



National Assistive Technology Act Data System
State Plan - Full Report
Pennsylvania 2021

General Information

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

State AT Program Title	Pennsylvania's Initiative on Assistive Technology dba TechOWL
State AT Program URL	https://techowlpa.org
Mailing Address	1301 Cecil B. Moore Ave., Ritter Annex 430
City	Philadelphia
State	PA
Zip Code	19122
Program Email	TechOWL@temple.edu
Phone	800-204-7428
TTY	711

Lead Agency

Agency Name	Institute on Disabilities/UCEDD at Temple University
Mailing Address	1301 Cecil B. Moore Ave., Ritter Annex 430
City	Philadelphia
State	PA
Zip Code	19122
Program URL	https://techowlpa.org

Implementing Entity

Does your Lead Agency contract with an Implementing Entity to carry out the Statewide AT Program on its behalf? N/A	
Name of Implementing Agency	
Mailing Address	

City	
State	
Zip Code	
Program URL	

General Information (Continued...)

Program Director and Other Contacts

Program Director for State AT Program (last, first)	Singleton, Kim
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Program Director at Lead Agency (last, first)	Gould-Taylor, Sally
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Primary Contact at Implementing Agency (last, first) - If applicable	
Title	
Phone	
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Person Responsible for completing this form if other than Program Director

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Title	Assistant Director
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Certifying Representative

Name (last, first)	Mitchell, Karen
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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)? No
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? No
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? No

Module B: Advisory Council

1. How many representatives of the designated State agency for Vocational Rehabilitation are members of the advisory council? 0
1.1 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 1.
 Representative from VR left their position. We have not received confirmation of new appointee.
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)? 0
3. How many representatives of a state Center for Independent Living are members of the advisory council?. 1
4. How many representatives of the State workforce development board established under the Workforce Innovation and Opportunity Act are members of the advisory council? 1
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.
 PEAL (Parent Education & Advocacy) Center The Arc of Pennsylvania
7. How many individuals with disabilities who use assistive technology or their family members or guardians are members of the advisory council? 9

Advisory Council Calculation

Description	Number
Individuals with disabilities that use AT or their family members or guardians on the advisory council	9
Total number of individuals on the advisory council	14
Percentage	64.29%

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 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 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	\$481,292.00	65.00%	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	\$259,157.00	35.00%	
c. Total Expenditures	\$740,449.00		
d. Total Award	\$740,449.00		
e. Lapsed Amount	\$0.00	0.00%	
f. Transition Training & Technical Assistance Set Aside	\$18,141.00	7.00%	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 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 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 **\$767,598.00**

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	\$249,469.00	\$249,469.00	\$0.00	\$498,938.00
All State Leadership Activities	\$134,330.00	\$134,330.00	\$0.00	\$268,660.00
Total	\$383,799.00	\$383,799.00	\$0.00	\$767,598.00
Transition Training & Technical Assistance	\$9,071.00	\$9,070.00	\$0.00	\$18,141.00

Module D: State Level Activity Summary

1. Which State Financing Activities do you conduct?

- Other State Financing that directly provides AT (telecommunications programs, etc.)
- Other State Financing that creates AT savings (cooperative buying programs, etc.)

2. Which Reutilization Activities do you conduct?

- Device Reassignment or Open Ended Loan

3. Do you conduct Short-term Device Loans?

Yes

4. Do you conduct Device Demonstrations?

Yes

Module F: Other State Financing Activities that Directly Provides AT

1. Which of the following activity/activities are conducted? (select all that apply)

Identify all types of other state financing programs that directly provide AT that are conducted.

- Telecommunications Equipment Distribution Program (EDP)-State
- Deaf/Blind Telecommunications EDP-Federal
- Last Resort Fund
- Other (Describe)

Provide a description of the other activity/activities conducted.

Distribute tablets to marginalized and underserved communities and populations, with the goal of improving health equity, COVID-19 information, and access to telehealth.

