

REPORTING INSTRUMENT

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UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR COMMUNITY LIVING
INDEPENDENT LIVING ADMINISTRATION

SECTION 704
ANNUAL PERFORMANCE REPORT
for
CENTERS FOR INDEPENDENT LIVING PROGRAM
(Title VII, Chapter 1, Subchapter C of the Rehabilitation Act of 1973, as amended)

Program Performance Report

INSTRUMENT

(To be completed by Centers for Independent Living)

Fiscal Year: 2019 (Budget Period 09/30/2019 to 09/29/2020)

Grant #: 1903COILCL-00

Name of Center: Center for People With Disabilities

Acronym for Center (if applicable): CPWD

State: Colorado

Counties Served: Adams, Broomfield, Boulder, Jefferson, Gilpin and Weld

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 Office of Management and Budget (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 benefits (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 the Administration for Community Living, U.S. Department of Health and Human Services, 330 C Street, SW, Washington, DC 20201-0008, Attention Peter Nye, or email peter.nye@acl.hhs.gov. Note: Please do not return the completed Program Performance Report to this address.

SUBPART I – ADMINISTRATIVE DATA

Section A– Sources and Amounts of Funds and Resources

Section 725(c)(8)(D) of the Act; 34 CFR 366.50(i)(4)

Indicate the amount received by the Center for Independent Living (CIL) as per each funding source. Enter “0” for none.

Item 1 - All Federal Funds Received

(A) Title VII, Ch. 1, Subchapter B	\$12,765
(B) Title VII, Ch. 1, Subchapter C	\$271,765
(C) Title VII, Ch. 2	\$ 64,675
(D) Other Federal Funds	\$9,412

Item 2 - Other Government Funds

(E) State Government Funds	\$644,779
(F) Local Government Funds	\$639,456

Item 3 - Private Resources

(G) Foundations, Corporations, or Trust Grants	\$19,461
(H) Donations from Individuals	\$42,019
(I) Membership Fees	\$
(J) Investment Income/Endowment	\$2,545
(K) Fees for Service (program income, etc.)	\$1,425,629
(L) Other resources (in-kind, fundraising, etc.)	\$2,000

Item 4 - Total Income

Total income = (A)+(B)+(C)+(D)+(E)+(F)+(G)+(H)+(I)+(J)+(K)+(L)	\$3,134,506
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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, or Medicaid funds)	\$
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Item 6 - Net Operating Resources

[Total Income (Section 4)<minus> amount paid out to Consumers (Section 5) = Net Operating Resources	\$3,134,506
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SUBPART II – NUMBER AND TYPES OF INDIVIDUALS WITH SIGNIFICANT DISABILITIES RECEIVING SERVICES

Section 725(c)(8)(B) of the Act; 34 CFR 366.50(i)(2)

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 <u>active</u> CSRs carried over from September 30 of the preceding reporting year	336
(2) Enter the number of CSRs started since October 1 of the reporting year	152
(3) Add lines (1) and (2) to get the <i>total number of consumers served</i>	488

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	7
(2) Withdrawn	48
(3) Died	11
(4) Completed all goals set	58
(5) Other	29
(6) Add lines (1)+(2)+(3)+(4)+(5) to get <i>total CSRs closed</i>	153

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	335

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	333
(2) Number of consumers with whom an Independent Living Plan (ILP) was developed	155
(3) <i>Total number of consumers</i> served during the reporting year	488

Section E – Age

Indicate the number of consumers in each category below.

	# of Consumers
(1) Under 5 years old	3
(2) Ages 5 – 19	12
(3) Ages 20 – 24	19
(4) Ages 25 – 59	202
(5) Age 60 and Older	251
(6) Age unavailable	1

Section F – Sex

Indicate the number of consumers in each category below.

	# of Consumers
(1) Number of Females served	272
(2) Number of Males served	214

Section G – Race and Ethnicity

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

Please refer to the Instructions before completing.

	# of Consumers
(1) American Indian or Alaska Native	7
(2) Asian	13
(3) Black or African American	12
(4) Native Hawaiian or Other Pacific Islander	2
(5) White	364
(6) Hispanic/Latino of any race or Hispanic/Latino only	69
(7) Two or more races	
(8) Race and ethnicity unknown	21

Section H – Disability

Indicate the number of consumers in each category below.

