

# **State Grants for Assistive Technology Program**

## **State Plan for Assistive Technology**

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## Instructions

Section 4 of the *Assistive Technology Act of 1998, as amended* (AT Act) establishes formula grants to states to support comprehensive statewide programs (Statewide AT Programs) that conduct activities that improve access to and acquisition of AT devices and services for individuals with disabilities across the lifespan and across a wide array of disabilities, and their family members, guardians, advocates, and authorized representatives.

Section 4(d)(1) of the AT Act requires that state formula grantees submit an application to the Administration for Community Living (ACL) to receive a grant. ACL calls the application a State Plan for Assistive Technology (State Plan for AT or State Plan). This document provides the instructions for completing the State Plan that covers the activities of Statewide AT Programs for Federal fiscal years 2018 (October 1, 2017 to September 30, 2018), 2019 (October 1, 2018 to September 30, 2019), and 2020 (October 1, 2019 to September 30, 2020).

The State Plan for AT must be developed, prepared, and submitted with the advice of the state's Advisory Council by the Lead Agency designated by the Governor to carry out the Statewide AT Program. If an Implementing Entity carries out the Statewide AT Program rather than the Lead Agency, the State Plan for AT can be jointly developed and prepared by the Lead Agency and Implementing Entity with the advice of the state's Advisory Council, though the State Plan must be submitted by the Lead Agency. A Certifying Representative for the Lead Agency will sign the plan electronically.

The State Plan describes how the state will conduct its Statewide AT Program during the three year period covered by the plan. The plan is reviewed by ACL to ensure that it conforms to the instructions in this document and the requirements of the AT Act. ACL may work with the state to adjust the State Plan in order to make the plan approvable.

If ACL determines that the State Plan for AT is not approvable, ACL will attempt to resolve the disputed issues after providing the appropriate technical assistance to the state. If no resolution has been reached after reasonable efforts, ACL will provide an opportunity for a hearing in accordance with 34 CFR part 76.202 before the State Plan for AT is disapproved.

The State Plan for AT must be amended during the three-year period of the plan if ACL determines that an amendment is essential, such as in the case of a material change in state law, organization, policy or agency operations affecting the information, assurances, or administration of the plan. Certain sections of the State Plan must be updated annually and those are noted in the instructions. Other sections must be changed or update as needed to ensure the information contained in it accurately reflects the state's activities. States should note that the content of the State Plan directly correlates to requirements for reporting annual data to ACL. The instructions contain frequent reminders that “. . . you are required to provide annual progress report (APR) data for any activity claimed in this State Plan.” This is a reference to the annual data submitted in the Annual Progress Report (APR) for State Assistive Technology Programs. For State-level Activities (as explained below), the APR provides the performance measure data referenced in Section H of this State Plan.

When ACL reviews your Annual Progress Report, it will use the most recent version of your State Plan for AT as a reference. Therefore, grantees must review their State Plan at least annually. Sections A and B of the State Plan must be updated annually. Section A is basic demographic data that must be kept current to ensure effective communications. Section B includes data elements that apply to a new fiscal year in each State Plan and must be updated annually. All other Sections can be updated as needed within the three year State Plan cycle.

Paper submissions of the State Plan for AT are neither required nor accepted. States will submit plans using the National Assistive Technology Act Data System (NATADS, <https://www.state572data.net/>). Only individuals with user identification (ID) and passwords can enter data into NATADS. User IDs and passwords are issued by the NATADS administrator.

The State Plan is completed by entering information into text boxes, making selections from drop-down menus, and use of “check boxes.” The format cannot account for every variable in how states conduct their programs. Therefore, a state should select its answers based on the responses that are the most accurate and best describe how the Statewide AT Program operates, even if the description is not exact. In almost all cases, there is an opportunity to clarify using an open-ended text box. A state need not provide information related to activities it does not conduct, but must respond to every item for activities it does conduct.

The instructions in this document reference the screens presented in the NATADS. The NATADS does not contain extensive instructions, so states will need this document when completing the State Plan online.

For assistance with completing a plan, contact Robert Groenendaal at (202) 795-7356 or [Robert.Groenendaal@acl.hhs.gov](mailto:Robert.Groenendaal@acl.hhs.gov). For technical support on use of the NATADS, contact Vance Dhooge at [vance.dhooge@ataporg.org](mailto:vance.dhooge@ataporg.org).

# Assistive Technology State Grant Program

## State Plan for FY 2018-2020

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# Assistive Technology State Grant Program

## State Plan for FY 2018-2020

### Section A. Identification and Description of Lead Agency and Implementing Entity; Change in Lead Agency or Implementing Entity

Section 4(d)(2) of the AT Act requires that the State Plan contain information identifying and describing the Lead Agency and Implementing Entity (if applicable) designated by the state's governor. A state either has a Lead Agency alone or has both a Lead Agency and an Implementing Entity. The Implementing Entity is a subcontractor separate from the Lead Agency who is responsible for implementing the required Section 4 AT Act activities that will be conducted as described in the State Plan. The Lead Agency does not also name itself or a unit within the agency as an Implementing Entity.

If there is an Implementing Entity, section 4(d)(4)(B) requires that the State Plan include a description of the mechanisms established to ensure coordination of activities and collaboration between the Implementing Entity and the Lead Agency. If the governor chooses to re-designate the Lead Agency or Implementing Entity, section 4(c)(1)(C) requires that good cause for this change be shown in the State Plan, including why the previously designated agency or entity no longer should serve. If the Lead Agency or Implementing Entity is changing, the information provided in this State Plan should describe how the new agency or entity will conduct the Statewide AT Program.

ACL utilizes the first State Plan submitted in 2005 as the baseline for identification of the governor designated lead agency and implementing entity for each Section 4 grantee. The State Plan is the mechanism used to formally request approval from ACL to change the lead agency or the implementing entity. If a change has occurred in your lead agency or implementing entity since the original State Plan, that change carries forward to the current State Plan. With the submission of this State Plan, grantees are certifying that the lead agency and implementing entity (if applicable) are those originally designated or an official redesignation has occurred and the change has been approved in prior State Plans. The 2018-20 State Plan will become the new baseline for Lead Agency and Implementing Entity designations and any change to those designations must be approved in subsequent State Plans.

The following items are intended to satisfy the requirements described above.

# Screen 1: Identification & Description of Lead Agency and Implementing Entity

<b>Statewide AT Program (Information to be listed in national State AT Program Directory)</b>	
1. State Program Title	
2. State AT Program URL (home page for State AT Program)	
3. Mailing address	5. State
4. City	6. Zip code
7. Main email address (for general public to use to contact State AT Program)	
8. Main phone number (for general public to use to contact State AT Program)	
9. Separate TTY number (for general public to use to contact State AT Program)	
<b>Lead Agency</b>	
10. Agency name	
11. Mailing address	13. State
12. City	14. Zip code
15. Lead Agency URL	
<b>Implementing Entity</b>	
16. Does your Lead Agency contract with an Implementing Entity to carry out the Statewide AT Program on its behalf? Yes <input type="checkbox"/> No <input type="checkbox"/> <i>If yes, complete Items 17–22.</i>	
17. Name of implementing entity	
18. Mailing address	20. State
19. City	21. Zip code
22. Implementing Entity URL	
<b>Program director and other contacts</b>	
23. Program Director for State AT Program (last, first)	
24. Title	
25. Phone	
26. E-mail	
27. Primary Contact at the Lead Agency (last, first)	
28. Title	
29. Phone	
30. E-mail	
31. Primary Contact at Implementing Entity (last, first) – If applicable	
32. Title	
33. Phone	
34. E-mail	
<b>Person Responsible for completing this form if other than State AT Program Director</b>	
34. Name (last, first)	
35. Title	
36. Phone	
37. E-mail	
<b>Certifying Representative</b>	
38. Name (last, first)	
39. Title	
40. Phone	
41. E-mail	

## Screen 2: Change in Lead Agency or Implementing Entity

**1. Describe the mechanisms established to ensure coordination of activities and collaboration between the Implementing Entity and the state. [Text box - required if 16 is checked yes]**

Instructions: According to section 4(c)(1)(B) of the AT Act of 1998, as amended, the Implementing Entity must carry out its responsibilities through a subcontract or other administrative agreement with the Lead Agency. Your description should identify the mechanism used and how the Lead Agency provides oversight and holds the Implementing Entity accountable for appropriate implementation of the Statewide AT Program.

**2. Is the Lead Agency named in this State Plan a new or different Lead Agency from the one designated by the Governor in your previous State Plan? [Drop-down menu - required]**

Instructions: The drop-down menu allows you to select “yes” or “no.” The “previous state plan” was the plan under which the Statewide AT Program operated from October 1, 2015 until the submission of this State Plan. If a change in Lead Agency already has been approved by ACL under the previous State Plan, the state can select “no.” If you select “no,” and you use an Implementing Entity, move on to Question 46 about changing Implementing Entities.

**If you answered no to this question, and you do not use an Implementing Entity, you may skip ahead to the next section. Otherwise, you must answer the following questions.**

**3. Explain why the Lead Agency previously designated by your state should not serve as the Lead Agency. [Text box-required if Question 2 above is yes]**

Instructions: Describe all factors that led the state to consider changing from the previous Lead Agency or Implementing Entity, such as concerns about performance, state policies that require periodic competition for contracts, or restructuring of state government.

