**State Grants for Assistive Technology Program**

# Pennsylvania

# State Plan for Assistive Technology

# Federal Fiscal Years 2018-2020

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*Expiration Date: March 31, 2021*

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

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

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

### Identification & Description of Lead Agency and Implementing Entity

|  |
| --- |
| **Statewide AT Program (Information to be listed in national State AT Program Directory)** |
| 1. State Program Title: PA’s Initiative on Assistive Technology dba TechOWL |
| 2. State AT Program URL (home page for State AT Program) TechOWLpa.org |
| 3. Mailing address 1755 N. 13th Street, Student Center Rm. 411 South | 5. State Pennsylvania |
| 4. City Philadelphia | 6. Zip code 19122 |
| 7. Main email address (for general public to use to contact State AT Program) techowl@temple.edu |
| 8. Main phone number (for general public to use to contact State AT Program) 800-204-7428 |
| 9. Separate TTY number (for general public to use to contact State AT Program) 866-268-0579 |
| **Lead Agency** |
| 10. Agency Name Institute on Disabilities / UCEDD at Temple University |
| 11. Mailing address 1755 N. 13th Street, Student Center Rm. 411 South | 13. State Pennsylvania |
| 12. City Philadelphia | 14. Zip code 19122 |
| 15. Lead Agency URL http://disabilities.temple.edu |
| **Implementing Entity** |
| 16.Does your Lead Agency contract with an Implementing Entity to carry out the Statewide AT Program on its behalf? Yes [ ]  No [x]  *If yes, complete Items 17–22.*  |
| 17. Name of Implementing Entity |
| 18. Mailing address | 20. State |
| 19. City | 21. Zip code |
| 22. Implementing Entity URL |
| **Program director and other contacts** |
| 23. Program Director for State AT Program (last, first) Singleton, Kim |
| 24. Title Director  |
| 25. Phone 215-204-3862 |
| 26. E-mail kim.singleton@temple.edu |
| 27. Primary Contact at the Lead Agency (last, first) Gould-Taylor, Sally |
| 28. Title Interim Executive Director |
| 29. Phone 215-204-5775 |
| 30. E-mail sgould-taylor@temple.edu |
| 31. Primary Contact at Implementing Entity (last, first) – If applicable  |
| 32. Title |
| 33. Phone |
| 34. E-mail |
| **Person Responsible for completing this form if other than State AT Program Director** |
| 34. Name (last, first) McNally, Sandra |
| 35. Title Assistant Director |
| 36. Phone 215-204-3370 |
| 37. E-mail sandra.mcnally@temple.edu |
| **Certifying Representative** |
| 38. Name (last, first) Mitchell, Karen |
| 39. Title Assistant Vice President, Research Administration |
| 40. Phone 215-707-7547 |
| 41. E-mail karen.mitchell@temple.edu |

### Change in Lead Agency or Implementing Entity *N/A*

* + 1. **Describe the mechanisms established to ensure coordination of activities and collaboration between the Implementing Entity and the state if you have a designated Implementing Entity identified above.**

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

* + 1. **Is the Lead Agency named in this State Plan a new or different Lead Agency from the one designated by the Governor in your previous State Plan?** NO

Instructions: The “previous state plan” was the plan under which the Statewide AT Program operated from October 1, 2015 until the submission of this State Plan. If a change in Lead Agency already has been approved by ACL under the previous State Plan, there is no change now. If there is no lead agency change and you use an Implementing Entity, move on to Question 5 about changing Implementing Entities.

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

* + 1. **Explain why the Lead Agency previously designated by the Governor should not serve as the Lead Agency. Answer only if Question 2 above is yes.**

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

* + 1. **Explain why the Lead Agency newly designated by the Governor should serve as the Lead Agency. Answer only if Question 2 above is yes.**

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

* + 1. **Is the Implementing Entity named in this State Plan a new or different Implementing Entity from the one designated by the Governor in the previous State Plan?**

Instructions: The “previous state plan” was the plan under which the Statewide AT Program operated from October 1, 2015 until the submission of this State Plan. If a change in Implementing Entity already has been approved by ACL under the previous State Plan, there is no change now.

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

* + 1. **Explain why the Implementing Entity previously designated by the Governor should not serve as the Implementing Entity. Answer only if Question 5 above is yes.**

Instructions: Follow the same instructions for Item 3 above.

* + 1. **Explain why the Implementing Entity newly designated by the Governor should serve as the Implementing Entity. Answer only if Question 5 above is yes.**

Instructions: Follow the same instructions for Item 4 above.

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

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

### Advisory Council

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

Instructions: This statement assures that the advisory council is representative of the state in terms of geography and diversity and meets the purposes and performs the functions required under the AT Act.

