

State: **RHODE ISLAND**

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

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

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

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

FISCAL YEARS 2008 - 2010

Effective Date: October 1, 2007

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PART I: Assurances

Section 1: Legal Basis and Certifications

- 1.1 The designated State unit (DSU) eligible to submit the State Plan for Independent Living (SPIL or the plan) and authorized under State law to perform the functions of the State under the State Independent Living Services (SILS) and Centers for Independent Living (CIL) programs is Office of Rehabilitation Services. 34 CFR 76.104(a)(1) and (2); 34 CFR 364.22(a)
- 1.2 The separate State agency eligible to submit the plan and authorized under State law to provide vocational rehabilitation (VR) services to individuals who are blind is N/A (insert name of separate State agency). Indicate N/A if not applicable. 34 CFR 76.104(a)(1) and (2); 34 CFR 364.20(d) and 364.22(c) N/A
- 1.3 The Statewide Independent Living Council (SILC) that meets the requirements of section 705 of the Act and is authorized to perform the functions outlined in section 705(c) of the Act in the State is Rhode Island Statewide Independent Living Council. 34 CFR 364.21(a)
- 1.4 The DSU and, if applicable, the separate State agency authorized to provide VR services to individuals who are blind, and the SILC are authorized to jointly develop, sign and submit this SPIL on behalf of the State, and have adopted or otherwise formally approved the SPIL. 34 CFR 76.104(a)(7); 34 CFR 364.20(c) and (d)
- 1.5 The DSU, and, if applicable, the separate State agency authorized to provide VR services to individuals who are blind, may legally carry out each provision of the plan and will comply with all applicable Federal statutes and regulations in effect with respect to the three-year period it receives funding under the SPIL. 34 CFR 76.104; 34 CFR 80.11(c)
- 1.6 The SPIL is the basis for State operation and administration of the program. All provisions of the SPIL are consistent with State law. 34 CFR 76.104(a)(4) and (8)
- 1.7 The representative of the DSU and, if applicable, of the separate State agency authorized to provide VR services to individuals who are blind, who has the authority under State law to receive, hold, and disburse Federal funds made available under the SPIL and to submit the SPIL jointly with the SILC chairperson is Raymond A. Carroll, Administrator, Office of Rehabilitation Services. 34 CFR 76.104(a)(5) and (6)

Section 2: SPIL Development

- 2.1 The plan shall be reviewed and revised not less than once every three years, to ensure the existence of appropriate planning, financial support and coordination, and other assistance to appropriately address, on a statewide and comprehensive basis, the needs in the State for:
- The provision of State independent living services;
 - The development and support of a statewide network of centers for independent living; and
 - Working relationships between programs providing independent living services and independent living centers, the vocational rehabilitation program established under title

I, and other programs providing services for individuals with disabilities. *34 CFR 364.20(f)*

- 2.2 The DSU and SILC conduct public meetings to provide all segments of the public, including interested groups, organizations and individuals, an opportunity to comment on the State plan prior to its submission to the Commissioner and on any revisions to the approved State plan. *34 CFR 364.20(g)(1)*
- 2.3 The DSU and SILC establish and maintain a written description of procedures for conducting public meetings in accordance with the following requirements. The DSU and SILC shall provide:
- appropriate and sufficient notice of the public meetings (that is, at least 30 days prior to the public meeting through various media available to the general public, such as newspapers and public service announcements, and through specific contacts with appropriate constituency groups and organizations identified by the DSU and SILC);
 - reasonable accommodation to individuals with disabilities who rely on alternative modes of communication in the conduct of the public meetings, including providing sign language interpreters and audio-loops; and
 - public meeting notices, written material provided prior to or at the public meetings, and the approved State plan in accessible formats for individuals who rely on alternative modes of communication. *34 CFR 364.20(g)(2)*
- 2.4 At the public meetings to develop the State plan, the DSU and SILC identify those provisions in the SPIL that are State-imposed requirements beyond what would be required to comply with the regulations in 34 CFR parts 364, 365, 366, and 367. *34 CFR 364.20(h)*
- 2.5 The DSU will seek to incorporate into, and describe in, the State plan any new methods or approaches for the provision of IL services to older individuals who are blind that are developed under a project funded under chapter 2 of title VII of the Act and that the DSU determines to be effective. *34 CFR 364.28*
- 2.6 The DSU and SILC actively consult, as appropriate, in the development of the State plan with the director of the Client Assistance Program (CAP) authorized under section 112 of the Act. *34 CFR 364.20(e)*

Section 3: Independent Living Services

- 3.1 The State, directly or through grants or contracts, will provide IL services with Federal, State, or other funds. *34 CFR 364.43(b)*
- 3.2 Independent living services shall be provided to individuals with significant disabilities in accordance with an independent living plan mutually agreed upon by an appropriate staff member of the service provider and the individual, unless the individual signs a waiver stating that such a plan is unnecessary. *34 CFR 364.43(c)*
- 3.3 All service providers will use formats that are accessible to notify individuals seeking or receiving IL services under chapter 1 of title VII about:
- the availability of the CAP authorized by section 112 of the Act;
 - the purposes of the services provided under the CAP; and
 - how to contact the CAP. *34 CFR 364.30*
- 3.4 Participating service providers meet all applicable State licensure or certification requirements. *34 CFR 365.31(c)*

