

National Assistive Technology Act Data System

State Plan - Full Report

Iowa 2021

General Information

Statewide AT Program (Information to be listed in national State AT Program Directory)

State AT Program Title	Easterseals Iowa Assistive Technology Program		
State AT Program URL	http://www.iowaat.org		
Mailing Address	401 NE 66th Avenue		
City	Des Moines		
State	IA		
Zip Code	50313		
Program Email	atinfo@eastersealsia.org		
Phone	866-866-8782		
ТТҮ	515-289-1281		

Lead Agency

Agency Name University of Iowa Center for Disabilities and Development at University of Iowa University of Iowa Center for Disabilities and Development at University of Iowa	
Mailing Address	2 Gilmore Hall
City	Iowa City
State	IA
Zip Code	52242
Program URL	

Implementing Entity

Does your Lead Agency contract with an Implementing Entity to carry out the Statewide AT Program on its behalf? Yes		
Name of Implementing Agency Easterseals Iowa Assistive Technology Program		
Mailing Address	401 NE 66th Avenue	

City	Des Moines
State	IA
Zip Code	50313
Program URL	www.iowaat.org

General Information (Continued...)

Program Director and Other Contacts

Program Director for State AT Program (last, first)	Keninger, Tracy	
Title	Director	
Phone	515-309-2371	
E-mail	tkeninger@eastersealsia.org	
Program Director at Lead Agency (last, first)	Willis, Derrick	
Title	Director	
Phone	319-384-5934	
E-mail	derrick-willis@uiowa.edu	
Primary Contact at Implementing Agency (last, first) - If applicable	Keninger, Tracy	
Title	Director	
Phone	515-309-2371	
E-mail	tkeninger@eastersealsia.org	

Person Responsible for completing this form if other than Program Director

Name (last, first)	Chance, Kim		
Title	Assistive Technology Center Coordinator		
Phone	515-309-2394		
E-mail	kchance@eastersealsia.org		

Certifying Representative

Name (last, first) Willis, Derrick	
Title	Director
Phone	319-384-5934
E-mail	derrick-willis@uiowa.edu

Module A: Change in Lead Agency or Implementing Entity

Does your Lead Agency contract with an Implementing Entity to carry out the Statewide AT Program on its behalf (From General Information)? $\underline{\underline{Yes}}$

1. Describe the mechanisms established to ensure coordination of activities and collaboration between the Implementing Entity and the state.

Easterseals Iowa Assistive Technology Program, Iowa's AT Implementing Entity, serves through an agreement and scope of work with the University of Iowa Center for Disabilities and Development at University of Iowa, Iowa's AT Lead Program. Easterseals Iowa Assistive Technology Program meets with the University of Iowa's Center for Disabilities and Development on a quarterly basis to review federal reporting data, strategic plans, and report on other topics of interest including grants, contracts, and new project research. The University of Iowa's Center for Disabilities and Development reviews and provides final approval State Plan and final approval for the Annual Progress Report.

- 2. Is the Lead Agency named in this State Plan a new or different Lead Agency from the one designated by the Governor in your previous State Plan?
- 3. 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?

Module B: Advisory Council

1. How many representatives of the designated State agency for Vocational Rehabilitation are members of the advisory 1 council? 2. How many representatives of the designated State agency for Vocational Rehabilitation for individuals who are blind are members of the advisory council (when there is such a separate VR agency for individuals who are blind)? 3. How many representatives of a state Center for Independent Living are members of the advisory council?. 3.1 Please provide the reason(s) the Advisory Council does not have this required agency representative member and describe the actions that will be taken to become in compliance for Question 3. The Iowa Center for Independent Living has an opening for Executive Director who would hold, and has held, this position in the past. Once this position is filled, this individual will sit on the AT Council. 4. How many representatives of the State workforce development board established under the Workforce Innovation and 1 Opportunity Act are members of the advisory council? 5. How many representatives of the State educational agency are members of the advisory council? 1 6. How many additional representatives of other agencies and/or organizations are members of the advisory council? 2 6.1 Description of additional representatives of other agencies and/or organizations are members of the advisory council. Representative of University of Iowa Center for Development and Disabilities. Representative of Iowa Department of Aging. 7. How many individuals with disabilities who use assistive technology or their family members or guardians are members of 7

Advisory Council Calculation

the advisory council?

