P.O. Box 33386

Las Vegas, NV 89133

nvsilc@adsd.nv.gov

<https://www.nvsilc.com/>

**Draft Minutes**

Name of Organization: Nevada Statewide Independent Living Council (NV SILC)

Dates and Time of Meeting: Wednesday &Thursday, April 5 & 6, 2023

 1:00 p.m.

This meeting is open to the public and will be held

Via Zoom video conference:

The public may observe this meeting and provide public comment in real time on Zoom or by submitting public comment in writing to nvsilc@adsd.nv.gov at least 24 hours in advance.

**To Join the Zoom Meeting**

<https://us02web.zoom.us/j/9299041434?pwd=NmM5Tk1Od3ltRzg1enhRYTU3WDdUZz09>

Meeting ID: 929 904 1434

Password: NVSILC (case sensitive)

+1 253 215 8782 US (Tacoma)

The number provided may incur long-distance telephone carrier charges, and is offered as a regional call-in number, only.

Meeting ID: 929 904 1434

Password: 707401 (if exclusively calling in; if accessing the meeting via *both* the audio and video feed, please use the *above* password *instead*)

Find your local number: <https://us02web.zoom.us/u/kdGvZ9R9O5>

Meeting Materials Available at: <https://www.nvsilc.com/meetings/>

\*Please note that beliefs and values held by our designated presenters may or may not align with those of the Council.

1. Welcome, Roll Call and Verification of Posting

Julie Weissman-Steinbaugh, Chair

**4/5/23 Roll Call**

Members Present: Peter Whittingham, Mary Evilsizer, Obioma Officer, Havander Davis, Dee Dee Foremaster, Sabra McWhirter Clark, Renee Portnell, Raquel O’Neil, Ace Patrick, Linda Vejvoda, Julie Weissman-Steinbaugh, Cheyenne Pasquale, Jennifer Kane

**Members Excused Absent:** Jennifer Kane

**Members Unexcused Absent:** Vickie Essner, Kate Osti,

**Guests Present:** Steven Cohen, Maximilian Kim Lowe, Cindi Swanson, Dora Martinez, Belinda Whittingham, John Rosenlund, Sondra Cosgrove, Lisa Bonie, Kelcy Meyer, Mechelle Merrill, Nikki Haag, Lori Lutu,

**CART Provider:** Becky Van Auken

**ASL Interpreters:** Bobbi Bach, Mary Bonham, and Ben Luikart

**Staff:** Dawn Lyons and Wendy Thornley

**4/6/23 Roll Call**

**Members Present**: Peter Whittingham, Mary Evilsizer, Obioma Officer, Havander Davis, Sabra McWhirter Clark, Renee Portnell, Ace Patrick, Linda Vejvoda, Julie Weissman-Steinbaugh, Cheyenne Pasquale, Jennifer Kane, Dee Dee Foremaster,

**Members Excused Absent:**

**Members Unexcused Absent:** Vickie Essner, Kate Osti, Raquel O’Neil

**Guests Present:** Maximilian Kim Lowe, Lisa Bonie, Kelcy Meyer, Lori Lutu, Megan Wickland, John Rosenlund,

**CART Provider:** Becky Van Auken

**ASL Interpreters:** Bobbi Bach, Mary Bonham, and Ben Luikart

**Staff:** Dawn Lyons, Cody Butler, and Wendy Thornley

1. Public Comment

Members of the public will be invited to speak; however, no action may be taken on a matter during public comment until the matter itself has been included on an agenda as an item for possible action. Please clearly state and spell your first and last name, if unique or otherwise unfamiliar to the Subcommittee. Public comment may be limited to 3 minutes per person, at the discretion of the chair. Agenda items may be taken out of order, combined or considered by the public body, and/or pulled or removed from the agenda at any time. Pursuant to NRS 241.020, no action may be taken upon a matter during a period devoted to comments by the general public until the matter itself has been specifically included on an agenda as an item upon which action may be taken.

Dora Martinez: Senate bill 422 is regarding drones. It is on the growth and infrastructure committee. She has talked to the Chair to see about being at the table regarding that.

Dora and Cindi Swanson emailed many people and will let this group know as soon as they learn anything. A collaborative input from the disability population would be certainly welcome.

She believes that Senate Bill 315, which she was co-presenter on the prior day, is moving onto the floor in the other house and she will let the group know when it goes to a vote.

Cindi Swanson: She and Dora wrote up some verbiage for SB 422 and will send it to Dawn. SILC has worked hard with its Legislative Subcommittee and the Governor's Council and does similar things.

She was on a call with the NFB, Blind Legislative Committee, this week. It allows drones to travel on sidewalks and the drones could be up to 150 pounds and can go ten miles an hour.

For a person living with a disability, that could be dangerous, so she and Dora wrote up a notice saying to make sure that they have sounder that alerts people but does not

alarm people and allows the disabled person to interact with the drone and alert it to their disability. She had not been aware of SB 422 until hearing from the NFB.

Raquel O’Neil: She is with Blind Connect and they are holding an event on May 17th at 10:00 am at Betty’s Village. It will be Nevada's only job fair designed for the blind and low vision community and invite anybody interested to come check it out.

They have a registration form on their website, [www.blindconnect.org](http://www.blindconnect.org) and they are calling it the flipped job fair, an inclusive minded job fair that allows not just for employers to look for employees but provides employers resources about individuals who have disabilities and live with disabilities and what their capabilities are and how they can perform job duties. They will have booths and showcase was that kind alongside with the employers so they too, can get information. As well as employees gathering information about jobs.

1. Approval of Meeting Minutes from January 11 & 12, 2023 **(for Possible Action).**

Julie Weissman-Steinbaugh, Chair

Linda Vejvoda motioned to approve the minutes. Havander Davis seconded. The members voted and the motion was carried.

1. Welcome and Introduction of New Council Member, Peter Whittingham, New Member Interest, and the New Community Engagement Manager for Aging & Disability Services Division (ADSD), Nikki Haag.

Julie Weissman-Steinbaugh, Chair

JulieWeissman-Steinbaugh: Welcomed Peter Whittingham, SILC’s newest member as well as Nikki Haag, the new Community Engagement Manager for Aging & Disability Services.

Peter Whittingham: He has been involved in the business of advocating for persons with disabilities for the past 24 years, starting with the birth of his daughter who is now 24 years old.

He retired from the police department in Los Angeles as a police captain and came to this great state five years ago and began his involvement in the advocacy for persons with disabilities through Down's Syndrome best buddies and other organizations.

He is currently the Chair for the Down's Syndrome organization. He attended this Council’s meeting a year or so ago and the moment that I attended the meeting, and knew he wanted to be part of this and to be able to participate as a member instead of the public to advocate for inclusion and all that is needed for the entire service population of the disability community.

Nikki Haag: She is the Community Engagement Manager with Aging and Disability Services.

She was previously with Aging and Disability Services as their Public Information Officer, their legislative liaison and tribal liaison. She came back to ADSD in December.

1. Presentation, Discussion and Make Possible Recommendations Regarding Changes to the Nevada Home and Community Based Services (HCBS) in Accordance with the New HCBS Settings Rule **(for Possible Action).**

Megan Wickland, Health Program Manager III

Megan Wickland: She gave a brief introduction to Home and Community Based Services. She is with the Aging and Disability Services Division.

She is the Developmental Services Quality Assurance Manager and is also their Waiver Coordinator for Individuals with Intellectual and Developmental Disabilities.

The Home and Community Based Service services waivers began back in 1981 to correct what was referred to as institutional bias by Medicaid regarding funding.

The bias was that Medicaid thought that people couldn't be served in the community, that they could only receive support in an institution.

And so, section 1915c of the Social Security Act was changed to allow states to request a waiver to fund services for people in the community to receive services and support so they could get out of an institution.

Home and Community Based Services waivers are intended to give states relief to serve populations, new populations and provide services in innovative and creative ways.

States can specify the target population and the services that they can make available through that waiver.

However, these services are intended to supplement Medicaid state plan services, so they cannot be the same as, that would be considered double dipping, and so the services must be different and supplement whatever Medicaid state plan has in place.

They also cannot waiver services, cannot pay for services provided by Vocational Rehabilitation or through schools that would be covered under the Individuals with Disabilities Education Act and cannot pay for services to individuals residing in institutions, so that would include a nursing home, jail, or intermediate care facility.

In addition, the annual total cost of the waiver program cannot exceed the total cost of institutional costs for people on the waiver.

Then they also have their Centers for Medicare and Medicaid Services (CMS), came out with specific settings requirements called the Final Rule for all their Home and Community Based Services waivers.

It was published initially in January 2014; it became effective March 17th in 2014.

However, it wasn't until this year, March 2023, that states are required to follow the settings rules.

The intent of the settings requirement or Final Rule to ensure that individuals receiving long term services and support that are under a waiver have full access to the benefits of the community and opportunities to live in the most integrated setting.

It is designed to enhance a person's choice and quality of life as well as provide protections to the person and it does require a more robust person-centered planning process.

 The setting itself must be selected by the individual based off multiple options and choices for the person.

It must ensure that the person's rights are in place, that they have a right to privacy, their right to dignity and respect and freedom from coercion and restraint.

It also must optimize individual initiative, autonomy, and independence in making choices that they would like.

That's meaningful to them in their life.

 It facilitates choice regarding services and supports, what they want, and who they would like to have provide those services.

It ensures that the individual receiving services in the community to the same degree as a person who is not receiving a Home and Community Based Service and needs to provide opportunities for people to seek employment and work in competitive integrated settings, be able to engage in the life of their community, whatever is going on, and to also be able to control their own personal resources.

The settings options need to be identified and really spelled out in the person-centered service plan.

It needs to reflect that it's based on the person's needs, their preferences, and their desires, and include resources available for room and board.

So person-centered planning, that final rule was codified in 42CFR.

It says that the person must lead their plan as much as possible to the extent that they are able to do so.

The planning team should include whoever the individual wants to attend and provide information and support to ensure that the person really directs that process.

They are driving it. The person is also able to make informed choices and decisions.

And the planning needs to occur timely and be held at times and locations that are convenient to the individual, not just to other people on the team.

Person centered planning also needs to reflect the cultural considerations of the person, it needs to be conducted in plain language and in a manner that is accessible to the person.

Including those who have limited English proficiency, it should include strategies for conflict resolution when there's disagreements in the process.

Providers of home and community-based services, those would be our providers that we contract with to provide the service, cannot also provide case management services because that's considered a conflict. Person-centered planning should offer informed choices regarding the services and supports they receive, as well as include a method for the individual to request updates to the plan as needed.

It should record alternative settings that were considered by the individual.

Their Nevada waiver for individuals with intellectual disabilities is what she is going to talk about next, their current services, their waiver for this population began in 1982.

Their current waiver started back in October of 2018 and is expiring this year on September 30, 2023. They are in the process of renewing their waiver now.

The number of individuals currently enrolled as of February is 2,564.

And Developmental Services currently serve around 7500 individuals across the lifespan.

That's about 1 third of their total individuals served, are on the waiver.

To be eligible for their waiver, the person must be eligible for Developmental Services.

They also must be eligible for Medicaid, and they must meet what we call an institutional level of care for an intermediate care facility for people with intellectual and developmental disabilities.

That includes a substantial functional impairment, and three or more of the six areas of major life activity.

That includes mobility, self-care, understanding, use of languages and understanding of language, learning, self-direction, and capacity for independent learning.

The onset of functional deficits must occur before the age of 22.

Also, there must be a requirement for at least monthly supports under the supervision of a healthcare professional or trained support professional.

Meaning also that the person cannot be maintained in a less restrictive environment without the supports and services provided.

If they didn't receive the waiver services, in other words, they would be institutionalized without the supports so that's what that means.

Here in Nevada, they currently have 11 under bundled services that means they can use them individually.

The first four, day habilitation, and supported employment and career planning falls under our jobs and day training services and then residential support services and residential support management fall under their supported living arrangement services.

Jobs and Day Training services are what they call day habilitation.

These are regularly scheduled activities that are in a non-residential setting.

And they are geared toward helping a person to acquire, retain, maintain, or improve skills and self-help socialization or adapt active skills.

The services are focused on enabling the person to attain or maintain their maximum potential and these services are not vocational in nature.

Prevocational Services, this service does allow for people to learn and gain work experience where they can develop and learn specific tasks related to having a job with the intent that leads to integrated employment within the community and can also include volunteer work.

Individuals receiving prevocational services can be paid what is called a special minimum wage or subminimum wage by a provider that has a specialized certificate to do so from the Department of Labor to pay that.

Again, the services intended to help people learn skills that will lead to employment for them and where they can be paid at least minimum wage in the integrated setting.

