

New York State Office of Adult Career  
and Continuing Education Services  
Vocational Rehabilitation (ACCES-VR)  
Independent Living Services  
Administration

Centers for Independent Living

Standards, Performance Report  
and Data Collection Guide

Updated

October, 2015

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## General Instructions

### WHO MUST COMPLETE THE REPORT AND WHERE AND WHEN MUST IT BE SUBMITTED?

This report addresses compliance with the New York State Education Law sections 1121 - 1124 regarding Centers for Independent Living (CIL). It also serves to report data reflecting results of contract activities for the previous year.

The NYS CIL End of Year Report must be completed by Centers for Independent Living that receive New York State Aid to Localities funding. Also, centers are required to complete a Mid Year Report. Title VII, Part C-funded centers must complete a separate Federal Centers for Independent Living 704 Annual Performance Report in addition to this State report.

The NYS CIL End of Year Report is due to ACCES-VR on or before October 30 of each contract year. The Mid Year Report is due to ACCES-VR on or before April 30 of each contract year. The reports are to be submitted electronically as follows:

The End of Year Report Part 1: Program Performance Report and the Mid Year Report Part 1: Program Performance Report narratives are to be submitted as an MS Word document that is attached to an email sent to Robert Gumson, Manager of Independent Living Services at [Robert.Gumson@nysed.gov](mailto:Robert.Gumson@nysed.gov).

The End of Year and Mid Year Reports Part 2: Direct Services and Statistical Report are to be submitted via the CIL web based data reporting system, which can be accessed at the NYS Education Department website at <http://www.forms2.nysed.gov/vr/cil.cfm>.

If there are any attachments for the Program Performance Report (such as documentation of systems change achievements), they are to be submitted electronically either inserted at the end of the report or attached to an email. It is **NOT** necessary to submit a hard copy of the narrative report or any attachments.

Technical assistance with report preparation is available through the ACCES-VR Independent Living Services Unit by contacting Fred Ayers, Independent Living Specialist, either by telephone at (518) 474-2925 or email at [Fred.Ayers@nysed.gov](mailto:Fred.Ayers@nysed.gov).

**PURPOSE OF THE REPORT**

The purpose of this report is to:

- A. Serve as a performance measuring instrument of independent living (IL) programs and services, through both quantitative and qualitative measures;
- B. Determine the training and technical assistance needs of Centers for Independent Living, ACCES-VR and network partners will communicate statewide training needs to national training resources and develop statewide strategies to meet identified needs;
- C. Collect the data required by ACCES-VR for the State Independent Living Services and the Centers for Independent Living programs; and,
- D. Serve as the basis for on-site monitoring and reviews of New York State Centers for Independent Living.

**The report is structured to:**

- A. Establish a uniform reporting system to compile an accurate state report on independent living programs and services;
- B. Provide a performance based, program specific report that demonstrates sufficient performance outcomes to process contract renewals for grantees.

## Glossary of Terms

### Center for Independent Living

A Center for Independent Living (CIL) meeting the definition in Section 1121-1124 of the New York State Education Law as a community-based, non-residential, and not-for-profit organization whose governing board is composed of at least 51% people with disabilities and which serves the needs of people with disabilities.

### Community and Systems Advocacy

Activities to affect permanent change to policies, practices, decisions and environments in the public and/or private sector that control resources necessary to enhance integration, inclusion, and independence of people with disabilities as a group.

**Consumer** Anyone receiving services from a CIL including people with disabilities and non-disabled individuals. Non-disabled individuals include the disabled person's family members or significant others and people from businesses, agencies and governments.

- A consumer with a disability who receives services on a frequent or ongoing basis is required to establish a Consumer Service Record (CSR).
- A non-disabled consumer who receives services on a frequent or ongoing basis is not required to establish a CSR but must have a file with basic tracking information and pertinent documents.
- A consumer with or without a disability who receives services on a one-time or infrequent basis is not required to establish a CSR but must provide contact information. These individuals have been referred to as "casual" consumers. While they typically receive Information and Referral (I&R) services, casual consumers can also receive any other independent living service(s) on a one-time or infrequent basis.

### Consumer Service Record

A Consumer Service Record (CSR) is maintained for an individual with a disability (does not include family members, significant others, agencies, businesses, governments, etc.) receiving independent living services. A Consumer Service Record needs to only be established for individuals who receive frequent or ongoing services from the CIL. The following information is maintained in each CSR:

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- Annually updated age, education status and employment status data from intake/consumer profile forms
- A single document describing the rights and responsibilities as a consumer of the CIL that:
  - Is signed by the consumer and dated
  - acknowledges consumer right to confidentiality
  - acknowledges and describes internal CIL grievance process that ends with the Board of Directors
  - acknowledges the availability of ACCES-VR with a contact office, person, address, and phone number for addressing consumer complaints about CIL services

NOTE: Use of a separate signature form for a consumer to acknowledge receipt of an information packet that includes a rights and responsibilities document in lieu of the consumer signing a rights and responsibilities document is prohibited.

