

# REPORTING INSTRUMENT

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Expiration Date: March 31, 2024

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

## **SECTION 704 ANNUAL PERFORMANCE REPORT FOR STATE INDEPENDENT LIVING SERVICES PROGRAM (Title VII, Chapter 1, Part B of the Rehabilitation Act of 1973, as amended)**

# **Part I INSTRUMENT**

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

Reporting Fiscal Year: 2024

State: MT

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

# SUBPART I – ADMINISTRATIVE DATA SECTION A – SOURCES AND AMOUNTS OF FUNDS AND RESOURCES

Sections 704(c) and 704(m)(3) and (4) of the Act

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

## ITEM 1 - ALL FEDERAL FUNDS RECEIVED

(A) Title VII, Ch. 1, Part B	\$348,060.00
(B) Title VII, Ch. 1, Part C – <b>For 723 states Only</b>	\$0
(C) Title VII, Ch. 2	\$0
(D) Other Federal Funds	\$0
<b>Subtotal - All Federal Funds</b>	\$348,060.00

## ITEM 2 - OTHER GOVERNMENT FUNDS

(E) State Government Funds	\$597,114.00
(F) Local Government Funds	\$0
<b>Subtotal - State and Local Government Funds</b>	\$597,114.00

## ITEM 3 - PRIVATE RESOURCES

(G) Fees for Service (program income, etc.)	\$0
(H) Other resources	\$0
<b>Subtotal - Private Resources</b>	\$0.00

## ITEM 4 - TOTAL INCOME

Total income = (A)+(B)+(C)+(D)+(E)+(F)+(G)+(H)	\$945,174.00
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## ITEM 5 – PASS-THROUGH FUNDS

Amount of other government funds received as pass through funds to consumers (include funds, received on behalf of consumers, that are subsequently passed on to consumers, e.g., personal assistance services, representative payee funds, Medicaid funds, etc.)	\$820,522.00
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## ITEM 6 - NET OPERATING RESOURCES

[Total Income (Section 4) <minus> amount paid out to Consumers (Section 5) = Net Operating Resources	\$124,652.00
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## SECTION B – DISTRIBUTION OF TITLE VII, CHAPTER 1, PART B FUNDS

What Activities were Conducted with Part B Funds?	Expenditures of Part B Funds for Services by DSE Staff	Expenditures for Services Rendered By Grant or Contract
(1) Provided resources to the SILC to carry out its functions	\$13,210.00	\$0
(2) Provided IL services to individuals with significant disabilities	\$0	\$0
(3) Demonstrated ways to expand and improve IL services	\$0	\$0
(4) Supported the general operation of CILs that are in compliance with the standards and assurances set forth in subsections (b) and (c) of section 725 of the Act	\$0	\$311,017.00
(5) Supported activities to increase capacity to develop approaches or systems for providing IL services	\$0	\$0
(6) Conducted studies and analyses, gathered information, developed model policies, and presented findings in order to enhance IL services	\$0	\$0

<b>What Activities were Conducted with Part B Funds?</b>	<b>Expenditures of Part B Funds for Services by DSE Staff</b>	<b>Expenditures for Services Rendered By Grant or Contract</b>
(7) Provided training regarding the IL philosophy	\$0	\$0
(8) Provided outreach to unserved or underserved populations, including minority groups and urban and rural populations	\$0	\$0

## SECTION C – GRANTS OR CONTRACTS USED TO DISTRIBUTE TITLE VII, CHAPTER 1, PART B FUNDS

Sections 704(f) and 713 of the Act

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

<b>Name of Grantee or Contractor</b>	<b>Use of Funds (based on the activities listed in Subpart I, Section B)</b>	<b>Amount of Part B Funds</b>	<b>Amount of Non-Part B Funds</b>	<b>Consumer Eligibility Determined By DSE or Provider</b>	<b>Consumer Service Records (CSRs) Kept With DSE or Provider</b>
Living Independently for Today and Tomorrow (LIFFT)	Provide services for people with disabilities	\$137,636.00	\$211,209.00	Provider	Provider
Montana Independent Living Program dba Ability Mon	Provide services for people with disabilities	\$31,978.00	\$86,083.00	Provider	Provider
North Central Independent Living Services (NCILS)	Provide services for people with disabilities	\$133,825.00	\$200,100.00	Provider	Provider
Summit Independent Living	Provide services for people with disabilities	\$7,578.00	\$12,113.00	Provider	Provider

<b>Total Amount of Grants and Contracts</b>		\$311017.00	\$509505.00		
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## SECTION D - GRANTS OR CONTRACTS FOR PURPOSES OTHER THAN PROVIDING IL SERVICES OR FOR THE GENERAL OPERATION OF CENTERS

Section 713 of the Act

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

All contracts are for the 5 Core Services and other IL Services.

## SECTION E – MONITORING TITLE VII, CHAPTER 1, PART B FUNDS

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

Annually, Part C funds, Part B funds, and the General Funds amounts are totaled and equalized between the four Centers for Independent Living across the State. Equalization of funding for Montana CILs ensures the combined budgets of each center is the same. Equalization of funding for CILs considers the combined monies from Part B, Part C, and General Fund sources, although funding from grants and other contracts are not included in the equalization calculations. When funding levels of Part C and/or Part B change (increase or decrease) the change would be distributed equally between the four existing CILs.

The DSE provides the oversight and compliance requirements for the Part B and General Fund contracts. CILs send invoices each month to the DSE IL Program Manager for review and submission to the DSE for Budget Analyst payment. Additionally, Quarterly Reports are provided to the DSE to outline the services and activities provided by the CIL during each quarter. Board meeting minutes are included. This information is reviewed by the DSE IL Program Manager to ensure that contract goals are being met. Additionally, updates on CIL activities are provided at each CIL

meeting by the CIL Executive Directors. Per 45 CFR 75.501, any CIL receiving over \$750,000 in federal funds is required to obtain and pay for their own Single Audit. The CIL must provide a copy of this audit within 30 days of completion to DETD. Independent auditor's reports are reviewed by DPHHS Audit Services, and if deemed appropriate DPHHS Audit Services monitors for follow up and corrective actions.

