

National Assistive Technology Act Data System

Annual Progress Report - Full Report

Nevada 2023

General Information

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

State AT Program Title: State AT Program Title: State AT Program URL Mailing Address: City: State: Zip Code: Program Email: Phone: TTY:

Lead Agency

Agency Name: Mailing Address: City: State: Zip Code: Program URL: https://adsd.nv.gov/Programs/Physical/Physical/ 9670 Gateway Drive, Suite 100 Reno Nevada 89521 jrosenlund@adsd.nv.gov 7756870835 7756882969

Nevada Assistive Technology Collaborative

Aging and Disability Services Division 9670 Gateway Drive, Suite 100 Reno Nevada 89521 https://adsd.nv.gov/Programs/Physical/Physical/

Implementing Entity

Does your Lead Agency contract with an Implementing Entity to carry out the Statewide AT Program on its behalf? (Check if Yes)

Name of Implementing Agency: Mailing Address: City State: Zip Code: Program URL:

Program Director and Other Contacts

| Program Director for State AT Program (last, first): | Rosenlund, John |
|--|-------------------------|
| Title: | NATC Director; SSPS III |
| Phone: | 7756870835 |
| E-mail: | jrosenlund@adsd.nv.gov |
| Program Director at Lead Agency (last, first): | John Rosenlund |
| Title: | NATC Director; SSPS III |
| Phone: | 7756870835 |
| E-mail: | jrosenlund@adsd.nv.gov |

Primary Contact at Implementing Agency (last, first) - If applicable: Title: Phone: E-mail:

Person Responsible for completing this form if other than Program Director

Name (last, first): Title: Phone: E-mail:

Certifying Representative

Name (last, first): Title: Phone: E-mail: jrosenlund@adsd.nv.gov John Rosenlund NATC Director; SSPS III 7756870835

State Financing

| Did your approved state plan for this reporting period include any State Financing? | Yes | ; |
|---|-----|---|
| Did your approved state plan for this reporting period include conducting a Financial Loan Program? | Yes | ; |

| Loan Applications | | | | |
|--------------------|-------------------|-----------------------|-------|--|
| | Area of R | Area of Residence | | |
| | Metro RUCC 1-3 | Non-Metro RUCC 4-9 | Total | |
| Approved Loan made | 08 | 04 | 12 | |
| Approved Not made | 00 | 00 | 00 | |
| Rejected | 01 | 01 | 02 | |
| Total | 09 | 05 | 14 | |

2. Income of Applicants to Whom Loans Were Made

| Lowest/Highest Incomes | | | |
|------------------------|----------|-----------------|-----------|
| Lowest Income: | \$14,000 | Highest Income: | \$144,000 |

| Average Income | | | | |
|----------------|---|--|--|--|
| Sum of Incomes | Sum of Incomes Loans Made Average Annual Income | | | |
| \$578,000 | 12 | | | |

| Numbe | r and Percentage of Loans Made to Applicants by Income Range | |
|-------|--|-------|
| | Income Ranges | Total |

| | \$15,000 or Less | \$15,001- \$30,000 | \$30,001- \$45,000 | \$45,001- \$60,000 | \$60,001- \$75,000 | \$75,001 or More | |
|---------------------|---------------------|-----------------------|-----------------------|-----------------------|-----------------------|---------------------|------|
| Number of Loans | 11 | 00 | 00 | 00 | 00 | 01 | 12 |
| Percentage of Loans | 91.67% | 0% | 0% | 0% | 0% | 8.33% | 100% |

3. Loan Type

| Loan Type | | | | |
|--|-----------------|---------------------|--|--|
| Type of Loan | Number of Loans | Percentage of loans | | |
| Revolving Loans | 12 | 100% | | |
| Partnership Loans | | | | |
| Without interest buy-down or loan guarantee | 00 | 0% | | |
| With interest buy-down only | 00 | 0% | | |
| With loan guarantee only | 00 | 0% | | |
| With both interest buy-down and loan guarantee | 00 | 0% | | |
| Total | 12 | 100% | | |

| Loan Type Summary | | | |
|-------------------|-----------------|-----------------------|--|
| Type of Loan | Number of Loans | Dollar Value of Loans | |
| Revolving Loans | 12 | \$141,870 | |
| Partnership Loans | 00 | \$0 | |
| Total | 12 | \$141,870 | |

4. Interest Rates

| Interest Rate | es |
|---------------|-------|
| Lowest | 1% |
| Highest | 8.35% |

| | | Interest Rate Summary | |
|-------------------|-------|-----------------------|-----------------------|
| Sum of Interest I | Rates | Number of Loans Made | Average Interest Rate |
| 18 | 12 | | 1.529166666666667% |

| Interest Rate | Number of loans |
|---------------|-----------------|
| 0.0% to 2.0% | 11 |
| 2.1% to 4.0% | 00 |
| 4.1% to 6.0% | 00 |
| 6.1% to 8.0% | 00 |
| 8.1% - 10.0% | 01 |
| 10.1%-12.0% | 00 |
| 12.1%-14.0% | 00 |
| 14.1% + | 00 |
| Total | 12 |

5. Types and Dollar Amounts of AT Financed

| Types and Dollar Amounts of AT Financed | | | | |
|---|----------------------------|-----------------------|--|--|
| Type of AT | Number of Devices Financed | Dollar Value of Loans | | |
| Vision | 00 | \$0 | | |
| Hearing | 00 | \$0 | | |
| Speech communication | 00 | \$0 | | |
| Learning, cognition, and developmental | 00 | \$0 | | |
| Mobility, seating and positioning | 05 | \$10,704 | | |
| Daily living | 00 | \$0 | | |
| Environmental adaptations | 02 | \$8,182 | | |
| Vehicle modification and transportation | 05 | \$122,984 | | |
| Computers and related | 00 | \$0 | | |
| Recreation, sports, and leisure | 00 | \$0 | | |
| Total | 12 | \$141,870 | | |

6. Defaults

B. State Financing Activities that provide consumers with resources and services that result in the acquisition of AT devices and services

1. Overview of Activities Performed

How many other state financing activities that provide consumers with access to funds for the purchase of AT devices and services were included in your approved state plan?

