database and update as needed. (Ongoing)

D) Conduct a Statewide Needs Assessment of People with Disabilities. (No progress to report)

- 1) Identify needs of people with disabilities in all areas of the state. (Ongoing)
- 2) Identify consumer grassroots disability groups in unserved areas. (Ongoing)
- 3) Research and request a proposal and scope of work from potential contractors. (Accomplished - but

based on the bids received a statewide needs assessment was determined to be too costly and the SILC Resource Plan did not provide/allow for sufficient funding to support cost of staff or a contractor to complete this objective/activity during this SPIL. The SILC is instead continuing to conduct Disability Listening Sessions throughout the state to informally capture the IL needs of its peers with disabilities.)

E) Mentor existing consumer grassroots disability groups/entities on Independent Living in underserved and unserved areas. (Accomplished)

- 1) Identify consumer grassroots disability groups in underserved areas seeking IL mentorship. (Ongoing)
- 2) Identify CILs willing to provide mentorship to consumer grassroots disability groups in unserved areas. (No progress to report)
- 3) Identify potential staff mentors within CILs to provide mentorship. (No progress to report)
- 4) Develop mentorship model. (No progress to report yet)

F) Secure funding for CIL fifth core service - Transition. (No progress to report)

- 1) Obtain at least 40,000 dollars in funding annually per CIL for the new fifth IL core service of transition. (No progress to report. CILs have been unable to secure funding)
- 2) Identify sources of transition funding. (No progress to report)
- 3) Inform stakeholders of the new fifth IL core service of transition. (Accomplished)

G) Conduct Resource Development for necessary capacity of INSILC operations. (Accomplished)

- 1) Identify additional funding opportunities to increase INSILC capacity and increase the function of INSILC. (Accomplished)
- 2) Obtain funding to support provision of IL services for CILs and consumer goals, services, and activities. (No progress to report yet)
- 3) Increase or maintain number of employees to carry out the functions of the SPIL implementation and evaluation. (Not Accomplished - INSILC lost two employees during FY 2020. One employee resigned and one employee was terminated as a result of COVID-19 related INSILC funding cuts by the DSE)
- 4) In conjunction with agency support, create and implement an INSILC resource development plan. (Ongoing)
- 5) Secure Salesforce account for email and marketing database/platform and update as needed. (Ongoing - The SILC has determined the need to shift direction for cost savings purposes and utilize a different, more user- friendly platform for its email and marketing/outreach efforts.)

Goal: Improve INSILC's organizational and operational effectiveness

Objectives & Activities to be Achieved:

A) INSILC membership reflects Independent Living philosophy. (Accomplished)

- 1) Develop a method for recruiting applicants and receiving applications consistent with the IL philosophy and the requirements of the law. (Accomplished)
- 2) INSILC establishes a membership nomination committee to vet applicants. (Accomplished)
- 3) Forward a list of qualified, knowledgeable, and diverse candidates for appointment to the Council to the Governor's office for consideration, at least annually. (Accomplished)
- 4) Provide training to council members, CILs, other providers, and people with disabilities. (Accomplished)
- 5) Complete and Submit an assessment of the Councils training needs to the SILC Technical Assistance Center on an annual basis. (Accomplished)
- 6) Develop, implement, and update operational, fiscal, and personnel policies and procedures at least annually. (Accomplished)

- 7) Develop, adopt, and control budget and allocate funds consistent with identified priorities at least annually. (Accomplished)
- 8) Develop and implement a new member orientation. (Accomplished)
- 9) Create a training schedule with topics adjusting as appropriate based on need. (Accomplished)
- 10) Create Employee Handbook, personnel policies and procedures, and maintain and update as necessary. (Accomplished)
- 11) Meet with the Governor's Office to discuss and determine process for forwarding vetted applicants and appointing members. (Accomplished)

B) INSILC fulfills all the duties in Section 705(c)(1) regarding the State Plan for Independent Living (SPIL). (Accomplished)