2. Select the one option that best describes who conducts this activity/activities.

Both the Statewide AT Program and other entities/contractors (Both)

3. Select the one option that best describes from where this activity/activities is conducted.

A combination of a central location and regional sites (Combination)

4. Do you charge a fee for this activity/activities? (select one)

No

5. Identify the types of collaborations you have in place to conduct this activity/activities.

Banks/Financial Institution (select any/all)

Independent Living Center (select any/all)

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

Easter Seals (select any/all)

Disability/Assistive Technology Organizations (select any/all)

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

Federal Entities/Agencies (select any/all)

- Have written agreement with this entity
- Receive financial support from this entity

State Entities/Agencies (select any/all)

- Have written agreement with this entity
- Receive financial support from this entity

Module F: Other State Financing Activities that Directly Provides AT (Continued...)

Local/Community Entities (select any/all)

Private Entities (select any/all)

Other (select any/all)

- Receive financial support from this entity

Provide a description of the other collaborations.

Last resort fund began with funds from a bequest.

6. Describe the activity/activities.

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 wireless devices to Pennsylvanians 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 Deaf-Blind and meet the program’s eligibility requirements. All funding used to purchase this equipment is provided by state and federal sources outside of the AT Act. Another program we administer is called Connect with Tech. Funded by a grant from the Pennsylvania Department of Health and the CDC, Connect with Tech’s goal is to improve health equity, COVID-19 information, and access to telehealth for marginalized and underserved communities and populations. The project provides each eligible person an Android tablet, protective case, stylus, and earbuds. The tablets arrive ready to be used, and If needed, a Tech Coach is available to any recipient who needs a bit more help. We have also been able to provide some prepaid hotspots to some recipients who do not have internet. All funding used to purchase this equipment is provided by state sources outside of the AT Act. The Virginia 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 originating 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/or other eligibility requirements.

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

- <https://techowlpa.org/service/tddp>
- <https://techowlpa.org/service/deafblind>
- <https://techowlpa.org/service/help-with-pay>
- <https://techowlpa.org/connect-with-tech/>

Module G: Other State Financing Activities that Create AT Savings

1. Which of the following activity/activities are conducted? (select all that apply)

Identify all types of other state financing programs that create AT savings that are conducted.

- AT Fabrication Program

2. Select the one option that best describes who conducts this activity/activities.

The Statewide AT Program (State AT)

3. Select the one option that best describes from where this activity/activities is conducted.

One central location (Central)

4. Do you charge a fee for this activity/activities? (select one)

No

5. Identify the types of collaborations you have in place to conduct this activity/activities.

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 G: Other State Financing Activities that Create AT Savings (Continued...)

Local/Community Entities (select any/all)

Private Entities (select any/all)

Other (select any/all)

- Receive financial support from this entity

Provide a description of the other collaborations.

Program is supported

6. Describe the activity/activities.

TechOWL has a repository of 22 3D printed tools that Pennsylvanians can request from our online catalog. People can request these items from our website. 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. This work is supported by donations of money and supplies, as well as funds received for fee-for-service work that is outside of the AT Act activities.

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

<https://techowlpa.org/create>

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

1. Select the one option that best describes who conducts this activity.

Both the Statewide AT Program and other entities/contractors (Both)

2. Select the one option that best describes from where this activity is conducted.

A combination of a central location and regional sites (Combination)

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)

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

Easter Seals (select any/all)

Disability/Assistive Technology Organizations (select any/all)

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

Federal Entities/Agencies (select any/all)

State Entities/Agencies (select any/all)

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

Local/Community Entities (select any/all)

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

Private Entities (select any/all)

Other (select any/all)

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

- Device ownership is transferred to the recipient

6. Describe the activity.

Our statewide device reuse program is conducted by our main location and all our subcontracted Assistive Technology Resource Centers (ATRCs). 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 recipients pick up their devices from the ATRC's location, but we 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 is required.

7. The online page for this specific activity can be found at: <https://techowlpa.org/reep/>

Module J: Device Loan

1. Select the one option that best describes who conducts this activity.

Both the Statewide AT Program and other entities/contractors (Both)

2. Select the one option that best describes from where this activity is conducted.

A combination of a central location and regional sites (Combination)

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)

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

Easter Seals (select any/all)

Disability/Assistive Technology Organizations (select any/all)

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

Federal Entities/Agencies (select any/all)

State Entities/Agencies (select any/all)

- Have written agreement with this entity
- Receive financial support from this entity

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.

