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Expiration Date: pending

CIL Program Project Performance Report

For Year FY2017

Agency Information

* - Required input

Fiscal Year:

2017

Grant #:

1705IAILCL

Name of Center:

League of Human Dignity Southwest Iowa Center for Independent Living

Acronym for Center (if applicable):

SWIL

Counties Served:

Pottawattamie, Cass, Shelby, Harrison, Mills, Fremont, Nontgomery and Page.

Section 1. General Funding Information

Section 725(c)(8)(D) of the Act

1.1 Sources and Amounts of Funds and Resources * - Required field

1.1.1 All Federal Funds Received

Federal Funds	Current Year
Title VII, Ch. 1, Part B*	16885
Title VII, Ch. 1, Part C*	147581
Title VII, Ch. 2*	0
Other Federal Funds*	0
Subtotal – All Federal Funds	164466

1.1.2 Other Government Funds

Government Funds	Current Year
State Government Funds*	18626
Local Government Funds*	4248

Government Funds	Current Year
Subtotal – State and Local Government Funds	22874

1.1.3 Private Resources

Private Resources	Current Year
Foundations, Corporations, or Trust Grants*	16128
Donations from Individuals*	5771
Membership Fees*	0
Investment Income/Endowment*	0
Fees for Service (program income, etc.)*	4719
Other Resources (in-kind, fundraising, etc.)*	0
Subtotal – Private Resources	26618

1.1.4 Total Income

Total Income	Current Year
Total Income	213958

1.1.5 Pass Through Funds

Pass Through Funds	Current Year
Amount of other government funds received as pass through funds to consumers (include funds, received on behalf of consumers, that are subsequently passed on to consumers, e.g., personal assistance services, representative payee funds, or Medicaid funds)*	14876

1.1.6 Net Operating Resources

Net Operating Resources	Current Year
Net Operating Resources	199082

1.2 Resource Development Activities

* - Required field

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

In 2018 the League of Human Dignity was awarded a grant in the amount of \$25,000 from Council Bluffs Community Development Block Grant for the Barrier Removal Program. In addition a \$500 grant from Walmart for Peer Support Group, \$2,500 from Iowa Disability Rights for a Voter Education Event, \$1,500 from Pottawattami County Foundation for Medical Equipment.

We held our annual golf benefit in June of 2018. Since its inception in 2010 the event has grown and we have been able to generate some profits. We have been able to get Olive Garden and HyVee to donate the food and have a database of individual and business donors for the event. We are pleased to see it continuing to grow.

In May 2018 the League of Human Dignity participated in "Omaha Gives!." Omaha Gives! is a new 24-hour, online giving event organized by the Omaha Community Foundation to grow philanthropy in the Omaha area (Douglas, Sarpy, and Pottawattamie counties). The minimum donation is \$10 and there is no maximum. Matching funds and prize money will be made available to amplify charitable donations. The goal is to inspire the community to come together for 24 hours to contribute as many charitable dollars as possible to support the work of local nonprofit organizations.

The League of Human Dignity continues to have an annual holiday letter that targets those that have given a monetary donation to the League. This is done through a holiday letter that is designed to not only solicit donations, but to provide disability awareness through its design and message.

Another means of resource development is through the League's newsletter "On the Level" that reaches readers electronically. This is a bi-monthly publication that devotes a section to both honor donors and to request donations. Additionally, the League updated its website giving it a modern design while maintaining accessibility. The League also continues to maintain a Facebook page and Twitter account, which allows consumers to have quick and easy access to league information, news, donation information, and advocacy updates.

Section 2. Compliance Indicator 1: Philosophy

2.1 Board Member Composition

* - Required field

(A) Number of board members

9

(B) Number of board members with significant disabilities

8

(C) Percentage of board members with significant disabilities

88.89

2.2 Staff Composition

* - Required field

Staff Composition

Staff	Total FTEs	FTEs filled by individuals with disabilities	FTE's filled by individuals from minority populations
Decisionmaking staff*	1	1	0
Other Staff*	1.84	1.16	0
Total number of employees	2.84	2.16	0

2.2.1 Percentage of Staff with Disabilities

76.06

Section 3. Individuals Receiving Services

Section 704(m)(4)(D) of the Act; Section 725(b)(2) of the Act; Section 725(c)(8)(B) of the Act

3.1 Number of Consumers Served During the Reporting Year

* - Required field

Number of Consumers Served During the Reporting Year

Consumer Type	# of CSRs
Enter the number of active CSRs carried over from September 30 of the preceding reporting year*	25
Enter the number of new CSRs opened since October 1 of the reporting year*	23
Total number of consumers served	48

3.2 Independent Living Plans and Waivers

* - Required field

Independent Living Plans and Waivers

Consumer Type	Number of Consumers
Number of consumers who signed a waiver*	3
Number of consumers with whom an ILP was developed*	43
Total number of consumers served during the reporting year	46