## **SECTION F – ADMINISTRATIVE SUPPORT SERVICES AND STAFFING**

Section 704(c)(2) and 704 (m)(2) and (4) of the Act

### **ITEM 1 – ADMINISTRATIVE SUPPORT SERVICES**

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

The SILC IL program manager position is responsible for administrative staff support, coordination and hosting of SILC and related meetings, document development, and serves as the liaison between the SILC, DSE, and CILs. The program manager also provides support to SILC committees and assists with the development and management of the SPIL. The IL SILC program manager is the primary DSE staff support person, although they rely on other DSE staff members to provide support based on need and expertise.

The program manager also conducts contract compliance reviews to ensure that federal and state regulations and guidelines adhere to the Title II, Part B, state general funds, and the state match requirements.

The SILC IL program manager provides logistical support to the SILC in the development of marketing materials and strategies, promoting the SILC and SILC activities. The SILC IL program manager develops SILC orientation materials. Additionally, the program manager forwards information regarding training opportunities and information that may be pertinent to SILC activities and interests to SILC members.

The DSE receives grant funds on behalf of the SILC and distributes them through contracts to the CILs. The program manager is responsible for developing and administering these contracts, after a review and acceptance by each CIL.

The IL program manager does a site visit to each CIL at least every other year. The program manager also attends board and other meetings at the CILs when invited to do so. Along with staff from the CILs and SILC members, the program manager participates in the various task forces and committees and aids in the planning of IL events such as Legislative Day, Rally Day, IL Symposium, and other statewide activities.

Logistical support is also provided by the IL program manager in the search for additional funding for the SILC and CILs. The SILC does not currently receive any funding directly.

## Item 2 – Staffing

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

Type of Staff	Total Number of FTEs	FTEs filled by Individuals with Disabilities
Decision-Making Staff	1	0
Other Staff	0	0

## SECTION G – FOR SECTION 723 STATES ONLY

Section 723 of the Act, 45 CFR 1329.12

## ITEM 1 – DISTRIBUTION OF PART C FUNDS TO CENTERS

In the chart below, please provide the following information:

- A) name of each center within your state that received Part C funding during the reporting year;
- B) amount of Part C funding each center received;
- C) whether the Part C funding included a cost-of-living increase;
- D) whether the Part C funding included any excess funds remaining after cost-of-living increases were provided;
- E) whether any of the centers received its Part C funding pursuant to a competition for a new center in the state; and
- F) whether the center was the subject of an onsite compliance review conducted by the DSE during the reporting year.

Add additional rows as necessary.

## ITEM 2 – ADMINISTRATIVE SUPPORT SERVICES

Section 704(c)(2) of the Act

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

### **ITEM 3 – MONITORING AND ONSITE COMPLIANCE REVIEWS**

Section 723(g), (h), and (i) – 46

Provide a summary of the monitoring activities involving Part C centers conducted by the state during the current reporting year, including the onsite reviews of at least 15% of centers receiving Part C funds under section 723. The summary should include, at least, the following:

- A) centers' level of compliance with the standards and assurances in Section 725 of the Act;
- B) any adverse actions taken against centers;
- C) any corrective action plans entered into with centers; and
- D) exemplary, replicable or model practices for centers.

### **ITEM 4 – UPDATES OR ISSUES**

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

## **SUBPART II – NUMBER AND TYPES OF INDIVIDUALS WITH SIGNIFICANT DISABILITIES RECEIVING SERVICES**

Section 704(m)(4) of the Act; 45 CFR 1329.12(a)(3)–(4)

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



## SECTION A – NUMBER OF CONSUMERS SERVED DURING THE REPORTING YEAR

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

	# of CSRs
(1) Enter the number of active CSRs carried over from September 30 of the preceding reporting year	0
(2) Enter the number of CSRs started since October 1 of the reporting year	0
(3) Add lines (1) and (2) to get the <b><i>total number of consumers served</i></b>	0

## SECTION B –NUMBER OF CSRS CLOSED BY SEPTEMBER 30 OF THE REPORTING YEAR

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

	# of CSRs
(1) Moved	0
(2) Withdrawn	0
(3) Died	0
(4) Completed all goals set	0
(5) Other	0
(6) Add lines (1) + (2) + (3) + (4) +(5) to get <b><i>total CSRs closed</i></b>	0

## SECTION C –NUMBER OF CSRS ACTIVE ON SEPTEMBER 30 OF THE REPORTING YEAR

Indicate the number of CSRs active on September 30<sup>th</sup> of the reporting year.

	# of CSRs
Section A(3) <minus> Section (B)(6) = Section C	0

## SECTION D – IL PLANS AND WAIVERS

Indicate the number of consumers in each category below.

	# of Consumers
(1) Number of consumers who signed a waiver	0
(2) Number of consumers with whom an ILP was developed	0
(3) <b>Total number of consumers</b> served during the reporting year	0

## SECTION E – AGE

Indicate the number of consumers in each category below.

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

## SECTION F – SEX

Indicate the number of consumers in each category below.

	# of Consumers
(1) Number of Females served	0
(2) Number of Males served	0
<i>Total number of consumers served by sex</i>	0

## SECTION G – RACE AND ETHNICITY

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

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

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

## SECTION H – DISABILITY

Indicate the number of consumers in each category below.