* + 1. **The advisory council includes a representative of the designated State agency, as defined in section 7 of the Rehabilitation Act of 1973 (29 U.S.C. 705). Answer yes/no/NA. *YES***
		2. **The advisory council includes a representative of the State agency for individuals who are blind (within the meaning of section 101 of that Act (29 U.S.C. 721)). Answer yes/no/NA. *N/A*** *– In Pennsylvania, the Bureau of Blindness and Visual Services is housed within the Office of Vocational Rehabilitation.*
		3. **The advisory council includes a representative of a State center for independent living described in part C of title VII of the Rehabilitation Act of 1973 (29 U.S.C. 796f et seq.). Answer yes/no/NA. *YES***
		4. **The advisory council includes a representative of the State workforce development board established under section 101 of the Workforce Innovation and Opportunity Act). Answer yes/no/NA. *YES***
		5. **The advisory council includes a representative of the State educational agency, as defined in section 9101 of the Elementary and Secondary Education Act of 1965 as reauthorized. Answer yes/no/NA. *YES***
		6. **The advisory council includes other representatives (list below).**

*Pennsylvania Business Leadership Network*

*Disability Rights Pennsylvania*

*Parent Education & Advocacy Leadership Center*

* + 1. **The advisory council includes a majority of individuals with disabilities that use assistive technology or their family members or guardians:**

A. Enter the number of individuals with disabilities that use AT or their family members or guardians on the advisory council - ***6***

B. Enter the total number of individuals on the advisory council - ***13***

C. Calculate the percentage (divide A/B) – ***46%***

*If the ratio is less than 51% you must provide explanation of why advisory council does not include a consumer majority in Item 9 below.*

* + 1. **If the Statewide AT Program does not have the composition and representation required under section 4(c)(2)(B), explain here.**

*Despite our recruiting efforts we have been unable to gain any new members who are AT users or family members, but our efforts will continue.*

### Actual Expenditures and Budgeted Allocations

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

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

| **Actual Expenditures for Closed-out Carryover Year Award** | **Final Expenditures** | **Percentage** |
| --- | --- | --- |
| **A. All State Level Activities** | **$488,056.22** | **65.75%** |
| **B. All State Leadership Activities** | **$254,237.78** | **34.25%** |
| **C. Transition Training & Technical Assistance** | **$34,578.04** | **13.60%** |
| **D. Total Expenditures** | **$742,294.00** | **100.00%** |
| **E. Total Award** | **$742,294.00** | **100%** |
| **F. Lapsed Amount** | **$0.00** | **0.00%** |

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

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

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

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

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

* + 1. **Actual YTD Expenditures and Budgeted Allocations for Immediately Preceding Year Award (annual update required-table reset)**

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

| **Actual & Planned Immediately Preceding Year Award Expenditures** | **YTD Obligated not Liquidated Expenditures** | **YTD Liquidated Expenditures** | **Planned not yet Obligated Expenditures** | **Total**  |
| --- | --- | --- | --- | --- |
| **All State Level Activities** | **$50,723.00** | **$190,071.00** | **$250,000.00** | **$491,207.00** |
| **All State Leadership Activities** | **$27,312.00** | **$92,832.00** | **$128,923.00** | **$249,292.00** |
| **Transition Training & Technical Assistance** | **$3,901.00** | **$13,944.00** | **$9,000.00** | **$26,845.00** |
| **Total**  | **$78,035.00** | **$282,903.00** | **$378,923.00** | **740,499.00** |

### Activities Conducted

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

Using the table below, identify all types of state level activities that will be conducted by the Statewide AT Program, who is conducting the activity, from where it is conducted and if a fee is charged. Please remember that annual progress report data is required for any activity identified as conducted in this State Plan.

Instructions: Enter “yes” or “no” to indicate each of the activities conducted in the table below.

| **AT Act State Level Activities** | **Activity Conducted?** | **Who conducts?State** | **Who conducts?Other** | **Who conducts?Both** | **Where conducted?Central** | **Where conducted?Regional** | **Where conducted?Both** | **Fee Charged** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **State Financing-Financial Loan** | NO |  |  |  |  |  |  |  |
| **State Financing-Other that Directly Provides AT**  | YES |  |  | X |  |  | X | NO |
| **State Financing-Other that Creates Savings for AT** | YES | X |  |  | X |  |  | NO |
| **Reuse-Device Exchange**  | YES |  |  | X |  |  | X | NO |
| **Reuse-Device Open Ended Loan or Reassign**  | YES |  |  | X |  |  | X | YES |
| **Device short-term loan**  | YES |  |  | X |  |  | X | NO |
| **Device demonstra-tion**  | YES |  |  | X |  |  | X | NO |

* + 1. **Comparability and Flexibility *N/A***

For any of the four State Level Activities that are not conducted, the Statewide AT Program must claim comparability or flexibility in the table below. The table below repeats the yes/no from the previous table identifying the activities the state is conducting and requires identification of flexibility or comparability for those activities the Statewide AT Program is not conducting.