**4. Explain why the Lead Agency newly designated by your state should serve as the Lead Agency. [Text box-required if Question 2 above is yes]**

Instructions: Describe how and why the new Lead Agency was chosen to implement the Statewide AT Program and justify the appropriateness of the choice.

**5. Is the Implementing Entity named in this State Plan a new or different Implementing Entity from the one designated by the Governor in your previous State Plan? [Drop-down menu-required if Screen1: Line16 is yes]**

Instructions: The drop-down box above allows you to select “yes,” “no” or “not applicable.” The “previous state plan” was the plan under which the Statewide AT Program operated from October 1, 2015 until the submission of this State Plan. If a change in Implementing Entity already has been approved by ACL under the previous State Plan, the state can select “no.”

**If you answered no to this question, you may skip ahead to the next section. Otherwise, you must respond to Items 6 and 7 below.**

**6. Explain why the Implementing Entity previously designated by your state should not serve as the Implementing Entity. [Text box-required if Question 5 above is yes]**

Instructions: Follow the same instructions for Item 3 above.

**7. Explain why the Implementing Entity newly designated by your state should serve as the Implementing Entity. [Text box-required if Question 5 above is yes]**

Instructions: Follow the same instructions for Item 4 above.



# Assistive Technology State Grant Program

## State Plan for FY 2018-2020

### Section B: Advisory Council, Budget Allocations and Actual Expenditures, and Identification of Activities Conducted

Section 4(c)(2) of the AT Act requires the Statewide AT Program to establish a consumer-majority advisory council that provides consumer-responsive, consumer-driven advice to the state for planning of, implementation of, and evaluation of the activities carried out through the grant, including setting measurable goals. Exceptions to these requirements are allowed under section 4(c)(2)(E) if the requirements will affect existing state statutes, rules, or official policies relating to advisory bodies or require changes to existing governing bodies of incorporated agencies. The following items provide assurances related to and identify compliance with the requirements of section 4(c)(2).

#### Screen 3: Advisory Council

1. In accordance with section 4(c)(2) of the AT Act of 1998, as amended our state has a consumer-majority advisory council that provides consumer-responsive, consumer-driven advice to the state for planning of, implementation of, and evaluation of the activities carried out through the grant, including setting measurable goals. This advisory council is geographically representative of the State and reflects the diversity of the State with respect to race, ethnicity, and types of disabilities across the age span, and users of types of services that an individual with a disability may receive. [Drop-down yes/no menu]

Instructions: You must read and verify the statement by selecting “yes” or “no” from the drop-down menu (though N/A is available on the dropdown list, it cannot be selected). This statement assures that the advisory council is representative of the state in terms of geography and diversity and meets the purposes and performs the functions required under the AT Act. The official submission of the State Plan in the NATADS attests to this statement and the following statements being true as of the date of submission of the State Plan for AT.

2. The advisory council includes a representative of the designated State agency, as defined in section 7 of the Rehabilitation Act of 1973 (29 U.S.C. 705). [Drop-down yes/no/NA menu]
3. The advisory council includes a representative of the State agency for individuals who are blind (within the meaning of section 101 of that Act (29 U.S.C. 721)). [Drop-down yes/no/NA menu]

4. The advisory council includes a representative of a State center for independent living described in part C of title VII of the Rehabilitation Act of 1973 (29 U.S.C. 796f et seq.). [Drop-down yes/no/NA menu]
5. The advisory council includes a representative of the State workforce development board established under section 101 of the Workforce Innovation and Opportunity Act). [Drop-down yes/no/NA menu]
6. The advisory council includes a representative of the State educational agency, as defined in section 9101 of the Elementary and Secondary Education Act of 1965 as reauthorized. [Drop-down yes/no/NA menu]

Instructions: For items 2-6 above, verify that your council has each of the members listed by selecting “yes” or “no” or “not applicable” from the drop-down menus. In order to select “yes,” you must have an official representative of the applicable agency on record as named and appointed to the council at the time of submitting this plan. In order to select “not applicable,” you must either not have a separate agency for individuals who are blind or not be required to have a member because existing statutes, rules or policies related to advisory bodies or governing bodies of Statewide AT Programs would be affected.

7. The advisory council includes other representatives (list below). [Text box]

Instructions: Many advisory councils include agency or other organization representatives beyond those required under the AT Act. In the text box, identify those members and the entities they represent here, though you need not provide personal names. Do not list consumer representatives here.

8. The advisory council includes a majority of individuals with disabilities that use assistive technology or their family members or guardians:

A. Enter the number of individuals with disabilities that use AT or their family members or guardians on the advisory council	
B. Enter the total number of individuals on the advisory council	
C. Percentage	<b>A/B</b>

*Error message if ratio is less than 51% with note that item 9 must provide explanation of why advisory council does not include a consumer majority.*

Instructions: Section 4(c)(2)(B)(ii) of the AT Act requires that a majority, not less than 51 percent, of the members of the advisory council be individuals with disabilities that use assistive technology or their family members or guardians. Enter the number of these individuals that are current members of your council. In order to include an individual, he or she must be on record as named and appointed to the council at the time of submitting this plan. This total cannot include agency representatives from the previous lists.

9. If the Statewide AT Program does not have the composition and representation required under section 4(c)(2)(B), explain here. [Text box]

Instructions: Provide the reasons that you do not have representatives of the required agencies or do not have a consumer-majority on your council and where you are in the process of filling vacant positions and otherwise taking actions to become in compliance. If

the composition of your council is different from the requirements of 4(c)(2)(B) because existing statutes, rules or policies related to advisory bodies or governing bodies of Statewide AT Programs would be affected, explain here. You do not need to explain if you selected “not applicable” because you do not have a separate agency for individuals who are blind in your state.

## Screen 4: Actual Expenditures and Budgeted Allocations

### 1. Actual Expenditures Carryover Year Close-out (annual update required-table reset)

In the following table provide the actual expenditure data for the closed-out carryover fiscal year AT grant award (liquidated the previous December 31). Please note, this data is for a specific year AT Act grant award amount, NOT any specific 12 month period of time as funds from a grant award can be obligated over a 24 month period. (For a State Plan submitted in the spring of 2018, the most recent closed-out carryover year grant award will be the FY16 grant award that began 10/1/2015 with the first year ending on 9/30/2016 and the second carryover year ending on 9/30/2017 with 3 month liquidation period ending 12/31/2017).

Actual Expenditures for Closed-out Carryover Year Award	Final Expenditures	Percentage
A. All State Level Activities	\$	A/E calculate
B. All State Leadership Activities	\$	B/E calculate –less than 40/30% required
C. Transition Training & Technical Assistance	\$	C/B calculate - at least 5% required
D. Total Expenditures	\$	D/E calculate
E. Total Award	\$	100%
F. Lapsed Amount	\$ [E-D] calculate	F/E calculate

Note: The final expenditure amount on line D must equal the amount drawn down in the ACL Payment Management System.

Instructions: Section 4(e)(3)(A) of the AT Act requires States to use not more than 40% of an annual award to carry out state leadership activities if the state does not use flexibility. If a state does claim flexibility in their approved State Plan, Section 4(e)(6)(B)(ii) of the AT Act requires the State to use not more than 30% of an annual award to carry out state leadership activities. (See next paragraph for definition of flexibility). In both cases, Section 4(e)(3)(A) of the AT Act requires all States to use at least 5% of the state leadership funds for transition training or technical assistance activities.

Section 4(e)(6) of the AT Act allows a state to carry out any two or more of the required state-level activities, meaning a state can choose not to conduct up to two activities. If your state has claimed flexibility for a state level activity in a given fiscal year, you do not report data for that activity during that fiscal year and the grant award for that fiscal year would be subject to a maximum 30% of total expenditures for state leadership activities.

States must have a mechanism in place to accurately track all AT Act expenditures by grant award FY and by the state level and state leadership categories. Most direct

expenditures like salaries and benefits, contractual expenses, etc. will be clearly attributable to a state level or state leadership activity. For example, expenditures for purchasing equipment for a device loan program will be state level expenses while staff salaries and travel expenses to deliver training will be state leadership. A helpful way of determining state level or state leadership will be to identify where the data reported in the annual progress report for an expenditure activity will be reported. Since most all activities should have associated data reported, if the data is state level (state financing, reuse, device loan or device demonstration) then the activity and associated expenditure is state level. Most staff salaries and benefits can be assigned in total or in portions to state level or state leadership depending on staff job responsibilities and any time and effort logs they are required to keep for federal reporting purposes.

For very generic administrative and operational expenditures, like paper or similar general office supplies, an arbitrary ratio allocation can be used such as a 50/50 split. These very generic expenditures should not be a large portion of the total fiscal year AT Act expenses especially if an indirect rate is used to cover overhead costs. The same arbitrary ratio allocation can be applied to any indirect costs claimed.

**2. Actual YTD Expenditures and Budgeted Allocations for Immediate Preceding Year Award (annual update required-table reset)**

In the following table provide year-to-date (YTD) obligated and liquidated expenditure data for the immediate preceding fiscal year AT grant award along with planned budget allocations for the unobligated remainder of that award. Please note, this data is for a specific year AT Act grant award amount, NOT any specific 12 month period of time as funds from a grant award can be obligated over a 24 month period. (For a State Plan submitted in the spring of 2018, the immediate preceding fiscal year award will be the FY17 grant award that began 10/1/2016 with the first year ending 9/30/2017 and the second carryover year ending 9/30/18).