	# of Consumers
(1) Cognitive	42
(2) Mental/Emotional	30
(3) Physical	77
(4) Hearing	3
(5) Vision	76
(6) Multiple Disabilities	260
(7) Other	

Section I – Individuals Served by County During the Reporting Year

Section 704(m)(4)(D) of the Act

List each county within the CIL’s service area, as indicated in the CIL’s application for Subchapter C funds and the approved State Plan for Independent Living (SPIL). Add additional rows as necessary. For each county, indicate how many individuals residing in that county were served by the CIL during the reporting year.

County Name	Number of County Residents Served
Adams	88
Arapahoe	11
Boulder	232
Broomfield	23
Clear Creek	1
Crowley	2
Denver	26
Douglas	1
El Paso	1
Gilpin	2
Grand	1
Jefferson	40
Larimer	24
Weld	36

SUBPART III – INDIVIDUAL SERVICES AND ACHIEVEMENTS

Sections 13 and 725(c)(8)(C) of the Act; 34 CFR 366.50(i)(3); Government Performance Results Act (GPRA) Performance Measures

Please refer to the Instructions before completing.

Section A – Individual Services

For the reporting year, indicate in the table below how many consumers requested and received each of the following IL services.

Services	Consumers Requesting Services	Consumers Receiving Services
(A) Advocacy/Legal Services	88	88
(B) Assistive Technology	35	35
(C) Children’s Services		
(D) Communication Services		
(E) Counseling and Related Services		
(F) Family Services		
(G) Housing, Home Modifications, and Shelter Services		
(H) IL Skills Training and Life Skills Training	237	237
(I) Information and Referral Services	366	366
(J) Mental Restoration Services		
(K) Mobility Training	14	14
(L) Peer Counseling Services	140	140
(M) Personal Assistance Services	47	47
(N) Physical Restoration Services		
(O) Preventive Services		
(P) Prostheses, Orthotics, and Other Appliances		
(Q) Recreational Services		
(R) Rehabilitation Technology Services		

Services	Consumers Requesting Services	Consumers Receiving Services
(S) Therapeutic Treatment		
(T) Transportation Services		
(U) Youth/Transition Services	36	36
(V) Vocational Services	73	73
(W) Other Services		

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
(A) Self-Advocacy/Self-Empowerment	71	25	46
(B) Communication	9	5	4
(C) Mobility/Transportation	41	14	27
(D) Community-Based Living	122	36	86
(E) Educational	15	2	13
(F) Vocational	93	39	54
(G) Self-care	39	8	31
(H) Information Access/Technology	90	23	67
(I) Personal Resource Management	26	7	19
(J) Relocation from a Nursing Home or Institution to Community-Based Living	9	2	7
(K) Community/Social Participation	140	15	125
(L) Other			

Item 2 – Improved Access to Transportation, Health Care Services, 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	27	19	8
(B) Health Care Services	549	464	85
(C) Assistive Technology	283	237	46

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 report that follow-up contacts with these consumers showed access to previously unavailable transportation, health care and assistive technology.

(B) I&R Information

To inform ILA 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.

General Program achievements can be found under the work plan section. Below is a success story from one of our consumers from a rural town:

The consumer had no cell phone or landline and therefore reached us via phone from a local town store. He needed assistance in applying for Social Security Disability Insurance (SSDI). He had no income due to physical injuries that happened in his previous workplace. He worked in carpentry and had substantial back pain. One of the Independent Living Advisors got his email and sent him the SSDI checklist, a video tutorial on how to make a 'my social security account,' as well as a starter guide/kit for applying. The Independent Living Advisor stayed in touch with him and offered ongoing application assistance and guidance during the process. The consumer qualified for SSDI and is now able to support himself financially.

SUBPART IV – Extent of CIL Compliance with the Six Evaluation Standards

Section 725(b) and section 725(c)(8)(A) of the Act; 34 CFR 366.63

Section A – Compliance Indicator 1: Philosophy

Item 1 - Consumer Control

34 CFR 366.63(a)(1); 34 CFR 366.50(i)(5) and (6)

(A) Board Member Composition

Enter requested governing board information in the table below:

Total Number of Board Members	Number of Board Members with Significant Disabilities
9	6

(B) Staff Composition

Enter requested staff information in the table below:

	Total Number of FTEs	FTEs Filled by Individuals with Disabilities	FTEs Filled by Individuals From Minority Populations
Decision-Making Staff	5	4	1
Other Staff	25.25	19.75	7

Item 2 - Self-Help and Self-Advocacy

34 CFR 366.63(a)(2)

Briefly describe how the CIL has promoted self-help and self-advocacy among individuals with significant disabilities during the reporting year.