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

**Multiple Activity Item Instructions**

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

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

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

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

| **Collaborating organizations conducting this activity**  | **Have written agreement with this entity** | **Provide financial support to this entity** | **Receive financial support from this entity** |
| --- | --- | --- | --- |
| **Banks/financial institution** | **NO** | **NO** | **NO** |
| **Independent Living Center** | **YES** | **YES** | **YES** |
| **Easter Seals** | **NO** | **NO** | **NO** |
| **Disability/AT Organizations** | **YES** | **YES** | **NO** |
| **Federal Entities/Agencies** | **NO** | **NO** | **NO** |
| **State Entities/Agencies** | **YES** | **NO** | **YES** |
| **Local/Community Entities** | **NO** | **NO** | **NO** |
| **Private Entities**  | **NO** | **NO** | **YES** |
| **Other** *(describe)* |  |  |  |

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

*Have written agreement with this entity* – Answer “yes” in this column if the Statewide AT Program has a formal agreement of some sort with an entity to conduct all or part of a state level or state leadership activity. If an entity is providing the State AT Program with data for activities they are conducting and that data is reported in the Annual Progress Report, the Statewide AT Program should have an agreement with that entity and should report it in this column. The Statewide AT Program should also have a written agreement with a funding source for an activity and similarly would have such agreement with an entity to whom the Statewide AT Program is providing funding for an activity. Both of these would be reported in this column and one of the two other columns asking about direct financial support. It is possible to have a formal agreement with an entity to support conducting an activity without associated direct financial support provided (e.g. The Statewide AT Program provides a device demonstration provider with all the AT devices for their inventory instead of direct dollars). In-kind support with a written agreement will be reported in this category. It is likely that if one of the financial support columns is checked “yes” that this column would also be checked “yes”. However, this column could be checked “yes” without the associated direct financial support (only in-kind or non-monetary). If no formal, written agreement is in place this column should NOT be checked.

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

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

Select all organization types that apply for each column.

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

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

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

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

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

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

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

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

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

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## State Financing Activities

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

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

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

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

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

### Financial Loan Program – *N/A*

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

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

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

* + 1. **This activity offers the following types of assistance (identify all that apply).**
* **Revolving loans**
* **Loan guarantees**
* **Interest buy-downs**
* **Combined loan guarantee and interest buy-down**

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

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

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

*Interest buy-down loan:* A loan in which AT program funds are used to buy down the interest rate of a loan. The AT program uses funds to reduce the interest rate that lending institutions offer to consumers for loans to purchase AT. The AT program pays the lending institution for a portion of the interest on the loan, resulting in lower interest payments for the consumer over the long term.

* + 1. **The lowest interest amount for loans as established by the policies of the activity (leave blank if NA). Provide a percentage in XX.XX% form.**
		2. **The highest interest amount for loans as established by the policies of the activity (leave blank if NA). Provide a percentage in XX.XX% form.**
		3. **The lowest loan amount provided as established by the policies of the activity (leave blank if N/A). Provide dollar amount.**

Instructions: The response to this item must be based on the Statewide AT Program’s established, written policies. This is not the lowest loan actually provided in a given year, but the lowest loan amount that would be provided as reflected in the written policies. Leave it blank if the written policies do not specify a lowest loan amount.

* + 1. **The highest loan amount provided as established by the policies of the activity (leave blank if N/A). Provide dollar amount.**

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

* + 1. **Describe the activity.**

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

* + 1. **The online page for this specific activity can be found at:**

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

### Other State Financing Activities Directly Provide AT

* + 1. **If other state financing activities that directly provide AT are conducted through a formal written agreement, by providing financial support to other entities or by receiving financial support from other entities please identify that coordination and collaboration in the table below.**

| **Collaborating organizations conducting this activity**  | **Have written agreement with this entity** | **Provide financial support to this entity** | **Receive financial support from this entity** |
| --- | --- | --- | --- |
| **Banks/financial institution** | **NO** | **NO** | **NO** |
| **Independent Living Center** | **YES** | **YES** | **NO** |
| **Easter Seals** | **NO** | **NO** | **NO** |
| **Disability/AT Organizations** | **YES** | **YES** | **NO** |
| **Federal Entities/Agencies** | **YES** | **NO** | **YES** |
| **State Entities/Agencies** | **YES** | **NO** | **YES** |
| **Local/Community Entities** | **YES** | **YES** | **NO** |
| **Private Entities**  | **NO** | **NO** | **NO** |
| **Other** *(describe)* |  |  |  |

* + 1. **The following activities are conducted**

| **Activities**  | **Check if Conducted** |
| --- | --- |
| **Telecommunications Equipment Distribution Program (EDP)-State** | **X** |
| **Deaf/Blind Telecommunications EDP-Federal** | **X** |
| **Last Resort Fund** | **X** |
| **Home Modification Program** |  |
| **Other** *(describe)* |  |

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

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

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

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

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

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

* + 1. **Describe the activity or activities.**

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

*Our state AT Act Program implements both Pennsylvania’s Telecommunication Device Distribution Program (TDDP), and the federally funded National Deaf-Blind Equipment Distribution Program (NDBEDP, also known as iCanConnect). The TDDP provides a range of adaptive telephone equipment (and, as of July 1, 2019, wireless equipment) to all state residents who cannot access telecommunications independently and also meet the program’s eligibility requirements. The NDBEDP provides a full range of adaptive telecommunications equipment needed by individuals who are DeafBlind and meet the program’s eligibility requirements. All funding used to purchase this equipment is provided by state and federal sources outside of the ATAct.*