Section 4: Eligibility

- 4.1 Any individual with a significant disability, as defined in 34 CFR 364.4(b), is eligible for IL services under the SILS and CIL programs authorized under chapter 1 of title VII of the Act. Any individual may seek information about IL services under these programs and request referral to other services and programs for individuals with significant disabilities, as appropriate. The determination of an individual's eligibility for IL services under the SILS and CIL programs meets the requirements of 34 CFR 364.51. *34 CFR 364.40(a), (b) and (c)*
- 4.2 Service providers apply eligibility requirements without regard to age, color, creed, gender, national origin, race, religion or type of significant disability of the individual applying for IL services. *34 CFR 364.41(a)*
- 4.3 Service providers do not impose any State or local residence requirement that excludes any individual who is present in the State and who is otherwise eligible for IL services from receiving IL services. *34 CFR 364.41(b)*

Section 5: Staffing Requirements

- 5.1 Service provider staff includes personnel who are specialists in the development and provision of IL services and in the development and support of centers. *34 CFR 364.23(a)*
- 5.2 To the maximum extent feasible, a service provider makes available personnel able to communicate:
- with individuals with significant disabilities who rely on alternative modes of communication, such as manual communication, nonverbal communication devices,

Braille or audio tapes, and who apply for or receive IL services under title VII of the Act; and

- in the native languages of individuals with significant disabilities whose English proficiency is limited and who apply for or receive IL services under title VII of the Act. *34 CFR 364.23(b)*

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

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

Section 6: Fiscal Control and Fund Accounting

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

Section 7: Recordkeeping, Access and Reporting

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

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

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

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

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

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

Section 9: Signatures

After having carefully reviewed all of the assurances in sections 1 - 8 of this SPIL, the undersigned hereby affirm that the State of Rhode Island is in compliance and will remain in compliance with the aforementioned assurances during the three year period of the SPIL, October 1, 2007 through September 30, 2010.

The effective date of this SPIL is October 1, 2007.

SIGNATURE OF SILC CHAIRPERSON

DATE

Donald K. Phelps, RISILC Chairperson

SIGNATURE OF DSU DIRECTOR

DATE

Raymond A. Carroll, Administrator – Office of Rehabilitation Services

Part II: Narrative

Section 1: Goals, Objectives and Activities

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

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

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

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

MISSION:

To improve the lives of individuals with significant disabilities through implementing the Independent Living Philosophy.

GOAL I:

Increase access to least restrictive environment, based on informed choice of consumer.

OBJECTIVE 1:

Transition 75 individuals with significant disabilities from nursing homes or other restrictive environments to community living.

Need: Identified through CILs work plans, information and referral calls, Long Term Care Plan and public testimony.

Evaluation: Measure number transitioned and survey for increased independence.

Activities:

Year One

1. Increase capacity of CILs to serve this population.
2. Establish baseline of numbers transitioned in Federal Fiscal Year 2007.
3. Develop survey to measure increased independence.
4. Transition 15 individuals.
5. Measure results annually. The CILs will provide a written report and status presentation at the annual (September) RISILC meeting.

Year Two

1. Transition 25 individuals.
2. Measure results annually. The CILs will provide a written report and status presentation at the annual (September) RISILC meeting.

Year Three

1. Transition 35 individuals.
2. Measure results annually. The CILs will provide a written report and

status presentation at the annual (September) RISILC meeting.

OBJECTIVE 2:

Participate in the development of the Rhode Island Olmstead Plan for least restrictive environment.

Need: The Supreme Court ruling requires each state to have a plan.

Evaluation: The plan developed and practical applications further defined.

Activities:**Year One**

1. CILs participate in planning commission.
2. Legislative advocacy to support plan as needed.
3. Measure results annually. The CILs will provide a written report and status statement presentation at the annual (September) RISILC meeting.

Year Two

1. Continue the planning process or adopt approved plan.
2. Legislative advocacy to support plan as needed or start implementation.
3. Measure results annually. The CILs will provide a written report and status statement presentation at the annual (September) RISILC meeting.

Year Three

1. Continue the planning process or adopt approved plan.
2. Legislative advocacy to support plan as needed or start implementation.
3. Measure results annually. The CILs will provide a written report and status statement presentation at the annual (September) RISILC meeting.

OBJECTIVE 3:

Increase access to community and achieve independent living goals through removing physical barriers in residences and through increasing access to assistive technology.

Need: Identified through waiting lists of CILs, public testimony at Governor's Commission on Disabilities annual public hearings and information and referral calls.

Evaluation: Independent living goals achieved in home and community through physical barrier removal in residences and through increasing access to assistive technology.