	# of Consumers
(1) Cognitive	0
(2) Mental/Emotional	0
(3) Physical	0
(4) Hearing	0
(5) Vision	0
(6) Multiple Disabilities	0
(7) Other	0
<i>Total number of consumers served by disability</i>	0

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

Sections 13 and 704(m)(4); 45 CFR 1329.12(a)(3&4) Government Performance Results Act (GPRA) Performance Measures

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

## SECTION A – INDIVIDUAL SERVICES AND ACHIEVEMENTS

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

	Consumers Requesting Services	Consumers Receiving Services
<b>SERVICES</b>		
(A) Advocacy/Legal Services	0	0
(B) Assistive Technology	0	0
(C) Children’s Services	0	0
(D) Communication Services	0	0
(E) Counseling and Related Services	0	0
(F) Family Services	0	0
(G) Housing, Home Modifications, and Shelter Services	0	0
(H) IL Skills Training and Life Skills Training	0	0
(I) Information and Referral Services	0	0
(J) Mental Restoration Services	0	0
(K) Mobility Training	0	0
(L) Peer Counseling Services	0	0

	Consumers Requesting Services	Consumers Receiving Services
<b>SERVICES</b>		
(M) Personal Assistance Services	0	0
(N) Physical Restoration Services	0	0
(O) Preventive Services	0	0
(P) Prostheses, Orthotics, and Other Appliances	0	0
(Q) Recreational Services	0	0
(R) Rehabilitation Technology Services	0	0
(S) Therapeutic Treatment	0	0
(T) Transportation Services	0	0
(U) Youth/Transition Services	0	0
(V) Vocational Services	0	0
(W) Other Services	0	0
<b>Totals</b>	0	0

## **SECTION B – INCREASED INDEPENDENCE AND COMMUNITY INTEGRATION**

### **Item 1 – Goals Related to Increased Independence in a Significant Life Area**

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

<b>Significant Life Area</b>	<b>Goals Set</b>	<b>Goals Achieved</b>	<b>In Progress</b>
(A) Self-Advocacy/Self-Empowerment	0	0	0
(B) Communication	0	0	0
(C) Mobility/Transportation	0	0	0
(D) Community-Based Living	0	0	0
(E) Educational	0	0	0

<b>Significant Life Area</b>	<b>Goals Set</b>	<b>Goals Achieved</b>	<b>In Progress</b>
(F) Vocational	0	0	0
(G) Self-care	0	0	0
(H) Information Access/Technology	0	0	0
(I) Personal Resource Management	0	0	0
(J) Relocation from a Nursing Home or Institution to Community-Based Living	0	0	0
(K) Community/Social Participation	0	0	0
(L) Other	0	0	0

## **Item 2 – Improved Access To Transportation, Health Care and Assistive Technology**

### **(A) Table**

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

<b>Areas</b>	<b># of Consumers Requiring Access</b>	<b># of Consumers Achieving Access</b>	<b># of Consumers Whose Access is in Progress</b>
(A) Transportation	0	0	0
(B) Health Care Services	0	0	0
(C) Assistive Technology	0	0	0

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

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

### **(B) I&R Information**

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

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

### **Section C – Additional Information Concerning Individual Services or Achievements**

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

The majority of Part B funds are contracted to the CILs which provide consumer services. The funds are shared between the CILs based on an equalization formula based on total federal and state funding. They report the consumers served (CSR) and services provided in their respective quarterly reports.

## **SUBPART IV – COMMUNITY ACTIVITIES AND COORDINATION**

Section 704(i), (l), and (m)(4) of the Act; 45 CFR 1329.17(c)

<h3><b>SECTION A – COMMUNITY ACTIVITIES</b></h3>
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<h3><b>ITEM 1 – COMMUNITY ACTIVITIES TABLE</b></h3>
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In the table below, summarize the community activities involving the DSE, SILC and CILs in the Statewide Network of Centers (excluding Part C fund recipients) during the reporting year. For each activity, identify the primary disability issue(s) addressed as well as the type of activity conducted. Indicate the entity(ies) primarily involved and the time spent. Describe the primary objective(s) and outcome(s) for each activity. Add more rows as necessary.

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



<b>Issue Area</b>	<b>Activity Type</b>	<b>Primary Entity</b>	<b>Hours Spent</b>	<b>Objective(s)</b>	<b>Outcomes(s)</b>
SPIL	SILC Collaboration	SILC, CIL, DSE	20.00	Monitor current SPIL as necessary to meet SPIL requirements and make services needed by people with more available and useful.	Activities were reported in quarterly reports from the CILs and during SILC meetings. This information was submitted to the DSE to monitor progress of goal achievement by the program manager.
Competitive Integrated Employment	Collaboration	SILC, DSE	30.00	Continued collaboration with other agencies to foster integrated employment.	The DSE oversaw the CCIR reviews and contracted with the CILs for implementation of the Section 511 of the Rehab Act. CILs attended various community meetings & legislative task forces meetings where competitive integrative employment was discussed.
Housing	Outreach	SILC	20.00	Work with various agencies and WITH CIL Task Forces to increase affordable and accessible Housing.	SILC members participated in state and local meetings to increase awareness of the need for affordable and accessible housing. CILs taking a role advocating on city planning committees for on topics affecting individuals with disabilities.
Youth	Outreach	SILC, DSE	50.00	Increase awareness and knowledge of IL issues to youth in transition.	Promoted and participated in the Montana Youth Transitions Conference (MYT) and the Montana Youth Leadership Forum (MYLF), Step I and Step II
Community Access	Outreach	SILC, CIL	20.00	Increase awareness and knowledge of IL issues.	SILC members and youth representatives attended the National Council on Independent Living and Association of Programs for Rural Independent Living conference.
Community Access	Outreach	SILC, DSE	60.00	Resource Fair held to increase knowledge of available services within the State of Montana available to individuals with disabilities.	Brought greater awareness of city, county, and state services available within the State of Montana.
Community Building	Collaboration	DSE, SILC	10.00	SILC, DSE, and individuals of the Ft. Peck Reservation collaborated to host Resource Fair on the Ft. Peck Reservation.	Outreach and collaboration hosted successful Resource Fair for local community. Numerous local individuals attended and more than 20