<b>Actual &amp; Planned Immediate Preceding Year Award Expenditures</b>	<b>YTD Obligated not Liquidated Expenditures</b>	<b>YTD Liquidated Expenditures</b>	<b>Planned not yet Obligated Expenditures</b>	<b>Total</b>
<b>All State Level Activities</b>	\$	\$	\$	\$
<b>All State Leadership Activities</b>	\$	\$	\$	\$
<b>Transition Training &amp; Technical Assistance</b>	\$	\$	\$	\$
<b>Total</b>	\$	\$	\$	Must equal total award

**Screen 5: Activities Conducted**

**1. State Level Activities Conducted and Program Structure**

Using the table below, identify all types of state level activities that will be conducted by your Statewide AT Program, who is conducting the activity, from where it is conducted

and if you charge a fee. Please remember that you are required to provide annual progress report data for any activity identified as conducted in this State Plan.

Instructions: Check “yes” or “no” to indicate if you conduct each of the activities in the table below.

AT Act State Level Activities	Activity Conducted?	Who conducts?			Where conducted?			Fee Charged
		State	Other	Both	Central	Regional	Both	
State Financing-Financial Loan	Yes/No							
State Financing-Other that Directly Provides AT	Yes/No							
State Financing-Other that Creates Savings for AT	Yes/No							
Reuse-Device Exchange	Yes/No							
Reuse-Device Open Ended Loan or Reassignment	Yes/No							
Device short-term loan	Yes/No							
Device demonstration	Yes/No							

For each activity you conduct, select the one option that best describes who conducts each state level activity from the choices of:

- *The Statewide AT Program (State AT)*
- *Other entities e.g. contractors (Others)*
- *Both the Statewide AT Program and other entities/contractors (Both)*

Use the following guidance to select the choice that best or most closely describes who conducts each activity.

Lead Agencies/Implementing Entities implement their activities in many ways. Some implement their activities directly using their own staff and resources, others use subcontractors, and others use combinations of both. Remember, the Implementing Entity is considered the Statewide AT Program, not an “other entity.” Indicate how your program conducts this activity using the following rules:

Select “yes” for “The Statewide AT Program” and do not select “Other entities” if this activity is carried out exclusively by employees of the Lead Agency/Implementing Entity working directly with consumers using Lead Agency/Implementing Entity facilities and resources. Regional sites that are staffed by employees of the Lead Agency/Implementing Entity are considered part of the Statewide AT Program.

Select “yes” for BOTH “The Statewide AT Program” and “Other entities” if the Lead Agency/Implementing Entity carries out the activity using its employees and facilities to work directly with consumers and ALSO uses some subcontracts or other agreements with

external organizations whose own employees, facilities, and resources are used to work directly with consumers.

Select ONLY “Other entities” if the Lead Agency/Implementing Entity does not work directly with consumers using Lead Agency/Implementing Entity facilities and resources and instead uses external organizations only.

For each activity you conduct, select the one option that best describes from where each activity is conducted from the choices of:

- *One central location (Central)*
- *Regional sites (Regional)*
- *A combination of a central location and regional sites (Combination)*

Use the following guidance to select the choice that best or most closely describe the location from which you conduct each activity.

*One central location* – Select this if your state conducts this activity from a single site that houses all employees and resources engaged in the activity. It may be the case that employees or resources travel from this site to other places, but they are based at a single site, and the other places are not established/permanent sites. Sites that simply serve as referral sources or provide minimal assistance to a central location are not considered regional sites. Remember that this is tied to the activity itself, so two different activities could take place at two different central locations. Also, if in previous items you indicated that you use subcontractors, it does not automatically mean you use regional sites. For example, your Statewide AT Program may have a building on a university campus that houses the staff and devices for a device loan program. The university campus is the central location for that program. You also may contract with a CBO in another part of the state to operate an AFP as your state financing activity. If the employees and resources for operating the AFP are housed at the CBO, the CBO is considered the central location for state financing and not a regional site.

*Regional sites* – Select this only if you conduct this activity from at least two sites that operate relatively independently without any of them being considered the main site or headquarters (if one of them is considered the headquarters you would choose a combination of central location and regional sites instead). Regional sites can be directly managed by the Lead Agency/Implementing Entity or can be subcontractors. For example, the Lead Agency may employ three part-time staff people at three different one-stop centers in the state. Those one-stop centers have their own small inventory of devices purchased by the Lead Agency and the part-time staff use those devices to provide device demonstrations on a regular basis. These could be considered regional sites. Sites that simply serve as referral sources or provide minimal assistance to a central location are not considered regional sites. For example, if all of the devices for your loan program are located at a central site along with those responsible for operating the program, but independent living centers provide referrals and you send devices to those centers for pick-up by consumers, the independent living centers are not considered regional sites.

*A combination of central location and regional sites* – Select this only if you have a site that is considered the main site or headquarters that houses the majority of employees and resources and regional sites that also have their own employees and resources. For example, if the majority of the devices for your loan program are located in a central inventory along with those responsible for operating the loan program, but independent living centers under subcontract house their own, smaller inventories and have staff assigned to do loans, you would have both a central location and regional sites.

For each activity you conduct, identify if you charge a fee. Many programs support their activities by charging some kind of fee. Fees can be a set amount for participation in the activity, a prescribed amount charged for each service, set amount charged for services provided within a set time period like an annual fee, or fees can be variable based on a number of factors such as a participant/recipient’s ability to pay, the type of participant/recipient (individual with a disability, professional, or organization) or by the complexity of the devices/services provided. If any type of fee is charged you should check “yes” and in the description of that activity in later sections you should describe the fee structure used in the simplest terms possible.

**2. Comparability and Flexibility**

For any of the four State Level Activities that are not conducted, your state must claim comparability or flexibility in the table below. The table below automatically identifies those activities you indicated your state is conducting in the previous table and requires a selection of flexibility or comparability for those you are not conducting.

Comparability & Flexibility	Yes/No	State Level Activities	Not Performed Claiming -
Financial Loan		State Financing	Comparability/Flexibility (required if all 3 are No)
Other State Financing that Directly Provides AT			
Other State Financing that Creates Savings for AT			
Device Exchange		Reuse	Comparability/Flexibility (required if both are No)
Device Reassignment or Open Ended Loan			
Device short-term loan		Short-term Loan	Comparability/Flexibility
Device demonstration		Demonstration	Comparability/Flexibility

*Flexibility* - Section 4(e)(6) of the AT Act allows a state to carry out any two or more of the required state-level activities, meaning a state can choose not to conduct up to two activities. If your state claims flexibility in a given fiscal year, you do not report data for that activity during that fiscal year and the grant award for that fiscal year will be subject to a maximum 30% of total expenditures for state leadership activities.

*Comparability* - Section 4 (e)(1)(B) of the AT Act provides that a state shall not be required to carry out a required state-level activity if the amount of financial support provided from state or other nonfederal resources or entities for that activity is comparable or greater than the amount that the state would have expended for the activity. You will not report data for any state-level activities for which your state claimed comparability.

For any activity for which you are claiming comparability, you must describe the comparable activity and comparable financial support. In the text box, explain in the simplest terms possible what the comparable activity is, who conducts the activity, who supports the activity, and what makes it comparable both in terms of resources supporting the activity and how the activity is related to the purposes of the AT Act.



# Multiple Activity Item Instructions

Section 4(d)(5) of the AT Act requires that the State Plan include a description of how the Statewide AT Program will implement its State-level and State Leadership activities. For the purposes of the following portions of the State Plan, there is no distinction between a Lead Agency or Implementing Entity in terms of implementation. If an Implementing Entity is used, the State Plan reports on how that entity is implementing the Act.

Section 4(d)(4) requires that the State Plan describe how various public and private entities will be involved in the implementation of those activities, including a description of the nature and extent of resources that will be committed by public and private collaborators. Section 4(d)(7) also requires that the State Plan include a description of the State-level and State Leadership Activities the state will support with state funds. Section 4(e)(3)(B)(iii) requires that states coordinate and collaborate their State-level and State Leadership activities among public and private entities.

Sections C-G of this State Plan contain items intended to meet these requirements for each AT Act authorized activity. While Sections do request unique information about specific activities, each begins with the same request for information regarding collaboration. Use the below instructions as your reference for this question throughout the State Plan, as the instructions will not be repeated in each section.

**If you conduct this activity through a formal written agreement, by providing financial support to other entities or by receiving financial support from other entities please identify that coordination and collaboration in the table below.**

<b>Collaborating organizations conducting this activity</b>	<b>Have written agreement with this entity</b>	<b>Provide financial support to this entity</b>	<b>Receive financial support from this entity</b>
<b>Banks/financial institution</b>			
<b>Independent Living Center</b>			
<b>Easter Seals</b>			
<b>Disability/AT Organizations</b>			
<b>Federal Entities/Agencies</b>			
<b>State Entities/Agencies</b>			
<b>Local/Community Entities</b>			
<b>Private Entities</b>			
<b>Other (text box to describe)</b>			

**Instructions:** Identify all types of formal/written agreements and financial support provided and received for this activity by selecting “yes” as appropriate for each type of entity identified. Do not confuse these options with the use of an Implementing Entity (for purpose of these questions, the Implementing Entity is the Statewide AT Program).

