

FEDERAL REVIEW FORM
STATE COUNCIL ON DEVELOPMENTAL DISABILITIES
FIVE YEAR STATE PLAN- Quality Review System- Tier 2

Council: _____

State Plan Review Process:

1. Each member will evaluate each state plan independently, impartially and consistently.
2. The state plan should write clear, purposeful, detailed review comments and assign scores that are consistent with the review comments.
3. All documents associated with this process are public documents and must be available to anyone who requests them.
4. Members should sign and date this form for each state plan and be prepared to discuss their evaluations on the State Plan Review Webinar.

Instructions for Scoring:

- 0 = no response
- 1 = Council has ignored this area, or has so poorly responded to this section that understanding is not possible
- 2 = Poor; Council has marginally provided information and has not adequately covered this area; difficulty to ascertain the needs of the state/territory/commonwealth; if approach
- 3 = Basic acceptability; Council has provided minimum information to inform the needs of the state and establish a basis for the 5 year state plan and evaluation
- 4 = Good- very good; Council has demonstrated more than adequate information and/or analysis; a very good approach to addressing the needs of the state in the 5 year state plan and evaluating the state plan implementation
- 5 = Excellent; Council has demonstrated a detailed information; comprehensive analysis, strong approach to address the needs of the state in the 5 year state plan, and evaluate the state plan implementation.

By signing this form, you are certifying that you conducted a fair and objective review of the state plan identified on the form, and that the comments for each area support the scores that were assigned.

Member's Signature _____

Printed Name _____ Date _____

Review Sections		Score	Weighted	Final Score
Section 1	Council Identification	5	X1	5
Section 2	Designated State Agency	5	X1	5
Section 3	Comprehensive Review and Analysis	5	X4	20
Section 3(E)	5 Year Goals	5	X2	10
Section 3(E)(LM)	Logic Model	5	X1	5
Section 4	Evaluation Plan	5	X2	10
Section 5	Projected Council Budget	5	X1	5
Section 6	Assurances	5	X1	5
Section 7	Public Input and Review	5	X1	5
Section 8	Annual Work plan 2017	5	X3	15
Section 9	Annual Work plan 2018	5	X3	15
Total				100/100

SECTION 1: COUNCIL IDENTIFICATION

Part A. State Plan Period

Is October 1, 2016 through September 30, 2021 indicated?	Yes / No
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Part B. Contact Person, Phone Number and Email

Is contact person and contact information provided?	Yes / No
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Part C. Council Establishment

(i) Date the Council was established is specified (mm/dd/yy)	Yes / No
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(ii) Authorization citation is identified?	Yes / No
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(iii) The actual Statute or Executive Order establishing the Council is provided?	Yes / No
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PART D: Council Membership. [Section 125(b)(1)-(6)].

(i) Council membership rotation plan
Is adequate information about the membership rotation plan is provided?

(2) MEMBERSHIP ROTATION. -The Governor shall make appropriate provisions to rotate the membership of the Council. Such provisions shall allow members to continue to serve on the Council until such members' successors are appointed. The Council shall notify the Governor regarding membership requirements of the Council, and shall notify the Governor when vacancies on the Council remain unfilled for a significant period of time.

Yes, (if yes, provide comments about strengths)

No, (if no, provide comments as to why)

Comments:

SECTION 1: COUNCIL IDENTIFICATION

<p>(ii) Council Members</p> <p><u>Agency/Organizational Representatives</u> A1 = Rehab Act A2 = IDEA A3 = Older Americans Act A4 = SSA, Title XIX A5 = P&A A6 = University Center(s) A7 = NGO/Local A8 = SSA/Title V A9 = Other</p> <p><u>Gender Identity</u> M= Male F= Female O= Other</p> <p style="padding-left: 40px;"><u>Geographical</u> E1= Urban E2= Rural</p>	<p><u>Citizen Member Representatives</u> B1 = Individual with DD B2 = Parent/Guardian of child B3 = Immediate Relative/Guardian of adult with mental impairment C1 = Individual now/ever in institution C2 = Immediate relative/guardian of individual in institution</p> <p><u>Race/Ethnicity</u> D1= White, alone D2= Black or African American alone D3= Asian alone D4= American Indian and Alaska Native alone D5= Hispanic/Latino D6= Native Hawaiian & Other Pacific Islander alone D7= Two or more races D8= Race unknown D9- Some other race</p>
<p>a. Are first and last names of all Council members provided?</p>	<p>Yes / No</p>
<p>b. Are beginning and end dates for appointments listed? <i>Note: Beginning and end dates need to be actual calendar dates. Sometimes Councils will report the year of the plan instead. If you think this is the case, please make note.</i></p>	<p>Yes / No</p>
<p>c. Is the membership category provided for each member?</p>	<p>Yes / No</p>
<p>d. Did the Council Identification section provide information about the gender, geographical location, race/ethnicity for each council member?</p>	<p>Yes/ No</p>
<p>Are at least 60 percent of the membership are from the following categories:</p> <p>B1 = Individual with DD B2 = Parent/Guardian of child B3 = Immediate Relative/Guardian of adult with mental impairment C1 = Individual now/ever in institution C2 = Immediate relative/guardian of individual in institution</p>	<p>Yes / No</p>