- A record of specific services provided that includes:
  - Specific services received
  - Dates of service contact
  - Referrals made on behalf of consumers (either written or other formal referrals)
- A general purpose release of information form, when indicated, that contains appropriate legal information and is signed and dated by the consumer within 120 days.
- A special purpose release of information form, when necessary, that authorizes ACCES-VR to review Consumer Service Records (CSRs). It is signed and dated by the consumer at the time of the CSR review and is time limited. The ACCES-VR Model Consumer Release Form is available at the ACCES-VR website in the ILC Toolbox under Contract Development at <http://www.acces.nysed.gov/vr/independent-living-centers-toolbox-service-providers>.

For information on reporting "casual" consumers who receive Information and Referral (I&R) services, see the NYS CIL Standards, Performance Report and Data Collection Guide, Part 2. Direct Services and Statistical Report, section IV. Individual Services. Unduplicated counts of "casual" consumers who receive any other independent living service that include name, service received, service date, and staff member initials should be maintained for inclusion in the CIL's reports of individuals receiving services.

Non-disabled consumers and businesses will not require a CSR or be counted within demographic data reported. Basic tracking information of non-disabled consumers including name, address, phone number, service received and other pertinent documentation must be maintained in

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a file in order to include an unduplicated count of such consumers in the CIL's reports of individuals receiving services and total consumers served and in the quality and customer satisfaction measurements.

### **CSR Returning**

Previously completed Consumer Service Record (CSR) counted in a prior reporting year by an ILC as one of the CSRs served and the individual has returned for service in a subsequent, not necessarily the following, reporting year. May be counted in each reporting year the person returns for services.

### **CSRs Started (new)**

A Consumer Service Record (CSR) can be counted as new only once during a reporting year, and may never be counted as new in any future reporting year.

### **Independent Living**

Independent Living (IL) is a non-medical, non-residential, self-help, program model of advocacy and support services, for people with all disabilities of all ages. Agencies subscribing to this model, are governed by a majority of people with disabilities; use a nondirective peer approach to providing services in a supportive and informal environment; provide freedom to consumers to pursue their own dreams; expect and assist consumers to fully experience, accept and learn from the results of their own actions; emphasize community-change advocacy to increase the full integration of people with disabilities in all aspects of community life; and promote a positive view of disability at all times.

### **Independent Living Services**

Services that may be provided by CILs under NYS law which are consistent with the Independent Living Program Model. For an ACCES-VR approved list of services with definitions, refer to the CIL Standards, Performance Report and Data Collection Guide, Part 2: Direct Services and Statistical Report, section IV. Individual Services.

It is not required that a CIL provide all of the services on the approved list of services or only the services listed, but any program of service supported with funds other than those provided by ACCES-VR must be captured using one of the approved independent living service categories most closely and consistently representing the approved service definitions. Also, a

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CIL is required to provide, at a minimum, the following core services: legal/advocacy, systems advocacy, housing assistance, information and referral, independent living skills development and life skills, peer counseling, and benefits assistance.

### Milestone Toward Systems Change

A milestone toward systems change is a "significant" step in the work plan to achieve a result that is absolutely necessary to achieve the outcome. One example would involve the passage of State legislation. If a legislator has voiced opposition to legislation and his/her support is key to its passage and activities undertaken by the CIL lead to his/her change of position by signing onto the legislation, then a milestone has occurred. When the Governor signs the bill into law, a CIL can be credited for system change. ACCES-VR reserves the right to review and determine the extent of a centers' contribution to the achievement of a milestone for systems change.

### Minority Groups

Alaskan Natives, American Indians, Asian Americans, Black (African Americans), Hispanic Americans, Native Hawaiians, and Pacific Islanders.

**Outreach** Outreach activities are necessary to maintain equitable distribution of services across all components of community demographics. Outreach activities are required to ensure that the Racial/Ethnic demographic characteristics of a CIL's consumers are consistent with the Racial/Ethnic demographics of the community the CIL serves.

### Pass Through Funds

Any funds that a service provider receives on behalf of a consumer that are either directly passed on to the consumer by the provider or are expended on behalf of the consumer by the provider for a specific use expressly designated by the funding source (e.g., representative payee funds, Medicaid, or state personal assistance services funds). For example, if a personal care attendant contract stipulates that 20% of the funding must be used to provide a specific number of hours of personal care attendant services for consumers, that 20% would represent pass through funds. The service provider pays the attendant on behalf of the consumer (who, in turn, may be responsible for hiring and supervising the attendant).