Activities:

Year One

1. Publicity on availability.
2. Develop survey measuring increased independence.
3. Establish baseline of Federal Fiscal Year 2007 goals that were met.
4. Independent Living goals met through physical access (25) and increased access to assistive technology (35). Hearing aids are included in assistive technology.
5. CILs advocate for maintaining and increasing funds.
6. Measure results annually. The CILs will provide written report and status presentation at second quarterly (March) RISILC meeting. Review 704 Part II reports.

Year Two

1. Goals met: Physical access (25) and assistive technology (35).
2. Measure results annually. The CILs will provide a written report and status presentation at second quarterly (March) RISILC meeting. Review 704 Part II reports.

Year Three

1. Goals met: Physical access (25) and assistive technology (35).
2. Measure results annually. The CILs will provide a written report and status presentation at the second quarterly (March) RISILC meeting. Review 704 Part II reports.

GOAL II:

Increase access to independent living services including health care for individuals with significant disabilities.

OBJECTIVE 1:

Outreach to non-English speaking Hispanics with significant disabilities and their families.

Need: Identified through census data, demographics of 704 Part II reports and Department of Health data.

Evaluation: Measure outreach efforts, information and referral (I&R) and independent living skills training.

Activities:**Year One**

1. Collaborate with Department of Health, Office of Minority and Disability Health Program and community agencies serving non-English speaking Hispanics to identify culturally appropriate outreach and any possible funding.
2. Increase capacity of CILs to serve this population.
3. Identify and serve 15 new consumers.
4. Identify funding sources for assistive technology including new technology.
5. Measure results annually. The CILs will provide a written report and status presentation at the third quarterly (June) RISILC meeting.

Year Two

1. Increase capacity to serve this population.
2. Identify and serve 25 new consumers.
3. Identify funding sources for assistive technology including new technology.
4. Measure results annually. The CILs will provide a written report and status presentation at the third quarterly (June) RISILC meeting.

Year Three

1. Increase capacity of CILs to serve this population.
2. Identify and serve 25 new consumers.
3. Identify funding sources for assistive technology including new technology.
4. Measure results annually. The CILs will provide a written report and status presentation at the third quarterly (June) RISILC meeting.

OBJECTIVE 2:

Address barriers to independent living through the provision of CIL core services and increase access to transportation, communication, assistive technology, personal care assistants and other support services.

Need: Identified through multiple sources, including work plans of CILs and public testimony.

Evaluation: Measure increased access to transportation, communication, assistive technology, personal care assistance and other support services for individuals with significant disabilities.

Activities:**Year One**

1. Address the barriers.
2. Review annual 704 Part II reports.
3. The CILs will provide a written report and status presentation at second quarterly (March) RISILC meeting.

Year Two

1. Address the barriers.
2. Review annual 704 Part II reports.
3. The CILs will provide a written report and status presentation at second quarterly (March) RISILC meeting.

Year Three

1. Address the barriers.
2. Review annual 704 Part II reports.
3. The CILs will provide a written report and status presentation at second quarterly (March) RISILC meeting.

RISILC will support the Centers and collaborate, as appropriate, in the goals and objectives.

1.2B Outreach Plans

Describe the steps planned regarding outreach to populations in the State that are unserved or underserved by programs under title VII, including minority groups and urban and rural populations.

Populations: As indicated in goals and objectives (1.1/1.2), outreach will focus on two populations, plus general outreach:

- (a) nursing home residents with significant disabilities who are interested in transitioning to community living;
- (b) non-English speaking Hispanics with significant disabilities, since they are the largest growing minority population. They have the added barrier of communication.
- c) general outreach will include continuing funding of the successful bus billboard campaign which has been estimated to reach 250,000 people statewide.

Geographic Areas

Nursing home outreach will be statewide, as will be the general outreach. Non-English speaking Hispanic outreach will be focused on Providence County and the cities of Providence and Pawtucket/Central Falls where the largest percentage of individuals live. However, outreach will also occur statewide through contacts with RI Department of Health Minority Health Division and the bilingual agencies funded by them.

Addressing Needs

- a.) A state law was passed that provides that individuals must be notified of the option of community living. The CILS have close working relationship with Medicaid Division of the Department of Human Services and one of the Centers administers two Medicaid waivers and a state funded personal care assistant program. One of the Centers will have Part B funding for staffing of this initiative. Both Centers will sit on the Olmstead Commission which is developing a state plan.
- b) One of the Centers will have Part B funding for a bi-lingual IL Counselor and will have some funding for outreach publicity. The other Center will have limited Part B funding for interpreters, including use of Language Line, primarily for Information and Referral. The Centers have a working relationship with the new 211 statewide Information and Referral service in Rhode Island. The 211 program has bilingual capacity. Other minority and underserved populations will be served as individual situations occur.