Supported Employment Service, this is their individual supported employment where it provides that one to one intensive support to a person to help them obtain or maintain a job through doing some job development or job coaching in a competitive community work setting where they are making at least minimum wage or more.

Customized Employment is one way that the service is delivered where it focuses on the strengths of the person and works where potential employers customize or carve out a job for them based on the person's skill sets and preferences.

And then the outcome for this is that they sustain, a person sustains employment being paid at or above minimum wage in an integrated community setting.

Small Group Supported Employment Services, and this is where anywhere from two up to eight individuals are supported to work in a regular business in the community or industry with the intent that they are integrated in the workplace.

And this, too, is to help support them to be to have sustained employment where they are paid at or above minimum wage in the community.

Jobs and Day Training service is career planning. This service is time limited, and it's designed to help people explore what they would like to do, job shadowing, assessment of interests that can include some benefits counseling.

Solve is a comprehensive employment planning and support service that helps figure out what a person would like to do, so those supports and services can be in place for the person to move forward and hopefully be employed in the community.

Supported Living Arrangement Services, they have residential support services.

These are direct services and protective oversight services provided to a person to assist them to acquire, improve, retain, or maintain skills necessary to be able to live as independently as possible within the community. The services are provided on a continuum.

So from intermittent all the way up to a person receiving 24 hour supported living arrangements.

Someone could be living at home with their family or living on their own in an apartment or with a roommate, and intermittent supports come in maybe 25 hours a week based on the person's needs to help them with whatever skills that they need support with, if it's doing some grocery shopping, meal planning, cooking, doing laundry, whatever it is that they need to perhaps maintain their home or access the community.

Those types of things, all the way up to 24 hour supported living arrangement service where up to four people reside together in a home and each have their own bedroom and there are shift staff that are always present when the individuals are home.

Staff in a 24-hour home can either be awake at night or they can be asleep depending on the needs of the individuals living in the home.

Part of the supported living arrangement service is they have a residential support management service.

A service for the provider that they contract with, to ensure the health and welfare of the individuals that they support. Various tasks they are responsible for, assisting with a development of goals or developing habilitation plans, applying for, and obtaining community resources and benefits, they do some problem solving and crisis management, they can support with budgeting, bill paying, keeping appointment, getting them to doctor's appointments, and then training residential support staff to provide the services based off the rehabilitation plans and the person-centered plan.

Non-medical transportation is a service that enables individuals to gain access to the community. They can attend social events, go to church, banking, grocery shopping and those types of things. There is a maximum of $100 per month on this service.

Behavioral consultation training and intervention services.

This allows for either a licensed psychologist or a board-certified behavior analyst to come in and do a functional behavioral assessment, develop a behavior support plan, training staff on whatever supports are needed to help the individual based on their needs and this too also has a limit of $5,200 per year.

Counseling services, this is a service that provides any type of assessment or evaluation, therapeutic interventions, to support the person and/or their family or caregivers.

This would not be covered by Medicaid state plan, so this would be in addition to that to support the person. It could be done individually or in a group setting. There's a limit of $150 per hour for this service.

Nursing services have three different levels of that within their waiver. There is a medical management component that can be done by a nurse or a licensed practical nurse. They would develop health services, support plans, provide observation, assessment, training of staff, monitoring assessment, and referrals to medical providers.

Nursing assessments can be conducted as part of this service and must be done by a registered nurse.

That's basically an assessment of the person's health, preferences, abilities, and will include recommendations for any type of medical or mental health care that's needed.

They can also provide direct services through either a nurse or a licensed practical nurse.

This would be routine medical and healthcare that's provided to support the individual such as field nursing services, like administration of medication, wound care, feedings, and those types of things.

These services can be delivered to the individual's home and whatever day program they may be attending or other community settings. They also have nutritional counseling services.

This must be performed by a registered dietician. That would assess a person's nutritional needs, develop a nutritional plan, provide training and education to the person and staff.

The service does not include the cost of food or meals, but it does have a limit of $1,300 per year.

For their waiver renewal, some services that they are considering including, they had, during the public health emergency, what was called an appendix K to their waiver. That allowed flexibilities in how services were delivered and provided.

As the public health emergency is ending and they are now in their wind-down phase of that which comes to an end in October, and so some of the services that they had the flexibilities that were allowed within their waiver, in their appendix K, allowed for legally responsible individuals to be paid support. They are looking forward to continuing that.

They are looking to continue having electronic signatures on the person-centered plan.

Maintain some level of virtual person-centered planning meetings on a case-by-case basis for perhaps individuals who may be sick or just to try and stay within those timelines to support the person that wouldn't be the default, but it certainly allows some flexibility as needed.

They increased their non-medical transportation rate from 100 to 150 so they are looking to maintain that.

They would like to remove caps from behavioral consultation training and intervention from counseling services and their nutritional counseling, so they wouldn't have limits to that anymore.

They would like to add a new service category called Goods and Services, and within that they would include environmental adaptations, that's intended to directly benefit the waiver recipients and could include perhaps ramps or handrails or grab bars or outside railings or things specific to support the person to maintain independence in the home.

Include assistive technology, which could include things like a computer, computer software, any type of communication device, remote monitoring, those types of things.

Include bed bug extermination because that does come and from time to time can be rather costly so this would allow that to be included as well. next steps then as part of their renewal process is there will be public workshops scheduled by the Division of Healthcare, Financing, and Policy, that is their state Medicaid agency.

Their waiver renewal is due 90 days before it expires on September 30th, so they must get it in by the end of June.

Peter Whittingham:

Asked Megan if the new programs may be covering assistive technology.

Could she explain what they would do regarding the assistive technology, and how their services will address that? Will they be working with the Assistive Technology Center or is that separate?

Megan Wickland: They have not gotten into the specifics. This is a service that they have been exploring and would expect to access whatever resources there are within their community to do that or refer people to and having it within their waiver would help support any costs associated with that. It would be for things that wouldn't be covered already by Medicaid.

If someone needed a particular software program or an iPad or something like that that isn't covered by Medicaid then this is something that their waiver could be used to access for that person.

Peter Whittingham: Suggested lengthening the device loan duration of iPad or any kind of electronics. Also, Megan gives some consideration to specifically to the iPad or any kind of devices to either provide plans to extended loan of the device or to purchase.

Those are two areas; he will address John later.

Those are two areas of concern that members do have despite the excellent services provided by the Assistive Technology Center; it appears they are restricted in terms of the loan duration of the devices. Thirty days is insufficient for most of the members.

Is providing advocacy and support for IEP in schools something that they do as well or something they could consider doing?

Megan Wickland: IEP support for families would be handled by case management, that wouldn't necessarily be a waiver service, that would be something that a person's assigned service coordinator could help support the person and the family with advocacy within the schools and attend an IEP meeting, that type of thing. That would fall under case management for the person.

Individuals that are open to one of the three regional centers in the state, Sierra Regional Center in Washoe County, Desert Regional Center in Clark County and Rural Regional Center that covers the remaining counties.

When a person is open to services, they are assigned a service coordinator and that service coordinator then would be available to help provide any type of supports to the family for advocacy or link them to community resources that could also provide that service.

Max Lowe: When is their public workshop on this issue? He knows a client with Desert Regional and she's new to this so he would like to pass this information on to her.

Megan Wickland: They do not have that scheduled yet. Once they get that scheduled information, it will go out to their service recipients and stakeholders to participate in that.

That would include sending it to this group as well.

Dawn Lyons: She usually forwards that kind of information on to the SILC membership and if anyone would like to be an Interested Party, let her know and she can add them.

Mary Evilsizer: Thanked Megan for the presentation. What a wonderful expansion to include a home service such as bed bug extermination. RCIL frequently has individuals calling for bed bug extermination but also other types of home assistance like air conditioners not working or kitchen flooding. Would it be possible to include to the expansion, home services such as bed bug extermination, other home emergencies where the individual could have a leeway in Clark County in particular, it's a challenge to find the funds or the services to take care of in-home needs that aren't funded by any type of state or federal program.

Also, is there currently a waiting list for the DD Council?

Megan Wickland: She is not sure if they can include things like home emergencies such as Mary described where there's a broken pipe or something happens under their waiver.

She can investigate that option to see what would be allowable by CMS.

She does not know about openings for the DD Council.

Mary Evilsizer: Traditionally, there's a waiting list for waivers in Clark County, in the renewal if they were going to get any new or additional waivers that would be helping the waiting list.

Megan Wickland: They do have a waiver wait list, and the reason is not that they don't have waiver slots for people, it's that they don't have provider capacity.

Since COVID, our providers have experienced significant staffing shortage, and we have people who would, R not able to be served because there's not a provider to serve them at this point.

It is not an issue of getting additional funding or slots for that, it's we just don't have provider capacity. They have provided rate increases to our providers as part of our budget as we are in the legislative session.

They are hoping that by allowing for rate increases to our providers, it will support providers to be able to recruit and retain staff. That is what they are trying to do at this point.

Linda Vejvoda: Asked about the Rural Regional Center in Carson City, when they have called, they are told that there are no slots and asked if it is because of short staffing?

Megan Wickland: Asked if the person was receiving services?

Linda Vejvoda: RCIL has done what they can for a certain individual, they did a lot of research and explaining about the individual’s circumstances.

This was a person that was not only mentally disabled, but transitioning out of school into society, and he needed a lot of help.

His parents are still helping him a small bit.

He was not being supported by the school system. She thinks that Rural Regional would have been good for him, it would have helped him transition a lot better into society, but right now, she thinks he's still in the same situation with his parents.

Megan Wickland: The provider and staffing shortage is statewide.

It could very well be that they simply don't have providers to staff the service that he might need.

She invited Linda to email her with more information. Megan can investigate it more.

Someone can be receiving a waiver service, but not necessarily be on the waiver in developmental services, they can fund services through their state general fund.

That’s something to keep in mind as well, a person doesn't have to be on the waiver to receive a waiver service because they provide an array of services to support individuals.

Dawn Lyons: Thanked Megan for her presentation. She asked if there was a priority list or a list of people who are accepted as a priority because of the risk of institutionalization?

Megan Wickland: Put her email in the chat. mwickland@adsd.nv.gov

Yes, they do have a priority list for services.

Dawn Lyons: In Megan’s presentation, she talked about the intent of the jobs and day training to eventually get people into competitive integrated employment.

Did Megan have any data on the success rate of that or if there were any numbers that to share regarding that?

Megan Wickland: She will see what she has and will share it.

1. Updates/Overview Regarding Consumer Trends

Mary Evilsizer, Executive Director, Southern Nevada Center for Independent Living (SNCIL)

Lisa Bonie, Executive Director, Northern Nevada Center for Independent Living (NNCIL)

DeeDee Foremaster, Executive Director, Rural Center for independent Living (RCIL)

Mary Evilsizer: SNCIL provides services in Clark County, they provide independent living services for individuals of all ages and all disabilities.

They provide the five core services as designated by the Rehabilitation Act as amended July of 2015 into the WIOA act.

Those five core services, are Information and Referral, Independent Living Skills Training, Advocacy, both Individual and Systems Advocacy, and Peer Counseling.

They provide two types of transition services; youth transition services and nursing home transition services.

The numbers for this quarter are their highest number for service requests is housing, which is 83%, which is still within the same margins, indicating problems with affordable and accessible housing. Requests for IL skills training, 6%.

Peer counseling services, 3%.

Transportation services, 12%.

Vocational services, 1%.

Projected service trends needs will be in food insecurities, SNAP is cutting back on benefits provided during the pandemic.

The senior population is being impacted and SNCIL is updating their food securities lists of the the food banks, and any food services in Clark County.

Lyft will be providing rides to food banks for seniors in Clark County, SNCIL will see about having individuals with disabilities included in that service.

Three Squares has always been very generous to the disability community.

The other insecurity is going to be funds, parents were getting stipends made for additional childcare services, food, housing, and anything else that a child might need.

RCIL is alerting their consumers by postcard, that Medicaid healthcare benefit recertification processes will commence and to watch for paperwork in the mail. SNCIL assists with that

recertification.

Thanked SILC for the scholarship to send two youth to the National Conference for Centers for Independent Living (NCIL) for the second year.

SNCIL has started getting essays from the students who must be nominated by their teacher.

Last year’s winners will help select this year's winners.

The scholarship includes travel costs for the teacher that nominates the winning candidate, as well as a parent to chaperon the candidate.

SNCIL is interested in what the SILC is doing for youth in transition.

SNCIL works with youth in transition to develop new leaders, interest in the Independent Living movement and in promoting the Independent Living philosophy.

SNCIL has been mentoring the Star Fair for many years.

High school students in Clark County School District learn about what's available in their community. The focus is on graduating seniors and juniors and freshmen in high school to guide them towards SNCIL, the SILC, and Vocational Rehabilitation (VR).

There will be a vaccine clinic at the fair.