*The Virgina Del Sordo Fund is a last-resort fund that provides one-time grants of up to $200 to individuals for the purchase of AT. The funds distributed to individuals toward the purchase of AT are provided from funds orginating from a private bequest to the University.*

*AT Act funds are used to support the administration of all the above programs. There are no fees associated with these programs, but all have financial and other eligibility requirements.*

* + 1. **The online page (or pages) for this specific activity can be found at:**

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

<https://TechOWLpa.org/service/tddp>

<https://TechOWLpa.org/service/deafblind>

<https://TechOWLpa.org/service/help-with-pay>

### Other State Financing Activities Create AT Savings

* + 1. **If other state financing activities that create AT savings are conducted through a formal written agreement, by providing financial support to other entities and/or by receiving financial support from other entities please identify that coordination and collaboration in the table below.**

| **Collaborating organizations conducting this activity**  | **Have written agreement with this entity** | **Provide financial support to this entity** | **Receive financial support from this entity** |
| --- | --- | --- | --- |
| **Banks/financial institution** | **NO** | **NO** | **NO** |
| **Independent Living Center** | **NO** | **NO** | **NO** |
| **Easter Seals** | **NO** | **NO** | **NO** |
| **Disability/AT Organizations** | **NO** | **NO** | **NO** |
| **Federal Entities/Agencies** | **NO** | **NO** | **NO** |
| **State Entities/Agencies** | **NO** | **NO** | **NO** |
| **Local/Community Entities** | **YES** | **NO** | **NO** |
| **Private Entities**  | **NO** | **NO** | **YES** |
| **Other** *(describe)* |  |  |  |

* + 1. **The following activities are conducted**

| **Activities**  | **Check if Conducted** |
| --- | --- |
| **Cooperative Buying Program** |  |
| **AT Lease Program** |  |
| **AT Fabrication Program** | **X** |
| **Other** *(describe)*  |  |

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

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

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

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

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

* + 1. **Describe the activity.**

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

*TechOWL is involved in fabrication of AT in several ways.*

* + - 1. *With a grant from the Christopher and Dana Reeve Foundation, we trained local Philadelphians to build adaptive furniture from cardboard for children with limited income. Following that yearlong project, we continued to work of cardboard carpentry through a collaboration with woodworkers in a retirement community until the woodworkers discontinued the project due to attrition. No fees were collected from any of the recipients of the adapted furniture.*
			2. *The need for fabricated AT using different materials and skills emerged from the cardboard carpentry work. Because of this need, TechOWL developed CreATe Together. CreATe Together is a project in which we match AT makers with AT users for specific projects. We inclusively support the making process. AT Makers and AT Users are solicited through social media, outreach efforts and word of mouth. There is no fee charged by TechOWL to the AT User. In some instances, the AT Users obtain parts for use in this project. For example, one family obtained a standard bicycle and various additional parts that the AT Makers used to create an adapted bicycle.*
			3. *The AT Makers’ Fair was held in Pennsylvania in 2019 led by one of TechOWL’s Assistive Technology Regional Centers. TechOWL provided support to plan, publicize, and produce this two-day event.*
		1. **The online page (or pages) for this specific activity can be found at:**

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

<https://TechOWLpa.org/service/create>

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## Device Reutilization Activities

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

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

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

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

### Device Exchange

* + 1. **If device exchange activities are conducted through a formal written agreement, by providing financial support to other entities and/or by receiving financial support from other entities please identify that coordination and collaboration in the table below.**

| **Collaborating organizations conducting this activity**  | **Have written agreement with this entity** | **Provide financial support to this entity** | **Receive financial support from this entity** |
| --- | --- | --- | --- |
| **Banks/financial institution** | **NO** | **NO** | **NO** |
| **Independent Living Center** | **YES** | **YES** | **NO** |
| **Easter Seals** | **NO** | **NO** | **NO** |
| **Disability/AT Organizations** | **YES** | **YES** | **NO** |
| **Federal Entities/Agencies** | **NO** | **NO** | **NO** |
| **State Entities/Agencies** | **NO** | **NO** | **NO** |
| **Local/Community Entities** | **NO** | **NO** | **NO** |
| **Private Entities**  | **NO** | **NO** | **NO** |
| **Other** *(describe)* |  |  |  |

* + 1. **Select the option that best describes what happens when a device is exchanged. Identify only one.**
* **X The transaction is direct consumer-to-consumer**
* **The Statewide AT Program is involved in the transaction**

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

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

* + 1. **Describe the activity.**

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

*The Reutilized and Exchanged Equipment Partnership (REEP) On-Line Classifieds is a web-based listing of equipment needed/wanted by Pennsylvanians (although residents of other states may list items for sale or "shop" the classifieds). Our program provides the mechanism for listing items but does not become involved in the transaction. We discontinued this activity in 2019 because it was redundant. Consumers used social media and other consumer platforms (i.e. Craigslist, Next Door, etc.) to conduct this activity.*