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

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

Year 1

<u>Sources</u>	<u>Approximate Funding Amounts and Uses</u>			
	SILC Resource Plan	IL Services	General CIL Operations	Other SPIL Activities
Title VII Funds				
Chapter 1, Part B		\$316,000		
Chapter 1, Part C			\$789,737	
Chapter 2, OIB (only those provided by the	N/A	N/A	N/A	N/A

OIB grantee to further a SPIL objective)				
Other Federal Funds				
Sec. 101(a)(18) of the Act (Innovation and Expansion)	\$136,984			
Other				
Non-Federal Funds				
State Funds		\$591,883		
Other				

Year 2

<u>Sources</u>	<u>Approximate Funding Amounts and Uses</u>			
	SILC Resource Plan	IL Services	General CIL Operations	Other SPIL Activities
Title VII Funds				
Chapter 1, Part B		\$316,000		
Chapter 1, Part C			\$789,737	
Chapter 2, OIB (only those provided by the OIB grantee to further a SPIL objective)	N/A	N/A	N/A	N/A
Other Federal Funds				
Sec. 101(a)(18) of the Act (Innovation and Expansion)	\$136,984			
Other				
Non-Federal Funds				
State Funds		\$591,883		
Other				

Year 3

Sources	Approximate Funding Amounts and Uses			
	SILC Resource Plan	IL Services	General CIL Operations	Other SPIL Activities
Title VII Funds				
Chapter 1, Part B		\$316,000		
Chapter 1, Part C			\$789,737	
Chapter 2, OIB (only those provided by the OIB grantee to further a SPIL objective)	N/A	N/A	N/A	N/A
Other Federal Funds				
Sec. 101(a)(18) of the Act (Innovation and Expansion)	\$136,984			
Other				
Non-Federal Funds				
State Funds		\$591,883		
Other				

1.3B Financial Plan Narratives

GOAL I

Objective One: Transition from nursing homes to community living will be financed primarily by Part B, plus some Medicaid Waivers funding. Grant funding for research related to nursing home transition is being explored.

Objective Two: Olmstead plan participation and implementation is primarily funded by Part C funds. Possible future grant funds may be needed for implementation.

Objective Three: Removing physical barriers, including through assistive technology, is primarily funded by Part B and state funds. Part B dollars are dollars of last resort after state and local government and private funding is sought. Part of CIL staff costs are funded through the Assistive Technology Access Partnership (ATAP) which ORS also administers.

GOAL II

Objective One: Outreach to non-English speaking Hispanics will be funded by Part B for some staffing and Language Line usage, plus some Part C staffing funding. Additional funding will be sought from Department of Health Minority Health program. Additional private or grant funding for additional assistive technology will also be sought.

Objective Two: General addressing of barriers through core services, increased access to transportation, communication, assistive technology, personal care assistance, health care, plus

other support services will be funded through multiple sources. Core services will be funded primarily through Part C funds. Personal Care Assistance services will be primarily funded through Medicaid waivers and state funds. Applications for time limited grants will continue.

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

Coordination of Federal and State funding for Centers (Part C) and IL services (Part B SILS) occur through the partnership and communication between ORS which administers Part B funds (and contracts with the CILs for these services and the two CILs for these services) and the two CILs. (See Table 1.3A for amounts). The State Plan for Independent Living is followed in allocating resources for the Goals and Objectives (See Table 2.1 and 1.3 B1). Coordination also occurs through reviews of the 704 Part II reports by ORS and RISILC. In addition, ORS contracts with the CILs for State funded services and coordinates these with the Federal funding sources.

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

Volunteers are the basic in-kind resource in support of the RISILC resource plan, IL services, general CIL operations and/or other SPIL objectives. The CILs have minor program income and fund raising income. Centers apply for focus and time limited grant funds wherever feasible. Other Federal funding cannot be counted as in-kind.

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

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

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

The goals and objectives are consistent with and further the purposes of providing, expanding and improving the provision of independent living services in order to improve the lives of individuals with significant disabilities. The goals further the support of the Independent Living Centers and encourage improvement in working relations among the Centers, Office of Rehabilitation Services, RISILC and programs that address the needs of individuals with significant disabilities.

The goals and objectives promote the philosophy of independent living based on consumer control, peer support, self help, self determination, equal access, and advocacy to maximize the leadership, independence and productivity of individuals with significant disabilities. They promote and maximize the integration and full inclusion of individuals with significant disabilities into the mainstream of American society.

1.4B Describe how, in developing the SPIL objectives, the DSU and the SILC considered and incorporated, where appropriate, the priorities and objectives established by centers for

independent living under section 725(c)(4) of the Act.

Input from the Centers has been an integral part of the development of the goals and objectives and assists them in meeting the standards and assurances and ensuring implementation of the design of a network of centers in Rhode Island.

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

The new evaluation plan is a major step toward improved cooperation and coordination through interactive communication. In addition, RISILC members serve on and report back on the work of other Councils, including the Statewide Rehabilitation Council and the Governor's Council on the Blind. The annual report of the Chapter Two Older Blind program is provided to all RISILC members. The Director of the Client Assistance Program is a member of RISILC. The CILs serve on the Olmstead Commission.

1.6 Coordination of Services – 34 CFR 364.27

RISILC, ORS and CILs review the plans of other state agencies providing services to individuals with significant disabilities and given limited IL resources, seek to provide unique IL services and provide individual and system advocacy. ORS also coordinates and provides Older Blind Independent Living (OIB) services and avoids duplication by having OIB and CIL staffs meet periodically concerning cross referral and utilization of funds.