That event will be April 29, 2023, from 10:00am to 2:00pm. The Clark County school district will be sending out flyers.

The city of North Las Vegas is sponsoring the Nevada Senior Health Fair on Saturday, May 13, 2023, from 10:00am to 4:00pm.

Outreach called Life After High School was held by the Silverado High School for the graduating seniors and seniors that had graduated the year before.

SNCIL’s performance progress reports for the Administration for Community Living (ACL), who is the primary funder for their services, is still in progress of reviewing and approving SNCIL’s report. Once approved, a copy will be sent to the SILC. She thanked Julie and Dawn for the extra time they took to explain the PPR and for listening to SNCIL when there were different perspectives or are looking at different regulations.

Julie : Asked Mary to send the winning essay to the next meeting. Mary will send last year’s winning essays.

Ace Patrick: Asked Mary about contacting the Lyft program for rides to the food bank. Lyft program provides rides to seniors in Clark County, how would somebody who's maybe not on the Lyft program or not familiar with it, get in touch with Lyft.

Mary Evilsizer: Lyft and 3square are sending out postcards with contact information for getting to the food bank. Age 60+ and you in need of a Lyft to get food? Three Square has transportation in Clark County. Rides are available Monday through Friday 9am - 2pm. Advocates are waiting to help schedule a ride at 702-765-4030 and learn more about programs. I have staff researching and calling. She will send the number to Wendy to send out to everybody.

SNCIL is ready to help with information for everyone.

Lisa Bonie: Much of what NNCIL does mirrors what SNCIL works on in the community. NNCIL is seeing an 89% increase compared regarding housing operations, housing, housing assistance, housing search assistance, rental assistance, surging as the CARES Act and COVID related funds have dwindled.

The federal declaration of an emergency will officially expire on May 13th. The additional funding for SNAP benefits food stamps, sun setted March 31st..

NNCIL has contacted different resources to have current information because of the expected uptick in food insecurity. NNCIL has been receiving housing inquiries from Oregon, Colorado, and Utah, for people considering relocating to Nevada, has pushed some of their numbers up.

Poor credit history and financial assistance for housing repair account for a 76 percent increase in other housing concerns.

As part of their INR, NNCIL connects people with other services in their communities, but the funding for that is limited.

NNCIL is seeing an upsurge in requests for utility assistance.

People have already gone through NV energy, their program, which you can only access periodically. As other supports fall away, these requests are expected to go up. There has been an uptick in participation of NNCIL’s peer support groups and NNCIL has opened their building to small group trainings. These include NVDA, IOS beginners and an IOS group that's more advanced as well as a couple of different peer support groups around technology and around blind, low vision services.

NNCIL is also concerned about the Medicaid recertifications, and has instituted an education and communications campaign for consumers, to get them reacquainted with the certification process and encouraging them to make sure that they are paying attention to their mail.

As they get the recertification paperwork, if they have any issues filling out the form or uncomfortable to contact NNCIL to assist them and making sure that they don't get swept off the rolls.

NNCIL is tracking COVID testing and COVID vaccines. The federal emergency declaration sunsets on May 13th. Free testing and vaccines are going to become very limited.

There are public clinics going on doing this last push for boosters or if somebody is completely unvaccinated and decides that now is the time they have access that way.

After May, it's going to be more difficult to find those services.

NNCIL has been working with the Washoe County Health District and other counties to make sure where the referral sites are going to be and how people who are uninsured and don't have access to other programs, can access vaccines and testing if they find themselves in need.

Direct service providers up here, more particularly in Washoe County, and NNCIL are partnering with the City of Sparks, and City of Reno, to have Mark Wellman Adventure Day. The Abilities Expo is for direct service providers to connect with the community to educate about their services and programs.

Mark Wellman is a well-known mountain climber who is a person with disabilities.

He brings his rock-climbing wall and gets people up on the wall to climb and there are also different kinds of adaptive bicycles and kayaking at the Spark’s Marina. Demonstrations of different types of adaptive sport gear as well as recruiting for different teams around town that are particular for people with disabilities.

The event will be on Sunday, June 4th, from 10am to 2pm at the Sparks Marina.

The initial flyer went out to service providers.

Last year, there were 44 or 48 different programs and service providers represented with a nice turnout of consumers.

Dee Dee Foremaster: RCIL has been working on their housing grant and heard about 4 weeks ago that another 36 people will be displaced from their homes due to their current homes being demolished for new development. RCIL was able to get three people off the streets last month. Linda has developed a good relationship with the housing organization.

RCIL has a support group that meets once a month at a pizza parlor. They also have a recreation group with about 15 people and have started going to the movies, bowling, bird watching and hiking.

RCIL has normal intakes going on every day at the center, legislative work, and advocacy work.

Dawn Lyons: Asked Dee Dee about intakes. She asked what requests besides housing, are coming in to RCIL.

Dee Dee Foremaster: Housing advocacy, filling out housing forms, helping people with Social Security and ADA matters.

1. Updates from the Legislative Subcommittee.

Steven Cohen, Subcommittee Chair

Steven Cohen: There have been concerns regarding Assembly Bill 133 and 161. AB 133 and AB 161 are driver's license related bills. He will need to work with Assemblyman Miller on any amendments that the SILC wants.

AB 133 is dead. It will not get a hearing.

AB 78 exempts jobs and day training providers from being required to be nurses to administer medication during consumers workdays.

79 I mentioned,

AB 99 is about Medicaid reimbursement rates,

AB 100 is about caregivers.

AB 116 is Down's Syndrome information.

AB 206 will add additional seats to the Deaf Commission

AB 259 is 14c, which is the Fair Labor Standards Act deals with subminimum wage phase out.

Moving into Assemblywoman Cohen's bills,

AB 252 is accessible museums, that's been heard and it's exempt.

AB 255 is foster care support for folks with disabilities up to age 18.That one has been work sessioned and is exempt.

AB 446 was being heard this week. That's a guardianship bill.

And then I'll run through the remaining bills quickly.

AB 37 has been heard and is exempt. That one is to create the behavioral health workforce center at UNLV.

In terms of assemblywoman Brown May's bills,

AB 78 is on the senate side already.

AB 179 the 700-hour bill is dead.

AB 99 has been work sessioned.

AB 100 has been work sessioned.

AB 116 was being work sessioned that day.

AB 206 was work sessioned.

AB 259 has been heard but it is exempt.

AB 99 and AB 100 are also exempt.

Cheyenne Pasquale:

SB 43 is the cleanup bill for ADSD

SB 4 is the one making some changes to the senior and disability RX programs

SB 45 is the personal needs allowance bill. That one is in finance has been heard and is exempt.

SB 191 will be heard next week. That will make changes to applied behavioral analysis.

The age cap for ADA.

SB 158 is cameras in special ed classrooms and that's been heard and is exempt.

That means there's deadlines, for example, next Friday the 14th, anything that doesn't pass the committee in the originating house is technically dead.

And anything that doesn't pass the originating house floor by the 25th is technically dead.

If something is an exemption that means that it will probably go down to the very end or close thereto.

Dawn Lyons: Regarding AB 161, there was a letter that the SILC approved, a special meeting with the Deaf Commission and the Governor's Council on Developmental Disabilities, that is included in the meeting materials. It was the SILC’s position statement, and it was an educational letter that the SILC provided in testimony to that.

Steven Cohen: That one is being heard by the DD council's executive committee the following day.

Peter Whittingham: Asked Steven if looking at the list of pending bills, which one is perhaps most important in terms of the need for the community and what the SILC can do to put their weight behind those that are significant?

Steven Cohen: Thinks they are all important because there's a dozen disability bills.

There's a difference between coming in opposition as a SILC versus as an individual.

Dawn Lyons: The SILC does not oppose, nor do they promote or approve of any specific bills, they are not allowed to lobby. The SILC can educate legislators on how it would affect the disability community.

That's what the SILC tries to do, if people get together and feel strongly about something or have concerns, they will reach out and express those concerns with legislators.

Sometimes because Legislature moves so quickly, sometimes the SILC does not find out about it until it's already in work session and they can only provide a testimony.

Even then, they must have either a quorum of SILC members or a quorum of Executive Team members to approve of the educational letter that would inform as far as public comment goes, but individuals on their own time are welcome to give testimony in opposition of, or in approval of any bills that they want. They just cannot do it on behalf of SILC.

Because legislature moves so fast, Peter, in an ideal world the SILC would love to give you all a great idea of what's coming up and what you should be present for.

Unfortunately, they often don't know until either that week or even sometimes that same day.

So what they try to do is as soon as they get that information, it may be short notice, but Dawn will send out an email blast to everyone and inform them that it will be heard and when.

And how they can participate.

She asked the group if they ever hear of anything, please share it with her and she will then share it with the rest of the group.

It's how the SILC best communicates about legislation as it's going through the process, because it does happen so fast.

1. Discussion and Make Recommendations Regarding Granting the Legislative Subcommittee Permission to Act on Behalf of NV SILC **(for Possible Action).**

Steven Cohen, Subcommittee Chair

Steven Cohen: It is often difficult to testify sometimes with 12 hours' notice or even less than that, sometimes. What they are looking for here, is authority for the Legislative Subcommittee to be able to educate legislators on bills as they become available.

Dawn Lyons: This is like asking permission from the SILC for the SILC Legislative Subcommittee, which meets more often, especially now during legislative session than the SILC does, to be able to go ahead and approve of educational letters or public comment being provided or even working with legislators if they request it.

From a consensus of the group present during the SILC Legislative Subcommittees as opposed to having to have a quorum of SILC members.

They have done this in the past just so that they can speak up on things that they would like to even if they don't have their next SILC meeting until July when Session is already over.

So that's what we do this, so we don't have to have a bunch of special meetings and hope we get quorum and all that.

They are asking not for any one specific person necessarily, not even the Chair to go ahead and alone speak on SILC's behalf about educating but, rather, to have a consensus of the Legislative Subcommittee group at the time, provide that education.

Raquel O’Neil motioned to allow the SILC Legislative Subcommittee to approve communication with legislature during session as a consensus of the group as they meet.

Ace Patrick seconded the motion. The motion was carried.

Peter Whittingham: Is there a need to be more specific in terms of what we're authorizing the subcommittee to do?

Dawn Lyons: They only discuss bills and BDR's as they come up in the legislative session or what they would like to see come up in the legislative session.

During session, they are asking for permission from the SILC to educate on behalf of the SILC council on bills that are in session.

1. Discussion and Make Recommendations Regarding Innovation & Expansion Funding from Vocational Rehabilitation **(for Possible Action)**.

Julie Weissman-Steinbaugh, Chair

Dawn Lyons: Wanted to throw these ideas out here because they are working behind the scenes trying to work on ways to figure out how they can include innovation and expansion funding in their next State Plan for Independent Living (SPIL), as ACL has required from them.

She has been talking to Mechelle Merrill and proposed an idea between information that she's given to Dawn about how their draw down works and information about what ACL has given Dawn about innovation and expansion funding requirements and from what the RSA has given information to Vocational Rehabilitation about what they are allowed to do.

Mechelle is looking into the legal aspects of the possibility, and this is just an idea they are checking into, because for every nonfederal dollar that they can donate to Vocational Rehabilitation, they can draw down four times that amount.

If they can draw down four times the amount that nonfederal dollars are donated, half of that could possibly go into innovation and expansion funding to whomever donates it.

So in other words, you would be getting more back in return through the SILC through INE funding for specific purposes if you were able to come up with non-federal dollars.

So it is just on the table right now. They are not sure if it's legal. She's checking into that right now.

She is guessing that if they do, and this falls right into the next agenda item, about fund raising activities, because they would like to throw it out there that even if this doesn't work out, the way they are hoping, they can come up with some other way to work this out.

They would still like to create fund raising opportunities with the Centers for Independent Living. The SILC is allowed to do that per their State Plan for Independent Living per ACL, the Administration for Community Living.

As that is one of their activities that they are allowed to do, they would like to partner with the centers because the centers are probably more well versed in fund raising activities.

If they can work together and SILC can help fund some of those opportunities or partner on it or in that regard, the SILC can help by being there if the Centers can't, or in whatever capacity they have to work together to do some fund raising activities, whatever money they can come up with, the SILC is hoping that if they can donate that money towards Vocational Rehabilitation services, that they can get half their draw down in the long run.

They get half of that money, and the SILC could get half that money to support Centers for Independent Living activities or programs.

She asked for feedback from the centers and from SILC members to see what their thoughts were on what kind of fund-raising activities they could do, and if they had any thoughts on the draw down from Vocational Rehabilitation they would like to share while Mechelle is present at this meeting.