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 begin a loan request by using an online device loan system in NATADS, where they can search the online catalog and select items to borrow. They can also get help from AT program or ATRC staff. ATLL requests are processed by our central inventory location. 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 average length of the device loan is 5 weeks, but the loan period can be extended, depending on the circumstances. 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; collect satisfaction and performance measures, 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. A grant from the Pennsylvania Department of Aging has enabled us to add hundreds of iPad tablets, apps, Chromebooks, and Wi-Fi Hotspots to our AT Lending Library. Borrowers will use these devices to mitigate social isolation, providing access to remote services, telehealth appointments, grocery and meal deliveries, and video calls, as well as other services. ATRCs are available to provide support for devices. Although the ATLL 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.

7. The online page for this specific activity can be found at: <https://techowlpa.org/library>

Module K: Device Demonstration

1. Select the one option that best describes who conducts this activity.

Both the Statewide AT Program and other entities/contractors (Both)

2. Select the one option that best describes from where this activity is conducted.

A combination of a central location and regional sites (Combination)

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)

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

Easter Seals (select any/all)

Disability/Assistive Technology Organizations (select any/all)

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

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.

All ATRCs are required to perform device demonstrations. Demonstrations may be conducted at the ATRC, or another mutually agreed upon location in the community. As funds (and ATRCs space) permit, our program provides equipment to ATRCs to enhance their onsite collection of devices for demonstration. 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 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.

6. The online page for this specific activity can be found at: <https://techowlpa.org/demo/>

Module L: Training

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)

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

Easter Seals (select any/all)

Disability/Assistive Technology Organizations (select any/all)

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

Federal Entities/Agencies (select any/all)

State Entities/Agencies (select any/all)

- Have written agreement with this entity
- Receive financial support from this entity

Module L: Training (Continued...)

Local/Community Entities (select any/all)

- Have written agreement with this entity
- Receive financial support from this entity

Private Entities (select any/all)

- Have written agreement with this entity
- Receive financial support from this entity

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)

TechOWL has provided and will provide ICT trainings upon request. We are always looking for opportunities to collaborate with other entities to further our ICT trainings.

Planned Transition Training or Other Training Activity (optional)

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. Since March of 2020, ACES added online seminars to meet AAC users' needs during the pandemic. In the future, we are looking forward to collaborating shoulder-to-shoulder with AAC users as we plan the future of ACES. Also, all ATRCs are required to conduct at least one transition training per year in their respective regions.

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 commonwealth), employers, and agencies and organizations, generally at the location of their choice or virtually. Proposals to conduct training at local, state, regional and national conferences are invited/submitted regularly, and conducted on location at the conference site, or virtually. In instances where an organization requests multiple or highly specialized trainings, an honorarium may be requested.

3. The online page for this specific activity can be found at: <https://techowlpa.org/training/>

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)

Disability/Assistive Technology Organizations (select any/all)

Federal Entities/Agencies (select any/all)

State Entities/Agencies (select any/all)

- Have written agreement with this entity
- Receive financial support from this entity

Module M: Technical Assistance (Continued...)

Local/Community Entities (select any/all)

- Have written agreement with this entity
- Receive financial support from this entity

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)

TechOWL staff participates 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.

Module N: Public Awareness

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)

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

Easter Seals (select any/all)

Disability/Assistive Technology Organizations (select any/all)

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

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)

TechOWL will partner with community organizations to host a public event where attendees will learn about current assistive technologies and participate in a town hall with state legislators.

Planned Other Public Awareness Activity (optional)

TechOWL will continue and grow our robust social media presence, providing information about assistive technology and disability advocacy to an increasing audience on TikTok, Facebook, Instagram, and Twitter.

Module O: Information and 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)

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

Easter Seals (select any/all)

Disability/Assistive Technology Organizations (select any/all)

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

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

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. ATRCs can share resources and experiences with each other via an online platform provided by TechOWL.

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 PA.
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.