Activity 1

How would you describe this state financing activity? Last resort - Activity

2. Geographic Distribution, Number of Individuals Who Acquired AT Devices and Services and Number for whom Performance Measure Data are Collected

| County of Residence | Individuals Served |
|-------------------------|--------------------|
| A. Metro (RUCC 1-3) | 96 |
| B. Non-Metro (RUCC 4-9) | 14 |
| C. Total Served | 110 |
| | |

| Performance Measure | |
|---|-----|
| D. Excluded from Performance Measure | 0 |
| E. Number of Individuals Included in Performance Measures | 110 |

If a number is reported in D you must provide a description of the reason the individuals are excluded from the performance measure:

3. Types and Dollar Amounts of AT Funded

| Type of AT Device / Service | Number of Devices Funded | Value of AT Provided |
|---|-----------------------------|-------------------------|
| Vision | 17 | \$19,538 |
| Hearing | 7 | \$31,010 |
| Speech communication | 4 | \$12,169 |
| Learning, cognition, and developmental | 0 | \$0 |
| Mobility, seating and positioning | 13 | \$27,042 |
| Daily living | 86 | \$193,766 |
| Environmental adaptations | 221 | \$957,570 |
| Vehicle modification and transportation | 30 | \$177,351 |
| Computers and related | 0 | \$0 |
| Recreation, sports, and leisure | 0 | \$0 |
| Total | 378 | \$1,418,446 |

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C. State Financing Activities that Allow Consumers to Obtain AT at Reduced Cost

1. Overview of Activities Performed

How many state financing activities that allow consumers to obtain AT at a reduced cost were included in your approved state plan?

D. Anecdote

The need for accessible personal transportation is a necessity! BK is 10 years old and he and his family were in need of accessible transportation. BK currently enjoys attending elementary school, likes staying busy through the day, and being with his cousins and friends. He loves animals, especially his cat and tortoise. He has multiple significant disabilities and uses a wheelchair for all mobility, requiring full assistance for his mobility and daily living activities. Multiple goals were established for BK's essential and daily living needs, but the priority goal was first to address his transportation needs. He is in the 4th grade and being able to drive him to school is important, but more importantly the ability to travel anywhere as a family. Their goal was accomplished through purchasing a new modified vehicle. The consumer and family accessed both the CARE Loan and Assistive Technology for Independent Living and found options that were needed. The family was able to secure a low interest loan for \$15,000 towards the cost as well as \$12,000 of state funded resources towards the modifications. They were able to secure the balance of the funding privately. The consumer's mother commented "The car is amazing. I don't really realize how life changing it would be to have a wheelchair accessible vehicle. My back is so thankful!".

-Impact Area -

SY reached out to the Assistive Technology for Independent Living program seeking assistance with regaining independence and addressing barriers to her home access, transportation, and self-care. She established her Goals and the plan to accomplish them. SY's condo complex does not have accessible routes onto the sidewalk. She was able to obtain a ramp to provide access from her parking spot to her sidewalk. By obtaining a vehicle lift for her truck she can transport her scooter and independently access her community. By obtaining a lighted magnifier lamp can easily read her mail and helps with her ability to pay her bills. The Assistive Technology that she was able to obtain are items that are necessary for day-to-day living and are not available from any other resource in our state unless you have personal resources. With the cost of living at an all-time high many people do not have the financial means to obtain the essential things needed to address barriers presented by their disabilities.

Impact Area

Education O Employment O Community Living

E. Performance Measures

| Performance M | easures | | | |
|---|--|------------|---------------------|-------|
| | Primary Purpose for Which AT is Needed | | | |
| Response | Education | Employment | Community Living | Total |
| 1. Could only afford the AT through the AT program. | 00 | 00 | 49 | 49 |
| 2. AT was only available through the AT program. | 00 | 00 | 62 | 62 |

0

| | 1 | | | |
|---|------|----|------|-----|
| 3. AT was available through other programs, but the system was too complex or the wait time too long. | 00 | 00 | 10 | 10 |
| 4. Subtotal | 00 | 00 | 121 | 121 |
| 5. None of the above | 00 | 01 | 00 | 01 |
| 6. Subtotal | 00 | 01 | 121 | 122 |
| 7. Nonrespondent | 00 | 00 | 00 | 00 |
| 8. Total | 00 | 01 | 121 | 122 |
| 9. Performance on this measure | NaN% | 0% | 100% | |

F. Customer Satisfaction

| Satisfaction | | | |
|---|--------|--------|--|
| Customer Rating of Services Number of Customers | | | |
| Highly satisfied | 66 | 54.1% | |
| Satisfied | 03 | 2.46% | |
| Satisfied somewhat | 00 | 0% | |
| Not at all satisfied | 01 | 0.82% | |
| Nonrespondent | 52 | 42.62% | |
| Total Surveyed | 122 | | |
| Response rate % | 57.38% | | |

G. Notes:

NV has the CARE Loan Fund & Assistive Technology for Independent Living (AT/IL) as options to obtain AT. The AT/IL program assists consumers with IL goals, identifying barriers, potential AT solutions, and the options that the consumer has available. The program's focus is to keep individuals living in their community. Types of AT can include home access mods, vehicle mods, and AT that is necessary for daily living. The program prioritizes services related to a Transition from institutional living, as well as Preventative. The reported data is based on closed AT/IL consumer Plans in the reporting year. The AT data reported is only where state funding was used to purchase AT. However, the caseload consisted of 384 Independent Living Goals set and 274 met. 63 consumer Goals had Prevention implications, supporting living in the community and not in an institutional setting, 59 closed Goal Met. There were 51 AT solutions through other resources and not reported in the APR.

