



**MICHIGAN CENTERS
FOR
INDEPENDENT LIVING**

A Report to the Legislature

October 1, 2005-September 30, 2006

**Submitted by:
Michigan Statewide
Independent Living Council
&
Disability Network/Michigan**

MICHIGAN STATEWIDE INDEPENDENT LIVING COUNCIL

DISABILITY NETWORK/MICHIGAN

To:

- **Members of the Senate Appropriations Subcommittee—Michigan Department of Labor & Economic Growth**
- **Members of the House Appropriations Subcommittee—Michigan Department of Labor & Economic Growth**
- **Senate Fiscal Agency**
- **House Fiscal Agency**
- **Michigan State Budget Director**

Cc:

- **Executive Office**
- **Members of the Legislature**
- **Patrick Cannon, Director, Michigan Commission for the Blind, Department of Labor & Economic Growth**
- **Jaye Shamsiddeen, Director, Michigan Rehabilitation Services, Department of Labor & Economic Growth**
- **Duncan Wyeth, Director, Michigan Commission on Disability Concerns, Department of Labor & Economic Growth**

From:

- **Michigan Statewide Independent Living Council**
- **Disability Network/Michigan**

Date: January 27, 2007

Re: FY 2006 Report to the Michigan Legislature

We are pleased to forward this report to the Legislature, on the accomplishments of Centers for Independent Living (CILs) in promoting the full integration of people with disabilities into their communities, and on the ways in which this work benefits the State of Michigan. Information is also provided on the distribution and expenditure of CIL funding.

This report was prepared and submitted by the Michigan Statewide Independent Living Council and Disability Network/Michigan, in compliance with Section 404 of Public Act 345 of 2006. Background information is provided on the mission of CILs to extend independent living supports to every Michigan citizen who needs them and their partnership with the state through funding under the vocational rehabilitation independent living line item.

If you have any questions or comments regarding the report, please contact Valarie Barnum-Yarger of SILC at 517-371-4872 or Karen Kraft of Disability Network/Michigan at 517-339-0539.

Respectfully submitted,

Charis Austin, Chair
Michigan Statewide Independent
Living Council

James Magyar, Executive Director
Disability Network/Michigan

[This page left blank as the back of the transmittal letter]

EXCERPT—Public Act 345 of 2006

Sec. 404. (1) Of the funds appropriated in part 1 for vocational rehabilitation independent living, all general fund/general purpose revenue not used to match federal funds shall be used for the support of centers for independent living which are in compliance with federal standards for such centers, for the development of new centers in areas presently unserved or underserved, for technical assistance to centers, and for projects to build capacity of centers to deliver independent living services.

Applications for such funds shall be reviewed in accordance with criteria and procedures established by the statewide independent living council, the Michigan rehabilitation services unit within the department, and the Michigan commission for the blind. Funds must be used in a manner consistent with the priorities established in the state plan for independent living. The department is directed to work with the Michigan association of centers for independent living* and the local workforce development boards to identify other competitive sources of funding.

(2) As a condition of receipt of funds appropriated in part 1, the statewide independent living council and the Michigan association of centers for independent living* shall jointly produce a report providing the following information:

(a) Results in terms of enhanced statewide access to independent living services to individuals who do not have access to such services through other existing public agencies, including measures by which these results can be monitored over time. These measures shall include:

(i) Total number of persons assisted by the centers and a comparison to the number assisted in the previous year. *[See pages 27-28]*

(ii) Number of persons moved out of nursing homes into independent living situations and a comparison to the number assisted in the previous year. *[See pages 29-30]*

(iii) Number of persons for whom accommodations were provided to enable independent living or access to employment and a comparison to the number assisted in the previous year. *[See pages 27-38]*

(iv) The total number of disabled individuals served by personal care attendants and the number of personal care attendants provided through the use of any funds appropriated in part 1 administered by a center for independent living and a comparison to the number served in the previous year. *[See pages 30-32]*

(b) Information from each center for independent living receiving funding through appropriations in part 1 detailing their total budget for their most recently completed fiscal year as well as the amount within that budget funded through the vocational rehabilitation independent living grant program referenced in part 1, the total amount funded through other state agencies, the amount funded through federal sources, and the amount funded through local and private sources. *[See pages 47-104]*

* - Now known as the Disability Network/Michigan

Continued on next page

(c) Savings to state taxpayers in other specific areas that can be shown to be the direct result of activities funded from the vocational rehabilitation independent living grant program during the most recently completed state fiscal year. *[See pages 39-46]*

(3) The report required in subsection (2) shall be submitted to the subcommittees, the fiscal agencies, and the state budget director on or before January 30.

REPORT BRIEF

Michigan Centers for Independent Living / October 1, 2005 – September 30, 2006

The Michigan Statewide Independent Living Council (SILC) and the Disability Network/ Michigan have prepared this report in response to Section 404 of Michigan Public Act 345 of 2006. It addresses:

- ✓ The use of funding under the vocational rehabilitation independent living line item.
- ✓ The resulting impact on the lives of Michigan citizens.

Background is provided on the independent living program established under Title VII of the federal Rehabilitation Act:

- ✓ Approximately one of every five persons has a disability.
- ✓ People with disabilities are recognized as one of the most disadvantaged groups in society.
- ✓ Their unnecessary dependency consumes public resources, detracts from workforce and economic development efforts, and compromises individual and community quality of life.
- ✓ The Rehabilitation Act, which is Title IV of the Workforce Investment Act, sets a national goal to provide people with disabilities the tools they need for personal and economic self-sufficiency and community inclusion.
- ✓ Title VII of the Rehabilitation Act provides financial assistance to develop and support statewide networks of Centers for Independent Living (CILs).

Michigan's investment in independent living is described:

- ✓ CILs are independent, community-based non-profit organizations governed and staffed predominantly by people with disabilities.
- ✓ CILs provide an array of community and individual services to help people with all types of disabilities live independent lives.
- ✓ FY 2006 efforts to enhance statewide access to IL supports and services continued to center around implementation of a long-range planning template. Analysis shows that, with about 18% of the total core funding that appears to be needed for a fully developed statewide CIL network, Michigan's CILs report that only about 19% of Michigan's residents are in areas they have capacity to serve, with 48% in areas that are significantly underserved, and 33% in areas that lack any access to IL supports.

Information is provided from Michigan's innovative approach to outcomes-based reporting of CIL services:

- ✓ FY 2006 CIL Network totals included 91,198 hours spent in community services and 78,398 hours spent in assisting 34,333 people with disabilities, with 5,101 reported community outcomes and 16,487 reported individual outcomes.

Continued on next page

- ✓ In comparison to FY 2005, this represented an increase of 21,161 hours or 14% in total service hours, an increase of 4,356 or 15% in individuals served, an increase of 1,988 or 14% in reported individual outcomes, and a decrease of 3,304 or 31% in reported community outcomes.
- ✓ The increase in service hours and individual outcomes reflects the continued efforts of CILs to make more efficient and effective use of available resources. The decrease in community outcomes reflects the general economic climate and the restricted availability of resources for change in community systems and supports.
- ✓ Cost savings to the state computed for FY 2006 from select service areas total \$14,685,168. This represents an increase of \$829,207 or 6% from FY 2005. These computations indicate that every dollar invested in CILs from any source results in more than a comparable dollar of savings to state taxpayers.

Finally, detail is outlined for each of the 15 CILs in Michigan's CIL network:

- ✓ Collectively, they reported FY 2006 operating budgets from all sources totaling \$13,339,895.
- ✓ This supported about 271 staff operating out of 23 offices across the state. (177 full-time, 72 part-time, and 22 contractual, a majority of whom are people with disabilities) In addition, there was a total of 78,758 hours of donated volunteer time, the equivalent of more than an additional 37 full-time staff.
- ✓ The major expense was personnel, representing some 65.6% of the total.
- ✓ About one-third of the revenue was from state and federal grants for core operations, another third from a combination of vocational rehabilitation grants and service fees, and the final third from a mix of other funding sources.
- ✓ Budget comparisons show that the statewide CIL total has increased only slightly since FY 2002, and the CILs are now collectively in their fifth year of progressively reduced organizational and service-delivery capacity.
- ✓ Within the network, budgets of individual CILs have shown very mixed results reflecting the diversity of local efforts to consolidate or refocus programs, take other steps to increase efficiency, find and access new funding and other resources, as possible, and – when necessary -- discontinue programs or services that they have not had the resources to maintain.

**MICHIGAN CENTERS FOR INDEPENDENT LIVING:
A Report to the Legislature
October 1, 2005 – September 30, 2006**

EXECUTIVE SUMMARY

The Michigan Statewide Independent Living Council (SILC) and Disability Network/Michigan have prepared this report in response to Section 404 of Michigan Public Act 345 of 2006 that provides appropriations to the Department of Labor and Economic Growth. Section 404 requires the SILC and Disability Network/Michigan to annually supply information on the use of funding under the vocational rehabilitation independent living line item that supports the work of centers for independent living, and on the impact of that work on the lives of Michigan citizens with disabilities.

Independent Living – An Investment in Individuals and Communities

Michigan invests in independent living (IL) to assist individuals with disabilities in taking charge of their lives and becoming participating, productive, and tax-paying members of their communities. Approximately one of every five individuals has a disability, and essentially every extended family includes one or more individuals with disabilities. Unnecessary dependency of individuals with disabilities consumes public services and resources, detracts from workforce and economic development efforts, and compromises individual and community quality of life.

The independent living program established by Title VII of the Rehabilitation Act, in Title IV of the Workforce Investment Act, reflects Congressional findings that Americans with disabilities form one of the most disadvantaged groups in society. The Act sets a national goal of providing individuals with disabilities the tools they need to make informed choices and decisions, and to achieve equality of opportunity in education, the pursuit of economic and personal self-sufficiency, civic involvement, and participation in community life. This recognizes that an individual cannot successfully obtain and maintain a job if basic living needs are not met, and that the community cannot achieve workforce and economic development goals if two-thirds of the population with disabilities remains personally and financially dependent.

Title VII of the Rehabilitation Act provides financial assistance to develop and support statewide networks of CILs that comply with specified standards. In order to qualify for Title VII, Part B funding, a state must establish a Statewide Independent Living Council, and its vocational rehabilitation agency or agencies must work with the SILC to develop a State Plan for Independent Living (SPIL). The Plan must address the provision of independent living resources and the development of an IL/CIL network. In Michigan, the Governor-appointed Statewide Independent Living Council (SILC) collaborates with the state's two rehabilitation agencies – Michigan Rehabilitation Services (MRS) and Michigan Commission for the Blind (MCB), both located within the Department of Labor and Economic Growth – to plan and oversee implementation of the state's IL program. The allocation of resources made available by the Legislature, under the Department's vocational rehabilitation independent living line item, must

be consistent with the State Plan. In addition, the Disability Network/Michigan a non-profit membership organization, addresses the individual and collective program, service, and financial management needs of the network of CILs.

The IL approach is to seek ways of enhancing and making the best possible use of individual capacities and community resources. Michigan's IL program is committed to the principles of individual sovereignty, equal access, responsive programs and services, and community capacity building. These principles are based on the belief that all people should be able to make choices, take risks, and have maximum control over their personal support systems. CILs strive to provide empowering supports that help people with disabilities pursue the same goals as everyone else—employment, financial security, a family, a home, and participation in civic, religious and social life. However, their larger mission is always to address community and systems barriers. The CILs approach mobilization of the local disability community by having people share their experiences and information with peers, building a common understanding of community needs. This establishes a common ground upon which people with disabilities and their partners can come together in taking action. The shared disability experience and resulting IL response is illustrated in chart on the following page.

Michigan's Independent Living program currently operates through 15 local Centers for Independent Living (CILs) and two statewide organizations. The local CILs are independent, community-based non-profit organizations governed and staffed predominantly by people with disabilities. They are not residential centers, but rather resource centers that provide information and supports to help individuals with all types of disabilities live independent lives fully integrated into their communities, and to help communities remove barriers that promote dependency among people with disabilities.

The Rehabilitation Act requires CILs to adhere to a set of federal standards and indicators related to independent living principles and to sound organizational management. The SILC, Michigan Rehabilitation Services, and the Michigan Commission for the Blind, in collaboration with Disability Network/Michigan, Michigan Protection and Advocacy Service, the Michigan Rehabilitation Council, and the Michigan Disability Rights Coalition, provide technical assistance and monitoring to ensure achievement of these standards. This includes a new process for on-site CIL reviews to promote total continuous quality improvement.

While every CIL responds to community needs with a different array of programs, the standards and indicators require that they all provide the core services of information and referral, peer support, individual and systems advocacy, and independent living skills development. Increasing emphasis is also being placed on institutional transitions -- including movement from nursing homes, transition from school to community, and prisoner re-entry. It is expected that these will be formally added to the required CIL core services with the upcoming re-authorization of the Rehabilitation Act. Measures for the accountability of CILs in meeting the standards, indicators, and program requirements include quarterly and annual reporting by CILs, supplemented by the total continuous quality improvement on-site reviews. Steps are currently underway for the statewide acquisition and implementation of a comprehensive data system that is expected to significantly increase the capacity of the CILs to consistently and accurately report their service activity and results

The Disability Experience	<i>The CIL Response</i>
<p>The communities in which we live build new barriers to our freedom and independence every time a sidewalk, curb ramp or other architectural structure is created that does not meet the minimum construction standards mandated by state and federal laws.</p>	<p><i>We advocate for a barrier-free society that accepts our challenges and honors our dignity as citizens, by helping businesses and governmental entities build communities that are accessible to everyone. Through our shared personal experience with disability we are able to educate and increase awareness on the part of civic organizations, business leaders, architects and students, and policy makers in our government.</i></p>
<p>The move from school to adult life presents a unique challenge for young people with disabilities. Schools alone cannot be the sole source of instruction for this transition.</p>	<p><i>We provide mentors for young people with disabilities to help open their eyes to the possibilities for independent living and satisfying careers. We partner with school systems to keep students in school and fully engaged. We help students resolve problems and develop skills that are crucial to independence.</i></p>
<p>Members of our community of people with disabilities are often unable to find an affordable and accessible place to live, the personal assistants they need, lift-equipped transportation, and meaningful employment.</p>	<p><i>We participate in local and state-level housing, personal assistance and transportation initiatives, to promote an array of supports and acceptable options for people with disabilities. We help people set goals, build job-seeking skills, understand their rights under the Americans with Disabilities Act and state law, and secure the accommodations they need in order to succeed in the workplace.</i></p>
<p>Even when our personal circumstances clearly meet the criteria for Social Security, Medicaid or other publicly funded programs, it can take months to secure the resources we need for housing, food or health care. Regulations can be extremely confusing, and programs can interact in complex ways, affecting our eligibility for critically important benefits.</p>	<p><i>We help people with disabilities navigate a complex and ever-changing support system that often seems designed to lock us out rather than assist us. We work together to remove program barriers to independence and economic self-sufficiency, through such initiatives as the drive to establish a Medicaid Buy-In program allowing people with disabilities to work without losing Medicaid coverage.</i></p>
<p>Many of us feel an overwhelming sense of isolation. Our days can be filled with fear, frustration, and pessimism as we find ourselves trapped in nursing homes.</p>	<p><i>Using peer support, we help people through a decision-making process that leads to a self-directed life filled with personal achievement.</i></p>

The CILs are supported through a complex set of funding arrangements. A basic level of organizational capacity is supported by flexible federal and state core funding grants that represented about one-third of all funding for Michigan CILs during FY 2006. Most CILs also receive various types of categorical (restricted) funding, which can be used only for specific services, populations, geographic areas, or disability types. The most significant categorical funding for Michigan CILs is for vocational rehabilitation, with grants and fee-for-services revenue accounting for another third of all Michigan CIL funding during FY 2006. Other funding sources for CILs include local fee-for-service arrangements, support from foundations and donations, local fundraisers, and other fund development activities. Non-vocational and other miscellaneous revenue accounted for the remaining third of Michigan CIL funding during FY 2006.

The distribution of all vocational rehabilitation independent living funding – including federal Title VII, Federal Title I, and state funds – is made through a process overseen by MRS, MCB, and the SILC. The funds are distributed as grants, under contracts between CILs and MRS. To the extent possible, federal and state CIL funding is coordinated to provide for equity among full functioning CILs, to meet the growing needs of each developing CIL, and if possible, to support outreach to unserved and underserved areas and populations.

The economic climate of the last few years has made effective allocation and coordination of funds most difficult. As noted in the next section, the CIL network is committed to enhancing statewide access to IL services, and a major commitment of the partners in the State Plan for Independent Living is to continue developing the statewide CIL network. However, funding for the CIL network continues in the shadow of the significant 4% decrease that was experienced between FY 2002 and FY 2003. This included cuts in state funding, as well as shrinkage in an array of other revenue sources, within an increasingly competitive environment for grant-seekers from such sources as foundations and corporate donors. When adjusted to exclude the merger of one CIL with another organization during the period, the increase for network funding from FY 2002 to FY 2007 has been \$343,666 or 2.7% over the five-year period – averaging only 0.5% per year.

With operational costs continuing to rise – such as the escalating costs of health care coverage for employees – the CILs are now in the fifth year of progressively reduced organizational and service-delivery capacity. Even as they are striving to build the statewide network and enhance statewide access to services, they are being asked to do more with less. To face this challenge, the CILs have been struggling during the last five years to minimize the impacts of reductions by consolidating or refocusing programs and taking other steps to increase efficiency. They have also been seeking to find and access new funding or other resources that will help them better carry out their many varied community and consumer responsibilities. And, when necessary, they have discontinued programs or services that they have not had the resources to maintain.

[Further information about IL as an investment in individuals and communities is provided in Section I of the report, pages 21 through 26.]

The Statewide CIL Network and Access to IL Supports and Services

Section 404 asks for a report on results in terms of enhanced statewide access to IL services. The long-term goal of the SILC and Disability Network/Michigan, as expressed in the State Plan for Independent Living, remains the same: to establish a statewide IL/CIL network that affords every Michigan citizen ready access to effective IL supports and services in each local community. Currently, CILs report that only about 19% of Michigan residents are in areas they have capacity to serve, with 48% in areas that are significantly underserved, and 33% in areas that lack any access to IL supports. This includes people living in 16 counties that are not affiliated with any CIL.

During FY 2006, Disability Network/Michigan and SILC continued collaborative efforts to apply the long-range planning template, which was developed in FY 2005. The *Michigan Prototype CIL* provides a template for identifying the work that a CIL must do to establish a presence in all communities within its service area, the staff capacity needed to provide effective community and consumer services in those communities, and the organizational resources required to support successful CIL operations. It offers a tool for organizational planning at the local level, and program planning at the state level. The initial formulation, of the *Prototype* has received positive national attention, being well received as a reasoned and useful planning template. Computations based on the initial formulation of the *Prototype* indicate that, in FYs 2005 and 2006, Michigan's CILs had about 18% of the total core funding that would be required for a fully developed statewide CIL network.

Although a long-term planning template was available, continuing reduction in CIL network capacity during FY 2006 precluded any significant progress in expanding access to IL supports and services. Each CIL struggled to respond to constrained resources by consolidating or refocusing programs, taking other steps to increase efficiency, finding and accessing new funding and other resources, as possible, and – when necessary -- discontinuing programs or services that they did not have the resources to maintain. Through their collective efforts, the CILs were able to increase the statewide level of services, with 34,333 individuals participating in services during FY 2006, up by 3.5% from 29,977 in FY 2005.

Despite continuing reduction in CIL network capacity, the SILC, Disability Network/Michigan, MRS, MCB, and other IL partners moved ahead during FY 2006 with increased collaboration in providing on-site technical assistance and peer mentoring, and identifying resources for CIL board development. Implementation continued of a process of on-site reviews to promote total continuous quality improvement throughout the CIL network, including assurance of compliance with federal and state requirements. Improved technical assistance and CIL network supports remain essential elements in long-term plans for strengthening and further developing the statewide CIL network and providing enhanced access to IL supports and services.

[Further information about the CIL network is provided in Section IV of the report (funding), pages 47 through 66, and Section V (individual CIL descriptions), pages 67 through 104.]

Return on Investment – Michigan’s CIL Priority Outcomes

The CILs have collaborated in jointly defining eight priority categories of outcomes to be achieved, and developing a database system for regularly monitoring and reporting on services and outcomes. Computations indicate that, at a minimum, every dollar invested in CILs from any source results in more than a comparable dollar of savings to state taxpayers. The minimum savings are often compounded by many related financial returns, as well as quality-of-life improvements for individuals, families, and communities. The priority categories and outcomes in general order of activity for FY 2006 include the following:

➤ **Community and Long-Term Care Supports**

It makes no sense to keep individuals who need long-term care in expensive institutional settings that foster dependency, if they can be successfully supported in their own homes, with a higher quality of life and generally at less expense. During FY 2006, CILs devoted 21,869 hours in working to eliminate community barriers and 16,373 hours assisting 2,359 individuals with ongoing community supports. This resulted in 192 reported community outcomes and 2,256 reported individual service outcomes. Institutionalization was prevented for 70 individuals, 20 were assisted in moving from nursing homes or other restrictive settings, and 36 were maintained in community settings.

Major barriers to the successful transition of people from nursing homes and other institutions to the community during the last couple years have been the lack of funding for transition services, very limited availability of “waiver” resources to support needed in-home services, and the lack of affordable, accessible housing. Recommendations of the Medicaid Long-Term Care Task Force, accepted and supported by the Governor in an executive order during FY 2005, provide opportunity for significant improvement in coming years. The CILs are actively promoting the successful implementation of these recommendations.

➤ **Employment**

CILs provide a wide variety of employment-related supports that assist persons with disabilities in getting and keeping jobs, and also in helping individuals move into higher-paying jobs. These employment supports range from helping reduce employment-related barriers such as securing transportation to work, to assistance with resume preparation, practice interviewing, worksite accommodations, or employer-focused ADA assistance. During FY 2006, CIL spent 12,901 hours working to improve community employment systems and 23,898 hours assisting 5,645 individuals in removing or reducing barriers to employment. This investment resulted in 2,499 reported positive community outcomes and 4,546 reported positive employment-related outcomes for individuals, including 426 individuals who obtained or maintained employment or launched new businesses.

➤ **Education and Youth Transition**

Education is a major factor in helping people with disabilities successfully manage their lives and maintain independent living. Assisting people with disabilities in developing the skills for independent living is one of the CIL core services. During FY 2006, CILs spent 12,139 hours working to improve community education systems and 14,086 hours working with 2,739 individuals to obtain needed education. This resulted in 400 reported community outcomes and 1,831 reported individual service outcomes.

Ample research evidence exists on the particular importance of keeping young people in school in order to prepare them for life and to ensure their financial independence. CILs work with youth in a number of ways, all intended to prepare them for independent living. Including all categories of service, CILs spent 8,973 hours during FY 2006 assisting 1,830 youth with disabilities to prepare for the transition to adult life and employment.

➤ **Housing**

The lack of affordable, accessible housing is one of the greatest barriers to independent living for Michigan's citizens with disabilities. CILs assist individuals in finding affordable, accessible housing that meets their needs, in resolving problems that arise with the housing, and in working for improvement in the available housing. During FY 2006, CIL staff spent 8,567 hours working to improve housing conditions in their communities and 6,638 hours helping 4,881 people deal with housing issues. This resulted in 494 reported community service outcomes and 1,086 reported individual service outcomes.

➤ **Transportation**

Transportation is an immediate issue for most people with disabilities in order to work, play, shop, vote, pursue an education, raise families, and participate in their communities. During FY 2006, CILs spent 9,477 hours working in their communities to improve public transportation, and 3,393 hours assisting 3,055 people with disabilities in resolving transportation issues. This resulted in 379 reported community service outcomes and 3,036 reported individual service outcomes.