Description	Number
Individuals with disabilities that use AT or their family members or guardians on the advisory council	
Total number of individuals on the advisory council	
Percentage	53.85%

8. 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.

Yes

Module C: Actual Expenditures and Budgeted Allocations

1. Actual Expenditures Carryover Year Close-out

In the following table provide the actual expenditure data for the <u>closed-out carryover fiscal year AT grant award (liquidated the previous December 31)</u>. 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 more than that initial 12 month period.

For the State Plan submitted in the spring of 2022, you will report the closed-out grant award for FY19. The grant began 10/1/2018 with the first year ending on 9/30/2019, the first carryover year ended on 9/30/2020 and the second carryover year ended on 9/30/2021 with the 3 month liquidation period ending 12/31/2021.

Actual Expenditures for Closed-out Carryover Year Award	Final Expenditures	Percentage	Requirements
a. All State Level Activities	\$287,974.00	61.20%	The AT Act required state level expenditures to be at least 60% of grant award. If flexibility is claimed, at least 70% is required.
b. All State Leadership Activities	\$180,654.00	38.39%	
c. Total Expenditures	\$468,628.00		
d. Total Award	\$470,545.00		
e. Lapsed Amount	\$1,917.00	0.41%	
f. Transition Training & Technical Assistance Set Aside	\$28,233.00	15.63%	The AT Act requires at least 5% of state leadership expenditures to be spent on transition activities.

Module C: Actual Expenditures and Budgeted Allocations (Continued...)

2. Actual YTD Expenditures and Budgeted Allocations for Preceding Year Award

In the following table provide year-to-date (YTD) obligated and liquidated expenditure data for the <u>preceding fiscal year AT grant award</u> 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 the State Plan submitted in the spring of 2022, you will report the closed-out grant award for FY20. The grant began 10/1/2019 with the first year ending on 9/30/2020, the first carryover year ended on 9/30/2021 and the second carryover year ended on 9/30/2022 with the 3 month liquidation period ending 12/31/2022.

The total grant award for was \$484,290.00

Actual & Planned Immediate Preceding Year Award Expenditures	YTD Obligated not Liquidated Expenditures YTD Liquidated Expenditures		Planned not yet Obligated Expenditures	Total
All State Level Activities	\$305,103.00	\$0.00	\$0.00	\$305,103.00
All State Leadership Activities	\$179,187.00	\$0.00	\$0.00	\$179,187.00
Total	\$484,290.00	\$0.00	\$0.00	\$484,290.00
Transition Training & Technical Assistance	\$29,057.00	\$0.00	\$0.00	\$29,057.00

Module D: State Level Activity Summary

1.	Which	State	Financing	Activities	dο	vou conduct?
1.	* * 111	State	rmancing	ACHVILLO	uυ	you conduct.

• Financial Loan

2. Which Reutilization Activities do you conduct?

- Device Exchange
- Device Reassignment or Open Ended Loan

3. Do you conduct Short-term Device Loans?

Yes

4. Do you conduct Device Demonstrations?

Yes

Module E: Financial Loan

1. Select the <u>one option</u> that best describes who conducts this activity. Other entities e.g. contractors (Others)
2. Select the <u>one option</u> that best describes from where this activity is conducted. One central location (Central)
3. Do you charge a fee for this activity? (This fee is separate from and addition to the financial loan made.) No
4. Identify the types of collaborations you have in place to conduct this activity.
Banks/Financial Institution (select any/all)
Independent Living Center (select any/all)
Easter Seals (select any/all)
Disability/Assistive Technology Organizations (select any/all)
Federal Entities/Agencies (select any/all)
State Entities/Agencies (select any/all)

Module E: Financial Loan (Continued...)

Local/Community Entities (select any/all)

Private Entities (select any/all)

Other (select any/all)

- · Have written agreement with this entity
- Provide financial support to this entity

Provide a description of the other collaborations.

Able Up Iowa provides the alternative financing program in the state of Iowa. They provide loans for Iowans to obtain Assistive Technology and housing modifications.

5. This activity offers the following types of assistance. (select all that apply – at least one is required)

Identify all types of loans the Statewide AT Program offers, regardless of whether any loans of that type are currently outstanding.