**The online page for this specific activity can be found at:**

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

*N/A*

### Device Refurbish and Reassignment and/or Open-ended Loan

* + 1. **If device refurbish and reassignment and/or open-ended loan activities are conducted through a formal written agreement, by providing financial support to other entities and/or by receiving financial support from other entities please identify that coordination and collaboration in the table below.**

| **Collaborating organizations conducting this activity**  | **Have written agreement with this entity** | **Provide financial support to this entity** | **Receive financial support from this entity** |
| --- | --- | --- | --- |
| **Banks/financial institution** | **NO** | **NO** | **NO** |
| **Independent Living Center** | **YES** | **YES** | **NO** |
| **Easter Seals** | **NO** | **NO** | **NO** |
| **Disability/AT Organizations** | **YES** | **YES** | **NO** |
| **Federal Entities/Agencies** | **NO** | **NO** | **NO** |
| **State Entities/Agencies** | **NO** | **NO** | **NO** |
| **Local/Community Entities** | **YES** | **YES** | **NO** |
| **Private Entities**  | **NO** | **NO** | **NO** |
| **Other** *(describe)* |  |  |  |

* + 1. **Select the option(s) that describe how a reutilized device is provided to a recipient. Identify as many as apply.**
* **X Device ownership is transferred to the recipient**
* **Device is loaned for as long as the recipient needs it with no ownership transfer.**

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

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

* + 1. **Describe the activity.**

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

*Our device reuse program is conducted by all eight of our subcontracted Assistive Technology Resource Centers (ATRCs) as part of their AT Act Activities. We also provide a small amount of funding to support the activities of several Reuse Partners (Partners) around the state and provide them with materials and technical assistance. ATRCs and Partners accept device donations and clean and sanitize them. Some programs have the capacity to provide minor repairs, but most are only able to accept devices in good working order. ATRCs and Partners generally require that donations be delivered and that acquisitions be picked up from the program’s location, but programs will also work with donors and consumers to facilitate equipment transportation if possible. In some cases, a minimal fee is charged to cover device handling, but this is at the discretion of the ATRC or Partner.*

*ATRCs and Partners may assist consumers in choosing a particular piece of equipment; however, for certain types of devices assessment and recommendations from a qualified therapist may be required.*

* + 1. **The online page (or pages) for this specific activity can be found at:**

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

<https://techowlpa.org/service/reep>

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## Device Short-term Loan Activity

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

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

### Short-term Device Loan

* + 1. **If short-term device loan activities are conducted through a formal written agreement, by providing financial support to other entities and/or by receiving financial support from other entities please identify that coordination and collaboration in the table below.**

| **Collaborating organizations conducting this activity**  | **Have written agreement with this entity** | **Provide financial support to this entity** | **Receive financial support from this entity** |
| --- | --- | --- | --- |
| **Banks/financial institution** | **NO** | **NO** | **NO** |
| **Independent Living Center** | **YES** | **YES** | **NO** |
| **Easter Seals** | **NO** | **NO** | **NO** |
| **Disability/AT Organizations** | **YES** | **YES** | **NO** |
| **Federal Entities/Agencies** | **NO** | **NO** | **NO** |
| **State Entities/Agencies** | **YES** | **NO** | **YES** |
| **Local/Community Entities** | **NO** | **NO** | **NO** |
| **Private Entities**  | **NO** | **NO** | **NO** |
| **Other (***describe)* |  |  |  |

* + 1. **Select the option that describes how the majority of devices loaned are delivered to and returned from a borrower. Identify only one.**
* **X The majority of devices are shipped via mail or other delivery service.**
* **The majority of devices are delivered or picked up in-person.**

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

* + 1. **Describe the activity.**

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

*Pennsylvania’s Assistive Technology Lending Library (ATLL) is a statewide program that is consumer-responsive and available to Pennsylvanians of all ages and abilities.*

*Borrowers complete a brief information form to obtain a library card number. This number means that the person is enrolled as a borrower and is used each time the person wants to use the ATLL. When a borrower initiates a loan request, additional information is required about the specific loan, including user information if the borrower is not the intended user of the equipment. The borrower can search the online catalog and select* *items to borrow. After items are selected, the request is automatically emailed to the Assistive Technology Resource Center (ATRC) that serves the borrower’s county. If the ATRC has the requested equipment as part of their onsite inventory, they may ask the borrower if they want to pick up the device(s) from the ATRC. However, the majority of the requests are sent by the ATRC to our centralized inventory location, currently operated by the Department of Labor and Industry, Office of Vocational Rehabilitation. Staff at the central location are responsible for the maintenance and circulation of the devices as well as processing of loan applications and data collection. Devices borrowed from the ATLL are shipped at no charge to the borrower and picked up by the shipper at the end of the loan period. The length of the device loan ranges from 2 to 6 weeks, depending on the complexity of the device.*

