

National Assistive Technology Act Data System

State Plan - Full Report

Colorado 2024

General Information

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

State AT Program Title	Assistive Technology Program of Colorado				
State AT Program URL	www.ucdenver.edu/cide				
Mailing Address	1224 5th St., The Hub				
City	Denver				
State	Colorado				
Zip Code	80204				
Program Email	cide@ucdenver.edu				
Phone	3033151280				
ТТҮ					

Lead Agency

Agency Name	Center for Inclusive Design and Engineering				
Mailing Address	1224 5th St., The Hub				
City	Denver				
State	СО				
Zip Code	80204				
Program URL	www.ucdenver.edu/cide				

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)	Melonis, Maureen				
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Program Director at Lead Agency (last, first)	Melonis, Maureen				
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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

Name (last, first)	Beems, Julia				
Title	Outreach Coordinator				
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Certifying Representative

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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)?	<u>No</u>
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 council?	e agency for Vocational Rehabilitation are members of the advisory	1
	e agency for Vocational Rehabilitation for individuals who are blind are a separate VR agency for individuals who are blind)?	0
3. How many representatives of a state Center for In	ndependent Living are members of the advisory council?.	1
4. How many representatives of the State workforce Opportunity Act are members of the advisory counc	development board established under the Workforce Innovation and sil?	1
the State AT Program and is operated by a non-prof	FP) for assistive technology in your state/territory that is separate from fit entity?	1 No
6.1. If yes, how many representatives of a council?	an alternative financing program (AFP) are members of the advisory	0
	ies and/or organizations are members of the advisory council?	1
Medicaid state agency	0	
State agency administering Developmental Disabilities Act	0	
State agency administering or organization fun	ded 0	
under Older Americans Act Organization representing veterans	0	
University Center for Excellence in Developmer Disabilities (UCEDD)	ntal 0	
State Protection and Advocacy System	1	
State Council on Developmental Disabilities	0	
8. How many additional representatives of other age Early Intervention/Child Services state 0	encies and/or organizations are members of the advisory council?	1
agency State Deaf/Hard of Hearing 1 Commission/Office		
State Insurance agency 0		
State Library/Secretary of 0		
State/Talking Books agency State ADA Office/Disability 0 Commission/Advocacy Office		
State Legislators 0		
State Parent Training Information 0 Center (IDEA funded)		
Other (description required in text box 0 below) Describe Other Agency		
9. How many individuals with disabilities who use as the advisory council?	ssistive technology or their family members or guardians are members of	7

Advisory Council Calculation

Description	Number
Individuals with disabilities that use AT or their family members or guardians on the advisory council	7
Total number of individuals on the advisory council	13
Percentage	53.85%

10. In accordance with section 4(c)(2) of the AT Act of 1998, as amended our state has a consumer-majority advisory council Yes 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.

11. Procedures are in place to ensure that the Advisory Council members are geographically representative of the State and reflects the diversity of the State with respect to race, ethnicity, age, and types of disabilities, and users of types of services that an individual with a disability may receive, including home and community-based

services (as defined in section 9817 (a)(2) of the American Rescue Plan Act of 2021 (42 U.S.C. 1396d not)), vocational rehabilitation services (as defined in section 7 of the Rehabilitation Act of 1973 (29 U.S.C. 705)) and services through the Individuals with Disabilities Education Act (20 U.S.C. 1400 et seq.)

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</u> <u>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 2024, you will report the closed-out grant award for FY21. The grant began 10/1/2020 with the first year ending on 9/30/2021, the first carryover year ended on 9/30/2022 and the second carryover year ended on 9/30/2023 with the 3 month liquidation period ending 12/31/2023.

Actual Expenditures for Closed-out Carryover Year Award	Final Expenditures	Percentage	Requirements
a. All State Level Activities	\$379,912.00	72.00%	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	\$147,744.00	28.00%	
c. Total Expenditures	\$527,656.00		
d. Total Award	\$527,656.00		
e. Lapsed Amount	\$0.00	0.00%	
f. Transition Training & Technical Assistance Set Aside	\$7,490.00	5.07%	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</u> 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 2024, you will report year to date FY22 grant award expenditures. This grant began 10/1/2021 with the initial award year ending on 9/30/2022 and the carryover year ended on 9/30/2023. Many programs received a no cost extension which extended the obligation date to 9/30/2024

The total grant award for was \$545,456.00

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	\$0.00	\$387,273.00	\$0.00	\$387,273.00
All State Leadership Activities	\$0.00	\$158,183.00	\$0.00	\$158,183.00
Total	\$0.00	\$545,456.00	\$0.00	\$545,456.00
Transition Training & Technical Assistance	\$0.00	\$7,998.00	\$0.00	\$7,998.00

Module D: State Level Activity Summary

1. Which State Financing Activities do you conduct? None

Please indicate if flexibility or comparability is claimed for State Financing activities. Flexability

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 H: Device Exchange

1. Select the one option 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)

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

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.