- 1) Document a process for the development of the SPIL with the CILs. (Accomplished)
- 2) Solicit input from people with disabilities and other stakeholders for the development of the SPIL. (Accomplished)
- 3) Monitor, review, and evaluate the implementation of the SPIL. (Accomplished)
- 4) Collaborate with the CILs to design tools and processes to evaluate implementation of the SPIL and assess consumer satisfaction with services. (Ongoing - the SILC and CILs continue to struggle working through this activity; CIL consumer satisfaction information was not shared with the SILC. INSILC instead did its best to assess consumer satisfaction by in FY20 by conducting Disability Listening Sessions and individual outreach to its peers with disabilities for feedback)
- 5) Submit and maintain copies of reports requested by the Administration for Community Living (ACL) Administrator. (Accomplished)

C) INSILC documents coordination activities, in the SPIL and otherwise. (Accomplished)

- 1) Identify entities with which activities are coordinated. (Accomplished)
- 2) Document coordination activities with identified entities. (Accomplished)

D) INSILC conducts hearings and forums necessary to carry out its duties. (Accomplished)

- 1) Notify media, database contacts, and the public of meetings in accordance with Indiana's Open Door Law. (Accomplished)
- 2) Create and establish a hearing and forum schedule. (Accomplished)
- 3) Maintain copies of advanced notice, registration lists, minutes, and other documentation of input gathered at hearings and forums conducted, as appropriate. (Accomplished)
- 4) Schedule hearings and forums that are physically accessible. (Accomplished)

E) INSILC shall have a resource plan sufficient to carry out the functions of the SILC. (Ongoing - for the reporting year, the SILC still believes its current resource plan was insufficient to support the SILC in successfully and fully accomplishing its duties & authorities)

- 1) Reallocate funding within the confines of the resource plan total budget based on level of need. (Accomplished)
- 2) Conduct employee performance reviews annually. (Partially Accomplished)
- 3) Maintain personnel records as needed. (Accomplished)
- 4) Provide oversight of staff and personnel duties to ensure no conflict of interests. (Accomplished)

Goal: Conduct Systems Advocacy

Objectives & Activities to be Achieved:

A) Educate the General Assembly on Independent Living and Advocate for additional funding. (No

progress to report)

- 1) Organize and conduct Independent Living and Disability Awareness events at the Statehouse. (No progress to report)
- 2) Educate the General Assembly utilizing the updated funding formula, demographic study, cost savings report and other pertinent data, and CIL success stories. (No progress to report)
- 3) Create issue brief(s) on IL priorities for additional IL funding and share with members of General Assembly. (Accomplished)

B) Advocate for Individuals with disabilities to have increased access to affordable, accessible, integrated housing. (Accomplished)

- 1) Provide public input and testimony as appropriate. (Accomplished)
- 2) Participate in Indiana Housing and Community Development Authority (IHCDA) Workgroups as appropriate. (No progress to report yet)
- 3) Present and support housing-related trainings, educational seminars, conferences, programs and efforts. (Accomplished)
- 4) Educate applicable entities on IL and benefits of visitable and universal design. (Accomplished)
- 5) Meet with providers of Community Development Block Grant (CDBG), Emergency Solutions Grant (ESG), (HOME), and Continuum of Care (COC) funding. (Accomplished)
- 6) Participate on relevant committees, workgroups, focus groups, etc. (Accomplished)

C) Advocate for Individuals with disabilities to have increased access to adequate home and community-based supports. (Accomplished)

- 1) Meet with Bureau of Developmental Disabilities (BDDS), Division of Aging (DOA), and Division of Mental Health and Addiction (DMHA). (Accomplished)
- 2) Educate HCBS providers/staff on person-centeredness and consumer choice/direction. (Accomplished)
- 3) Participate on Medicaid HCBS transition plan committee. (No progress to report)
- 4) Participate on relevant committees, workgroups, focus groups, etc. (Accomplished)

D) Advocate for Individuals with disabilities to have increased options for competitive, integrated, high quality jobs with benefits and opportunities for advancement. (Accomplished)

- 1) Participate on Employment First committee. (Accomplished)
- 2) Provide Youth Transition mentorship on employment. (Accomplished)
- 3) Provide Technical Assistance for Work One centers for employment of people with disabilities. (No progress to report yet)
- 4) Connect with one large employer to discuss development of creation for a job referral/training program. (No progress to report)
- 5) Meet with other entities such as VR, Department of Workforce Development (DWD), and Work One centers to discuss collaboration with large employer for job referral/training program. (No progress to report)
- 6) Participate on relevant committees, workgroups, focus groups, etc. (Accomplished)