Mary Evilsizer: Years ago, she served on the Vocational Rehabilitation Council and they had an interesting situation where an agency attempted to donate funds to Vocational Rehabilitation so that they could do the dollar for dollar draw down, and the complication they ran into at that time from ACL and RSA, was they were told that it wasn't allowable because that was the intent, that that agency would donate funds and then Vocational Rehabilitation would donate that back to the agency.

It's best to check, maybe it has changed.

From the SNCIL fund raising standpoint, they always look for funding that is going to be solid, secure and that's going to be long term, sustainable.

They try not to get into grants or grant situations that are one time for a small amount.

SNCIL does not do regular fund raising or sell candy bars or books or anything like that.

When they need money for something specific, like housing or rent, they will work with that money if it's long term and sustainable.

Dawn Lyons: She was glad that it's been investigated before and SNCIL some background experience on that proposal.

She still thought it was a good idea for Mechelle to ask now and appreciates her doing so.

She welcomed Mechelle to speak on that.

Mechelle Merrill: Agreed with Dawn, every question you don't ask is a no.

They are going to investigate it and see if it is a no, maybe they say, you can't do this, but you could do that.”

So we're hoping that our creativity and effort will help us find a way.

Renee Portnell: Was at another organization where they did fund raising to assist people with disabilities, like give horse riding lessons to people with disabilities, or the elderly that had strokes, etc. It works to explain why and who it’s for.

Ace Patrick: Thinks it's a grand idea and is looking forward to hearing more from Mechelle about whether this is something that is possible.

She would like to hear more from the Centers about how they find long term funding.

Mary Evilsizer: One of the strategies SNCIL uses is to subscribe to a grant software subscription company, called Grant Solutions the ACL website to see what is coming out.

There were some large hits in the state budget a few years ago that the state is still trying to recoup from. So state funds are minimal for long term sustainable projects.

So, again, where we're finding our funding is through federal grants.

Social Security and some of the training programs for Independent Living offer grants.

Doing a grant is an investment of time to develop a program, policies, and procedures.

Dawn Lyons: Wants to investigate more long-term sustainable grant funding in the future.

However, because SILC is working right now at becoming a 501(c)(3) and had to start from scratch it might be while before they are eligible to apply.

If the Centers ever want to partner with the SILC, she is more than happy to work with them on those opportunities.

1. Discussion and Make Recommendations Regarding Fundraising Activities for NV SILC and the Centers for Independent Living (CIL’s) **(for Possible Action)**

Julie Weissman-Steinbaugh, Chair

As far as what the SILC as a council needs, if they do their own fund raising on the side as well, they can include the Youth Action Council more and have them do some of that education and reach out to the community. It would give the SILC more exposure and help spread the word of Independent Living.

It would be a double benefit for the SILC if they did some of those things out in public, maybe some recreational activities like the NNCIL is doing with the activities at the lake.

Things like that or Dee Dee came up with an idea to do a zombie run, October time.

Those great things to put into place and to partner on. She would like to start working on that.

Mary Evilsizer: Agreed with Dawn and would like to focus on youth.

Some centers have gotten funding through Pepsi Cola, for youth activities that are not long term, it's not sustainable, but that would be for youth recreational, social recreational ideas so get more youth involved. They don't have as many federal regulations regulating that.

SNCIL knows the priorities of their consumers and is happy to share information on social, recreational, partnering for different activities. SNCIL has wanted to do a masquerade ball in October. Their consumers get to go somewhere and dress up and they are running it.

Dawn Lyons: Loves that idea, and she does have youth grant opportunities to come to her mailbox. She has always been interested in helping homeless youth before she became involved in the SILC. When Marina was the Youth Action Leader, Dawn forwarded her a grant opportunity that she won.

Dee Dee Foremaster: She has a lot of fund-raising ideas, RCIL has had to survive off fund raising. She does the Saturday morning fruit market all the way through the summer, as well as doing Saturday evening free concerts at the Brewery Arts Center.

Fund raising is important because it also allows you to do public outreach. Public outreach is vital to all CILs so that people know they are there, the CIL can assist people easier and have information about the centers, upcoming activities etc. She is happy to help.

Dawn Lyons: She wanted this to be an action item because she knows the SILC would like to do this. When Sam Lieberman was around, he had suggested reaching out to Mondays Dark and asked the SILC to get involved in fund raising.

She took a minute to remember him and his efforts and give him credit for that as well, because he really got her started moving in that direction when he was with the SILC.

I also, I guess, what I'm asking for is a motion I'll just throw it out there I would like to see a motion that the SILC start carving out only some funding from our fiscal year no cost extension 21 for some fund raising activities through December of this year, and after that, through our third party fiscal agent, Community Chest, to carve out a portion of that money towards fund raising as well.

And if I can get a motion to approve that the SILC carve out those funds for fund raising activities, then we can take a vote.

I appreciate it.

Linda Vejvoda motioned to approve carving out funds from the SILC’s fiscal year, no cost extension 21 for fund raising activities through December of this year, and after that, through their third-party fiscal agent, Community Chest, to carve out a portion of that money towards fund raising as well. Dee Dee Foremaster seconded. Motion was carried.

Ace Patrick: There is a music group in Reno, called the Notables, maybe the SILC can partner with them to have a fund-raising event, because they are a group of musicians with disabilities.

And they're awesome.

Renee Portnell: I know a person who also has a disability who might help, and she has done fund raising with restaurants, hair salons and others. She will send the information to Dawn.

Lisa Bonie: Has experience fundraising and is available to answer questions.

Dawn Lyons: Loves all the suggestions and would like to get together with individuals outside of the meeting to discuss them and potentially work on them.

The members voted and the motion was passed.

Lisa Bonie: Has experience fundraising and is available to answer questions.

Dawn Lyons: Loves all the suggestions and would like to get together with individuals outside of the meeting to discuss them and potentially work on them.

The members voted and the motion was passed.

1. Updates, Discussion and Make Possible Recommendations Regarding ADSD’s Plans for American Rescue Plan Act (ARPA) and Independent Living (IL) Funding, and the Olmstead and No Wrong Door Steering Committees **(for Possible Action).**

Cheyenne Pasquale, Designated State Representative (DSE) for NV SILC

Cheyenne Pasquale: The Olmstead Steering Committee has been meeting monthly for the last two months, and they post all their materials after each meeting on their website.

They post the ADSD Olmstead plan template after each meeting so that the public can see the document development in real time.

At every meeting, they are updating a section of the Strategic Plan, and that's posted online so people can see how it's coming together, in addition to all the backup information that they post.

On the website, their partner, Social Entrepreneurs, also has a public comment form so that people can submit public comments and feedback along the way.

That is brought to the steering committee when public comment is received.

They have also completed all their community workshops, and now Social Entrepreneurs, is working on key informant interviews.

They are going to host one additional community workshop via Zoom, and as soon as that's scheduled, they will send a notice out.

In terms of the community workshops, there were a few different areas of exploration in those community workshops and some of the themes that have come out of the workshops is the need for more outreach, more accessible information about programs and services.

They know that a lot of people access services through peer-to-peer support.

In terms of service delivery, some of the services that were identified as most needed to ensure community integration include housing, transportation, in-home care, personal care attendants and respite care.

In terms of geographic locations, there was also some discussion around incentives for serving rural populations and then also thinking about weather-based accommodations.

She imagines particularly this year with all the snow that has hit Northern Nevada, that has become more readily apparent as a need.

In terms of barriers to accessing supports, some of the initial themes include the system being difficult to navigate, long wait lists, inflexible eligibility requirements and insufficient workforce.

They will take this information and the information from the key informant interviews and start to talk about goals and objectives for the ADSD Olmstead plan.

Julie Weissman Steinbaugh: The thing that’s most concerning is people’s lack of understanding of what Olmstead is. That’s a basic knowledge that we need to figure out how to disperse.

Cheyenne Pasquale: I think that's an excellent point that I did not hit on.

So one of the areas of exploration was what is people's familiarity with the Olmstead decision.

And as Julie said, people aren't very familiar with it.

So that is an opportunity

Dawn Lyons: Many of the people in the meeting had to leave to testify regarding SB422 at the legislative session. As far as the education on Olmstead, Julie did speak with the Executive Team about that, and they have something in the works behind the scenes on that because that would be right up their alley as a council.

Cheyenne Pasquale: The No Wrong Door Committee is ready to be launched and includes representatives from the various Department of Health and Human Services agencies that administer long term services and supports, Dawn is representing the SILC, Catherine is representing the DD Council, so that is going to be launched in the next month or so.

The purpose of this federal grant is to do an assessment and mapping of their current access points, as well as develop a plan for ongoing No Wrong Door efforts and most importantly, ensure that there is a formal governance structure that aligns with the federal guidance for their No Wrong Door efforts. There's going to be a lot of work starting with that and she will have more information at the next SILC meeting.

She gave an update on their ARPA funding and specific to the Independent Living funding.

They have a competitive Notice of Funding Opportunity (NOFO), for the regular Assistive Technology for Independent Living program.

That's out, and that's going through that competitive process right now.

Once those funding decisions are made, then they will provide a supplemental subaward to the chosen agency or agencies for addressing the wait list in that program.

Another part of that is the development of blind services. She asked John Rosenlund to give an update on the blind services piece.

John Rosenlund: Asked Cheyenne about the ARPA money, if they are talking about only issuing the ARPA money to the AT for independent living program after they have respondents to next year's program?

Cheyenne Pasquale: Yes, because of the competitive cycle, they were going to issue out the ARPA funding once the funding decisions were made to address the wait list.

John Rosenlund: Asked when that funding ended.

Cheyenne Pasquale: In December of 2024, it must be obligated by December of 2024.

And expended by December of 2026.

1. Updates on the ADSD State Independent Living Program (ILP)

John Rosenlund, IL Program Director

John Rosenlund: In December, he is gathering information for a blind services pilot program, was tasked with. There has not been a reaching out to the blind, low vision community in his entire career. He delved into that, and there needs to be a lot more done to explore and talk to people with blindness and low vision. He has learned much information on this depending on when a person was blind, from birth or if they lost their vision later in life.

The top three holes are:

Orientation Mobility Training, which is maybe called cane training, in other words, teaching you have how to get around, the biggest gap we have is there's not orientation mobility training if you're under the age of five and don't have a vocational goal. That's been a barrier for at least ten years.

The second biggest one is where to go. That's because they don't have a single point of entry where someone who is losing their vision or even families know to reach out to.

He doesn’t think people have been directed to Centers for Independent Living to engage in those things.

Some of the individuals he talked to, who are born without sight, technically blind or loses vision at an early age, didn't engage Centers for Independent Living.

Their parents went and created their own avenues which is very interesting.

A lot of people who had lost their sight from an early age integrated into community living much more. Much more outgoing as far as chasing careers and trying to do certain things. Then he found people that had lost their sight later in life where it was particularly devastating, losing a career or losing a job or not going back into the workforce.

That took him to the third point, and that was peer connections.

There's not a single point where somebody is going to connect with peers.

Other people that are blind to find out what they have done and been successful.

There are people kind of in different areas throughout the state, engaged with one group and almost nobody gave any feedback other than complaints of they were not happy with online information being provided or filling out doctor's information online because it wasn't accessible.

He lives in the world of Assistive Technology and wonders why they can’t access that?

People just don't want to utilize those technologies or engage in that way.

So what he can say about a blind services pilot program is to really try to suggest something.

He believes that what should be followed is what was inserted in the NRS about five or six years ago and that is to really explore and engage the blind community and find out what services are needed.

One of the comments he received back from somebody who he engaged said. “Why am I having a hard time getting people to share what their experiences are and what was good and bad?”, and their response was, “Because nobody ever asked us.”

That's kind of a concern.

That is what he sees and has seen in his time as a person with a disability.

He thinks that if they are going to be talking about a blind services pilot program, they should be first engaging those communities and finding out what those holes and gaps are and he hasn't done that officially and put that report together within ADSD and done that just today, the talking books folks published in their newsletter going out to about 1,200 people.

He is hoping to get some more feedback and direct contacts to try to get more information. Home in on some of the things that are missing and be able to come back with something substantial.

Putting a quick, one-year project together that fades without any data is going to be difficult and it's been done before, and it doesn't really serve a population.

Dawn Lyons: Asked if either of the Centers for Independent Living have any data on their experience as far as people looking for blind services when they come into the Centers for Independent Living.

Mary Evilsizer: SNCIL works with a certain percentage of individuals who are blind or low vision and has a good working relationship with Blind Connect and the Blind Center.

They get referrals from Blind Connect or the Blind Center or they find SNCIL on the internet.

The most requested service is assistance with Social Security.

Social Security offers higher benefits for individuals that are blind, SNCIL helps to make sure they don’t “fall through the cracks.”

The other service that's asked for is housing.

SNCIL assists them with locating housing and transportation. SNCIL is not usually contacted for cane training.

There are inadequate services.