The Assistive Technology Program of Colorado supports the AT Exchange, an online tool that allows individuals to post devices and equipment "as is" to sell or to give away to individuals in need. The program also supports SWAAAC Swap, a place to exchange, swap and/or repurpose assistive technology throughout the Colorado Public School system and Tech Trade, a similar program for the Early Intervention system. For any device or equipment obtained through these exchange programs, it is recommended that thier choice should be based on a professional evaluation and recommendations made in conjunction with an Assistive Technology Specialist to assure proper usage and fit.

7. The online page for this specific activity
can be found at:https://www.ucdenver.edu/centers/center-for-inclusive-design-and-engineering/community-
engagement/colorado-assistive-technology-act-program/assistive-technology-exchange

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

2. Select the <u>one option</u> 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)

Easter Seals (select any/all)

Disability/Assistive Technology Organizations (select any/all)

Federal Entities/Agencies (select any/all)

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

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

Local/Community Entities (select any/all)

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.

The Assistive Technology Program of Colorado provides open-ended loans of out-of-date used equipment that is no longer needed as part of our clinic, SWAAAC, and Early Intervention programs to individuals and schools. As our clinicians learn of clients who may need a device they are offered at no cost. As equipment becomes out of date in the loan banks, it is also made available to school districts and early childhood programs at no cost.

7. The online page for this specific activity $$\rm N/A$$ 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)

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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

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)

- 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.

The Assistive Technology Program of Colorado AT Loan Bank targets a variety of consumers and the professionals who work with them. A contract with the Colorado Department of Education supports the primary inventory worth over a million dollars. It includes low to high tech equipment to ensure best practices and allows borrowers the opportunity to trial equipment before making a purchasing decision when AT is being considered for a student. With the high cost of many assistive technology devices, this is a valuable resource for school districts throughout Colorado and saves thousands of dollars each year by enabling a purchase decision to be made after trialing the equipment. In addition, the loan bank supports children in Colorado receiving early intervention services. Assistive technology can be borrowed by an assistive technology specialist in the early intervention programs. These specialists work with the child's team to evaluate their assistive technology needs and trial equipment that may be appropriate. All items in the loan bank can be viewed through an online storefront system that catalogs the equipment, making searches easier and more accurate. Borrowers can sort by disability type, area of need, age, etc. to identify options for borrowing. The loan bank also supports borrowing of equipment by AT professionals utilizing devices for device demonstrations or loan. For adults, the Assistive Technology Program of Colorado supports a loan system called the AT Network. This system allows professionals to borrow AT kits, organized by category. The loan program is a highly successful program offering access to devices for a variety of individuals to trial in their natural environments before purchase. The loan bank system utilizes the State Library Courier Services which ensures the timely delivery of devices to library locations in schools and communities throughout the state. The items are returned utilizing this same system. At this time there are no fees to borrow equipment. A small annual fee is required of communities that do not currently utilize the library courier system. In addition, some individuals choose to pick up items directly which is also an option. All borrowers sign a loan agreement regarding care and timely return.

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

https://www.ucdenver.edu/centers/center-for-inclusive-design-and-engineering/community-engagement/tech-for-tykes---early-intervention-colorado/loan-library

Module K: Device Demonstration

1. Select the <u>one option</u> that best describes who conducts this activity.

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

2. Select the <u>one option</u> 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)

Easter Seals (select any/all)

Disability/Assistive Technology Organizations (select any/all)

Federal Entities/Agencies (select any/all)

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

Module K: Device Demonstration (Continued...)

Local/Community Entities (select any/all)

Private Entities (select any/all)

Other (select any/all)

5. Describe the activity.

Staff provide device demonstrations on a variety of equipment with individuals upon request. Device demonstrations offer individuals an opportunity to have hands-on exploration of equipment with a knowledgeable professional. Through these demonstrations, individuals can make informed decisions. Demonstrations are offered by appointment predominantly at our central location but are also provided in the community in-person or via web-based communications. Data is collected on each demonstration regarding satisfaction and whether the individual felt the device would meet their needs. In addition to these demonstrations, numerous professionals in the public schools in Colorado provide demonstrations on a regular basis. These events are more difficult to collect data on but survey data received indicates high satisfaction.

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

https://www.ucdenver.edu/centers/center-for-inclusive-design-and-engineering/community-engagement/colorado-assistive-technology-act-program

Module L: Training/Educational Activities

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)

State Units on Aging (select any/all)

Area Agencies on Aging (select any/all)

State Departments of Education (select any/all)

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

Local School Districts (select any/all)

Institutions of Higher Education (select any/all)

Hospitals and Health Care Systems (select any/all)

Early Intervention Programs (select any/all)

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

Federal Entities/Agencies (select any/all)

Module L: Training (Continued...)

Local/Community Entities (select any/all)

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)

ICT Accessibility Training - The Assistive Technology Program of Colorado will provide multiple trainings/webinars on how to use a variety of digital devices for seniors and individuals receiving Medicaid services. The trainings will cover accessibility techniques and resources to support individuals who previously have not had access to these devices and how to use accessibility features to improve successful usage.