3.3 Number of Consumer Service Records Closed by September 30 of the Reporting Year * - Required field

Number of Consumer Service Records Closed by September 30 of the Reporting Year

Record Type	# of CSRs
Moved*	1
Withdrawn*	7
Died*	0

Record Type	# of CSRs
Completed all goals set*	13
Other*	10
Total number of CSRs closed	31

3.4 Age

* - Required field

Age

Age Period	# of Consumers
Under 5 years old*	0
Ages 5-19*	14
Ages 20-24*	4
Ages 25-59*	19
Age 60 and Older*	6

Age Period	# of Consumers
Age unavailable*	5
Total numbers of consumers by age	48

3.5 Sex

* - Required field

Sex

Sex	# of Consumers
Number of Females served*	21
Number of Males served*	27
Total number of consumers by gender	48

3.6 Race and Ethnicity

* - Required field

Race and Ethnicity

Race	# of Consumers
American Indian or Alaska Native *	0
Asian *	0
Black or African American *	0
Native Hawaiian or Other Pacific Islander *	0
White *	48
Hispanic/Latino of any race or Hispanic/ Latino only *	0
Two or more races *	0
Race and ethnicity unknown *	0
Total number of consumers served by race/ethnicity	48

3.7 Disability

* - Required field

Disability

Disability Type	# of Consumers
Cognitive*	15
Mental/Emotional*	5
Physical*	23
Hearing*	0
Vision*	1
Multiple Disabilities*	3
Other*	47

3.8 Individuals Served by County During the Reporting Year

* - Required field

List each county within the CIL's service area, as indicated in the CIL's application for Part C funds and the approved SPIL. Add additional rows as necessary. For each county, indicate how many individuals residing in that county were served by the CIL during the reporting year.

3.8.1 Individuals Served by County During the Reporting Year

County Name	Number of County Residents Served
Pottawattamie	36
Harrison	3
Page	0
Montgomery	1
Cass	4
Fremont	0
Mills	1
Shelby	3

Section 4. Individual Services and Achievements

4.1 Individual Services

* - Required field

Individual Services

Other IL Services	Consumers Requesting Services	Consumers Receiving Services
Advocacy/Legal Services *	9	9
Assistive Technology *	0	0
Children's Services *	0	0
Communication Services *	0	0
Counseling and Related Services *	0	0
Family Services *	0	0
Housing, Home Modifications, and Shelter Services *	10	10

Other IL Services	Consumers Requesting Services	Consumers Receiving Services
IL Skills Training and Life Skills Training *	41	41
Information and Referral Services *	487	487
Mental Restoration Services *	0	0
Mobility Training *	0	0
Peer Counseling Services *	0	0
Personal Assistance Services *	0	0
Physical Restoration Services *	0	0
Preventive Services *	0	0
Prostheses, Orthotics, and Other Appliances *	0	0
Recreational Services *	0	0
Rehabilitation Technology Services *	0	0

Other IL Services	Consumers Requesting Services	Consumers Receiving Services
Therapeutic Treatment *	0	0
Transportation Services *	0	0
Youth/Transition Services *	1	1
Vocational Services *	0	0
Other Services *	0	0

4.2 I&R Information

* - Required field

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

Yes

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

ILA attends resource meetings in all 8 SW Iowa Counties to stay informed on all services and changes in services. ILA continues to look for new grants and trainings to assist individuals with services. CIL publications, brochures, newsletters, and forms are all available in alternate formats including languages other than English and Braille. The League maintains an accessible website. Consumers are encouraged to request needed alternate formats, and when alternate formats are requested, we provide them. We also provide an interpreter if that is needed or requested. Interpreter lists were updated and verified during this grant year.

4.3 Peer Relationships and Peer Role Models

* - Required field

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

The League of Human Dignity SW IA CIL has developed and promoted its Peer Mentoring program through informing the public through all outreach activities, by contacts with community agencies serving people with disabilities, through current consumers, and through other personal contacts. If Consumers and other people with disabilities are identified who are self-advocates, confident, and comfortable in their life situations, staff will ask them about participating in the peer mentoring program. If they agree, training is provided and they can be matched with a consumer who is interested in working with a peer.

Groups have been held that are structured to provide independent living information to consumers through the Living Well with a Disability and the Working Well with a Disability curriculum. These group settings provide the opportunity for peer support to occur with the guidance of an Independent Living Advisor. During these peer groups it is not uncommon for League Staff to invite a community support to give a presentation to our peer group to support our consumers with additional resources so they are better able to self-advocate. Fifteen consumers participated in peer support through this process during this grant year.

Because the League of Human Dignity employs a majority of people with disabilities, staff and consumers can also develop informal Peer Mentoring relationships. Additionally, staff has a good understanding of the value and importance of promoting these kinds of working relationships.