					providers with in the state tabled to share services they provide.
Accessibility	Olmstead Plan	SILC, DSE, CIL	40.00	Olmstead Committee worked together to establish & protect the community integration of individuals with disabilities.	HB922 signed into law State Olmstead Plan in the 2023 Legislative Session. Olmstead Committee worked in collaboration to access individuals & data with disabilities to generate information for a plan within DPHHS. Working to make a State Wide plan.
SPIL	Collaboration	SILC, DSE, CIL	50.00	Collaboration with SILC, DSE, and CILs Directors to formulate new SPIL plan for the State of Montana.	New plan written regarding how the State will direct the Independent Living needs of individuals with disabilities in Montana.
Outreach	Listening Session	SILC, DSE	15.00	Listening Session for comments regarding the SPIL, SILC, and VR. Meeting was conducted virtually with widespread distribution for citizen involvement.	Comments provided were record and the respective agency responded to all comments. Meeting conducted virtually as well as an on-line fillable form for comments facilitated creased commenting.
Symposium	Outreach & Collaboration	SILC, DSE, CIL	70.00	IL Symposium held in September with the goal of maintaining and improving the Independent Living programs in Montana.	Collaboration of the DSE, CILs, SILC members to facilitate networking, peer support, outreach activities, and informational sessions. Breakout groups were held to collaborate on the Olmstead Committee and the Task Forces.
Community Access	Collaboration	SILC, CIL, DSE	30.00	Native American Task Force was reestablished to promote collaboration with the SILC, CILs, and Native American Reservations that benefits American Indians and Alaska Native across Montana.	Monthly Task Force has numerous members representing tribal members from across the State. Plans have been established for further advocacy across the State as well as a partnership has been created with DPHHS Office of American Health.

## ITEM 2 – DESCRIPTION OF COMMUNITY ACTIVITIES

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

Throughout the year SILC members are actively involved in the Olmstead Committee and the four CIL Task forces that advocate for Independent Living within the state. Members of the DSE play an active role in many of these committees.

In September the Statewide Independent Living Council hosted the Independent Living Symposium in Helena, Montana. Nearly 100 individuals gathered for three days to advocate for the needs of individuals with disabilities. Individuals met to discuss topics that included reviewing the new SPIL, the expanded development of the Olmstead Plan within the State, Competitive Integrated Employment, Vocational Rehabilitation Services on the Native American Reservations in Montana, and so much more. Additionally, time was spent in committees focused on transportation, community living, legislative advocacy, self-determination, youth employment and transitions, and Native American concerns.

Additionally, in conjunction with the Fort Peck Community College in Poplar, MT on the Fort Peck Indian Reservation the SILC held it's first ADA Resource Fair. This event highlighted the variety of providers and organizations from across the State that provide services to individuals with disabilities. This event was an amazing success featuring more than 20 organizations. It provided an opportunity for individuals to learn about services in a friendly, face-to-face setting. Several presenters traveled 8 hours (one-way) to attend and share the highlights of their program. This event was such a success that additional Resource Fairs are planned for the spring.

During the 2023 Legislative session MT SILC, CILs, and DSE played an integral part in the passage of Montana House Bill 922. This bill requires the Montana Department of Health and Human Services to develop and implement an updated Olmstead plan. Over the past year members of the SILC in conjunction with the CILs, the Department of Health and Human Services, and the Rural Institute continue to advocate, support, conduct research, and provide direction for this plan. Additionally, the Committee continues to advocate with other governmental departments across the State for full integration. Plans are set to meet with the other Department Directors in the first half next year (2025). The SILC and CILs continue to work to have a fully implemented and executed Olmstead plan by June 30, 2029.

Likewise, the MT SILC has been actively involved in transition activities with the youth of Montana. Attending and contributing to both the MYLF (My Life) Conference and the MYTransition Conference. Both multi-day conferences focus on advocacy, leadership skills, post-secondary academic & career goals. MYLF attendees create their personal Resource Development plan, expand their advocacy skills, develop knowledge of the culture of disabilities, and meet adults who are living successfully with disabilities. This forum is an integral tool in helping young adults gain more independence in the areas of technology, community support, peer mentoring, and civil rights. Likewise, the MYTransitions Conference features tracks for students, parents,

and teachers to facilitate better understanding of transition strategies, tools, opportunities within Montana for high school and post-secondary students.

As well, over the past year the MT SILC has placed a priority in continuing its work in prioritizing and advancing competitive integrated employment. Working in conjunction with the State Resource Council, the councils have focused on ways to increase employment for individuals and evaluate the use of the 14(c) of the FLSA to employ people for less than minimum wage. MT SILC Board members attended the National Council on Independent Living and the Association of Programs for Rural Independent Living Conference.

## **Section B – Working Relationships Among Various Entities**

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

The DSE, SILC, and CILs maximize cooperation, coordination, and working relationships in a variety of ways. The SILC and DSE members are actively involved in the CIL Task Forces that focus on Transportation, Community Living, Self-Advocacy, and Legislative concerns. Additionally, CIL Directors and DSE Representatives attend the SILC Board meetings. Likewise, many State and CIL employees actively participate in the Olmstead Committee which is a SILC led committee. Quarterly CIL Director meetings are being held with intention of strengthening communication and programming for Independent Living in Montana. All meetings are held via Zoom to expand the ability for individuals to attend.

CIL Directors and the DSE worked with the SILC to develop the new SPIL that will be implemented in October 2024. A Town Hall was hosted via for public comment with the CILs involved in the advertising and hosting Zoom accessible site locations for consumer participation. Additionally, an on-line comment submittal form was located on the SILC website for expanded access to those wishing to comment that was shared in the advertising.

Additionally, the SILC and CILs worked integrally with the Rural Institute for Inclusive Communities this year on an Olmstead data gathering project to expand Olmstead integration within DPHHS. This data and plan within DPHHS will be used as a template for Olmstead expansion to all Divisions within the State. As well, a Rural Institute employee is a SILC Board member allowing for greater coordination of shared knowledge and interest.

The SILC hosted a joint SILC/SRC meeting in May. As both boards share a common Board member thus allowing knowledge, materials, and their shared purpose to be strengthened. In September the SILC hosted the IL Symposium that brought SILC, CIL, DSE, and a variety of outside agencies together to discuss topics that ranged from Competitive Integrated Employment, Pre-ETS, the new SPIL, advocacy, and the upcoming Legislative Session.

Competitive Integrated Employment funding and opportunities are being served to Montana clients through the four Montana CILs.

The IL Program Manager serves on the Montana Disability and Health Programs (MDHP) Board. Additionally, the MDHP works integrally with the CILs to promote programs that focus on chronic disease prevention and health promotion.