Planned Transition Training or Other Training Activity (optional)

The Assistive Technology Program of Colorado will provide at least one conference breakout session at the annual Transition conference targeting children with disabilities transitioning from high school. The Talk(s) will cover resources for AT consideration before, during and after transition. The presenter will also share information on the ongoing memorandum of understanding between the Division of Vocational Rehabilitation and the Colorado Department of Education regarding device reuse and exchange between programs. This memorandum of understanding was initiated by our Assistive Technology Act Program team.

Planned Statewide Conference or Other Training Activity (optional)

The Assistive Technology Program of Colorado will host a statewide conference on assistive technology in June 2025, targeting the AT needs of professionals serving students with disabilities. Over thirty breakout sessions will be included. Nationally recognized presenters will be features and a vendor product exhibition will be available to attendees.

3. The online page for this specific activity https://www.ucdenver.edu/centers/center-for-inclusive-design-and-engineering/community-engagement/assistive-tech-in-k-12/professional-development/swaaac-events

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)

State Agency on Aging (select any/all)

Area Agencies on Aging (select any/all)

State Departments of Education (select any/all)

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

Local School Districts (select any/all)

Hospitals and/or Health Systems (select any/all)

Federal 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)

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)

The Assistive Technology Program of Colorado will provide monthly technical assistance to the Colorado Department of Education Transition Team both by email and face to face consultations. The program collaborates regularly with the transition team and the transition team leader serves on the advisory board for the Colorado program.

Planned Other Technical Assistance Activity (optional)

The Assistive Technology Program of Colorado will provide technical assistance to the more than 4000 licensed child care programs in the state regarding accommodations and modifications they might consider in order to better support young children with delays and disabilities in their programs.

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)

Easter Seals (select any/all)

Disability/Assistive Technology Organizations (select any/all)

Entities in the statewide and local workforce development systems (select any/all)

State Vocational Rehabilitation Agencies (select any/all)

• Have written agreement with this entity

Aging and Disability Resource Centers (select any/all)

Elementary and Secondary schools (select any/all)

Federal Entities/Agencies (select any/all)

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

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)

The Assistive Technology Program of Colorado will host a Vendor expo to provide an opportunity for the general public and professionals working with them to learn about technology to increase independence. A variety of vendors will be invited to exhibit different types of technology. https://www.ucdenver.edu/centers/center-for-inclusive-design-and-engineering/community-engagement/assistive-tech-in-k-12/professional-development/colorado-assistive-technology-expo

Planned Other Public Awareness Activity (optional)

The Assistive Technology Program of Colorado staff will continue to provide presentations and exhibits for national, state and local organizations on the value of assistive technology and the services we provide to assist in the recommendations of and acquisition of the most appropriate devices. We also have a quarterly newsletter and active social media accounts with Facebook, X, and Linkedin where we share program highlights and updates, AT resources, and program events.

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)

Easter Seals (select any/all)

Disability/Assistive Technology Organizations (select any/all)

State Agency on Aging (select any/all)

Area Agencies on Aging (select any/all)

State Aging and Disability Resource Center/No Wrong Door System (select any/all)

State Public Health Department (select any/all)

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

State Departments of Education (select any/all)

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

Elementary and Secondary School Systems (select any/all)

Institutions of Higher Education(select any/all)

Early Intervention Programs (select any/all)

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

Hospitals and/or Health Systems (select any/all)

Federal Entities/Agencies (select any/all)

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

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

Local/Community Entities (select any/all)

Private Entities (select any/all)

• Have written agreement with this entity

Other (select any/all)

2. Describe the activity

The Assistive Technology Program of Colorado utilizes our team of AT faculty, clinicians (Occupational Therapists, Physical Therapists and Speech Language Pathologists) and staff with multiple years of experience in the field to provide information and assistance via email and phone calls. Our staff regularly receive updated training to stay abreast of changes in assistive technology. Consumers can contact our program through our web site, phone, and email or speak directly with a staff person. Messages are responded to within one business day. When contacting a consumer, the staff has routine questions to ask to ensure that we have all of the information necessary to connect the consumer with appropriate resources. The expertise of the staff about AT-related resources in the state is backed up by numerous digital resources sorted by topic. If staff is not able to respond to a request for assistance alone, the request is brought to the weekly staff meeting for additional input and action. We also work closely with several state agencies to support their staff and constituents with information and assistance. The process is the same for these entities.

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 Colorado.
- 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.
- 25. The Lead Agency or Implementing Entity will conduct outreach to and as appropriate, collaborate with other State agencies that receive Federal funding for assistive technology including
 - a. The State educational agency receiving assistance under the Individuals with Disabilities Education Act (20 U.S.C.1400 et seq.);
 - b. The State vocational rehabilitation agency receiving assistance under title I of the Rehabilitation Act of 1973 (29 U.S.C. 720 et seq.);
 - c. The agency responsible for administering the State Medicaid program under title XIX of the Social Security Act (42 U.S.C. 1396 et seq.); The State agency receiving assistance under the Older Americans Act of 1965 (42 U.S.C. 3001 et seq.); and
 - d. Any other agency in a State that funds assistive technology.