Reutilization

Did your approved State Plan for this reporting period included conducting any device reuse activities?

A. Number of Recipients of Reused Devices

| Activity | Number of Individuals Receiving a Device from Activity |
|--|--|
| A. Device Exchange | 00 |
| B. Device Refurbish/Repair - Reassign and/or Open Ended Loan | 1,971 |
| C. Total | 1,971 |

| Performance Measure | |
|--|-------|
| D. Excluded from Performance Measure because AT is provided to or on behalf of an entity that has an obligation to provide the AT such as schools under IDEA or VR agencies/clients. | 00 |
| E. Number of Individuals Included in Performance Measures | 1,971 |

If a number is reported in D you must provide a description of the reason the individuals are excluded from the performance

B. Device Exchange Activities

| Device Exchange | | | | | |
|--|--------------------------------|--|---|-------------------------|--|
| Type of AT Device | Number of Devices Exchanged | Total Estimated Current Purchase Price | Total Price for Which Device(s) Were Exchanged | Savings to Consumers | |
| Vision | 00 | \$0 | \$0 | \$(| |
| Hearing | 00 | \$0 | \$0 | \$ | |
| Speech Communication | 00 | \$0 | \$0 | \$ | |
| Learning, Cognition and Developmental | 00 | \$0 | \$0 | \$(| |
| Mobility, Seating and Positioning | 00 | \$0 | \$0 | \$(| |
| Daily Living | 00 | \$0 | \$0 | \$ | |
| Environmental Adaptations | 00 | \$0 | \$0 | \$ | |
| Vehicle Modification & Transportation | 00 | \$0 | \$0 | \$ | |
| Computers and Related | 00 | \$0 | \$0 | \$ | |
| Recreation, Sports and Leisure | 00 | \$0 | \$0 | \$ | |
| Total | 00 | \$0 | \$0 | \$(| |

C. Device Refurbish/Repair - Reassignment and/or Open Ended Loan Activities

| Type of AT Device | Number of Devices Reassigned/Refurbished and Repaired | Total Estimated Current Purchase Price | Total Price for Which Device(s) Were Sold | Savings to Consumers |
|--|---|--|---|-------------------------|
| Vision | 08 | \$512 | \$0 | \$512 |
| Hearing | 62 | \$7,480 | \$0 | \$7,48 |
| Speech Communication | 05 | \$2,079 | \$0 | \$2,07 |
| Learning, Cognition and Developmental | 02 | \$299 | \$0 | \$29 |
| Mobility, Seating and | 1,279 | \$192,878 | \$0 | \$192,87 |

| Positioning | | | | |
|---------------------------------------|-------|-----------|-----|-----------|
| Daily Living | 1,216 | \$89,477 | \$0 | \$89,477 |
| Environmental Adaptations | 27 | \$6,311 | \$0 | \$6,311 |
| Vehicle Modification & Transportation | 00 | \$0 | \$0 | \$0 |
| Computers and Related | 03 | \$798 | \$0 | \$798 |
| Recreation, Sports and Leisure | 00 | \$0 | \$0 | \$0 |
| Total | 2,602 | \$299,834 | \$0 | \$299,834 |

D. Anecdote

A consumer reached out to CARE Chest and was trying to find a rollator walker. The rollator that she had obtained through her insurance broke down and was not usable. Her insurance denied the request for a new one since it had not yet been 5 years since obtaining it. Without the rollator she was unable to leave her home to shop for her groceries or anything that required that she walk longer distances. She was able to get a rollator and regain her independence.

Impact Area –

 \bigcirc Education \bigcirc Employment O Community Living

E. Performance Measures

| Performance Measures | | | | | |
|---|-----------|--|---------------------|-------|--|
| | Primary P | Primary Purpose for Which AT is Needed | | | |
| Response | | Employment | Community Living | Total | |
| 1. Could only afford the AT through the AT program. | 00 | 00 | 1,874 | 1,874 | |
| 2. AT was only available through the AT program. | 00 | 02 | 85 | 87 | |
| 3. AT was available through other programs, but the system was too complex or the wait time too long. | 00 | 00 | 05 | 05 | |
| 4. Subtotal | 00 | 02 | 1,964 | 1,966 | |
| 5. None of the above | 00 | 00 | 01 | 01 | |
| 6. Subtotal | 00 | 02 | 1,965 | 1,967 | |
| 7. Nonrespondent | 00 | 00 | 04 | 04 | |
| 8. Total | 00 | 02 | 1,969 | 1,971 | |
| 9. Performance on this measure | NaN% | 100% | 99.75% | | |

F. Customer Satisfaction

| Satisfaction | | | | |
|-----------------------------|---------------------|---------|--|--|
| Customer Rating of Services | Number of Customers | Percent | | |
| Highly satisfied | 1,281 | 64.99% | | |
| Satisfied | 676 | 34.3% | | |
| Satisfied somewhat | 02 | 0.1% | | |
| Not at all satisfied | 00 | 0% | | |
| Nonrespondent | 12 | 0.61% | | |
| Total Surveyed | 1,971 | | | |
| Response rate % | 99.39% | | | |

G. Notes:

NATC community partner CARE Chest of Sierra Nevada has maintained this significant Reutilization of AT in Nevada for over 30 years. Collaborating with organizations providing food and resources to rural communities and have expanded to the Las Vegas area, the most populated area in the state. Adding more value, the program makes sanitized equipment available for demonstrations and short-term decision-making loans. Our AT Resource Centers incorporated the state's telecommunications equipment program into their services. Providing access to no-cost telecommunication devices statewide.