*ATRCs: assist borrowers in the selection of appropriate equipment for trial use; help select appropriate alternatives when the first choice is not available; refer to other sources for loan or rental as necessary; refer to service providers for assessment; and facilitate the shipping and return of devices, including following up with overdue loans. ATRCs may also provide up to two hours of support for each device loaned.*

*While the program is primarily supported with state appropriations, federal AT Act dollars are used to supplement the program, supporting staff, subcontractors, and as funds allow, additions to the equipment inventory.*

* + 1. **The online page for this specific activity can be found at:**

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

<https://techowlpa.org/service/lending-library>

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## Device Demonstration Activity

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

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

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

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

### Device Demonstration

* + 1. **If device demonstration activities are conducted through a formal written agreement, by providing financial support to other entities and/or by receiving financial support from other entities please identify that coordination and collaboration in the table below.**

| **Collaborating organizations conducting this activity**  | **Have written agreement with this entity** | **Provide financial support to this entity** | **Receive financial support from this entity** |
| --- | --- | --- | --- |
| **Banks/financial institution** | **NO** | **NO** | **NO** |
| **Independent Living Center** | **YES** | **YES** | **NO** |
| **Easter Seals** | **NO** | **NO** | **NO** |
| **Disability/AT Organizations** | **YES** | **YES** | **NO** |
| **Federal Entities/Agencies** | **NO** | **NO** | **NO** |
| **State Entities/Agencies** | **NO** | **NO** | **YES** |
| **Local/Community Entities** | **YES** | **NO** | **YES** |
| **Private Entities**  | **NO** | **NO** | **NO** |
| **Other** *(describe)* |  |  |  |

* + 1. **Describe the activity.**

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

*All ATRCs are required to perform device demonstrations. Demonstrations may be conducted at the ATRC or another mutually agreed upon location in the community. ATRCs are encouraged to schedule “Demo Days” at libraries, senior centers and other public spaces.*

*As funds (and ATRCs space) permit, our program provides equipment to ATRCs to enhance their onsite collection of devices for demonstration. In some cases, these devices may also be made available for loan. If a device needed for a demonstration is not located at the ATRC but is a part of the AT Lending Library (ATLL) inventory, the ATRC may request them from the ATLL.*

*Staff conducting the demonstration provide a guided experience with devices that may meet a person’s functional need, providing experiences with more than one similar device whenever possible, while comparing and contrasting features. From time to time, ATRCs may ask a vendor to come in and provide a demonstration, but the ATRC must also participate in the demonstration to ensure it does not become a sales pitch. During each demonstration, ATRCs share referrals and resources to support device acquisition, including the Pennsylvania Assistive Technology Foundation.*

**3. The online page for this specific activity can be found at:**

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

<https://techowlpa.org/service/demo>

Assistive Technology State Grant Program

State Plan for FY 2018-2020

## State Leadership Activities

Training Activities

The AT Act describes training as follows:

“(i) TRAINING AND TECHNICAL ASSISTANCE. —

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

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

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

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

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

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

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

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

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

### Training

* + 1. **If training activities are conducted through a formal written agreement, by providing financial support to other entities and/or by receiving financial support from other entities please identify that coordination and collaboration in the table below.**

| **Collaborating organizations conducting this activity**  | **Have written agreement with this entity** | **Provide financial support to this entity** | **Receive financial support from this entity** |
| --- | --- | --- | --- |
| **Banks/financial institution** | **NO** | **NO** | **NO** |
| **Independent Living Center** | **YES** | **YES** | **NO** |
| **Easter Seals** | **NO** | **NO** | **NO** |
| **Disability/AT Organizations** | **YES** | **YES** | **NO** |
| **Federal Entities/Agencies** | **NO** | **NO** | **NO** |
| **State Entities/Agencies** | **YES** | **NO** | **YES** |
| **Local/Community Entities** | **YES** | **NO** | **YES** |
| **Private Entities**  | **NO** | **NO** | **NO** |
| **Other** *(describe)* |  |  |  |

* + 1. **Provide a short description of at least one and no more than three planned training activities. One of the activities described must be planned Information and Communication Technology (ICT) accessibility training that will provide the required ICT Training performance measures. If the Statewide AT Program is meeting the transition requirements of the AT Act through training, please describe that planned activity. If the Statewide AT Program sponsors or co-sponsors a statewide conference please include that event as one you describe.**

**Planned ICT Accessibility Training (required)**

*Apple AccessAbility event to be held at Temple University in collaboration with Apple. The morning session will focus on a training on accessibility of Apple products for different functional needs and will be designed to go beyond an awareness level experience for attendees.*

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

*All ATRCs are required to conduct at least one transition training per year in their region.*

*Augmentative Communication Empowerment and Supports (ACES) is a two-week intensive program for young adult users (18+ years) of Augmentative and Alternative Communication (AAC). ACES participants stay on the main campus of Temple University in Philadelphia, Pennsylvania. ACES participants may be concentrating on transitioning from school to work, community living, etc. and learn not only to use their AAC to communicate more effectively, but to empower them to control their lives and form a community with other AAC users.*