Independent Living Advisors (ILAs) and direct service providers utilize the IL philosophy as the foundation of their services in order to provide a framework in assisting consumers in developing independent living goals. Staff see their role as working with consumers to empower them to take the steps necessary to achieve their goals. This is very different from non-CIL service providers and staff constantly work with consumers and the community to help them better understand the difference between IL service delivery and case management. Additionally, staff have been trained in a Strength Based Service Delivery which mirrors the IL Philosophy and creates a common language for consumers and community partners.

Item 3 - Peer Relationships and Peer Role Models

34 CFR 366.63(a)(3)

Briefly describe how, during the reporting year, the CIL has promoted the development of peer relationships and peer role models among individuals with significant disabilities.

CPWD employs a majority of people with disabilities. This includes people with visible disabilities such as those with developmental disabilities, people with cerebral palsy, and people who are blind. CPWD also employs several individuals with “invisible” disabilities. Because CPWD employs a majority of people with disabilities, staff and consumers can develop informal peer mentoring relationships. Staff are able to be successful peer role models as they have gotten past many of the barriers that face people with disabilities—including employment, housing, transportation and healthcare. CPWD also has over 30 peer support groups that meet regularly throughout our service area.

Item 4 - Equal Access

34 CFR 366.63(a)(4)

(A) Briefly describe how, during the reporting year, the CIL has ensured equal access of individuals with significant disabilities, including communication and physical access, to the center's services, programs, activities, resources, and facilities, whether publicly or privately funded. Equal access, for the purposes of this indicator, means that the same access is provided to any individual with a significant disability regardless of the individual's type of significant disability.

CPWD offices have wide hallways, Braille Office Signs, automatic door openers and accessible bathrooms. During this reporting period we conducted a major renovation of our main building and were able to increase the accessibility and

safety features of our building. Additionally, our offices are scent-free zones with posted signs in all reception areas. Staff that work with consumers outside of our offices, ensure that meetings and events are always held at accessible locations. Our outreach materials as well as our entire website are in English and Spanish to ensure equal access to monolingual Spanish speaking individuals with significant disabilities. In addition to having several staff members at CPWD who are fluent in Spanish or American Sign Language, we contract with interpreters to ensure the services is accessible in a manner that best works for the consumers. This past year we have been conducting a lot one-on-one services and peer support groups over Zoom and google meets for individuals unable to meet in one of our offices or who are at greater risk of COVID. Google meets has a built in captioning option, which we have found to increase accessibility of peer groups and one on one meetings.

(B) Briefly describe how, during the reporting year, the CIL has advocated for and conducted activities that promote the equal access to all services, programs, activities, resources, and facilities in society, whether public or private, and regardless of funding source, for individuals with significant disabilities. Equal access, for the purposes of this indicator, means that the same access provided to individuals without disabilities is provided in the center's service area to individuals with significant disabilities.

CPWD programs and staff all work together to ensure the communities we serve have full, complete and equal access for people with disabilities. The Development and Communications Department, Personal Assistance Services and Core Services at CPWD coordinate activities along with our consumers to promote equal access. This can include systems advocacy at public hearings, participating on local committees for transportation and housing, presenting to the business community about Disability Etiquette and Service Animals and providing usability audits of local businesses to ensure physical and programmatic accessibility. Our staff is seen in the community as experts and work with many different entities each year to help address equal access in our community.

Item 5 – Alternative Formats

34 CFR 366.63(a)(4)

Briefly describe how, during the reporting year, the CIL has ensured the availability in alternative formats of all of its written policies and materials and IL services, as appropriate.

CPWD is committed to providing all written material in alternative formats which may include, large print, Braille, Bi-lingual, electronic versions and audio files of printed materials. All communications can be made available in alternative formats upon request including newsletters, brochures, and any other

communications. Additionally, we have a video phone and two staff fluent in ASL for communication with Deaf consumers.

Section B – Compliance Indicator 2: Provision of Services on a Cross-Disability Basis

Section 725(b)(2) of the Act; 34 CFR 366.63(b)

Briefly describe how, during the reporting year, the CIL has ensured that IL services are provided to eligible individuals with a diversity of significant disabilities and individuals who are members of populations that are unserved or underserved, without restrictions based on the particular type or types of significant disability and in a manner that is neither targeted nor limited to a particular type of significant disability.

CPWD serves individuals with all types of disabilities through our core services and additional IL services. Additionally, all publications about services at CPWD highlight that we are a cross-disability organization to ensure all individuals with disabilities feel welcome and included. Staff regularly participate in a variety of outreach activities in order to reach people who are unserved or underserved. Specific outreach is targeted towards individuals living in the rural communities and the mono-lingual Spanish speaking community. Both of these demographics have been identified on a statewide basis as being underserved. To better reach the Spanish speaking community we have a bi-lingual direct service staff and bi-lingual program manager. To better reach the rural community we have a full time dedicated Rural Independent Living Advisor. Additionally, staff regularly attend external meetings to educate the community on CPWD's services and programs.