4.4 Increased Independence and Community Integration

* - Required field

Increased Independence and Community Integration

Significant Life Area	Goals Set	Goals Achieved	In Progress
Self-Advocacy/Self-Empowerment*	8	1	7
Communication*	1	0	1
Mobility/Transportation*	2	0	2

Significant Life Area	Goals Set	Goals Achieved	In Progress
Community-Based Living *	14	2	12
Educational *	2	0	2
Vocational *	2	1	1
Self-care *	1	0	1
Information Access/Technology *	0	0	0
Personal Resource Management *	1	0	1
Relocation from a Nursing Home or Institution to Community-Based LivingCommunity/Social Participation *	2	0	2
Community/Social Participation *	2	1	1
Other *	6	0	6

4.5 Improved Access To Transportation, Health Care Services, and Assistive Technology

* - Required field

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.

Improved Access To Transportation, Health Care Services, and Assistive Technology

Areas	# of Consumers Requiring Access	# of Consumers Achieving Access	# of Consumers Whose Access is in Progress
Transportation*	0	0	0
Health Care Services*	0	0	0
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 report that follow-up contacts with these consumers showed access to previously unavailable transportation, health care and assistive technology.

4.6 Self-Help and Self-Advocacy

* - Required field

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

Consumers who contact our office are informed that self-advocacy and self-help are one of our core services, by reviewing the information that is printed in our agency brochure or informing them in conversation. Our advocacy efforts consist of teaching or assisting consumers in learning self-advocacy skills. We have developed modules that include training materials on self-advocacy. These advocacy efforts result in consumers learning and applying skills that result in the consumers obtaining or maintaining their benefits and services or changing a service or program so it provides equal access to persons with disabilities.

The Living Well with a Disability and Working Well with a Disability groups we have conducted this year contain a module on advocacy. There were 12 consumers who participated in this class during this grant period. In addition in the next fiscal year, it is anticipated that over 30 additional consumers will take part in these groups.

The League of Human Dignity SW/IA CIL also has a certified ILA to facilitate Be Safe. Be Safe is an interactive program that supports individuals with disability interact with law enforcement in a positive way.

There is little doubt in the communities served by the League of Human Dignity SW/IA CIL that the CIL serves in an advocacy capacity. Many of the calls received under the service of Information and Referral are making contact to call upon the League's knowledge and work as advocates. All League contacts have a component of the provision or encouragement of self-advocacy.

4.7 Additional Information Concerning Individual Services or Achievements

* - Required field

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

One consumer we served, (DB), lived independently, however due to several medical conditions; surgeries decided living independently at this time was not an option for him. The ILA assisted this consumer in problem-solving. ILA worked with consumer to obtain needed medical equipment, apply for appropriate assistance programs, and assisted consumer is obtaining appropriate housing with family.

A female, (JE), required a ramp to be able to get safely into and out of her home in her power chair. She lived in a metropolitan community where funding is available to organizations to assist consumers with entry modifications. She was able to apply for funding through our office to obtain a home modification. Our office was able to assist her with obtaining needed funds, and hiring of a local contractor. The ramp was completed according to ADA standards.

A female, (CP), required a lift to be able to get safely into and out of her home in her wheel chair. She lived in a metropolitan community where funding is available to organizations to assist consumers with entry modifications. She was able to apply for funding through our office to obtain a home modification. Our office was able to assist her with obtaining needed funds, and hiring of a local contractor. The lift was completed according to ADA standards.

A male, (RR), required a bathroom modification to be able to shower safely and independently. He lived in a metropolitan community where funding is available to organizations to assist consumers with bathroom modifications. He was able to apply for funding through our office to obtain a home modification. Our office was able to assist him with obtaining needed funds, and hiring of a local contractor. The bathroom was completed according to ADA standards. Our office is currently working with this same consumer this fiscal year installing a lift in consumers home to increase his independence more

Section 5. Provision of Services

5.1 Compliance Indicator 2: Provision of Services on a Cross-Disability Basis * - Required field

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

The League of Human Dignity mandates through its policies that people with disabilities are served without regard to race, creed, national origin, religion, gender, gender identity, disability, age, or the ability to pay. Services are provided to eligible individuals from diverse cross disability groups. Accordingly we market our services to all individuals who experience disabilities, and to all organizations that serve people who experience cognitive, psychiatric, sensory, physical, sensory, and chemical sensitivity.

The League has provided services and supports to people experiencing a variety of disabilities as well as to the Latino population. This has included individual service provision, and support and educational groups that have been made up of people who experience different disabilities. Spanish and Sign Language Interpreter services were provided at the voter education event held at our SW Iowa CIL. The League also provided information on the services and supports available through the Center at the Latino Festival held in Council Bluffs, Carter Lake Health Fair held in Carter Lake, Congressman David Young Senior Expo held in Council Bluffs, Dr. Seuss Literacy Night held in Council Bluffs, The Wellness Bash

held in Council Bluffs, Shenandoah Back to School Event held in Shenandoah, and The Montgomery County Community Forum held in Clarinda. Sign Language Interpreters were provided for the Voter Education event held in September.