➤ **Assistive Technology**

Assistive technology (AT) is any device that helps people with disabilities to work and live independently. A wide array of simple and inexpensive AT makes it possible for people with disabilities to carry out life activities they could not otherwise do. Rapidly developing technology is also providing new AT that makes possible a previously unimagined level of independence, but often at a substantial cost. CILs work in a number of ways to improve the availability of AT throughout the community and to assist individuals in finding and obtaining AT they need for independent activity, including both “low tech” and “high tech” technology. In FY 2006, CILs spent 6,457 hours working to improve community availability of AT and 5,097 hours assisting 1,360 individuals with information, training or support related to AT. This resulted in 228 reported community services outcomes and 1,719 reported individual services outcomes.

➤ **Accessibility**

Community programs, services, facilities, and buildings must be accessible if people with disabilities are to work, play, shop, vote, pursue an education, raise families, and participate in their communities like everyone else. CILs work in a variety of ways to assist people with disabilities with accessibility issues and to improve the accessibility of public and private facilities, programs, and services. During FY 2006, Michigan’s CILs spent 6,873 hours working to improve community accessibility, and 3,825 hours in assisting 2,024 individuals in resolving accessibility issues. This resulted in 776 reported community service outcomes, and 1,272 reported individual service outcomes.

➤ **Other**

There are other specific barriers to independent living in each community. CILs work to identify the most important barriers in their individual communities, and to provide community and individual services that address those barriers. During FY 2006, Michigan CILs spent 8,897 hours working in their communities to address such barriers, and spent 1,783 hours working with 1,037 people to resolve their issues about other service needs. This resulted in 58 reported community service outcomes, and 86 reported individual service outcomes.

➤ **Health Care**

Access to quality health care is essential for people with disabilities to remain independent and productive. CILs work to ensure that people with disabilities get the prescription drugs, personal assistance, home health care, and durable medical equipment they need in order to stay out of the hospital and other costly institutional care. In addition, CILs provide information, training, and support to people with disabilities to help them manage their own health and avoid costly secondary disabilities. In FY 2006, CILs spent 4,018 hours working to improve access to health care within the community and 3,305 hours assisting 1,638 individuals in resolving health care issues. This resulted in 75 reported community services outcomes and 655 reported individual services outcomes.

Public Act 345 of 2006 requires the SILC and Disability Network/Michigan to provide information on how CIL outcomes can be monitored over time. In collaboration with SILC and MRS, the CILs and Disability Network/Michigan have developed, implemented, and regularly update a statewide reporting system to provide consistent, meaningful information on CIL activities and outcomes statewide. Data from the system is used throughout this report. Maintaining and refining the reporting system is the collective responsibility of Disability Network/Michigan and the individual CILs, in collaboration with SILC and MRS. Michigan's unique outcomes reporting model has been the topic of national and regional trainings for the nation's CILs. The Michigan CIL network is currently installing a new, statewide CIL data system that should improve the consistency and comprehensiveness of future reports.

Comparison of FY 2006 services data with that of the preceding year shows that total reported service hours have increased by 21,161 hours or 14%, reported individual services outcomes have increased by 1,988 or 14%, and community outcomes have decreased by 3,304 or 31%. Considering that the total number of CIL staff was essentially the same in FY 2006 as FY 2005, the increase in service hours and individual outcomes reflects the continued efforts of CILs to make more efficient and effective use of available resources. This includes the assignment of more staff to services, increased use of volunteers, and continuing refinement of the CIL data system. The decrease in community service outcomes reflects the general economic climate and the restricted availability of resources for change in community systems and supports.

[Further information about the services provided and return on the investment is provided in Section II of the report, pages 27 through 38.]

Summary of Taxpayer Savings

Cost savings to the state from CIL services are computed annually on the basis of the services outcome data. For FY 2006, the cost savings to the State of Michigan are computed to be as follows:

Calculated FY 2006 CIL Network Cost Savings	
➤ Savings from FY 2006 nursing home transitions	\$ 809,828
➤ Savings from FY 2006 work to prevent institutionalization	\$ 2,815,901
➤ Savings from sustained independence during FY 2006 of persons transitioned in previous years	\$ 1,453,991
➤ Savings from CIL services in support of employment	\$ 6,058,998
➤ Savings from CIL youth transition services	\$ 3,546,450
TOTAL CALCULATED FY 2006 COST SAVINGS	\$14,685,168

In comparison to FY 2005, these computations show FY 2006 increases in savings from nursing home transitions, work to prevent institutionalization, services in support of employment, and savings from CIL youth transition services, and a decrease in savings from sustained independence of persons transitioned in previous years. In total, the FY 2006 cost savings represent an increase of \$829,207 or 6% from FY 2005. These computations indicate that any dollar invested in CILs from any source results in more than a comparable dollar of savings to state taxpayers.

The impact of CILs are not, however, limited to just people with disabilities. America's population is aging, and disability increases with age. The number of Americans aged 65 and older is projected to increase 135% between 1995 and 2050, according to the Census Bureau. People with disabilities are an increasingly significant segment of society, with both economic and cultural impacts. The supports Michigan's CILs provide to improve the economic condition and quality of life for individuals with disabilities have, therefore, multiple ripple effects that promote and support continued growth and recovery of the entire state.

[Further information about the computation of cost savings for the state is provided in Section III of the report, pages 39 through 46.]



**MICHIGAN CENTERS
FOR
INDEPENDENT LIVING**

A Report to the Legislature

October 1, 2005-September 30, 2006

**Submitted by:
Michigan Statewide
Independent Living Council
&
Disability Network/Michigan**

[This page left blank as the back of the Title Page.]

TABLE OF CONTENTS

The contents of this report, which address statutory requirements, are on white pages; the ivory pages contain supplementary information.

	(pages)
I. Introduction	21-26
II. Selected Outcomes of CIL Activities	27-38
A. Summary and Comparison of Service Data	27-28
B. Transition from Institutions and Ongoing Community Supports	29-32
C. Employment	32-33
D. Education and Youth Transition	33-34
E. Housing	34
F. Transportation	34-35
G. Assistive Technology	35-36
H. Accessibility	36-37
I. Health Care	37
III. Summary of Taxpayer Savings	39-46
A. Calculating the Return on Investment	39
B. Savings from CIL Involvement in Long-Term Care	40-41
C. Savings from CIL Services in Support of Employment	41-43
D. Savings from CIL Involvement in Youth Transition Services	43-44
E. Total Calculated Savings	44
F. Economic Impact	45
IV. Comparative Funding Overview	47-66
A. Budget Summaries	47-54
B. Funding by Source	55-60
C. Funding by Program	61-66
V. Summary Reports of Michigan CILs and Providers of CIL Network Support	67-104
A. CIL Office Map	68
B. Map of CIL Service Area	69
C. Summary of Michigan's CILs	70-99
D. CIL Network Support Providers	100-104

[This page left blank as the back of the Table of Contents.]

I. INTRODUCTION

Independent Living – An Investment in Individuals and Communities

Michigan invests in independent living (IL) to assist individuals with disabilities in taking charge of their lives and becoming participating, productive, and tax-paying members of their communities. Disability is a natural part of the human experience. Approximately one of every five individuals has a disability, and essentially every extended family includes one or more individuals with disabilities. Unnecessary dependency of people with disabilities consumes public services and resources, detracts from workforce and economic development efforts, and compromises individual and community quality-of-life.

In 1978, independent living was established by Title VII of the Rehabilitation Act as an essential part of the nation's rehabilitation system. Twenty years later, in 1998, the entire Rehabilitation Act was included as Title IV of the Workforce Investment Act. The independent living program reflects Congressional findings that Americans with disabilities form one of the most disadvantaged groups in society, encountering discrimination and barriers in a number of critical life areas. The Rehabilitation Act sets a national goal of providing individuals with disabilities the tools they need to make informed choices and decisions, and to achieve equality of opportunity in education, the pursuit of economic and personal self-sufficiency, civic involvement, and participation in community life. This recognizes that an individual cannot successfully obtain and maintain a job if basic living needs are not met, and that the community cannot achieve workforce and economic development goals if two-thirds of the population with disabilities remains personally and financially dependent.

Michigan's Independent Living program currently operates through 15 local Centers for Independent Living (CILs) and two statewide organizations. The local CILs are independent, community-based non-profit organizations governed and staffed predominantly by people with disabilities. They are not residential centers, but rather resource centers that provide information and supports to help individuals with disabilities live independent lives fully integrated into their communities, and to help communities remove barriers that promote dependency among people with disabilities. Individuals with disabilities and their families are assisted in obtaining appropriate housing, basic living and work skills, remedial education, access to quality health care and personal assistance, workplace accommodations, employment opportunities, and transportation. This includes individuals with all types of disabilities -- physical, mental or emotional, cognitive, and sensory.

At the state level, the Governor-appointed Statewide Independent Living Council (SILC) collaborates with the state's two rehabilitation agencies – Michigan Rehabilitation Services (MRS) and Michigan Commission for the Blind (MCB), both located within the Department of Labor & Economic Growth – to plan and oversee implementation of the state's IL program. In addition, Disability Network/Michigan, a non-profit membership organization, addresses the individual and collective program, service, and financial management needs of the network of CILs.

Guiding Principles of CIL Operations

The IL approach is to seek ways of enhancing and making the best possible use of individual capacities and community resources. Michigan's IL program is committed to the principles of individual sovereignty, equal access, responsive programs and services, and community capacity building. These principles form a common ground upon which people with disabilities and their partners can come together in taking action.

The 15 CILs form a network of grassroots, customer-controlled, advocacy and IL support organizations that build disability leadership to bring about needed change in their communities. They seek removal of systemic barriers that reflect negative attitudes and assumptions about disability and limit individuals in their quest for self-determination, successful employment, and community inclusion. They work to correct community buildings and public works which fail to take the needs of people with physical or sensory disabilities into account, segregation of individuals in educational or institutional settings, and health systems that fail to comprehend what it takes to be a healthy person with a disability.

Self-Determination and Acceptance of Personal Responsibility

The Independent Living Movement developed, in part, from recognition that emphasis simply on the provision of services promotes dependency and loss of capacity – for both the individual and the community. By contrast, CILs strive to provide empowering supports that help people with disabilities pursue the same goals as everyone else—employment, financial security, a family, a home, and participation in civic, religious and social life. All people should be able to make choices, take risks, and have maximum control over their personal support systems. A distinguishing characteristic of CILs is their holistic response to the needs of the people they serve, with consistent emphasis upon self-determination, self-advocacy, and acceptance of personal responsibility.

At the community level, a basic tenet of IL is “Nothing about us, without us!” CILs hold that disability issues are best understood and addressed by the people who experience them in their lives. They demonstrate this commitment by being governed and staffed by people with disabilities from the local community. They approach mobilization of the local disability community by having people share their experiences and information with peers, building a common understanding of community needs. CILs seek to provide necessary empowering supports to individuals, but the larger mission is always to address community and systems barriers. For example, CILs may draw attention to gaps in critical services, propose or even demonstrate innovative ways to provide supports, or try to educate the public and policy makers about disability rights.

The Core IL Services

In the 1992 amendments to the Rehabilitation Act, Congress stipulated that CILs must adhere to a set of standards and indicators related to independent living principles and to sound organizational management. The SILC, Michigan Rehabilitation Services, and the Michigan Commission for the Blind, in collaboration with Disability Network/Michigan, provide technical assistance and monitoring to ensure achievement of these standards.

The standards and indicators require that CILs provide four core services. While every CIL responds to community needs with a different array of programs, they all provide the following:

1. **Information and Referral.** Because the need for information is among the first problems faced by people with disabilities and their families, it is usually the first service new CILs try to provide. Over time, center staff builds their capacity to provide answers, not only on disability law and available resources, but also on the complicated systems people with disabilities must navigate, such as Social Security law and Medicaid. Not only do people with disabilities obtain needed information and referral services, but employers, schools, developers and government workers often get valuable technical assistance in dealing with disability issues.
2. **Peer Support.** CILs operate on the principle that the best source of information and mentoring for a person with a disability is often another person with a disability. Single and cross-disability support groups may meet formally to allow people to share experiences and to advise and support each other. More important, CILs create environments that nurture consumer empowerment and honor each individual's struggle to overcome barriers.
3. **Individual and Systems Advocacy.** CIL staff and volunteer mentors assist people with disabilities faced with barriers in taking effective actions to bring about needed changes in both the public and private sectors. Assistance provided in a way that truly empowers people with disabilities helps them develop valuable self-advocacy skills. CILs undertake community or systems advocacy to bring about necessary changes in such areas as health care, long-term community supports, housing, transportation, and education. This includes identifying and eliminating duplication of services, as well as identifying and taking action to address significant gaps in needed services.
4. **Independent Living Skills Development.** CILs help people to develop the skills they need for increased personal independence. This can include anything from basic decision-making, money management, and the use of assistive technology, to self-advocacy, work readiness, and the hiring and management of personal assistants.
5. **Transition from Institutions and Ongoing Community Supports.** Congress is currently contemplating an amendment to the federal Rehabilitation Act that would add a fifth Core Service—assistance in transitioning individuals from institutions to community life. Michigan CILs have long engaged in intense activity to assist individuals in transitioning from institutions and securing the supports and services they need for successful community living.

How CILs are Funded

The CILs are supported through a complex set of funding arrangements. In recognition of their function as community resource centers, all Michigan CILs receive core funding grants through the state appropriation for “vocational rehabilitation independent living”. These flexible grants from state and federal funds support basic operations; systems change work, new initiatives, and gaps in financing CIL programs. They are the principle sources of funding for new CILs trying to build organizational capacity. Under the terms of the state appropriations act, the distribution of funds must be consistent with the State Plan for Independent Living.

Most Michigan CILs (10) also receive direct federal core funding under Title VII, Part C of the Rehabilitation Act. Title VII, Part C monies are distributed nationally through a state-based formula. After years of essentially flat federal funding in Michigan, CILs have received small annual federal increases from FY 2002 to FY 2006. However, the funding they received for FY 2007 reflected a slight decrease.

In accord with the Rehabilitation Act, the Michigan State Plan for Independent Living (SPIL) provides for annual coordination of the federal and state funding. Each year, the SILC, MRS, and MCB, in collaboration with Disability Network/Michigan, review available resources to determine how the needs of the IL/CIL network can best be met. To the extent possible, funding is allocated to provide for equity among full functioning CILs, to meet the growing needs of each developing CIL, and if possible, to support outreach to unserved and underserved areas and populations. Effective allocation of funds has been most difficult during the economic downturn of the last few years, with increases in CIL operational costs quickly outpacing the available resources. Taken together, federal and state core funding account for approximately one third of all CIL funding.

Michigan CILs also receive various types of categorical (restricted) funding, which can be used only for specific services, populations, geographic areas, or disability types. The most important categorical funding for Michigan CILs is provided by the Michigan Department of Labor and Economic Growth, Michigan Rehabilitation Services, under Title I of the Rehabilitation Act. These funds, which account for about one third of all CIL funding, can only be used for MRS customers, and must support vocational objectives.

The SILC and Disability Network/Michigan also receive core and Title I funding to provide technical assistance to individual CILs, engage in systematic program evaluation, and support a variety of collaborative work at the state and national levels that promotes total continuous quality improvement. This includes operation of the CIL data information system and implementation of on-site CIL reviews. It also includes efforts such as Disability Network/Michigan and SILC collaborations with the Michigan Department of Community Health and numerous public and private partners to remove community and employment barriers, ensure effective implementation of the new Michigan Freedom to Work for People with Disabilities Act, and assist in redesign of the state’s long-term care system.

Other funding sources for CILs include local fee-for-service arrangements, support from foundations and donations, local fundraisers, and other fund development activities. Taken together, all other sources make up for the final third of CIL funding.

The distribution of all vocational rehabilitation independent living funding, including core and Title I funding, is subject to a process overseen by MRS, MCB, and the SILC. The funds are distributed as grants, under contracts between CILs and MRS. Accountability measures include quarterly and annual reporting by CILs, supplemented by total continuous quality improvement on-site reviews.

Return on Investment – Michigan’s CIL Priority Outcome Categories

The Michigan CIL network is in the forefront of national efforts to define and report the return on investment in the IL Program. The CILs have collaborated in defining eight priority categories of outcomes to be achieved, and a database system for monitoring and reporting on services and outcomes. The outcomes monitored for FY 2006 included: accessibility, assistive technology, education, employment, health care, housing, community supports, and transportation. The data system reports information on the numbers of people with disabilities served, the hours of service provided, and the outcomes achieved in each of these priority areas.

It has long been known that the reported outcomes of CIL services not only result in improved quality-of-life for individuals, families, and communities, but also reduce public expenditures in some areas and increase public revenue in other areas. Michigan’s CILs annually calculate the cost return for three key service areas that are believed to produce the most significant savings: CIL involvement in long-term care, CIL services in support of employment, and CIL youth transition services. These computations show that every dollar invested in CIL services results in more than a dollar returned in savings to state taxpayers.

Information from the data system on the services provided and results achieved during FY 2006 is summarized the next section, followed by the computations of FY 2006 savings.

[This page left blank as the back of the Introduction.]

II. SELECTED OUTCOMES OF CIL ACTIVITIES

As reported by the database system, the total number of persons assisted by centers in FY 2006 was 34,119 compared to 29,977 in FY 2005. These totals include people with disabilities served through information and referral, direct services to individuals and specialized group services. The data indicates an increase of 4,122 or 14% in the number of people served between 2005 and 2006.

This increase occurred while Michigan's CILs operated on an essentially flat budget. Given limited resources, CILs have worked to identify how best to respond to individual and community needs, often by providing more group services.

The priority categories of CIL services, numbers of persons served, and reported outcomes for FY 2006 are described below. The categories and total hours of community and individual services reported for FY 2006 include: transition from institutions and ongoing community supports (38,242 hours), employment (36,799 hours), education and youth transition services (26,225 hours), housing (15,205 hours), transportation (12,870 hours), assistive technology (11,554 hours), accessibility (10,698 hours), and health care (7,323 hours). In addition, 10,680 combined hours of service were reported for other services that did not fit into the priority categories. The areas of greatest service activity during FY 2006 were transition from institutions and ongoing community supports, education, and employment. In combination, these three categories accounted for more than 60% of the reported hours of service.

Details for each of the categories are provided on the following pages.

SUMMARY OF FY 2006 CIL SERVICE DATA

Priority Service Area	Community Development Hours	Individual Service Hours	TOTAL SERVICE HOURS	INDIVIDUALS SERVED	Community Outcomes	Individual Outcomes	TOTAL OUTCOMES
Ongoing Community Supports	21,869	16,373	38,242	2,359	192	2,256	2,448
Employment	12,901	23,898	36,799	5,645	2,499	4,546	7,045
Education	12,139	14,086	26,225	2,739	400	1,831	2,231
Housing	8,567	6,638	15,205	4,881	494	1,086	1,580
Transportation	9,477	3,393	12,870	3,055	379	3,036	3,415
Assistive Technology	6,457	5,097	11,554	1,360	228	1,719	1,947
Accessibility	6,873	3,825	10,698	2,024	776	1,272	2,048
Other	8,897	1,783	10,680	1,037	58	86	144
Health Care	4,018	3,305	7,323	1,638	75	655	730
TOTALS	91,198	78,398	169,596	24,738	5,101	16,487	21,588
Unduplicated Number of Individuals				21,603			
Other Individuals (Served in Groups)				12,730			
Total Consumers Participating in Services				34,333			

SUMMARY OF FY 2005 CIL SERVICE DATA

Priority Service Area	Community Development Hours	Individual Service Hours	TOTAL SERVICE HOURS	INDIVIDUALS SERVED	Community Outcomes	Individual Outcomes	TOTAL OUTCOMES
Ongoing Community Supports	17,195	15,224	32,419	4,569	2,613	1,823	4,436
Education	10,967	18,765	29,732	1,790	513	1,817	2,330
Employment	9,681	15,525	25,206	5,625	2,420	3,753	6,173
Other	10,495	2,315	12,810	1,602	332	195	527
Transportation	5,976	5,571	11,547	3,023	410	2,939	3,349
Housing	5,735	5,793	11,528	3,804	686	908	1,594
Accessibility	8,097	3,097	11,194	1,375	629	365	994
Assistive Technology	4,900	3,581	8,481	1,530	273	1,149	1,422
Health Care	2,514	3,004	5,518	1,098	529	1,550	2,079
TOTALS	75,560	72,875	148,435	24,416	8,405	14,499	22,904
Unduplicated Number of Individuals				18,960			
Other Individuals (Served in Groups)				11,017			
Total Individuals Participating in Services				29,977			

COMPARISON OF FY 2005 & FY 2006 CIL SERVICE DATA

	Community Development Hours	Individual Service Hours	TOTAL SERVICE HOURS	INDIVIDUALS SERVED	Community Outcomes	Individual Outcomes	TOTAL OUTCOMES
12/20/05							
CHANGE	15,638	5,523	21,161	4,356	(3,304)	1,988	(1,384)
	21%	7.6%	14%	15%	-31%	14%	-6%

Transition from Institutions and Ongoing Community Supports

This priority category reflects the single greatest investment of CIL service activity, representing almost one-quarter (23%) of reported community and individual service hours during FY 2006. One of the most significant impacts CILs have on the community is helping people safeguard their independence by staying in their own homes – not in institutional settings. Since FY 1999, reports to the legislature have documented the very beneficial impact this program has had on the state budget.

The current interest in Congress in making transition from institutions a fifth core service for CILs reflects growing recognition at the federal level that it makes no sense to keep individuals who need long-term care in expensive institutional settings that foster dependency, if they can be successfully supported in their own homes, with a higher quality of life, and generally at less expense. During FY 2006, CILs assisted 20 individuals move out of institutional settings, up from 12 individuals in FY 2005.

The small number of persons transitioning from institutions reflects the unavailability of resources for this purpose. Assisting people to transition from institutions and obtain the array of services needed to support community living is very time-intensive and costly. Unfortunately, Michigan ranks 47th in the country in the amount of state money that is devoted to community-based services for long-term care. Availability of the MI Choice waiver, which is Michigan's most flexible program for meeting long-term care needs in the community, remains extremely limited. Accessible, affordable and safe housing is very difficult to find. And, there is very limited funding currently available to support services to develop and carry out plans for transitioning individuals from institutional settings.

Preventing people from entering institutions is much easier and can usually be done more efficiently. A significant advantage of prevention services is that people are assisted to retain their own housing and the support systems they have already established. In FY 2006, centers reported that they assisted 70 people avoid unnecessary institutionalization by securing the necessary supports (personal assistance services, durable medical equipment, home modifications, etc.) to stay in their own home, compared to 59 people assisted in FY 2005. In addition, CILs assisted 36 people with disabilities who had transitioned in previous years to sustain their community living and independence.

It is notable that the total cost of nursing home care continues to climb, while the cost of community-based care has remained relatively stable. However, during FY 2006, the CILs had reduced access to resources for the provision of transition services. Even with a decrease in the number of persons served, the CILs were able to produce cost savings of \$4.4 million from institutional transition and ongoing community supports.

CILs continue to engage in vigorous advocacy to protect and expand state programs providing long-term community supports. Recommendations of the Medicaid Long-Term Care Task Force, accepted and supported by the Governor in an executive order, provide opportunity for significant improvement in coming years. The CILs are actively promoting the successful implementation of these recommendations.

For purposes of calculating cost savings, CILs are very conservative in reporting the number of persons for whom services actually prevent institutional care. A much greater number of persons are assisted in obtaining and using a wide range of supports for community living.

In total, CILs reported spending 21,869 hours working to improve community supports and 16,373 hours assisting 2,359 people with disabilities with community support issues during FY 2006. This resulted in a total of 192 reported community outcomes and 2,256 reported individual outcomes.