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A center should report any pass through funds received when preparing the ACCES-VR Revenue and Funding Sources Form based on the prior fiscal year that is submitted each contract year as an attachment to the end of year report. The form is available online at the ACCES-VR website in the ILC Toolbox under Contract Development at <http://www.acces.nysed.gov/vr/independent-living-centers-toolbox-service-providers>.

### Race and Ethnicity

1. American Indian or Alaska Native - a person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
2. Asian - a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, Philippine Islands, Thailand, and Vietnam.
3. Black or African American - a person having origins in any of the black racial groups of Africa. Terms such as "Haitian" may be used.
4. Native Hawaiian or Other Pacific Islander - a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
5. White - a person having origins in any of the original peoples of Europe, the Middle East or North Africa.
6. Hispanic/Latino of any race or Hispanic/Latino only - a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. Any consumer who reports Hispanic/Latino ethnicity can only be counted as "Hispanic/Latino," even if the consumer also reported one or more race categories.
7. Two or more races - If a consumer self-reports more than one race, that consumer must be counted once as Two or More Races.
8. Unknown - A consumer is counted as Unknown if the consumer does not report any race or ethnicity.

### Reporting Year

The most recent State Fiscal Contract Year. Contract year is October 1 - September 30.

State Wherever the term "State" is used, it refers to New York State in its sovereign sense.

### Systems Change

Permanent change to policies, practices, decisions and environments in the public and/or private sector that

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control resources necessary to enhance integration, inclusion, and independence of people with disabilities as a group.

Credit for systems change is granted for achievements in New York State. Generally, credit cannot be granted for work outside of the State since it is considered technical assistance to the community. Systems change credit can only be given for accomplishments outside of New York State when a center is active in a national CIL effort that results in the passage and signing into law of Federal legislation.

### Unserved and Underserved Populations

Populations identified in the current State Plan for Independent Living (SPIL) Part II. Narrative are acceptable as identified groups.

**Veteran** An individual who has served in the military as a member of the United States armed forces.

## Part 1: Instructions for Program Performance Report

The NYS Centers for Independent Living are required to submit a Mid Year Report and an End Year Report to ACCES-VR each contract year. The End of Year Report is cumulative. Systems change activities reported and any attachments provided for the Mid Year Report should also be submitted with the End of Year Report. All attachments should be referenced in the body of the report but included electronically at the end under the Attachments section.

### I. Community and Systems Change Activities and Outcomes

ACCES-VR's review and findings will be based on information provided in the report. Centers will not be contacted to submit additional information in order to clarify or confirm systems change was achieved. It is a center's responsibility to provide accurate and complete information to clearly demonstrate that systems change occurred.

The report should be prepared as follows:

- Count all systems change activity from all funding sources.
- List all goals exactly as stated in the approved contract under I. Community and Systems Advocacy Plan in each of the six systems advocacy categories A. through F.
- Provide a bulleted list describing the activities that were conducted toward achieving the stated goal.
- Provide a concise and detailed description of the outcome.
- Include the activity and outcome for a goal that was not stated in the contract but added during the contract year. Identify it as "NEW" at the beginning of the goal statement.
- Be clear to delineate activities from outcomes and milestones of systems change.
- Be clear to specify who started the process that resulted in an outcome, as this can be a factor in determining whether it is considered to be technical assistance or systems change. For instance, an outcome resulting from a CIL first contacting an organization to address issues raised by a consumer or the CIL is considered systems change, while an outcome resulting from an organization first contacting a CIL to request help to improve its access is considered technical assistance.
- The issues being addressed and the system being changed will govern in which advocacy category activities, outcomes and milestones are placed. For example, efforts to change public transportation system would be characterized as a Commerce outcome, while work toward improving transportation specifically for seniors to attend a social event would be characterized as a Social outcome.
- Distinguish between outcome achievements for the report period and updates on outcomes accomplished in a prior report period, as systems change credit cannot be granted a second time for

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refinements or maintenance to a previously credited outcome.

Reference the NYS CIL Standards, Appendix B Examples of Community and Systems Change for further clarification on measuring outcomes.

Documentation will be required by ACCES-VR on a case by case basis. The type and scope of documentation requested could vary depending upon the advocacy area or type of outcome. Well described steps taken to achieve an outcome should be noted under the reporting of "activities". Improving access in the business community, educational facilities and elsewhere should be described in detail. Outcomes should be supported with documentation such as: if a curriculum developed by the CIL was added into a training model then it should be attached, if a new committee or task force gained representation of a CIL staff member or consumer then an appointment letter or minutes of a meeting should be attached, and if legislation was passed through a bill or proclamation then the detailed extent of CIL involvement should be attached along with a summary of the bill or proclamation.

Centers for Independent Living must achieve one systems change outcome in at least three of the six systems advocacy categories A. through F. in the contract year. If systems change is not achieved in three required systems advocacy categories, a program improvement plan (PIP) must be submitted to ACCES-VR for continued funding within 30 days following the unacceptable performance finding to improve system change advocacy strategies. For information on submitting a PIP, see the NYS CIL Standards, Performance Report and Data Collection Guide, Part 3. Instructions for Attachments.