Section C – Compliance Indicator 3: Independent Living Goals

Section 725(b)(3) of the Act; 34 CFR 366.63 (c)

Item 1 – Consumer Information

Briefly describe how, during the reporting year, the CIL has ensured that consumers have the opportunity to develop and achieve their goals (either with or without an ILP) and that the consumer has the opportunity to express satisfaction with the center and such consumer satisfaction results are evaluated by the center.

Individuals that come to CPWD for services are provided information about what it means to become a consumer, the goal development process and how they can partner with our staff to work towards greater independence. By providing them with this information, the individual can make an informed choice to become a consumer or to stay as an information and referral. CPWD's intake process includes going over consumer's rights and responsibilities, grievance procedure and the Independent Living Plan (ILP), which an individual can decide to create or waive.

During each following meeting or service, staff check-in with the consumers about their satisfaction with services and document progress towards independent living goals. This information is tracked in our electronic database, CilsFirst. Additionally, CPWD completes an annual satisfaction survey of all consumers as an anonymous way for individuals to share their experience with services. This helps us evaluate program quality and effectiveness.

Item 2 – Consumer Service Record Requirements

Briefly describe how, during the reporting year, the CIL ensured that each consumer's CSR contains all of the required information.

During the year, Consumer Service Records (CSRs) are regularly reviewed to determine if all required information has been maintained. Additionally, we have weekly database training to cover questions about the online system and the intake process. In May of 2020 the Designated State Unit conducted it's regularly scheduled CIL Certification audit at CPWD and we passed with zero deficiencies or findings.

Section D – Compliance Indicator 4: Community Options and Community Capacity

Section 725(b)(4) and (6) of the Act; 34 CFR 366.63(d)

Please refer to the Instructions before completing.

Item 1 – Community Activities Table

In the table below, summarize the community activities involving the CIL’s staff and board members during the reporting year. For each activity, identify the primary disability issue(s) addressed as well as the type of activity conducted. Describe the primary objective(s) and outcome(s) for each activity. Add more rows as necessary.

Issue Area	Activity Type	Hours Spent	Objective(s)	Outcomes(s)
Health Care Access	Advocacy/ Education	506	To increase access to Health care and home health options so people with disabilities can remain in their own homes.	People with disabilities will be able to live in their communities of choice
Transportation	Advocacy/ Collaboration	116	To ensure that people with any type of disability are able to navigate in and between communities of choice.	People with disabilities will be able to travel to their desired location with appropriate transportation.
Housing	Advocacy/ Collaboration	273	To ensure that communities have the appropriate amount of affordable and accessible housing options.	People with disabilities are living in integrated housing.
Resource Development	Outreach/ Education	1110	To build partnerships and expand knowledge of working with individuals with disabilities	Individuals will have access to more services that meet their needs.
Assistive Technology	Collaboration/ Education	739	Provide demonstration and technical assistance on how to use different assistive technology devices.	People with disabilities have increased access to assistive technology.

Item 2 – Description of Community Activities

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

For many CPWD staff community outreach and education is part of their daily work. This might be informally through a simple conversation with a local business or more formal such as a presentation or training provided locally or on a national scale. The above numbers capture these more formal community activities and outreach provided by our staff. Additionally, many of our programs rely on strong community partnerships to help our consumers reach their independent living goals. From the transition team creating partnerships for the success of each individual moving from a nursing home back into the community; to the business relationships that contribute to the successful employment of consumers, partnerships are at the center of our programs.

We specifically saw an increase in Veteran Directed Services and Youth Transition services through our partnerships with two different VA Medical Centers and several Transition Schools in multiple school districts.

To strengthen all of these partnerships staff participate on councils and regional planning committees; offer presentations to the community of a variety of disability-related topics; attend networking events and fairs; actively participate in local Chamber of Commerce and present at a national conference to share our best practices with other CILs around the country.

Below are a few highlighted examples of our community activities from the reporting year.

