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# Independent Living Services (ILS) Program Performance Report for FY 2019

CO ST Department of Labor &  
Employment  
633 17th St.  
Denver, CO, 80202.0

Grant Number: 1901COILSG

## Administrative Data

### Section 1. Sources and Amounts of Funds and Resources

Sections 704(c) and 704(m)(3) and (4) of the Act \* - Required field

Item 1.1 - All Federal Funds Received

Type of Funds	Amount
<b>(A) Title VII, Ch. 1, Part B*</b>	
<b>(B) Title VII, Ch. 1, Part C-For 723 states Only*</b>	
<b>(C) Title VII, Ch. 2 *</b>	
<b>(D) Other Federal Funds*</b>	

Item 1.2 - Other Government Funds

Type of Funds	Amount
<b>(E) State Government Funds*</b>	
<b>(F) Local Government Funds*</b>	

Item 1.3 - Private Resources

Type of Funds	Amount
<b>(G) Fees for Service (program income, etc.)*</b>	
<b>(H) Other resources *</b>	

Item 1.4 - Total Income

Type of Funds	Amount
<b>Total income =</b>	

Item 1.5 - Pass-Through Funds

Type of Funds	Amount
<b>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.)*</b>	

Item 1.6 - Net Operating Resources

Type of Funds	Amount
<b>Net Operating Resources =</b>	

# Section 2. Distribution of Title VII, Chapter 1, Part B Funds

Section 713 of the Act      \* - Required field

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*		
(2) Provided IL services to individuals with significant disabilities*		
(3) Demonstrated ways to expand and improve IL services*		
(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*		
(5) Supported activities to increase capacity to develop approaches or systems for providing IL services*		
(6) Conducted studies and analyses, gathered information, developed model policies, and presented findings in order to enhance IL services*		
(7) Provided training regarding the IL philosophy*		

<b>What Activities were Conducted with Part B Funds?</b>	<b>Expenditures of Part B Funds for Services by DSU Staff</b>	<b>Expenditures for Services Rendered By Grant or Contract</b>
<b>(8) Provided outreach to unserved or underserved populations, including minority groups and urban and rural populations*</b>		

**Section 3. Grants or Contracts Used to Distribute Title VII, Chapter 1,  
Part B Funds**

Sections 704(f) and 713 of the Act

\* - Required field

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
<b>Total Amount of Grants and Contracts</b>		0	0		

**Section 4. Grants or Contracts for Purposes Other than Providing IL Services or For the General Operation of Centers Section 713 of the Act**  
Section 713 of the Act \* - Required field

**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. \***

## **Section 5. Monitoring Title VII, Chapter 1, Part B Funds**

**\* - Required field**

**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. \***



# Section 6. Administrative Support Services and Staffing

\* - Required field

Item 6.1 - Administrative Support Services

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

Item 6.2 - Staffing

Type of Staff	Total Number of FTEs	FTEs filled by Individuals with Disabilities
<b>Decision-Making Staff *</b>		
<b>Other Staff *</b>		

# Section 7. For Section 723 States ONLY

## Section 723 of the Act

Section 723 of the Act \* - Required field

Item 7.1 - Distribution of Part C Funds to Centers

Name of CIL	Amount of Part C Funding Received	Cost of Living Increase? (Yes/No)	Excess Funds After Cost of Living Increase? (Yes/No)	New Center? (Yes/No)	Onsite Compliance Review of Center? (Yes/No)
N/A	0	No	No	No	No

Item 7.2 - Administrative Support Services Section 704(c)(2) of the Act

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

**Section 704(c)(2) of the Act \***

N/A

Item 7.3 - Monitoring and Onsite Compliance Reviews Section 723(g), (h), and (i)

**Provide a summary of the monitoring activities involving Part C centers conducted by the state during the current reporting year, including the onsite reviews of at least 15% of centers receiving Part C funds under section 723. The summary should include, at least, the following: A) centers' level of compliance with the standards and assurances in Section 725 of the Act; B) any adverse actions taken against centers; C) any corrective action plans entered into with centers; and D) exemplary, replicable or model practices for centers.**