· Revolving loans

6. The lowest interest percentage for loans as established by the policies of the activity. 9.2500%

7. The highest interest percentage for loans as established by the policies of the activity. 14.2500%

8. The lowest loan amount (in dollars) provided as established by the policies of the activity. \$225.00

9. The highest loan amount (in dollars) provided as established by the policies of the activity. \$25000.00

10. Describe the activity.

Able Up Iowa provides the alternative financing program in the state of Iowa. They provide loans for Iowans to obtain Assistive Technology and housing modifications.

11. The online page for this specific activity can be found at: https://ableupiowa.org/

Module H: Device Exchange

1. Select the <u>one option</u> that best describes who conducts this activity. The Statewide AT Program (State AT)
2. Select the one option that best describes from where this activity is conducted. One central location (Central)
3. Do you charge a fee for this activity? No
4. Identify the types of collaborations you have in place to conduct this activity.
Banks/Financial Institution (select any/all)
Independent Living Center (select any/all)
Easter Seals (select any/all)
Have written agreement with this entity
Provide financial support to this entity
Disability/Assistive Technology Organizations (select any/all)
Federal Entities/Agencies (select any/all)
State Entities/Agencies (select any/all)

Module H: Device Exchange (Continued...)

Local/Community Entities (select any/all)
Private Entities (select any/all)
Other (select any/all)
5. Select the option that best describes what happens when a device is exchanged. (select all that apply)
• The transaction is direct consumer to consumer

6. Describe the activity.

Easterseals Iowa Assistive Technology Program utilizes an online service [AT4all], in partnership with various other state AT projects, to offer Iowa Assistive Technology Exchange services. Through this online platform, users can create an account free of charge and post Assistive Technology and related equipment for sale, marked with a price the user self-determines. Easterseals Iowa Assistive Technology Program staff offer support for users that are not able to coordinate posts independently and can troubleshoot for users via phone call through a toll-free number or TTY. This service is available to Iowans across the state, of all ages and all demographics.

7. The online page for this specific activity https://eastersealsia.at4all.com/ can be found at:

Module I: Device Refurbish and Reassignment and/or Open-ended Loan

1. Select the <u>one option</u> that best describes who conducts this activity. The Statewide AT Program (State AT)	
2. Select the <u>one option</u> that best describes from where this activity is conducted. One central location (Central)	
3. Do you charge a fee for this activity? Yes	_
. Identify the types of collaborations you have in place to conduct this activity.	
Banks/Financial Institution (select any/all)	
Independent Living Center (select any/all)	
Easter Seals (select any/all)	
Have written agreement with this entity	
 Provide financial support to this entity 	
Receive financial support from this entity	
Disability/Assistive Technology Organizations (select any/all)	
Federal Entities/Agencies (select any/all)	_
State Entities/Agencies (select any/all)	

Module I: Device Refurbish and Reassignment and/or Open-ended Loan (Continued...)

ocal/Community Entities (select any/all)	
rivate Entities (select any/all)	
ther (select any/all)	

5. Select the option(s) that describe how a reutilized device is provided to a recipient. (select all that apply)

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

6. Describe the activity.

Easterseals Iowa Assistive Technology Program hosts the Durable Medical Equipment (DME) Loan. This program accepts donated Durable Medical Equipment from across the state of Iowa offering the donor a receipt of the donation and requesting satisfaction feedback via a survey. Easterseals Iowa Assistive Technology Program Technician will sanitize in accordance with state and federal standards as well as thoroughly inspect for safety standards and refurbish as needed. The device is then tagged to identify specifications appropriate including when the device was donated, width, weight capacity, and any other necessary information. Requests for DME are accepted through an application that is available on the Easterseals Iowa website, which includes documentation from a healthcare provider to ensure proper fitting, seating, or positioning. Borrowers pick up the equipment onsite and receive an overview of safety standards and proper use protocols. Privacy Practices, satisfaction response, and payment are discussed during the face-to-face interaction. Payment is identified by devices and an overview of fees is also available on the Easterseals Iowa website. The equipment will remain with the borrower for as long as needed. The satisfaction survey is requested to be returned to Easterseals Iowa Assistive Technology Program. When equipment is no longer appropriate or needed, it can be returned via drop-off at Easterseals Iowa Camp Sunnyside. The State AT Program dollars do not fully cover the expenses related to recycling or refurbishing equipment therefore Easterseals Iowa utilizes charitable contributions to cover the gap.