- 1,623 increased their awareness of community resources to maintain community living.
- 181 acquired or maintained other necessary supports.
- 110 individuals acquired financial supports.
- 117 acquired personal assistance services.
- 89 resolved other issues related to community living.

Personal Assistance Services Reimbursement for Employment Program (PASREP)

Personal assistants (also known as personal care attendants or direct care workers) provide services that are essential to the independence of many people with disabilities, including the elderly. The term “personal assistance services,” or PAS, generally refers to in-home support services not provided by a medical professional. The services can include help getting in or out of bed, dressing, personal hygiene, cooking and home chores or shopping. Access to PAS is crucial to the health and well-being of many people with disabilities. There are several Medicaid-funded programs in Michigan that provide such services to different populations who need them.

CILs administer the Personal Assistance Reimbursement for Employment Program (PASREP), funded by the state and administered by the Department of Labor and Economic Growth-MRS. PASREP is a unique program that helps people with disabilities secure or maintain employment by reimbursing them for all, or a portion of the cost, of the personal assistance services they need. Ordinarily, Medicaid income restrictions would prevent these individuals from working because they would lose necessary benefits for personal assistance services. Although Freedom to Work has eliminated that barrier for some people, many working individuals with disabilities are not eligible for Freedom to Work. Also, Medicaid does not cover personal assistance in the work place. PASREP participants have been able to build careers and financial security, support their families, buy and keep their homes, pay taxes, and have a satisfying quality of life. An independent study of PASREP found that it more than pays for itself.

One PASREP participant said: “For most of us who participate in this program, there is NO other way personal assistance for employment needs could/would be met. Without this program, not only would I lose employment, which allows me to be a contributing citizen, but for each of us who became unemployed, a personal assistant would lose employment as well. The end result would not be ‘savings’, but increased expenses to the government. Losing two taxpayers and adding two Michigan residents to those unemployed and in need of assistance does not make

sense. Worse, we as Michigan citizens who have disabilities would be stripped of dignity, pride and the freedom we now enjoy.”

Summary of FY 2006 PASREP Participants

PASREP began FY 2006 with 35 participants. During the year five people dropped off of the program: two participants retired, two had their work hours reduced and were no longer eligible for the program, and one person died.

Five new participants were added to the program throughout the year so there were 40 participants served during the year, and 35 participants on the program at the end of the fiscal year.

Of the 35 participants, 22 have a spinal cord injury, 3 have muscular dystrophy, 2 have cerebral palsy, and one each has spinal muscular atrophy, multifocal neuropathy, stroke, osteo imperfecta, multiple sclerosis, lymphadema, musculoskeletal degeneration, visual impairment.

Participants must work at least 25 hours a week to be eligible for the program. Participant income ranges are as follows:

\$20,000 or less	8
\$20 – 30,000	4
\$30 – 40,000	8
\$40 – 50,000	6
\$50 - 60,000	3
\$60 - 70,000	3
\$70,000 or more	3

Reimbursements

24 participants are eligible for the maximum monthly reimbursement of \$1000. The average maximum monthly reimbursement for participants is \$910.

PASREP Waitlist

The waitlist currently has 12 people waiting to get on PASREP. As openings were available for the program, people on the waitlist were contacted. Several people who had been on the list for 2 to 3 years were no longer eligible for the program because they were not working the required amount of hours per week.

Because five people were added to the program this year and a few people dropped off of the waitlist, the wait to get on the program has been reduced from 3-4 years to 6-18 months. As word is getting out that the wait to get on the program has shortened, increasing numbers of

people are inquiring about the program and applying to get on the waitlist. As the waitlist again increases the wait to get on the program will increase as well.

Other CIL Involvement in Personal Assistance Issues

CILs are actively involved in PAS issues. They work with people with disabilities to secure the supports they need through the Home and Community Based Services waiver, the Habilitation Supports (HAB) waiver for the recipients of community mental health services, the Home Help program operated by the Department of Human Services, and other programs. At the state level, Disability Network/Michigan and its member CILs have advocated vigorously to protect and expand funding for the waiver and Home Help programs. The services available under these programs are, and will continue to be, essential if the State of Michigan is to comply with the Supreme Court's mandate under the *Olmstead* decision that long-term care be provided in the most integrated setting, consistent with an individual's needs. Expanding these programs will also prevent or delay nursing home placement, which is vital for controlling the increasing cost to Medicaid for long-term care.

An issue of increasing importance both in Michigan and at the national level is the critical shortage of direct care workers. Most in-home support is actually provided by family members. In light of the rapid growth in both the aging population and the number of adults with disabilities, it is ever more critical to address issues such as how to provide adequate support to family members who have taken on caretaker roles, and how to attract, screen, train, compensate and support competent, reliable personal assistants. During FY 2006, Disability Network/Michigan and its member CILs continued collaboration with other advocates and the Michigan Department of Community Health in supporting efforts of the Quality Home Care Council to strengthen and coordinate state policies related to direct care workers.

Employment

CILs provide a wide range of employment supports and services, including programs orienting people to the state's vocational rehabilitation system, peer mentoring, assistance in goal-setting and career planning, ADA advocacy, assistance with job accommodations, assistive technology training and supports, and at some CILs, job placement and assistance with plans for self-employment. In addition, the work CILs do to help people get access to transportation, personal assistance or other supports can be critical to the achievement of employment goals.

At both state and local levels, the CILs are active in assisting Michigan's Workforce Boards to ensure employment supports and services to individuals with disabilities. Specific emphasis has been placed on implementing Michigan's Freedom to Work Act and resolving systemic barriers to employment through activities such as job modification, reengineering, ergonomic redesign, flexible work schedules, and supervisor and peer education regarding disability awareness and workplace requirements. CILs also work with employers to meet ADA compliance expectations and realize that the costs of accommodating people with disabilities are not as burdensome as most employers fear.

In FY 2006, CILs invested 12,901 hours in working to remove systemic barriers to employment and improve community supports, and 23,898 hours in assisting 5,645 individuals with employment issues. This resulted in 2,499 reported community outcomes and 4,546 reported individual outcomes.

- 2,675 individuals increased knowledge of employment options.
- 2,378 employers were educated about the benefits of hiring people with disabilities
- 759 individuals increased work search skills.
- 203 individuals obtained employment.
- 196 individuals maintained employment.
- 53 employers provided a reasonable accommodation
- 35 individuals obtained volunteer work experience.
- 14 individuals started a small business.
- 13 individuals obtained a job via the Medicaid Buy-In
- 7 individuals improved job status via the Medicaid Buy-In.

Education and Youth Transition

Education is a major factor in helping people with disabilities successfully manage their lives and maintain independent living. Assisting people with disabilities in developing the skills for independent living is one of the CIL core services.

In FY 2006, CILs spent a total of 12,139 hours working to improve community education systems and 14,086 hours working with 2,739 individuals to obtain needed education. This resulted in 400 reported community outcomes and 1,831 reported individual service outcomes.

- 803 students acquired or increased independent living skills.
- 512 individuals completed an educational/training program.
- 237 individuals enrolled in an educational/training program.
- 201 students increased self-advocacy skills.
- 78 individuals achieved other education outcomes.

A particular area of CIL emphasis is services to youth in transition. Ample research evidence exists on the particular importance of keeping young people in school in order to prepare them for life and to ensure their financial independence. Based upon data provided by the Michigan Department of Education, the drop-out rate (2002-2003) for Special Education students was 38.74% in comparison to 4.08% for General Education students.

CILs attempt to level the playing field by working with youth in a number of ways, all intended to prepare them for independent living. These vary from community to community and from year to year, and are shaped by whatever additional local resources and collaborations can be forged. Services can include mentoring and empowerment, independent living skills development, preparation for employment, and support for active involvement in their educational planning. Although collaboration with school programs was considerably strengthened, some CILs were impacted by school reorganization due to the requirements of the

MEAP and No Child Left Behind. CILs indicate that they will need to address Michigan's drop-out rate for students with disabilities, which is higher than the national average.

Including all categories of service, CILs spent 8,973 hours during FY 2006 assisting 1,830 youth with disabilities to prepare for the transition to adult life and employment.

Housing

The lack of affordable, accessible housing continues to be one of the greatest barriers to independent living for Michigan citizens with disabilities. Most citizens who just rely on a full-time job earning the federal minimum wage cannot afford the rent and utilities of a one-or two-bedroom apartment. As reported by the National Low Income Housing Coalition, to afford a two bedroom apartment, the typical worker must earn at least \$15.37 an hour—nearly three times the federal minimum wage. Housing options are increasingly difficult to pursue, especially with the continuing reduction in the availability of federally subsidized Section 8 housing benefits. Individuals make choices about where to live, in order to maximize their possibilities for employment, connection to family and friends, and access to other supports. These choices are sharply limited by the lack of accessible housing options. Two recent nursing facility transition projects have shown that lack of affordable, accessible housing is the chief barrier for individuals who want to leave a nursing facility to live at home in the community.

In FY 2006, CIL staff spent 8,567 hours working to improve housing conditions in their community and 6,638 hours helping 4,881 people deal with housing issues.

- 587 individuals increased their knowledge of housing options.
- 257 individuals were able to get affordable, accessible housing with CIL help.
- 116 individuals resolved other housing issues.
- 106 individuals acquired financial resources for housing.
- 47 additional accessible/affordable housing units developed.
- 20 individuals secured compliance with fair housing laws.

Transportation

Transportation is an immediate issue for most people with disabilities in order to work, play, shop, vote, pursue an education, raise families and volunteer in their communities. CILs work at promoting cooperation between the transportation industry and disability community to increase mobility for people with disabilities under the ADA and beyond. CILs have provided testimony at hearings and meetings at state and local community levels concerning public transportation, as well as training and technical assistance in an effort to make public transportation work for everyone, everyday.

Across Michigan, CILs offer numerous services including:

- eligibility determination/functional assessment
- customer education training

- travel training for people with disabilities increasing independence
- operator awareness training
- customer service monitoring
- transportation strategies on coordination
- disability and transportation-related technology

Evidence has shown that taxpayers are willing to support, and even to expand, millages for well-run transit systems. CILs are concerned that one-third of Michigan's counties still do not have county-wide public transportation services. CILs provide the local in-depth support many of Michigan's citizens need in securing positive long-term changes in their community's transportation system.

In FY 2006, CILs spent 9,477 hours working in their communities to improve public transportation and 3,393 hours resolving transportation issues with 3,055 people with disabilities.

- 4,474 individuals were able to get access to transportation with the help of CILs in FY 2006.
- 982 individuals acquired knowledge of transportation options.
- 111 individuals acquired skills to utilize transportation.
- 124 individuals received CIL support and assistance with other transportation issues.
- 45 individuals acquired financial resources for transportation.
- 26 public transit systems expanded their geographic areas were as a result of CIL advocacy.
- 19 CILs advocated successfully for the expansion of public transportation service hours.
- 9 CILs educated their communities and advocated for other improvements in transportation for persons with disabilities.
- 1 CIL was able to enhance accessibility of local services to people with disabilities.

Assistive Technology (AT)

Assistive Technology (AT) is any device, piece of equipment, or system acquired off the shelf or customized that is used to increase, maintain, or improve functional capabilities of individuals with disabilities. AT services provide direct assistance to individuals with disabilities in the selection, acquisition, and/or use of an AT device.

AT devices can be as simple as a built-up handle on a pencil, or as complex as custom computer hardware and software. AT services include: 1) helping to determine which techniques or devices are necessary; 2) training and support to ensure the proper use of recommended methods and equipment, and; 3) integrating them into the home, classroom, or job.

AT is a way for people to achieve goals that they might not otherwise be able to achieve because of issues related to their disability. Anybody who has short or long-term goals, which they

cannot meet due to a physical or cognitive disability, is a candidate for AT. Acquiring AT is one step in the process of being able to live more independently, go to school, or return to work.

Some of the ways CILs provide AT services are:

- Provision of Direct AT Services. People with disabilities can receive AT evaluations, training, and purchasing, ordering, and installation services.
- Community Technology Center. A state-of-the-art computer center provides an opportunity for people with disabilities to learn computer skills tailored to their capabilities, try out assistive technology, access tutorial software, and figure out what works for them prior to purchasing AT.
- Support of the AT Loan Fund. People with disabilities receive help applying to the Assistive Technology Loan Fund and counseling customers about assistive technology devices, services and other potential funding sources. The AT Loan Fund, operating under grant agreements with Michigan Rehabilitation Services, provides low-cost financing to persons with disabilities for purchasing assistive technology devices and services. CILs are part of a coalition of organizations that helped to establish the fund through the Michigan Disability Rights Coalition, United Cerebral Palsy of Michigan, and Michigan Rehabilitation Services.
- AT Education. CILs provide a range of training options to people with disabilities, health care professionals, and funding agencies.
- AT Advocacy. CILs participate in national AT organizations such as Rehabilitation Engineering & Assistive Technology Society of North America (RESNA) to improve access to AT through education, advocacy, and policy.

In FY 2006, CILs spent 6,457 hours working in their communities to improve the availability of assistive technology and 5,097 hours assisting 1,360 people with disabilities on assistive technology issues. This resulted in 228 reported community outcomes and 1,719 reported individual outcomes.

- 1,170 individuals were educated on AT options.
- 342 individuals acquired new AT.
- 77 individuals acquired AT funding.
- 80 individuals resolved other AT issues.
- 31 individuals acquired increased functional and safe use of AT.
- 19 individuals had AT repaired.

Accessibility

Community programs, services, facilities, and buildings must be accessible if people with disabilities are to work, play, shop, vote, pursue an education, raise families, and participate in their communities like everyone else. CILs work in a variety of ways to assist people with disabilities with accessibility issues and to improve the accessibility of public and private facilities, programs, and services, including interpreter services, information about alternative formats, and complaint resolution.

As one individual said, “I spent years trying to access a party store near me, but got nowhere with the owners. When I asked the local CIL for help, it took three months of letter-writing, but the owners have now removed a bollard barrier in the parking lot, installed a power door, and assigned someone to help me reach merchandise if I ask. Way to go, CIL!!!”

During FY 2006, the Disability Network/Michigan Housing Work Group succeeded in introducing the Inclusive Home Design Act into the Michigan House of Representatives. This Act would increase the stock of visitable homes in Michigan by requiring visitability of homes built with funding assistance from MSHDA. The CILs also continued efforts during the year to promote accessible voting places and full implementation of the Help Americans Vote Act (HAVA).

In FY 2006, CIL staff spent 6,873 hours advocating for improved access at public and private facilities and 3,825 hours helping 2,024 individuals access goods, programs, and services.

- 595 individuals received enhanced accessibility of their home or apartment.
- 505 individuals received enhanced access to goods and services.
- 172 individuals resolved other accessibility issues.

Health Care

For persons with disabilities to remain independent and productive, access to quality health care is essential. A major CIL goal is to decrease the need for hospitalization by increasing the knowledge of self-care. This ultimately saves state Medicaid monies and increases the quality of life for persons with disabilities and senior citizens. CILs work to ensure that people with disabilities get the prescription drugs, personal assistance, home help and assistive technology they need to stay out of costly medical facilities. Additionally, CILs provide information and appropriate referral, as well as education and support to individuals to assist them in managing their own health and avoiding costly secondary disabilities.

In FY 2006, CILs spent 4,018 hours working to improve community health supports and 3,305 hours working with 1,638 people with disabilities on health care issues. This included 1,441 hours spent advocating with individuals, and 639 hours spent educating individuals on health care and how to access it.

- 265 individuals were helped by CILs to access appropriate health care services.
- 206 individuals increased their knowledge of healthy lifestyles and prevention of secondary disabilities.
- 97 individuals resolved other health issues.
- 87 individuals acquired insurance coverage.

[This page left blank as the back of the Selected Outcomes of CIL Activities section.]

III. SUMMARY OF TAXPAYER SAVINGS

Calculating the Return on Investment in Individuals, Families, and Communities

CILs are dedicated to providing individuals with disabilities the tools they need for personal and economic self-sufficiency and community inclusion. In working with people with disabilities, CIL staff see first-hand the results of increased abilities to direct one's own life, to manage one's own affairs, to obtain and maintain employment, and to be active in the community. Based on the direct, personal feedback received by the CILs, the return on investment of the public IL program in individuals, families, and communities is clearly demonstrated in the improved quality-of-life experienced by CIL consumers.

It has long been known that the outcomes produced by the IL program are also accompanied by cost savings to the state taxpayers. The same changes in community, family, and individual capacities that lead to improved quality-of-life are known to reduce public expenditures in some areas and increase public revenue in other areas. Much attention has been given in recent years at both the national and state levels to finding improved ways of calculating these taxpayer savings resulting from CIL services. Michigan's CILs annually calculate the cost return for key service areas that are believed to produce the most significant savings. These include three areas of CIL services: CIL involvement in long-term care, CIL services in support of employment, and CIL youth transition services. Description and computation of cost savings in these three areas for FY 2006 are presented below.

Savings from CIL Involvement in Long-Term Care

Michigan CILs report on three outcomes related to long-term care for which it is possible to calculate approximate taxpayer savings: the transitioning of individuals from nursing homes to independent living; preventing institutionalization of individuals; and sustained independent living in the community on the part of people who received transition assistance in previous years. For purposes of outcomes measurement, individuals are considered to have avoided institutionalization if they receive supports or services necessary for them to remain in the community. The latter generally include help in securing personal assistance services, home modifications (ramps, widened bathroom doors, etc.), or assistive technology (AT). In this context, AT is often thought of in terms of durable medical equipment, but even practical, inexpensive household items such as microwave ovens have been surprisingly valuable tools to help people with disabilities manage by themselves.

Taxpayer savings for two of the three outcomes are calculated based upon a comparison of the average yearly cost of institutionalization with the average yearly cost of support for people living independently. According to Michigan Department of Community Health (DCH) 63% of the people moving out of nursing homes used the Home and Community Based Services (HCBS) waiver saving the state \$44,462.90 per person. The remaining 37% was split in half between those using Home Help services from the Department of Human Services (DHS) and those who - remarkably - required no publicly funded personal assistance at all. In the absence of other more definitive data on individual needs, the last two figures are based on the information obtained in the work done by CILs under contract with the Michigan Department of Community Health.

Taxpayer savings are calculated separately for the three outcomes. The cost of institutionalization is conservatively calculated based only upon Medicaid expenditures, which were \$130.46 per day in FY 2006. (Source: Michigan Department of Community Health). This figure does not include the patient pay amount, which would make the total cost more than \$150 per day. Total public funding for nursing homes might also take into account the fact that Medicaid recipients' Social Security benefits are turned over to nursing homes. These benefits typically become the principal source of income for people transitioned from nursing homes.

The \$130.46 daily cost of nursing home care represents an annual cost of \$47,617.90. The average cost of the HCBS waiver for FY 2006 was \$670 per month, or \$8,040 a person per year (Source: Michigan Department of Community Health). And, the cost statewide for personal attendants under the Home Help program in 2006 was \$174,746,220 for 55,382 people (Source: Michigan Department of Community Health), or \$3,155 per year for the typical person requiring assistance. According to MDCH the savings of the MI Choice waiver is \$44,462.90 for each person per year, and compared to the cost of nursing home care, the annual cost under the Home Help program is \$44,462.90 less per person, and the annual cost for people with disabilities not requiring any publicly funded personal assistance is \$47,617.90 less. Calculation of taxpayer savings assumes that the range of individual needs is the same for all categories as for people seeking to leave nursing homes.

FY 2006 Cost Savings from IL/CIL Community/Long-Term-Care Supports

➤ Savings from FY 2006 nursing home transitions (20 individuals):	
• 63% of 20 individuals using the HCBS waiver (12 x \$36,792)	\$ 441,504
• 18.5% of 20 individuals using FIA Home Help (4 x \$44,463)	\$ 177,852
• 18.5% of 20 individuals requiring no publicly-funded personal assistance services (4 x \$47,618)	\$ 190,472
➤ Savings from FY 2006 services to prevent institutionalization (70 individuals):	
• 63% of 70 individuals using the HCBS waiver (44 x \$36,792)	\$ 1, 618,848
• 18.5% of 70 individuals using FIA Home Help (13 x \$44,463)	\$ 578,019
• 18.5% of 70 individuals relying on family or friends for personal assistance services (13 x \$47,618)	\$ 619,034
➤ Savings from FY 2006 sustained independence of individuals assisted in previous years (36 people):	
• 63% of 36 people using the HCBS waiver (22 x \$36,792)	\$ 809,424
• 18.5% of 36 individuals using FIA Home Help (7 x \$44,463)	\$ 311,241
• 18.5% of 36 individuals relying on family or friends for personal assistance services (7 x \$47,618)	\$ 333,326
TOTAL CALCULATED FY 2006 COST SAVINGS	\$ 5,079,720

Savings from CIL Services in Support of Employment

Making investments to assist persons with disabilities to obtain and maintain employment makes good economic sense for individual employers, for Michigan, and for America. It makes good economic sense from the standpoint of effective workforce development. *“The community of people with disabilities is a huge, untapped resource of millions of talented qualified people who are not being drawn into the workplace.”* (Washington Post, July 9, 2004)

It also makes good economic sense from the standpoint of increasing Michigan’s financial picture. During FY 2006, Centers for Independent Living were successful in assisting 426 consumers in obtaining or maintaining employment, or launching small businesses. The transition of people with disabilities from dependence on public assistance to employment results

in cost savings for taxpayers in many ways, including reductions in public expenditures for programs such as Supplemental Security Income (SSI), cash assistance, Food Stamps, and Medicaid. There are also returns to the state budget in the form of increased income and sales tax revenues.

In earlier reports to the Legislature, calculations were made only of cost savings from SSI and increased revenue from the state income tax. To provide a more accurate picture of the multiple taxpayer savings that result from employment of people with disabilities, calculations for fiscal years 2005, 2006, and 2007 have also been made of cost savings in cash assistance, Food Stamp, and Medicaid payments. These computations have been based, in part, on research done by Douglas L. Kruse, a labor economist from Rutgers University, as referenced in "*America's Largest Untapped Market*" published by the Louisiana Business Leadership Network.

A very conservative approach has been taken in calculating the cost savings. Although Michigan CILs assisted some 5,645 individuals with employment issues during FY 2006, calculations of cost savings have been done only for 426 individuals. This includes 203 individuals reported to have obtained employment, 196 individuals who maintained employment, 13 who obtained a job through the Medicaid buy-in, and 14 who launched new businesses. The calculations reflect taxpayer savings resulting from these 426 individuals working rather than depending upon public benefit programs.

Based upon figures from "*America's Largest Untapped Market*", it is conservatively projected that the employment of all 426 individuals results in cost savings from average monthly SSI payments of \$603 per month. Their employment is also projected to result in increased revenue from the State income tax, calculated at 3.9% of an average annual income of \$18,235 (which was the average income of MRS customers (2005 figures per Project Excellence at Michigan State University), adjusted for the \$2,000 standard deduction. It is further projected that cost savings for at least one-half of the individuals (213) would include, cash assistance of \$200 per month, Food Stamp payments of \$140 per month, and Medicaid payments of \$717 per month.

Much research is occurring nationally and in Michigan on cost savings resulting from employment of people with disabilities. It is expected that calculations in subsequent Legislative Reports will be able to more comprehensively reflect taxpayer savings and other economic impacts resulting from employment supports provided by Michigan's CILs. Meanwhile, the following computations are believed to present a very conservative picture of taxpayer savings resulting from CIL employment-related services during FY 2006.