Mobility for All: *The Mobility for All (M4A) Technology Ambassador Program has made transportation options more accessible for older adults, individuals with disabilities and caregivers in Boulder County. This incredible multi-year pilot program was a collaboration between Boulder County and local transportation and human service agencies, including CPWD, to address the ongoing need of access to transportation for people with disabilities and older adults.*

Transportation is a social determinant of health and a basic need of all citizens and the navigation needs through technology was creating another level of barrier in the community. Through an evidence-based curriculum development for Uber, Lyft, Google Maps, RTD Mobile Ticketing, and Transit Apps, a culturally responsive outreach strategy, and the framework for a peer-to-peer network of technology ambassadors, the M4A community project provided 65 workshops in the community to increase knowledge and comfort level of people with disabilities accessing transportation through technology and apps.

Census Outreach: CPWD took an active role in the 2020 Census outreach efforts as a cultural broker for the disability community in Boulder County. Partnered with other cultural brokers from different minority groups in our area, we conducted targeted outreach to reach hard-to-count population and ensure that everyone gets counted. Although the pandemic created many barriers as in-person outreach was not possible, we still managed to have a robust outreach that included:

- Direct access to consumers via daily peer groups
- Online informational videos/ tutorials
- Creating accessible video content to ensure greater reach within our targeted demographics i.e. adding closed captioning to videos and audio recording.
- Creating a social media page specific to Census outreach
- Coordinating text message campaign and door hanger campaign directed to areas of Boulder County with lower self- response rates

Voter Awareness: CPWD launched a voter awareness campaign and based on the requests from our community the following services were provided to promote equal access in the November 3 elections:

- Information referral about accessibility of polling locations and voting equipment
- Ballot issues and nonpartisan candidate information
- Mail-in voting details
- Accessible Transportation options/ information

We would be remiss if we didn't mention about the 30th anniversary of the ADA! CPWD organized an online community celebration and participated in celebrations organized by other CILs and national disability community.

Section E – Compliance Indicator 5: IL Core Services and Other IL Services

Section 725(b)(5) of the Act; 34 CFR 366.63(e)

In addition to the data provided in Subpart III, describe how information and referral services and the other IL core and other IL services are provided to those who request such services in formats accessible to the individual requesting the services. Describe any innovative practices (not mentioned elsewhere in this report) to enhance the availability and effectiveness of IL services.

In each office, CPWD has an Independent Living Advisor who often serves as the first point of contact for individuals seeking services. The ILAs provide I&R services and share about IL philosophy and the process of becoming a consumer. All CPWD services are provided in collaboration with the individual. Through the

intake process, staff work with consumers to identify their goals and the services that would help them reach their goals.

Program accessibility is very important to CPWD and to better assist our consumers we have staff that travel to multiple offices and meet with consumers in their community, reducing the barriers of transportation. Additionally, we have staff fluent in ASL and Spanish, our website is in English and in Spanish, and materials are in alternate formats as well as in two languages. Below is a little more about each Core Service.

Information and Referral: All staff have the responsibility of providing Information and Referral (I&Rs). CPWD handles more than one hundred I&Rs a month, primarily from individuals with disabilities, family members, healthcare providers, social service organizations, and funders. When the pandemic hit our community, CPWD served as a hub of up-to-date information for our consumers and we quickly noticed that the majority of I&Rs were focused on COVID-19.

Independent Living Skills Training: Independent Living Advisors (ILAs) and Independent Living Skills Trainers (ILSs) both provide Independent Living Skills Training (ILST). ILST is done both on an individual level as well as in group settings. Examples of training include learning how to budget, navigating the public transportation system, using Assistive Technology and now online platforms and different software and apps for remote communication.

Individual/Systems Advocacy: Direct service staff and our Community Organizer work with individuals and groups on their advocacy goals. This might include teaching a consumer how to advocate on their own or working with a group to create equal access for all. We provide training and workshops to the public to create a more inclusive community. Additionally, we are a member of the Association of Colorado Centers for Independent Living (ACCIL) as well as Colorado Long-Term Assistance Providers (CLASP), and participate in State-wide advocacy and systems change collectively with the other members. For example, in the reporting year, through ACCIL we successfully worked with the State legislators to contain the cuts to IL funds in the State Budget and minimize the impact for CILs and disability services. Similarly, through CLASP we focused on advocacy around exempting the household members from the Electronic Visit Verification requirements which would have added significant unnecessary burden on family caregivers.

Peer Mentoring: Employees with disabilities provide a natural conduit for peer mentoring. Currently, 78% of CPWD's staff are individuals with disabilities. Staff who have overcome barriers and achieved varying degrees of independence are uniquely qualified to mentor others to achieve similar goals. Additionally, CPWD has a number of peer support groups that meet weekly and monthly so that consumers can build community and support each other through their independent living goals. During the increased isolation due to the pandemic, our online peer support groups have been especially in high demand and well attended.