E) Advocate to increase transitions of individuals with disabilities residing in institutional settings into integrated community-based settings. (No progress to report)

- 1) Participate on the Medicaid HCBS transition planning committee. (No progress to report)
- 2) Meet with DOA, Area Agencies on Aging (AAAs)/Aging and Disability Resource Centers (ADRCs), for Money Follows the Person (MFP), No Wrong Door, and Pre- Admission Screening and Resident Review (PASRR) improvements. (Accomplished)

- 3) Meet with Indiana Medicaid Director. (No progress to report)
- 4) Participate on relevant committees, workgroups, focus groups, etc. (Accomplished)

F) Advocate for Individuals with disabilities to have increased access and options to accessible, affordable transportation. (Accomplished)

- 1) Collaborate with and support groups/organizations currently working to address transportation barriers impacting people with disabilities. Incorporate these entities in efforts/events when raising awareness of Independent Living. (Accomplished)
- 2) Provide public input and testimony, as appropriate. (Accomplished)
- 3) Educate housing developers, urban/city and rural planners, transportation providers, legislators, etc. on importance of better alignment of transit to affordable, accessible housing, employers, and healthcare supports/services. (Accomplished)
- 4) Participate on relevant committees, workgroups, focus groups, etc. (Accomplished)

G) Identify and educate private funders/foundations about Independent Living. (No progress to report yet)

- 1) Create lists/database of potential funders. (No progress to report)
- 2) Track contact and communication efforts with potential funders. (No progress to report)
- 3) Meet with potential funders. (No progress to report)

Item 2 - SPIL Information Updates

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

- SILC contract was amended to include an additional \$1,217.00 of Part B Funding in early FFY 20.
- \$24,750 in Innovation & Expansion funding was cut from the SILC Resource Plan for SILC operations/functions in FFY 20.
- Appointment of one new SILC Member with disabilities, NOT employed by a CIL or State Agency, on January 1, 2020.
- Reappointment of one current SILC Member with disabilities, employed by a CIL, on January 1, 2020.
- Resignation/removal of one SILC Member with disabilities, NOT employed by a CIL or State Agency during FFY 20.

Section B - Significant Activities and Accomplishments

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

INSILC ADVOCATES IN ACTION (AiA) ADVANCED SYSTEMS ADVOCACY LEADERSHIP TRAINING

The Indiana SILC believes in the power of advocacy and recognized that Indiana was not only in need of a stronger disability voice... Indiana was in need of a strong disability advocacy network led by individuals with disabilities achieving strong advocacy outcomes. In the current political climate, the lives and rights of people with disabilities are consistently under attack. We needed to begin building an Army of Advocates (with Disabilities). The SILC recognized the time was now for people with disabilities to have more than just a token seat at the table! It was time for people with disabilities to be truly heard and acknowledged and to be mentors, advocates and activists. It was time for the "voiceless" with disabilities to empower others living with disabilities to BE THE VOICE and learn how to lead and become Advocates in Action. SILC staff knew that advocacy and actions conducted by their peers with disabilities would empower them to take action and in turn empower their families, friends, caregivers, and others to become meaningful allies strengthening the disability voice and community. Learning/practicing how to become a strong advocate helps us to understand our civil/human rights, communicate our needs effectively and work to have those needs met at a systemic level. These actions also help to promote the rights of people with disabilities within the broader community and act as a safeguard against abuse, neglect, discrimination, and institutionalization.

As such, in FFY 19 & FFY 20, the SILC developed and conducted an advanced disability leadership and systemic advocacy training program and practicum pilot in Indiana specifically designed BY the SILC/SILC staff (who were all people with disabilities) FOR its Hoosier peers with disabilities to receive training from national disability rights experts, who all identified as having a disability, as well. The goal of the program was to build greater capacity within disability change agents by bolstering their ability to affect public policy, foster social change, and ultimately--advance the independence, productivity, and inclusion of people with disabilities in all aspects of society.