## **SUBPART V – STATEWIDE INDEPENDENT LIVING COUNCIL (SILC)**

Section 705 of the Act; 45 CFR Part 1329.14

### **SECTION A - COMPOSITION AND APPOINTMENT**

#### **ITEM 1 – CURRENT SILC COMPOSITION**

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

<b>Name of SILC member</b>	<b>Employed by CIL, State Agency or Neither</b>	<b>Appointment Category</b>	<b>Voting or Non-Voting</b>	<b>Term Start Date</b>	<b>Term End Date</b>
Scott Williamson	CIL	Person with Disability	Voting	01/01/2022	11/30/2024
Tami Hoar	CIL	Person with Disability	Voting	11/07/2022	12/01/2024

Tom Thompson	CIL	Person with Disability	Voting	01/01/2022	11/30/2024
Allyson Talaska	State Agency	VR Counselor	Non-Voting	10/07/2021	11/30/2024
Julie Williams	State Agency	Representative State Agency	Non-Voting	08/04/2023	11/30/2024
Chris Johnsrud	Neither	Person with Disability	Voting	04/01/2021	12/01/2024
Hannah Thompson	Neither	Advocate	Voting	08/14/2023	12/01/2026
Heather Giese	Neither	Parent	Voting	04/01/2024	12/01/2024
Jean Schroeder	Neither	Member-At-large	Voting	01/01/2022	12/01/2024
June Hermanson	Neither	Person with Disability	Voting	01/01/2022	11/30/2024
Melanie Beagle	Neither	Person with Disability	Voting	04/01/2024	12/01/2024
Mike Manhardt	Neither	Person with Disability	Voting	10/07/2021	11/30/2024
Nichole Lowrance	Neither	Advocate	Voting	04/01/2024	12/01/2026
Savanah Smith	Neither	Parent	Voting	11/07/2022	12/01/2024
Vacant: Indian Health Services Representative	Neither	Person with Disability	Voting	04/01/2025	03/31/2028

## ITEM 2 – SILC COMPOSITION REQUIREMENTS

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

<b>SILC COMPOSITION</b>		<b># of SILC members</b>
(A)	How many members are on the SILC?	15
(B)	How many members of the SILC are individuals with disabilities not employed by a state agency or a center for independent living?	10
(C)	How many members of the SILC are voting members?	13
(D)	How many of the voting members of the SILC are individuals with disabilities not employed by a state agency or a center for independent living?	8

## **SECTION B – SILC MEMBERSHIP QUALIFICATIONS**

Section 705(b)(4) of the Act; 45 CFR 1329.14(a)

### **ITEM 1 – STATEWIDE REPRESENTATION**

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

Membership continues to be a major focus of the MT SILC. The MT SILC has members from 9 different communities located in various regions of the state, both urban and rural. There are 585 miles between the two furthest serving MTSILC Board Members, which would entail a 11-hour trip. Four SILC Board members live in Montana's metropolitan areas, five in micropolitan areas, and four in rural areas. Two members live on Native American Indian reservations. MTSILC's recruiting strategy continues to target the most rural and underserved communities in the state, including representation from the numerous Native American Indian Reservation. Presently the Board members live within all the four regions served by the CILs.

### **ITEM 2 – BROAD RANGE OF INDIVIDUALS WITH DISABILITIES FROM DIVERSE BACKGROUNDS**

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

MTSILC has Board members from the four regions served by the four CILs. Board members are diverse with a multitude of varied talents and backgrounds. Members include those involved in youth transitions, parents of those with disabilities, are Native American, and have experience with nonprofits. Likewise, members have experience with parent advocacy groups, IL experience from other states IL programs, assistive technology expertise, resource development, and operations management. Many

members have long histories of advocacy and experience surrounding the disability community.

Presently, the SILC Board are represented by individuals with the following disabilities: two individuals with blindness and/or low vision, one individual with a genetic disease, one individual with a Traumatic Brain Injury, two individuals with physical disabilities, and two individuals with language and/or communication disability. Additionally, two Board members have children with differing disabilities, one Board member is a representative of the DSE (Vocational Rehabilitation), two Board members live on Indian reservations, and one Board member represents the Rural Institute for Inclusive Communities.

### **ITEM 3 – KNOWLEDGEABLE ABOUT IL**

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

Many members of the SILC are former consumers of a CIL. The CILs often encourage their former consumers to apply for Board positions as well. Several members have served on the SILC both in our state and other states. The by-laws require new SILC members to participate in trainings on Statewide Independent Living Councils and Centers for Independent Living. A CIL representative serves on the MTSILC as well as each CIL gives an update on happenings at their CIL at each quarterly meeting. Likewise, the CIL Directors and SILC Board members serve on numerous committees together, and attend a variety of conferences together (IL Symposium, MYTransitions, Montana Summit on Inclusive Nutrition and Health). Many of the members have also attended National Conference to develop their understanding as well. In this past year during a quarterly SILC meeting attendees visited a CIL and were able to view their services first-hand.

## **Section C – SILC Staffing and Support**

### **Item 1 – SILC Staff**

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

The Montana SILC does not have an executive director. The IL Program Manager is the only staff member employed by the Disability and Employment and Transitions Division of DPHHS whose main focus is working for the MT Statewide Independent Living



Council. This position is currently filled by Julia Arnold. Her contact information is: 201 1st St. South, STE 2, Great Falls, MT 59405 (406) 454- 6066.

## **Item 2 – SILC Support**

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

The Independent Living program manager ensures that correspondence, reports and other common tasks are completed in a timely manner. The program manager coordinates SILC meetings and training, prepares and distributes materials for SILC meetings and maintains records of SILC actions. This person also maintains the SILC website. The program manager, contracts specialist and budget analyst prepare and oversee annual state General Fund and Part B contracts with the CILs and monitors their compliance. The program manager also participates in meetings and conferences with other community organizations to promote the SILC and independent living, and coordinate efforts to serve the community and especially Montanans with disabilities.