Category G., Other Community and Systems Change Issues, has been added for your convenience and is optional. No outcomes achieved under G. can be counted as part of the three outcomes required by the contract between the center and ACCES-VR.

Given below are examples of activities that can lead to systems change and types of outcomes that could be achieved in each of the six systems advocacy categories A. through F.

Activities Leading to Community and Systems Change: May encompass but are not limited to:

- Issue oriented education
- Coalition building
- Alternative solutions framed and presented
- Legal action coordinated
- Public displays of contrary opinion
- Group education presented to the public at large
- Lawful direct action
- Targeted public relations campaign
- Coordination of group testimony and opinion

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- Promulgation of legislative action

Systems Change Outcome Categories Applied to Individual Independent Living System Advocacy Efforts: May encompass but are not limited to:

- Adoption of a new policy or procedure
- Adoption of legislation, guidelines, regulations
- A new service or program in the community
- Addition or change to information disseminated
- Removal of architectural, programmatic or communication barriers to services and programs
- Change in the distribution of funding or resource allocation
- Increase in empowerment, authority and control by people with disabilities as a group
- Increase in group social, economic, political or spiritual autonomy
- Elimination of segregated, separate, unequal or stigmatizing policies, programs or services
- Prevention of the adoption of an adverse policy or procedure
- Prevention of the adoption of contrary legislation, guidelines, regulations

### A. Education

Educational Advocacy: Includes efforts to influence positive change to systems that control resources associated with increased access to training, education and learning experiences across the life span for people with disabilities as a group.

These systems include but are not limited to:

- Preschool, nursery school and day care programs
- Elementary, middle, secondary and continuing education programs
- College, universities, technical schools and trade programs
- Adult education, technology and business training

### B. Employment

Employment Advocacy: Includes efforts to influence positive change to systems that control resources that are necessary to facilitate increased access to competitive and integrated employment opportunities for people with disabilities as a group.

These systems include but are not limited to:

- Employment and job placement agencies
- Labor offices, unions, business councils
- Private and public human resource offices
- Public and private rehabilitation and vocational programs
- Economic development programs
- Workforce development programs (e.g., one-stop employment centers)

**C. Health Care**

Health Care Advocacy: Includes efforts to influence positive change to systems that control resources necessary to promote health and wellness of people with disabilities as a group.

These systems include but are not limited to:

- Medical and paramedical associations
- Health care institutions such as hospitals, clinics, skilled nursing facilities, doctors offices
- Health care management organizations and health insurance providers
- Disability prevention and health promotion programs
- Employee assistance programs, substance abuse programs domestic violence programs
- Nutrition, dietary, food pantry
- Shelters, therapeutic recreation and rehabilitation medicine programs
- Continuum of community based home care and Medicaid Waiver services

**D. Commerce**

Commerce Advocacy: Includes efforts to influence positive change to systems that control the resources necessary to engage in economic and marketplace activities by people with disabilities as a group.

These systems include but are not limited to:

- Housing such as real estate dealers, private and public housing stock, adult retirement communities, private development and management corporations
- Transportation such as trains, airplanes, buses, taxis, car services, automobile rental services, tour bus lines
- Private and public business entities such as restaurants, banks, libraries, hotels, catering halls, cinemas, retail shops, etc.
- Public service entities such as state and local governments, courts, and law enforcement

**E. Social**

Social Advocacy: Includes efforts to influence positive change to systems that control the resources necessary to engage in integrated and community based social, recreational and leisure pursuits by people with disabilities as a group.

These systems include but are not limited to:

- Parks, camping facilities, fitness trails
- Sports arenas, health spas, concert halls
- Amusement parks, sports clubs, social clubs, camps, theater groups, beaches, swimming facilities

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- 12 Step meetings
- Fishing and marina facilities
- Places of worship

### F. Citizenship

Citizenship Advocacy: Includes efforts to influence positive change to systems that control the resources necessary to participate fully in the conduct of civic responsibilities and opportunities for people with disabilities as a group.

These systems include but are not limited to:

- Voting sites
- Polling sites
- Public meeting locations
- Public committees, work groups, boards and task forces
- Political campaigns, public forums

### G. Other Community and Systems Change Issues (optional)

Include other activities which had an impact on the community but which may not be covered by one of the preceding categories.