The SILC Advocates in Action program offered:

- Intensive, highly-interactive training from national disability experts (with disabilities) on disability leadership & advocacy;
- Mentoring from subject-matter experts on systems change, intersectional justice, legislative policy influence, leadership and professional/personal development, etc.
- Ongoing technical assistance from program trainers and experts in the field;
- A practicum that includes required strategic group/individual project activities, the creation of personal systems advocacy goals, action plans with measurable metrics, and with hands-on training and guidance.

The SILC selected fifteen (15) of its Hoosier peers with disabilities for the Advocates in Action program and strengthened and enhanced:

- Effective, solution-oriented advocacy skills;
- Persuasive communications in conflict resolution and negotiations;
- Knowledge of navigation of local, state, and national political systems;
- Project planning and implementation;
- Event & Grassroots organizing proficiencies;
- Community-building understanding;
- Effective leadership capabilities.

The Advocates in Action Training Sessions took place on the following dates:

- June 14 & 15, 2019
- July 12 & 13, 2019
- August 23 & 24, 2019
- September 20 & 21, 2019
- October 11 & 12, 2019

Speakers/Trainers for the Advocates in Action program represented cross-disability values of the IL philosophy (mobility, ID/D, Deaf, blind/low-vision, etc.) and diverse racial/ethnic and religious

backgrounds and LGBTQIA+ identities. Speakers/Trainers and the session training topics were as follows for each AiA Training Session:

- Session 1 - Lydia X. Z. Brown
- Session 2 - Dessa Cosma
- Session 3 - Kareem Dale & Rebecca Cokley
- Session 4 - Dessa Cosma & Imani Barbarin
- Session 5 - Priya Penner

INSILC LEGISLATIVE ADVOCACY TRAINING (VIRTUAL) WORKSHOP SERIES

SILC staff developed/promoted/conducted a Three-Part Legislative Advocacy Training (Virtual) Workshop Series for its peers with disabilities to provide advocacy education and skills training to prep individuals for the 2020 Legislative Session in December of 2019 and January of 2020. Activities for the three workshops engaged advocates with disabilities to:

- * Understand the political process and how to navigate new legislation and use modern advocacy tools
- * Learn about COVID-19 policy and practice changes at the Statehouse
- * Gain in-depth knowledge about potential bills for the 2021 session and discuss the impact our disability community
- * Engage in social media efforts and craft legislative testimony and comments
- * Connect and collaborate with their peers with disabilities and fellow community leaders, allies, activists and legislators to start taking action on issues important to you
- * Acquire better insight on the difference between disability rights and disability justice and the importance of collective liberation the political landscape and navigating new legislation

Nearly 90 individuals registered to take part in the virtual workshop series (with a large majority being people with disabilities) and more than 60 registered individuals actually attended each workshop. A handful of Indiana State Legislators took part as speakers in the workshop series so attendees could learn from them how best to communicate/interact with policy makers as a means to help lessen the intimidation factor when talking with legislators. Attendees were also afforded the time to share disability-related issues with the legislators. Several of the individuals with disabilities who attended the workshop series participated/engaged in the 2020 Indiana Legislative Session as a direct result of the SILC Legislative Advocacy Training Workshop Series.

INSILC PUBLIC APOLOGY/STATEMENT OF SOLIDARITY

The Indiana SILC drafted/pushed out a Public Apology and Statement of Solidarity nationwide and statewide in June 2020. The text of this apology is as follows:

In October 2016, during an Indiana Statewide Independent Living Council (INSILC) public meeting at the Indiana Government Center - a young, Black woman around 16 years in age was providing public comment for the Council. When she ran over her time limit to speak, she was asked to stop and when she did not, we requested the Government Center armed security officer in the room step in and remove the mic from her proximity and have her go back to her seat in the room. The young woman abided by the security officer's instruction and provided him with her statement she was reading. He then walked over and handed her statement to the Council. The Council then continued its meeting.

The problem is... We screwed up. We screwed up big time. Our action and behavior at the meeting with the young woman were inexcusable. We should have been listening to her, learning from her and supporting her for her bravery and activism. Instead, our action unintentionally contributed to the ongoing systemic racism, harm, trauma and oppression in our communities. We failed her. We failed our Black and Brown peers with disabilities. We failed the Black and Brown communities as a whole.