**Section 723(g), (h), and (i) \***

N/A

Item 7.4 - Updates or Issues

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

N/A

**Number and Types of Individuals with Significant Disabilities Receiving Services**

Section 704(m)(4) of the Act

**Section 8. Number of Consumers Served During the Reporting Year** \* - Required field

Condition	# of CSRs
(1) Enter the number of active CSRs carried over from September 30 of the preceding reporting year *	
(2) Enter the number of CSRs started since October 1 of the reporting year *	
(3) Total number of consumers served	

**Section 9. Number of CSRs Closed by September 30 of the Reporting Year** \* - Required field

Condition	# of CSRs
(1) Moved *	
(2) Withdrawn *	
(3) Died *	
(4) Completed all goals set *	
(5) Other *	
(6) Total CSRs closed	

## Section 10. Number of CSRs Active on September 30 of the Reporting Year

\* - Required field

Condition	# of CSRs
Total number of consumers served - Total CSRs closed	

## Section 11. IL Plans and Waivers

\* - Required field

Condition	# of Consumers
(1) Number of consumers who signed a waiver*	
(2) Number of consumers with whom an ILP was developed*	
(3) Total number of consumers served during the reporting year	

## Section 12. Age

\* - Required field

Condition	# of Consumers
(1) Under 5 years old*	
(2) Ages 5-19*	
(3) Ages 20-24*	
(4) Ages 25-59*	
(5) Age 60 and Older*	
(6) Age unavailable*	

## Section 13. Sex

\* - Required field

Condition	# of Consumers
(1) Number of Females served*	
(2) Number of Males served*	

## Section 14. Race And Ethnicity

\* - Required field

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

Condition	# of Consumers
(1) American Indian or Alaska Native *	
(2) Asian *	
(3) Black or African American *	
(4) Native Hawaiian or Other Pacific Islander *	
(5) White *	
(6) Hispanic/Latino of any race or Hispanic/Latino only *	
(7) Two or more races *	
(8) Race and ethnicity unknown *	

## Section 15. Disability

\* - Required field

Condition	# of Consumers
(1) Cognitive *	
(2) Mental/Emotional *	
(3) Physical *	

<b>Condition</b>	<b># of Consumers</b>
<b>(4) Hearing*</b>	
<b>(5) Vision*</b>	
<b>(6) Multiple Disabilities*</b>	
<b>(7) Other*</b>	



**Individual Services and Achievements Funded Through Title VII,  
Chapter 1 Part B Funds  
Sections 13 and 704(m) (4)**

## **Section 16. Individual Services and Achievements**

**\* - Required field**

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.

<b>Services</b>	<b>Consumers Requesting Services</b>	<b>Consumers Receiving Services</b>
<b>(A) Advocacy/Legal Services*</b>		
<b>(B) Assistive Technology*</b>		
<b>(C) Children's Services*</b>		
<b>(D) Communication Services*</b>		
<b>(E) Counseling and Related Services*</b>		
<b>(F) Family Services*</b>		
<b>(G) Housing, Home Modifications, and Shelter Services*</b>		
<b>(H) IL Skills Training and Life Skills Training*</b>		
<b>(I) Information and Referral Services*</b>		

Services	Consumers Requesting Services	Consumers Receiving Services
(J) Mental Restoration Services*		
(K) Mobility Training*		
(L) Peer Counseling Services*		
(M) Personal Assistance Services*		
(N) Physical Restoration Services*		
(O) Preventive Services*		
(P) Prostheses, Orthotics, and Other Appliances*		
(Q) Recreational Services*		
(R) Rehabilitation Technology Services*		
(S) Therapeutic Treatment*		
(T) Transportation Services*		
(U) Youth/Transition Services*		
(V) Vocational Services*		
(W) Other Services*		

# Section 17. Increased Independence and Community Integration \* - Required field

Item 17.1 - Goals Related to Increased Independence in a Significant Life Area

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

Significant Life Area	Goals Set	Goals Achieved	In Progress
(A) Self-Advocacy/ Self-Empowerment *			
(B) Communication *			
(C) Mobility/ Transportation *			
(D) Community- Based Living *			
(E) Educational *			
(F) Vocational *			
(G) Self-care *			
(H) Information Access/Technology *			
(I) Personal Resource Management *			

<b>Significant Life Area</b>	<b>Goals Set</b>	<b>Goals Achieved</b>	<b>In Progress</b>
<b>(J) Relocation from a Nursing Home or Institution to Community-Based Living*</b>			
<b>(K) Community/Social Participation*</b>			
<b>(L) Other*</b>			

**Item 17.2-Improved Access To Transportation, Health Care and Assistive Technology**

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.