Transitions: Staff provide transition services to individuals transitioning out of nursing facilities and to youth transition from high school. Nursing Home Transition services are provided to individuals who have identified a desire to return to the community and staff are constantly working to ensure all residents in nursing facilities know they have a right to leave and return to the community. Youth services are provided in partnership with local area schools through hands on classes specifically developed to address IL and Vocational skills. Classes also address social and emotional needs of students who are entering adulthood. Youth services also include peer support groups and social outings.

Section F – Compliance Indicator 6: IL Resource Development Activities

Section 725(b)(7); 34 CFR 366.63(f)

Briefly describe the CIL's resource development activities conducted during the reporting year to expand funding from sources other than Chapter 1 of Title VII of the Act.

CPWD employs a Director of Development and Communication who applies for funding from federal, state, county and city funds throughout the year. Additionally, we apply for funding from private foundations including Christopher and Dana Reeve Foundation that supports our Nursing Home Transition services. Since April, with the incredible efforts by our Director of Development and Communications we were able to secure COVID relief funds from multiple different sources for different support and services related to responding to the pandemic's challenges. CPWD also participates in Colorado Gives Day each year to build our donor base. We seek funding from individual contributors and sponsorships from local businesses.

This past year we have seen amazing growth in our Veteran's Independence Program (VIP) and it continues to help us diversify our funding and build our organizational capacity. We continue to be a vendor for Colorado DVR and an approved Employment Network in Colorado, which allows us to provide benefits counseling and other employment services for a structured fee, and we continue to

be a vendor for the Colorado Healthcare Policy and Financing for home health, home care and other Medicaid funded long-term community-based services.

SUBPART V – ANNUAL PROGRAM AND FINANCIAL PLANNING OBJECTIVES

Section 725(c)(4) of the Act

Section A – Work Plan for the Reporting Year

Item 1 – Achievements

Discuss the work plan’s proposed goals and objectives and the progress made in achieving them during the reporting year.

Our focus has been on increasing outreach and visibility, growing/expanding our programs to reach under-served populations, increasing our Fee-for-Service program, diversifying funding sources, increasing quality/impact of our programs and demonstrating our culture’s value of diversity, inclusion and equity. There is no doubt that the COVID-19 pandemic interrupted the pursued of goals and plans and urged as to pivot our attention and effort to most pressing and immediate needs. We are proud that amidst the unprecedented challenges and interruptions brought by the pandemic we made progress towards our original goals and more importantly stayed true to our mission: to provide resources, information, and advocacy to assist people with disabilities in overcoming barriers to independent living.

Following the national events increased advocacy by the Black Lives Matter movement, CPWD staff held several conversations as well as training focused on biases. As a result, we have formed an Inclusion, Diversity, Equity into Action (IDEA) Committee made of staff and board members whose goals is to foster a culture that promotes diversity, equity, and inclusion while actively challenging and dismantling systemic oppression. As action steps, the committee will be reviewing internal policies and practices, bringing training and education and more.

Development and Communications

The Development and Communications department had a busy year with grant writing and developing communications for CPWD.

Applied for 33 Grants for a total of \$838,237

Received 18 Grants for a total of \$426,187

Other Fundraising Activity Included \$7,095 from Colorado Gives Day and \$27,900 in major donations.

During the reporting year, we used resources to adapt to COVID, transition services online, maintain connection and communication with people with disabilities in the community, identify and meet new COVID-related independence needs, and continue outreach and education to marginalized and hard-to-reach populations.

Additionally, we began the process of translating the education videos mentioned in last year's report into Spanish to increase access to information for bi- and mono-lingual Spanish-speaking people with disabilities in the communities we serve.

Fee for Service Programs

Employment: CPWD's Employment Program consists of two main parts, the Ticket to Work program and Benefits Counseling. CPWD is an Employment Network (EN) with the Social Security Administration and we work with consumers to learn new skills to help them independently acquire and maintain a job in conjunction with the Ticket to Work program. This training includes career exploration, goal setting, resume development, drafting of cover letters, professional communications, mock interviews, tips for online job search, application review, job site visits, accommodations planning, and follow-along support. In-depth Benefits Planning helps consumers understand their benefits and what impacts employment will have on those benefits. This past year, CPWD served more consumers in the Ticket to Work program than any year previously.

Consumers include referrals from the Division of Vocational Rehabilitation, active participants in the federal Ticket to Work program, referrals from community partners, and walk-ins.