Device Loan

Did your approved State Plan for this reporting period included conducting Short-Term Device Loans?

A. Short-Term Device Loans by Type of Purpose

| Loans By Purpose | |
|---|--------|
| Primary Purpose of Short-Term Device Loan | Number |
| Assist in decision-making (device trial or evaluation) | 62 |
| Serve as loaner during service repair or while waiting for funding | 01 |
| Provide an accommodation on a short-term basis for a time-limited event/situation | 03 |
| Conduct training, self-education or other professional development activity | 03 |
| Total | 69 |

B. Short-Term Device Loan by Type of Borrower

| LOANS BY TYPE OF BORROWER | | | |
|-------------------------------|----------------------------|--------------------|-------|
| | Number of Device Borrowers | | |
| Type of Individual or Entity | Desicion-making | All other Purposes | Total |
| Individuals with Disabilities | 60 | 05 | 65 |

| Family Members, Guardians, and Authorized Representatives | 02 | 00 | 02 |
|--|----|----|----|
| Representative of Education | 00 | 00 | 00 |
| Representative of Employment | 00 | 00 | 00 |
| Representatives of Health, Allied Health, and Rehabilitation | 00 | 01 | 01 |
| Representatives of Community Living | 00 | 00 | 00 |
| Representatives of Technology | 00 | 01 | 01 |
| Total | 62 | 07 | 69 |
| | | | |

C. Length of Short-Term Device Loans

| Length of Short-Term Device Loan in Days 14 | |
|---|--|
|---|--|

D. Types of Devices Loaned

| Types of Devices Loaned | | | | |
|---|-------------------|--------------------|-------|--|
| Type of AT Device | Number of Devices | | | |
| Type of AT Device | Desicion-making | All other Purposes | Total | |
| Vision | 76 | 04 | 80 | |
| Hearing | 08 | 05 | 13 | |
| Speech Communication | 17 | 01 | 18 | |
| Learning, Cognition and Developmental | 09 | 03 | 12 | |
| Mobility, Seating and Positioning | 00 | 00 | 00 | |
| Daily Living | 00 | 00 | 00 | |
| Environmental Adaptations | 00 | 00 | 00 | |
| Vehicle Modification and Transportation | 00 | 00 | 00 | |
| Computers and Related | 03 | 00 | 03 | |
| Recreation, Sports and Leisure | 00 | 00 | 00 | |
| Total | 113 | 13 | 126 | |

E. Anecdote

DO came to the AT Resource Center with a complex set of barriers and several goals he was working toward. The main goal was to have access to information and to improve his ability to communicate more effectively at home and in the community. AT

Resource Center staff explored a number of different options with limited success until we introduced a stand-alone communication system that allowed eye tracking as the primary method of engaging the device. The program was able to set up personalized training with the manufacturer at Dannys home with the device loaned from the AT program. DO was able to try the device until he was ready to make a decision on whether the system would work for him. He decided that it would, and the AT Resource Center worked with the consumer and his family, as well as the manufacturer, to acquire the device through insurance and discounts from the vendor with no out of pocket costs to the family. DO and his family subsequently moved out of state, to be closer to other family members, but our program received a Christmas card letter recently thanking us for the help. The letter said that DO was actively using his device at home and in his new community and was very happy.

-Impact Area -

○ Education ○ Employment ● Community Living

F. Access Performance Measures

| Access Performance Measures | | | | | |
|--|-----------|--|------------------|-------|--|
| Response | Primary | Primary Purpose for Which AT is Needed | | | |
| | Education | Employment | Community Living | Total | |
| Decided that AT device/service will meet needs | 04 | 03 | 31 | 38 | |
| Decided that an AT device/ service will not meet needs | 01 | 00 | 18 | 19 | |
| Subtotal | 05 | 03 | 49 | 57 | |
| Have not made a decision | 01 | 00 | 02 | 03 | |
| Subtotal | 06 | 03 | 51 | 60 | |
| Nonrespondent | 00 | 00 | 02 | 02 | |
| Total | 06 | 03 | 53 | 62 | |
| Performance on this measure | 83.33% | 100% | 96.08% | | |

G. Acquisition Performance Measures

| Acquisition Performance Measures | | | | | |
|---|-----------|--|---------------------|-------|--|
| Response | Primary P | Primary Purpose for Which AT is Needed | | | |
| | Education | Employment | Community Living | Total | |
| 1. Could only afford the AT through the AT program. | 00 | 02 | 00 | 02 | |
| 2. AT was only available through the AT program. | 01 | 01 | 02 | 04 | |
| 3. AT was available through other programs, but the system was too complex or the wait time too long. | 00 | 00 | 00 | 00 | |
| 4. Subtotal | 01 | 03 | 02 | 06 | |

| 5. None of the above | 00 | 00 | 00 | 00 |
|--------------------------------|------|------|------|----|
| 6. Subtotal | 01 | 03 | 02 | 06 |
| 7. Nonrespondent | 00 | 00 | 01 | 01 |
| 8. Total | 01 | 03 | 03 | 07 |
| 9. Performance on this measure | 100% | 100% | 100% | |

H. Customer Satisfaction

| Satisfaction | | | | |
|-----------------------------|---------------------|---------|--|--|
| Customer Rating of Services | Number of Customers | Percent | | |
| Highly satisfied | 43 | 62.32% | | |
| Satisfied | 18 | 26.09% | | |
| Satisfied somewhat | 01 | 1.45% | | |
| Not at all satisfied | 01 | 1.45% | | |
| Nonrespondent | 06 | 8.7% | | |
| Total Surveyed | 69 | | | |
| Response rate % | 91.3% | | | |

I. Notes:

The number of devices being loaned has increased by 57% from last year, although we still are not where we want to be. There have been many complications in re-establishing a AT Resource Center in our most populated area the past 4 years. From enduring covid and our ATRC being able to find, hire, and maintain qualified staff are the biggest challenges. We continue to set Goals to increase vital, decision-making opportunities for consumers statewide.