7. The online page for this specific activity https://iowaat.org/selecting-and-obtaining-devices/how-to-obtain-a-device/can be found at:

Module J: Device Loan

1. Select the <u>one option</u> that best describes who conducts this activity. The Statewide AT Program (State AT)
2. Select the <u>one option</u> that best describes from where this activity is conducted. One central location (Central)
3. Do you charge a fee for this activity? No
I. Identify the types of collaborations you have in place to conduct this activity.
Banks/Financial Institution (select any/all)
Independent Living Center (select any/all)
Easter Seals (select any/all)
Have written agreement with this entity
 Provide financial support to this entity
Receive financial support from this entity
Disability/Assistive Technology Organizations (select any/all)
Federal Entities/Agencies (select any/all)
State Entities/Agencies (select any/all)

Module J: Device Loan (Continued...)

Local/Community Entities (select any/all)
Private Entities (select any/all)
Other (select any/all)

5. Select the option that describes how the majority of devices loaned are delivered to and returned from a borrower. (select one)

The majority of devices are shipped via mail or other delivery service

6. Describe the activity.

Easterseals Iowa Assistive Technology Program hosts the Lending Library at the Camp Sunnyside Location in Des Moines, Iowa. This service provides access to nearly 2,000 devices for a short-term, 30-day trial period loan. Individuals can view the inventory on the Iowa AT4all website and request loans directly through the platform. For individuals who are interested in meeting in person for a demonstration prior to the loan, an appointment can be made with one of the Easterseals Iowa Assistive Technology Program team members. This meeting can include conversation and informal assessment on what devices may be supportive for various tasks. Borrowers can be of all ages, any diagnosis, and from any area of the state. It is requested that devices be picked up in person but for those that are unable to do so, mailing devices can be requested. The AT State Program funds do not fully cover all expenses related to providing this service therefore Easterseals Iowa covers the gap. Easterseals Iowa Assistive Technology Program staff do research and connect with other agencies and professionals to discuss current market trends and devices recommended by therapists and Direct Support Professionals to ensure the inventory is vast and offers varieties of task-related devices that are comparable. Devices are posted on the AT4all website to offer borrowers information on the current market value, vendor, and other specifications of the devices. The inventory includes a wide range of categories including activities of daily living, recreation sport and leisure, communication and related devices, hearing devices, vision devices, computer and related devices, learning and cognition devices, and environmental adaptations. In addition to our general lending library services, partnering programs included educational entities that utilize an identified pool of devices via the AT4all platform to loan by their AT Professionals and utilize for comparison in education and independent living situations within their agency. This includes a pilot project with one Area Educational Agency in Iowa that partners to demonstrate and loan Permobil Minis, with the oversight of their onsite therapists. All devices in partnering program pools are inspected on an annual basis to review for commercial availability, safety standards, and sanitation protocol reviews.

7. The online page for this specific activity www.iowaat.org can be found at:

Module K: Device Demonstration

1. Select the one option that best describes who conducts this activity. The Statewide AT Program (State AT)
2. Select the <u>one option</u> that best describes from where this activity is conducted. One central location (Central)
3. Do you charge a fee for this activity? No
. Identify the types of collaborations you have in place to conduct this activity.
Banks/Financial Institution (select any/all)
Independent Living Center (select any/all)
Easter Seals (select any/all)
Have written agreement with this entity
Provide financial support to this entity
Receive financial support from this entity
Disability/Assistive Technology Organizations (select any/all)
Federal Entities/Agencies (select any/all)
State Entities/Agencies (select any/all)

Module K: Device Demonstration (Continued...)