Some individuals do not consider themselves blind, they have low vision or loss of vision, they could be considered blind, but they don't see themselves as blind.

So they come into the center, and they will say, okay, I have a physical disability, but they don't recognize their blindness.

Some individuals that are blind, come to SNCIL but they don't want to connect with the blind community.

SNCIL will help them to develop a plan and write the action steps to access the resources that are available in the community.

Dee Dee Foremaster: RCIL has had four individuals in the last two months that have become visually impaired due to strokes and helped them with Social Security and referrals.

Most of them do want to go back to work but cannot work in their fields that they were in previously. RCIL referred them to vocational rehab and blind services.

There does need to be a lot more services for visually impaired and blind, some are vulnerable due to being homeless.

Lisa Bonie: Jack Mayes from the NDALC put on a series of town hall meetings around this subject probably about eight or nine years ago.

That's when NNCIL started the path to creating some programming for blind and low vision and now has a full-time staff person who offers training.

NNCIL recognizes the lack of O&M training, orientation, and mobility training, and have been trying for several years to find some foundations, grant money, some way of providing that training, because that training must be provided by someone who is licensed.

One of their peer support groups this week had 19 people participating.

They have NVDA and IOS training and they are out in the rural areas every week in a different place. She recommended that John be in touch with Mark Tadder.

Ace Patrick: Wondered what happened with the O & M training that they did at Vocational Rehabilitation, that is where Ace received training.

Lisa Bonie: SNCIL sees people who are not in the school system. They do have an O&M trainer. She believes the gap that John is referencing, is for people who are not in the school system and don't qualify for older blind and they don't have any vocational goals now.

“You can't think about vocational training if you can't get out your front door.”

That sets up the conversation for this gap for people who lose their vision, that fall outside the set parameters of the programs that exist currently.

Raquel O’Neil: As president of Blind Connect they have noted the gap in services for people who are blind and low vision and one of the problems that they face here is the licensing required to become an orientation and mobility specialist, it is really a small, specialized field.

Raquel has recently been certified and licensed for Vision Rehabilitation Therapy.

Which was an additional master's degree that she had to get from Western Michigan University, and she is only one of two people in Nevada who have certification in vision rehab therapy.

Now, she can teach people white cane basics indoors.

She can teach them protective techniques, how to utilize the cane indoors and Blind Connect’s training facility does a nice job with that because it simulates the outdoors, indoors.

She is certified and able to take someone and teach them how to walk up and down, steps, ramps, and sidewalks using the cane.

When she was attending Western Michigan University, in the whole class of master’s level students going to obtain an orientation and mobility degree, there was only five individuals, for the whole United States. There are only about three schools in the entire United States that offer a master's degree in this field.

To put perspective on what the blindness community faces right now, this is part of it.

Nevada specifically is the state that does not actually require certification in orientation and mobility or vision rehabilitation therapy, it's the right thing to do but Nevada doesn't require that as a qualification to teach it.

What's required is a bachelor's degree in disabilities, and a disability related field.

And two years of working with people with disabilities.

There's a huge gap. They see it every day at Blind Connect as people who are needing the services and needing the help from age 18 to 55. They are medically retiring from vision loss. This is a huge, huge problem.

She raised the question to several people in December and started the conversation about why in America, why is it that when we lose our arms, our legs, when we lose a part of functioning we go to rehabilitation, go to some kind of center to get help.

And when we lose our eyesight, we're basically told to go home.

Go home, we're not provided resources, not providing information about what to do next.

And we’re not provided with a white cane to at least start exploring or learning what to do with it.

We're not provided with anything.

And that's a huge failure in our society and our system that I would love to champion, and advocate to see it changed.

She appreciates John for bringing this back up again.

They do have a vision services team meeting of all the heads of different vision services that meets once a quarter at Zoom.

They have identified some areas based on talking with their constituents and consumers about what their top priorities for the blindness and low vision community and they have identified, the services, orientation and mobility, and rehabilitation therapy are part of the top priority concerns. The next are housing, transportation, and mental health.

And their vision services team is trying to work out solutions to these priorities and would love for John to join an upcoming meeting.

John Rosenlund: He would love to join. He asked Raquel if she agreed that there is a need to engage with people that have the disability more so before creating something?

Raquel O’Neil: Absolutely. She thinks that always going to people and asking what their thoughts are, what was their experience, and really lends to understanding it, it's complex and everybody has a different story to tell. And goes with the Independent Living model because what they do at Blind Connect is talk to people about where they're at and meet them where they're at and ask what they see as their next steps? And a lot of times it's not employment, it's just getting day by day, answering their phone and things like that.

So she would love to see more people being asked about these things and what their experiences are so that they can be better met and better served.

John Rosenlund: There's several individuals he spoke to that aren't ready, they're still in that rehabilitation state, which has been policed for at least ten years.

One person received O&M training but didn't have a vocational goal.

That was removed from Vocational Rehabilitation and DETR about ten years ago.

Completely eliminated the option of them providing that for people without a vocational goal.

So they didn't have the funding or the resources to do that.

So what Raquel just said really is that also that missing piece.

You're not ready to go to work.

That doesn't just apply to blindness, if you have a life changing disability happen tomorrow and have a career, it doesn't mean you're ready to go work on Monday.

It may be months it may be years from that point to be able to rebuild confidence, to get back into that mode of first being able to live independently.

So, yes, all those pieces are missing.

So when I talked to an individual that's had vision loss for ten years but they're still not ready to take that step, it's very difficult to say, oh, well, maybe someday training orientation or mobile training will be where you would start, they're not ready for that.

So how many individuals are out there?

How many people aren't involved in those groups?

That's why I think that's where the focus needs to be engaging consumers.

But nothing about us without us means something. It is not just the slogan that's kind of caught on and popped back up over the last year or two.

Somebody should not be trying to serve him and provide him with services that doesn't understand his disability. And is incapable of listening. He has talked to Mark and will be touching base the next day.

Havander Davis: Everything everybody said is correct. He works at the Blind Center where they catch people who are just now losing their vision and get a lot of eye doctors and people sending them there.

They don't have mobility teachers here. They have peer to peer and that's not something that you want to send a person who's just learning to be out on the cane out in the world with.

You never want to send someone out without proper training.

The people aren't ready to go back to work, they're not ready to move on yet, when you lose your vision you just sit home and I think that's because people think oh, well, they just lost their vision, their mind still works and arms and legs still work and they can still hear, that's just a minor infraction. A lot of people are devastated when they lose their vision.

They don't know how to go on not being able to see things. We need to make sure that the community at large understands.

We need to bridge those gaps so that everyone can get the training they need.

Dawn Lyons: An arising theme coming out of this conversation, and although there's not necessarily the hard data or numbers to back it up, it's coming across loud and clear and that is, the first step of rehabilitation from becoming blind is being completely overlooked.

And this is causing a domino effect of serious crises in people's lives.

The SILC can get more data on that and help the state come up with data to back that up if they create an outreach program they can work with. She wanted to brag about the Blind Center because Havander has been bragging about how the Blind Center is building an apartment complex for their employees and the people that they serve who are blind.

That's fantastic, and she wishes more organizations could do something like that for their consumers and employees.

The SILC could help if John wants to create a brief questionnaire. They could take a trip over to the Blind Center, Blind Connect, and to different places where they know that they can reach consumers that are blind or visually impaired and get their feedback specifically about those things and then take further steps after that that might be beneficial. “Nothing about us, without us” is important and she reminds people of that, and even within the SILC’s own council, sometimes people lose sight of that.

It's so important not to assume that people need something, that information is from the people who need it.

She invited John to reach out to her regarding the SILC assisting with this work.

John Rosenlund: Since December, there's been a whirlwind, the legislature is in effect. He thinks a survey is a good idea.

 He thinks taking an hour to engage with an individual and really finding out what the difference has happened in their life and what's important and what's not is where the little offshoots of what barriers really exist in a person's life are found.

Early on in talking with Mark Tadder trying to get input from him back in December, just like he just brought up the whole transportation issue, which John can completely relate to on a physical disability level because there's no one thing.

A person’s economic situation, the severity of their disability, where they live, the sidewalk out in front of their driveway, all these things are factors to affect their transportation.

Transportation made the number one on the list.

The question is how to remove the barriers from the 30 people that all have the same need but they're all different barriers? That's an important thing.

There are 30 different barriers there that people have, and you don't fix it by saying well, we're going to create another transportation program or discount tickets or so on and so forth.

You must really engage with an individual and then take a step back and go, well, what number one is there a way to address it and then what's your step going forward.

Orientation mobility training is one that has been known to be missing for a long period of time but if you take a step back further 20 years from today, the reason there is not a lot of orientation mobility in Nevada is because the only place that could be provided was through the Blind Center and Rehabilitation site.

So now you look forward and you're like how can we not have anybody?

There's not a lot of job opportunities out there most likely. If that was only done through that vocational and DETR. There's a lot there to digest.

He wants to reach out to SILC and knows they are moving forward with building a state plan.

This is certainly one of those gaps in service that exist that needs more exploration and needs to deal with those individuals.

He is over the Assistive Technology for Independent Living program.

He gave a brief description of the program.

The Assistive Technology for Independent Living program has been around in Nevada for 25 plus years. It was created through the Nevada SILC to address those potential daily living barriers that people have and still have in living of in the community versus an institutional setting.

How to get in and out of a person’s home, throughout their home and address their self-care which is a wide range of things including personal mobility, transportation needs, communication is one of those. It's a wide range of things.

But kind of a narrow focus on essential daily living that doesn't take into expanding and systems change that you would usually find in a Center for Independent Living.

The program is a blend.

It's a unique program, one of the only ones in the United States that addresses people's barriers in this way and that's starting with the independent living goal, fleshing out what that goal is and what they are trying to accomplish and what their desired outcome is.

Trying to access the home, access the community, and so on.

The next step is exploratory.

Looking at what Assistive Technology is going to remove that barrier.

Assistive Technology is basically any solution that removes that barrier for an individual with a disability. It could be a wheelchair ramp, wheelchair, a walker, a door opener, an environmental control unit that allows somebody to adjust the temperature and lighting in their home or open a door from their bed.

Assistive technology is just solutions.

The second phase is exploring what options there are.

What could remove that barrier and what's going to be most appropriate for the individual.

The third and final step is where our state money state resources come in.

And that's if no other options to purchase it can be found we can utilize those funds.

I'll move from that point on into the funding.

Program has three funding sources.

It's $140,000 a year through the Nevada SILC.

Anywhere from 70 to $100,000 from the assistive technology collaborative.

There is about $14,000 that we got from some aging title funds and then the remainder of that is state general fund.

Which comes to about $1.3 million.

Percentage wise, that usually comes to about 25% of that is an operational cost, that's the staff that are engaging with consumer helping them develop the independent living goals and other steps he mentioned, assistive technology and then finally helping to engage with vendors, get quotes, the work completed, and then pay the vendor.

The important part is the satisfaction and life impact survey data that they have.

After a consumer receives services they're two surveys that can go out.

One if a consumer was to withdraw or didn't have any goals completed, we survey them and ask some questions which I'll go over at the end.

If the person had at least one goal accomplished, we survey them as well.

And ask them different questions.

And those questions revolve around their satisfaction with the staff, overall satisfaction were the program, the amount of choice and control they had, the percentage that think that it made a positive impact on their life.

We have them rate their vendors.

We have them tell us what quality of life after those goals were met.

Ask them what their independence was related to those goals they established and accomplished.

Ask them how often is that assistive technology used.

We ask them what the chances of staying out of a nursing home are after those services.

And then we ask them if they think it should still be funded.

So I'll go through some of those outcomes with you all and the first is the rating of the staff.

So the rating of the individuals they worked with directly when they developed those goals and plans.

Currently we're reporting from October on your federal year, which would be October until through March, six-month period.

We have 96% is excellent, and 4% as good.

There's no negative, no negative responses to the staff.

Choice and control.

How much choice and control do they feel they have.

That's rated as they had a lot of choice and control, they had quite a bit of choice and control, or they had a little choice and control or not enough choice and control.

As reported, 73 percent said they had a lot of choice and control and 27 percent quite a bit choice and control and there were no negatives that fall into that.

Overall satisfaction of the program was easy.

A hundred percent of the respondents said they were very satisfied.

Again, a hundred percent of the respondents said the services made a positive impact on their life.

When asked about overall quality of life following services, this is after the accomplishing goals and those being addressed, 71 percent improved a lot, 23% improved quite a bit.

We use those top two measures to look at that as a whole and that's 94% positive feedback.

Overall independence related to the goals established, 96% positive feedback.

That's 81% that improved a lot and 15% that improved quite a bit.

I know you all must do some public comment.

One important piece of this is how often that assistive technology is used.

96% of those individuals use that daily, daily necessity to have those solutions in place.