And we failed to uphold our mission to empower our peers with disabilities to lead and control their own lives. And for all this, we are sincerely sorry.

We acknowledge it has taken us far too long to recognize and understand the terror our Black and Brown peers with disabilities endure every day. We still have much to unlearn and do to dismantle the ingrained belief systems that reinforce bias in our country, communities and circles and in our own policies and practices that continue to deeply wound our multiply-marginalized disabled peers. We know doing this worthwhile work is not a sprint, but a life-long journey we believe will result in real change. We don't pretend to know all the answers and we know we may stumble from time to time but...

We know we can do better, we know we must do better, and we WILL do better!

We also know that this apology and statement of solidarity is meaningless without meaningful action. As such, INSILC commits to the following proactive ways our organization will provide opportunities that center the voices, experiences and needs of our multiply marginalized peers built on a bedrock of anti-racism. Our roles as Council Members and staff of INSILC comes with privilege and with this privilege comes the responsibility of dismantling systems that were designed to purposely oppress, exclude, marginalize and mistreat people of color.

Specific actions INSILC has completed and commits to completing in the coming months and years:

- INSILC moved its meetings out of the Government Center (against state wishes) in 2018 and no longer hosts any of its Council meetings in environments where the host site/location requires law enforcement or other armed security to be present. Nor does INSILC call on such individuals if anyone violates an inconsequential procedure. We will continue this practice and commit to calling out and condemning such policies/practices in other arenas.
- INSILC staff and Council Members will complete an intensive six-month implicit bias training led and designed by a Black, disabled racial equality educator/trainer who is being compensated for her labor. This training will be completed by ALL Council Members and staff and will include both group-based work as well as individual coaching for each staff and Council Members. Additional "ism" trainings will continue into 2021 and beyond.
- INSILC will prioritize Black, Brown and other multiply-marginalized individuals and owned companies for its hiring and contract work.
- INSILC will review its existing policies, procedures, and practices and seek input from its peers most marginalized in the disability community on how to ensure equitable participation in its programs, events and activities that will center the experience and voices of our peers most marginalized in the disability community.
- INSILC, its Council Members and staff will actively work to check our privilege and leverage the power we bring to spaces to amplify the voices of our multiply-marginalized peers with disabilities and provide the support necessary for them to succeed as leaders in the Independent Living Movement.
- INSILC will transform how it conducts its outreach and shift its practices to authentically listen to and capture the lived experiences of our most marginalized peers with disabilities in their own neighborhoods, communities and spaces where we are welcome.
- INSILC will prioritize recommendation of new Council Members to the Governor for appointment to serve on INSILC who are our Black and Brown peers with disabilities.
- INSILC thanks you for your grace and space as we continue to learn and grow and undertake difficult anti-racism work and hope this will be the first step toward healing and building trust with our peers with disabilities who we have hurt, alienated or made to feel unwelcome.

To our Black and Brown peers with disabilities - We hear you. We see you. We love you. And we support you.

In Solidarity,

The INSILC Council & Staff

INSILC RACIAL EQUITY PRIORITIZATION

During FFY 20, the Indiana SILC took multiple steps to begin shifting its culture and prioritize racial equity in its work. This began with taking ownership of and apologizing for the October 2016 incident with the young girl at a SILC meeting and issuing a public (and private) apology and a public statement of solidarity detailing its current and future actions of commitment.

In the spring of 2020, the SILC began working with trainer, Reyma McCoy McDeid, on a four-part intensive Implicit Bias training program. This training consisted of the following:

Part 1: Initial 4-hour virtual training on Implicit Bias (with ALL SILC Council Members & Staff)

Part 2: 1:1 Virtual Coaching Meetings with Trainer, Reyma McCoy McDeid (with all SILC Council Members & Staff)

Part 3: Once 1:1 Coaching Meetings were completed - Virtual Reconvening Meeting of ALL SILC Council Members & Staff with Trainer, Reyma McCoy McDeid, on Implicit Bias Progress/Challenges/Next Steps for the SILC

Part 4: SILC Retreat - Continued Focus on Implicit Bias & Addressing additional "isms" training with Trainer, Reyma McCoy McDeid

Every Council Member & Staff completed all 4 parts of the Implicit Bias Training Program.