## **SECTION D – SILC DUTIES**

Section 705(c); 45 CFR 1329.15

## **ITEM 1 – SILC DUTIES**

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

### **(A) State Plan Development**

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

Numerous activities related to the development of the state plan occurred over the past year. The SILC Board Members, CIL Directors, and DSE representative collaborated in a SPIL Writing Committee which brought together in the development and writing process of this document. This committee worked together over the course of the year in bi-weekly meetings. Monthly progress reports were provided to the SILC Executive Committee and quarterly reports were provided to the SILC Board. A Townhall meeting that directly addressed the SPIL was held in late winter. A Townhall flier and postcard were distributed to the CILs for further distribution. Advertisement was additionally shared via social media, on the VR Friends of Rehab newsletter, and highlighted on the MTSILC webpage. All advertising contained a QR code encouraging easy access to the meeting and the link, the draft SPIL, and the portal to submit public comments on-line. A Town Hall was hosted via for public comment with the CILs involved in the advertising

and hosting Zoom accessible site locations for consumer participation. Any questions asked during the meeting were later answered by the DSE by email and postal mail to all meeting attendees. Additionally, a specific link was generated on the SILC website to enter comments and/or questions addressing the SPIL. These as well were answered by email and/or postal mail. Comments were evaluated by the SPIL Writing Committee and edits and revisions of the draft SPIL were made before submission.

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

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

The SPIL Evaluation Committee evaluated the goals from the 2020-2023 SPIL to determine if continued progress had been made, goals met, and suggestions for guidance to the SPIL Writing Committee. The SPIL Evaluation Committee meets throughout the year to evaluate the progress made on the SPIL goals. This year our goals were focused on Year 3 of the SPIL goals. The SPIL Evaluation Committee reviewed the goals and noted the majority of the goals for this past year continued to be met or were goals that were intended to be on-going. For example, 'a work group will meet twice annually to ensure advocacy'. The SPIL evaluation committee noted that this goal was on-going and suggested it to be include it in the next SPIL.

Additionally, during the opening session of September Independent Living Symposium, the SPIL was reviewed as an entirety, emphasizing the goals and objectives of the SPIL to all attending. Questions were answered and direction was provided. Attendees consisted of members of the SILC, CIL employees and consumers, community providers, and DSE.

Additionally, during the CIL Task Force break out sessions the CIL goals were addressed and each Task Force identified how they would contribute to the goals over the following three years.

Within the SILC Committees and working groups are getting started to address several goals, and the Olmstead Committee continues to work on the third goal to implement a new updated Olmstead Plan within all divisions of the State Government.

A new Quarterly Report was designed to help track the implementation of goals of the SPIL by the Centers for Independent Living. CIL Directors will submit their quarterly report to the IL Program Manager who will collate the data. Ultimately, the SPIL Evaluation Committee meets throughout the year to evaluate the data and monitor progress made on the SPIL goals as provided from the variety of sources working on the goals.

### **(C) Coordination With Other Disability Councils**

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

A SILC member is also a Board member of the SRC. This member reports on SILC activities and gathers information from the SRC to bring back to the SILC. A joint SRC/SILC meeting is held annually with the two councils. The last joint meeting held was in April 2024 where members of both councils discussed their missions and ongoing work. Tentative plans are being made to hold the next joint meeting in August 2025. Additionally, several SRC members joined the SILC at the IL Symposium.

The Centers for Independent Living have established several task forces to address specific issues impacting the disability community. These task forces are the Self- Determination, Legislative Advocacy, Transportation, Community Living, and Youth and Employment. These task forces meet regularly and have a representative from the SILC in attendance.

SILC members also are active with the Montana Youth Leadership Forum (MYLF), Montana Youth Transitions Conference, Montana Disability & Health Community Planning group, Montana Empowerment Center, and the Rural Institute for Integrated Communities. Individually SILC members are involved in a variety of local, state, and national organizations advocating for people with disabilities.

### **(D) Public Meeting Requirements**

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

On the SILC website a designated Meetings, Events and Documents tab is included so all meetings and SILC activities are listed. Meeting notices, virtual links, agendas, and any associated resources are attached and posted by the IL program manager on the SILC website at least two weeks prior to the meeting. Montana State Code, annotated

requires that all such meetings be open to the public. The opportunity for public comment is provided during each SILC meeting and is noted on the agenda. CIL directors and other community leaders are also invited to the SILC meetings to provide information on activities that have taken place since the previous SILC meeting. Calendar reminders are shared and Zoom links distributed. Teleconferencing is provided for those who are unable to participate in person, live closed captioning is provided through Hamilton Relay, as well as Zoom auto generated captioning is also available. During the joint SRC/SILC meeting ASL interpreters are provided if requested.

## Item 2 – Other Activities

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

No other SILC activities are done using non-Part B funds.

## SECTION E – TRAINING AND TECHNICAL ASSISTANCE NEEDS

Section 721(b)(3) of the Act

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

Training and Technical Assistance Needs	Choose up to 10 Priority Needs – Rate items 1-10 with 1 being most important
<b>Advocacy/Leadership Development</b>	
General Overview	
Community/Grassroots Organizing	7
Individual Empowerment	
Systems Advocacy	
Legislative Process	

<b>Training and Technical Assistance Needs</b>	<b>Choose up to 10 Priority Needs – Rate items 1-10 with 1 being most important</b>
<b>APPLICABLE LAWS</b>	
General overview and promulgation of various disability laws	8
Americans with Disabilities Act	9
Air-Carrier's Access Act	
Fair Housing Act	6
Individuals with Disabilities Education Improvement Act	
Medicaid/Medicare/PAS/waivers/long-term care	
Rehabilitation Act of 1973, as amended	
Social Security Act	10
Workforce Investment Act of 1998	
Ticket to Work and Work Incentives Improvement Act of 1999	''
Government Performance Results Act of 1993	
<b>Assistive Technologies</b>	
General Overview	
<b>Data Collecting and Reporting</b>	
General Overview	
704 Reports	
Performance Measures contained in Program Performance Report	
Dual Reporting Requirements	
Case Service Record Documentation	
<b>Disability Awareness and Information</b>	
Specific Issues	
<b>Evaluation</b>	
General Overview	
CIL Standards and Indicators	
Community Needs Assessment	
Consumer Satisfaction Surveys	
Focus Groups	
Outcome Measures	