FY 2006 Cost Savings from IL/CIL Services in Support of Employment

➤ Reduced dependence upon public assistance for 426 persons with disabilities assisted in securing, maintaining, or returning to employment. (426 individuals x \$7,248 in annual SSI benefits)	\$ 3,087,648
➤ Increased state income tax revenues from employment of 426 persons with disabilities earning an average of \$18,235 annually. (426 individuals x (\$18,235 -\$2,000) x 3.9% tax rate)	\$ 269,658
➤ Reduced cost of cash assistance for at least one-half (213) of the individuals. (213 individuals x \$2,400 in annual cash benefits)	\$ 511,200
➤ Reduced cost of Food Stamp expenditures for at least one-half (213) of the individuals. (213 individuals x \$1,680 in annual Food Stamp benefits)	\$ 357,840
➤ Reduced Medicaid expenditures for at least one-half (213) of the individuals. (213 individuals x \$8,604 in annual Medicaid benefits)	\$ 1,832,652
TOTAL CALCULATED FY 2006 COST SAVINGS	\$ 6,058,998

Savings from CIL Involvement in Youth Transition Services

CILs work with young people with disabilities to keep them in school, to give them knowledge and skills to navigate life after high school, to provide them with the tools and the self-confidence they need for competitive employment, and to help them develop and focus on personal goals. Any taxpayer savings from such interventions are long-range and difficult to calculate. Based upon CIL experience with young people, it is reasonable to assume that this population faces varying but in some cases very significant degrees of risk—of dropping out, of a lifetime of dependence on public assistance, a higher risk of encounters with the criminal justice system, or, at worst, of institutionalization. As noted in the description above of the costs of institutional supports, successful intervention by CILs in only a few instances reaps enormous savings for taxpayers.

Because of the number of assumptions that have to be made about the impact of preventive services, these estimates of taxpayer savings have always been extremely conservative. Using essentially the same methodology as that for CIL employment services (above), it is assumed that many young people with disabilities who decide to stay in school, and who receive supports preparing them for competitive employment and independent living, will not have to depend upon SSI benefits, and will become taxpaying citizens in Michigan. It is impossible to predict how many of the hundreds of students helped through CIL intervention will achieve these outcomes. The use of even a miniscule success rate, however, illuminates the staggering long term significance of these supports.

FY 2006 Cost Savings from IL/CIL Youth Transition Services

➤ Estimated savings from reduced dependence upon public assistance of 10 young people over a 45 year working life (unadjusted for inflation) (10 individuals x \$7,248 annual SSI benefits x 45 years of work)	\$ 3,261,600
➤ Additional state income tax revenues over the same period (unadjusted for inflation) (10 individuals x (\$18,235-\$2,000) x 3.9% tax rate x 45 years working life)	\$ 284,850
TOTAL CALCULATED FY 2006 COST SAVINGS	\$ 3,546,450

TOTAL CALCULATED SAVINGS

Combining the calculations of cost savings from all three service areas gives the following totals for CIL network FY 2006 cost savings.

Calculated FY 2006 CIL Network Cost Savings

➤ Savings from FY 2006 nursing home transitions	\$ 809,828
➤ Savings from FY 2006 work to prevent institutionalization	\$ 2,815,901
➤ Savings from sustained independence during FY 2006 of persons transitioned in previous years	\$ 1,453,991
➤ Savings from CIL services in support of employment	\$ 6,058,998
➤ Savings from CIL youth transition services	\$ 3,546,450
TOTAL CALCULATED FY 2006 COST SAVINGS	\$14,685,168

In comparison to FY 2005, the FY 2006 computations show the following changes in cost savings:

- Nursing home transitions increased by \$338,873 or 72%.
- Work to prevent institutionalization increased by \$500,372 or 21.6%.
- Sustained independence decreased by \$233,598 or 13.8%.
- Services in support of employment increased by \$61,331 or 1%.
- CIL youth transition services increased by \$162,229 or 4.8%.

In total, the FY 2006 cost savings represent an increase of \$829,207 or 6% from FY 2005. These computations indicate that any dollar invested in CILs from any source results in more than a comparable dollar of savings to state taxpayers.

Economic Impact

By improving the economic conditions and community integration of people with disabilities, CILs also have significant impact on the broader society.

There are 54 million people with disabilities in the U.S. with roughly 2 million residing in Michigan (about 3%). They are not just people with disabilities—they are CEOs, secretaries, scientists, artists, parents, and children—all customers in a market any one of us could belong to overnight. They do not just buy wheelchairs and TTY devices. They also buy cars, houses, stocks, and toothpaste. It is estimated that the national aggregate income of people with disabilities is now at \$796 billion—roughly \$23.8 billion in Michigan.

The following trends will continue to have a great economic impact on Michigan:

- People with disabilities will work in greater numbers. According to the Census Bureau, employment rates for young adults with severe disabilities are triple that of previous generations.
- Education rates for people with disabilities are increasing. College enrollment has leapt from 29% to 44%.
- Technological advances are eliminating many of the physical and informational barriers which have long existed for people with disabilities.
- Public awareness of disability issues is growing and changing.
- America's population is aging, and disability increases with age. The number of Americans aged 65 and older is projected to increase 135% between 1995 and 2050, according to the Census Bureau.
- People with disabilities are coalescing as an increasing economic and social force. (National Organization on Disability/Harris Survey on Americans with Disabilities)

The supports Michigan's CILs provide to improve the economic condition and quality of life for individuals with disabilities have, therefore, multiple ripple effects that promote and support continued growth and recovery of the entire state.

[This page left blank as the back of the Summary of Taxpayer Savings section.]

IV. COMPARATIVE FUNDING OVERVIEW

The CILs provide detailed budgets and funding information in their annual reports and applications to the federal Rehabilitation Services Administration and Michigan Rehabilitation Services. The following tables have been derived from information provided in these reports and applications.

Three sets of tables are presented on the following pages. The first provides a summary of the CIL **total budgets**. The second summarizes **funding by source**. The third summarizes **funding by major program**.

In combination, the following tables provide a comprehensive overview of the diversity of budget needs and funding sources for Michigan's CIL network.

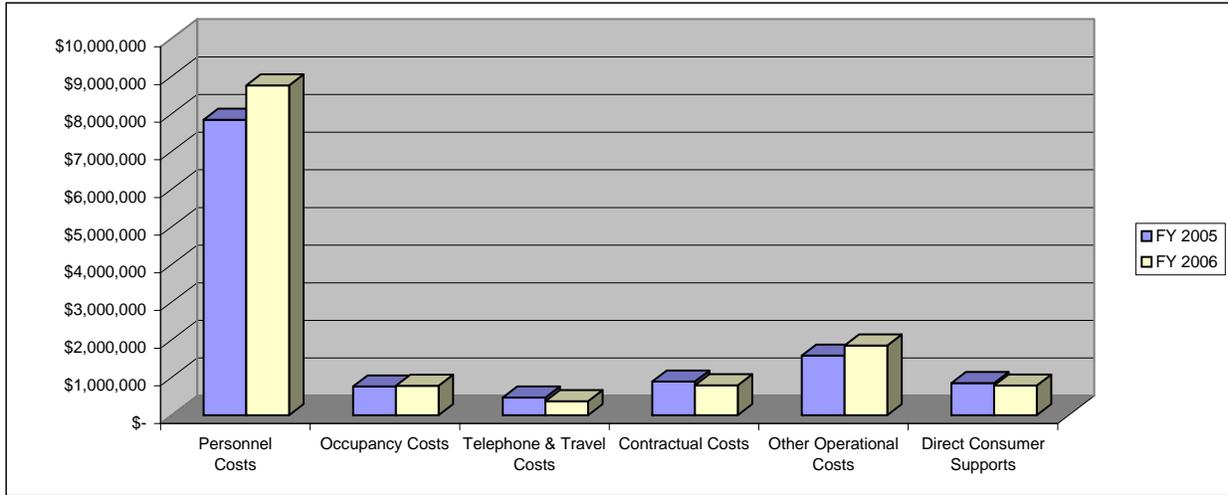
CIL Budget Summaries

CIL budget summaries are provided for Fiscal Years 2006 and 2007, as well as comparisons with CIL network totals for FY 2005. The budgets are summarized in relation to the following cost categories:

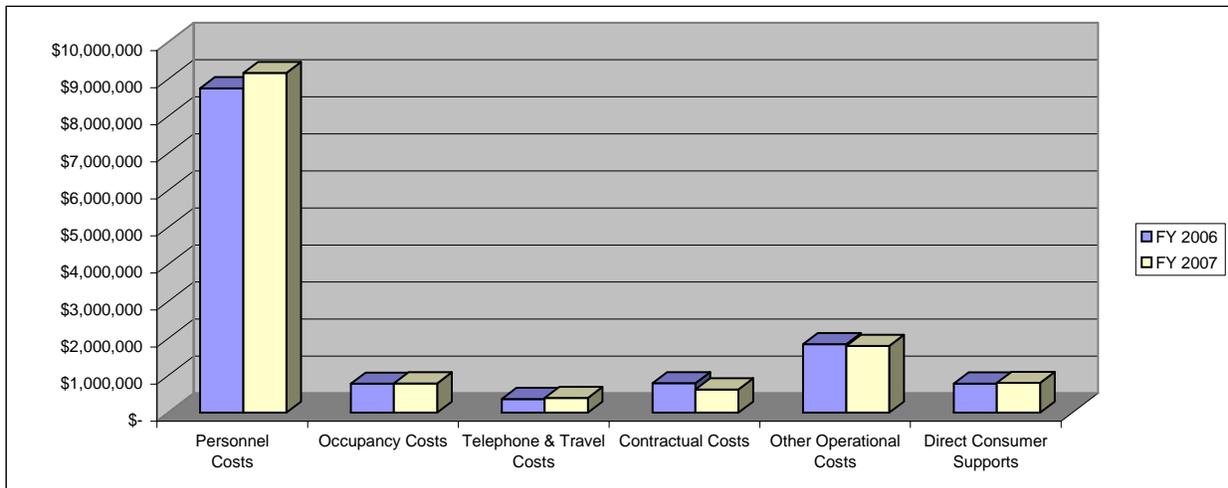
- **Personnel Costs** include salaries, wages, and fringes.
- **Occupancy Costs** include rent or other occupancy payments, utilities, and any other identified ongoing costs related to the office space.
- **Telephone and Travel Costs** include identified costs of telecommunication and staff travel.
- **Contractual Costs** include charges for contractual services and consultants.
- **Other Operational Costs** include all other identified costs of operating the CIL such as office supplies, insurance, postage, printing, and training costs. This category also includes items that do not properly fit elsewhere such as special, one-time costs.
- **Direct Consumer Supports** include the costs of direct personal supports for individual consumers. Included are specialized direct support programs that go significantly beyond the typical scope of CIL core services, such as personal assistance, housekeeping, ramps, equipment, transportation, and performance of specified chores or errands. The CIL may reimburse the consumer for the cost of purchasing these supports, may pay the provider, or may meet the costs in other ways. Although most CILs do not commit a large portion of their budgets to direct consumer supports, for the ones that do, these costs are recognized as an integral part of their CIL program operations.

COMPARISON OF CIL BUDGET SUMMARIES

	Personnel Costs	Occupancy Costs	Telephone & Travel Costs	Contractual Costs	Other Operational Costs	Direct Consumer Supports	CIL TOTALS
FISCAL YEAR 2005	\$ 7,846,642 63.3%	\$ 759,246 6.1%	\$ 464,676 3.7%	\$ 893,697 7.2%	\$ 1,580,455 12.7%	\$ 853,934 6.9%	\$ 12,398,650 100.0%
FISCAL YEAR 2006	\$ 8,756,155 65.6%	\$ 781,706 5.9%	\$ 368,570 2.8%	\$ 795,740 6.0%	\$ 1,850,862 13.9%	\$ 786,862 5.9%	\$ 13,339,895 100.0%
CHANGE	\$ 909,513 11.6%	\$ 22,460 3.0%	\$ (96,106) -20.7%	\$ (97,957) -11.0%	\$ 270,407 17.1%	\$ (67,072) -7.9%	\$ 941,245 7.6%



	Personnel Costs	Occupancy Costs	Telephone & Travel Costs	Contractual Costs	Other Operational Costs	Direct Consumer Supports	CIL TOTALS
FISCAL YEAR 2006	\$ 8,756,155 65.6%	\$ 781,706 5.9%	\$ 368,570 2.8%	\$ 795,740 6.0%	\$ 1,850,862 13.9%	\$ 786,862 5.9%	\$ 13,339,895 100.0%
FISCAL YEAR 2007	\$ 9,170,114 67.4%	\$ 793,083 5.8%	\$ 400,049 2.9%	\$ 628,931 4.6%	\$ 1,803,281 13.3%	\$ 803,494 5.9%	\$ 13,598,952 100.0%
CHANGE	\$ 413,959 4.7%	\$ 11,377 1.5%	\$ 31,479 8.5%	\$ (166,809) -21.0%	\$ (47,581) -2.6%	\$ 16,632 2.1%	\$ 259,057 1.9%



CIL network budget totals show that *Personnel Costs* continue to be the major expense, representing an average of about 65% of the cost of operating a CIL, with the remaining 35% of budgeted costs spread across the other five identified budget categories. Seven CILs even report FY 2007 *Personnel Costs* that exceed 70%. The extensive investment in personnel is consistent with the CILs' mission and nature, including their commitment to establish a constructive systems-change presence in local communities and to provide effective community and consumer services. The statewide average percentage for *Personnel Costs* shows an increase from 63% in FY 2005 to more than 67% in FY 2007, reflecting, in part, the increasing costs of health care.

It is notable that *Contractual Costs* have been decreasing over the last two years. There was a decrease of \$97,957 or 11.0% from FY 2005 to FY 2006, followed by another decrease of \$166,809 or 21.0% from FY 2006 to FY 2007. This included reductions from FY 2006 to FY 2007 for ten CILs, ranging from \$740 to \$55,369, with five CILs reporting increases ranging from \$2,653 to \$27,858. The trend of reductions is consistent with the CIL's continuing efforts to find more cost-effective ways of operating.

Changes in budget totals from FY 2006 to FY 2007 show mixed experiences across the CIL network. Six CILs report budget decreases, ranging from \$5,863 to \$75,272, while nine report budget increases, ranging from \$3,049 to \$98,113. These varied experiences reflect individual CIL efforts to deal with a diversity of federal and local funding reductions, and – when possible – to take advantage of specific funding opportunities for development of new programs or projects addressing identified community and consumer needs. Common themes throughout the CIL network during the last year have been to re-examine priorities and re-focus or consolidate programs and take other steps to increase efficiency, to find and access new funding or other resources that will help them better carry out their many varied community and consumer responsibilities, and – when necessary – to discontinue programs or services that they do not have the resources to maintain. This has resulted in CILs restructuring some programs and dropping others, which is reflected in their respective budgets.

The projected FY 2007 CIL Network budget total of \$13,598,952 represents a \$259,057 or 1.9% increase from FY 2006. However, the pattern of total funding for the CIL network continues in the shadow of the significant 4% decrease that was experienced between FY 2002 and FY 2003 – from \$12,784,234 to \$12,282,176. The statewide total increase from FY 2002 to FY 2007 was \$814,718 or 6.4%. However, this includes \$471,052 resulting from the FY 2005 merger of the Jackson CIL and disAbility Connections. If the Jackson CIL / disAbility Connections merger is excluded from the computation, the FY 2007 statewide total is only \$343,666 more than the FY 2002 figure, representing a 2.7% increase over a five-year period – and averaging an increase of only 0.5% per year for the period. Considering the continuing increases in operational costs – especially staff health care insurance coverage – the statewide CIL Network has entered FY 2007 with less total capacity than it had in FY 2002.

FY 2006 BUDGET SUMMARIES

	Personnel Costs	Occupancy Costs	Telephone and Travel Costs	Contractual Costs	Other Operational Costs	Direct Consumer Supports	CIL Totals
Ann Arbor CIL - Ann Arbor	1,076,224 55.3%	163,548 8.4%	30,719 1.6%	87,725 4.5%	224,559 11.5%	363,268 18.7%	1,946,043 100.0%
Blue Water Cil - Port Huron	951,335 83.0%	48,660 4.2%	24,600 2.1%	40,000 3.5%	81,373 7.1%	0.0%	1,145,968 100.0%
Capital Area CIL - Lansing	649,036 65.4%	81,935 8.3%	25,297 2.5%	173,682 17.5%	62,771 6.3%	0.0%	992,721 100.0%
Community Connections - Benton Harbor	136,770 72.3%	15,440 8.2%	13,754 7.3%	4,100 2.2%	13,942 7.4%	5,180 2.7%	189,186 100.0%
Disability Advocates of Kent County - Grand Rapids	807,673 67.1%	76,450 6.4%	24,755 2.1%	57,489 4.8%	237,118 19.7%	0.0%	1,203,485 100.0%
Disability Connection - Muskegon	331,570 66.6%	20,040 4.0%	9,323 1.9%	33,750 6.8%	88,454 17.8%	15,000 3.0%	498,137 100.0%
disAbility Connections - Jackson	324,440 54.6%	11,000 1.9%	8,287 1.4%	14,000 2.4%	236,841 39.8%	0.0%	594,568 100.0%
Disability Network/Lakeshore - Holland	410,272 61.9%	40,679 6.1%	15,050 2.3%	45,240 6.8%	151,854 22.9%	0.0%	663,095 100.0%
Disability Network/Mid Michigan - Midland	862,778 76.2%	28,599 2.5%	61,459 5.4%	3,645 0.3%	175,500 15.5%	0.0%	1,131,981 100.0%
Disability Network/Northern Michigan - Traverse City	187,914 47.7%	20,352 5.2%	23,000 5.8%	117,980 30.0%	44,345 11.3%	0.0%	393,591 100.0%
Disability Network/Oakland & Macomb - Sterling Heights	506,637 64.5%	87,677 11.2%	27,213 3.5%	51,600 6.6%	112,682 14.3%	0.0%	785,809 100.0%
Disability Network/Wayne County-Detroit - Detroit	458,735 81.3%	40,407 7.2%	13,856 2.5%	31,507 5.6%	20,050 3.6%	0.0%	564,555 100.0%
Disability Resource Center - Kalamazoo	827,193 73.7%	59,700 5.3%	39,960 3.6%	5,060 0.5%	189,743 16.9%	0.0%	1,121,656 100.0%
Superior Alliance for IL - Marquette	235,651 70.8%	11,119 3.3%	26,860 8.1%	34,294 10.3%	24,707 7.4%	0.0%	332,631 100.0%
The Disability Network - Flint	989,927 55.7%	76,100 4.3%	24,437 1.4%	95,668 5.4%	186,923 10.5%	403,414 22.7%	1,776,469 100.0%
NETWORK	8,756,155	781,706	368,570	795,740	1,850,862	786,862	13,339,895
TOTALS	65.6%	5.9%	2.8%	6.0%	13.9%	5.9%	100.0%

FY 2007 PROJECTED BUDGET SUMMARIES

	Personnel Costs	Occupancy Costs	Telephone & Travel Costs	Contractual Costs	Other Operational Costs	Direct Consumer Supports	CIL
Ann Arbor CIL - Ann Arbor	1,093,035 58.4%	169,369 9.1%	38,556 2.1%	61,000 3.3%	138,811 7.4%	370,000 19.8%	1,870,771 100.0%
Blue Water CIL - Port Huron	906,335 79.6%	45,096 4.0%	36,816 3.2%	50,187 4.4%	100,310 8.8%	0.0%	1,138,744 100.0%
Capital Area CIL - Lansing	621,651 62.4%	74,302 7.5%	21,991 2.2%	201,540 20.2%	76,286 7.7%	0.0%	995,770 100.0%
Community Connections - Benton Harbor	241,250 84.0%	23,107 8.0%	8,350 2.9%	0.0%	14,592 5.1%	0.0%	287,299 100.0%
Disability Advocates of Kent County - Grand Rapids	838,757 66.6%	76,000 6.0%	30,018 2.4%	70,380 5.6%	244,322 19.4%	0.0%	1,259,477 100.0%
Disability Connection - Muskegon	398,283 70.5%	20,300 3.6%	16,350 2.9%	36,403 6.4%	93,571 16.6%	0.0%	564,907 100.0%
disAbility Connections - Jackson	408,101 59.7%	10,000 1.5%	6,458 0.9%	4,000 0.6%	255,142 37.3%	0.0%	683,701 100.0%
Disability Network/Lakeshore - Holland	478,137 67.7%	43,644 6.2%	14,200 2.0%	44,500 6.3%	120,975 17.1%	5,000 0.7%	706,456 100.0%
Disability Network/Mid Michigan - Midland	917,515 77.3%	29,003 2.4%	86,490 7.3%	0.0%	153,438 12.9%	0.0%	1,186,446 100.0%
Disability Network/Northern Michigan - Traverse City	210,520 54.3%	19,000 4.9%	16,200 4.2%	72,250 18.6%	69,758 18.0%	0.0%	387,728 100.0%
Disability Network/Oakland & Macomb - Sterling Heights	531,537 68.8%	88,658 11.5%	25,113 3.3%	18,972 2.5%	108,173 14.0%	0.0%	772,453 100.0%
Disability Network/Wayne County-Detroit - Detroit	487,206 85.5%	26,600 4.7%	15,900 2.8%	8,000 1.4%	31,893 5.6%	0.0%	569,599 100.0%
Disability Resource Center - Kalamazoo	828,008 73.2%	69,411 6.1%	42,448 3.8%	8,900 0.8%	182,527 16.1%	0.0%	1,131,294 100.0%
Superior Alliance for IL - Marquette	224,866 78.8%	14,678 5.1%	14,337 5.0%	12,500 4.4%	19,117 6.7%	0.0%	285,498 100.0%
The Disability Network - Flint	984,913 56.0%	83,915 4.8%	26,822 1.5%	40,299 2.3%	194,366 11.1%	428,494 24.4%	1,758,809 100.0%
NETWORK	9,170,114	793,083	400,049	628,931	1,803,281	803,494	13,598,952
TOTALS	67.4%	5.8%	2.9%	4.6%	13.3%	5.9%	100.0%

Value of Volunteer Services

Volunteers are an important part of CIL capacity. As community-based organizations which developed in part from the volunteer and consumer movements of the 1960s and 1970s, CILs depend heavily upon the contributions of volunteers in carrying out their organizational missions. The use of volunteers also helps CILs make more efficient use of paid staff. CILs benefit from volunteers in a wide variety of activities, including both administrative support (such as greeting visitors and organizing resource materials) and service provision (such as peer support and mentoring). For some CILs (such as new, developing CILs, or well-established CILs that have wide-ranging community involvement) volunteers are an essential part of their “workforce” capacity.

During FY 2006, Michigan’s CILs reported a total of 75,341 volunteer hours. This is the equivalent of more than 37 full-time staff. A rate of \$18.04 per hour has been established as a national standard for the valuing of volunteer services. Calculated at this rate, the CIL network received volunteer services worth \$1,359,152 in FY 2006, which was 9.3% of the combined total CIL network budgets (including the volunteer time).