Consultation by the Older Blind Independent Living program regarding best practices is occurring with the CILS, especially regarding the survey used by the Older Blind program. This survey obtains a higher response rate, measures outcomes related to independent living and is analyzed by an objective third party program evaluator. This process will be the foundation for the survey indicated in Part II Section 1.2A of this SPIL) Two way consultation will also occur regarding the most cost effective strategies and policies related to providing independent living services.

Coordination with multiple Social Security programs occurs on a case by case basis and through CILs participating on advisory committees. Frequent contact and coordination occurs in using Medicaid and Medicare services for access to assistive technology, health care and transportation. Department of Human Services administers Title XVIII Medicaid including Medicaid waivers which are fully utilized in assisting individuals with significant disabilities become more independent through access to personal care assistance, assistive technology and some other services. Department of Human Services also administers Title XX and CILS assist in accessing the services such as transportation provided through the agencies funded by Title XX. ORS has a Social Security Work Incentive Assistance (WIPA) agreement, which provides information to all Social Security recipients, including those served by CILS. ORS also has an Assistive Technology Partnership (A TAP) grant through which the CILS receive some funding and participate as partners. ORS is the link in assuring lack of duplication in these services.

Plans to coordinate more closely with the Department of Health are described in the goals and objectives. The CILS have participated in that Department's wellness activities for individuals who are significantly disabled. The CILS are active in housing coordination including through a

coordinated program called Housing Works. Rhode Island passed a bond issue for low income housing through this coordinated effort. The CILS have staff specializing in access to subsidized housing. The CILs serve on several transportation coordination committees in the state. Coordination with Special Education, Vocational Education, and Developmental Disabilities occurs through CILS individual assistance in accessing such services and through a working relationship with both Rhode Island Parents' Information Center which provides classes and information for parents and through the Information and Referral programs of Department of Human Services. Veteran's services are coordinated through contacts with Regional Federal Veterans' Office. Mental Health services can be coordinated through contacts with the State Mental Health advocate's office.

The CILs recognize that with limited staff resources, ongoing coordination with other appropriate agencies which provide up-to-date information and services is essential. The Centers for Independent Living (CILS) have skilled and experienced Information and Referral staffs which interact with increasingly centralized information and referral services in the state (such as the new 211 service) in order to provide accurate information to individuals with disabilities, the general public and their own staff, in order to access ,services. The CILS apply for grants to increase their capacity to provide I&R services and provide this information to their own staffs.

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

ORS has identified that the OIB consumer survey has a high response rate. Their methodology and survey will be considered in developing the new survey included in the Goals and Objectives (1.2).

Section 2: Scope, Extent, and Arrangements of Services

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

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

Table 2.1A: Independent living services	Provided by the DSU (directly)	Provided by the DSU (through contract and/or grant)	Provided by the CILs (Not through DSU contracts/ grants)
Core Independent Living Services, as follows:	N/A	-	-
- Information and referral	N/A	X	X
- IL skills training	N/A	X	X
- Peer counseling	N/A	X	X
- Individual and systems advocacy	N/A	X	X
Counseling services, including psychological, psychotherapeutic, and related services	N/A	-	-

Table 2.1A: Independent living services	Provided by the DSU (directly)	Provided by the DSU (through contract and/or grant)	Provided by the CILs (Not through DSU contracts/ grants)
Services related to securing housing or shelter, including services related to community group living, and supportive of the purposes of this Act and of the titles of this Act, and adaptive housing services (including appropriate accommodations to and modifications of any space used to serve, or occupied by, individuals with significant disabilities)	N/A	X	X
Rehabilitation technology	N/A	X	X
Mobility training	N/A	-	-
Services and training for individuals with cognitive and sensory disabilities, including life skills training, and interpreter and reader services	N/A	X	X
Personal assistance services, including attendant care and the training of personnel providing such services	N/A	X	-
Surveys, directories and other activities to identify appropriate housing, recreation, accessible transportation and other support services	N/A	X	X
Consumer information programs on rehabilitation and IL services available under this Act, especially for minorities and other individuals with disabilities who have traditionally been unserved or underserved by programs under this Act	N/A	X	X
Education and training necessary for living in the community and participating in community activities	N/A	X	X
Supported living	N/A	-	-
Transportation, including referral and assistance for such transportation	N/A	X	X
Physical rehabilitation	N/A	-	-
Therapeutic treatment	N/A	-	-
Provision of needed prostheses and other appliances and devices	N/A	-	-
Individual and group social and recreational services	N/A	X	X
Training to develop skills specifically designed for youths who are individuals with significant disabilities to promote self-awareness and esteem, develop advocacy and self-empowerment skills, and explore career options	N/A	-	X
Services for children with significant disabilities	N/A	-	-

Table 2.1A: Independent living services	Provided by the DSU (directly)	Provided by the DSU (through contract and/or grant)	Provided by the CILs (Not through DSU contracts/grants)
Services under other Federal, State, or local programs designed to provide resources, training, counseling, or other assistance of substantial benefit in enhancing the independence, productivity, and quality of life of individuals with significant disabilities	N/A	-	X
Appropriate preventive services to decrease the need of individuals with significant disabilities for similar services in the future	N/A	X	X
Community awareness programs to enhance the understanding and integration into society of individuals with disabilities	N/A	X	X
Other necessary services not inconsistent with the Act	N/A	X	X