Two staff in the Employment Program are Certified Community Partner Work Incentive Counselors "CPWIC," who provide in-depth benefits counseling to assist consumers in making an informed decision about work while on public benefits and how to successfully and securely transition to stable employment income. On a statewide level we continue to see an increase in the need for CPWIC's as the Division of Vocational Rehabilitation is referring more people for this service and the benefits that it has for consumers looking to become more independent through working. Due to the pandemic, more people have had

changes to their working situations and are in need of support to navigate their changing benefits and how to safely return to work.

One of the consumers in our Ticket to Work program “Steve” worked with our staff for many months to find a position in his chosen field of IT. “Steve” came from a family culture where the father makes all of the decisions, even for his adult children. “Steve” struggled to get his wants and needs heard by his father. Staff worked with “Steve” on ways to communicate with his father, conducted mock discussions and sat in on some conversations with “Steve” and his father. The process of helping “Steve” learn to advocate for himself took several months. Once “Steve” was confident enough to discuss these issues with his father, “Steve” was finally able to start living for himself. “Steve” was able to secure his dream job in IT and move out of state to pursue that dream.

Veterans Independence Program: VIP at CPWD was launched in 2018 and provides Veteran Directed Home and Community Based services through referrals and partnership with the local Veterans Affairs Hospitals in Denver and Cheyenne. The program has grown from thirty-two Veterans being served at the end of September 2019 to fifty six Veterans receiving services at the end of September 2020. The program continues to expand to serve more Veterans living with disabilities in Northern Colorado, Wyoming and Nebraska.

“John” is one of the first Veterans that enrolled in CPWD’s VIP program and in his early 30’s he is one of our youngest Veterans. Due to service connected injuries he is a complete quadriplegic and requires hands on assistance with all activities of daily living and mobility. “John” could easily have given up and moved back into his parent’s home and allowed them to take care of him. Instead, he finds ways to be as independent as possible. “John” lives in his own home about five minutes from his parents. Prior to his injuries he was an avid hunter and continues to find ways to enjoy his hobbies with adaptive equipment. He employs caregivers to come in and help him with activities of daily living. “John” can get depressed and shuts down at times, but he has reached out to staff when he would not reach out to family.

When the stay at home orders went into effect, his VIP Advisor worked with him and his caregivers on how to use and access Zoom, a virtual platform. “John” is

now using Zoom to communicate with staff and has even reached out to family using Zoom as well. “John’s” father contacted staff and expressed gratitude for this and asked for some training on how to use Zoom as well since “John” seems to communicate better virtually than he did in person at times. Our staff have worked with a number of Veterans and their families to learn how to use virtual platforms to stay connected during these uncertain times.

Our Home Health service (skilled and non-skilled) continued to provide hand-on care at the times when the nursing homes had outbreaks and high number death related to the Covid-19 virus. Although the program went through administrative staffing changes and implementation of a new electronic medical record system, we continued quality services and passed a state licensure survey/audit conducted by the Colorado Department of Healthcare and Environment.

Item 2 – Challenges

Describe any substantial challenges or problems encountered by the CIL, and the resolutions/attempted resolutions.

One of the challenges remains the provision of in-person services to those who are not able to connect or learn remotely. Additionally, not being able to connect and gather in person has created social isolation and increase in mental health illnesses. In the reporting year, we also conducted a major renovation of our main building and we are now looking forward to the day that we can gather in-person as a community, socialize in-person, conduct classes and workshops in our newly renovated building, have fun outings and events, and improve our mental health through human connections.

Item 3 – Comparison with Prior Reporting Year

34 CFR 366.50(i)(7)

As appropriate, compare the CIL’s activities in the reporting year with its activities in prior years, e.g., recent trends.

All recent trends and program updates are listed in the above sections of this report.

Section B – Work Plan for the Year Following the Reporting Year

Item 1 – Annual Work Plan

List the CIL's annual work plan goals, objectives and action steps planned for the year following the reporting year.

In 2019 CPWD staff and leadership team worked together to develop a new three-year strategic plan. This is the work plan for the organization. The following major categories encompass key overarching goals from both our former strategic plan and our current assessment. Each major category has a subset of goals and related task and activities that, if realized, will assist CPWD in making significant progress towards its current vision.