In addition, the SILC Executive Director partner with Reyma McCoy McDeid and the Texas SILC Executive Director to present a workshop at the 2020 NCIL Conference on Intersectionality & Diversity encouraging fellow SILCs to embrace and push through being uncomfortable and do the necessary work to address and dismantle racism within the Independent Living movement and within SILCs and their state IL Network.

INSILC COVID-19 LETTER OF SUPPORT TO THE HOOSIER DISABILITY & AGING COMMUNITIES (INCLUSIVE OF THE INSILC NOTICE OF MY HEALTHCARE RIGHTS FORM & KNOWLEDGE IS POWER RESOURCE)

In April of 2020 in response to the COVID-19 pandemic and as an act of love and solidarity with the Hoosier Disability & Aging Communities, the Indiana SILC released the following public letter:

Dear Hoosier peers with disabilities, older adults, family members, and our partners/allies,

During these uncertain and unnerving times, the Indiana Statewide Independent Living Council (INSILC) and its staff extend our solidarity and support to you amidst this COVID-19 pandemic.

As Hoosiers with disabilities, we know and understand how COVID-19 is impacting Hoosiers in our disability community differently than other Hoosier citizens. We see and feel the strain it is placing on our public systems compromising our healthcare, home care supports, education, employment, and transportation services, which can be especially terrifying for those of us who struggle to navigate everyday barriers and utilize and rely on these public services to maintain our independence and life in the community. Many of us are sensing with increasing urgency the need to take measures to be safe even though safety and security often already feel scarce for us. We are frightened that what little choice and control we currently have over our lives may be in jeopardy. The risk of institutionalization has never been more real. And for some of us, it feels like death may be lurking just around the corner.

Exacerbating these feelings and concerns, is the distressing and disturbing news about policies and practices being implemented across the country of discriminatory healthcare rationing and denials for

much needed accommodations putting all our lives as disabled individuals at great risk. INSILC finds these types of policies and practices to be unacceptable! #WeAreEssential - and as individuals with disabilities, we have the right to be free from discrimination, even during this time of emergency we are ALL facing.

Neil Romano, the Chair of the National Council on Disability, made this point in an open letter to federal authorities on March 18, 2020:

"The lives of persons with disabilities continue to be devalued in the medical profession due to pervasive negative biases and inaccurate assumptions. The belief that people with disabilities have a lesser quality of life and are less valuable to society has led to deadly consequences - physicians choosing to provide medically scarce resources to non-disabled or healthier people - [which is] a violation of human rights, civil rights and a reinforcement of the belief that people with disabilities are lesser-than and less deserving of life itself."

And this past Saturday on March 27, 2020, the Health and Human Services Office of Civil Rights issued a bulletin to protect our peers with disabilities from unlawful discrimination in decisions about their treatment during the COVID-19 crisis which states that:

"...persons with disabilities should not be denied medical care on the basis of stereotypes, assessments of quality of life, or judgments about a person's relative "worth" based on the presence or absence of disabilities or age. Decisions by covered entities concerning whether an individual is a candidate for treatment should be based on an individualized assessment of the patient and his or her circumstances, based on the best available objective medical evidence."

Recognizing the multiple and intersecting social identities embodied by our peers with disabilities, INSILC strives to ensure that its peers in the disability community are provided the knowledge and tools necessary to be resilient self-advocates and advocates for others in all efforts to defend and uphold their human and civil rights. This includes information based on anti-discrimination laws which is essential during times of emergency or crisis to safeguard access to effective communications, needed reasonable modifications or accommodations and vital healthcare services and medical equipment in order to prevent any unnecessary deaths of our peers with disabilities.

Therefore, on our website at <https://www.insilc.org/covid-19/> you will find a document titled "Notice of My Healthcare Rights". This is a form that our peers with disabilities, including older adults with conditions of aging and our peers with disabilities with limited English proficiency, can use when seeking or receiving healthcare. The second page of the document contains contact information for federal, state and local agencies and organizations that are available to assist you with additional resources, referrals and legal and advocacy efforts if you feel as though your rights have been or are being violated. To meet various accessibility needs of our disability community, this document/form is provided on our website at <https://www.insilc.org/covid-19/> in English and Spanish, in PDF and plain text, in standard and large print, and in easy-to read, plain language. We hope that this document will help inform, support and empower you if you need to seek and receive healthcare during this trying time.