	<b>Choose up to 10 Priority Needs – Rate items 1-10 with 1 being most important</b>
<b>Training and Technical Assistance Needs</b>	
<b>Financial: Grant Management</b>	
General Overview	
Federal Regulations	
Budgeting	
Fund Accounting	
<b>Financial: Resource Development</b>	
General Overview	
Diversification of Funding Base	
Fee-for-Service Approaches	
For Profit Subsidiaries	
Fund-Raising Events of Statewide Campaigns	
Grant Writing	5
<b>Independent Living Philosophy</b>	
General Overview	
<b>Innovative Programs</b>	
Best Practices	
Specific Examples	
<b>Management Information Systems</b>	
Computer Skills	
Software	
<b>Marketing and Public Relations</b>	
General Overview	
Presentation/Workshop Skills	
Community Awareness	
<b>Networking Strategies</b>	
General Overview	
Electronic	
Among CILs & SILCs	
Community Partners	

	<b>Choose up to 10 Priority Needs – Rate items 1-10 with 1 being most important</b>
<b>Training and Technical Assistance Needs</b>	
<b>Program Planning</b>	
General Overview of Program Management and Staff Development	1
CIL Executive Directorship Skills Building	
Conflict Management and Alternative Dispute Resolution	
First-Line CIL Supervisor Skills Building	
IL Skills Modules	
Peer Mentoring	
Program Design	
Time Management	
Team Building	
<b>Outreach to Unserved/Underserved Populations</b>	
General Overview	
Disability	
Minority	
Institutionalized Potential Consumers	3
Rural	2
Urban	
<b>SILC Roles/Relationship to CILs</b>	
General Overview	4
Development of State Plan for Independent Living	
Implementation (monitor & review) of SPIL	
Public Meetings	
Role and Responsibilities of Executive Board	
Role and Responsibilities of General Members	
Collaborations with In-State Stakeholders	

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

## SUBPART VI – STATE PLAN FOR INDEPENDENT LIVING (SPIL) COMPARISON AND UPDATES, OTHER ACCOMPLISHMENTS AND CHALLENGES OF THE REPORTING YEAR

Section 704(n) of the Act

### SECTION A – COMPARISON OF REPORTING YEAR ACTIVITIES WITH THE SPIL

#### ITEM 1 – PROGRESS IN ACHIEVING OBJECTIVES AND GOALS

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



The SILC worked diligently on goals outlined in the SPIL. The MTSILC worked in conjunction with the four MT CILs and the DSE to achieve these goals. In 2023 a new Olmstead Plan was passed by the Legislature within the Department of Health and Human Services. The SILC and CILs continued its work to support the Department on its research component of this plan. Likewise, the SILC continued to work with the CILs to provide the 5 core services. Additionally, the SILC Program Manager continues to spend large amounts of time recruiting new members for the MT SILC Board. We presently have three potential candidates for the Board with applications into the Governor.

SPIL Goals:

- #1: IL Systems operate effectively and efficiently.
- #2: Policies, procedures, and systems are transformed through advocacy, education, training and awareness to meet the needs of people with disabilities.
- #3: Montanans with disabilities have access to and receive quality and appropriate services.

SPIL Goal 1: IL Systems operate effectively and efficiently.

Goal 1 was divided into four main sections.

- \* Objective One: The first aspect of this goal was to ensure the SILC is compliant with Standards and Indicators by the end of year 1. This goal was achieved in year 1, although this goal continued to be referenced and implemented throughout all the years of this SPIL.

- \* Objective Two: This goal explored the options for increased autonomy of the SILC including possible 501(c)(3) status. The SILC Board explored this option and in May 2023 it was voted by the Board not to pursue 501(c)(3) status.

- \* Objective Three: The SILC in partnership with the CILs were tasked with seeking and exploring funding opportunities to meet the increased demand for funding. The need for continued exploration of this portion of the goal continues to be important. The present Program Manager is tasked with the continual search and sharing of funding opportunities. Numerous grant opportunities have been shared with the CIL Directors for their review. Additionally, further funding was sought for the SILC for Olmstead and unfortunately the grants time-ranges appear to be expired.

- \* Objective Four: The final portion of goal one directed the SILC to provide training opportunities that align with the IL Philosophy. The IL Program Manager send out a weekly email to the SILC members that includes numerous training opportunities. Additionally, social media is used often find and share a variety of training opportunities. Likewise, during each SILC meeting informational presentations are given to the members. These have included such topics as 14(c) Sub-Minimum Wages, SPIL Writing and Goal Setting, VR and Benefits Planning, and the DD Determination process. Additionally, members attended the APRIL and NCIL conference, expanded the MT SILC website reference materials, participated in a variety of in-state conferences attendance, and the program manager distributed a variety of educational materials.

Goal 2: Policies, procedures, and systems are transformed through advocacy, education, training and awareness to meet the needs of people with disabilities.

The second goal of the SPIL has three subsections.

- \* Objective One: The first integral part of this goal included affecting social change through disability education and awareness to the public. This goal was met and continues to be a focus of the SILC. The SILC hosted an ADA Resource Fair on the Ft. Peck Indian Reservation. This event brought together more than 20 State and Local agencies and organizations that advocate and provide services and support for Independent Living. Additionally, the SILC Program manager and SILC members attended several conferences both in and out of state and shared their knowledge and resources. Additionally, the Program Manager was asked to be part of the Board of the Montana Disability and Health Program. This Board has expanded the knowledge of Independent Living as well as created connections and networking possibilities within the State of Montana. In September 2024 the SILC held the biannual IL Symposium inviting individuals from across the state to participate in three days of IL updates, education, community building, and network development.

- \* Objective Two: The second part of this goal focuses on providing opportunities to people with disabilities to promote disability rights at the local, state, and national levels. This objective was also accomplished through involvement in the Olmstead Committee work, response to HB872 (Behavior Health for Future Generations) , IL Symposium, and attendance at state and national conferences.