**17.2.1 Table**

<b>Areas</b>	<b># of Consumers Requiring Access</b>	<b># of Consumers Achieving Access</b>	<b># of Consumers Whose Access is in Progress</b>
<b>(A) Transportation*</b>			
<b>(B) Health Care Services*</b>			
<b>(C) Assistive Technology*</b>			

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.

Item 17.2.2 - 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 engage in follow-up contacts with I&R recipients to document access gained to previously unavailable transportation, health care or assistive technology**

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## **Section 18. Additional Information Concerning Individual Services or Achievements**

**\* - Required field**

**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. \***

**Community Activities and Coordination**  
Section 704(i), (l), and (m)(4) of the Act

## Section 19. Community Activities

**\* - Required field**

**Item 19.1 - 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.

Issue Area	Activity Type	Primary Entity	Hours Spent	Objective(s)	Outcome(s)

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.

Issue Area	Activity Type	Primary Entity	Hours Spent	Objective(s)	Outcome(s)

**Item 19.2 - 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. \***

## **Section 20. Working Relationships Among Various Entities**

**\* - Required field**

**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. \***



**Statewide Independent Living Council (SILC)**  
Section 705 of the Act

## **Section 21. Composition and Appointment**

**\* - Required field**

**Item 21.1 - 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.

<b>Name of SILC member</b>	<b>Employed by CIL, State Agency or Neither</b>	<b>Appointment Category</b>	<b>Voting or Non-Voting</b>	<b>Term Start Date</b>	<b>Term End Date</b>

**Item 21.2-SILC Composition Requirements**

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

<b>SILC Composition</b>	<b># of SILC members</b>
<b>(A) How many members are on the SILC?*</b>	
<b>(B) How many members of the SILC are individuals with disabilities not employed by a state agency or a center for independent living?*</b>	

SILC Composition	# of SILC members
<b>(C) How many members of the SILC are voting members?*</b>	
<b>(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?*</b>	

# **Section 22. SILC Membership Qualifications**

## **Section 705(b)(4) of the Act\* - Required field**

Item 22.1-Statewide Representation

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

Item 22.2 - Broad Range of Individuals with Disabilities from Diverse Backgrounds

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

Item 22.3 - Knowledgeable about IL

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

## Section 23. SILC Staffing and Support

\* - Required field

### Item 23.1-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. \***

### Item 23.2 - SILC Support

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

# Section 24. SILC Duties

## Section 705(c)

\* - Required field

### Item 24.1-SILC Duties

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

#### 24.1.1 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. \***

#### 24.1.2 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. \***

#### 24.1.3 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. \***

24.1.4 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. \***

Item 24.2 - Other Activities

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

# Section 25. Training and Technical Assistance Needs

Section 721(b)(3) of the Act\* - Required field

Training and Technical Assistance Needs	Choose up to 10 Priority Needs - Rate items 1-10 with 1 being the most important
<b>Advocacy/Leadership Development</b>	
<b>General Overview</b>	
<b>Community/Grassroots Organizing</b>	
<b>Individual Empowerment</b>	
<b>Systems Advocacy</b>	
<b>Legislative Process</b>	
<b>Applicable Laws</b>	
<b>General overview and promulgation of various disability laws</b>	
<b>Americans with Disabilities Act</b>	
<b>Air-Carrier's Access Act</b>	
<b>Fair Housing Act</b>	
<b>Individuals with Disabilities Education Improvement Act</b>	
<b>Medicaid/Medicare/PAS/waivers/long-term care</b>	
<b>Rehabilitation Act of 1973, as amended</b>	
<b>Social Security Act</b>	
<b>Workforce Investment Act of 1998</b>	
<b>Ticket to Work and Work Incentives Improvement Act of 1999</b>	