5.2 Alternative Formats

*** - Required field**

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

CIL publications, brochures, newsletters, and forms are all available in alternate formats including languages other than English and Braille. The League maintains an accessible website. Consumers are encouraged to request needed alternate formats, and when alternate formats are requested, we provide them. We also provide an interpreter if that is needed or requested. Interpreter lists were updated and verified during this grant year.

5.3 Equal Access

*** - Required field**

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

League of Human Dignity staff have promoted equal access by:

*Making sure all buildings and parking areas are accessible;

*Providing LHD publications, brochures, and forms are available in alternative formats, including Braille and languages other than English;

*Consumers may request special accommodations, and staff work diligently to accommodate the consumer based on her/his unique needs as prescribed by her/his disability;

*Consumers receive information verbally, in written, and/or in other formats as requested;

*The website is accessible;

*Staff travels to consumers' homes to provide services in both urban and rural areas:

*Interpreters are utilized whenever needed for communication with consumers who need ASL or a language other than English;

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

During the reporting year staff advocated on behalf of individuals with significant disabilities in the area of education, health care, acquisition of benefits/services, vocational services, housing, transportation, and by empowering consumers to be strong self and systems advocates, and by serving as advocates upon request of and behalf of consumers. CIL staffs have also promoted equal access by:

*Attend meetings and provided input to the IA State Wide Independent Living Council.

- *Participation in the IA Olmstead Consumer Task Force through meeting attendance and input during the public comment periods
- *Participation on the Human Services Advisory Council
- *Active involvement in the development of the State Independent Living Plan
- *Participation on the Human Services Advisory Council's transportation committee
- *Participation on the Iowa Transportation Coordination Council through the Iowa Department of Transportation
- *Participation on the Human Service Advisory Council Housing committee.
- *Participation in the Shelby County Human Service group.
- *Participation in the Montgomery County Human Service group
- *Participation in the Fremont County Human Service group
- *Participation in the Page County Human Service group
- *Working with the Legal Aid and Fair Housing to assist consumers to lodge accessibility complaints
- *Assist people with disabilities to apply for benefits, including disability benefits through Social Security and healthcare benefits through Medicaid and other insurance options they may be eligible for.
- *Promoting equal access on our Facebook page, on twitter, in all publications, and in provision of services and outreach to organizations/ businesses, schools, and churches

5.4 Consumer Information

* - Required field

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

At the time of intake, the League of Human Dignity mission, philosophy, and services are reviewed with each consumer in accordance with agency policies. Consumers know about their rights while receiving services, and are informed about how the League strives to protect consumers' privacy, by holding information about consumers and services provided in confidence.

Staff assists consumers to understand that they are in control of developing independent living goals, and the methods to achieve those goals. They know that they may choose to develop an ILP or waiver developing an ILP, and consumers are actively encouraged to take control of their own lives.

Consumers learn that their feedback regarding the quality of service provision is important and that consumer satisfaction is paramount.

Accordingly, each consumer is provided with a stamped, self-addressed Center for Independent Living comment card. Feedback regarding satisfaction may be given at any time while receiving services and at the end of service provision.

Comments were summarized, and presented to the CEO, board of directors, supervisors and the Independent Living Advisors. Comments are used to improve the quality of working relationships between consumers and Advisors, and to strengthen the quality of services offered in general at the League of Human Dignity.

Consumers are encouraged to contact Supervisors, Directors, the CEO, the Board of Directors, or the Client Assistance Program if they are not satisfied with the services they are receiving.

5.5 Consumer Service Record Requirements

* - Required field

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

The League has developed internal Independent Living services standards that are also inclusive of federal record keeping requirements. The League has also developed an internal quality assurance program that is designed to assure consistency of services across the League's entire service area. Standards have been developed to assure that Consumer Service Records are current and relevant to consumer needs. All Consumer Service Records are reviewed by the supervisor following intake. The staff responsible for the Consumer Service Record develops a Corrective Action Plan if necessary and makes corrections when needed. The CSR is reviewed again at the termination of services and filed with inactive cases in a locked filing cabinet for 3 years.

5.6 Community Activities

* - Required field

Issue Area	Activity Type	Hours Spent	Objective(s)	Outcome(s)
Other	Community Ed & Pub info	750	Produce bi-monthly newsletter that is distributed nationally.	Produced 6 newsletters for 310 subscribers for a total of 1859 original digital copies. Newsletter published through ema
Other	Community Ed & Pub Info	20	Produce Public Service Announcements to SW Iowa media outlets.	Produced 5 public service announcements and sent them to 5 SW Iowa media outlets.