FY 2006 VALUE OF VOLUNTEER SERVICES

	Volunteer Hours	Rate	Volunteer Value	FY 2006 Budget	Total Budget & Value	Volunteer Value as % of Total
Ann Arbor CIL - Ann Arbor	19,170	18.04	345,827	1,946,043	2,291,870	15.09%
Blue Water CIL - Port Huron	8,140	18.04	146,846	1,145,968	1,292,814	11.36%
Capital Area CIL - Lansing	4,950	18.04	89,298	992,721	1,082,019	8.25%
Community Connections - Benton Harbor	634	18.04	11,437	189,186	200,623	5.70%
Disability Advocates of Kent County - Grand Rapids	10,300	18.04	185,812	1,203,485	1,389,297	13.37%
Disability Connection - Muskegon	4,404	18.04	79,448	498,137	577,585	13.76%
disAbility Connections - Jackson	5,000	18.04	90,200	594,568	684,768	13.17%
Disability Network/Lakeshore -Holland	3,698	18.04	66,712	663,095	729,807	9.14%
Disability Network/Mid-Michigan -Midland	635	18.04	11,455	1,131,981	1,143,436	1.00%
Disability Network/Northern Michigan -Traverse City	7,188	18.04	129,672	393,591	523,263	24.78%
Disability Network/Oakland & Macomb -Sterling Heights	511	18.04	9,218	785,809	795,027	1.16%
Disability Network/Wayne -Detroit	322	18.04	5,809	564,555	570,364	1.02%
Disability Resource Center - Kalamazoo	5,681	18.04	102,485	1,121,656	1,224,141	8.37%
Superior Alliance for IL - Marquette	1,208	18.04	21,792	332,631	354,423	6.15%
The Disability Network -Flint	3,500	18.04	63,140	1,776,469	1,839,609	3.43%
CIL TOTALS	75,341		1,359,152	13,339,895	14,699,047	9.25%
Statewide Independent Living Council - Lansing	3,417	18.04	61,643	371,474	433,117	14.23%
Michigan Association of CILs - Haslett	0	18.04	0	714000	714,000	0.00%
GRAND TOTAL	78,758		1,420,794	14,425,369	15,846,164	8.97%

[This page left blank as the back of the CIL Budget Summaries section.]

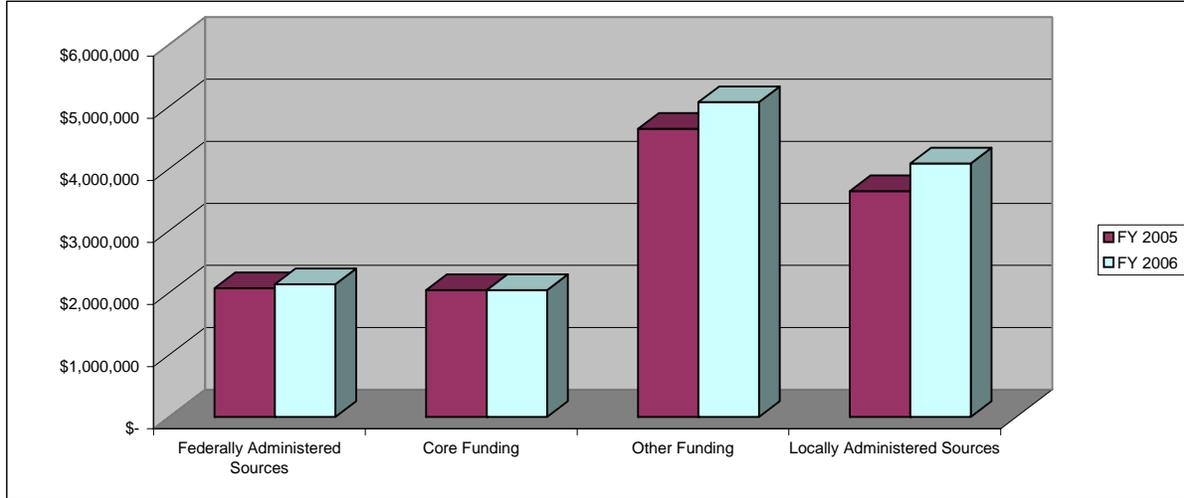
CIL Funding by Source

Summaries of CIL funding by source are provided for Fiscal Years 2006 and 2007, as well as comparisons with CIL network totals for FY 2005. Funding sources have been summarized in relation to the following categories:

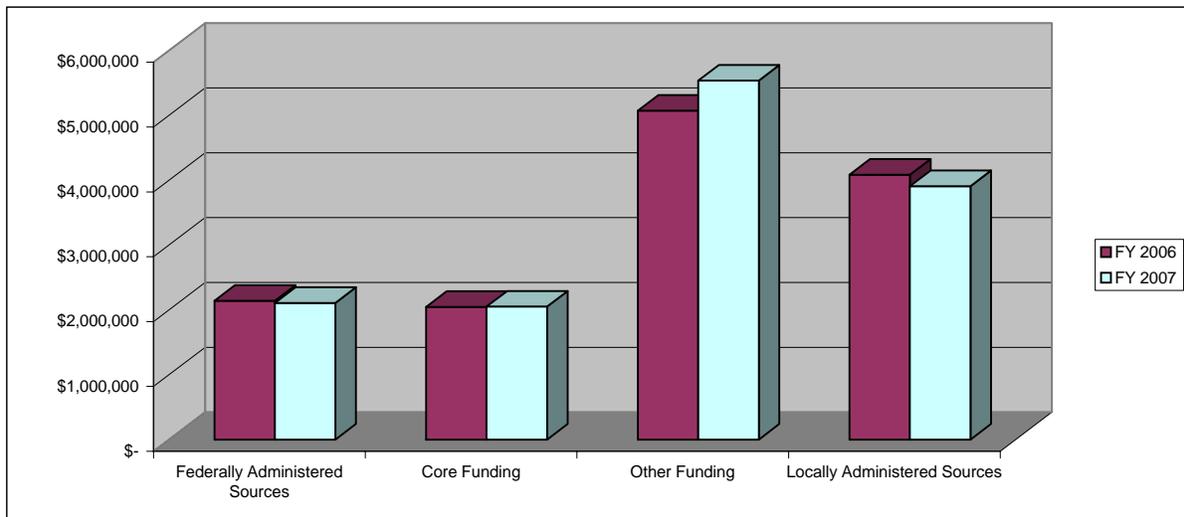
- ***Federally Administered Sources*** include the core funding grants received by 10 CILs directly from the federal Rehabilitation Services Administration under Title VII of the Rehabilitation Act. In addition, one CIL receives another direct federal grant -- Disability Connection CIL in Muskegon receives a grant for housing services.
- ***State Administered Sources*** include grants and fee-for-services funding from state agencies such as Michigan Rehabilitation Services (MRS) and the Michigan Commission for the Blind (MCB). These include both ***State Administered Core Funding*** grants provided by MRS for the development and support of CILs, and ***State Administered Other Funding*** from state-administered grants and fee-for-service payments for IL supports and services that help achieve the purposes of the funding source. ***State Administered Sources*** include a mix of federal funds, state and local match required to obtain the federal funds, and appropriated state funds. The ratio of the federal, state, and local funding mix varies by program and subprogram.
- ***Locally Administered Sources*** include local and private funding sources such as local United Way organizations, community mental health agencies, community foundations, and local fund-raising.

COMPARISON OF CIL FUNDING BY SOURCE

	Federally Administered Sources	State Administered Sources		Locally Administered Sources	CIL TOTALS
		Core Funding	Other Funding		
FY 2005	\$ 2,073,448 16.7%	\$ 2,042,901 16.5%	\$ 4,644,253 37.5%	\$ 3,638,048 29.3%	\$ 12,398,650 100.0%
FY 2006	\$ 2,139,689 16.0%	\$ 2,043,951 15.3%	\$ 5,072,013 38.0%	\$ 4,084,242 30.6%	\$ 13,339,895 100.0%
CHANGE	\$ 66,241 3.2%	\$ 1,050 0.1%	\$ 427,760 9.2%	\$ 446,194 12.3%	\$ 941,245 7.6%



	Federally Administered Sources	State Administered Sources		Locally Administered Sources	CIL TOTALS
		Core Funding	Other Funding		
FY 2006	\$ 2,139,689 16.0%	\$ 2,043,951 15.3%	\$ 5,072,013 38.0%	\$ 4,084,242 30.6%	\$ 13,339,895 100.0%
FY 2007	\$2,106,607 15.5%	\$ 2,049,067 15.1%	\$ 5,535,210 40.7%	\$ 3,908,067 28.7%	\$ 13,598,951 100.0%
CHANGE	\$ (33,082) -1.5%	\$ 5,116 0.3%	\$ 463,197 9.1%	\$ (176,175) -4.3%	\$ 259,056 1.9%



CIL network totals show that ***State Administered Other Funding*** provides about 40% of the CIL Network totals, with ***Locally Administered Sources*** providing about another 30%. These two sources continue to account for about two-thirds of the CIL network funding. In combination, ***State Administered Core Funding*** and ***Federally Administered Sources*** provide the remaining one-third of the CIL network funding. This mix of funding is consistent with the community-based nature of the CILs and the diversity of their programming in response to local needs.

There were a few changes in statewide CIL funding sources from FY 2006 to FY 2007. The most significant was a net increase of \$463,197 or 9.1% in ***State Administered Other Funding***. This reflected very mixed patterns of increases and decreases in funding for individual CILs, with eight experiencing reductions in ***State Administered Other Funding*** ranging from \$779 to \$52,034, and seven having increases ranging from \$31,552 to \$204,297. These changes reflected reallocations of MRS Cash Match Collaborative grant funds to improve equity of IL services in support of employment outcomes, increased CIL cash match agreements with MCB, changes in other grants including grants from the Developmental Disabilities Council, the Disability Network / Michigan, and the Michigan Disability Rights Coalition, and other contractual or fee-for-service arrangements.

There were also small decreases in two categories -- \$182,175 or 4.5% in ***Locally Administered Sources***, and \$27,082 or 1.3% in ***Federally Administered CIL*** funding.

Comparison of the FY 2006 and FY 2007 CIL reports on funding sources reveal no clear statewide trends. Consistent with the state's overall economy, significant changes appear to be local or program related. The most useful interpretation may be that the reports reflect individual CILs working within a volatile environment of constrained resources to make the best possible use of existing funding, and to access whatever limited additional funding may be made available.

FY 2006 FUNDING BY SOURCE

	Federally Administered Sources	State Administered Sources		Locally Administered Funding	CIL Totals
		Core Funding	Other Funding		
Ann Arbor CIL - Ann Arbor	214,985 11.0%	136,207 7.0%	1,049,446 53.9%	545,405 28.0%	1,946,043 100.0%
Blue Water CIL - Port Huron	214,985 18.8%	108,388 9.5%	494,753 43.2%	327,842 28.6%	1,145,968 100.0%
Capital Area CIL - Lansing	214,985 21.7%	125,182 12.6%	327,161 33.0%	325,393 32.8%	992,721 100.0%
Community Connections - Benton Harbor	0.0%	88,795 46.9%	80,891 42.8%	19,500 10.3%	189,186 100.0%
Disability Advocates of Kent County - Grand Rapids	214,985 17.9%	108,389 9.0%	373,607 31.0%	506,504 42.1%	1,203,485 100.0%
Disability Connection - Muskegon	30,000 6.0%	177,686 35.7%	134,495 27.0%	155,956 31.3%	498,137 100.0%
disAbility Connections - Jackson	0.0%	126,023 21.2%	193,832 32.6%	274,713 46.2%	594,568 100.0%
Disability Network/Lakeshore - Holland	214,985 32.4%	108,389 16.3%	218,802 33.0%	120,919 18.2%	663,095 100.0%
Disability Network/Mid Michigan - Midland	214,980 19.0%	108,389 9.6%	319,940 28.3%	488,672 43.2%	1,131,981 100.0%
Disability Network/Northern Michigan - Traverse City	0.0%	234,757 59.6%	158,834 40.4%	0.0%	393,591 100.0%
Disability Network/Oakland & Macomb - Sterling Heights	213,685 27.2%	122,573 15.6%	371,830 47.3%	77,721 9.9%	785,809 100.0%
Disability Network/Wayne County-Detroit - Detroit	0.0%	349,914 62.0%	125,740 22.3%	88,901 15.7%	564,555 100.0%
Disability Resource Center - Kalamazoo	214,985 19.2%	108,389 9.7%	499,263 44.5%	299,019 26.7%	1,121,656 100.0%
Superior Alliance for IL - Marquette	176,129 53.0%	32,480 9.8%	120,022 36.1%	4,000 1.2%	332,631 100.0%
The Disability Network - Flint	214,985 12.1%	108,390 6.1%	603,397 34.0%	849,697 47.8%	1,776,469 100.0%
NETWORK	2,139,689	2,043,951	5,072,013	4,084,242	13,339,895
TOTALS	16.0%	15.3%	38.0%	30.6%	100.0%

FY 2007 CIL FUNDING BY SOURCE

	Federally Administered Sources	State Administered Sources		Locally Administered Funding	CIL Totals
		Core Funding	Other Funding		
Ann Arbor CIL - Ann Arbor	211,478 11.3%	137,198 7.3%	997,412 53.3%	524,683 28.0%	1,870,771 100.0%
Blue Water CIL - Port Huron	211,478 18.6%	109,578 9.6%	699,050 61.4%	118,637 10.4%	1,138,743 100.0%
Capital Area CIL - Lansing	211,478 21.2%	126,252 12.7%	358,713 36.0%	299,327 30.1%	995,770 100.0%
Community Connections - Benton Harbor	0.0%	88,159 30.7%	186,820 65.0%	12,320 4.3%	287,299 100.0%
Disability Advocates of Kent County - Grand Rapids	211,478 16.8%	109,579 8.7%	425,616 33.8%	512,804 40.7%	1,259,477 100.0%
Disability Connection - Muskegon	30,000 5.3%	176,413 31.2%	214,540 38.0%	143,954 25.5%	564,907 100.0%
disAbility Connections - Jackson	0.0%	125,120 18.3%	165,890 24.3%	392,691 57.4%	683,701 100.0%
Disability Network/Lakeshore - Holland	211,478 29.9%	109,579 15.5%	307,449 43.5%	77,950 11.0%	706,456 100.0%
Disability Network/Mid Michigan - Midland	211,478 17.8%	109,579 9.2%	311,716 26.3%	553,673 46.7%	1,186,446 100.0%
Disability Network/Northern Michigan - Traverse City	0.0%	233,075 60.1%	154,653 39.9%	0.0%	387,728 100.0%
Disability Network/Oakland & Macomb - Sterling Heights	211,478 27.4%	123,661 16.0%	355,898 46.1%	81,416 10.5%	772,453 100.0%
Disability Network/Wayne County-Detroit - Detroit	0.0%	347,856 61.1%	186,743 32.8%	35,000 6.1%	569,599 100.0%
Disability Resource Center - Kalamazoo	211,478 18.7%	109,579 9.7%	493,758 43.6%	316,479 28.0%	1,131,294 100.0%
Superior Alliance for IL - Marquette	173,305 60.7%	33,859 11.9%	74,334 26.0%	4,000 1.4%	285,498 100.0%
The Disability Network - Flint	211,478 12.0%	109,580 6.2%	602,618 34.3%	835,133 47.5%	1,758,809 100.0%
NETWORK	2,106,607	2,049,067	5,535,210	3,908,067	13,598,951
TOTALS	15.5%	15.1%	40.7%	28.7%	100.0%

[This page left blank as the back of the Funding by Source section.]

CIL Funding by Program

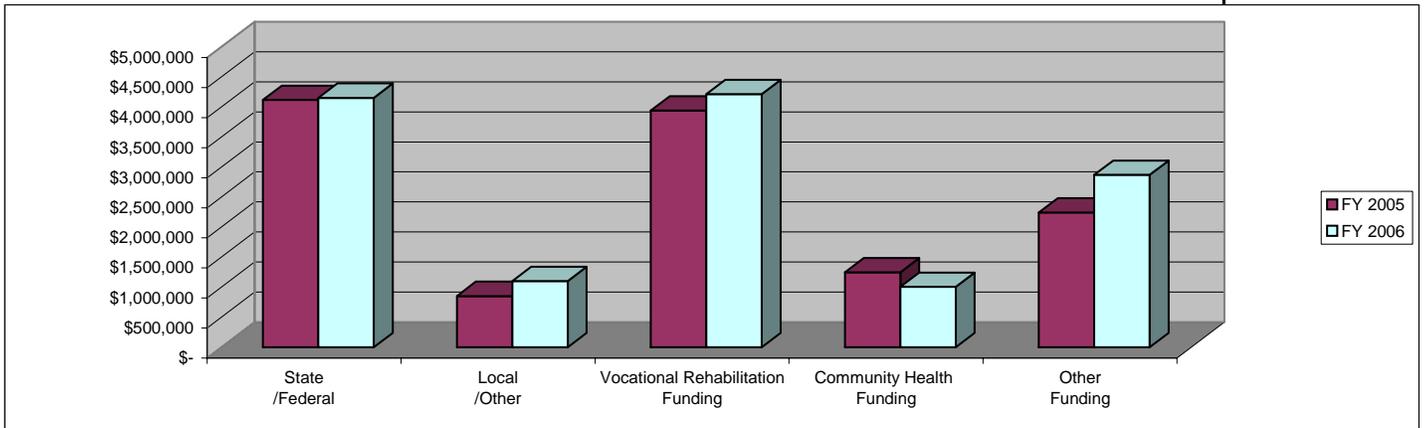
Summaries of CIL funding by major program areas are provided for Fiscal Years 2006 and 2007, as well as comparisons with CIL network totals for FY 2005. CILs receive funding for basic organizational development and operations, as well as for specific IL services and supports that help other programs achieve their purposes. To reflect this diversity, funding profiles have been summarized in relation to the following categories:

- **IL Core Funding** is provided to develop and operate a CIL that meets federal CIL standards. **State and Federal** includes Title VII, Part C grants from the federal Rehabilitation Services Administration and core funding grants provided by Michigan Rehabilitation Services (MRS). **Local and Other** includes CIL fund-raising and other sources of funding obtained to develop and support the CIL.
- **Vocational Rehabilitation Funding** is provided for IL services and supports to help people with disabilities achieve vocational outcomes. This includes federal funding, along with state and local matching funds. It includes funding such as vocational rehabilitation grants and fee-for-services payments from MRS and the Michigan Commission for the Blind.
- **Community Health Funding** is provided for IL services and supports to help people with disabilities address community health IL needs. It includes funding such as grants and fee-for-services payments from local mental health service agencies and federal and state grants dealing with managed care and nursing home issues.
- **Other Funding** is provided for IL services and supports to address a variety of other specific purposes. It includes funding such as grants and fee-for-services payments from a variety of sources (including agencies, local governments, and educational agencies) for purposes not included in the other identified categories.

COMPARISON OF CIL FUNDING BY PROGRAM

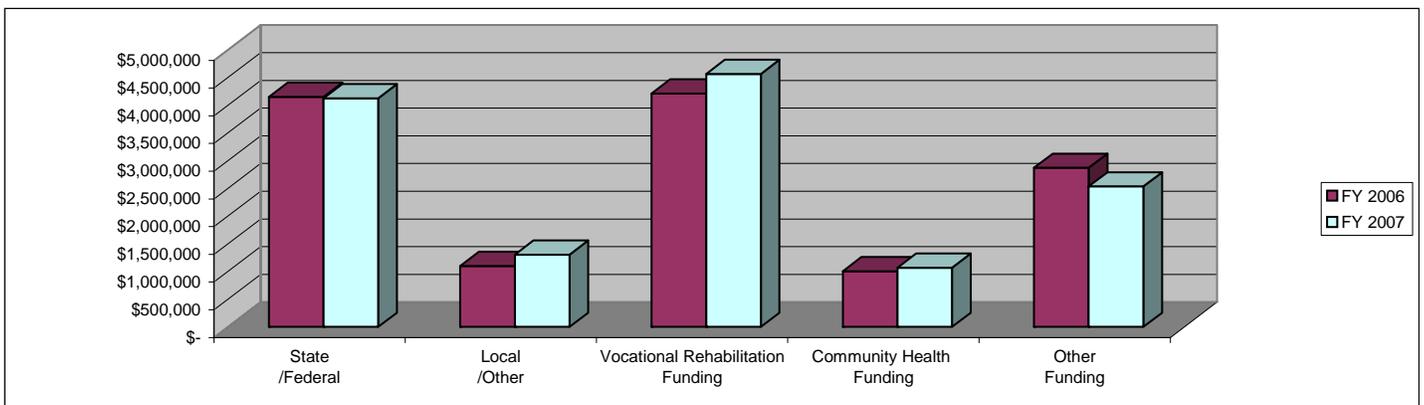
Core Funding

	State /Federal	Local /Other	Vocational Rehabilitation Funding	Community Health Funding	Other Funding	CIL TOTALS
FY 2005	\$ 4,116,151 33.2%	\$ 852,647 6.9%	\$ 3,939,359 31.8%	\$ 1,248,410 10.1%	\$ 2,242,083 18.1%	\$ 12,398,650 100.0%
FY 2006	\$ 4,151,640 31.1%	\$ 1,101,251 8.3%	\$ 4,210,575 31.6%	\$ 1,005,718 7.5%	\$ 2,870,711 21.5%	\$ 13,339,895 100.0%
CHANGE	\$ 35,489 0.9%	\$ 248,604 29.2%	\$ 271,216 6.9%	\$ (242,692) -19.4%	\$ 628,628 28.0%	\$ 941,245 7.6%



Core Funding

	State /Federal	Local /Other	Vocational Rehabilitation Funding	Community Health Funding	Other Funding	CIL TOTALS
FY 2006	\$ 4,151,640 31.1%	\$ 1,101,251 8.3%	\$ 4,210,575 31.6%	\$ 1,005,718 7.5%	\$ 2,870,711 21.5%	\$ 13,339,895 100.0%
FY 2007	\$ 4,125,674 30.3%	\$ 1,303,772 9.6%	\$ 4,563,936 33.6%	\$ 1,068,330 7.9%	\$ 2,537,239 18.7%	\$ 13,598,951 100.0%
CHANGE	\$ (25,966) -0.6%	\$ 202,521 18.4%	\$ 353,361 8.4%	\$ 62,612 6.2%	\$ (333,472) -11.6%	\$ 259,056 1.9%



CIL Network totals for FY 2007 show that **State and Federal IL Core Funding** programs make up about one-third (30.3%) of the CIL Network's revenue, **Vocational Rehabilitation Funding** provides about another third (33.6%) of the total revenue, and the other three program categories account for the remaining third (36.2%). This reflects the diversity of the local CIL programs. The substantial portion provided by **Vocational Rehabilitation Funding** also reflects the success of CILs in establishing the local value of their services in assisting VR customers to achieve vocational goals.

The most consistent change from FY 2006 to FY 2007 is a 0.7% decrease in **State and Federal IL Core Funding** received by all fifteen CILs. This reflects decreases in direct federal funding and coordinating adjustments in the state core funding grants. The adjustments were made to spread the federal reduction equitably among all fifteen CILs.

The greatest percentage change in CIL Network program totals for FY 2007 is a \$202,521 or 18.4% increase in **Local and Other Core** funding. Nine CILs report increased **Local and Other Core** funding with increases ranging from \$52 to \$161,451. Two CILs report no change. Four CILs report reductions ranging from \$4,000 to \$59,596. This reflects continuing CIL efforts to obtain additional sources of funding for IL services.

The largest changes in the statewide totals are an increase in **VR Program Funding** (\$353,361 or 8.4%) and a decrease in **Other Program Funding** (\$333,472 or 11.6%). The net increase in **VR Program Funding** results from eight CILs with increases ranging from \$20,706 to \$131,966, and seven CILs with decreases ranging from \$4,181 to \$58,021. These changes reflect reallocations of MRS Cash Match Collaborative grant funds to improve equity of IL services in support of employment outcomes, newly established CIL cash match agreements with MCB, and a variety of other contractual and fee-for-service arrangements between the CILs and vocational rehabilitation agencies. CILs are clearly continuing to demonstrate the effectiveness of their services in helping people with disabilities achieve vocational outcomes.

The decrease in **Other Program Funding** reflects a continuing and widespread scarcity of other service resources. Fully ten CILs report decreases in Other Program Funding ranging from \$1,680 to \$107,464, with one CIL reporting no change, and four CILs reporting increases ranging from \$2,587 to \$81,225.