Local/Community Entities (select any/all)
Private Entities (select any/all)
Other (select any/all)

5. Describe the activity.

Easterseals Iowa Assistive Technology Program hosts the Demonstration Center in Des Moines, Iowa. This center holds nearly 2,000 devices available for a hands-on demonstration free of charge. Individuals interested in a demonstration can schedule a time to meet face-to-face and discuss Assistive Technology as it relates to certain tasks. An up-to-date inventory is maintained on the AT4all website to provide Iowans with the variety of devices available. Inspection is performed on an annual basis to ensure all devices are commercially available and in proper working condition. This allows multiple team members to access the inventory with confidence that the items are available for demonstration. The AT State Program funds do not fully cover all expenses related to providing this service therefore Easterseals Iowa covers the gap. In addition to our general demonstration services, partnering programs included educational entities and area agencies on aging that utilize an identified pool of devices via the AT4all platform to loan by their AT Professionals and direct support staff. These devices and demonstration kits are then utilized for comparison in education and independent living situations within their agencies. This includes a pilot project with one Area Educational Agency in Iowa that partners to demonstrate and loan Permobil Minis, with the oversight of their onsite therapists, and a pilot project with one area agency on aging. All devices in partnering program pools are inspected on an annual basis to review for commercial availability, safety standards, and sanitation protocol reviews.

6. The online page for this specific activity www.iowaat.org; eastersealsia.at4all.com **can be found at:**

Module L: Training

• Have written agreement with this entity

Banks/Financial Institution (select any/all)	
Independent Living Center (select any/all)	
Easter Seals (select any/all)	
Have written agreement with this entity	
Provide financial support to this entity	
Receive financial support from this entity	
Disabilita / Assistina Tashas lasar Oussailatina (salast sus	(AII)
Disability/Assistive Technology Organizations (select any	'au')
Federal Entities/Agencies (select any/all)	
State Entities/Agencies (select any/all)	

Module L: Training (Continued...)

Local/Community Entities (select any/all)
Private Entities (select any/all)
Other (select any/all)

2. Provide a short description of at least one and no more than three planned training activities. One of the activities described must be planned Information and Communication Technology (ICT) accessibility training that will provide the required ICT Training performance measures. If 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)

Easterseals Iowa Assistive Technology Program implemented ICT services in 2019 and expanded services to include a free online course to train registrants in ICT standards and general accessibility tips. Quarterly statewide webinars are presented to general public attendees including vocational rehabilitation and other partners that include ICT topics. Remediation is offered through the Assistive Technology Program.

Planned Transition Training or Other Training Activity (optional)

Easterseals Iowa Assistive Technology Program partners with agencies to provide training and support for transitional needs. These include Money Follows the Person (MFP) which is a Partnership for Community Integration Program and ASK Resource Center which is Iowa's parent training and information center for families of children with disabilities. In collaboration with these two entities and several others, multiple trainings and individualized discussions on the impact of Assistive Technology in transitional planning are held. Easterseals Iowa Assistive Technology Program has also developed a partnership with Able Gamers who have donated switches that can be utilized for accessible gaming methods. Additionally, a collaboration with ASK Resource Center has been initiatied to identify additional gaps of AAC usage amongst transition age individuals.

Planned Statewide Conference or Other Training Activity (optional)

Easterseals Iowa Assistive Technology Program implemented virtual educational presentations throughout the COVID-19 Pandemic via Zoom. Quarterly zoom presentations continued into 2021 and 2022. An additional in-person and virtual event have been scheduled for fall 2022 which will feature Terease Wilkomm and her AT in Minutes presentation. This conference will offer 8.5 contact hours for professionals but also invite individuals with disabilities and students by offering a scholarship to reduce costs.

3. The online page for this specific activity www.iowaat.org can be found at:

Module M: Technical Assistance

1. Identify the types of collaborations you have in place to conduct this activity.
Banks/Financial Institution (select any/all)
Independent Living Center (select any/all)
Easter Seals (select any/all)
Have written agreement with this entity
Provide financial support to this entity
Receive financial support from this entity
Disability/Assistive Technology Organizations (select any/all)
Federal Entities/Agencies (select any/all)
State Entities/Agencies (select any/all)
<u>J</u>

Module M: Technical Assistance (Continued...)

Local/Community Entities (select any/all)	
Private Entities (select any/all)	
Other (select any/all)	_

2. 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)

In collaboration with the Iowa Department of Public Health and the University of Iowa's Center for Disabilities and Development, we worked with disability community providers to enrich their efforts to support persons with intellectual disabilities and their health and wellness activities, with the use of AT, along with ICT training. We met with organizations and specific persons with Intellectual Disabilities to explore Assistive Technology solutions that could be provided to encourage movement and better nutrition. This has been an ongoing project from 2019-2022 FY.