Issue Area	Activity Type	Hours Spent	Objective(s)	Outcome(s)
Other	Community Ed & Pub infoma	15	Produce Facebook posts to provide consumers with alternate ways to receive information.	There were 39 Facebook posts during the reporting period which impacted SW Iowa.
Housing	Collaboration/Networking	2	To work on housing issues that affect people with disabilities	Attended 2 meetings of HSAC Housing Committee. Distributed housing information to the community, updated the Council Blu
Assistive Technology	Community Ed. and Public	100	To promote the use of equipment rental and loan program.	366 pieces of equipment were rented or loaned to persons with disabilities who had no other option (such as insurance) t
Other	Outreach	160.75	To educate citizens in SW Iowa of League of Human Dignity services and the independent living philosophy	Followed marketing plan targeting minority and unserved/underserved populations. Contacted agencies, businesses, church

Issue Area	Activity Type	Hours Spent	Objective(s)	Outcome(s)
Other	Collaboration/Networking	108	To improve access to and quality of services provided to people with disabilities in SW Iowa.	Provided input into a number of collaborative groups, including Human Services Advisory Council, IA SILC, ISAIL, Southwe
Other	Community/Systems Advocac	50	To increase voting and civic participation among citizens with disabilities in SW Iowa.	Held voting education event at the center. Center staff along with the County Auditor office (responsible for elections

5.7 Description of Community Activities

*** - Required field**

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

The League of Human Dignity (LHD) Public Information Specialist distributed information through various modes of communication to inform the public about LHD events, advocacy issues and news. Numerous hours were spent with public relations activities such as producing and publishing a bi-monthly newsletter that is distributed electronically. 5 public service announcements were sent to 5 southwest Iowa media outlets. There were 39 Facebook which impacted southwest Iowa. In addition we provided information on independent living philosophy and services on a radio

program "House Calls" broadcast on KMA 960 AM out of Shenandoah Iowa.

LHD continued to provide equipment rental, repair, and loan program to people with disabilities in SWIA. The program was promoted during outreach contacts, at networking meetings, and advertisements were placed in our newsletter to solicit donations for the program as well as to educate consumers about the availability of equipment. Due in part by our ability to purchase additional equipment this service continues to expand. 229 consumers were loaned or rented 366 pieces of equipment in 2017-2018.

The League of Human Dignity (LHD) SWIA CIL has been and will continue to work with the Iowa Statewide Independent Living Council (SILC), Iowa Statewide Association of Independent Living (ISAIL), Iowa Vocational Rehabilitation Services (IVRS), Iowa Department of the Blind and other community disability organizations to build a unified community of people with disabilities and advocates to bring change to Iowa. We are actively involved in identifying the barriers for Iowans with disabilities to live their life in the way they choose and where they choose.

LHD continues representation on numerous human service councils, including the Human Services Advisory Council (HSAC). We participate in monthly interagency meetings that cover service providers in all 8 counties (Pottawattamie, Page, Harrison, Fremont, Mills, Montgomery, Cass, and Shelby). We have found this to be a valuable way to connect with area agencies that serve people with disabilities that often result in referrals to LHD. In addition to the Interagency Councils and HSAC, LHD participates on the following task forces, coalitions, committees, and boards: HSAC Housing and transportation Committees, Iowa Disability and Aging Advocacy Network IDAAN, Southwest Iowa Networking Group (SWING), Children at Home (provides grants to children with disabilities), Henry K Peterson Foundation (provides grants to agencies that supports consumers with disabilities), Iowa Transportation Coordinating Council, Southwest Iowa ARDC advisory committee, Iowa State Association of Independent Living (ISAIL), Statewide Independent Living Council, and the Olmstead Consumer Task Force.

The Olmstead Consumer Taskforce has been active doing position papers, sending letters to legislators and policy makers, providing information on a number of issues including mental Health and Disability Services Redesign, Medicaid Managed Care, Home and Community Based Waiver Rent Subsidies, the Iowa Finance Authority LIHTC Qualified Allocation Plan.

The SWIA Center Director attends and participates in the SILC meetings.

LHD continues to educate citizens in SWIA of LHD services and the independent living philosophy, and providing information to area agencies and

businesses, churches, community centers, senior centers, and schools. There were at least 120 of these contacts made during 2017-2018. Contacts also were completed in the form of attending health fairs. We participated in the Latino Festival, Wellness Bash, Shenandoah Back to School Day, David Young Senior Expo, Dr. Seuss Night, Veterans Health Fair, Carter Lake Health Fair in 2017-2018.

LHD invites consumers with disabilities to special events throughout the year. Consumers and Stakeholders are invited to LHD in order to promote opportunities for socializing and obtaining information on available services. We also hold an annual volunteer recognition luncheon to recognize the numerous contributions of volunteers to our CIL and invite them to participate and attend the golf benefit event.

LHD completed one Advocacy training workshop this year. The CIL Director and Independent Living Advisor continue to look for consumers interested in systems advocacy. Consumers are given practical tools to help them advocate for themselves and others. Consumers are provided information regarding advocacy related to disability. The CIL director and ILA also attends the Legislative meetings sponsored by the Chamber of Commerce during the legislative session. LHD staff wrote letters to legislators to provide public comments on proposed legislation. Relationships are developed with the State, Federal and Local office holders who are kept informed of the needs identified by our consumers. Advocating for consumers that had issues with the transition of Iowa Medicaid to a managed care system was front and center this year. The Director attended more than 20 meetings with Iowa Medicaid, Managed Care companies and State Legislative representatives to assure that the concerns of our consumers were heard. We also informed consumers of these meetings and there were consumers who attended and advocated for their needs at numerous of these meetings.