- \* Objective Three: The last aspect of this goal partners the SILC with the network of MT CILs to promote systemic change. The SILC was named a stake-holder in HB872, the Behavioral Health and was asked by Governor Gianforte to read and comment on the plan. In addition to the newly developed Olmstead Plan, the SILC works collaboratively with the CILs on their task forces. These task forces include Transportation, Legislative Advocacy, Native American, Community Living, and Self-Determination.

Goal 3: Montanans with disabilities have access to and receive quality and appropriate services.

The third goal of the SPIL has four objectives.

- \* Objective One: The first of four objectives developed within this goal directs the SILC to collaborate with the MT networks of CILs to target the unserved and underserved populations through the current outreach model. This goal was important enough to the current SPIL Writing Committee that it became part of the newly written and submitted SPIL. Access to and receipt of quality services begins with the knowledge that these services exist. This objective was supported using several methods including increased website and social media use to expand awareness of the SILC and CILs, mailings with updated print material for local distribution, and the use and training of the MTCIL network to inform individuals regarding current local, state,

and national issues and legislation that affects the lives of people with disabilities. Additionally, the SILC hosted an ADA Resource Fair on the Ft. Peck Indian Reservation. This event brought together more than 20 State and Local agencies and organizations that advocate and provide services and support for Independent Living. The CIL in the area attended and shared information regarding services in their service area and contact information.

- \* Objective Two: CIL reports from the Directors within each SILC meeting are also now part of the quarterly meetings and welcome to participate in all trainings offered to the SILC members.

- \* Objective Three: Support continues for the Montana Youth Leadership Forum (MYLF), the Montana Youth Transitions (MYT) Conference, and the numerous CIL activities centered around youth that are not identified in the 5th Core service area.

- \* Objective Four: The SILC and CILs, and continue to work together to support the provision of nursing home transition and diversion services. The DSE facilitated a meeting with the CIL Directors with Money Follows the Person on methods to collaborate, identify, and facilitate transition from the nursing home and/or institutional care.

## **ITEM 2 – SPIL INFORMATION UPDATES**

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

No changes presently to the SPIL.

## **SECTION B– SIGNIFICANT ACTIVITIES AND ACCOMPLISHMENTS**

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

All activities and accomplishments achieved by the SILC and the DSE have been covered elsewhere in this report.

## SECTION C – SUBSTANTIAL CHALLENGES

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

MT SILC Board membership continues to be a struggle and recruitment a top priority of the Board. The MT SILC continues to actively seek a member to represent Indian Health and a youth member.

## SECTION D – ADDITIONAL INFORMATION

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

none

### Public Health Workforce (PHWF) - Data Reporting Requirements

Grant Number	2201MTISPH-00
Date Range	10/01/2023 - 09/30/2024
State	MT

### ITEM 1 - TOTAL NUMBER OF FULL-TIME EQUIVALENTS (FTES)

Total Number of Full-Time Equivalents (FTES)	1
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### ITEM 2 - TYPE OF PUBLIC HEALTH PROFESSIONAL(S) HIRED

Case Investigator	0
Contact Tracer	0
Social Support Specialist	0
Community Health Worker	0
Public Health Nurse	0

Disease Intervention Specialist	0
Epidemiologist	0
Program Manager	0
Laboratory Personnel	0
Informaticians	0
Communication and Policy Experts	1
Other positions as may be required to prevent, prepare for, and respond to COVID-19. List below:	
Other 1:	0
Other 2:	0
Other 3:	0
Other 4:	0
Other 5:	0

### **ITEM 3 - THE ACTIVITIES THEY ARE ENGAGED IN TO ADVANCE PUBLIC HEALTH**

This fiscal year for the PHWF grant Summit (CIL) hired a Communication/Outreach Coordinator to develop community resources and increase public understanding of disability public health issues as well as work directly with consumers on emergency planning and other public health concerns including on-going COVID-19 concerns. The Communication/Outreach Coordinator played an integral role this year of the marketing of Summit's Vaccination clinic. These vaccination clinics included boosters for the COVID-19 virus.

The Communication/Outreach Coordinator participated in Local Emergency Planning Committees (LEPC), Access and Functional Needs (AFN) committees, and Tribal Emergency Planning Committees (TEPC) in addition to participating in weekly MTDH Aging and Disability Network meetings. The COC participated in the MTDH meetings in planning, implementing and attending webinar series for disability and public health grantees (public health and medical professionals) to communicate attendees on how to better include disability and intersecting marginalized communities.

These committees offer hands on opportunities to review local emergency and disaster response topics, preparedness, and other issues, as well as the availability for providing input to ensure that the needs of people with disabilities and older adults are being considered in their efforts. Communication/Outreach coordinator began a project with Missoula's health department to create a "table top" emergency exercise at Summit that will be able to be replicated in other organizations once completed. Additionally, the COC worked with a national FEMA representative to gain strategies to implement

with consumers in Summit's service area for planning and prep for public health and emergency response, such as those needed during the Covid-19 epidemic.

The Communication/Outreach Coordinator planned and taught a class to Summit's consumers about preparing for a natural disaster or personal emergency. This includes personal readiness for any on-going response to the Covid-19 pandemic or similar event as well as prepare for any future health challenges that might arise. Consumer's were able to develop an individual disaster preparedness plan. The class included how to prepare for evacuation and how to shelter in place. The OC also worked with Summit's peers and presented how to sign up for emergency alerts in their areas.

Additionally, the Communication/Outreach Coordinator conducted numerous in-service trainings to providers, crisis intervention teams, public health officials, CASA, county justice employees, CPS and other victim advocates to educate about disability culture, inclusion, access, and services.

## SUBPART VII - SIGNATURES

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

Chris Johnsrud - Signed Digitally	03/25/2025
SIGNATURE OF SILC CHAIRPERSON	DATE

Chris Johnsrud - Chairperson	(406) 215-6454
NAME AND TITLE OF SILC CHAIRPERSON	PHONE NUMBER

Chanda Hermanson - Signed Digitally	03/26/2025
SIGNATURE OF DSE DIRECTOR	DATE

Chanda Hermanson - Administrator-Disability Employment and Transition	(406) 465-7756
NAME AND TITLE OF DSE DIRECTOR	PHONE NUMBER