*Have written agreement with this entity* - Select this column “yes” if you have a formal agreement of some sort with an entity to conduct all or part of a state level or state leadership activity. If an entity is providing the State AT Program with data for activities they are conducting and you are reporting that data in the Annual Progress

Report, you should have an agreement with that entity and should report it in this column. You should also have a written agreement with a funding source for an activity and similarly would have such agreement with an entity to whom you are providing funding for an activity. Both of these would be reported in this column and one of the two other columns asking about direct financial support. It is possible to have a formal agreement with an entity to support conducting an activity without associated direct financial support provided (e.g. you provide a device demonstration provider with all the AT devices for their inventory instead of direct dollars). In-kind support with a written agreement will be reported in this category. It is likely that if one of the financial support columns is checked “yes” that this column would also be checked “yes”. However, this column could be checked “yes” without the associated direct financial support (only in-kind or non-monetary). If no formal, written agreement is in place this column should NOT be checked.

*Provide financial support to this entity-* Select this category “yes” if you provide dollars directly to an entity to conduct all or part of a state level or state leadership activity. This entity will be providing the State AT Program with data to submit for the activity in the Annual Progress Report. In-kind support is NOT included here.

*Receive financial support from this entity-* Select this category “yes” if you receive dollars directly from an entity to conduct all or part of a state level or state leadership activity. Details of this financial support will be reported in the Leveraged Funding section of the Annual Progress Report. In-kind support is NOT included here.

Select all organization types that apply for each column.

*Banks/financial institution* – Self-explanatory, typically only used with financial loan programs.

*Independent Living Center* – Entity identified in your state as a recognized Independent Living Centers funded with federal and/or state independent living funding.

*Easter Seals* – Entity recognized as an affiliate of the Easter Seals organization.

*Disability/AT Organizations* – Any entity that primarily serves individuals with disabilities or provides AT services that is not more definitively identified in another category.

*Federal Entities/Agencies* – Any public federal entity (usually reported as an agency providing funding) such as Department of Education, Rehabilitation Services Administration or Administration on Community Living, National Institute on Disability, Independent Living, and Rehabilitation Research, etc.

*State Entities/Agencies*– Any public state entity such as Vocational Rehabilitation, Medicaid, Special Education, State Colleges and Universities, etc.

*Local/Community Entities* – Any public local or community entities, such as local school districts, city government, county election offices, etc.

*Private Entities* – Private entities of any type, non-profits, foundations, etc. at any level, national, state, or local.

*Other* – This category should only be used when the entity cannot reasonably be categorized in any of the previous categories provided. (Should be used rarely and a description must be provided.)

# Assistive Technology State Grant Program

## State Plan for FY 2018-2020

### Section C: State Financing Activities

The AT Act describes state financing activities as activities that increase:

“access to, and funding for, assistive technology devices and assistive technology services (which shall not include direct payment for such a device or service for an individual with a disability but may include support and administration of a program to provide such payment), including development of systems to provide and pay for such devices and services, for targeted individuals and entities described in section 3(16)(A), including—

- (i) support for the development of systems for the purchase, lease, or other acquisition of, or payment for, assistive technology devices and assistive technology services; or
- (ii) support for the development of State-financed or privately financed alternative financing systems of subsidies (which may include conducting an initial 1-year feasibility study of, improving, administering, operating, providing capital for, or collaborating with an entity with respect to, such a system) for the provision of assistive technology devices, such as—
  - (I) a low-interest loan fund;
  - (II) an interest buy-down program;
  - (III) a revolving loan fund;
  - (IV) a loan guarantee or insurance program;
  - (V) a program providing for the purchase, lease, or other acquisition of assistive technology devices or assistive technology services; or
  - (VI) another mechanism that is approved by the Secretary.”

For the purposes of this State Plan, state financing activities include financial loan programs, programs that directly provide AT such as home modification programs, telecommunications distribution programs, and last resort funds, and programs that create savings for AT acquisition such as cooperative buying programs and AT leasing programs. Each of these activities is defined in the corresponding section of this State Plan.

Section 4(d)(5) of the AT Act requires that the State Plan include a description of how the Statewide AT Program will implement its State-level and State Leadership activities. Further, section 4(d)(4) requires that the State Plan describe how various public and private entities will be involved in the implementation of those activities, including a description of the nature and extent of resources that will be committed by public and private collaborators. Section 4(d)(7) also requires that the State Plan include a description of the State-level and State Leadership Activities the state will support with state funds. Section 4(e)(3)(B)(iii) requires that states coordinate and collaborate their State-level and State Leadership activities among public and private entities. The following items are intended to meet these requirements for State

Financing Activities. Respond only to the items that correspond with the State Financing Activities you selected in Section B of this Plan.

## Screen 6: Financial Loan Program -

A financial loan program provides financial loans for purchase of AT devices and services. A financial loan program may make loans directly (revolving loans) or may make partnership loans using dollars from another source, usually a financial institution.

1. If you conduct this activity through a formal written agreement, by providing financial support to other entities or by receiving financial support from other entities please identify that coordination and collaboration in the table below.

Collaborating organizations conducting this activity	Have written agreement with this entity	Provide financial support to this entity	Receive financial support from this entity
Banks/financial institution			
Independent Living Center			
Easter Seals			
Disability/AT Organizations			
Federal Entities/Agencies			
State Entities/Agencies			
Local/Community Entities			
Private Entities			
Other (text box to describe)			

2. This activity offers the following types of assistance (select all that apply).

Revolving loans  
 Loan guarantees  
 Interest buy-downs  
 Combined loan guarantee and interest buy-down

Instructions: Identify all types of loans your program offers, regardless of whether any loans of that type are currently outstanding. The types of loan products are defined as follows:

*Revolving loan:* A loan that uses Statewide AT Program funds for loans. The AT program directly provides the funds that are to be loaned out and retains full control over to whom and at what terms the funds are loaned. As loans are repaid, the money is lent out again to other AT consumers — that is, the same money “revolves” out to other borrowers as earlier borrowers return it to the program.

*Loan guarantee or insurance program:* The grantee uses its funds to guarantee all or a portion of loans for AT. A guaranteed loan is a loan in which the Statewide AT Program guarantees that the loan to a consumer is secure and will be repaid, thus increasing the lender’s willingness to loan funds.

*Interest buy-down loan:* A loan in which AT program funds are used to buy down the interest rate of a loan. The AT program uses funds to reduce the interest rate that lending institutions offer to consumers for loans to purchase AT. The AT program pays the lending

institution for a portion of the interest on the loan, resulting in lower interest payments for the consumer over the long term.

3. **The lowest interest amount for loans as established by the policies of the activity (leave blank if NA). [Percentage field in XX.XX% form]**
4. **The highest interest amount for loans as established by the policies of the activity (leave blank if NA). [Percentage field in XX.XX% form]**
5. **The lowest loan amount provided as established by the policies of the activity (leave blank if N/A). [Number field - dollar amount]**

Instructions: The response to this item must be based on your established, written policies. This is not the lowest actually provided in a given year, but the lowest given your policies. Leave it blank if your policies do not specify a lowest.

6. **The highest loan amount provided as established by the policies of the activity (leave blank if N/A). [Number field - dollar amount]**

Instructions: The response to this item must be based on your established, written policies. This is not the highest actually provided in a given year, but the highest given your policies. Leave it blank if your policies do not specify a highest.

7. **Describe the activity. [Text box]**

Instructions: Explain in the simplest terms possible how this activity is conducted; a person unfamiliar with the program should be able to read this explanation and understand what the Statewide AT Program is “doing”. This explanation should make it clear how this activity is related to the purposes of the AT Act. It also should describe who the activity is intended to serve, specifically if only particular populations of individuals are served by the activity or if there are qualifications for participation in the activity. The role of the Statewide AT Program in carrying out the activity should be explained clearly and any fees charged should be described.

8. **The online page for this specific activity can be found at: [Text box]**

Instructions: Enter the URL for the financial loan program (not the general home page URL) or enter N/A if information about the activity is not available online.

## Screen 7: Other State Financing Activities Directly Provide AT

1. **If you conduct this activity through a formal written agreement, by providing financial support to other entities or by receiving financial support from other entities please identify that coordination and collaboration in the table below.**

Collaborating organizations conducting this activity	Have written agreement with this entity	Provide financial support to this entity	Receive financial support from this entity
Banks/financial institution			
Independent Living Center			

<b>Easter Seals</b>			
<b>Disability/AT Organizations</b>			
<b>Federal Entities/Agencies</b>			
<b>State Entities/Agencies</b>			
<b>Local/Community Entities</b>			
<b>Private Entities</b>			
<b>Other</b> (text box to describe)			

**2. The following activities are conducted**

<b>Activities</b>	<b>Check if Conducted</b>
<b>Telecommunications Equipment Distribution Program (EDP)-State</b>	
<b>Deaf/Blind Telecommunications EDP-Federal</b>	
<b>Last Resort Fund</b>	
<b>Home Modification Program</b>	
<b>Other</b> (text box to describe)	

Instructions: Identify all types of other state financing programs that directly provide AT that your state conducts. The types of programs are defined as follows:

*Telecommunications Equipment Distribution Program (State):* This is a state program to distribute telecommunications equipment that serves the needs of people with disabilities, including safety needs during emergencies. (This is not the federally funded NDBEDP or iCanConnect). States may not use AT Act dollars to provide funds or devices directly to individuals. AT Act dollars may be used to administer a telecommunications distribution program comprising non-AT Act dollars.