Device Demonstration

A. Number of Device Demonstrations by Device Type

| Type of AT Device / Service | Number of Demonstrations of AT Devices / Services |
|---------------------------------------|---|
| Vision | 52 |
| Hearing | 23 |
| Speech Communication | 08 |
| Learning, Cognition and Developmental | 02 |
| Mobility, Seating and Positioning | 00 |
| Daily Living | 00 |

| Environmental Adaptations | 03 |
|---|----|
| Vehicle Modification and Transportation | 00 |
| Computers and Related | 01 |
| Recreation, Sports and Leisure | 00 |
| Total # of Device Demonstrations | 89 |

B. Types of Participants

| Type of Participant | Decision-Makers | Other Participants | Total |
|---|-----------------|--------------------|-------|
| Individuals with Disabilities | 85 | 00 | 85 |
| Family Members, Guardians, and Authorized Representatives | 01 | 08 | 09 |
| Representatives of Education | 00 | 00 | 00 |
| Representatives of Employment | 00 | 00 | 00 |
| Health, Allied Health, Rehabilitation | 00 | 00 | 00 |
| Representative of Community Living | 00 | 00 | 00 |
| Representative of Technology | 03 | 00 | 03 |
| Total | 89 | 08 | 97 |

C. Number of Referrals

| Referrals | | | |
|---------------------------------|----|--|--|
| Type of Entity Number of Refer | | | |
| Funding Source (non-AT program) | 04 | | |
| Service Provider | 33 | | |
| Vendor | 01 | | |
| Repair Service | 00 | | |
| Others | 02 | | |
| Total | 40 | | |

D. Anecdote

RM is a Vietnam Veteran with significant vision loss as well as mobility barriers. The VA is a great resource to provide actual AT devices to their Veterans, but, unfortunately, in order to explore low vision options, it demanded extensive travel to

the VA's low vision clinic in another state. Meanwhile, the AT Resource Center met with RM and discussed his current goals of being able to access mail, and do online banking. A variety of magnification, OCR, and screen reading options were demonstrated. RM is a well-informed consumer already, but was interested in additional technologies he had not tried yet. One of the products demonstrated was the Orcam MyEye. RM made the decision that he wanted to try the Orcam at home and in the community. In recent conversations RM is reaching out to the VA to see if he would be able to acquire the device in the future. RM will contact us to inform us that the acquisition was successful or not. There is also an opportunity to understand the VA system better and to address any identified gaps.

Impact Area –

○ Education ○ Employment ● Community Living

E. Performance Measures

| Performance Measures | | | | | |
|--|--|------------|------------------|-------|--|
| Boononoo | Primary Purpose for Which AT is Needed | | | | |
| Response | Education | Employment | Community Living | Total | |
| Decided that AT device/service will meet needs | 05 | 04 | 59 | 68 | |
| Decided that an AT device/ service will not meet needs | 00 | 00 | 13 | 13 | |
| Subtotal | 05 | 04 | 72 | 81 | |
| Have not made a decision | 00 | 00 | 02 | 02 | |
| Subtotal | 05 | 04 | 74 | 83 | |
| Nonrespondent | 02 | 00 | 04 | 06 | |
| Total | 07 | 04 | 78 | 89 | |
| Performance on this measure | 71.43% | 100% | 92.31% | | |

F. Customer Satisfaction

| Satisfaction | | | | |
|-----------------------------|---------------------|---------|--|--|
| Customer Rating of Services | Number of Customers | Percent | | |
| Highly satisfied | 62 | 63.92% | | |
| Satisfied | 22 | 22.68% | | |
| Satisfied somewhat | 00 | 0% | | |
| Not at all satisfied | 00 | 0% | | |
| Nonrespondent | 13 | 13.4% | | |
| Total | 97 | | | |

| Response rate % | 86.6% |
|-----------------|-------|
| • | |

G. Notes:

The number of Demonstrations has increased by 68% from last year, although we still are not where we want to be. There have been many complications in re-establishing a AT Resource Center in our most populated area the past 4 years. From enduring covid and our ATRC being able to find, hire, and maintain qualified staff are the biggest challenges. We continue to set Goals to increase vital, decision-making opportunities for consumers statewide.