Only 4.2 percent use it weekly and none as monthly or every three months or as an extended period.

So that gives you some insight as to respondents, to this program, of how important those solutions are.

Jumping to the goal section, you've heard my report before, I'll report the high three goal areas and they remain the same.

That is self-care, so being able to care for oneself. Bathing, toileting, preparing a meal or feeding oneself, those are all essential daily living goals.

Those are all things we must do every day to live.

That's the highest percentage of goals we always have.

 That's looking back through history that's always the number one goal area an individual engages this program about.

349 goals set, 122 of those goals met and 201 in progress.

The rest are closed for other reasons, withdrawn or unable to contact the consumer.

Second and third, these are usually neck and neck.

That's lumped together mobility and transportation.

Personal mobility and personal transportation are most goals set.

And then the third one is community-based living and that usually in our world means accessing the home.

Being able to get in and through the home.

Being able to get in through doorways, in and out of the house, ramps, and so on.

Communication goals are third.

That would be speaking and hearing, 51 goals set, 12 met, 32 in progress.

I'm going to jump to the call records, and this is we record how much, how many people are engaging with the program, and we have some indicators in there.

Where somebody wants to move forward with developing goals must be the first step.

If somebody's like I don't want to develop an independent living goal, obviously we can't engage with that person.

Which typically isn't the problem when you talk to them about the benefits of engaging in that independent living goal.

So we call them a program information packet, somebody that wants to move forward.

We have them do a self-evaluation, basically going through a series of things to consider from think in terms of when you wake up until you go to bed what are some barriers you would run into.

Getting in and out of bed is usually a first one.

On through to self-care.

That program information packet is really an instrument to have that person engage and think about areas they want to improve.

And then that's used to help guide them back when you're developing those independent living goals, to flesh out some of those things that they may have a triage issue they are trying to address right now, this is the big thing today, I can't get in and out of my home but there are other barriers there.

Helps to bring all those things into light so the individual can make some choices.

If you come back and face them with getting and out of the home is a priority and then where does the bathing goal fit allow them to kind of prioritize where those things should go.

In that calls record, 96 people so far have engaged in that program information packet.

So those we would expect 96 people to become consumers during the year.

We had 28 people that received verbal information and chose not to move forward with an independent living goal.

So they didn't engage with the program.

And eight general just general information people called and said please send us something but we're not ready to move forward.

Total referrals we've made for the year, about 399.

That's give or take a few.

And 31 technical assistants, those would have been during the call they had some type of technical assistance that was needed and the staff provided that to them.

The only other thing that I may have glazed over was prioritized services, and that's always an important aspect of what we look at or that I look at.

We had goals that have been set and met, and that includes any of the cases carried over from the previous year, so in a Center for Independent Living world or in this program's world, there's not just a timeframe that the case ends.

It's based on independent living goals.

There could be an individual's case that carries over for two years because those certain goals haven't been met.

So when I'm speaking about these numbers, those goals could have been carried over and we're reporting them as met now but it's because it relates to that person's entire independent living plan.

Of those goals, 109 goals related to prevention, that's preventing somebody going into a care facility, and what those 109 goals relates to is 67 consumers, 67 of the consumers we have served in the last six months had a goal, had one of those 109 goals related to trying to prevent them from going in a care facility.

Pretty interesting information when we can break it down and look at it that way to he sees how much of an impact the program can have.

Dawn Lyons: Do you see any differences in trends with the IL program since COVID that you have identified or has anything stuck out to you that's different?

John Rosenlund: When we had COVID, because we do have the necessity of vendors going into the consumer's home especially with home modification, during COVID there was, we purchased it from a, did the person want to move forward with the service or put it on hold.

So there wasn't there wasn't anything that highlighted.

It wasn't like we saw an explosion of withdrawals or people we couldn't contact.

That's kind of a natural part of this program and always has been of we try to maintain at least monthly contact with the consumer, and it's their independent living plan so there's a lot of emphasis put on these are your goals so please follow up.

But there's a mandatory in our goals and objectives, in our policies, that says we're going to follow up every 30 days.

There's nothing that's says COVID showed us something different.

It just changed the way we could engage.

If somebody didn't want somebody in their home of course we had to make a change and that person's services may have extended longer and lasted another year.

They may have come over into another year before we could serve them.

But that's about it.

The main thing we're going to see is that we still see, I mean, these are still the essential things, right, there's no change in that.

I can't go through Medicare or Medicaid and I'm not talking about the physical disability waiver there are no resources to modify your home as your disability gets worse or you acquire a disability, or you move to another location.

Homes aren't built universally designed.

And they don't usually come equipped with certain things.

These types of barriers exist if you have those types of barriers in your life.

Mary Evilsizer: SNCIL has seen a trend with individuals that are interested in transitioning from a care facility to the community. The trend was there before, but it increased during COVID.

It appears that the residents have one phone that they share, almost like they must go to the office to get the phone to make a phone call.

In the past, the IL program was able to prioritize individuals interested in transitioning from an institutional living to the community.

Would it be possible in cases like this that SNCIL could partner with the IL program to provide the individual with better access to communication?

John Rosenlund: Well, depending on what the communication is. Markers are that you can't establish an independent living goal for an individual and that's the pathway into the program as it was created. Could you access some funding and purchase a phone for somebody and then not have to engage with the program?

Mary Evilsizer: Can SNCIL help coordinate getting services for someone who does not have a phone?

John Rosenlund: Absolutely. So if an assistive technologist or independent living specialist is working with a consumer, there should be a team approach.

Anybody that's involved in that would want to engage with that person to do that. They have done this before with the CILs to transition somebody out.

We would hope that they would start those independent living goals with this project so that if any bumps along the way if there is any assistive technology needed along in that transition that they would be able to access that.

The thing with Money Follows the Person side of things, that's the way they have tried to always operate.

If they are getting ready to work with somebody to transition, the person most likely is going to have some type of barrier to assistive technology.

Whether it's modification or piece of equipment. And that's the role this program has played.

So certainly, just like being a representative with the consumers, helping them make that phone call and connect and get that independent living goal put together, is possible.

Mary Evilsizer: It's just becoming more and more of a barrier. Thank you and I know we worked great as a team before, just another new barrier in the glitch, but now we know nursing home transitions are still prioritized. And we can serve as a third party.

This conversation continued the next day.

Peter Whittingham: The members that he represents in the Southern Nevada Down's Syndrome and other intellectual developmental disability agencies and representatives are 96% excellent. Lance and his team do a fantastic job in terms of servicing the needs of our members in assistive technology. Megan from the home community-based services, made a presentation and she indicated that one of her new ventures will be to provide assistive technology or to help in some way.

Is there anything you can do to extend the loan of the devices to our members beyond 30 days? I'm hoping that maybe Megan might be able to help you with some funding to do that as well.

John Rosenlund: There are two different programs.

The program that I was reporting on, the Assistive Technology for Independent Living is a different program than the AT Resource Center where device demonstrations and loans take place.

The AT for Independent Living is that program that focuses on essential daily living areas that an individual may have. Accessing the home and so on and so forth.

And has some state funding tied to it when no resources obtainable to institute that modification or provide that assistive technology.

If it fits within the criteria that that program is established with.

I must be able to bathe, right, to live in the community and so on and so forth.

And if there's an assistive technology solution.

When you talk to the AT Resource Center, to support an informed decision by the consumer, demonstrating the device and loaning the device so they can further that exploration and confirm it's going to work for them.

There is an option in there we do have the ability to have short-term accommodation.

However it leaves that up to us to make some decision on how long that accommodation can have.

If we're not addressing the barrier for the person to obtain their own then something's missing there.

Providing that accommodation to somebody for a year's worth of time isn't addressing that person's barrier and that's not our intent for the device loan.

If we loan out all the equipment and leave it for an extended period, we can no longer support the demonstration and decision-making loan. So that's the barrier that we would have.

Do we have the ability if we have equipment that's not being readily used or necessary to be loaned out for more extended periods of time? Certainly. On a case-by-case basis.

But if we lose those assets and those things then we no longer can do what our focus is on that resource center, which is to support that person in making that informed decision.

Peter Whittingham: For anyone who provides services to our members, to see to what extent funds can be allocated where the need to prove to be so, that members who cannot afford the purchase of the equipment is provided in some way that supplemental funds to purchase the equipment.

I understand the limitation of equipment and the need to make sure that you have for demonstration, but in some cases, it's cost prohibitive for some of us members who need the equipment and so my question would be for whoever can answer to help, is where funds can be secured to the extent that they don't have ability to purchase that assistive technology equipment.

John Rosenlund: What is that barrier to that equipment for that individual?

And it's a large subject.

If that barrier is to a piece of durable medical equipment, I'm just using that as an example, what's the barrier to obtaining that?

And finding that and then finding out what that barrier is.

I just got off the Assistive Technology Council and that's what they hope to be able to accomplish is find out what that barrier is and then address it on one of these forums with a council and say here's a larger issue of barriers that exist.

As a program we may not be able to facilitate and meet that need. But the question would be then how do we? We must identify that barrier so that we can say what that is.

If you're talking really depends on the one-on-one basis.

The process of going through and identifying is that the appropriate technology is the role of the AT resource center.

Make sure that the person has what they need and makes an informed decision.

The next step is addressing where that barrier is.

For them to obtain it.

If they can't afford it, what are the options? There is often where we hit that wall.

If the program presented before I missed that, but I think I've been in conversation with somebody with that about them expanding assistive technology. Perhaps that's where the person may be able to obtain it.

What I would hope is that we're able to support that individual to make an informed decision and somebody else isn't making the decision on what they obtain.

In other words, if somebody else is making the decision on you get an iPad and that's all that you have available to you, you no longer have that informed decision to find out what best supports you as a piece of assistive technology.

And so glad to find out what types of assistive technology that you're running into barriers with and see what we can do through that or if it does apply to the AT for independent living if that's something that a person would be appropriate in accessing that program.

Peter Whittingham: I don't want conversation to be limited to my own personal experience less there be some other families and those that are known to me who have the need but really cannot afford to.

And so you touch on a point that I think perhaps we should maybe explore and with your permission maybe a good point person to do that.

When we exhaust all the issues and found there's a need, there's a support from your team to verify that there's a need, but the duration of the loan that you can afford does not address in any sustain meaningful way the concerns that the member may have, how do we then go to that next level where we can justify the need for funding source to purchase the equipment?

I think that's where we are.

And maybe continue this conversation.

But you're right, that's where we need to perhaps do some research and see where we can allocate funds or to what agency, through yours or through Megan's agency or through any other agency where the member, consumer, could apply for funds to purchase the assistive technology equipment that's needed.

John Rosenlund: What you just said is in line with what I would think, identifying that barrier at the end and addressing it through the Independent Living Council or the Advisory Council for Assistive Technology, that's where we intend to look at those barriers and say what can we do about it.

From the programmatic standpoint, me calling somebody within the agency saying we really have a barrier here goes nowhere but the voices of this council and identifying larger barriers and having a united voice to address those limitations are the ways of accomplishing to create and push organizations, agencies to obtain more budget or whatever is needed.

If we had a funding source to purchase AT through the AT resource centers and get it to people, we would certainly be able to do that.

We don't, we cannot with the limitations on that funding, but it doesn't limit us to supporting that if we have resources to obtain it.

Dawn Lyons: Sounds like there may be a disconnect with people being referred correctly to the IL, AT for IL program if they qualify if that's a barrier in their plan, right?

If they are going to NATRC or the AT program where they can sample the AT equipment for 30 days, and they find that that is a need, and that it does eliminate a barrier, is that something that that program is doing is taking those person's goals and creating an independent living plan with them?

Or is that something that only happens in the IL program?

John Rosenlund: A person will have a goal in the AT Resource Center, but there's no resource in the end to obtain it. There are not the resources it's not all encompassing.

If that was all one big program and had all those resources, certainly that's where that would live. That's where somebody would develop that independent living goal but even the AT IL program has its limitations.

It focuses on that essential daily living barrier, those things that individuals have being able to get in their home, access their shower, those types of things.

It hasn't expanded beyond that to say, recreational for instance. I want to be able to participate in online gaming or something. It doesn't address those things.

So there is a barrier when you have an individual that's trying to access those things.

The AT Resource Center can show them how to access that assistive technology to access the gaming but in the end doesn't have the ability to purchase it for them.

It would be able to help them explore what their options are to obtain that.

But as Peter said, if the person can't afford it, there's a barrier there, and I'm where do we take that barrier to have it addressed?

1. Updates Regarding the Youth Action Council.

Cody Butler, Youth Leader

Cody Butler: Gave a physical description of himself. The Youth Action Council continues to release monthly newsletters on topics of interest to the disability community.

This month will be a little delayed because things have been busy, but that's happening.