<b>Training and Technical Assistance Needs</b>	<b>Choose up to 10 Priority Needs - Rate items 1-10 with 1 being the most important</b>
<b>Government Performance Results Act of 1993</b>	
<b>Assistive Technologies</b>	
<b>General Overview</b>	
<b>Data Collecting and Reporting</b>	
<b>General Overview</b>	
<b>704 Reports</b>	
<b>Performance Measures contained in 704 Report</b>	
<b>Dual Reporting Requirements</b>	
<b>Case Service Record Documentation</b>	
<b>Disability Awareness and Information</b>	
<b>Specific Issues</b>	
<b>Evaluation</b>	
<b>General Overview</b>	
<b>CIL Standards and Indicators</b>	
<b>Community Needs Assessment</b>	
<b>Consumer Satisfaction Surveys</b>	
<b>Focus Groups</b>	
<b>Outcome Measures</b>	
<b>Financial: Grant Management</b>	
<b>General Overview</b>	
<b>Federal Regulations</b>	
<b>Budgeting</b>	
<b>Fund Accounting</b>	



<b>Training and Technical Assistance Needs</b>	<b>Choose up to 10 Priority Needs - Rate items 1-10 with 1 being the most important</b>
<b>Financial: Resource Development</b>	
<b>General Overview</b>	
<b>Diversification of Funding Base</b>	
<b>Fee-for-Service Approaches</b>	
<b>For Profit Subsidiaries</b>	
<b>Fund-Raising Events of Statewide Campaigns</b>	
<b>Grant Writing</b>	
<b>Independent Living Philosophy</b>	
<b>General Overview</b>	
<b>Innovative Programs</b>	
<b>Best Practices</b>	
<b>Specific Examples</b>	
<b>Management Information Systems</b>	
<b>Computer Skills</b>	
<b>Software</b>	
<b>Networking Strategies</b>	
<b>General Overview</b>	
<b>Electronic</b>	
<b>Among CILs &amp; SILCs</b>	
<b>Community Partners</b>	
<b>Program Planning</b>	
<b>General Overview of Program Management and Staff Development</b>	
<b>CIL Executive Directorship Skills Building</b>	

<b>Training and Technical Assistance Needs</b>	<b>Choose up to 10 Priority Needs - Rate items 1-10 with 1 being the most important</b>
<b>Conflict Management and Alternative Dispute Resolution</b>	
<b>First-Line CIL Supervisor Skills Building</b>	
<b>IL Skills Modules</b>	
<b>Peer Mentoring</b>	
<b>Program Design</b>	
<b>Time Management</b>	
<b>Team Building</b>	
<b>Outreach to Unserved/Underserved Populations</b>	
<b>General Overview</b>	
<b>Disability</b>	
<b>Minority</b>	
<b>Institutionalized Potential Consumers</b>	
<b>Rural</b>	
<b>Urban</b>	
<b>SILC Roles/Relationship to CILs</b>	
<b>General Overview</b>	
<b>Development of State Plan for Independent Living</b>	
<b>Implementation (monitor &amp; review) of SPIL</b>	
<b>Public Meetings</b>	
<b>Role and Responsibilities of Executive Board</b>	
<b>Role and Responsibilities of General Members</b>	

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

**SPIIL Comparison and Updates, Other Accomplishments and Challenges  
of the Reporting Year**  
Section 704(m)(4) of the Act

**Section 26. Comparison of Reporting Year  
Activities with the SPIIL \* - Required field**

Item 26.1-Progress in Achieving Objectives and Goals

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

Item 26.2 - SPIIL Information Updates

**If applicable, describe any changes to the information contained in the SPIIL 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. \***

## **Section 27. Significant Activities and Accomplishments**

**\* - Required field**

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. \*

## **Section 28. Substantial Challenges**

**\* - Required field**

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. \*

## **Section 29. Additional Information**

**\* - Required field**

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

## Signatures

\* - Required input

**I, SILC, confirm that the information provided in this report is true, complete and accurate to the best of my knowledge. :**

**I, DSE, confirm that the information provided in this report is true, complete and accurate to the best of my knowledge. :**