In addition to the "Notice of My Healthcare Rights" document, you will also find on our website at <https://www.insilc.org/covid-19/> the "KNOWLEDGE IS POWER" document which lists regularly updated, disability-specific COVID-19 resources and information we highly recommend from a majority of organizations directed and managed by our peers with disabilities. Again, to meet various accessibility needs of our disability community, this document is provided on our website in a PDF and plain text and standard and large print.

If you believe your rights as one of our peers with disabilities have been violated as a result of unlawful

policies/practices of healthcare rationing or denial of reasonable accommodations or you believe you have a family member with disabilities who's rights have been violated, please reach out to us to share your story or experience and seek additional direction/guidance at info@insilc.org.

To file an official complaint or report a disability-related rights violation, please contact Indiana Disability Rights at 1-800-622-4865 or info@indianadisabilityrights.org.

These are days of both fear and fortitude, and we hope you can find strength in us and in our disability community because #WeAreEssential.

Much Love and Solidarity,

The INSILC Team

Section C - Substantial Challenges

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

INSILC FACILITATED COMMUNICATION EFFORTS WITH EVERYBODY COUNTS

After two years of time and effort by the Indiana SILC to get Everybody Counts to come to the table for facilitated communication, in January of 2020, the SILC was contacted by Everybody Counts who was finally willing to meet with the SILC to begin addressing years of longstanding issues/conflict between the SILC and Everybody Counts with the support of a neutral facilitator. Negotiating terms of agreement for the facilitated communication took place between the SILC and Everybody Counts for the remainder FFY 20. National Disability Justice Leader, Reyma McCoy McDeid, was brought on as a contractor/consultant to guide and assist the Indiana SILC with its efforts on this front.

EVERYBODY COUNTS HOSTILE, BULLYING, ABUSIVE PATTERN OF PSYCHOLOGICAL VIOLENT BEHAVIOR/COMMUNICATION

The Indiana SILC believes it is extremely important to share and note that while it continued to navigate through terms of an agreement for facilitated communication with Everybody Counts, their Executive Director and members of their staff continued to exhibit hostile, bullying, abusive behavior in their verbal and written communication toward Council Members and the SILC Executive Director. This behavior by Everybody Counts during the reporting year was not isolated to FFY 20. The behavior is not a new or recent occurrence but instead a dark deep-seated pattern of abusive and manipulative psychological violent behavior perpetuated toward the SILC and its staff that has been allowed to fester and go unchecked for nearly two decades. During the reporting year, the SILC Executive Director (and at times, the SILC Chair) received numerous amounts of lengthy emails from the Director of Everybody Counts consisting of threatening, harassing and bullying communication, often at all hours of the night. In addition, members of the SILC and the SILC Executive Director were also harassed, intimidated, bullied and screamed at by the Everybody Counts Director and their staff at public events and in public meeting spaces. This behavior has been extremely triggering and had a significant impact on the mental and emotional health and well-being of SILC Council Members and the SILC Executive Director (especially if they have a mental health-related disability) as they continued to engage in disability-related advocacy spaces in Indiana. On multiple occasions (in person and in writing) some Council Members and the SILC Executive Director were made fun of for their mental health disabilities by the

Director of Everybody Counts and her staff and were cursed at and called idiots and other hateful and derogatory names (which we will not share in this report). The persistent abuse experienced by SILC Members and SILC Staff may not be physical and visibly obvious, but study after study has shown that mental and emotional abuse can be just as damaging as physical abuse, sometimes even more so.