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

1. Increase access to least restrictive environment, based on informed choice of consumer. This includes transition of individuals from nursing homes or other restrictive environments to community living; CILs participating in R.I. Olmstead Planning; removing physical barriers through housing accessibility.
2. Increased access to health care, including outreach to non-English speaking Hispanics. Increased access includes increased understanding of chronic conditions to prevent secondary disabilities and knowledge and access to assistive technology, both through independent living skills training on an individual and group basis and information and referral. This also requires communication access, access to transportation to utilize services, other support services and CILs individual and system advocacy.

Due to limitations in funding:

- A. Part B funding will be used only when other funding is not available.
- B. Computers will not be provided except through donation programs.
- C. Economic need will be considered.
- D. No prosthetics will be allowed.
- E. Only non-structural vehicle modification will be allowed.

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

The ability of individual consumers to pay is uniformly considered for the cost of home modifications, adaptive equipment and Gift of Hearing program. There are standard reporting

forms for this information and such information is filed in the individual's case record. Centers use the Office of Rehabilitation Services' policy; however, they are in the process of developing their own.

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

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

The Office of Rehabilitation Services contracts with the two Centers for Independent Living for Part B SILS services. IL service contracts with the CILs include the provision of eligibility being determined by the Centers, with a sample of case records reviewed by ORS. ORS receives and reviews quarterly statistical, narrative and financial reports.

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

Section 3: Design for the Statewide Network of Centers

The Rhode Island Statewide Independent Living Council, the Office of Rehabilitation Services (the DSU), and the Centers for Independent Living share a vision in which all people with significant disabilities in need of independent living services can obtain timely and effective assistance from a Center for Independent Living to enable individuals with significant disabilities to function in their homes and communities.

3.1 Existing Network – 34 CFR 364.25

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

Rhode Island has a network of two Centers for Independent Living. The Centers meet the federal standards, including cross-disability, consumer-majority boards and a qualified staff consisting of a majority with disabilities. Staff are qualified and committed, and are valued for their skills and need to be paid fairly. Both Centers are located in heavily populated areas of the state. Rhode Island is a small state comprised of five counties.

Due to the state's small size and unique geography, both Centers are able to offer services on a statewide basis, which permits full consumer choice. Rhode Island may be unique in providing the majority of direct services in the homes of consumers rather than in the Centers. Both Centers provide the following mandated core services:

- Information and referral
- Advocacy (System and Individual)
- Independent Living Skills Training
- Peer Counseling
- Nursing Home Transition

PARI Independent Living Center is located in the city of Pawtucket in Providence County and provides, in addition to the core services, programs for Personal Care Assistance, home modification and adaptive equipment, Nursing Home Transition and equipment reuse. Ocean State Center for Independent Living (OSCIL) is located in the city of Warwick in Kent County, and provides, in addition to the core services, home access coordination including a home modification and adaptive equipment program, Nursing Home Transition, citizenship training, and driver education. The Center also provides assistance with home ownership through the Rhode Island Home Choice program.

Data collected from the two Centers indicate all cities and towns throughout the state are being served – 80% of the individuals receiving direct service reside in two of the five counties (Providence and Kent), which have 80% of the state's disabled population. The bulk of the state's subsidized accessible housing is located in these areas, as is most of the public transit service.

3.2 Expansion of Network – 34 CFR 364.25

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

Further expansion of the network (beyond the cost of living increase) includes the following three priorities:

- People with significant disabilities, non-English speaking cultures statewide.
- People with significant disabilities with inadequate housing in restrictive living arrangements, or in facilities such as nursing homes, the State Veterans' Home and State chronic care hospitals.
- Access to health care, assistive technology and transportation.

Increased funding is crucial for both Centers for general operation, for recruitment and retention of quality staff to address the 11% increase in service provision, for the provision of independent living services and new federal reporting requirements. In addition, Centers have realized cost increases associated with basic operations, such as staff health care insurance, energy and telephone.

Both Centers for Independent Living respond to a significant number of information and referral requests, including monitoring those requests made in the areas of healthcare, assistive technology and transportation. There is a need for expanded Information and Referral services.

It is estimated that Centers need an additional \$740,000 per year to expand to address the unmet needs and maintain qualified staff. The priority for any additional Part C funding, if available, is for general operation of existing centers, including recruitment and retention of qualified staff. Any such additional Part C funds will be equally divided among Centers. Other funding is needed.

Priorities for expansion of the Olmstead ruling are as follows:

1. Support and expand nursing home transition services.
2. Expansion of personal assistance services.
3. Expansion of accessible housing options, to address increased requests for home modifications and adaptive equipment

The priority to support outreach to the underserved population is to expand the capacity to serve non-English speaking consumers through the addition of non-English speaking Center personnel.