All programs except for Federal and State Core show some CILs with increases and some with decreases. Comparison of the FY 2006 and FY 2007 CIL reports reveal no clear statewide trends. Analysis of the program changes leads to the same conclusions as that of the funding sources. Consistent with the state's overall economy, significant changes appear to be local. The most useful interpretation may be that the reports reflect individual CILs working within a volatile environment of constrained resources to make the best possible use of existing funding, and to access whatever limited additional funding may be made available.

FY 2006 CIL FUNDING BY PROGRAM

	CIL Core Funding		Vocational Rehabilitation Funding	Community Health Funding	Other Funding	CIL Totals
	State/ Federal	Local Other				
Ann Arbor CIL - Ann Arbor	351,192 18.0%	262,420 13.5%	1,021,899 52.5%	32,189 1.7%	278,343 14.3%	1,946,043 100.0%
Blue Water CIL - Port Huron	323,373 28.2%	40,300 3.5%	254,412 22.2%	18,000 1.6%	509,883 44.5%	1,145,968 100.0%
Capital Area CIL - Lansing	340,167 34.3%	63,718 6.4%	327,161 33.0%	0.0%	261,675 26.4%	992,721 100.0%
Community Connections - Benton Harbor	88,795 46.9%	0.0%	88,391 46.7%	0.0%	12,000 6.3%	189,186 100.0%
Disability Advocates of Kent County - Grand Rapids	323,374 26.9%	250,619 20.8%	343,607 28.6%	0.0%	285,885 23.8%	1,203,485 100.0%
Disability Connection - Muskegon	177,686 35.7%	4,893 1.0%	59,495 11.9%	186,063 37.4%	70,000 14.1%	498,137 100.0%
disAbility Connections - Jackson	126,023 21.2%	76,000 12.8%	17,891 3.0%	0.0%	374,654 63.0%	594,568 100.0%
Disability Network/Lakeshore - Holland	323,374 48.8%	115,266 17.4%	154,215 23.3%	64,587 9.7%	5,653 0.9%	663,095 100.0%
Disability Network/Mid Michigan - Midland	323,369 28.6%	36,155 3.2%	319,940 28.3%	381,379 33.7%	71,138 6.3%	1,131,981 100.0%
Disability Network/Northern Michigan - Traverse City	234,757 59.6%	0.0%	158,834 40.4%	0.0%	0.0%	393,591 100.0%
Disability Network/Oakland & Macomb - Sterling Heights	336,258 42.8%	54,892 7.0%	371,830 47.3%	0.0%	22,829 2.9%	785,809 100.0%
Disability Network/Wayne County-Detroit - Detroit	349,914 62.0%	0.0%	125,740 22.3%	0.0%	88,901 15.7%	564,555 100.0%
Disability Resource Center - Kalamazoo	323,374 28.8%	151,988 13.6%	361,792 32.3%	0.0%	284,502 25.4%	1,121,656 100.0%
Superior Alliance for IL - Marquette	208,609 62.7%	0.0%	89,725 27.0%	0.0%	34,297 10.3%	332,631 100.0%
The Disability Network - Flint	321,375 18.1%	45,000 2.5%	515,643 29.0%	323,500 18.2%	570,951 32.1%	1,776,469 100.0%
NETWORK	4,151,640	1,101,251	4,210,575	1,005,718	2,870,711	13,339,895
TOTALS	31.1%	8.3%	31.6%	7.5%	21.5%	100.0%

FY 2007 PROJECTED FUNDING BY PROGRAM

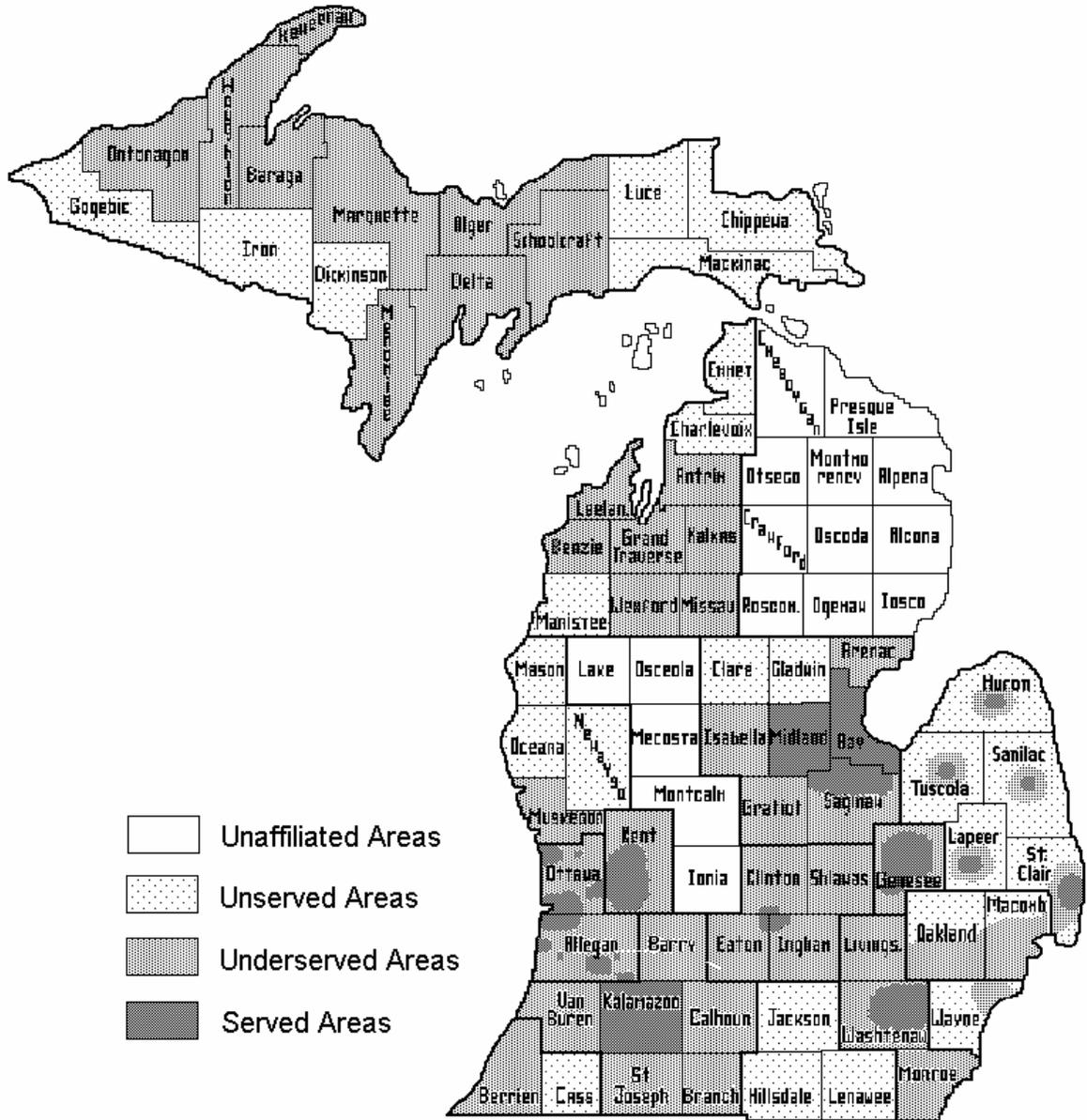
	CIL Core Funding		Vocational	Community	Other	CIL Totals
	State/ Federal	Local Other	Rehabilitation Funding	Health Funding	Funding	
Ann Arbor CIL - Ann Arbor	348,676 18.6%	262,472 14.0%	963,878 51.5%	30,000 1.6%	265,745 14.2%	1,870,771 100.0%
Blue Water CIL - Port Huron	321,056 28.2%	65,000 5.7%	232,763 20.4%	36,000 3.2%	483,924 42.5%	1,138,743 100.0%
Capital Area CIL - Lansing	337,730 33.9%	58,945 5.9%	358,713 36.0%	0.0%	240,382 24.1%	995,770 100.0%
Community Connections - Benton Harbor	88,159 30.7%	6,000 2.1%	182,820 63.6%	0.0%	10,320 3.6%	287,299 100.0%
Disability Advocates of Kent County - Grand Rapids	321,057 25.5%	305,392 24.2%	330,616 26.3%	0.0%	302,412 24.0%	1,259,477 100.0%
Disability Connection - Muskegon	176,413 31.2%	25,000 4.4%	128,540 22.8%	227,306 40.2%	7,648 1.4%	564,907 100.0%
disAbility Connections - Jackson	125,120 18.3%	237,451 34.7%	53,940 7.9%	0.0%	267,190 39.1%	683,701 100.0%
Disability Network/Lakeshore - Holland	321,057 45.4%	55,670 7.9%	174,921 24.8%	67,930 9.6%	86,878 12.3%	706,456 100.0%
Disability Network/Mid Michigan - Midland	321,057 27.1%	38,500 3.2%	311,716 26.3%	415,094 35.0%	100,079 8.4%	1,186,446 100.0%
Northern Michigan Alliance for IL - Traverse City	233,075 60.1%	0.0%	154,653 39.9%	0.0%	0.0%	387,728 100.0%
Disability Network/Oakland & Macomb - Sterling Heights	335,139 43.4%	56,000 7.2%	355,898 46.1%	0.0%	25,416 3.3%	772,453 100.0%
Disability Network/Wayne County-Detroit - Detroit	347,856 61.1%	25,000 4.4%	186,743 32.8%	0.0%	10,000 1.8%	569,599 100.0%
Disability Resource Center - Kalamazoo	321,057 28.4%	127,342 11.3%	493,758 43.6%	0.0%	189,137 16.7%	1,131,294 100.0%
Superior Alliance for IL - Marquette	207,164 72.6%	0.0%	74,334 26.0%	0.0%	4,000 1.4%	285,498 100.0%
The Disability Network - Flint	321,058 18.3%	41,000 2.3%	560,643 31.9%	292,000 16.6%	544,108 30.9%	1,758,809 100.0%
NETWORK	4,125,674	1,303,772	4,563,936	1,068,330	2,537,239	13,598,951
TOTALS	30.3%	9.6%	33.6%	7.9%	18.7%	100.0%

[This page left blank as the back of the Comparative Funding Overview section.]

SUMMARY REPORTS BY MICHIGAN CILS AND PROVIDERS OF CIL NETWORK SUPPORT

In this section, each individual CIL describes noteworthy accomplishments for the reporting period, as well as its priorities for the coming year. Variations in the work plan priorities and approach reflect the unique characteristics and needs of centers and their communities.

Access to CIL Services in Michigan 2006



Ann Arbor Center for Independent Living (AACIL)

2568 Packard Road • Ann Arbor • 48104

Phone Number: 734-971-0277 • Fax Number: 734-971-0310

www.aacil.org • jmagyar@aacil.org



Counties Served Livingston, Washtenaw, Monroe

Year Established 1976

Number of Staff: - Full-time 29

- Part-time 5

- Contractual 1

Volunteer Hours 10/01/05-9/30/06 19,170

Consumers Served 10/01/05-9/30/06 3,780

Reported FY 2006 Budget \$1,946,043

Projected FY 2007 Budget \$1,870,771



CIL Description

Mission: To improve the quality of life of people with disabilities.

Major Goals: The Ann Arbor Center for Independent Living seeks to **Amplify the voice** of people with disabilities and **Connect people** to community resources in order to **Transform lives**, one person at a time.

General Description: The Ann Arbor Center for Independent Living was established in February of 1976. With a talented staff and volunteer corps, we serve Washtenaw, Livingston, and Monroe Counties, which are a mix of both urban and rural areas. Ann Arbor CIL programs and services include individual and systems advocacy, information and referral, peer support, independent living supports, assistive technology, rehabilitation engineering and information technology, crisis assistance, vocational counseling and job development, placement and small business development assistance, nursing home transition assistance, youth mentorship, and adaptive sports and recreation activities.

Community Impact for FY 2006

➤ **Amplifying the Voice of People with Disabilities**

- We continued to apply steady pressure on local municipalities and other public entities to ensure curb ramp installation compliance. In 2006, over 5,000 newly installed curb ramps were surveyed and found to be non-compliant and over 500 new ramps have been constructed to ADA standards.
- We continued to actively engage our community in problem solving dialog in order to increase options for people with disabilities for affordable and accessible housing, transportation, personal assistance, access to health care, and polling place accessibility.
- We were instrumental in maintaining the availability of affordable and accessible Night Ride bus

services.

- We organized and conducted disability awareness, sensitivity and safety training for 60 public transit vehicle drivers.
- We worked with the University of Michigan Health System to educate new physicians about disability issues.
- We worked diligently to implement the Help America Vote Act in our local community.

➤ **Connecting People with Community Resources**

- We connected 1,212 people with disabilities to vital community resources that are essential for obtaining and maintaining employment and living meaningful and productive lives in our community.
- We provided 153 people with life changing access to assistive technology.
- We connected 393 individuals with community supports that prevented institutionalization.

Priorities for FY 2007

➤ **Amplifying the Voice of People with Disabilities**

- We will continue to apply steady pressure on local municipalities to enforce curb ramp ADA and Michigan Barrier Free Design construction standards.
- We will continue to strengthen our collaborative partnerships with The University of Michigan, Department of Physical Medicine and Rehabilitation, The University of Michigan Initiative on Disability Studies and the Department of Physical Medicine at St. Joseph Mercy Health System.
- We will continue to actively amplify the voice of people with disabilities to increase options for affordable and accessible housing, transportation, personal assistance, access to health care, and polling place accessibility, all of which are long term systems change goals.

➤ **Connecting People with Community Resources.**

- We will continue to promote self-help and self-advocacy.
- We will continue to promote the development of peer relationships and peer role models.
- We will increase our capacity to conduct community outreach through our TIME/DOLLAR program, the Washtenaw Talent Exchange, with an emphasis on outreach to minority populations.
- In collaboration with the Michigan Business Leadership Network, we will organize and host a Washtenaw County MIBLN Chapter.

➤ **Organizational Development**

- We will move forward with planning and implementation of a capital campaign to fund a new location for our Ann Arbor office.

Blue Water Center for Independent Living (BWCIL)

310 Water Street • Port Huron • 48060

Phone Number: 810-987-9337 • Fax Number: 810-987-9548

www.bwcil.org • bwcilph@yahoo.com



"Where disability ends and ability begins."

<i>Counties Served</i>	Huron, Lapeer, Sanilac, St. Clair, Tuscola
<i>Year Established</i>	1986
<i>Number of Staff:</i>	
- Full-time	19
- Part-time	9
- Contractual	2
<i>Volunteer Hours 10/01/05-9/30/06</i>	8,140
<i>Consumers Served 10/01/05-9/30/06</i>	5,262
<i>Reported FY 2006 Budget</i>	\$1,145,968
<i>Projected FY 2007 Budget</i>	\$1,138,744



CIL Description

The Blue Water Center for Independent Living (BWCIL) serves over 4,000 square miles, with a total population of 394,031. The service area, primarily rural, is comprised of five counties in what is commonly referred to as Michigan's Thumb Region. One of the unique features of the BWCIL is its ability to maintain branch offices in the county seat in each of these five counties. The offices are so located that no one residing in the Thumb needs to travel more than an hour in order to get independent living services. All five offices offer core services. In addition, the BWCIL maintains fee for service contracts with local partners such as the Area Agency on Aging, local Community Mental Health organizations, local Workforce Development Boards, Michigan Rehabilitation Services, and the Human Development Commission.

Community Impact for FY 2006

- Housing programs, such as Door to Open and Welcome Home, assist persons with disabilities who are homeless find transitional housing and teaches independent living skills, enhancing their ability to become contributing members of their communities.
- The BWCIL was instrumental in assisting three individuals in Huron County in either having their guardianship terminated or having a guardian appointed of their choice.
- In an effort to increase employment opportunities for youth with disabilities, the BWCIL has partnered with MI Works!, Community Mental Health, Intermediate School District and Michigan Rehabilitation Services to offer the YOU and STEP programs. These programs assist youth to become employment ready and assist with job placement and training.

Priorities for FY 2007

- Expand the role of volunteers throughout our organization, cultivating leadership skills and grassroots organizing to effect change in our communities, and support the statewide CIL network advocacy initiatives, including transportation, housing, long-term care, and network development.
- Continue to work on the development of programs addressing the needs of youth with disabilities in the areas of employment and education.
- Develop and increase organizational capacity to better serve all people with disabilities and the community.
- Develop support services for parolees reentering the community to prevent recidivism and enhance their ability to become contributing members of their communities.

Capital Area Center for Independent Living (CACIL)

1048 Pierpont Suite 9-10 • Lansing • 48911

Phone Number: 517-241-0393 • Fax Number: 517-241-0438

www.cacil.org • eweaver@cacil.org



Capital Area Center for
Independent Living
"Your Disability Resource"

Counties Served Ingham, Eaton, Clinton, Shiawassee

Year Established 1976

Number of Staff: - Full-time 11

- Part-time 2

- Contractual 1

Volunteer Hours 10/01/05-9/30/06 4950

Consumers Served 10/01/05-9/30/06 1976

Reported FY 2006 Budget \$992,721

Projected FY 2007 Budget \$995,770



CIL Description

Mission: To enhance the quality of life of people with disabilities.

Major Goals: 1) To continue working with the CATA system to improve services to people with disabilities.
2) To begin working with the VA system to form a collaboration and begin services to Veterans that are disabled.

General Description: CACIL, one of the first CILs in Michigan, began in 1976 to serve Ingham, Eaton and Clinton counties (Shiawassee County was added later). As well as providing the four core services, CACIL has had a positive impact on three major systems that impact the lives of people with disabilities - transportation, long term care, and vocational services. Our CIRCLE I and II program provides not only soft pre-employment skills, but also job seeking skills such as resume writing. CACIL's 19 year partnership with CATA, has enabled CACIL to be on the forefront of advocacy in transportation. CACIL has taken a lead in long term care reform, remodeling the long term care system with the ultimate goal of Money Follows the Person through advocacy and participation on statewide committees. With a staff that consists of 85% persons with disabilities, CACIL provides mentoring, role modeling and peer support to persons with disabilities.

Community Impact for FY 2006

- Informed choices classes increased consumer's knowledge of decision making at 90%, thereby decreasing the amount of time between intake at Michigan Rehabilitation Services and establishment of an individual plan for employment (IEP).
- 89 Interpreter invoices were processed for MRS customers.

- Over 700 youth with disabilities were reached through transition programs in Ingham, Eaton, and Clinton counties.
- Because of CACIL's advocacy efforts and rally, state departments involve consumers at the inception of policy making, instead of presenting regulations as a done deal. This is an example of real systems change. We continue to work with the legislative and executive branches of Michigan government to reform the long-term care system.
- The partnership between Michigan Rehabilitation Services continues to be strong and helps ensure appropriate services for consumers.
- CACIL held three major fundraisers this year, raising over \$20,000.
- CACIL's "Getting out the Vote" concentrated on persons with cognitive disabilities; many voted for the first time. Because of our efforts one of our partner agencies gave consumers paid leave time to exercise this constitutional right. We focused on getting out the vote at our September 2006 Town Hall meeting.

Priorities for FY 2007

- Continue the PACER puppet program that addresses disability awareness in elementary age children in Ingham, Eaton, and Clinton Counties. The plan is to do two to four shows a month reaching 40 students per show.
- Continue to take an active role and lead in advocating for reforms in the Medicaid system, as well as the Long-Term Care system with legislators in collaboration with partners. Staff member, Marsha Moers, was appointed Chair of the Long-Term Care Commission by the Governor.
- Ingham Regional Interagency Coordinating Council (RICC) continues to work in the areas of empowerment, transportation, and legislative awareness.
- Continue to aggressively explore different avenues of funding diversification. CACIL will hold four fundraisers and raise over \$25,000. One of the fundraisers, the Walk and Roll –a-Thon is in collaboration with partners Michigan Disability Rights Coalition (MDRC), Disability Network of Michigan (DN/M), and the Statewide Independent Living Council (SILC).
- The ADA picnic will be a 16 year celebration that will be held collaboration with community partners.
- Continue to lead the way in the provision of professional rehabilitation nursing services and health advocacy, both systems and individual.
- Fine tune and expand our Circle Tier program to aid more consumers in achieving their vocational goals.
- Continue barrier removal efforts and respond to access issues in the community.

Community Connections of SW Michigan (CC)
 133 East Napier Ave. Suite 2 • Benton Harbor • 49022
 Phone Number: 269-925-6422 • Fax Number: 269-925-7141
 www.miconnect.org • cil@miconnect.org



<i>Counties Served</i>	Berrien, Cass
<i>Year Established</i>	2000
<i>Number of Staff:</i>	
- Full-time	4
- Part-time	4
- Contractual	1
<i>Volunteer Hours 10/01/05-9/30/06</i>	634
<i>Consumers Served 10/01/05-9/30/06</i>	810
<i>Reported FY 2006 Budget</i>	\$189,186
<i>Projected FY 2007 Budget</i>	\$287,299



CIL Description

Mission: Community Connections promotes full participation for all people with disabilities in our communities to create a society of equal opportunity.

Major Goals:

- Amplify the voices of persons with disabilities
- Connect people to community resources
- Transform lives of all ages
- Build an inclusive livable community for all
- Increase and diversity financial resources

General Description: Community Connections is a developing Center for Independent Living serving citizens in the rural Berrien and Cass counties in Michigan’s Great Southwest. Community Connections is committed to coalition and partnership building, believing that together we can build a stronger community for all. Grassroots advocacy and systems change is the essence of our existence and drive. As well as providing the additional core services of information and referral, peer supports, and independent living skills/supports, Community Connections has made a positive impact on the lives of persons with disabilities in the areas of accessibility, assistive technology, leadership, wellness/recovery, work incentives and reducing barriers to employment.

Community Impact for FY 2006

- Planned and hosted the fifth annual regional “Connecting to Your Community” conference and resource fair, in collaboration with other community partners. Over 400 people participated in 19 sessions

- Successfully impacted the lives of persons receiving mental health services by supporting self advocacy, wellness, recovery and self determination for over 135 people and families.
- Strengthened partnership with the local Housing Resource Network to increase affordable, accessible housing options and assisted persons at risk of homelessness.
- Provided outreach and assistance 140 persons with disability regarding prescription drug programs.
- Partnership building included strengthening awareness and relationships with people with varying disabilities, along with Michigan Rehabilitation services, Michigan Works, Transition Councils, Intermediate School Districts, Social Security, local public transit providers, and other local resources.
- Successfully promoted the use of assistive technology as tools to improve the lives of persons with disabilities for work, school and personal life throughout Southwest Michigan.

Priorities for FY 2007

- Outreach to minority at risk youth and transition age students with disabilities along with underserved areas within Berrien and Cass counties.
- Strengthen our partnership with the local Michigan Works! providing systems change and disability awareness through the Disability Navigator project.
- Build leadership capacity and skills of persons with disabilities to improve services utilizing grass roots advocacy, community organizing, and feedback.
- Continue to connect and link people with disabilities and their families with vital information, supports and community resources building an inclusive, livable community.
- Continue to increase and diversify our funding base to ensure and retain a well-trained and supportive staff.

Disability Advocates of Kent County (DAKC)

3600 Camelot Dr. SE • Grand Rapids • 49546

Phone Number: 616-949-1100 • Fax Number: 616-949-7865

www.dakc.us • dave.b@dakc.us



<i>Counties Served</i>	Kent
<i>Year Established</i>	1981
<i>Number of Staff:</i>	
- Full-time	20
- Part-time	4
- Contractual	0
<i>Volunteer Hours 10/01/05-9/30/06</i>	10,300
<i>Consumers Served 10/01/05-9/30/06</i>	2,533
<i>Reported FY 2006 Budget</i>	\$1,203,485
<i>Projected FY 2007 Budget</i>	\$1,259,477



CIL Description

Starting as part of Hope Network in 1981, Disability Advocates of Kent County became incorporated as its own nonprofit on October 1, 1993 as the Grand Rapids Center for Independent Living. In May 2002, our name changed to Disability Advocates of Kent County (DAKC) so as to better communicate what we do and who we are. Our mission is to "advocate, assist, educate and inform on independent living options for person with disabilities and to create a barrier-free society for all." Our ongoing goals are to:

- Provide the four core services: Information and Referral, Independent Living Skills, Advocacy, and Peer Support.
- Engage a constituency of persons with disabilities and supporters in Kent County.
- Continue our networking in the wider community.
- Maintain financial soundness.
- Retain a well-trained and supported staff.