We've got in the works some anti bullying videos to put on social media because anti bullying is a big concern for people under 18.

Thanks to Sabra for her help setting these up. Really appreciate it. Recruitment is an ongoing process.

Thanks to everyone at RCIL for including me on their recreation club events, they're a ton of fun and a great opportunity to meet young people with disabilities.

In the process of reaching out to the various disability resource centers in the state.

Thanks to Jennifer Kane for helping with those contacts. Some of them have been hard to reach out to, but I think there's progress.

Attending disability related events is a big priority, I'll be personally traveling to Minden for the Autism Resource Fair, middle of the month, the 15th I believe. And then out to Vegas for Star Fair on the 29th.

An update on the Youth Action Council Instagram. We have 56 followers as of yesterday morning. It's been growing.

What's taking a bit of time each week is to engage with other accounts in the disability community, other states, and other people in the independent living world. That seems to help grow it more than the posts on our page.

A big takeaway is later this year around the middle of August, I will be moving out of state, you also see me around, I'll be involved with Independent Living.

But I will be stepping down as youth leader. This means we're looking for the next youth leader.

If you know any young people with disabilities that are interested in advocacy and would like to get paid to do it, send them our way and I'm happy to meet them.

I'd like to thank Ace, Julie, Dawn and Wendy for their mentorship and support.

You've all been helpful.

Julie Weissman Steinbaugh: Cody, we're going to be so sad to see you go.

You've been incredible.

Ace Patrick: Cody, I'm sorry to hear this. Been doing such an awesome job, and I just echo what Julie said. I also want to say that I read your newsletters monthly, and they have been wonderful and right on point, and you have just been doing such a wonderful job, but I wish you well in whatever you will be doing in the future because I know you're going to go far.

I really encourage the members of the council and the members of everybody else who's here that aren't members of the council to read a lot or go back and read the newsletters.

So I'm so grateful for you, Cody, and everything that you have done thus far, and I wish you the best.

Dawn Lyons: Cody, I ditto what everybody said and echo those sentiments and feel very strongly about how important of an influence you have been on the SILC and on the disability community.

I'm not going to say goodbye yet because we still have a few months, I'm going to cherish every moment until you do leave because I do appreciate you that much. So thank you.

Linda Vejvoda: I'm going to miss my travelling buddy.

I want to welcome you to your new journey that you have going on, but also I'm going to sorely miss you, too.

And I know that Dee Dee will miss you from the rec clubs she's putting on because I know that recruitment is just now starting to get going, and I know it's going to get better because you and Marina were the ones that got it started.

So best of luck in your endeavors, and I hope to see you soon so I can say goodbye physically.

Sabra McWhirter: You are a treasured colleague, well done and let's continue the conversations.

Jennifer Kane: Please keep in touch, Cody, we know you will do great things.

Dawn Lyons: We're sad to see you go but we know you're going to go on to bigger and better things and we really appreciate you while you've been here and while you're still here.

Dee Dee Foremaster: Just want you to know that we have rec club activities happening soon.

I know you have that scheduled. So hopefully I will see you there. So be able to properly congratulate you and say goodbye. But really, it's so long because we'll be seeing each other.

Cody Butler: I plan on being at the next couple of rec club events later this month.

1. Update on the Nevada State Rehabilitation Council (NSRC) Plans and Activities.

Raquel O’Neil, NSRC Chair

Raquel O’Neil: The Rehabilitation Council has heard from Vocational Rehabilitation about various items throughout the year. She is the current chair of the Nevada State Rehabilitation Council. She has been asked to share their activities and give an update for the Independent Living Council on what they are doing with the Rehabilitation Council.

They have been hearing from Vocational Rehabilitation about various items throughout the year, she has been encouraging them to bring forward certain topics for the Council and for the public to learn about regarding Vocational Rehabilitation and their regulations and what is required by federal law and navigate state statutes.

Recently they heard from Vocational Rehabilitation, that they are filling more vacancies, which is important as the Chair and Council recommended we're encouraging them to serve more Nevadans experiencing disabilities who want to go back to work and the only way they can do that is by having qualified counselors at the home to provide those services.

They are working hard at filling their counselor and other support staff positions.

They went from about 27 vacancies to about 15 vacancies and hopefully that will become less in the coming months as well.

The other notice that was received was about the state draft budget, talking about how those funds would be sufficient to serve the amount of people that they currently have enrolled in services, and we're reassured that that is the case.

They are also continuing to seek ways of drawing down additional federal funding.

As far as funding goes, they seem to be reassuring the community that all is well in that area, and so she is hopeful of that and continues to monitor that as things get confirmed by our new governor as far as budget and funding goes.

I continue to encourage the council to be active and participate with providing recommendations and that's kind of where I'm at now is we're there to support the efforts of Vocational Rehabilitation especially with the new piece of legislation that has just been heard on Tuesday, as far as letting Nevada be the employment model for being an employer of individuals with disabilities.

She encouraged them to pass that piece of legislation, because it would speak to and help not just in seeing a model employer but setting up some kind of specific infrastructure and way that other people can follow to be a model employer in the state would really be beneficial.

Not just in words but in actions and coming up with policies and procedures to make that happen. She has been monitoring the various pieces of legislation and trying to encourage the Council to take part in being active in supporting efforts not just Vocational Rehab but all individuals with disabilities being able to be employment seekers on an equal opportunity basis.

Dawn Lyons: Thanked Raquel for informing everyone of the legislation that has just happened, and it's an important one.

It's important to have it in statute even if it doesn't have any teeth right now, so to speak.

For the state to be a model for employment is really one step towards our Employment First progress. She doesn’t have anything specific for Raquel to take to the Rehab Council other than Dawn appreciates working together with the SILC on important initiatives and Vocational Rehab's efforts lately to try and collaborate with the SILC as well.

Raquel O’Neil: Absolutely. We're all stronger together, and it's time for you all to start working together and being part of the same outcome.

I'm happy that we can model that as well as council and I think that it starts here with us as councils, too, to show them how important it is for us to work together.

1. Update, Discussion and Make Possible Recommendations Regarding Executive Order 2023-003 **(for Possible Action).**

Julie Weissman-Steinbaugh, Chair

Dawn Lyons: Governor Lombardo's directive to state agencies and councils and commissions to submit a report that suggests at least ten suggestions for removals of Nevada Administrative Code. They were instructed by the governor's office at the last minute to go ahead and submit what their intention is by April 1st, so it couldn't wait until this meeting.

They did a public workshop on the 31st to garner public input on this, and it was clear that the SILC should request an exemption since they are federally regulated, and they do not create state regulations and/or are not regulated in any way by state regulations even though the SILC would follow them.

She is looking for a motion from the SILC to go ahead. She has already submitted their intention to request an exemption from this.

 Ace Patrick motioned that the SILC submit the request for the SILC to request the exemption.

 Raquel O’Neil seconded the motion. Members voted and the motion was carried.

1. Discussion and Make Possible Recommendations Regarding Employment First in Nevada **(for Possible Action)**

Dawn Lyons, Executive Director

Dawn Lyons: There is not anything new to report until after appointments are made regarding the new Office of Workforce.

The SILC has some actions that they are planning to take, and some of the materials that are action plans that they had planned from the beginning, are attached to the meeting materials for this meeting so people can read over that and reach out to her with any questions.

1. Review and Approval of Revisions to the Council’s Policy and Procedure Manual **(for Possible Action)**

Dawn Lyons, Executive Director

Dawn Lyons: She crossed off the sections she had changed or included that weren't there before. I guess I'm looking for a motion to approve the new policy and procedure manual 11th edition.

Havander Davis motioned to approve the new policy and procedure manual 11th edition.

Linda Vejvoda seconded. The members voted and the motion was carried.

1. Update, Discussion and Make Recommendations Regarding the Organization of NV SILC Mentoring and Training Initiatives **(for Possible Action).**

Wendy Thornley, NV SILC Staff

Wendy Thornley: She put in the meeting materials and posted on the website two documents that pertain to the training for SILC memberships.

One is called the SILC Membership Training materials and the second one is called the Individual Training Plan (ITP). The first document that was included in the materials is information about the training. Some of the trainings are required, some are optional.

They are for new and interested members, however, they would like anyone who has not read them in the last year or so to please review them.

The SILC does have a mentorship program going on where new members will be mentored by members who are already in place. We are working on that to get the details completed.

In the materials for the trainings, there will be the Nevada SILC training guide, a SILC guidebook, a SILC presentation about who the Nevada SILC is and what they do, a fact sheet about the SILC, the IL versus Medical Model, the Individual Training Plan, the Rehab Act as amended in 2015, and currently, the SILC policies 10th edition. This will be replaced after the meeting with the freshly approved 11th edition after this meeting.

The Independent Living Principles, the SILC Indicators, DSE and SILC role part 2 presentation, MSG Roberts rules cheat sheet, the full Roberts Rules, Open Meeting Law manual, and then there are independent living research and utilization, which is also known as ILRU.

They have some wonderful on demand trainings as well.

These are all contained on the SILC website.

The members will be tracking their own progress with a mentor. If it has been over a year, the SILC would request that the members read them again because Dawn has been diligently updating and renewing different documents so what was read about a year ago might have changed since then.

The second document that was sent out is called the Individual Training Plan, this is something for all members to look at, there are many training topics and events.

Please mark three training goals for the fiscal year. Some of these are trainings, some of these are events, such as conferences.

The member will keep track of what it is they chose, and they will Wendy Thornley with the progress and when they have completed their three goals.

This document is one that the member would sign, Wendy would sign and then after that, the Chairperson or Executive Director would sign.

Wendy is working on a frequently asked questions document for trainings, that's not ready yet.

Julie Weissman Steinbaugh: Thanked Wendy for the work on the materials.

Wendy Thornley: She leaned heavily on the work that Dawn had already done, and she appreciated what Dawn put forward and what she put together ahead of this because she began this training program.

Dawn Lyons: Appreciated the effort that Wendy put into this. Wendy is taking on more responsibilities for the SILC as far as training and community outreach goes.

It's much needed to have all the SILC’s training plans and mentorship a more organized, so it does help quite a bit because there were some issues with the mentorship program since it's more individualized.

Certain people were mentoring more than others and t's going to be helpful for everyone to have the opportunity to become a mentor. Everyone here is capable.

Linda Vejvoda: Asked if the new members could choose their mentors.

Dawn Lyons: Wendy is going to button that up a little bit and get back to the group because it's just the beginning of the processes that she's started here.

But those kinds of questions are good to ask right now because that will help her when she's finalizing this design and this organization. People will get paired up with people that are appropriate.

1. NV SILC Budget and Current and Future SPIL Planning and Progress Review and Make Possible Recommendations **(for Possible Action)**

Dawn Lyons, Executive Director

Dawn Lyons: The SILC is on budget. Regarding the State Plan for Independent Living, she didn't submit anything because the SILC is so on track they don't even have to worry about it because they are still spending down their fiscal year 2021 no cost extension additional funding that they didn't expect to have that they will have through the end of December this year.

They are utilizing that as much as possible with travel to conferences or events, and that's going to allow Cody to come to the Star Fair in Las Vegas and many other things that will be helpful.

She will give the budget for this fiscal year at the next meeting at the SILC’s annual meeting..

The Administration for Community Living or ACL, has required the SILC to extend their current SPIL for another year.

Dawn has submitted that documentation into their materials with their changes. The SILC wants to do a technical amendment, so they don't have to go through the whole process of creating two SPILs two years in a row basically.

To do that, the advice they have been given by their program officer at ACL is that they can't deviate more than ten percent from each of their budget’s sections.

So that's what she did, she tried to stay within those parameters.

She was able to remove the state administrative fee of the 5% of their grant from their resource budget which helped a lot because with the governor's new increases to Dawn and Wendy’s salaries and bonuses and those kinds of things for state employees, it did have to change quite a bit in the salary portion.

She asked if anyone had any questions or comments.

She requested the Chair to open this up to the public as well if they have any questions or comments since it is their state plan.

Julie Weissman Steinbaugh: She had a question about fundraising, since the SILC is not a 501c3 yet, are funds that are raised, tax deductible?

Dawn Lyons: So since they are not a 501 c three or nonprofit right now, separate from the state, if they utilized the budget line item through the state that the state, the SILC used state vendors for and paid for state services through those vendors, they don't pay taxes, but if they go through their third-party fiscal agent, it would be a reimbursable item.

It's only allowable for the SILC to purchase things that are federally and stately allowable.

So they wouldn't be able to purchase food unless it was a conference type of thing.

But if for instance, they wanted to pay for a room that they could hold an event in, she could pay for it personally and then request reimbursement through their third-party payer

Julie : From the donation standpoint, if someone donated to the SILC, would they be able to deduct that from their taxes?