Not only has the behavior exhibited by Everybody Counts been triggering for and perpetuated harm toward members of the SILC and its Executive Director, but the behavior has also been traumatic for many of our other peers with disabilities in Indiana and across the country. The SILC has been contacted on numerous occasions from past Everybody Counts employees, Northwest Indiana community-based organizations and other national and statewide organizations/agencies and their staff and consumers who have also encountered the same pattern of abusive behavior. These entities and affiliated individuals have directly expressed deep concerns about the behavior of Everybody Counts to the Indiana SILC and its staff. One past employee of Everybody Counts even shared with the SILC Executive Director and a Council Member that they will no longer engage in any disability advocacy or in the independent living network in Indiana out of fear for their safety because of the bullying, intimidation and threats the individual has received from Everybody Counts.

In addition to sharing their concerns about the behavior of Everybody Counts, folks have also expressed to the Indiana SILC the concerns they have about the federal and state resources and funding used to support the abusive and destructive behavior of Everybody Counts. The SILC shares these same concerns and is deeply worried that a significant amount of time and funds are being wasted to perpetuate the continued patterns of abusive behavior exhibited by Everybody Counts instead of being used to provide Independent Living services to our peers with disabilities in Northwest Indiana.

Besides the multiple national, state and local entities (and individuals) that have shared their experiences with the Indiana SILC about how they have been impacted by the behavior of Everybody Counts, various entities (such as the Indiana DSE, national disability organizations and even federal agencies) have witnessed time and time again the abusive behavior exhibited by the Director of Everybody Counts and their staff toward the Indiana SILC and its staff. In one instance at the annual NCIL conference during a conference workshop, Everybody Counts stated openly to everyone in the workshop that it believed all Members of the Indiana SILC needed to be assassinated. The Indiana SILC takes these threats of violence seriously. However, Everybody Counts was never held accountable for this threat even though it was heard/witnessed by folks from the Administration on Community Living, Office of Independent Living, a major funder of Everybody Counts.

Moving forward, the Indiana SILC intends to communicate and work with the various entities that have witnessed the abusive pattern of behavior exhibited by Everybody Counts in hopes of discussing and determining strong accountability expectations and enforcement mechanisms to mitigate inappropriate and abusive behaviors for entities within a national and/or state IL Network.

LACK OF TIMELY, DIVERSE APPOINTMENTS OF COUNCIL MEMBERS BY THE GOVERNOR

The Indiana SILC continued to experience an immense amount of difficulty getting the Governor's Office to appoint new individuals and individuals needing to be re-appointed, especially our peers with disabilities from BIPOC communities. The SILC is required by state law to consist of 11 members and it has never met this requirement because of the lack of appointments made to the SILC by the governor. In addition, the SILC composition and any of its past appointments have only been individuals who identify as white or Caucasian.

The SILC conducted its annual membership campaign and vetted/recommended 6 individuals with disabilities who are BIPOC to the governor for appointment and NONE were appointed during the reporting year. This was a missed opportunity for the governor to support and adhere to his recent

public statement about his commitment to ensuring equity and inclusion in Indiana.

The SILC Executive Director engaged in ongoing communication with the Governor's Office about the SILC appointment recommendations stressing the operational importance of having a fully constituted and comprised SILC and the consequence of the loss of millions in IL funds if the Indiana SILC falls out of composition compliance as a result of untimely appointments by the governor. This ongoing communication did little to improve the timeliness of appointments or even result in any appointments made at all to the Indiana SILC by the governor during FFY 2020.

The following statement is from the DSE-The DSE representative on the SILC has expressed interest in playing an active role in improving communication across the IL network and ensuring equal opportunity for feedback from all 10 CILs on pertinent matters. Some of the strategies employed have been to increase communication with all CILs thru regular meetings and opening communication lines between the DSE and centers. Additionally, the DSE has increased 1:1 communication with two centers to work toward improved communication between the DSE and these two centers.

Section D - Additional Information

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

The SILC would appreciate the support and assistance from ACL-OILP (and the Indiana DSE) to help address and hold accountable Everybody Counts and its staff for their long-standing pattern of abusive behavior.

SUBPART VII - SIGNATURES

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

- Signed Digitally _____ 12/31/1969
SIGNATURE OF SILC CHAIRPERSON DATE

- _____ PHONE NUMBER
NAME AND TITLE OF SILC CHAIRPERSON

- Signed Digitally _____ 12/31/1969
SIGNATURE OF DSU DIRECTOR DATE

- _____ PHONE NUMBER
NAME AND TITLE OF DSU DIRECTOR