## II. Outreach

Provide a comparison of racial/ethnic demographic data collected on consumers with a Consumer Service Record (CSR) served in the report year to data from the most recent US Census Bureau American Community Survey (ACS) local/county racial/ethnic census for the general population to demonstrate the center's efforts to proportionately serve the community. A difference of CSR data between 1% and 5% below the census data is reasonable and acceptable. A difference of CSR data 6% or more below the census data for any of the unserved or underserved populations is not acceptable. If the CSR racial/ethnic data is disproportionate to the racial/ethnic census data, the center should describe its efforts to increase outreach to the indicated population(s) during the next report period. If the discrepancy in the CSR and census data is not acknowledged and addressed, a program improvement plan (PIP) must be submitted within 30 days following the unacceptable performance finding to increase community outreach. See End of Year Report, Part 1: Program Performance Report, section II. Outreach for instructions to access and use the online American Community Survey. For information on submitting a program improvement plan, see the NYS CIL Standards, Performance Report and Data Collection Guide, Part 3: Instructions for Attachments.

The comparison of the CSR racial/ethnic demographics to the census racial/ethnic demographics is to be done using both numbers and percentages. The data comparison is to be presented in a table along with a narrative. A table makes it easier to

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compare the CSR data with the most recent census data and readily identify any discrepancy. The narrative is used to discuss the data given in the table and describe the steps the center will take to remedy an identified discrepancy.

If it is deemed necessary to outreach to unserved or underserved groups, identify the groups and describe steps taken. If additional funds are required to implement a PIP, the center may request a budget modification for its existing ACCES-VR funds or the center must make a good faith effort to secure the additional funds from sources other than ACCES-VR.

### **III. Impact Data**

To establish the impact of ILCs, ACCES-VR is conducting an analysis of deinstitutionalization cost savings and consumer employment wages. The collection of deinstitutionalization cost savings data and wage data is a requirement and a performance measure. Information on the reporting of impact data is available at the ACCES-VR website in the ILC Toolbox under Impact Data at <http://www.acces.nysed.gov/vr/independent-living-centers-toolbox-service-providers>.

#### **A. Deinstitutionalization Cost Savings**

All CILs are required to report results of assistance provided to consumers to prevent an institutional placement or to transition from an institutional setting to integrated community settings using the ACCES-VR approved statewide cost benefit reporting model. The CIL Deinstitutionalization Cost Savings Report Summary must be submitted as an electronic attachment to the End of Year Report. ACCES-VR updates its cost benefit analysis of assistance provided to consumers to avoid or leave an institutional placement once a year at the end of each contract period. See instructions for completing the End of Year Report for more detailed information on submitting this report.

#### **B. CIL Consumer Employment Wages**

All CILs are required to report results of assistance provided to consumers to obtain competitive employment. Centers will report wage data using the ACCES-VR approved statewide wage reporting model. ACCES-VR updates its analysis of assistance provided to consumers to earn competitive wages in the community once a year at the end of each contract period. The CIL Consumer Employment Data Report Summary must be submitted as an electronic attachment to the end of year report. See instructions for completing the End of Year Report for more detailed information on submitting this report.

### **IV. Instructions for Self-Evaluation with NYS Standards**

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The purpose of the self-evaluation is to assist the center to assess its compliance with New York State Education Department contractual obligation and New York State Education Law Section 1121 - 1124. The self-evaluation survey must be submitted annually as part of the End of Year Report.

The items appearing in this section are requirements reflecting essential elements that a center must meet to comply with the statutory definition and operation of a Center for Independent Living (CIL) and to be eligible for continuation funding.

This section provides guidance against which a CIL should review its activities to determine compliance with the requirements in the event of an onsite compliance review. If the CIL does identify problems, a program improvement plan (PIP) must be submitted within 30 days following the unacceptable performance finding to remedy the problems. For information on submitting a program improvement plan, see the NYS CIL Standards, Performance Report and Data Collection Guide, Part 3: Instructions for Attachments.

The self-evaluation survey form is in the NYS CIL Standards, End of Year Report, Part 1: Program Performance Report, section IV. Self-Evaluation with NYS Standards.

The self-evaluation survey includes the following items:

Standard 1 - Technical Assistance to the Community  
(Education/Awareness)

Standard 2 - Public Relations

Standard 3 - Staff and Board of Directors Training

Standard 4 - Determination of Community Need/Consumer  
Involvement in Center's Mission and Philosophy

Standard 5 - Training and Technical Assistance Needs

Standard 6 - Strategic Planning and Program Development

Standard 7 - Consumer Control

Standard 8 - Equal Access

Standard 9 - Consumer Service Record

## Part 2: Instructions for Direct Services and Statistical Report

Count all statistical data from all funding sources.

The End of Year and Mid Year Part 2: Direct Services and Statistical Reports are to be submitted via the CIL web based data reporting system that can be accessed at the NYS Education Department website at <http://www.forms2.nysed.gov/vr/cil.cfm>.

When submitting the data report, it is not necessary to provide documentation. However, centers are required to maintain for verification purposes the individual consumer data the report is based on. Documentation will be required on a center by center basis to assure that data is reported in a consistent and accurate manner. In addition to the analysis of data reports, ACCES-VR conducts periodic onsite reviews. The Data Management and Consumer Record Review Protocol is available online at the ACCES-VR website in the ILC Toolbox under Protocols at <http://www.acces.nysed.gov/vr/independent-living-centers-toolbox-service-providers>.