Dawn Lyons: So if you were to provide a donation to SILC, I believe that the state does have a revenue account that they could post donations into. And anything that goes through the state is nontaxable. She is not sure if the person donating would be sent tax deductible documents for tax purposes. She asked Cheyenne to give some information on this.

Cheyenne Pasquale: This question came up a while ago, she will need to check but thinks that due to the SILC not being a 501c3, a donation would not be tax deductible. In terms of donating directly to the SILC, they would have to work with their fiscal department to do what is called a work program to add the revenue, they call it a GL number, she does not know what GL stands for, but to add that to the SILC budget so that there would be a place for the donations to live. She will share what she finds out with Dawn.

Mary Evilsizer: The SILC discussed actively pursuing fundraising, And the SILC is getting partially Title VII Part B funding from the ACL.

As Centers for Independent Living in compliance, the Centers get Title VII Part C funding, and then with the Part C funding they are not allowed to fund raise.

They are allowed to allocate resources towards program development, and she doesn’t know if those accounting regulations have changed because she does know that for SPIL, they say resource development.

It would be best if SILC could check with their program manager just to determine how is the allocation of funds for fund raising managed with Title VII, Part B.

Is it allowable expense, on the one hand they are telling you to do it.

On the other hand, when you get to the general accounting standards that regulate the funding they say it's not an allowable cost.

She doesn't want the SILC to go through what the centers have gone; they must be very careful in noting that they are not fund raising but doing program expansion.

Dawn Lyons: The SILC can fund educational events and she will make sure that fundraising is not happening at the same time. They are allowable the SILC can use with their third-party payer as well. Members of the SILC can be reimbursed.

Havander Davis motioned to approve the changes for the SPIL extension.

Mary Evilsizer seconded. Members voted and the motion was carried.

1. Discussion and Make Recommendations Regarding the Next Article to be Requested from Public News Service **(for Possible Action).**

Julie Weissman-Steinbaugh, Chair

Julie Weissman Steinbaugh: She had two ideas, the prior day, she spoke about the fact that the planning committee showed there's a lack of understanding of what the Olmstead Act does and what it means, so she would like to suggest that as an article and another idea was something transitioning from school to adulthood or transitioning from care facility to independent living.

Dawn Lyons: Agreed about the Olmstead education idea of Julie’s.

As far as the transition idea goes, they could highlight the Youth Action Council in an article about transition to give them more attention and bring more focus on recruitment as well. She also took part in a robust discussion at the DD Council's executive committee meeting that morning about ableism.

She would like to do an article on how often ableism comes into the lives of people with disabilities and how little people recognize when they are exhibiting ableist behaviors. And what that means to the people in the disability community. That’s not talked about often enough and it happens so often.

Dee Dee Foremaster: She reached out to people in Pioche, she was surprised that they did not know what Olmstead was about.

She needed something simple and quick to educate people.

Sandy found this thing on the internet that's really cool like a car cartoon that simply explains Olmstead and it went over well and people had a better understanding when Dee Dee sent that along with the request to attend the meetings. Dee Dee will send it along to Dawn and Julie.

Dawn Lyons: She could post it on the SILC’s YouTube channel and other SILC platforms..

The SILC could have Public News Service use that as a supplemental portion of their story that they do on it potentially.

Mary Evilsizer: Thinks it would be helpful to post the information about the Olmstead, that it would help the community.

SNCIL has noticed that when they were encouraging consumers to attend the focus meetings they had to go back and remind them what the law was, what it was there for, and how important their voice is.

She likes Julie’s idea about taking a story about the challenges that individuals face from transitioning either from high school or from an institution back into the community.

She thinks for timeliness, the Olmstead might work out best now, but they need to keep the transition idea in their back pocket because it's going to take time to reach out to an individual who's been transitioned to a nursing home. Maybe get a group of them, five or six, and have a peer group and have them talk about and then maybe focus on some of the barriers they've faced. And the same with the youth.

Timeliness, Olmstead, but the other two ideas of transition are excellent for whenever they can get the opportunity.

Dawn Lyons: Would like to gain some kind of idea if there's a consensus as to which stories should go first. She thinks that's Olmstead but would like to hear if anyone else has any other ideas for a Public News Service as far as stories go.

And if they think that we should do Olmstead first.

Ace Patrick: Feels that Olmstead would be a good first choice.

Havander Davis: Agreed that the Olmstead story should be first then, transition and then maybe highlighting some articles for independent living, let's keep that on the table too.

Linda Vejvoda: Agreed with Havander.

Havander Davis: Feels that all the story ideas are great, that there is a lot to put out there.

Ace Patrick: Agreed and suggested ableism as a topic.

Dawn Lyons: Listed the story ideas in the following order: Olmstead, ableism, and either transition or Centers for Independent Living (CILs).

Dee Dee Foremaster: It's imperative to let people know that CILs are out there, because there is not enough information about Centers for Independent Living that is out there. Transitioning is interconnected with CILs who often advocate within the transitioning process.

Havander Davis: It depends on who gets their stories together first, regarding the CILs and transition.

Julie Weissman Steinbaugh: Can see a story about Olmstead and talk about CILs and transition because it's all tied together.

Mary Evilsizer: Maybe combine Olmstead and the quick elevator story about how Olmstead is living in the most integrated setting possible and transitioning from either a homeless setting or an institutionalized setting to the community, and then transitioning from high school into whether the individual chooses education, employment, and then there's another option. With some individuals, they're not able to work, but choosing to live the best quality of life possible out in the community, so that might be an article that encompasses homes and the CILs.

Dawn Lyons: At first, thought about asking the centers if there was a specific timeframe, like October is Disability Awareness Month for an article about them, but from conversations, started thinking about how these can all merge, Transition, the Centers for Independent Living, and the Youth Action Council can all be wrapped into a story.

That would be a telling story about what role the Centers have in transitioning people from institutions and what role the Youth Action Council might have in helping youth transition.

And what transition means for the disability community in general, and so if they could get something organized as far as that goes, then pose that idea to Public News Service.

Julie Weissman Steinbaugh: Its graduation season so maybe this is the time to do a transition story.

Dee Dee Foremaster: Housing needs to be included.

Dawn Lyons: Announced that the SILC just put out a story on housing that day with Public News Service.

Dee Dee Foremaster: RCIL has individual stories about housing on their Facebook page

It’s hard to transition without housing.

Peter Whittingham: There's so much that they can write about.

He agrees that Olmstead should be first and then transition because it is so relevant today.

It may be good to stick to Olmstead as one article and transition as a second, because there's so many areas of transition.

From his own experience, talking to individuals, with the school system, and congratulations are coming up and a lot of kids are leaving high school.

Some are being forced into some vocation when they can continue to pursue academic goals.

But because of the system now as it stands they will relegate vocational training and maybe service industry, which they may not want.

This area of transition is such an important piece that he thinks putting the information out there would bring some attention to bear on the concerns that so many parents have that because of their inability or disability, they are not given a chance to move into other areas which would maximize their potential.

That's such a critical area of focus that a well comprehensive article could do good for so many of their members.

Linda Vejvoda: Bullying was talked about on the previous day’s meeting, and she wonders if this is the type of meeting to bring up a bill for people to be accountable in the schooling system for bullying.

Mary Evilsizer: Bullying would be another great topic. Dawn added that to the list of possible articles. school to work transitions, just a point of interest.

At our center, we have many youths that come to us for housing, and they can connect with Voc Rehab and get employment but then they can't get housing.

So that's something else we could incorporate into the article to go in that direction.

Dee Dee Foremaster: Agreed with Mary Evilsizer. Nothing can be done in life without the stability of housing.

Lisa Bonie: Suggested looking into what it is like to be blind here in Nevada.

Dawn Lyons: With only 8 stories for the year, and they have just put out a housing article that day from Public News Service. The disability community does not feel like sb68 is going far enough, t's not enough for the disability community. They have been speaking about their needs and feel like no one listens. So that's what the article is about.

It covers all of that and she doesn’t know that it necessarily needs to be excluded from the other stories, but she doesn’t want it to be highlighted necessarily because they have done that.

They have Olmstead as a priority, then transition, because school is coming out, then they have ableism, they have the Centers for Independent Living to highlight, and then they have the topic of bullying, which she thinks would be great at the beginning of the school year to put something out about that.

John Rosenlund: Suggested writing about what life do you want to lead, what is your plan regarding Independent Living.

Lisa Bonie: Suggested writing about what it is like to be blind in Nevada.

Dawn Lyons: They only have eight articles for the year, so she thinks they are going to have to eliminate one.

It was agreed to combine some of the subjects to include everything that people suggested.

1. Discussion and Make Possible Recommendations Regarding Upcoming Conferences **(for Possible Action).**

Julie Weissman-Steinbaugh, Chair

Dawn Lyons: Wanted to let people know since the SILC has their no cost extension through December, any conferences, and events that any of the members would like to attend, please reach out because they have money to spend down and they would like to spend that on opportunities that they don't often get to use because of their budget restrictions.

The APRIL conference is coming up. The Autism fair is in Minden. If anyone needs to travel or anything like that or would like to attend these things, just let us know.

Anything we can register for, including the NCIL conference.

She knows this year is a little bit tough the Centers for Independent Living’s notices because they couldn’t include the additional coverage that we were able to last year.

If they want, they can request that SILC arrange at least one of their individuals to go to a conference so that they don't go over their budget. They just need to reach out to Dawn.

1. Discussion and Make Recommendations Regarding Collaborating with the Governor’s Council on Developmental Disabilities (NGCDD) and the Deputy Attorney General’s (DAG) Office for a Grant from the Office of Violence Against Women (OVW) **(for Possible Action)**

Julie Weissman-Steinbaugh, Chair

Dawn Lyons: This is for those who have been around long enough, a couple years ago, the SILC was going to collaborate with Aging and Disability Services for this same grant.

They were going to provide education to the public as far as the statistics and data behind women with disabilities and domestic violence.

This is the same grant, but it's for this year and the DAG or the Deputy Attorney General's office, is applying for this, and they asked the SILC if the SILC would partner with them.

She does not have the details yet, but if they are awarded this, she wanted to ensure that the SILC is aware that they have applied for this, that the SILC agrees to participate in any community education regarding this grant and surrounding it.

She was looking for a motion to approve that if the DAG is awarded this grant, that the SILC can partner with them.

Dee Dee Foremaster has curriculum that she has developed regarding this topic.

Dee Dee Foremaster motioned that if the DAG is awarded this grant, that the SILC will partner with them.

Ace Patrick seconded the motion. The members voted and the motion was carried.

1. Public Comment

Members of the public will be invited to speak; however, no action may be taken on a matter during public comment until the matter itself has been included on an agenda as an item for possible action. Please clearly state and spell your first and last name, if unique or otherwise unfamiliar to the Subcommittee. Public comment may be limited to 3 minutes per person, at the discretion of the chair. Agenda items may be taken out of order, combined, or considered by the public body, and/or pulled or removed from the agenda at any time. Pursuant to NRS 241.020, no action may be taken upon a matter during a period devoted to comments by the public until the matter itself has been specifically included on an agenda as an item upon which action may be taken.

Dawn Lyons: After discussions with Mechelle Merrill at Vocational Rehabilitation, she has agreed to provide training for SILC and any of the public who's interested. SILC is going to host that training as discussed in previous meetings and is set to for May 1st at 10:00am for an hour. This training will be recorded and posted on the SILC’s website.

Mechelle will train everybody on all the new features on their website because it's drastically different now than it used to be.

Julie Weissman Steinbaugh: “Lessons in belonging” is the title of her book of her own experiences, that she wrote and is being published online.

Dawn Lyons: Congratulated Dee Dee on winning a free registration to the APRIL Conference and the SILC Congress.

Ace Patrick: Thanked Cody Butler again for his time and efforts.

1. Adjournment

 Julie Weissman-Steinbaugh, Chair

4/5/23 Meeting adjourned at 4:00 pm

4/6/23 Meeting adjourned at 3:56 pm

**NOTE:** We are pleased to make reasonable accommodations for members of the public who have disabilities and wish to attend the meeting. If special arrangements for the meeting are necessary, please notify Wendy Thornley as soon as possible and at least five days in advance of the meeting. You may email her at wthornley@adsd.nv.gov According to NRS 241.020, supporting materials for this meeting is available at: 3416 Goni Road, #D-132, Carson City, NV 89706 or by contacting Wendy Thornley by email at wthornley@adsd.nv.gov.

***Agenda Posted at the Following Locations:***

Notice of this meeting was posted at:

Nevada Department of Health and Human Services

Aging and Disability Services Division

3208 Goni Road, Building I, Suite181, Carson City, NV 89706

and on the Internet: <https://www.nvsilc.com/meetings/> and <https://notice.nv.gov> and <https://www.nvsilc.com/>