*Deaf/Blind Telecommunications Equipment Distribution Program (Federal):* This is the National Deaf/Blind Equipment Distribution Program funded by the Federal Communications Commission also known as iCanConnect. This program provides telecommunications equipment for individuals who are deaf/blind. States may not use AT Act dollars to provide funds or devices directly to individuals. AT Act dollars may be used to administer a telecommunications distribution program comprising non-AT Act dollars.

*Last Resort Fund:* These programs provide AT, or funds to purchase AT, to consumers when other options have been exhausted or are unavailable. These may be earmarked for particular types of consumers (such as children) or particular types of AT (such as home modification) or they may be for any group or type of AT. States may not use AT Act dollars to provide funds or devices directly to individuals. AT Act dollars may be used to administer a last resort fund comprised of non-AT Act dollars.

*Home Modification Program:* A home modification program provides home modifications, including the addition of wheelchair ramps. States may not use AT Act dollars to provide funds or devices directly to individuals. AT Act dollars may be used to administer a home modification program comprising non-AT Act dollars.

*Other:* Specify and describe in the text box provided.

**3. Describe the activity or activities. [Text box]**

Instructions: Explain in the simplest terms possible how this activity is conducted; a person unfamiliar with the program should be able to read this explanation and understand what the Statewide AT Program is “doing”. This explanation should make it clear how this activity is related to the purposes of the AT Act. It also should describe who the activity is intended to serve, specifically if only particular populations of individuals are served by the activity or if there are qualifications for participation in the activity. The role of the Statewide AT Program in carrying out the activity should be explained clearly and any fees charged should be described. If there is more than one distinct program within this activity area, number and describe each succinctly. The example provided below is for a Last Resort Fund, but a similar concept should be applied here.

*Example: Our State AT Program implements both the State Telecommunication Equipment Distribution Program and the federally funded NDBEDP (iCanConnect). The State program provides a full range of adaptive telephone equipment to all state residents who are unable to use a traditional telephone due to disability. The NDBEDP provides a full range of adaptive equipment needed by individuals who are deaf/blind for communication. All funding used to purchase adaptive equipment is provided by state and federal sources outside the AT Act. AT Act funds are used to support the administration of both programs. There are no fees associated with this program but there are financial eligibility criteria for both programs.*

**4. The online page (or pages) for this specific activity can be found at: [Text box]**

Instructions: Enter the specific URL for each of the state financing programs that directly provide AT (not the general home page URL) or enter N/A if information about these activities is not available online.

**Screen 8: Other State Financing Activities Create AT Savings**

1. If you conduct this activity through a formal written agreement, by providing financial support to other entities and/or by receiving financial support from other entities please identify that coordination and collaboration in the table below.

Collaborating organizations conducting this activity	Have written agreement with this entity	Provide financial support to this entity	Receive financial support from this entity
Banks/financial institution			
Independent Living Center			
Easter Seals			
Disability/AT Organizations			
Federal Entities/Agencies			
State Entities/Agencies			
Local/Community Entities			
Private Entities			
Other (text box to describe)			



**2. The following activities are conducted**

Activities	Check if Conducted
<b>Cooperative Buying Program</b>	
<b>AT Lease Program</b>	
<b>AT Fabrication Program</b>	
<b>Other</b> <i>(text box to describe)</i>	

Instructions: Identify all types of other state financing programs that create AT savings that your state conducts. The types of programs are defined as follows:

*Cooperative Buying Program:* Cooperative buying programs procure AT in bulk at a discount from AT suppliers and then pass the savings on to consumers/beneficiary recipients.

*AT Lease Program:* These programs provide AT to consumers on a leased arrangement which provides savings over a direct purchase. Typically there is external funding used to purchase the devices that are leased to consumers. The leasing arrangement can include a lease-to-buy provision.

*AT Fabrication Program:* These programs fabricate AT systems for recipients from readily available materials providing functional AT products at a significant savings.

*Other:* Specify and describe in the text box provided.

**3. Describe the activity. [Text box]**

Instructions: Explain in the simplest terms possible how this activity is conducted; a person unfamiliar with the program should be able to read this explanation and understand what the Statewide AT Program is “doing”. This explanation should make it clear how this activity is related to the purposes of the AT Act. It also should describe who the activity is intended to serve, specifically if only particular populations of individuals are served by the activity or if there are qualifications for participation in the activity. The role of the Statewide AT Program in carrying out the activity should be explained clearly and any fees charged should be described. If there is more than one distinct program within this activity area, number and describe each succinctly.

**4. The online page (or pages) for this specific activity can be found at: [Text box]**

Instructions: Enter the URL for each of the state financing programs that create AT savings (not the general home page URL) or enter N/A if information about these activities is not available online.

# Assistive Technology State Grant Program

## State Plan for FY 2018-2020

### Section D: Device Reutilization Activities

The AT Act describes the State-level activity of device reutilization as follows:

“DEVICE REUTILIZATION PROGRAMS. —The State shall directly, or in collaboration with public or private entities, carry out assistive technology device reutilization programs that provide for the exchange, repair, recycling, or other reutilization of assistive technology devices, which may include redistribution through device sales, loans, rentals, or donations.”

For the purposes of this State Plan, device reutilization activities are categorized as either device exchange activities, device refurbish and reassign activities or open-ended loan activities. Device exchange activities are those in which the Statewide AT Program facilitates the transfer of a device from a consumer who does not need the device to a consumer who could use the device without the organization taking possession of the device at any time. Devices are listed in a “want ad” or other type of posting and consumers can contact and arrange to obtain the device (either by purchasing it or obtaining it for free) from the current owner. Exchange activities do not involve warehousing inventory and do not include repair, sanitization or refurbishing of used devices. In some cases, a Statewide AT Program serves as an intermediary directly involved in making this exchange; in others the consumer and current owner make this exchange without the involvement of the Statewide AT Program.

Section 4(d)(5) of the AT Act requires the State Plan include a description of how the Statewide AT Program will implement State-level and State Leadership activities. Further, section 4(d)(4) requires that the State Plan describe how various public and private entities will be involved in the implementation of those activities, including a description of the nature and extent of resources that will be committed by public and private collaborators. Section 4(d)(7) requires that the State Plan include a description of the State-level and State Leadership Activities the state will support with state funds. Section 4(e)(3)(B)(iii) requires that states coordinate and collaborate their State-level and State Leadership activities among public and private entities.

#### Screen 9: Device Exchange

1. If you conduct this activity through a formal written agreement, by providing financial support to other entities and/or by receiving financial support from other entities please identify that coordination and collaboration in the table below.

Collaborating organizations conducting this activity	Have written agreement with this entity	Provide financial support to this entity	Receive financial support from this entity
Banks/financial institution			
Independent Living Center			
Easter Seals			
Disability/AT Organizations			
Federal Entities/Agencies			
State Entities/Agencies			
Local/Community Entities			
Private Entities			
Other (text box to describe)			

**2. Select the option that best describes what happens when a device is exchanged. [Check one]**

**The transaction is direct consumer-to-consumer  
The Statewide AT Program is involved in the transaction**

*The transaction is direct consumer-to-consumer - The exchange is set up so that the person who wants the device directly contacts the person who has the device and the two of them work out the details of the exchange without the involvement of the Statewide AT Program. Occasionally, an individual may not want to post contact information on the exchange and requests that the Statewide AT Program be the contact. In these cases, the Statewide AT Program’s only responsibility is providing the contact information to those who ask.*

*The Statewide AT Program is involved in the transaction - A consumer who wants a device **must** go through the Statewide AT Program to connect with the person who has the device. The role of the Statewide AT Program may vary once this connection has been made, but the Statewide AT Program undertakes some level of control over the exchanges made through its program.*

**3. Describe the activity. [Text box]**

Instructions: Explain in the simplest terms possible how this activity is conducted; a person unfamiliar with the program should be able to read this explanation and understand what the Statewide AT Program is “doing”. This explanation should make it clear how this activity is related to the purposes of the AT Act. It also should describe who the activity is intended to serve, specifically if only particular populations of individuals are served by the activity or if there are qualifications for participation in the activity. The role of the Statewide AT Program in carrying out the activity should be explained clearly and any fees charged should be described. If there is more than one distinct program within this activity area, number and describe each succinctly.

**4. The online page for this specific activity can be found at: [Text box]**

Instructions: Enter the URL for the device exchange program (not the general home page URL) or enter N/A if information about these activities is not available online.

## Screen 10: Device Refurbish and Reassignment and/or Open-ended Loan

1. If you conduct this activity through a formal written agreement, by providing financial support to other entities and/or by receiving financial support from other entities please identify that coordination and collaboration in the table below.