### I. Demographic Data for People with a CSR

Report unduplicated demographic data for all consumers with disabilities with a Consumer Service Record (CSR) served during the report year. Include data for new consumers with a CSR started since October 1 of the report year and returning consumers with a CSR served during prior report years that returned in the report year. Every item of demographic data must be recorded for every consumer with a CSR unless a consumer is unwilling to provide it (in which case "unknown" should be recorded for the missing data). Age, Education Status and Employment Status must be updated annually for each consumer with a CSR. The six demographic categories A. through F. must agree. These demographic categories do not need to agree with the disability data.

- A. Age
- B. Gender
- C. Race/Ethnicity
- D. Employment Status
- E. Education Status
- F. Veteran

### II. Disability Data

Report all people with disabilities who received services

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(people with and without a CSR) during the report year that were reported under III. A. People With Disabilities (PWD). While an unduplicated count is provided for each of the five disability categories (A., B., C, D. and F.), the disability data can reflect more than one disability category selection of A. through D. by a consumer, which would also be reported under category F. For example, a consumer who selects both orthopedic and blindness would be reported under B. Physical, D. Sensory, and F. Multiple Disabilities. Reporting "unknowns" is not an option under categories A. through D. The Disability category must be recorded in order to document the establishment of a CSR. For the reporting of disability data, people without a CSR are individuals who received the service of Information and Referral (I&R) and the center obtained disability information for these consumers. When a center does not obtain disability information for an I&R consumer, the center cannot report that consumer under either II. Disability Data or III. A. People With Disabilities.

- A. Cognitive
- B. Physical
- C. Mental
- D. Sensory
- E. Total of Disability Categories (A+B+C+D)
- F. Multiple Disabilities

Report consumers with combinations of the categories A. through D above. Not to be checked independent of the selection of two or more disability categories.

**III. Total People Served During Year**

Report the number of consumers that were served with ACCES-VR funds, with funds from sources other than ACCES-VR and with both ACCES-VR funds and other funds in the following categories: A. People With Disabilities (PWD); B. Family Members/Significant Others; C. Other Non-disabled; and D. Total consumers receiving direct services.

- A. People With Disabilities (PWD)  
Provide an unduplicated count of the total number of people with disabilities served. This consists of all people with disabilities, with and without a CSR, served in the year. It includes: 1. total CSRs consisting of new consumers with a CSR started since October 1 of report year and returning consumers with a CSR served since October 1 of report year who were served during prior report year; and 2. consumers receiving Information and Referral (I&R) service who are disabled

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and not categorized as either a new CSR or returning CSR served during the report year. Add III.A.1. Total CSRs and III.A.2. I&R PWD to calculate III.A.3. Total PWD.

III.A.1. Total CSRs Total Funding must equal the total reported for each category under I. Demographic Data. III.A. PWD, 2. I&R PWD Total Funding cannot be greater than IV.I. Information and Referral. III.A.3. Total PWD Total Funding may be equal to or greater than the total reported for each category under I. Demographic Data but not less than.

- B. Family Members/Significant Others  
Provide an unduplicated count of the total number of family members/significant others served. Family members/significant others are not required to have a CSR. However, for these individuals CILs must maintain names, addresses, phone numbers, service data and other pertinent documentation that includes date of service and staff member initials in a file in order to track and verify service delivery and have adequate information for participation in the ACCES-VR coordinated quality and customer satisfaction survey.
  
- C. Other Non-Disabled including personnel from Businesses/Agencies  
Provide an unduplicated count of the total number of other non-disabled persons including personnel from businesses/agencies served. This should include friends and acquaintances, other non-disabled contacts as well as individuals served from businesses, industry and agencies. A CSR is not required for these individuals. However, the same data noted above under B. Family members/significant others must be maintained in a file for individuals served from businesses, industry and agencies.
  
- D. Total Consumers Receiving Direct Services  
Total the amounts reported under A. People With Disabilities, B. Family Members/Significant Others, and C. Other Non-Disabled, above, and enter that figure here (A + B + C). Total Funding for III.D. must equal the total reported for V. County(s) Served Total Funding.
  
- E. Total consumers projected in contract to receive direct services  
Independent Living Centers must serve a population within ten percent of the total number of people projected to be served in the contract each year not to fall below an established minimum number of persons with and without disabilities per year. If the projection is not met within ten percent, a program improvement plan must be submitted within 30 days of the inadequate performance finding outlining efforts to

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serve more people and to more accurately project the number of consumers to be served. See Part 3. Attachments for information on submitting a program improvement plan.