Overall Performance Measures

Overall Acquisition Performance Measure

| Acquisition Performance Measures | | | | | |
|---|--|------------|---------------------|-------|--|
| | Primary Purpose for Which AT is Needed | | | | |
| Response | Education | Employment | Community Living | Total | |
| 1. Could only afford the AT through the AT program. | 00 | 02 | 1,923 | 1,925 | |
| 2. AT was only available through the AT program. | 01 | 03 | 149 | 153 | |
| 3. AT was available through other programs, but the system was too complex or the wait time too long. | 00 | 00 | 15 | 15 | |
| 4. Subtotal | 01 | 05 | 2,087 | 2,093 | |
| 5. None of the above | 00 | 01 | 01 | 02 | |
| 6. Subtotal | 01 | 06 | 2,088 | 2,095 | |
| 7. Nonrespondent | 00 | 00 | 05 | 05 | |
| 8. Total | 01 | 06 | 2,093 | 2,100 | |
| 9. Performance on this measure | 100% | 83.33% | 99.04% | 99% | |
| ACL Performance Measure | | | | 85% | |
| Met/Not Met | | | | Met | |

Overall Access Performance Measure

| Access Performance Measures | | | | | |
|--|-----------|------------|------------------|-------|--|
| Passage | Primary | | | | |
| Response | Education | Employment | Community Living | Total | |
| Decided that AT device/service will meet needs | 09 | 07 | 90 | 106 | |
| Decided that an AT device/ service will not meet needs | 01 | 00 | 31 | 32 | |
| Subtotal | 10 | 07 | 121 | 138 | |

| 01 | 00 | 04 | 05 |
|--------|----------------|-----------------------|--|
| 11 | 07 | 125 | 143 |
| 02 | 00 | 06 | 08 |
| 13 | 07 | 131 | 151 |
| 76.92% | 100% | 93.8% | 92.62% |
| | | | 90% |
| | | | Met |
| | 11 02 13 | 11 07 02 00 13 07 | 11 07 125 02 00 06 13 07 131 76.92% 100% 93.8% |

Overall Satisfaction Rating

| Customer Rating of Services | Percent | ACL Target | Met/Not Met |
|--------------------------------|---------|------------|-------------|
| Highly satisfied and satisfied | 99.77% | 95% | Met |
| Response Rate | 96.33% | 90% | Met |

Training

A. Training Participants: Number and Types of Participants; Geographical Distribution

| Training by Participant Type | | |
|--|----|--|
| Type of Participant Num | | |
| Individuals with Disabilities | 32 | |
| Family Members, Guardians and Authorized Representatives | 00 | |
| Representatives of Education | 00 | |
| Representatives of Employment | 00 | |
| Rep Health, Allied Health, and Rehabilitation | 00 | |
| Representatives of Community Living | 29 | |
| Representatives of Technology | 00 | |
| Unable to Categorize | 00 | |
| TOTAL | 61 | |

| Geographic Distribution of Participants | | | | |
|---|--|--|--|--|
| Metro Non Metro Unknown TOTAL | | | | |

00

B. Training Topics

| Trainings by Topic | |
|---|--------------|
| Primary Topic of Training | Participants |
| AT Products/Services | 04 |
| AT Funding/Policy/ Practice | 10 |
| Combination of any/all of the above | 06 |
| Information Technology/Telecommunication Access | 23 |
| Transition | 18 |
| Total | 61 |

C. Description of Training Activities

Describe innovative one high-impact assistance training activity conducted during the reporting period:

In the spring of 2023 the AT Resource Center was approached by the Governors Council on Intellectual and Developmental Disabilities and its Partners in Policymaking Class to provide training to participant leaders. Partners in Policymaking creates a supportive and educational environment to help individuals change habits, expectations and attitudes about themselves and their loved ones with developmental disabilities. The free program equips people with leadership skills to impact their communities and to address change through change in policies. The goal of the training was to discuss AT and gaps in services and the importance of advocating for AT across the lifespan. People with disabilities and family members left with a better sense of assistive technology and its importance to the lives of people trying to access services and supports and live in communities of their choice.

Briefly describe one training activity related to transition conducted during the reporting period:

In the summer of 2023, the AT Resource Center was approached by the Nevada Commission on the Deaf, Hard of Hearing, and Speech Impaired along with the Department of Employment, Training, and Rehabilitation to provide training at their summer camp for transition age youth. Kids were 14-22 years of age. The major goal of the training was to address the importance of AT in transition for young adults who are deaf, hard of hearing, or speech impaired. NV ATRC staff discussed informed decision making and independent living throughout the training with the overall goal of improving the knowledge of AT and to be better self-advocates during transition periods that might require assistive technology. The impact of having other peers with disabilities there to share similar stories of barriers, even though not identical, had a lasting impact.

Briefly describe one training activity related to Information and Communication Technology accessibility:

As part of our continued collaboration with the United Way of Southern Nevada (UWSN) the AT Resource Center was approached in March of 2023 to provide training to their staff regarding assistive technology and access to accessible information and communication technology, and its importance in their efforts in Diversity, Equity, Inclusion, and Accessibility. The purpose of the training was to inform United Way Staff of the barriers that people with disabilities might face when trying to participate in employment and accessing services that are not accessible and useable. AT Resource Center staff discussed peer-based examples of challenges and how AT was incorporated or used to address the barrier that ultimately allowed them to accomplish a goal. The impact of the training was that United Way Staff now have a better understanding of the AT Resource Center and expectations with the referral process. Participants also had access to a variety of current technologies that people with various disabilities might use on a daily basis and to be more independent in; telecommunication, accessing information and supports, self-care, medications, mobility, cooking, computer applications and supports, screen readers and optical character recognition, magnification, learning and literacy, and effective communication.