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

*Training is provided, as scheduled, to individuals with disabilities, their families, professionals, pre-service professionals (undergraduate and graduate students in a variety of disciplines and at institutions of higher education across the state), employers, and agencies and organizations, generally at the location of their choice. Proposals to conduct training at local, state, regional and national conferences are invited/submitted regularly, and conducted on location at the conference site. When appropriate, teleconferenced trainings, webinars and other distances formats are arranged. In instances where an organization requests multiple or highly specialized trainings, an honorarium may be requested.*

* + 1. **The online page for this specific activity can be found at:**

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

<https://techowlpa.org/service/training>

Technical Assistance Activities

The AT Act describes training as follows:

“(i) TRAINING AND TECHNICAL ASSISTANCE. —

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

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

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

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

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

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

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

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

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

### Technical Assistance

* + 1. **If technical assistance activities are conducted through a formal written agreement, by providing financial support to other entities and/or by receiving financial support from other entities please identify that coordination and collaboration in the table below.**

| **Collaborating organizations conducting this activity**  | **Have written agreement with this entity** | **Provide financial support to this entity** | **Receive financial support from this entity** |
| --- | --- | --- | --- |
| **Banks/financial institution** | **NO** | **NO** | **NO** |
| **Independent Living Center** | **YES** | **YES** | **NO** |
| **Easter Seals** | **NO** | **NO** | **NO** |
| **Disability/AT Organizations** | **YES** | **YES** | **NO** |
| **Federal Entities/Agencies** | **NO** | **NO** | **NO** |
| **State Entities/Agencies** | **YES** | **NO** | **YES** |
| **Local/Community Entities** | **NO** | **NO** | **NO** |
| **Private Entities**  | **NO** | **NO** | **NO** |
| **Other** *(describe)* |  |  |  |

* + 1. **Provide a short description of at least one and no more than two planned technical assistance activities. If the Statewide AT Program is meeting the transition requirements of the AT Act through technical assistance, please describe that planned activity.**

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

*TechOWL participates on the Technology First Task Force, a coalition of organizations working to have the governor declare Pennsylvania as a “Technology First” state. This means that technology must be considered for anyone being served by state community-based services. TechOWL staff will also participate in the Technology Task Force of the Pennsylvania Office of Developmental Programs (ODP) to ensure that assistive technology is considered an integral part of the programs and services they provide.*

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

*TechOWL takes advantage of opportunities to provide technical assistance by responding to requests for input, review, and comment of draft policies issued by a variety of state and federal agencies.*

Public Awareness Activities

The AT Act says the following about Public Awareness:

“The State shall conduct public-awareness activities designed to provide information to targeted individuals and entities relating to the availability, benefits, appropriateness, and costs of assistive technology devices and assistive technology services, including—

(aa) the development of procedures for providing direct communication between providers of assistive technology and targeted individuals and entities, which may include partnerships with entities in the statewide and local workforce investment systems established under the Workforce Innovation and Opportunities Act (29 U.S.C. 3101 et seq.), State vocational rehabilitation centers, public and private employers, or elementary and secondary public schools;

(bb) the development and dissemination, to targeted individuals and entities, of information about State efforts related to assistive technology; and

(cc) the distribution of materials to appropriate public and private agencies that provide social, medical, educational, employment, and transportation services to individuals with disabilities.”

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

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

### Public Awareness

* + 1. **If public awareness activities are conducted through a formal written agreement, by providing financial support to other entities and/or by receiving financial support from other entities please identify that coordination and collaboration in the table below.**

| **Collaborating organizations conducting this activity**  | **Have written agreement with this entity** | **Provide financial support to this entity** | **Receive financial support from this entity** |
| --- | --- | --- | --- |
| **Banks/financial institution** | **NO** | **NO** | **NO** |
| **Independent Living Center** | **YES** | **YES** | **NO** |
| **Easter Seals** | **NO** | **NO** | **NO** |
| **Disability/AT Organizations** | **YES** | **YES** | **YES** |
| **Federal Entities/Agencies** | **YES** | **NO** | **YES** |
| **State Entities/Agencies** | **YES** | **NO** | **YES** |
| **Local/Community Entities** | **NO** | **NO** | **NO** |
| **Private Entities**  | **NO** | **NO** | **NO** |
| **Other** *(describe)* |  |  |  |

* + 1. **Provide a short description of at least one and no more than two planned major public awareness activities**. **If the Statewide AT Program conducts a major ongoing public awareness activity such as an annual AT awareness day with a Governor’s Proclamation, please include that activity.**

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

*TechOWL will host a public event where attendees will attend a presentation about AT programs and services in Pennsylvania, then move from room to room to get information and have a brief experience with AT for difference types of functional needs.*