Collaborating organizations conducting this activity	Have written agreement with this entity	Provide financial support to this entity	Receive financial support from this entity
Banks/financial institution			
Independent Living Center			
Easter Seals			
Disability/AT Organizations			
Federal Entities/Agencies			
State Entities/Agencies			
Local/Community Entities			
Private Entities			
Other (text box to describe)			

2. Select the option(s) that describe how a reutilized device is provided to a recipient. [Check as many as apply]

**Device ownership is transferred to the recipient**

**Device is loaned for as long as the recipient needs it with no ownership transfer.**

*Device ownership is transferred to the recipient – After the device is reassigned it is not tracked or in any way controlled by the State AT Program or its supportive agencies.*

*Device is on open-ended loan - A recipient has possession of the device as long as they need it but the State AT Program or its partner agencies retain ownership of the device.*

3. Describe the activity. [Text box]

Instructions: Explain in the simplest terms possible how this activity is conducted; a person unfamiliar with the program should be able to read this explanation and understand what the Statewide AT Program is “doing”. Describe the process for obtaining, sanitizing, refurbishing (if applicable), and reassigning or long-term loaning the devices. Include a description of how the program ensures an appropriate person/device match. If some or all of the program is for a particular agency/entity, identify that agency/entity and the purpose/population served. Describe any supports provided to the recipient to ensure successful device use. The role of the Statewide AT Program in carrying out the activity should be explained clearly and any fees charged should be described. If there is more than one distinct program within this activity area, number and describe each succinctly.

*Example: The ALS Association subcontracts with us to operate an open-ended loan program for individuals with ALS in the state. We have a pool of communication and adaptive daily living devices set aside for this program within our large reuse program. When the ALS organization identifies an individual in need, they contact and inform the State AT Program of the types of devices that could assist him or her.*

*We arrange to provide the devices, and support for their use, to the individual. We track all devices as they come in and out of the program, and contact the individual with the device on a regular basis to determine if he or she still is benefiting from it. When the device no longer can be used by the individual, we collect it and take care of any necessary sanitization and maintenance of the item in preparation for another open-ended loan. No fees are charged for these open-ended loans.*

**4. The online page (or pages) for this specific activity can be found at: [Text box]**

Instructions: Enter the URL(s) for the device refurbish and reassignment or open-ended loan program(s) (not the general home page URL) or enter N/A if information about these activities is not available online.

# Assistive Technology State Grant Program

## State Plan for FY 2018-2020

### Section E: Device Short-term Loan Activity

The AT Act says that Statewide AT Programs are to “directly or in collaboration with public or private entities, carry out device loan programs that provide short-term loans of assistive technology devices to individuals, employers, public agencies, or others seeking to meet the needs of targeted individuals and entities, including others seeking to comply with IDEA, ADA and Section 504.” The purpose of a device loan may be -- (1) to assist in decision making, (2) to serve as a loaner while the consumer is waiting for device repair or funding, (3) to provide an accommodation on a short-term basis for a time limited event or situation or (4) to conduct training, self-education or other professional development activity.

Section 4(d)(5) of the AT Act requires that the State Plan include a description of how the Statewide AT Program will implement its State-level and State Leadership activities. Further, section 4(d)(4) requires that the State Plan describe how various public and private entities will be involved in the implementation of those activities, including a description of the nature and extent of resources that will be committed by public and private collaborators. Section 4(d)(7) also requires that the State Plan include a description of the State-level and State Leadership Activities the state will support with state funds. Section 4(e)(3)(B)(iii) requires that states coordinate and collaborate their State-level and State Leadership activities among public and private entities. The following items are items intended to meet these requirements for device loan activities.

#### Screen 11: Short-term Device Loan

1. If you conduct this activity through a formal written agreement, by providing financial support to other entities and/or by receiving financial support from other entities please identify that coordination and collaboration in the table below.

Collaborating organizations conducting this activity	Have written agreement with this entity	Provide financial support to this entity	Receive financial support from this entity
<b>Banks/financial institution</b>			
<b>Independent Living Center</b>			
<b>Easter Seals</b>			
<b>Disability/AT Organizations</b>			
<b>Federal Entities/Agencies</b>			
<b>State Entities/Agencies</b>			
<b>Local/Community Entities</b>			
<b>Private Entities</b>			
<b>Other</b> <i>(text box to describe)</i>			

**2. Select the option that describes how the majority of devices loaned are delivered to and returned from a borrower. [Check one]**

**The majority of devices are shipped via mail or other delivery service.**  
**The majority of devices are delivered or picked up in-person.**

Statewide AT Programs use one of two methods for getting devices to borrowers using their short-term loan program. Choose the option that is used for the majority of your device loans.

**3. Describe the activity. [Text box]**

Instructions: Explain in the simplest terms possible how this activity is conducted; a person unfamiliar with the program should be able to read this explanation and understand what the Statewide AT Program is “doing”. Describe the process for obtaining devices for the inventory, the procedures used by borrowers to request devices, how the program tracks and ensures devices are returned and ready to be loaned out again, etc. If any portion of the program is for a particular agency or entity, identify that agency or entity and the purpose and population served. Describe any supports provided to the borrower to ensure a successful loan. The role of the Statewide AT Program in carrying out the activity should be explained clearly and any fees charged should be described. If there is more than one distinct program within this activity area, number and describe each succinctly. See example below.

*The short-term loan program is operated by the State AT Program and is available to any agencies, entity or school districts in the state. Equipment is available for loan that meets the needs of adults and children of all ages with all types of disabilities. Entities must have an approved short-term loan program agreement on file with the program assuring acceptance of specific responsibilities to be able to borrow devices. The program includes a wide range of equipment including switches and mounts, computer access devices, environmental controls, hearing devices, home modifications, vision devices and augmentative communication devices and the entire inventory is viewable online. Each loan period is up to six weeks and an entity can borrow up to six devices. With each tablet loan, up to 10 applications can be borrowed.*

*Items are shipped and returned by commercial delivery service except for a few exceptionally heavy devices that must be delivered and picked up in person. All loans are tracked in a database with routine follow-up to ensure timely return of devices. All devices are sanitized and checked for functionality before being loaned out again. All device loans include manufacturer’s instructions and/or a “cheat sheet” developed by the program with basic instructions about set-up and use to support the borrower(s). The device loan program inventory is updated as resources will allow and priority is given to purchasing devices to reduce waiting lists and provide current high demand items. No fees are charged to borrow devices.*

**4. The online page for this specific activity can be found at: [Text box]**

Instructions: Enter the URL for the device short-term loan program (not the general home page URL) or enter N/A if information about this activity is not available online.

# Assistive Technology State Grant Program

## State Plan for FY 2018-2020

### Section F: Device Demonstration Activity

The AT Act describes device demonstrations as activities to “directly, or in collaboration with public and private entities, such as one-stop partners, as defined in section 101 of the Workforce Investment Act of 1998 (29 U.S.C. 2801), demonstrate a variety of assistive technology devices and assistive technology services (including assisting individuals in making informed choices regarding, and providing experiences with, the devices and services), using personnel who are familiar with such devices and services and their applications.” Section 4(e)(2)(D)

Device demonstrations compare the features and benefits of AT devices to enable informed decision-making. In a device demonstration, guided experience with the device(s) is provided to the participant with the assistance of someone who has technical expertise related to the device(s). This expert may be in the same location as the participant or may assist the participant through Internet or distance learning mechanism that provides real-time, effective communication to deliver the necessary device exploration.

A demonstration is characterized by its interactive nature whereby the participant can interact with the device and an expert to increase their knowledge and understanding about the details and functions of a device; the participant drives the demonstration and has the ability to interact and have their individual questions about the device addressed. If the demonstration is conducted via the internet or distance learning mechanism it must be a real-time, interactive demonstration that provides one-on-one assistance to the participant. A web-based demonstration that is archived or is a static presentation without interaction is considered an awareness activity, not a demonstration.

Section 4(d)(5) of the AT Act requires that the State Plan include a description of how the Statewide AT Program will implement its State-level and State Leadership activities. Further, section 4(d)(4) requires that the State Plan describe how various public and private entities will be involved in the implementation of those activities, including a description of the nature and extent of resources that will be committed by public and private collaborators. Section 4(d)(7) also requires that the State Plan include a description of the State-level and State Leadership Activities the state will support with state funds. Section 4(e)(3)(B)(iii) requires that states coordinate and collaborate their State-level and State Leadership activities among public and private entities. The following items are items intended to meet these requirements for device demonstration activities.



## Screen 12: Device Demonstration

1. If you conduct this activity through a formal written agreement, by providing financial support to other entities and/or by receiving financial support from other entities please identify that coordination and collaboration in the table below.

Collaborating organizations conducting this activity	Have written agreement with this entity	Provide financial support to this entity	Receive financial support from this entity
Banks/financial institution			
Independent Living Center			
Easter Seals			
Disability/AT Organizations			
Federal Entities/Agencies			
State Entities/Agencies			
Local/Community Entities			
Private Entities			
Other (text box to describe)			

2. Describe the activity. [Text box]

Instructions: Explain in the simplest terms possible how this activity is conducted; a person unfamiliar with the program should be able to read this explanation and understand what the Statewide AT Program is “doing”. Describe the process for obtaining devices for the demonstration inventory, how the program delivers demonstrations (if remote demonstrations are done that should be explained) and if any portion of the program is for a particular agency or entity and a restricted service population. Describe any supports provided to demonstration participants to ensure quality decision making including the referral process. The role of the Statewide AT Program in carrying out the activity should be explained clearly and any fees charged should be described. If there is more than one distinct program within this activity area, number and describe each succinctly. See example below.