GOAL 1: Outreach & Visibility: Increasing awareness of CPWD and Independent Living Philosophy

Objectives and Action Steps:

- Increasing community knowledge and understanding of CPWD, our services and programs, and role in the community*
- Increasing community knowledge and understanding of IL Philosophy, Centers for Independent Living, Disability Etiquette, and community-based disability issues*
- Community knowledge of CPWD is increased*

GOAL 2: Programs: Reaching un- and under-served populations

Objectives and Action Steps:

- Increasing services to underserved communities whether by geography, ethnicity, identity, and orientation, or disability*

GOAL 3: Human Resources: Addressing compensation inequities, increasing or modifying benefits and incentives to attract and retain high-quality staff

Objectives and Action Steps:

- Implementing a fair, market-rate wage, salary, benefits and incentives program*
- Hiring and retaining high-quality staff*

GOAL 4: Funding: Developing opportunities for new and additional funding, increasing Fee-for-Service program income

Objectives and Action Steps:

- Increasing funding diversity through creative funding sources in support of programs and general operating*
- Increasing Fee for Services programming and income*

GOAL 5: Culture and Administration: Improving cross-office communication/ culture and service delivery consistency; ongoing board development and expansion

Objectives and Action Steps:

- *Implementing cross-office communication consistency and accuracy*
- *Increasing consistency of service delivery across all CPWD offices*
- *Increasing the board membership, expertise, and diversity*

Goal 6: Increase the quality and impact of programs

Objectives and Action Steps:

- *Measure Quality of I&R services*
- *Measure consumer satisfaction*
- *Services and growth are aligned within each program*

Item 2 – SPIL Consistency

Explain how these work plan goals, objectives and action steps are consistent with the approved SPIL.

The State Plan for Independent Living identified three goals that they seek to accomplish with the assistance of the nine Colorado Centers for Independent Living.

Goal 1: Improve SILC effectiveness.

Goal 2: Increase SILC member knowledge base.

Goal 3: Increase the capacity of CILs.

The CPWD work plan is consistent with the SPIL goals and directly addresses the third goal of increasing capacity.

SUBPART VI - TRAINING AND TECHNICAL ASSISTANCE NEEDS

Section 721(b)(3) of the Act.

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	
Community/Grassroots Organizing	
Individual Empowerment	
Systems Advocacy	
Legislative Process	
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	
Program Performance Reports	
Performance Measures contained in Program Performance Report	
Dual Reporting Requirements	
Case Service Record Documentation	
Disability Awareness and Information	
Specific Issues	
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	
Fund-Raising Events of Statewide Campaigns	
Grant Writing	
Independent Living Philosophy	
General Overview	
Innovative Programs	
Best Practices	
Specific Examples	
Management Information Systems	
Computer Skills	
Software	
Marketing and Public Relations	
General Overview	
Presentation/Workshop Skills	
Community Awareness	
Networking Strategies	
General Overview	
Electronic	
Among CILs & Statewide Independent Living Councils (SILCs)	
Community Partners	
Program Planning	
General Overview of Program Management and Staff Development	
CIL Executive Directorship Skills Building	
Conflict Management and Alternative Dispute Resolution	
First-Line CIL Supervisor Skills Building	
IL Skills Modules	
Peer Mentoring	
Program Design	
Time Management	
Team Building	
Outreach to Unserved/Underserved Populations	
General Overview	
Disability	
Minority	
Institutionalized Potential Consumers	
Rural	

Urban	
SILC Roles/Relationship to CILs	
General Overview	
Development of State Plan for Independent Living	
Implementation (monitor & review) of SPIL	
Public Meetings	
Role and Responsibilities of Executive Board	
Role and Responsibilities of General Members	
Collaborations with In-State Stakeholders	
CIL Board of Directors	
General Overview	
Roles and Responsibilities	
Policy Development	
Recruiting/Increasing Involvement	
Volunteer Programs	
General Overview	
Optional Areas and/or Comments (write-in)	1
I am interested in learning of successful IL programs or services by CILs to individuals with IDD.	

SUBPART VII – ADDITIONAL INFORMATION

Section 704(m)(4)(D) of the Act

Section A – Other Accomplishments, Activities and Challenges

Describe any additional significant accomplishments, activities and/or challenges not included elsewhere in the report, e.g. brief summaries of innovative practices, improved service delivery to consumers, etc.

Section B – Additional Information

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

SUBPART VIII - SIGNATURES

Please sign and print the names, titles and telephone numbers of the CIL director and board chair.

 **12/28/2020**

SIGNATURE OF CENTER DIRECTOR DATE

Maria Stepanyan, Executive Director **303-442-8662**

NAME AND TITLE OF CENTER DIRECTOR PHONE NUMBER

SIGNATURE OF CENTER BOARD CHAIRPERSON DATE

Deborah Conley, Board President **303-442-8662**

NAME AND TITLE OF CENTER BOARD CHAIRPERSON PHONE NUMBER