DAKC serves the Kent County community as best as our limited resources allow. Efforts are underway to expand our presence via the expansion of local support in addition to continuing our growth in contributions from volunteers. Finally, DAKC is well known as an agent for systems change in the areas of accessibility, long-term care and transit.

Community Impact for FY 2006

- DAKC had a very successful FY 2006 in spite of local economic constraints and stagnant state funding levels. First and foremost, DAKC continued to experience growth in the contribution of volunteer time to our efforts. This last year, 10,300 hours of volunteer time were documented!

- In the area of support for individuals, DAKC continued to work with a significantly growing number of persons with disabilities on IL issues and individual advocacy. This was most evidenced in the greatly expanded partnership between the MRS District Office and DAKC's Business Services Team. The five blended staff of this team provided services to an ever-growing number of persons with disabilities seeking employment through direct supports and the removal of barriers to employment.
- In the areas of systems change, DAKC's Core Services Team (CST) facilitated the 2005 Citizen Transit Summit and helped advocate for the implementation of the Kent County Transportation Subcommittee appointed by the Kent County Board of Commissioners. In the area of long-term care reform, DAKC expanded its work through the hiring of a systems change facilitator who became very engaged on the local and state levels. Finally, the CST's housing specialist came on board through funding from the Michigan Developmental Disability Council to work on the expansion of affordable housing for persons with disabilities.
- DAKC's ZeroStep Team launched ZeroStep as the one-stop resource for universal design and home modifications for our entire community (see www.zerostep.org).
- Finally, DAKC's Resource Development Team's development efforts surpassed FY 2005 totals.

Priorities for FY 2007

DAKC continues to develop and hone annual plans for each of its teams and systems change work groups which are focused on winning real improvements for persons with disabilities in addition to developing DAKC's niche in Kent County. The priorities for 2007 include:

- Strengthening DAKC's delivery of the four core services via the team structure within the organization and the development of an outreach project titled, *New to Disability*, by the Core Services Team.
- Engaging our constituency more in the work of DAKC and the wider community through leadership development and engagement in systems change work and through volunteer opportunities in service provision.
- Continuing to develop the partnership between the MRS District Office and the Business Services Team to provide employment supports to persons with disabilities. This includes seeking to become the *disability navigator* for the Michigan Works sites in our area and a joint effort to provide IL supports for persons who are deaf and hard of hearing.
- Continuing the work of the ZeroStep Team in the development of ZeroStep through increased direct marketing efforts to builders, remodelers, other professionals and the general public.
- Continuing the work of the Resource Development Team to grow our diverse funding base to support our operations and, in particular, our systems advocacy work.

Disability Connection: A Center for Independent Living (DCCIL)

1871 Peck Street • Muskegon • 49441

Phone Number: 231-722-0088 • Fax Number: 231-722-0066

www.dcilmi.org • susanc@dcilmi.org

Counties Served Mason, Muskegon, Newaygo, Oceana

Year Established 2000

Number of Staff: - Full-time 6

- Part-time 9

- Contractual 1

Volunteer Hours 10/01/05-9/30/06 4,401

Consumers Served 10/01/05-9/30/06 721

Reported FY 2006 Budget \$498,137

Projected FY 2007 Budget \$564,907



CIL Description

Mission: Disability Connection assists in the advancement of independence, self-determination and participation of person with disabilities in all areas of community life.

Major Goals:

1. To provide the four core services of: Information and Referrer, Individual and Systems Advocacy, Peer Support, and Independent Living Skill
2. Development of collaborative partnerships which will result in significant changes for all persons with disabilities in our communities.
3. Financial soundness
4. Increase quality of services to consumers which are tailored to individual needs

General Description: Disability Awareness Center for Independent Living was founded June 14, 1999. We serve Mason, Muskegon, Newaygo and Oceana Counties which covers almost 2,500 square miles. It is our goal to create opportunities for “livable communities” by engaging person with disabilities and the community to address gaps in services and work on systems change through coalition-building and the promotions of self advocacy.

Community Impact for FY 2006

- We hosted a consumer conference titled “Empowering Choices” in Muskegon County with over 140 consumers, parents and providers present. In Newaygo County, we assisted in the development of a consumer conference with over 65 people in attendance.
- Money Smart Budgeting Class provided to over 35 youth who learned about credit ratings, savings and budgeting. Many of them also opened a saving account at their local credit union.

- Provided guidance and sensitivity training to over 600 poll workers in Muskegon County.
- Provided support to the Muskegon Main Street Development.
- The Muskegon Moves Coalition has over 25 members and has partnered with the Michigan Prisoner Reentry Initiative in order to improve public transit in Muskegon County.
- Empowerment courses were provided to over 175 people resulting in a more informed consumer regarding resources and services.
- Through funding administered by Muskegon United Way's we participated in Federal Emergency Management Agency's community efforts to provide food, shelter provisions, permanent and supportive housing to the homeless and low-income families of disabled people in our community. Out of the 63 people who applied for assistance, 36 people received funds through Disability Connection which prevented them from becoming homeless.
- We moved from a fairly isolated office on the edge of the city to a building that is near downtown Muskegon and close to other human services agencies. This resulted in many an increased awareness of the organization and our services.
- Provided peer support/mentoring services to over 77 people and 21 people became employed.
- Hosted an EBay training seminar in Newaygo county which provided person with disabilities as well as non-profit agencies information on how to earn or raise money through use of technology and the internet

Priorities for FY 2007

- To expand outreach services to Mason and Oceana Counties.
- Continue and improve our mentoring/life coach supports.
- Continue to provide ADA information to business and other local service providers.
- Focus on successful employment outcomes and long-term supports.
- Focus on transition services including: returning veterans, ex-offenders, and individuals who are currently living in nursing homes.
- Continue and expand the transportation efforts in Muskegon and Newaygo Counties through the transportation voucher program.
- Continue to complete community accessibility reviews for businesses and churches.
- Continue efforts of serving low-income and homeless persons with disabilities with supportive housing, food and shelter plans for the future by collaborating with other agencies.
- Development and implementation of a formal Soft Skills Training curriculum

disAbility Connections, Inc. (dAC)

409 Linden • Jackson • 49203

Phone Number: 517-782-6054 • Fax Number: 517-782-3118

www.disabilityconnect.org • monicas@disabilityconnect.org

Counties Served Jackson, Hillsdale, Lenawee

Year Established 1925

Number of Staff: - Full-time 3

- Part-time 11

- Contractual 0

Volunteer Hours 10/01/05-9/30/06 5,000

Consumers Served 10/01/05-9/30/06 911

Reported FY 2006 Budget \$594,568

Projected FY 2007 Budget \$683,701



CIL Description

disAbility Connections seeks to advance independence, productivity and full-inclusion of children and adults with disabilities into our community. We provide independent living skill development, individual and system advocacy, peer support, nursing home transition, loan closet usage, technology center with related assistive technology services, arrange for respite and parent education resources to people with disabilities and his/her family and supporters.

Community Impact for FY 2006

- *disAbility Connections* transition program began in March 2006. Since that time, our transition specialist has been involved with 30 people who have expressed interest in moving from a nursing home to a less restrictive environment. Of the 30 people, 14 people successfully transitioned into the community.
- We participate with the statewide Transportation Work Group through the DD Council which meets monthly. This provides us an opportunity to advocate on a systems basis for transportation issues affecting residents of the State, particularly those with limited income and/or with disabilities. The motto of the group is to advocate for statewide transportation availability “24/7.” On the local front we received a grant to fund the transportation voucher project through the DD Council. We are actively enrolling/certifying and orienting riders and drivers into the program. As of September 30, 2006 we have 57 riders who have logged 5,117 miles for a total of 235 trips since January. This was the first year of a three-year grant opportunity.

- We participate on the AFC Advisory council assisting the establishment of rules and regulations governing administration of AFC homes. Our staff person that represents us at this meeting is a person with a disability who resides in an AFC. This provides a unique perspective as to how proposed changes will affect residents.
- Through our involvement with the Human Relations Commission (focus on diversity) we worked on an oratorical contest promoting excellence in literacy for all school age children, and a free Winter Movie Series consisting of five films planned January through April available to the public with diversity themes and speakers planned. In our role with the commission we also served as a judge for a diversity poster contest to be displayed at the Jackson district library. In addition the commission dealt with questions and complaints dealing with possible discrimination issues. We also worked with the director for the Jackson County Fair Director regarding concerns within the disability community about accessibility and access to shows and events in prior years.

Priorities for FY 2007

- Active engagement with the Jackson Fitness Council and other organizations and groups in the greater Jackson area to encourage the development of sports and recreational opportunities for people with disabilities.
- By joining forces with LifeWays (CMH) and other organizations in Jackson County, we will identify and implement strategies for working collaboratively to provide a comprehensive array of services to people with disabilities to strengthen our impact in the community.
- By early 2007, we will have completed a building expansion designed to increase storage space for our loan closet, as well as provide additional office space.
- Through staff participation on various committees, Boards and other groups we will strengthen the footprint of disAbility Connections in Jackson as well as in the State of Michigan.
- Via a three-year grant awarded to the Community Action Agency, we will be sub-contracted to maintain a database of accessible housing units in the Jackson area, survey people with disabilities about housing issues, and act as a resource for linking people to housing s/he needs.

Disability Network/Lakeshore
 (Formerly Lakeshore Center for Independent Living)

426 Century Lane • Holland • 49423

Phone Number: 616-396-5326 • Fax Number: 616-396-3220

www.dnlakeshore.org • ruth@dnlakeshore.org



<i>Counties Served</i>	Ottawa, Allegan
<i>Year Established</i>	1992
<i>Number of Staff:</i>	
- Full-time	9
- Part-time	2
- Contractual	1
<i>Volunteer Hours 10/01/05-9/30/06</i>	3,698
<i>Consumers Served 10/01/05-9/30/06</i>	1,851
<i>Reported FY 2006 Budget</i>	\$654,328
<i>Projected FY 2007 Budget</i>	\$706,456



CIL Description

Mission: Connecting people with disabilities to resources and opportunities, while developing communities where everyone can participate, contribute, and belong.

Major Goals:

- Places of employment are disability-friendly
- Usable transportation is readily available
- Systems and agencies provide support and/or services necessary for the employment of people with disabilities
- People with disabilities acquire and maintain employment and maximize income (includes services to prepare youth for work and responsible adulthood)
- Individuals access supports necessary for employment
- Community members, donors, and partners increase their awareness of current disability issues and opportunities for involvement and support
- Disability Network/Lakeshore builds and maintains an environment in which audacious goals can be achieved

General Description: Disability Network/Lakeshore is working to eliminate disparities between people with disabilities and the general population in employment and community access. Our organizational purpose is to build communities that *work*: accessible environments, usable transportation, and long-term community supports are in place, and people with disabilities are working because these supports and infrastructure are available.

We excel at assisting individuals to expand their knowledge of available resources and increase their ability to advocate on their own behalf. We play a primary role in initiating and driving strategic changes that benefit people with disabilities, and ultimately all citizens, by partnering with businesses, government officials, and other organizations. Finally, we

expand community leadership of persons with disabilities by engaging people in our broad community efforts to build communities that *work*.

Community Impact for FY 2006

- Changed our name to Disability Network/Lakeshore, creating immediate relevance regarding our role in the minds of our potential customers and partners.
- Facilitated a successful transit millage campaign (61% support) through Friends of Transit, coordinating every element of mailings, door-to-door, phone calls, newspaper ads, letters to the editor, radio spots, website, and more to secure expansion of fixed routes, expanded service hours, and a transfer station with multi-modal options.
- Developed Faith in Motion, an interfaith coalition of thirty churches publicly declaring their support for improved public transportation.
- Provided comprehensive accessibility surveys along with detailed reports and recommendations for two large facilities in addition to six smaller businesses.
- Coordinated and completed a survey of concerns of people with disabilities in Allegan County, collaborating with eight other organizations to identify questions, train volunteers, and collect and interpret the data.
- Educated 233 area employers about the value and ability of people with disabilities in the workplace.
- Through mentoring and intensive training, increased employment competencies and leadership abilities of 217 youth with disabilities.
- Assisted 134 individuals and their families to access resources related to on-going community supports.
- Successfully diversified funding through grants, fees, and increases in local support.
- Expanded the network and promoted our philosophy and core beliefs through community presentations to over 400 agencies, organizations, groups, and businesses.

Priorities for FY 2007

We will continue building communities that *work*, including the following efforts:

- Work with Faith in Motion and the Macatawa Area Coordinating Council to hold a transit summit, engaging 5 townships and 2 municipalities in a process of defining needs and developing a regional plan for transportation.
- Engage in outreach to employers to promote hiring and retaining employees with disabilities.
- Assist targeted businesses to improve physical accessibility and embrace disability in the workplace.
- Provide training and mentoring for youth with disabilities with the goal of preparing them for a life of productive and fulfilling work.
- Facilitate the efforts of eight partner organizations to work with Community Mental Health to clarify roles, improve communication, and plan to address the needs of those falling through the cracks.
- Develop a housing center of expertise.

Disability Network/Mid-Michigan
 (formerly Center for Independent Living of Mid-Michigan)

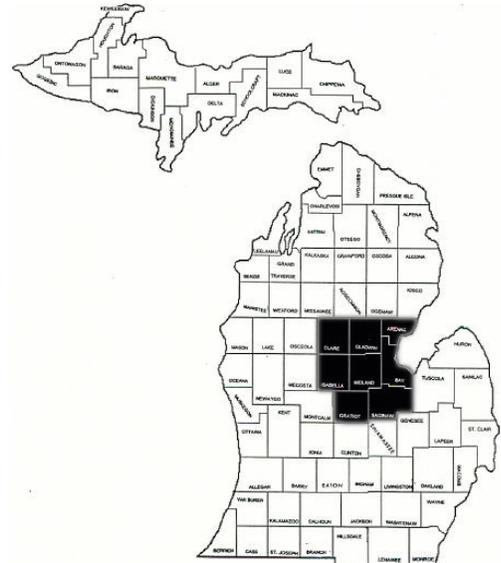
1160 James Savage Road • Midland • 48640

Phone Number: (989) 835-4041 • Fax Number: (989) 835-8121

info@dnmm.org • www.dnmm.org



<i>Counties Served</i>		Arenac, Bay, Clare, Gratiot, Gladwin, Isabella, Midland, Saginaw
<i>Year Established</i>		1990
<i>Number of Staff:</i>	- Full-time	14
	- Part-time	3
	- Contractual	2
<i>Volunteer Hours 10/01/05-9/30/06</i>		635
<i>Consumers Served 10/01/05-9/30/06</i>		687
<i>Reported FY 2006 Budget</i>		\$1,131,981
<i>Projected FY 2007 Budget</i>		\$1,186,446



CIL Description

Mission: To promote and encourage independence for all people with disabilities.

Major Goals: To provide consumer advocacy to help people with disabilities get the necessary support services from other sources in the community; provide community advocacy through creating activities to promote full participation in all aspects of community living; provide opportunities for people with disabilities to allow others to benefit from their experiences; to be a comprehensive resource for pertinent information; and provide individual and/or group training to help people with disabilities gain skills that would enable them to live independently.

General Description: Headquartered in Midland, the Center for Independent Living of Mid-Michigan (CIL), now known as the Disability Network/Mid-Michigan (DNMM), serves individuals with disabilities and the communities at large in four urban and four rural counties in mid-Michigan. The CIL is committed to coalition building and actively advocates for improved transportation in Bay, Midland and Saginaw counties. Unique to our center is a 30-minute, informational public access television show viewed by over 110,000 households monthly. The CIL also rents an accessible apartment, the Skills CITE, that provides independent living skills development opportunities for youth and adults with disabilities. The CIL has grown into a major community outreach organization supported by the United Way of Midland County, fundraising events, and fee-for-service activities..

Community Impact for FY 2006

- Expanded peer support to Bay and Saginaw counties.
- Developed a website to educate individuals and the community about CIL services and topics of importance to people with disabilities.

- Our television show, Access America, continued to be a vital public forum for discussion of disability issues.
- The transition program served youth with disabilities in Bay, Midland and Saginaw counties. Our summer program offered students opportunities to learn socialization skills and gain peer support.
- The Skills CITE provided consumers with a chance to try out independent living and practice their independent living skills in a real home-based environment.
- The CIL provided independent living service coordination for consumers in Midland and Saginaw counties and staff coordination in Bay County.
- The CIL facilitated person centered planning sessions for consumers in five counties
- The CIL provided pre-employment skills development opportunities for MRS consumers.
- The CIL coordinated peer support activities for consumers in Bay, Midland and Saginaw counties.
- The CIL provided information and referral services to individuals in twelve counties.
- The CIL engaged in individual, community and systems advocacy.

Priorities for FY 2007

- Implement a new data collection software program that will more accurately report the activities and impact of the CIL.
- Explore opportunities to expand supports coordination in Bay County.
- Explore collaborations with Literacy Council to develop a literacy program for people with disabilities.
- Look at opportunities for creating a supports network and educational programs for parents with disabilities.
- Expand marketing efforts to businesses to offer Disability Awareness Training, Accessibility Reviews and ADA consultations.
- Enhance consumer involvement in all aspects of the Disability Network.
- Add two new programs; VA services and Nursing Home Transition.
- Expand Discover empowerment program to MRS in Mt. Pleasant, and continue to seek support in Midland and Bay counties.
- Ensure our cash-match and state-match collaborative grants are meeting the needs of MRS and youths in transition program.
- Continue to participate in youth related programs such as Reality Store, Disability Mentoring Day, Mi Connections.
- Expand Assistive Technology training through MRS and MCB.
- Continue to grow skills development program (READY) through MRS and offer free skills training to other consumers.
- Explore opportunities to generate funding for a Supports Coordinator at the Saginaw ISD Transition Center.

*Disability Network/Northern Michigan
(formerly Northern Michigan Alliance for Independent Living)*

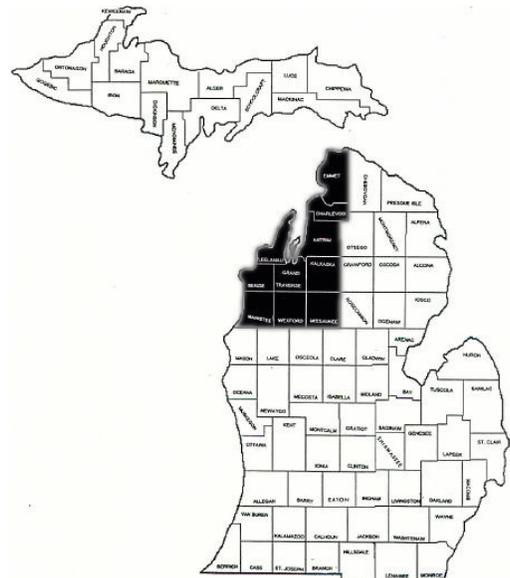
2301 Garfield, Suite A • Traverse City • 49686

Phone Number: 231-922-0903 • Fax Number: 213-922-2597

www.disabilitynetwork-nmi.org • jimmoore@chartermi.net



<i>Counties Served</i>		Antrim, Benzie, Charlevoix, Emmet, Grand Traverse, Kalkaska, Leelanau, Manistee, Missaukee, Wexford
<i>Year Established</i>		2002
<i>Number of Staff:</i>	- Full-time	6
	- Part-time	1
	- Contractual	1
<i>Volunteer Hours 10/01/05-9/30/06</i>		7,188
<i>Consumers Served 10/01/05-9/30/06</i>		1,037
<i>Reported FY 2006 Budget</i>		\$393,591
<i>Projected FY 2007 Budget</i>		\$387,728



CIL Description

Mission: To promote personal empowerment and positive social change for persons with disabilities through outreach, education, and advocacy.

Major Goals: The Disability Network/ Northern Michigan works with people with disabilities to eliminate the disparities in employment, community participation, health, and mobility that exist between people with disabilities and the general population. The Disability Network/Northern Michigan serves a large, primarily rural, ten county region in Northwest Lower Michigan. Through education, advocacy, and outreach, Disability Network/Northern Michigan is developing a growing network of supports and services for persons with disabilities by forming community partnerships, collaborations, and a corps of volunteers. Some of our services include: systems change advocacy, pre-employment training, information and referral, and life skills programs for students and young adults with disabilities. DN/NM strives to eliminate structural, communication, and attitudinal barriers that can prevent persons with disabilities from living a life of self-determination and participating fully in life's activities.

Community Impact for FY 2006

- Successfully promoted a ballot proposal to fund a new county-wide bus transportation system in Benzie County.

- In collaboration with the Traverse Bay Area Intermediate School District and MRS, we are providing a high school transition program called Learning Independence From Experience (L.I.F.E.) to 12 area schools. The L.I.F.E. 101 & 102 programs provides empowerment and skill building to assist students with disabilities in the transition from school to community living. In the 2005-2006 school year, the L.I.F.E. programs were conducted in 12 schools involving over 200 students.
- In collaboration with GT Industries and MRS, the Lis'n program provided services for over 200 people. This program provides access to interpreter services, works with employers who are hiring persons who are deaf or hard of hearing, assists in providing information on assistive technology devices.
- Formed a Youth Advocacy Council to develop leadership skills and peer support/mentoring capabilities for young adults with disabilities.
- Sponsored a northern regional conference on "Best Practices and Success Stories in Micro-Enterprise, Community-Based Employment and Volunteerism." Over 100 people with disabilities were in attendance.
- Surveyed area places of worship and posted accessibility features for 42 facilities on our website.
- Worked on developing a collaboration of human service agencies to coordinate transportation services through the Northwest Michigan Transportation Alliance – provided over 1,000 non-emergency medical rides for people with disabilities.

Priorities for FY 2007

- Continue to provide independent living skills training to over 250 high school students
- Continue to be a key collaborators with the Northwest Michigan Transportation Alliance volunteer ride program, the Grand Traverse County Livable Communities initiative, and the Poverty Reduction Initiative.
- Provide technical assistance for accessibility for voter access, access to recreation, and additional postings of access features on our website for places of worship.
- Expand the our work with the Northwest Michigan Transportation Alliance to include rides for employment and training.
- Provide assistance for the new Benzie County bus system to help promote the new service.
- Assist the newly formed Youth Advocacy Council to develop and expand its role in the community.

Disability Network/Oakland & Macomb (DNOM)
(Formerly Oakland & Macomb Center for Independent Living)

16645 Fifteen Mile Road • Clinton Township • 48035
 Phone Number: 586-268-4160 • Fax Number: 586-268-4720
 www.omcil.org • info@omcil.org



<i>Counties Served</i>	Oakland, Macomb
<i>Year Established</i>	1987
<i>Number of Staff:</i>	
- Full-time	9
- Part-time	2
- Contractual	2
<i>Volunteer Hours 10/01/05-9/30/06</i>	511
<i>Consumers Served 10/01/05-9/30/06</i>	2784
<i>Reported FY 2006 Budget</i>	\$785,809
<i>Projected FY 2007 Budget</i>	\$772,453



CIL Description

Disability Network Oakland & Macomb services Oakland and Macomb Counties; two of Michigan’s largest counties. The center is committed to empowering people with disabilities through advocacy, peer support and independent living skills. DNOM provides nursing home transition, resources on accessible housing and transportation, and specializes in empowerment, youth transition, job readiness and a vast array of services that are vital to the population we serve. The majority of staff, volunteers and board involved with the center are people with disabilities.