*Example: In addition to our general device demonstration program, the State AT Program has an agreement with the Division of Aging to provide a targeted demonstration program for seniors. The inventory for this program consists of the most popular and affordable AT needed by seniors to live independently. Regularly scheduled device demonstrations are done onsite at a number of senior centers and local aging offices. Staff provide an overview of the basic devices and then provide one-on-one guided exploration for seniors matching AT to their specific functional limitations. If devices are identified that will meet individual needs, referrals and resources are provided to support acquisition.*

3. The online page for this specific activity can be found at: [Text box]

Instructions: Enter the URL for the device demonstration program (not the general home page URL) or enter N/A if information about this activity is not available online.

# Assistive Technology State Grant Program

## State Plan for FY 2018-2020

### Section G: State Leadership Activities

#### Training Activities

The AT Act describes training as follows:

“(i) TRAINING AND TECHNICAL ASSISTANCE. —

(I) IN GENERAL. —The State shall directly, or provide support to public or private entities with demonstrated expertise in collaborating with public or private agencies that serve individuals with disabilities, to develop and disseminate training materials, conduct training, and provide technical assistance, for individuals from local settings statewide, including representatives of State and local educational agencies, other State and local agencies, early intervention programs, adult service programs, hospitals and other health care facilities, institutions of higher education, and businesses.

(II) AUTHORIZED ACTIVITIES. —In carrying out activities under sub clause (I), the State shall carry out activities that enhance the knowledge, skills, and competencies of individuals from local settings described in sub clause (I), which may include—

(aa) general awareness training on the benefits of assistive technology and the Federal, State, and private funding sources available to assist targeted individuals and entities in acquiring assistive technology;

(bb) skills-development training in assessing the need for assistive technology devices and assistive technology services;

(cc) training to ensure the appropriate application and use of assistive technology devices, assistive technology services, and accessible technology for e-government functions;

(dd) training in the importance of multiple approaches to assessment and implementation necessary to meet the individualized needs of individuals with disabilities; and

(ee) technical training on integrating assistive technology into the development and implementation of service plans, including any education, health, discharge, Olmstead, employment, or other plan required under Federal or State law.”

Training activities are instructional events, usually planned in advance for a specific purpose or audience, and are designed to increase participants’ knowledge, skills, and competencies regarding AT. Such events can be delivered to large or small groups, in-person, or via telecommunications or other distance education mechanisms. In general, participants in training can be individually identified and could complete an evaluation of the training. Examples of training include classes, workshops, and presentations that have a goal of increasing skills, knowledge, and competency, as opposed to training intended only to increase general awareness of AT. Training activities have more depth and breadth than public awareness activities and are focused on skill building and competency development.

Section 4(d)(5) of the AT Act requires that the State Plan include a description of how the Statewide AT Program will implement its State-level and State Leadership activities. Further, section 4(d)(4) requires that the State Plan describe how various public and private entities will be involved in the implementation of those activities, including a description of the nature and extent of resources that will be committed by public and private collaborators. Section 4(d)(7) also requires that the State Plan include a description of the State-level and State Leadership Activities the state will support with state funds. Section 4(e)(3)(B)(iii) requires that states coordinate and collaborate their State-level and State Leadership activities among public and private entities. The following items are items intended to meet these requirements for training activities.

### Screen 13: Training

1. If you conduct this activity through a formal written agreement, by providing financial support to other entities and/or by receiving financial support from other entities please identify that coordination and collaboration in the table below.

Collaborating organizations conducting this activity	Have written agreement with this entity	Provide financial support to this entity	Receive financial support from this entity
Banks/financial institution			
Independent Living Center			
Easter Seals			
Disability/AT Organizations			
Federal Entities/Agencies			
State Entities/Agencies			
Local/Community Entities			
Private Entities			
Other (text box to describe)			

2. Provide a short description of at least one and no more than three planned training activities. One of the activities described must be planned Information and Communication Technology (ICT) accessibility training that will provide the required ICT Training performance measures. If you are meeting the transition requirements of the AT Act through training, please describe that planned activity. If you sponsor or co-sponsor a statewide conference please include that event as one you describe. [Three text boxes]

**Planned ICT Accessibility Training (required)**

**Planned Transition Training or Other Training Activity (optional)**

**Planned Statewide Conference or Other Training Activity (optional)**

**3. The online page for this specific activity can be found at: [Text box]**

Instructions: Enter the URL for training activities (not the general home page URL) or enter N/A if information about this activity is not available online.

## **Technical Assistance Activities**

The AT Act describes training as follows:

“(i) TRAINING AND TECHNICAL ASSISTANCE. —

(I) IN GENERAL. —The State shall directly, or provide support to public or private entities with demonstrated expertise in collaborating with public or private agencies that serve individuals with disabilities, to develop and disseminate training materials, conduct training, and provide technical assistance, for individuals from local settings statewide, including representatives of State and local educational agencies, other State and local agencies, early intervention programs, adult service programs, hospitals and other health care facilities, institutions of higher education, and businesses.

(II) AUTHORIZED ACTIVITIES. —In carrying out activities under sub clause (I), the State shall carry out activities that enhance the knowledge, skills, and competencies of individuals from local settings described in sub clause (I), which may include—

(aa) general awareness training on the benefits of assistive technology and the Federal, State, and private funding sources available to assist targeted individuals and entities in acquiring assistive technology;

(bb) skills-development training in assessing the need for assistive technology devices and assistive technology services;

(cc) training to ensure the appropriate application and use of assistive technology devices, assistive technology services, and accessible technology for e-government functions;

(dd) training in the importance of multiple approaches to assessment and implementation necessary to meet the individualized needs of individuals with disabilities; and

(ee) technical training on integrating assistive technology into the development and implementation of service plans, including any education, health, discharge, Olmstead, employment, or other plan required under Federal or State law.”

Technical Assistance (TA) is direct problem-solving services provided by Statewide AT Program staff to assist programs and agencies in improving their services, management, policies and/or outcomes. TA may be provided in person, by electronic media such as telephone, video or e-mail and by other means. The following are examples of technical assistance: needs assessment, program planning or development, curriculum or materials development, administrative or management consultation, program evaluation and site reviews of external organizations, and policy development.

Section 4(d)(5) of the AT Act requires that the State Plan include a description of how the Statewide AT Program will implement its State-level and State Leadership activities. Further, section 4(d)(4) requires that the State Plan describe how various public and private entities will be involved in the implementation of those activities, including a description of the nature and extent of resources that will be committed by public and private collaborators. Section 4(d)(7)

also requires that the State Plan include a description of the State-level and State Leadership Activities the state will support with state funds. Section 4(e)(3)(B)(iii) requires that states coordinate and collaborate their State-level and State Leadership activities among public and private entities. The following items are items intended to meet these requirements for technical assistance activities.

## Screen 14: Technical Assistance

1. If you conduct this activity through a formal written agreement, by providing financial support to other entities and/or by receiving financial support from other entities please identify that coordination and collaboration in the table below.

Collaborating organizations conducting this activity	Have written agreement with this entity	Provide financial support to this entity	Receive financial support from this entity
Banks/financial institution			
Independent Living Center			
Easter Seals			
Disability/AT Organizations			
Federal Entities/Agencies			
State Entities/Agencies			
Local/Community Entities			
Private Entities			
Other (text box to describe)			

2. Provide a short description of at least one and no more than two planned technical assistance activities. If you are meeting the transition requirements of the AT Act through technical assistance, please describe that planned activity. [Two text boxes]

**Planned Transition Technical Assistance or Other Technical Assistance Activity (required)**

**Planned Other Technical Assistance Activity (optional)**

## Public Awareness Activities

The AT Act says the following about Public Awareness:

“The State shall conduct public-awareness activities designed to provide information to targeted individuals and entities relating to the availability, benefits, appropriateness, and costs of assistive technology devices and assistive technology services, including—  
 (aa) the development of procedures for providing direct communication between providers of assistive technology and targeted individuals and entities, which may include partnerships with entities in the statewide and local workforce investment systems established under the

Workforce Investment Act of 1998 (29 U.S.C. 2801 et seq.), State vocational rehabilitation centers, public and private employers, or elementary and secondary public schools;  
 (bb) the development and dissemination, to targeted individuals and entities, of information about State efforts related to assistive technology; and  
 (cc) the distribution of materials to appropriate public and private agencies that provide social, medical, educational, employment, and transportation services to individuals with disabilities.”

Public awareness activities are designed to reach large numbers of people, including activities such as public service announcements, radio talk shows and news reports, newspaper stories and columns, newsletters, brochures, and public forums.

Section 4(d)(5) of the AT Act requires that the State Plan include a description of how the Statewide AT Program will implement its State-level and State Leadership activities. Further, section 4(d)(4) requires that the State Plan describe how various public and private entities will be involved in the implementation of those activities, including a description of the nature and extent of resources that will be committed by public and private collaborators. Section 4(d)(7) also requires that the State Plan include a description of the State-level and State Leadership Activities the state will support with state funds. Section 4(e)(3)(B)(iii) requires that states coordinate and collaborate their State-level and State Leadership activities among public and private entities. The following items are items intended to meet these requirements for public awareness activities.

## Screen 15: Public Awareness

1. If you conduct this activity through a formal written agreement, by providing financial support to other entities and/or by receiving financial support from other entities please identify that coordination and collaboration in the table below.