In determining the projected consumers to be served for the next contract year, a center should examine available funding and resources. A center should also examine strategies that will enhance outreach activities that support center resource capacities. Further, the center should make every effort to put forth realistic projections by reviewing prior service data for the total number of consumers receiving direct services over the prior five contract years to consider average service patterns.

A request to reduce the projected number of consumers to be served during the current contract year must be submitted during the third quarter around the time the mid year report for the current contract period is submitted when the mid year data indicates that the projected number of consumers to be served might not be achieved. Requests submitted during the fourth quarter of the current contract period will not be considered. A center must submit a written evidenced-based convincing justification that addresses any factors that would necessitate reducing the projection. It needs to include a discussion of trend data for the center over the past five contract periods and the center's ability to meet ACCES-VR's performance measures which allow a 10 percent below projection leeway. While a center might want to be cautious at mid year in estimating the total number of consumers to be served by year end, a reduction of the projection for any reason and in any amount is considered a decrease requiring a written justification.

- F. CSRs returning served since October 1 of report year and served during prior report year.
- G. CSRs started (new) between October 1 and September 30 of report year.
- H. Total CSRs served between October 1 and September 30 of report year (F + G). Equal to the total reported for each category under I. Demographic Data.
- I. Businesses/Agencies served  
Provide an unduplicated count of the total number of businesses/agencies served. In this section only count the business/agency, not the individuals working for the business/agency. (Such individuals are counted under C. Other Non-disabled above.) CILs must maintain names, addresses, phone numbers, service data and other

pertinent documentation that includes date of service and staff member initials in a file in order to verify service delivery.

For example, if you worked with five different employees of Acme Company in the last year, you would report those five people under C. Other Non-Disabled and only report one entity served (Acme Company) here.

**IV. Individual Services** - number of people served

For each service offered, report the unduplicated number of consumers (with and/or without a CSR) receiving that service during the report year. The same consumer can be counted in more than one service area. Consumers receiving any independent living service(s) either on a one-time or infrequent basis or on a frequent or ongoing basis such as, but not limited to, C. Assistive Devices/Equipment (loan closet), E. Communication Services (interpreter services), I. Information and Referral (I&R) or U. Voter Registration, are counted in the applicable service category(s).

- A. Advocacy/Legal Services - Individual advocacy and legal assistance and/or representation in accessing benefits, services and programs to which a consumer may be entitled. This section may include any aspect of direct individual advocacy provided by a staff member of a center on behalf of a consumer.

Consumers who receive training in a group that prepares them to be individual advocates can be counted as individual consumers under this service. For example, a group of parents of school age children with disabilities are trained on one or more occasions to be individual advocates for their children. Count each parent once under advocacy/legal services.

- B. Architectural Barrier Services - advice, information or assistance regarding removal of architectural barriers from any publicly or privately-owned residence or other building or constructed facility, whether already built or in the planning stage, including preparation of detailed plans.
- C. Assistive Devices/Equipment - provision of specialized devices and equipment such as telecommunications devices for the deaf (TDDs), videophones, wheelchairs and lifts, or provision of assistance to obtain these devices and equipment from other sources. This service equates with equipment acquisition, repair and loan.
- D. Children's Services - independent living services not

specified elsewhere in this list, provided to a child under age 5.

- E. Communication Services - services directed to enable individuals with disabilities to better communicate such as: interpreter services, including tactile interpreter services for deaf-blind individuals; Braille transcription; materials in alternative formats; and reading services.
- F. Counseling Services - This service equates with personal counseling services and includes information sharing, psychological services of a non-psychiatric, non-therapeutic nature, parent-to-parent services, and related services.
- G. Family Services - services not specified elsewhere in this list, provided to the family members of individuals with disabilities when necessary for improving the individual's ability to live and function more independently, or his or her ability to engage or continue in employment. Such services may include integrated nonresidential respite care.
- H. Housing or Shelter Services - information, advice, and assistance related to securing and/or retaining housing or shelter, including existing accessible housing. Includes assistance with reviewing and evaluating newspaper ads, advice on communication with landlords, provision of lists of available accessible housing and housing support application information and assistance. A CIL shall not provide residential housing or shelter as an independent living service on either a temporary or long-term basis.
- I. Information and Referral (I&R) Services - individual I&R provided to a consumer. (It is not necessary to establish a CSR for an individual receiving only I&R services. These individuals have also been referred to as "casual" consumers.) Most individuals receive I&R services through single person-to-person contacts or one or two telephone calls, with information provided verbally, through printed material and/or through referral to another source for services or further information. Provide an unduplicated count of individuals served. CILs must record the date of service and staff member initials. Record for a person who identifies a disability the name, county of residence and type of disability. For a person who does not identify a disability, record only the name.

However I&R is provided, it is a person-to-person contact (staff to consumer), thus Internet hits or downloads off a web site do not constitute I&R. Web

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site development and use should be reported under Part I. Program Performance Report, IV. Self-Evaluation With NYS Standards, Standard 2 - Public Relations.