3.3 Section 723 States Only – 34 CFR 364.39 N/A

Section 4: Designated State Unit (DSU)

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

The administrative support services provided by the Office of Rehabilitation Services/DHS for the State Independent Living Services (Part B SILS) program include administering and monitoring contracts with the two Centers for Independent Living which are funded by Part B and state funds and administering the contract with RISILC for its resource plan funds. Audits of all funds are provided to ORS. ORS jointly develops and monitors the State Plan and ORS has a representative on RISILC. ORS participates in periodic federal RSA monitoring of the Centers.

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

Section 5: Statewide Independent Living Council (SILC)

5.1 Resource plan – 34 CFR 364.21(i)

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

The Rhode Island State Independent Living Council (RISILC) utilizes the following guidelines in preparing a resource plan to meet its needs:

- The RISILC receives its Resource Plan funds directly from the DSU (Title 1 funds).
- The RISILC is responsible for contracting and maintaining legal, bookkeeping, auditing and payroll services.
- Maximizing the use of other resources, i.e., Para transit transportation and networking with other groups with similar goals.

- Council members practicing the Independent Living Philosophy of taking responsibility for meeting their own needs, i.e., scheduling their transportation, notifying the RISILC when unable to attend meetings, timely requests for access needs and keeping their own RISILC materials organized.
- Committee Chairpersons assuming responsibility for scheduling meetings and contacting members, maintaining a committee file to include committee meeting agendas, minutes and reports, and collaborating on prioritizing staffs' tasks and time allocation.
- The RISILC will assure that accessibility needs are met for all members, volunteers, staff, and the general public.
- Continuing the existing full-time professional staff position, Executive Director, and existing part-time staff position, Program Assistant to assist the RISILC in achieving the independent living objectives of the State Plan.
- Continuing to rent office space to assist the Council in conducting business, holding committee meetings, housing files and equipment.
- Travel costs represent reimbursement for mileage for members and volunteers to attend Council meetings, conferences, forums and public hearings.
- Conference costs enable members to attend conferences, seminars and teleconferences, thereby increasing their knowledge of the Independent Living Philosophy and fostering leadership and active participation.
- Bookkeeping and CPA costs include bookkeeping, auditing and income tax filing.
- Printing costs reflect Council stationary, announcements, brochures and the SPIL.
- Leadership Development costs enables RISILC's legislative advocacy efforts and presentation of informational workshops, which assist in achieving the objectives in the State Plan.

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

- The SILC's responsibility for the proper expenditure of funds and use of resources that it receives under the resource plan.
- Non-inclusion of conditions or requirements in the SILC resource plan that may compromise the independence of the SILC.
- Reliance, to the maximum extent possible, on the use of resources in existence during the period of implementation of the State plan.

RISILC resource plan requirements listed above are met by the following relevant written procedures and policies, which are on file with the SILC and DSU and available for review:

- Financial procedures
- Business procedures
- By-laws
- Policy for public hearings
- Policy for amending the SPIL
- Personnel manual

- Internal procedures

In addition, the RISILC meets the requirements of Rhode Island's Open Meeting Law.

5.2 Establishment and Placement – 34 CFR 364.21(a)

The RISILC is not an entity within any State agency, including ORS (the Designated State Unit) and is independent of ORS and all other State agencies. The RISILC was established by Rhode Island Executive Order No. 92-93 in compliance with the Rehabilitation Act of 1992 and was incorporated as a Rhode Island non-profit corporation in FY 1998. It was granted 501(c)3 status from the Internal Revenue Service in FY 2001.

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

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

The RISILC's membership consists of statewide representation of between thirteen (13) and twenty-five (25) individuals, the majority of whom are consumers, nominated by the RISILC and appointed by the Governor of Rhode Island. A representative of the DSU, which in Rhode Island is the Office of Rehabilitation Services, is an ex-officio, non-voting member. A CIL director, chosen by CIL directors within the State, is a voting member but not part of the consumer majority. All required members of the RISILC have been officially appointed by the Governor of Rhode Island.

The RISILC members serve a maximum of two full three-year terms. The RISILC's Membership Committee maintains a nominating status file listing partial and full appointments and term expiration dates. The RISILC elects a Chair (preferably consumer), one or more Vice Chairs, a Secretary and a Treasurer from among the voting members of the Council and consistent with its Bylaws.

Volunteer recruitment efforts are conducted on a statewide basis. Prospective volunteers are interviewed and if appropriate assigned to a committee. Following a period of active participation and completion of an orientation program, a volunteer who is knowledgeable about CILs and IL services may be recommended by RISILC's Membership Committee to fill Council membership vacancies. The full Council votes on the RISILC's Membership Committee's recommendations, and if passed, their names are then recommended to the Governor for appointment. The Governor and his appointment staff meet periodically to review composition and qualification requirements before appointing any RISILC nominee.

5.4 Staffing – 34 CFR 364.21(j)

Describe how the following SILC staffing requirements will be met:

- SILC supervision and evaluation, consistent with State law, of its staff and other personnel as may be necessary to carry out its functions.
- Non-assignment of duties to SILC staff and other personnel made available by the DSU, or

any other State agency or office that would create a conflict of interest while assisting the SILC in carrying out its duties.