Collaborating organizations conducting this activity	Have written agreement with this entity	Provide financial support to this entity	Receive financial support from this entity
Banks/financial institution			
Independent Living Center			
Easter Seals			
Disability/AT Organizations			
Federal Entities/Agencies			
State Entities/Agencies			
Local/Community Entities			
Private Entities			
Other (text box to describe)			

2. Provide a short description of at least one and no more than two planned major public awareness activities. If you conduct a major ongoing public awareness activity such as an annual AT awareness day with a Governor’s Proclamation, please include that activity. [Two text boxes]

**Major Annual Planned or Other Public Awareness Activity (required)**

**Planned Other Public Awareness Activity (optional)**

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## Information and Assistance Activities

The AT Act says the following about information and referral activities, which for the purpose of this State Plan are called information and assistance activities:

“(aa) IN GENERAL. — The State shall directly, or in collaboration with public or private (such as nonprofit) entities, provide for the continuation and enhancement of a statewide information and referral system designed to meet the needs of targeted individuals and entities.

(bb) CONTENT. — The system shall deliver information on assistive technology devices, assistive technology services (with specific data regarding provider availability within the State), and the availability of resources, including funding through public and private sources, to obtain assistive technology devices and assistive technology services. The system shall also deliver information on the benefits of assistive technology devices and assistive technology services with respect to enhancing the capacity of individuals with disabilities of all ages to perform activities of daily living.”

Section 4(d)(5) of the AT Act requires that the State Plan include a description of how the Statewide AT Program will implement its State-level and State Leadership activities. Further, section 4(d)(4) requires that the State Plan describe how various public and private entities will be involved in the implementation of those activities, including a description of the nature and extent of resources that will be committed by public and private collaborators. Section 4(d)(7) also requires that the State Plan include a description of the State-level and State Leadership Activities the state will support with state funds. Section 4(e)(3)(B)(iii) requires that states coordinate and collaborate their State-level and State Leadership activities among public and private entities. The following items are items intended to meet these requirements for information and assistance activities.

## Screen 16: Information & Assistance

1. If you conduct this activity through a formal written agreement, by providing financial support to other entities and/or by receiving financial support from other entities please identify that coordination and collaboration in the table below.

Collaborating organizations conducting this activity	Have written agreement with this entity	Provide financial support to this entity	Receive financial support from this entity
Banks/financial institution			
Independent Living Center			
Easter Seals			
Disability/AT Organizations			
Federal Entities/Agencies			

<b>State Entities/Agencies</b>			
<b>Local/Community Entities</b>			
<b>Private Entities</b>			
<b>Other</b> (text box to describe)			

**2. Describe the activity. [Text box]**

Instructions: This should include a description of how a consumer in need of information and assistance can contact your program and how your program would provide assistance to him or her. Explain in the simplest terms possible how this activity is conducted; a person unfamiliar with the program should be able to read this explanation and understand what the Statewide AT Program is “doing.”

*Example: Our Statewide AT Program has four regional sites. Each site has a half-time person devoted to answering information and assistance calls and e-mails and this person receives extensive and ongoing training. A consumer can contact any of the four sites (usually he or she is directed to the one closest to where he or she lives) and either speak to the staff or leave a message via voicemail. E-mail inquiries are handled similarly, except that they all go to a general account and then are forwarded to the appropriate staff member. Our policy is to respond to all inquiries within one business day. When contacting a consumer, the staff has a routine of questions to ask to ensure that we have all of the information necessary to connect the consumer with appropriate resources. The expertise of the staff about AT-related resources in the state is backed up by several three-ring binders full of topical information for quick reference. If staff is not able to respond to a request for assistance alone, the request is brought to the weekly staff meeting to problem-solve.*



# Assistive Technology State Grant Program

## State Plan for FY 2018-2020

### Section H: Assurances & Measurable Goals

Section 4(d) of the AT Act prescribes the duties of the Lead Agency receiving a grant under section 4 of the AT Act and requires the State to provide a number of assurances in its application for funds. 34 CFR part 76 also requires that any State Plan include certain assurances. Your certifying representative will attest to these assurances and other requirements below and by submitting the State Plan, will affirm that to the best of his or her knowledge and belief all information provided in the State Plan is true and correct and the State Plan fully discloses all known weaknesses concerning the accuracy, reliability, and completeness of the information.

#### Screen 17: Assurances

1. **As Certifying Representative of the Lead Agency for the State of [state name], I hereby assure the following:**
2. **The Lead Agency prepared and submitted this State Plan on behalf of the State of [state name].**
3. **The Lead Agency submitting this plan is the State agency that is eligible to submit this plan and if an Implementing Entity is identified it is designated to implement the required AT Act activities.**
4. **The State agency has authority under State law to perform the functions of the State under this program.**
5. **The State legally may carry out each provision of this plan.**
6. **All provisions of this plan are consistent with State law.**
7. **A State officer, specified by title in this certification, has authority under State law to receive, hold, and disburse Federal funds made available under the plan.**
8. **The State officer who submits this plan, specified by title in this certification, has authority to submit this plan.**
9. **The agency that submits this plan has adopted or otherwise formally approved this plan.**
10. **The plan is the basis for State operation and administration of the program.**
11. **The Lead Agency will maintain and evaluate the program under this State Plan.**

12. The State will annually collect data related to the required activities implemented by the State under this section in order to prepare the progress reports required under subsection 4(f) of the Act.
13. The Lead Agency will submit the annual progress report on behalf of the State.
14. The State will prepare reports to the Secretary in such form and containing such information as the Secretary may require to carry out the Secretary's functions under this Act and keep such records and allow access to such records as the Secretary may require to ensure the correctness and verification of information provided to the Secretary.
15. The Lead Agency will control and administer the funds received through the grant.
16. The Lead Agency will make programmatic and resource allocation decisions necessary to implement the State Plan.
17. Funds received through the grant will be expended in accordance with Section 4 of the Act, and will be used to supplement, and not supplant, funds available from other sources for technology-related assistance, including the provision of assistive technology devices and assistive technology services.
18. The Lead Agency will ensure conformance with all applicable Federal and State accounting requirements.
19. The State will adopt such fiscal control and accounting procedures as may be necessary to ensure proper disbursement of and accounting for the funds received through the grant.
20. Funds made available through a grant to a State under this Act will not be used for direct payment for an assistive technology device for an individual with a disability.
21. A public agency or an individual with a disability holds title to any property purchased with funds received under the grant and administers that property.
22. The physical facility of the Lead Agency and Implementing Entity, if any, meets the requirements of the Americans with Disabilities Act of 1990 (42 U.S.C. 12101 et seq.) regarding accessibility for individuals with disabilities. Section 4(d)(6)(E)
23. Activities carried out in the State that are authorized under this Act, and supported by Federal funds received under this Act, will comply with the standards established by the Architectural and Transportation Barriers Compliance Board under section 508 of the Rehabilitation Act of 1973 (20 U.S.C. 794d). Section 4(d)(6)(G)
24. The Lead Agency will coordinate the activities of the State Plan among public and private entities, including coordinating efforts related to entering into interagency agreements.
25. The Lead Agency will coordinate efforts related to the active, timely, and meaningful participation by individuals with disabilities and their family members, guardians, advocates, or authorized representatives, and other appropriate individuals, with respect to activities carried out through the grant.

## General Description of Measurable Goals:

Section 4(d)(3) of the AT Act requires that the State include information on the measurable goals, and a timeline for meeting those goals, that the State, with the advice of the Advisory Council required in section 4(c)(2), has set for addressing the assistive technology needs of individuals with disabilities in the State related to education, employment, community living, and telecommunications and information technology ).

- Section 4(d)(3)(A)(i) of the AT Act states that education goals include goals involving the provision of assistive technology to individuals who receive services under the Individuals with Disabilities Education Improvement Act (20 U.S.C. 1400 et seq.). This includes infants and toddlers receiving early intervention services under Part C.
- Education also includes the provision of assistive technology to individuals who receive services under section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 720 et seq.) and individuals in institutions of higher education and vocational education, including community colleges.
- Section 4(d)(3)(A)(ii) of the AT Act states that employment goals include goals involving the State vocational rehabilitation program carried out under title I of the Rehabilitation Act of 1973 (29 U.S.C. 720 et seq.).

ACL has established three types of measurable goals for Section 4 grantees:

- *Access to AT Goals* relate to the activities of device loan for a decision-making purpose and device demonstration. The State will show that it has improved access to AT by reaching the ACL set target percentage of individuals and entities who accessed device demonstration programs or device loan programs and made a decision about an AT device or service as a result of the assistance they received. The Access Goal performance measure data is found in the Annual Progress Report (APR) for State Assistive Technology Programs.
- *Acquisition of AT Goals* relate to the activities of state financing, device reutilization, and device loan for purposes other than decision-making. The State will show that it has improved acquisition by reaching the ACL set target percentage of individuals and entities who obtained devices or services from State financing activities or reutilization programs who would not have obtained that AT device or service. The Acquisition Goal performance measure data is found in the APR for State Assistive Technology Programs.
- *Information and Communication (ICT) Accessibility Goal* is focused on obtaining an outcome/result from information and communication technology accessibility training including improvement of policies procedures or practices in the areas of website and software development and procurement. The State will show that is has improved ICT training results by reaching the ACL set target percentage of participants reporting a targeted outcome. The ICT Training performance measure data is found in the APR for State Assistive Technology Programs.