Community Impact for FY 2006

- DNOM participated in evaluating polling site accessibility in Oakland & Macomb Counties to ensure full inclusion of people with disabilities the right to vote in the year 2006 elections.
- DNOM successfully transitioned four individuals from nursing homes back into the communities to live independently.
- DNOM facilitated a community Service Food Drive Project for the Salvation Army raising much needed food for people in Oakland & Macomb Counties.
- DNOM had booths at Universal Mall, Children’s Hospital, MDA, Oakland CMH, United Way, HSCB at the MISD, and The Novi Disability Awareness Expo.

- DNOM co-sponsored with SMART for the 16th Anniversary of the ADA which was held at the Royal Transit Authority.
- DNOM developed a computer resource center that is inclusive of all disabilities.
- DNOM has worked with the Victory Group throughout the year working on Board and Staff development, and began the visioning process for the development of the five year strategic plan. New job descriptions were written for each position at the center.
- DNOM's Transition Specialist presented to all of Oakland County Special Education Administrators and sat on a Post Secondary Focus group to help develop a county wide framework for students transitioning out into the community.
- DNOM's Outreach Coordinator secured a seat on the Macomb County Homeless Commissions Board to help eliminate homelessness in Macomb County.
- DNOM partnered with MI Works! to provide a Navigator position between MRS and MI Works!
- DNOM received a Leadership grant to develop leadership skills for high school youth and empower them to be active leaders in the community.

Priorities for FY 2007

- DNOM will begin exploring office sharing with community partners in Oakland County so we can better serve the unserved and underserved consumers in the community.
- DNOM is working with the V.A. to begin providing services to Veterans with disabilities.
- DNOM has met with the Director of CMH to explore grants and services we can provide to their clients.
- DNOM's Outreach Specialist has identified local Rehabilitation Centers in Oakland & Macomb County to do presentations and give out our information so we can begin servicing newly acquired disabilities.
- DNOM will expand our transition programs to include unserved schools in our communities.
- DNOM will move to a new office with more space to allow for future growth.
- DNOM's goal is to hire at least three additional staff to help service two of the largest and most populated counties.
- DNOM will develop a volunteer coordinating position to begin recruiting and developing a much needed volunteer base to help service our consumers and to work on issues identified in our strategic plan.

Disability Network/ Wayne County- Detroit (DN/WC)

5555 Conner, Suite 2075 • Detroit • 48213

Phone Number: (313) 923-1655 • Fax Number: (313) 923-1404

<http://www.bwcil.org/wayne> • rick@bwcil.org

<i>Counties Served</i>	Wayne
<i>Year Established</i>	2003
<i>Number of Staff:</i>	
- Full-time	9
- Part-time	1
- Contractual	1
<i>Volunteer Hours 10/01/05-9/30/06</i>	322
<i>Consumers Served 10/01/05-9/30/06</i>	1,962
<i>Reported FY 2006 Budget</i>	\$564,555
<i>Projected FY 2007 Budget</i>	\$569,599



CIL Description

Mission: The Disability Network/Wayne County-Detroit is a consumer driven organization dedicated to maximizing the ability of persons with disabilities to live as independently as they choose. We encourage full participation in the everyday activities of living by providing a nurturing and supportive environment; advocating for an inclusive community; serving as a community resource; and providing a unified voice in the community.

General Description: The Detroit Wayne County Center for Independent Living serves a single county with a service area of 623 square miles. The service area has urban, suburban, and rural populations. The population of Wayne County is 2,061,162 (2000 Census) with approximately 433,000 people with disabilities.

Community Impact for FY 2006

- Developed a comprehensive transition program to students enrolled in special education programs in Detroit Transition Center, East and Henry Ford High School.
- Conduct summer Youth Leadership Training for students enrolled in special education programs.
- Provided comprehensive community outreach to underserved areas of Wayne County.
- Continued to advocate for a transportation system that treats all people in Wayne County with respect. We will continue to work with the Dept. of Justice, Federal Transit Authority and the City of Detroit.

Priorities for FY 2007

- Continue to provide the 4 core services for all who request services.
- Continue to seek new and strengthen existing strategic community collaborations.
- Continue to develop, nurture, and grow a strong, committed grass roots organization of people with disabilities willing and able to advocate both for themselves and for systems change.
- Begin marketing of new name: Disability Network/Wayne County-Detroit.
- Develop and implement a comprehensive transition plan.
- Complete re-development and become a free-standing organization.

Disability Resource Center (DRC)

517 E. Crosstown Parkway • Kalamazoo • 49001

Phone Number: 269-345-1516 • Fax Number: 269-345- 0229

jcooper@drccil.org • www.drccil.org



<i>Counties Served</i>	Barry, Branch, Calhoun, Kalamazoo, St. Joseph, Van Buren
<i>Year Established</i>	1981
<i>Number of Staff:</i>	
- Full-time	16
- Part-time	4
- Contractual	1
<i>Volunteer Hours 10/01/05-9/30/06</i>	5,681
<i>Consumers Served 10/01/05-9/30/06</i>	3,719
<i>Reported FY 2006 Budget</i>	\$1,121,656
<i>Projected FY 2007 Budget</i>	\$1,131,294



CIL Description

Mission: Disability Resource Center of Southwest Michigan educates and empowers people with disabilities to create change in their own lives and advocates for social change to create inclusive communities.

Major Goal: To act as a catalyst for change so communities include, empower, and support all persons with disabilities.

General Description: Disability Resource Center (DRC)/Disability Network/Southwest Michigan (new name in 2007) is one of Michigan's oldest CILs, celebrating 25 years and serves six counties in Southwest Michigan. Our main office in Kalamazoo and our branch office in Battle Creek are located in the urban centers of our service area, encircled by four predominately rural counties. Our reputation as the **first** place to call for information and assistance is evidenced by the 2,000 plus calls we receive each year. We are widely recognized for our expertise in the area of brain injury, as well as for the education, advocacy and peer support we offer. Disability Resource Center is unique among CILs in our provision of driver education and training for people with disabilities. We are the only CIL that is part of the Michigan Coalition of SSA Work Incentives Planning and Assistance (WIPA) in relationship to the Ticket to Work initiative in Michigan. DRC is one of four providers in Michigan of the Nursing Facility Transition pilot program with Department of Community Health. Disability Resource Center has a long history of collaboration with community and State partners in order to meet the varied needs of people with disabilities. We partner with Michigan Disability Rights Coalition to provide 'Building Your Financial Future' classes. We are proud of the significant support we receive from volunteers, who provided nearly 6,000 hours this past year of their time to support the organization's work toward improving the lives of people with disabilities in our communities. Assistance and Outreach in relationship to the Ticket to Work initiative in Michigan. Disability Resource Center has a long history of collaboration with community partners in order to meet the varied needs of people with disabilities. We are proud of the significant support we receive from volunteers, who provided 6,000 hours this past year of their time to support the organization's work toward improving the lives of people with disabilities in our communities.

Community Impact for FY 2006

- Instrumental in achieving passage of PA 182, Inclusive Home Design Act.
- Obtained \$11,000 Community Development Block Grant funding to build six ramps for low income people with disabilities living in the City of Kalamazoo.
- Trained Kalamazoo County based City and Township Clerks in assessing the accessibility of polling places and trained 600 election inspectors re: programmatic accessibility with disability awareness/sensitivity training.
- DRC's Access Team in Battle Creek successfully advocated for increased fines for accessible parking violations.
- DRC Staff was appointed to new Kalamazoo County Transit Authority, that designed millage ballot question for funding county wide public transit system.
- DRC collaborated with a local architect, realtor, and builder to create changes in the Southwest Michigan Realtors Information Center database to allow searching for accessible features in listed homes.
- Advocated Central City Parking in Kalamazoo to move toward full compliance with ADA accessible guidelines in all parking lots.

Priorities for FY 2007

- Multiple List Serve database available for searches of affordable and accessible rental units.
- Train Calhoun County based City and Township Clerks in assessing the accessibility of polling places and train election inspectors re: programmatic accessibility with disability awareness/sensitivity training.
- Continue to provide Long Term Community Supports in partnership with DCH as a Nursing Facility Transition Agent and work closely with AAA's in the Single Point of Entry Pilot program in Southwest Michigan.
- Establish regular meetings and citizens input for Battle Creek Public Transit LAC.
- Investigate and enforce compliance of Western Michigan University with physical and programmatic accessibility laws.
- TAG (Transportation Advocacy Group) members will continue to be active in Friends of Transit, Co-founded by DRC, a broad based coalition of organizations and individuals working for the creation of a sustainable transit system that will provide accessible, affordable, safe and convenient public transit for all the people of Kalamazoo County.
- Continue efforts to connect with GLBT persons who have a disability in collaboration with Kalamazoo Gay and Lesbian Resource Center with disability information, dialogue on disability issues and the development of a support group for GLBT people with disabilities.
- DRC staff will be an advisory committee member and active participant of ZeroStep Across Michigan project to build alliances with key sectors of the construction industry.
- Continue our momentum of Grassroots Leadership Development and Advocacy involving groups of people with disabilities in choosing systems that need to change in our local communities and directing that change with mentoring of individuals with disabilities in leadership positions in our community

Superior Alliance for Independent Living (SAIL)
 129 W. Barage Ave. Suite H • Marquette • 49855
 Phone Number: 906-228-5744 • Fax Number: 906-228-5573
 www.upsail.com • amym@upsail.com



<i>Counties Served</i>	Alger, Baraga, Chippewa, Delta, Dickinson, Gogebic, Houghton, Iron, Keweenaw, Luce, Mackinaw, Marquette, Menominee, Ontonagon, and Schoolcraft
<i>Year Established</i>	1998
<i>Number of Staff:</i>	
- Full-time	5
- Part-time	0
- Contractual	4
<i>Volunteer Hours 10/01/05-9/30/06</i>	1207.5
<i>Consumers Served 10/01/05-9/30/06</i>	363
<i>Reported FY 2006 Budget</i>	\$332,631
<i>Projected FY 2007 Budget</i>	\$285,498



CIL Description

Mission: SAIL promotes the inclusion of people with disabilities into our communities on a full and equal basis through empowerment, education, participation, and choice.

Major Goals: To assure that the entire Upper Peninsula receives independent living services.

General Description: SAIL serves 15 counties in the Upper Peninsula, and covers approximately 16,420 square miles, one fourth of the geographic area of the state of Michigan with a staff that includes 5 full time and 4 contract employees.

Community Impact for FY 2006

- This past year, SAIL worked to proactively outreach to several of the 15 counties it serves that it believed represent an underserved community. As a result, SAIL was able to provide group services in all counties and provided individuals to 13 out of the 15 counties.
- SAIL provided individual services to 263 individuals this fiscal year, compared to the 243 individuals served in FY 2005. SAIL assisted 2 individuals in moving out of nursing homes and into independent living situations. SAIL did not provide individual nursing home transition services in FY 2005. SAIL assisted 160 individuals for whom accommodations were provided to enable independent living or access to employment, compared to the 141 served in FY 2005. Finally, SAIL assisted 71 individuals who rely on personal care attendants, compared to the 47 individuals served in FY 2005 who used personal care attendants.

- SAIL also worked to increase its U.P. wide presence by initiating new collaborative relationships in local communities especially with Native American communities and Veteran groups and providers throughout the U.P. and improving on other existing community relationships where SAIL was able to offer needed independent living services, including Nursing Home Transition, Accessibility Reviews for polling sites, and Assistive Technology device demonstrations and technical assistance.
- SAIL also increased its efforts to increase opportunities and awareness of Adaptive Recreational activities and other leisure opportunities being offered in inclusive settings. SAIL worked with groups who offered in the U.P. sled hockey, hand cycling, golf, adaptive Kayaking, fitness training, hiking on all of the accessible trails available within the state and federal forest trails and community art classes.
- SAIL assisted in the coordination and hosted a U.P.-wide Regional Interagency Consumer Councils meeting which is sponsored by the Developmental Disabilities Council. SAIL also worked with local support community support groups, including NAMI and assisted in the start up of the U.P. Traumatic Brain Injury Support Group.
- SAIL hosted an ADA Audio Conference Series which focused on Employment Issues being offered through the Great Lakes ADA and IT Technical Assistance Centers (DBTAC). SAIL led youth groups in two different U.P. communities focusing on increasing leadership and independent skills. Finally, SAIL co-hosted the 5th Annual Action Day Conference where close to 300 individuals participated in training opportunities geared towards leadership, independence and civic community involvement.

Priorities for FY 2007

- SAIL will continue to expand both individual and group services throughout the U.P. Specifically, SAIL will encourage more on-line participation and will engage in more Statewide Activities to coordinate systems change in the U.P. around available housing and transportation.
- U.P. wide youth involvement in mentoring programs designed to promote independent living skills, including employment, careers and leadership.
- SAIL will increase services being offered to the Native American communities throughout the U.P. focused on increasing employment skills.
- SAIL will increase awareness about the independent living opportunities throughout the U.P. by offering services geared towards Nursing Home Transition and Diversion, the availability and use of Assistive Technology.
- SAIL will continue to work closely with Michigan Rehabilitation Services Marquette District office to coordinate and enhance the employment services available in the U.P.

The Disability Network (TDN)

3600 S. Dort Hwy, Ste. 54 • Flint • 48507

Phone Number: 810-742-1800 • Fax Number: 810-742-7647

www.disnetwork.org • tdn@disnetwork.org



<i>Counties Served</i>	Genesee
<i>Year Established</i>	1992
<i>Number of Staff:</i>	
- Full-time	16
- Part-time	4
- Contractual	1
<i>Volunteer Hours 10/01/05-9/30/06</i>	3,500
<i>Consumers Served 10/01/05-9/30/06</i>	7,000
<i>Reported FY 2006 Budget</i>	\$1,776,469
<i>Projected FY 2007 Budget</i>	\$1,758,809



CIL Description

The Disability Network (TDN) is a 14-year old, non-profit organization that provides supports to over 7,000 citizens with disabilities in Genesee County, which includes Flint's 54% minority population and several rural out-county cities. Over 80% of TDN's board and staff and 60% of TDN's 120 active volunteers are people with disabilities. TDN focuses on community awareness, systems advocacy in transportation, housing, employment, education and technology and inclusion for the 86,000 residents with disabilities in Genesee County. TDN participates in over 80 local, state and national boards, councils and committees- "*Nothing About Us Without Us!*"

Community Impact for FY 2006

- **Inclusive Home Design Act:** TDN organized and chaired a statewide coalition of disability organizations to advocate and educate government officials, housing agencies, realtors and developers on the benefits of "Inclusive Home Design". Michigan legislators recently passed the "Inclusive Home Design Act" into law as a result of TDN and its coalition's efforts.
- **Voting:** TDN worked with the City of Flint and County Voting Clerk's to conduct outreach on new accessible voting machines and provide disability awareness training for over 500 poll workers.
- **Assistive Technology (AT):** TDN successfully advocated for the Genesee County Intermediate School District to include recommendations of a TDN AT Scan by implementing an AT Navigator, adding AT to the common classroom infrastructure and including AT training as part of the school improvement plan. Over 2,000 people accessed TDN's accessible technology center that features state of the art AT.

- **Employment:** TDN's "Employment Mentoring" program – an innovative collaboration with the Genesee Regional Chamber of Commerce, Career Alliance and Michigan Rehabilitation Services – matched 15 business leaders as employment mentors to jobseekers with disabilities.
- **Students:** Over 120 students high school students with disabilities increased their self advocacy and employment skills.

Priorities for FY 2007

- Continue strong participation and leadership in the local, state, and federal workforce systems to improve inclusion and accommodation of jobseekers with disabilities, including participation in the new Governor appointed Michigan State Council on Labor and Economic Growth, which oversees the Michigan workforce system.
- Continue advocacy and leadership in transportation, housing, long-term care, education, technology and inclusion for the 86,000 residents with disabilities in Genesee County.

Disability Network/Michigan

(Formerly MACIL)

1476 Haslett Rd. • Haslett • 48840

Phone Number: 517-339-0539 • Fax Number 517-339-0805

www.dnmichigan.org



<i>Counties Served</i>	Statewide (15 Member CILs)
<i>Year Established</i>	1993
<i>Number of Staff:</i>	
- Full-time	3
- Part-time	4
- Contractual	0
<i>Reported FY 2006 Budget</i>	\$714,000
<i>Projected FY 2007 Budget</i>	\$685,000

Description

The Disability Network/Michigan (DN/MI) is a network of grassroots advocacy organizations, “Building Communities that Work!” DN/M’s vision is to become the catalyst in organizing a dynamic statewide voice that influences public policy; through a network of strong disability leadership in every community.

The DN/M office provides member support in helping to build and maintain strong local advocacy organizations for addressing local issues as well as participating in state-level issues.

DN/M’s strength comes from its members and their grassroots capacities. One of DN/M’s critical objectives is to support its members in a manner that assures they are strong and viable non-profit organizations.

DN/M’s goals for FY 2006 include: 1) Providing IL/CIL network peer support, technical assistance and training that promotes information sharing, continuous quality improvement and increased accountability of IL/CIL organizations; 2) Creating a coordinated, persistent and effective grassroots advocacy capacity that will achieve effective statewide systems change and strong support for consumer and community-based Independent Living and vocational rehabilitation values; 3) Educating IL and VR staff on their respective visions, missions, values, customers, goals, and areas of commonality, and; 4) Assuring viable organizational capacity and structure of the Disability Network/Michigan that results in an efficient and effective IL/CIL network.

Community Impact for FY 2006

- Changed our name from Michigan Association of Centers for Independent Living to Disability Network/Michigan. The new name is reflective of who we are and what we do.
- Created a new website with more/better information that is more useful to our members and partners, and to the general public.

- Successful in transitioning 108 people out of nursing facilities through four pilot sites.
- Instrumental in the passage of Public Act 182, Inclusive Home Design Act, and Public Act 164, Single Point of Entry, through grassroots advocacy and education.
- Educated professionals and the general public about the Freedom to Work Medicaid program and Medicare Part D by holding workshops, mailing printed materials, and through the Freedom to Work Medicaid website: www.freedomtoworkmedicaid.org.
- Developed a “Smart Book” reference guide for newer CIL Directors providing information on everything from Independent Living Philosophy to board governance, to financial management.
- In partnership with the Statewide Independent Living Council and Michigan Rehabilitation Services, negotiated for a comprehensive database that will help us in capturing more accurate and meaningful data.
- Held the second Walk-n-Roll fundraiser in collaboration with the Capital Area Center for Independent Living, Michigan Disability Rights Coalition, and the Statewide Independent Living Council.
- Launched a “Get Active” website in partnership with the Michigan Disability Rights Coalition as a communication tool for our members, partners, legislators and other decision makers, as well as the general public.
- In partnership with the Statewide Independent Living Council, Michigan Rehabilitation Services, Michigan Protection and Advocacy, Michigan Commission for the Blind, and the Michigan Rehabilitation Council, completed the site reviews at all CILs that had not been reviewed in the previous year.

Priorities for FY 2007

- Expand and enhance a process of peer support and technical assistance.
- Promote the removal of barriers to employment and the creation of inclusive opportunities for persons with disabilities.
- Develop a coordinated grass-roots public awareness effort.
- Work to reform the system for Long Term Care Community Supports and Services.
- Mobilize grassroots support for issues important to people with disabilities.
- Strengthen and diversify the IL/CIL economic engine.

Michigan Statewide Independent Living Council (SILC)

417 Seymour, Ste. 10 • Lansing • 48933

Phone Number: 517-371-4872 • Fax Number: 517-371-4875

www.misilc.org • info@misilc.org



<i>Counties Served</i>	Statewide (83)
<i>Year Established</i>	1994 via Michigan Executive Order 1994-21 and Amendments to the Federal Rehabilitation Act
<i>Number of Staff:</i>	
- Full-time	3
- Part-time	0
- Contractual	0
<i>Volunteer Hours 10/01/05-9/30/06</i>	3,417
<i>Reported FY 2006 Budget</i>	\$356,474
<i>Projected FY 2007 Budget</i>	\$371,474*
* \$67,000 was added to this year's budget for a one-time grant for a new data system. This brought the SILC Total Budget to \$436,474	

Description

The Michigan Statewide Independent Living Council (SILC) is a Governor-appointed council of 18 to 25 individuals representing the interests of people with disabilities across Michigan. Additionally, members include non-voting ex-officios who provide the vital link to state departments providing services for people with disabilities. SILC works cooperatively with Michigan Rehabilitation Services (MRS) and the Michigan Commission for the Blind (MCB) to develop and submit the statutorily required State Plan for Independent Living (SPIL) and to ensure individuals with disabilities are represented in disability policy development. The SILC also works to identify and to promote the partnership infrastructure needed for success in addressing barriers and creating the opportunities for persons with disabilities and promotes appropriate forms of collaboration.

Vision: Independent Living is the right of all people to make informed choices, to have personal control over their own lives, and to participate to the fullest extent possible in the everyday activities of work, school, home, family and community.

Major Goals: To ensure the inclusion of consumers in the development and implementation of all programs providing services to Michigan's citizens with disabilities while promoting consumer sovereignty, equal access, responsive programs and services, and community capacity building

Community Impact for FY 2006

- \$5.3 million in grants, including \$2.4 million for CIL operations and outreach, \$2.4 million in title I VR funding for vocationally related services and \$0.5 million for personal assistance services with a certified in kind match of \$40,076.

- Convened 4 focus groups and 2 Disability Voice Town Halls across Michigan, securing input on disability issues. Responses were compiled and shared with Michigan's disability councils, organizations, state departments, the Governor's office and federal Rehabilitation Services Administration (RSA).
- Staff and council members continued to advocate at the national, state, and local level for increased inclusion and disability rights.
- Council members remained involved in Michigan's "Help America Vote Act" (we "HAVA" vote) collaborating in local communities to assist in assuring voter accessibility, providing voter registration opportunities, and facilitating a coordinated statewide presence of people with disabilities at election-related events.
- Coordinated a wide variety of action steps necessary to overcome barriers and increase community inclusion and participation of people with disabilities.
- Participated in the federal Department of Education-Rehabilitation Service Administration monitoring of a Federally funded CIL.
- Provided 1218.75 hours of ongoing technical assistance to the independent living network in meeting the established federally mandated quality standards and indicators, operational redevelopment, reorganization, and administrative support.
- Continued to collaborate with both disability and non-traditional partners on state and federal initiatives needed to reduce barriers and increase opportunities in the areas of employment, transportation, assistive technology, leadership, health care access, and long-term care.

Priorities for FY 2007

- Continue to meet State and Federal statutory requirements for Council operation.
- Continue to foster collaborative efforts with partners to implement Michigan's 2005-2007 State Plan for Independent Living while finalizing development and submission of the 2008-2010 State Plan for Independent Living.
- Work to increase both state and federal CIL funding through involvement with the NCIL committee, Disability Network/Michigan Resource Development Team, National IL Network, and The Research and Training Center on Disabilities-University of Montana, MRS and MCB.
- Work with the Michigan IL Network on issues of equity.
- Continue efforts to involve individuals with disabilities in the area of civic involvement and public policy providing opportunities to develop leadership. Develop and utilize opportunities to move and implement the "Common Disability Agenda."
- Continue to coordinate efforts to ensure non-duplication of roles and support efforts of independent living partners.
- Continue to support efforts to expand community planning, coordination and capacity-building necessary to overcome barriers and increase community inclusion of people with disabilities through strengthening and developing the CIL/IL network.
- Nationally, Michigan's SILC will work to develop better regional and national communication between SILCs.

This report and the described CIL programs are funded in part by state and federal grants.
January 30, 2007