D. IT/Telecommunications Training Performance Measure

| IT/Telecommunications Training Performance Measure | |
|---|--------|
| Outcome/Result From IT/Telecommunications Training Received | Number |
| IT and Telecommunications Procurement or Dev Policies | 23 |

61

| Training or Technical Assistance will be developed or implemented | 00 |
|---|------|
| No known outcome at this time | 00 |
| Nonrespondent | 00 |
| Total | 23 |
| Performance Measure Percentage | 100% |
| ACL Target Percentage | 70% |
| Met/Not Met | Met |

E. Notes:

Technical Assistance

A. Frequency and Nature of Technical Assistance

| Technical Assistance by Recipient Type | | |
|--|------|--|
| Education | 02% | |
| Employment | 00% | |
| Health, Allied Health, Rehabilitation | 48% | |
| Community Living | 02% | |
| Technology (IT, Telecom, AT) | 48% | |
| Total | 100% | |

B. Description of Technical Assistance

Describe Innovative one high-impact assistance activity that is not related to transition:

In the winter of 2023, the AT Resource Center was contacted by Aging and Disability Services Division to discuss on going collaboration and technical assistance regarding our Telecommunication Equipment Distribution Program and the FCC's push to move internet-based communication and Relay Services in the future. The Relay Administrator Mr. Firth presented a short term and long-term plan of timelines and when changes were going to occur, as well as a general discussion from a process perspective how we were going to reach out to consumers, and what the State might need to undertake from a policy perspective in order to align with the Federal implementation of this decision. This will be a major change for consumers in Nevada, especially those in remote rural areas of the State that have less than adequate Internet Services.

Breifly describe one technical assistance activity related to transition conducted during the reporting period:

During the fall of 2022 discussions continued with the State of Nevada Medicaid offices and two of their programs. Medicaid FOCIS and Money Follows the Person. The need for technical assistance was to address gaps in services involving an individual's opportunity to have the support they need to live in the place of their choice. In addition, it is an opportunity to streamline processes and procedures to enhance the understanding of programs involved, create better referrals, and to ensure that assistive technology programs and services play a major role in all aspects of the transition process.

C. Notes:

Public Awareness

Public Awareness Activities

Public Awareness Narratives

Describe in detail at least one and no more than two innovative or high-impact public awareness activities conducted during this reporting period. Highlight the content/focus of the awareness information shared, the mechanism used to disseminate or communicate the awareness information, the numbers and/or types of individuals reached, and positive outcomes resulting from the activity. If quantative numbers are available regarding the reach of the activity, please provide those: however, quantative data is not required.

1. Between October 2022 and September 2023, CARE Chest conducted several smaller traditional media campaigns designed to increase the public's education and awareness in relation to the organization's AT reuse, AFP loan, and AT/IL programs. Between broadcast and social media efforts more than 500,000 Nevadans were reached and exposed to CARE Chest's educational messaging. As a result of these efforts, CARE Chest has experienced a 24% increase in the demand for our programs and services. The organization had forecasted and planned for a 15-17% increase.

2. CARE Chest's Rural and Mobile Outreach teams have dramatically increased their community engagement, education and awareness efforts between October 2022 and September 2023. The team, which operates state-wide, routinely visits 43 communities monthly to conduct education and awareness activities but also to distribute services. Annually, this team interacts with more than 6,000 Nevadans who go on to access services at CARE Chest.

Information And Assistance

| Information And Assistance Activities by Recipient | | | |
|---|-----------------------|------------|-------|
| Types of Recipients | AT Device/ Service | AT Funding | Total |
| Individuals with Disabilities | 292 | 202 | 494 |
| Family Members, Guardians and Authorized Representatives | 134 | 130 | 264 |
| Representative of Education | 00 | 00 | 00 |
| Representative of Employment | 01 | 01 | 02 |
| Representative of Health, Allied Health, and Rehabilitation | 09 | 01 | 10 |
| Representative of Community Living | 03 | 02 | 05 |
| Representative of Technology | 02 | 01 | 03 |
| Unable to Categorize | 03 | 01 | 04 |
| Total | 444 | 338 | 782 |

Referral Types:

The data that was collected shows that the top 3 referral areas are Program Area Entity/Providers (35%), Awareness & Outreach events (22%), and Prior Consumer (26%). This shows an increase in the number of Program Area Providers and Awareness/Outreach, as compared to last year. It is difficult to point to a specific and successful strategy that was most effective. Last year and continuing into this reporting year the NATC funded a statewide public awareness campaign through our community partner CARE Chest. The campaign included consumer video testimonies, radio and television spots, publications and direct contact events.

Referral Sources:

The top 2 referral areas that are not "prior consumer related" are Entity/Providers (35%) & Awareness & Outreach events (22%). As described in Referral Types these areas show the greatest increase in the root referral source. We have implemented the collection of the specific referral source into the NATADs system that points to direct events being the most prominent. This makes sense when a consumer connects right away and is able to articulate that they participated in an event. The challenge still remains with the consumer being able to tell us who referred them in an accurate and meaningful way. Referrals from other entities are a challenge for many consumers. We have attributed that to the consumers seeking AT information are likely trying to address other needs. The consumer has likely made a lot of calls and experienced a lot of referrals which makes it very difficult for them to accurately describe who referred them.

Notes:

Our objective is to reach consumers that can benefit and need our program services as directly as possible. Focusing on events, disability groups, and organizations/agencies that provide service or supports to people with disabilities. The NATC wants to receive good referrals and provide good referrals. If an inappropriate referral is received the program reaches out and encourages an inservice training. Likewise, if we make an inappropriate referral the program would request corrective information. For many years we have tried connecting referral information to make determinations where outreach is needed and identify different strategies. It is a challenge and we have not found a perfect solution to accomplish this yet. In the NATADs system we collect the referral source as best as we can from the consumer's description. While the consumer may name the specific referral source, it is not often possible to determine those sources' connection to the NATC's public awareness

Coordination/Collaboration and State Improvement Outcomes

Overview of Coordination/Collaboration Activities

Coordination/Collaboration activities are not required. You may report up to two MAJOR coordination/collaboration activities for this reporting period. How many will you be reporting?