LHD's Barrier Removal Program continued to provide services to consumers to make their home accessible and thus removing barriers which threatened their independence. In 2017-2018 the Barrier Removal Program succeeded in completing 3 projects.

LHD continues to work on maintaining and expanding current resource development. In 2017 we were awarded a City of Council Bluffs Community Development Block Grant in the amount of \$25,000 to supplement our Barrier Removal Program. We were awarded a small grant to conduct our voter education project held at the center. We were also awarded a small grant to expand our loan and rental program. We also received a small grant to expand our peer support program. We continue to look for other opportunities for funding of this program and others.

Transportation, or lack of it, continues to be an important issue for Consumers in SWIA. LHD staff regularly attends meetings with the Human Service Advisory Council Transportation Committee, South West Iowa Transit Authority, and Council Bluffs Special Transit Services in order to

provide feedback on services and advocate for changes that benefit people with disabilities. The center director continues to participate as a member of the Iowa Department of Transportation Coordination Council to assure transportation for people who experience disability receives state wide recognition.

LHD was able to collaborate with area businesses to promote the LHD mission and fundraise at the same time. The League of Human Dignity will continue to promote awareness and raise money with partnerships with businesses. Hy-Vee and Olive Garden donated to our golf event. We will continue to pursue these opportunities in the next year and approach new businesses with proposals to do similar fundraising with them.

Section 6. Annual Program and Financial Objectives * - Required field

6.1 Work Plan for the Reporting Year * - Required field

6.1.1 Achievements

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

Goal 1: The League of Human Dignity will comply with evaluation standards.

Objective 1: The League promoted self-help and self-advocacy with at least ten (10) consumers.

Achievements:

- Staff worked with consumers during intake and goal development to ensure that consumers are in control of identifying and setting all Independent Living Goals and the steps used to achieve those goals.
- Staff has informed consumers of their rights and documented as part of the intake process.
- Staff has informed consumers how to address possible grievances. This includes the agency grievance procedure and information about the Client Assistance Program process.

*Advocacy was the stated goal for eight consumers during the year.

*All 48 consumers who received Life Skills Training obtained some self-help and advocacy training.

Objective 2: League staff will continue to provide self-help through Independent Living Skills development and coaching with forty-six (46) consumers.

Achievements:

- Staff has provided coaching with 48 consumers to promote skill development.

Objective 3: League of Human Dignity staff will continue to promote the development of peer relationships for at least four (4) consumers.

Achievements:

- Mentoring and peer support did occur as a function of the Living Well with a Disability classes that were held as well as during the Advocacy training class. Twelve consumers participated in these activities.

Objective 4: The League of Human Dignity will continue to ensure equal access to center services, programs, activities, resources, and facilities regardless of funding sources.

Achievements:

- All League of Human Dignity publications, brochures, and forms continue to be available in alternate formats, including other languages and Braille.
- All League of Human Dignity buildings continue to be accessible.

*Interpreter services were provided to consumers who required or requested the service.

Objective 5: The League of Human Dignity will continue to mandate through policies and procedures that people with disabilities be served without regard to race, creed, national origin, religion, gender, disability, age, or the ability to pay.

Achievements:

- Services were provided to all eligible individuals from cross disability groups.
- Staff has ensured that consumers understand that they are in control of developing independent living goals, and the methods to achieve those goals.
- League of Human Dignity Policy and Procedures continue to mandate that people with disabilities be served without regard to race, Creed, national origin, religion, gender, disability, age or the ability to pay.

Objective 6: Consumers will be afforded the opportunity to express satisfaction with services.

Achievements:

- Consumers have received stamped, addressed satisfaction/comment cards at the time of intake, periodically during his/her working association, and at the end of service delivery.
- Responses have been presented to the CEO, Board of Directors, Directors, Supervisors, and direct service staff...

Objective 7: League of Human Dignity staff will maintain a Consumer Service Record for all eligible/active people.

Achievements:

- Records are maintained in hard cover binders.
- Records are stored in secure locations.
- CSR's are divided into the following sections: Demographics, Assessment, Eligibility/Waiver, Intake, Contacts, Independent Living Plan, Fee Agreement, Release of Information, and Correspondence.

*information has been entered in CIL manager at least monthly as documented through supervisory review.

6.1.2 Challenges

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

The SWIA CIL received a resignation of an ILA and lost their former Director due to death left the SWIA CIL short staff for part of this funding cycle. A reorganization of staff that included two part time Senior Employment persons to answer the phone 40 hours a week, and changing the job classification of the secretary to a half time manager and a half time Outreach Coordinator has resulted in our being able to increase our direct service time. A full-time ILA was hired, as was a Director for the SWIA CIL. Southwest Iowa receives calls and requests for service in the counties surrounding our service area. These counties include: Calhoun, Crawford, Carroll, Greene, Guthrie, Adair, Adams and Taylor. Iowa CIL's cover only 1/3 of the state (30 out of 99 counties). The League continues to provide training for staff to assist them in providing quality services to consumers.