- J. Independent Living Skills Development and Life Skills Services - independent living skills development is instruction to develop independent living skills in areas such as personal care, coping skills, use of assistive technology, financial management, social skills, and household management, including education and training necessary for living in the community and participating in community activities.
- K. Mobility Training - variety of services involved in assisting individuals with disabilities to get around their homes and communities.
- L. Peer Counseling (including cross-disability peer counseling) - counseling, teaching, information giving and sharing, and similar kinds of contact provided by other individuals with disabilities. This may include the provision of education and awareness by one person with a disability to another regarding disability laws, civil rights and other empowering protection available.

When reporting the number of consumers receiving individual and/or group peer counseling services, provide an unduplicated count of the total number of individuals in both activities. If a consumer received both individual and group peer counseling services, count that consumer only once under peer counseling.

- M. Personal Assistance Services - including provision of attendant care to consumers and/or training consumers to supervise their attendants.
- N. Recreational Services - provision or identification of opportunities for the involvement of individuals with disabilities in integrated leisure-time activities; participation in community affairs and/or other integrated recreation activities that may be competitive, active or quiet.
- O. Transportation Services - provision of, or arrangements for provision of transportation.
- P. Youth Services - services not specified elsewhere in this list, provided to youth with disabilities (ages 5 - 19 or students in transition ages 15-22). May include services provided as part of a formal school-to-work transition program.
- Q. Vocational Services - training in job-seeking skills such as interviewing and resume writing, and/or

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provision of individual supported employment and/or integrated job placement services.

- R. Plan to Achieve Self-Support (PASS) Development - Assistance with the design of an approved PASS. In order to report PASS service, a PASS must be approved by the U.S. Social Security Administration (SSA). Any work on PASS development that does not lead to an approved PASS, or on continuation of an approved PASS, may be categorized under T. Benefits Advisement or other relevant services when applicable.
- S. Business/Industry/Agency Services - services not specified elsewhere in this list provided to businesses, industries and agencies, i.e. assistance to four individuals at ABC business to resolve a dispute over a specific discriminatory practice. The number of individuals at the business is counted here and the business served is counted in section III. Total People Served During Year, I. Business/Agencies Served.
- T. Benefits Advisement - assistance provided during the application process to obtain economic benefits. Does not include the representation of individuals at hearings or appeals, (see A. Advocacy/Legal Services for appropriate service category).
- U. Voter Registration - assistance provided to register individuals to vote. Count the number of individuals registered.
- V. Other - any independent living service not listed above.

**V. County(s) Served**

Report the county of residence for consumers served and report the number of consumers in each county served with ACCES-VR funds, with funds from sources other than ACCES-VR and with both ACCES-VR funds and other funds. When adding up Total Funding, the total must equal the total reported for III. D. Total Consumers Receiving Direct Services, Total Funding.

### Part 3: Instructions for Attachments

All attachments referenced in Part I. Program Performance Report of the mid year and end of year reports should be provided electronically in this section. This can include items that will help to illustrate or document activities mentioned in one or more sections of the narrative.

If a Program Improvement Plan (PIP) is required for a performance target(s) that is not met in areas including the ACCES-VR/NYSILC customer satisfaction survey, achievement of minimum requirements for systems change outcomes, meeting projected number of people to be served within ten percent or any other specified area, the PIP should be placed in this section.

PIPs are reviewed by ACCES-VR and either approved or retained for additional action from the center within 30 days of submission. ACCES-VR will provide technical assistance to assist the center in developing an acceptable plan. When the center successfully meets the performance target(s) identified in the plan, the PIP will have been completed.

PIPs must be developed with involvement of the center's Board of Directors and organizational management. PIPs must identify specific action steps to remedy any deficits. There is no standard format for the plan, and the center can choose any format that includes the following categories:

- A. Steps To Be Taken - names of any organizations that will be contacted and description of activities
- B. With Who - names of contact persons
- C. Time Frames - scheduled dates
- D. Anticipated Results - what will be accomplished
- E. Anticipated Completion Dates - when planned activities will be completed

A PIP can include receiving training from other NYS ILCs that have demonstrated "best practices" and results in the area(s) identified in the plan. It is recommended the center contact ILCs that are operating in communities similar to the center's and that have demonstrated visibility and collaboration at the community level, which are important factors to consider when developing successful strategies. For training to be most beneficial, it must be direct and can be conducted onsite and/or over the phone to individuals or groups. While training is required from a minimum of two ILCs, a center is encouraged to receive training from additional ILCs as this will provide a broader sampling of successful strategies. The PIP should provide detailed information about the training received, identify the "best practices" adopted by the center and specify how they were implemented, and report on any changes or improvements made to the center's operations. To verify training has taken place, the center will need to submit a written update of the original PIP.