1

01

A. Coordination/Collaboration

1. As concisely as possible, describe the partnership initiative. What activities/services were provided? Who are the major collaborating organizations and what is their role? Who is served/benefited? What funding was used to implement the initiative?

The AT Resource Center has an established and on-going partnership with the United Way. It all started with a phone call from them requesting basic information about what we do and then progressed into other service areas including public awareness, training, and technical assistance. Shortly after our public awareness activity we were contacted to provide additional technical assistance regarding accessible information and communication technology as well as additional training for staff as part of their annual Diversity, Equity, and Inclusion training requirements for their organization.

2. As concisely as possible, describe the measurable results of the initiative and any lessons learned. How did access to AT change as a result of the coordination/collaboration/partnership? How did awareness of AT change as a result of the partnership? How did the reach of the state AT program change as a result of the partnership? What made the partnership successful? What would you change or wish you had done differently? Provided funding/resources are available, will the initiative continue or is this a one-time event? What advice would you give for replication of the initiative? Please include URL for initiative if available.

A training was coordinated with approximately 20 United Way staff and several staff from the AT Resource Center who all have lived experience with using various assistive technologies on a daily basis. United Way provided an accessible venue and training room. The training was a hybrid between in person and also was available online using the Zoom platform. The training enabled United Way staff the opportunity to explore current AT devices and the application by AT users, including caption and amplified telephones, screen reading applications, daily living aids, and tablets and phones used to enhance participation in accessing services. Funding used to provide the requested services were the AT Act funds, as well as some funding and time associated with the Telecommunication Equipment Distribution Program. In the future I see this collaboration expanding even farther with the hope of providing future services to all the non-profit organizations they serve across the state.

3. What focus areas(s) were addressed by the initiative?

Community Participation and Integration; Information and Communication Technology / Remote Connectivity;

4. What AT Act authorized activity(s) were addressed?

Device Loan; Demonstration; Training; Information & Assistance; Technical Assistance;

Overview of State Improvement Activities

State improvement outcomes are not required. You may report up to two MAJOR state improvement outcomes for this reporting period. How many will you be reporting?

B. State Improvements

1. In one or two sentences, describe the outcome. Be as specific as possible about exactly what changed during this reporting period as a result of the AT program's initiative.

The outcome of coordination and collaboration with the United Way was that the relationship over time has grown and that both organizations have a better understanding of each other's programs, referral processes, and other gaps in services that will continue to be addressed in order to provide a better service to the individuals we serve.

2. In one or two sentences, describe the written policies, practices, and procedures that have been developed and implemented as a result of the AT program's initiative. Include information about how to obtain the full documents, such as a Web site address or e-

mail address of a contact person, but do not include the full documents here. (If there are no written polices, practices and procedures, explain why.)

In this relationship the goal was to establish an on-going partnership and to work towards implementing effective practices and what could be expected with that collaboration. Informal practices and procedures were developed and there is a greater understanding from a functional perspective of how systems can incorporate the actual users of assistive technology in all aspects of one's organization. A more formal outcome and policy change is anticipated with future endeavors with the United Way.

3. What was the primary area of impact for this state improvement outcome?

Community Living

Additional And Leveraged Funds

A. Leveraged Funding for State Plan Activities

| Fund Source | Amount | Use of Funds | Data Reported |
|----------------------|---------------------|-----------------|---------------|
| State Appropriations | \$1,632,581 | State Financing | True |
| Federal | \$109,570 | State Financing | True |
| | Amount: \$1,742,151 | | |

For any leveraged funding reported above for which data could not be reported, please describe the extenuating circumstances that precluded data from being reported and efforts to remediate the situation in future reporting periods.

| B. Public Health Workforce Grant Award | | |
|--|-----------------------|----------|
| All Section 4 AT Act grantees were awarded \$80,000.00 in supplimental Public Health Workforce grant fur time equivalent (FTE) of staff withing the disability and aging network for public health professionals. Plea of these funds below. | | |
| The status of these funds at the end of the FY23 (9/30/2023) is as follows: (Check one) | | |
| \bigcirc We did not utilize this funding in FY23 and wish to decline the funds in the future | | |
| • We did not expend any of this funding in FY23, but plan to expend funding in FY24 and/or FY25 | | |
| \bigcirc We expended some of all of this funding in FY23 (please complete the section below) | | |
| | | |
| Please report the amount expended (drawn down and liquidated) in this reporting period, FY23: \$0.00 | | |
| Please report the number of Full Time Equivalent (FTE) positions this funding supported by type. This ca FTE or contractual FTE. | n be a direct e | employee |
| Type of FTE Position | FTE Positio to 9.9 | · · |
| Assistive Technology Specialist | 0.00 | |
| Information and Assistance Specialist | 0.00 | |
| Outreach and Awareness Specialist | 0.00 | |
| Training Specialist | 0.00 | |
| Health Care Professional (includes PT, OT, SLP) | 0.00 | |

| Accessibility Expert | 0.00 | |
|--|------|--|
| Policy Expert | 0.00 | |
| Technology Expert (Digital Divide, Mobile Tech) | 0.00 | |
| Program Manager | 0.00 | |
| Other positions needed to advance public health and prevent, prepare for, and respond to COVid-19 (describe with narrative field required) | 0.00 | |
| Please describe the activities of the above FTE and how such activities advance public health. | | |
| | | |

C. Describe any unique issues with your data in this section (e.g., the reason why you were unable to report the number of individuals served with additional or leveraged funds).

Center for Assistive Technology Act Data Assistance . Saved: Fri Dec 29 2023 13:31:44 GMT-0800 (Pacific Standard Time)