6.1.3 Comparison with Prior Reporting Year

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

Our organization has increased the number of peer support opportunities over last year bringing in presenters from the community with topics ranging from legal, financial and medical rights. There was also a continued increase in the usage of our equipment rental and loan program. This resulted from a combination of our ability to purchase additional equipment, expanding efforts to obtain donations of used equipment and our collaboration with community agencies that often have first contact with people who need the equipment resulting in them referring the consumers to us for service. We have placed a heavier focus on promoting awareness about our organization and our services in these specific areas: housing, transportation, peer to peer relationships, independent living skills training, outreach and youth and nursing home transition. Our ability to reach consumers through providing Living Well With A Disability classes has resulted in an increase in service provision in all areas. We also have significantly focused more in the area of resource development. Our efforts to collaborate with potential fee for service partners in the community has resulted in a single case agreement with a managed care organization and has resulted in the initiation of conversation on how ongoing relationships with these companies can provide quality service as to the consumers we work with.

6.2 Work Plan for the Year Following the Reporting Year

* - Required field

6.2.1 Annual Work Plan

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

Goal 1: The League of Human Dignity will continue to provide services to people with disabilities living in the eight counties that comprise the Center's service delivery area. (Pottawattamie, Shelby, Harrison, Page, Montgomery, Mills, Cass, and Fremont.)

Objective 1: League staff will collaborate with Five (5) consumers to improve and/or learn the skills to be self and/or systems change advocates.

Objective 2: The League of Human Dignity will continue to work on housing issues.

Objective 3: The League of Human Dignity will continue to work on systems change projects which aim to change disability support services in ways both large and small, so that users of these services have real, empowering choices to make about the types of services they receive.

Objective 4: The League of Human Dignity has continued to advocate with transportation providers to make transportation costs affordable for people with disabilities.

Objective 5: The League of Human Dignity will continue its Barrier Removal Programs for people experiencing disabilities. The program will assess the need for, and assist in the removal, and/or modification of accessibility barriers in the residences of low and moderate income families. Two to Four (2-4) Barrier Removal Program Projects will be completed.

Objective 6: The League will provide Information and Referral to Nine Hundred (900) individuals.

Objective 7: Two (2) individuals will receive Personal Assistance referral services and/or Personal Assistance Management Training.

Objective 8: Ten (10) people will receive Social and Recreational Information, and referrals.

Objective 9: One Hundred pieces of equipment will be sent out of the agency through equipment loan and rental services.

Objective 10: Two (2) Individuals will access Interpreter services.

Objective 11: Fifteen people will participate in Independent Living Skills Training.

Objective 12: Pre-employment skills training will be conducted.

Objective 13: Living Well with a Disability Training will be conducted.

Objective 14: The League of Human Dignity will issue newsletters Six (6) times next year, engage in Public Awareness activities and in providing information to educate people about Independent Living Philosophy and the League mission and services.

Objective 15: The League of Human Dignity will engage in outreach activities.

Goal 2: The League of Human Dignity will conduct resource development activities.

Objective 1: Staff will generate \$30,000 through resource development activities.

Goal 3: The League of Human Dignity will provide training to staff and the Board of Directors.

Objective 1: Staff will be given opportunities to receive training that is determined to be pertinent to job function and/or will help staff meet their identified plan for professional growth.

Goal 4: Ensure quality service delivery.

Objective 1: Staff will participate in the League of Human Dignity's Quality Assurance program.

6.2.2 SPIL Consistency

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

The LHD CEO and the SWIA CIL Director participates and provides input regarding services and needs to the SILC as well as being actively involved in the development of the SPIL. LHD goals are consistent with the State Plan for Independent Living. The SPIL and the SWIA CIL activities both maintain the same IL philosophy. Specifically, the SPIL states they will: “support the philosophy that IL services are provided in a consumer controlled and directed environment for all disability groups. The term IL service is intended to include, but not be limited to, peer counseling, advocacy, IL skills training, information and referral, youth and nursing facility transition and other services as necessary to promote increased independence among Iowa’s disability community.” This statement alone shows consistency between the five(5) core services of the SWIA-CIL and how we provide services to consumers. The League however chose not to sign the new SPIL developed by the SILC this year. It is our belief that some of the documentation used in the SPIL regarding the need for additional resources and how they would be used was not accurately stated and limited the flexibility of the League to utilize resources in a way that it deemed most appropriate to meet the needs of consumers. We also believe that changes made to the SPIL prior to its approval should have resulted in additional public input sessions.