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

Information and Assistance Activities

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

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

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

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

### Information & Assistance

* + 1. **If information and assistance activities are conducted through a formal written agreement, by providing financial support to other entities and/or by receiving financial support from other entities please identify that coordination and collaboration in the table below.**

| **Collaborating organizations conducting this activity**  | **Have written agreement with this entity** | **Provide financial support to this entity** | **Receive financial support from this entity** |
| --- | --- | --- | --- |
| **Banks/financial institution** | **NO** | **NO** | **NO** |
| **Independent Living Center** | **YES** | **YES** | **NO** |
| **Easter Seals** | **NO** | **NO** | **NO** |
| **Disability/AT Organizations** | **YES** | **YES** | **NO** |
| **Federal Entities/Agencies** | **YES** | **NO** | **YES** |
| **State Entities/Agencies** | **YES** | **NO** | **YES** |
| **Local/Community Entities** | **NO** | **NO** | **NO** |
| **Private Entities**  | **NO** | **NO** | **NO** |
| **Other** *(describe)* |  |  |  |

* + 1. **Describe the activity.**

*Our statewide AT Program has a total of nine AT Resource Centers (ATRCs), including TechOWL. The other eight ATRCs are subcontractors.*

*Each ATRC provides information and assistance to calls and emails during regular business hours regarding AT devices and services. Efforts are made to respond to callers within one business day. Information and assistance is also provided in person. TechOWL maintains statewide toll-free phone and TTY numbers, as well as a general email (**TechOWL@temple.edu**). Email inquiries and voicemails are either responded to or forwarded to the appropriate staff member or ATRC for response. In addition, the accessible website for our program (TechOWLpa.org) has a text chat feature available on weekdays during business hours to respond to questions from website visitors. Video chats are also available by appointment and can be requested from the website.*

*Information and assistance is delivered by knowledgeable staff who are able to access other resources for consultation as well as other Pennsylvania resources. TechOWL maintains a listserv for ATRCs to share resources and consult with the other to gather and share information regarding challenging requests.*

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

Assistive Technology State Grant Program

State Plan for FY 2018-2020

## Assurances & Measurable Goals

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

### Assurances

* + 1. **As the Certifying Representative of the Lead Agency for the State of [state name], I hereby assure the following:**
		2. **The Lead Agency prepared and submitted this State Plan on behalf of the State of Pennsylvania.**
		3. **The Lead Agency submitting this plan is the State agency that is eligible to submit this plan and if an Implementing Entity is identified it is designated to implement the required AT Act activities.**
		4. **The State agency has authority under State law to perform the functions of the State under this program.**
		5. **The State legally may carry out each provision of this plan.**
		6. **All provisions of this plan are consistent with State law.**
		7. **A State officer, specified by title in this certification, has authority under State law to receive, hold, and disburse Federal funds made available under the plan.**
		8. **The State officer who submits this plan, specified by title in this certification, has authority to submit this plan.**
		9. **The agency that submits this plan has adopted or otherwise formally approved this plan.**
		10. **The plan is the basis for State operation and administration of the program.**
		11. **The Lead Agency will maintain and evaluate the program under this State Plan.**
		12. **The State will annually collect data related to the required activities implemented by the State under this section in order to prepare the progress reports required under subsection 4(f) of the Act.**
		13. **The Lead Agency will submit the annual progress report on behalf of the State.**
		14. **The State will prepare reports to the Secretary in such form and containing such information as the Secretary may require to carry out the Secretary's functions under this Act and keep such records and allow access to such records as the Secretary may require to ensure the correctness and verification of information provided to the Secretary.**
		15. **The Lead Agency will control and administer the funds received through the grant.**
		16. **The Lead Agency will make programmatic and resource allocation decisions necessary to implement the State Plan.**
		17. **Funds received through the grant will be expended in accordance with Section 4 of the Act, and will be used to supplement, and not supplant, funds available from other sources for technology-related assistance, including the provision of assistive technology devices and assistive technology services.**
		18. **The Lead Agency will ensure conformance with all applicable Federal and State accounting requirements.**
		19. **The State will adopt such fiscal control and accounting procedures as may be necessary to ensure proper disbursement of and accounting for the funds received through the grant.**
		20. **Funds made available through a grant to a State under this Act will not be used for direct payment for an assistive technology device for an individual with a disability.**
		21. **A public agency or an individual with a disability holds title to any property purchased with funds received under the grant and administers that property.**
		22. **The physical facility of the Lead Agency and Implementing Entity, if any, meets the requirements of the Americans with Disabilities Act of 1990 (42 U.S.C. 12101 et seq.) regarding accessibility for individuals with disabilities. Section 4(d)(6)(E)**
		23. **Activities carried out in the State that are authorized under this Act, and supported by Federal funds received under this Act, will comply with the standards established by the Architectural and Transportation Barriers Compliance Board under section 508 of the Rehabilitation Act of 1973 (20 U.S.C. 794d). Section 4(d)(6)(G)**
		24. **The Lead Agency will coordinate the activities of the State Plan among public and private entities, including coordinating efforts related to entering into interagency agreements.**
		25. **The Lead Agency will coordinate efforts related to the active, timely, and meaningful participation by individuals with disabilities and their family members, guardians, advocates, or authorized representatives, and other appropriate individuals, with respect to activities carried out through the grant.**

General Description of Measurable Goals:

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

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

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

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