Planned Other Technical Assistance Activity (optional)

Easterseals Iowa Assistive Technology Program team members participated in the Liveable Homes Coalition which drafted legislation to include funding assistance for Iowans in need of housing modifications. The legislation was not passed during the 20-21 FY but is included in the 21-22 FY legislative activity and is awaiting passage at the conclusion of the session.

Module N: Public Awareness

Identify the types of collaborations you have in place to conduct this activity. Banks/Financial Institution (select any/all)	
Independent Living Center (select any/all)	
Easter Seals (select any/all)	
Have written agreement with this entity	
Provide financial support to this entity	
Receive financial support from this entity	
Disability/Assistive Technology Organizations (select any/all)	
Federal Entities/Agencies (select any/all)	
State Entities/Agencies (select any/all)	

Module N: Public Awareness (Continued...)

Local/Community Entities (select any/all)
Private Entities (select any/all)
Other (select any/all)

2. 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)

Easterseals Iowa Assistive Technology Program engages in quarterly statewide webinars that are open to the general public for attendance and are recorded for access in the future. On average 50 participants receive either the information via recorded or live format and multiple relationships have been developed as a result. Interest in more information on Assistive Technology also resulted in the development of an AT 101 training through the iSpring online platform, this was piloted internally 2021-2022 FY and will be implemented externally and with a secondary unit, AT 102, 2022-2023 FY.

Planned Other Public Awareness Activity (optional)

Easterseals Iowa Assistive Technology Program will welcome Therese Wilkomm in the fall of 2022 for an onsite AT Maker workshop that will host 100 participants onsite and an unlimited registration virtually. This training will provide participants with an understanding of Assistive Technology, including a demonstration of over 100 devices. Participants will also become more aware of materials to use for creating AT DIY.

Module O: Information and Assistance

. Identify the types of collaborations you have in place to conduct this activity.	
Banks/Financial Institution (select any/all)	
	_
Independent Living Center (select any/all)	
Easter Seals (select any/all)	
Have written agreement with this entity	
Provide financial support to this entity	
Disability/Assistive Technology Organizations (select any/all)	
Federal Entities/Agencies (select any/all)	
State Entities/Agencies (select any/all)	

Module O: Information and Assistance (Continued...)

Local/Community Entities (select any/all)
Private Entities (select any/all)
Other (select any/all)

2. Describe the activity

Easterseals Iowa Assistive Technology Program has one regional location that has one part-time staff that supports the majority of information and assistance related calls, emails, and inquiries. The Program's remaining 7 staff devote a portion of their time to providing information and assistance as well. An inquiry can be submitted via the toll-free phone number, TTY phone number, AT program general inquiry email, Easterseals Iowa general inquiry email, or by other individuals or entities. Our policy is to respond to all inquiries by the end of the following business day.

Assurances and 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

As the Certifying Representative of the Lead Agency for the State of , I hereby assure the following:

- 1. The Lead Agency prepared and submitted this State Plan on behalf of the State of IA.
- 2. 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.
- 3. The State agency has authority under State law to perform the functions of the State under this program.
- 4. The State legally may carry out each provision of this plan.
- 5. All provisions of this plan are consistent with State law.
- 6. 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.
- 7. The State officer who submits this plan, specified by title in this certification, has authority to submit this plan.
- 8. The agency that submits this plan has adopted or otherwise formally approved this plan.
- 9. The plan is the basis for State operation and administration of the program.
- 10. The Lead Agency will maintain and evaluate the program under this State Plan.
- 11. 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.
- 12. The Lead Agency will submit the annual progress report on behalf of the State.
- 13. 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.
- 14. The Lead Agency will control and administer the funds received through the grant.
- 15. The Lead Agency will make programmatic and resource allocation decisions necessary to implement the State Plan.
- 16. 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.
- 17. The Lead Agency will ensure conformance with all applicable Federal and State accounting requirements.
- 18. 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.
- 19. 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.
- 20. 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.
- 21. 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)
- 22. 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)
- 23. 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.
- 24. 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.