RISILC's staffing requirements are met by adherence to the following written policies and procedures, which are on file with the SILC and DSU and available for review:

- Bylaws
- Personnel manual
- Business procedures
- Internal procedures
- Annual written personnel evaluation forms
- Written job descriptions

Section 6: Service Provider Requirements

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

The Centers for Independent Living include personnel who are specialists in the development and provision of IL services and in the development and support of CILs. The Centers' personnel include individuals able to communicate (1) with individuals with significant disabilities who rely on alternative modes of communication, such as sign language, manual communication, nonverbal communication devices, Braille, or audio tapes and (2) to a limited extent in the native language of individuals with significant disabilities whose English proficiency is limited and who apply for or receive IL services under title VII of the Act. Use of the Language Line for language translation is expected to be added as well as part time staff. The State assures that CILs will establish and maintain a program of staff development for all classes of positions involved in providing and administering IL services, including knowledge of and practice of the IL Philosophy. The CILs practice Affirmative Action to employ and advance in employment qualified individuals with significant disabilities on the same terms and conditions required with respect to the employment of individuals with disabilities under section 503 of the Act.

6.2 Fiscal Control and Fund Accounting – 34 CFR 364.34

All recipients of financial assistance under Chapter 1 will adopt and maintain those fiscal controls and fund accounting procedures as may be necessary to ensure that proper disbursement of and accounting for funds made available through parts B and C of Chapter 1 of Title VII of the Act, in addition to complying with applicable EDGAR fiscal and accounting requirements.

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

All Rhode Island recipients of financial assistance under Chapter 1 will:

- Maintain records that fully disclose and document the information listed in CFR 364.35.
- Submit annual performance and financial reports, and any other reports that the Secretary determines to be appropriate.
- Provide access to the Commissioner and the Comptroller General, or any of their duly

authorized representatives, for the purpose of conducting audits, examinations and compliance reviews, to the information listed in 34 CFR 364.37.

- Maintain such other records as the Secretary deems appropriate to facilitate an effective audit.

6.4 Eligibility – 34 CFR 364.40; 34 CFR 364.41

All individuals provided IL services under the SILS (Part B) and CIL (Part C) shall be individuals with significant disabilities, as defined in 34 CFR 364.4 (b). However, any individual may seek information about IL services under these programs and request referral to other services and programs for individuals with significant disabilities.

Determination of an individual's eligibility for IL services under the SILS (B) and CIL (C) programs will occur in a manner that meets the requirements of 34 CFR 364.51.

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

No individual will be excluded from receiving IL services who is present in the State and who is otherwise eligible for IL services, based on the imposition of any State or local residential requirement.

6.5 Independent Living Plans – 34 CFR 364.43(c)

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

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

Individuals seeking or receiving IL services under Chapter I of title VII will be notified in accessible formats about the availability of the CAP program, the purposes of the services provided under the CAP, and how to contact the Client Assistance Program.

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

All service providers comply with the protection, use and release of all personal information, including photographs and lists of names in compliance with 34 CFR 364.56(a) and other federal and state laws only for purposes directly related with the provision of IL services and the administration of the program, including but not limited to the following: policies on confidentiality are strictly followed, including having staff and volunteers sign confidentiality statements, absolutely no sharing of mailing lists, consumers and their legal representatives are all notified of confidentiality policy and procedures; service providers obtain releases explaining purpose when information needs to be gathered and explain any exceptions to use of release; information is provided in understandable alternative formats as needed. Under the new plan, translation into other languages will be available. Current and past records are kept in locked cabinets and only accessible to staff on a need basis.

Section 7: Evaluation

Evaluation measures are listed under each objective. Monitoring of the State Plan will be interactive, with presentations of progress at quarterly RISILC meetings, based on the measures specified in activities, questions and answers and with written outline/talking points presented in writing to be mailed to RISILC members prior to the meeting. This methodology is meant to keep a constant focus on the State Plan's outputs and outcomes and increase the knowledge and support of the State Plan 08-10 Goals and Objectives by all RISILC members and committee members.

In turn, this methodology will provide an ongoing needs assessment for a more time saving development of the next three year State Plan. The annual Governor's Commission on Disabilities public hearings will continue to be used for needs assessment, as will consumer satisfaction, measures of increased independence and access to health care, transportation and assistive technology. In addition, other state plans, such as Long Term Care, Olmstead, Developmental Disabilities, and Office of Rehabilitation Services will be considered. The annual 704 Part II reports will be reviewed with the CILs.

The evaluation methodology is meant also to be as time efficient as possible, in order to maximize time providing IL Services, advocacy, IL skills training and Information and Referral. This is especially important given limitations from all sources of funding in the present economic climate and the need for CILs to report to a variety of funding sources for grants.

Section 8: State-Imposed Requirements

State purchasing requirements require competitive bidding by agencies or organizations with contracts. Therefore, Title VII Part B and Title 1 funded contracts with the two CILs and RISILC require them to follow competitive bidding in purchases. Home modifications and adaptive equipment have an economic need requirement which is periodically updated.