Section 7. Other Accomplishments, Activities and Challenges

* - Required field

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

Barriers continue to be created when we attempt to provide consumers in nursing facilities with information regarding community living. We have been somewhat successful getting nursing homes to provide us access to consumers when we have approached the activity directors about the benefits of the Living Well with a Disability curriculum. We are concerned about the manner in which nursing facilities are notifying their consumers about the community options available to them. We have approached the Medicaid managed care organizations and requested they they provide access to those consumers who they provide coverage and who would like to work with us to explore community options. Their receptivity to this concept is positive but has yet to result in any activity that will advance this cause.

Section 8. Training and Technical Assistance

8.1 Training and Technical Assistance Needs

* - Required field

Training And Technical Assistance Needs	Choose up to 10 Priority Needs - Rate items 1-10 with 1 being most important
Advocacy/Leadership Development	
General Overview	
Community/Grassroots Organizing	
Individual Empowerment	
Systems Advocacy	5
Legislative Process	
Applicable Laws	
General overview and promulgation of various disability laws	
Americans with Disabilities Act	
Air-Carrier's Access Act	

Training And Technical Assistance Needs	Choose up to 10 Priority Needs - Rate items 1-10 with 1 being most important
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	
Workforce Investment Act of 1998	
Ticket to Work and Work Incentives Improvement Act of 1999	
Government Performance Results Act of 1993	
Assistive Technologies	
General Overview	
Data Collecting and Reporting	
General Overview	
704 Reports	
Performance Measures contained in 704 Report	
Dual Reporting Requirements	

Training And Technical Assistance Needs	Choose up to 10 Priority Needs - Rate items 1-10 with 1 being most important
Case Service Record Documentation	
Disability Awareness and Information	
Specific Issues	
Evaluation	
General Overview	
CIL Standards and Indicators	
Community Needs Assessment	
Consumer Satisfaction Surveys	
Focus Groups	
Outcome Measures	
Financial: Grant Management	
General Overview	
Federal Regulations	
Budgeting	
Fund Accounting	
Financial: Resource Development	
General Overview	

Training And Technical Assistance Needs	Choose up to 10 Priority Needs - Rate items 1-10 with 1 being most important
Diversification of Funding Base	2
Fee-for-Service Approaches	1
For Profit Subsidiaries	
Fund-Raising Events of Statewide Campaigns	
Grant Writing	
Independent Living Philosophy	
General Overview	
Innovative Programs	
Best Practices	7
Specific Examples	
Management Information Systems	
Computer Skills	
Software	
Networking Strategies	
General Overview	

Training And Technical Assistance Needs	Choose up to 10 Priority Needs - Rate items 1-10 with 1 being most important
Electronic	10
Among CILs & SILCs	
Community Partners	
Program Planning	
General Overview of Program Management and Staff Development	
CIL Executive Directorship Skills Building	
Conflict Management and Alternative Dispute Resolution	
First-Line CIL Supervisor Skills Building	
IL Skills Modules	
Peer Mentoring	9
Program Design	
Time Management	
Team Building	
Outreach to Unserved/Underserved Populations	
General Overview	

Training And Technical Assistance Needs	Choose up to 10 Priority Needs - Rate items 1-10 with 1 being most important
Disability	
Minority	8
Institutionalized Potential Consumers	3
Rural	4
Urban	
SILC Roles/Relationship to CILs	
General Overview	
Development of State Plan for Independent Living	
Implementation (monitor & review) of SPIL	
Public Meetings	
Role and Responsibilities of Executive Board	
Role and Responsibilities of General Members	
Collaborations with In-State Stakeholders	
CIL Board of Directors	
General Overview	
Roles and Responsibilities	

Training And Technical Assistance Needs	Choose up to 10 Priority Needs - Rate items 1-10 with 1 being most important
Policy Development	
Recruiting/Increasing Involvement	
Volunteer Programs	
General Overview	
Optional Areas and/or Comments (write-in)	

8.2 Additional Information

* - Required field

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

The LHD CEO and the SWIA CIL Director participates and provided input regarding services and needs to the SILC as well as being actively involved in the development of the SPIL. LHD goals are consistent with the State Plan for Independent Living. The SPIL and the SWIA CIL activities both maintain the same IL philosophy. Specifically, the SPIL states they will: "support the philosophy that IL services are provided in a consumer controlled and directed environment for all disability groups. The term IL service is intended to include, but not be limited to: peer counseling, advocacy, IL skills training, information and referral, youth and nursing facility transition and other services as necessary to promote increased independence among Iowan's disability community. " This statement shows consistency between the five (5) core services of the SWIA-CIL and how we provide services to consumers.

We also collaborate and interact with the key players for the SILC, including the five (5) other CIL's in Iowa, the Iowa Department of the Blind, The Iowa Division of Vocational Rehabilitation, the Iowa Department of aging and the Client Assistance Program.

Section 9. Signatures

* - Required input

NAME OF EXECUTIVE DIRECTOR* Kathy Kay, Co-CEO/John Wollen, Chairman, Board of Directors

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

As the Executive Director, I certify that the Board has reviewed and given approval for submission of this report. : true