SECTION 1: COUNCIL IDENTIFICATION

The Council members include representatives of relevant State entities, including-

- A1 = Rehab Act (Vocational Rehabilitation)
- A2 = IDEA (Special Education)
- A3 = Older Americans Act (Aging)
- A4 = SSA, Title XIX (Medicaid)
- A5 = P&A (Disability Rights)
- A6 = University Center(s) (UCEDD(s))
- A7 = NGO/Local
- A8 = SSA/Title V (Maternal and Child Health)
- A9 = Other (Private non-profit)

Yes / No

Part E. Council Staff. [Section 125(c)(8)(B)].

a. Did the Council Staff section provide demographic information?

Yes / No

b. Did the Council Staff section provide information about all full-time and part-time Council staff positions?

Yes / No

c. Does the official classification of the staff member adequately describe the role of that position?

Yes / No

d. If not, is a working title listed? (e.g., Council Executive Director, NOT Health Administrator IX).

Yes / No

Conclusions/Summary

Strengths

Weaknesses

Compliance Concerns

SECTION 1: COUNCIL IDENTIFICATION

Section 1: Council Identification Score: (0-5)

- 0= No response
- 1= Not understandable
- 2= Poor
- 3 = Basic
- 4= Good
- 5=Excellent

SECTION 2: DESIGNATED STATE AGENCY [Section 125(d)].

PART A. The Designated State Agency (DSA).

Is Part A completed?	Yes / No
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PART B. Direct Services. [Section 125(d)(2)(A)-(B)]

(i) **DESIGNATION BEFORE ENACTMENT.** -If a State agency that provides or pays for services for individuals with developmental disabilities was a designated State agency for purposes of part B of the Developmental Disabilities Assistance and Bill of Rights Act on the date of enactment of the Developmental Disabilities Assistance and Bill of Rights Act Amendments of 1994, and the Governor of the State (or the legislature, where appropriate and in accordance with State law) determines prior to June 30, 1994, not to change the designation of such agency, such agency may continue to be a designated State agency for purposes of this subtitle.

If DSA is other than the Council, does it provide or pay for direct services to persons with developmental disabilities?	Yes / No
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PART C. Memorandum of Understanding/Agreement. [Section 125(d)(3)(G)]

Does the DD Council have a memorandum of Understanding with the DSA?	Yes / No
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SECTION 2: DESIGNATED STATE AGENCY [Section 125(d)].

PART D. DSA Roles and Responsibilities related to Council. [Section 125(d)(3)(A)-(G)]

3) RESPONSIBILITIES.-

(A) IN GENERAL. -The designated State agency shall, on behalf of the State, have the responsibilities described in subparagraphs (B) through (G).

(B) SUPPORT SERVICES. -The designated State agency shall provide required assurances and support services as requested by and negotiated with the Council.

(C) FISCAL RESPONSIBILITIES. -The designated State agency shall-

(i) Receive, account for, and disburse funds under this subtitle based on the State plan required in section 124; and

(ii) Provide for such fiscal control and fund accounting procedures as may be necessary to assure the proper disbursement of, and accounting for, funds paid to the State under this subtitle.

(D) RECORDS, ACCESS, AND FINANCIAL REPORTS. -The designated State agency shall keep and provide access to such records as the Secretary and the Council may determine to be necessary. The designated State agency, if other than the Council, shall provide timely financial reports at the request of the Council regarding the status of expenditures, obligations, and liquidation by the agency or the Council, and the use of the Federal and non-Federal shares described in section 126, by the agency or the Council.

(E) NON-FEDERAL SHARE. -The designated State agency, if other than the Council, shall provide the required non-Federal share described in section 126(c).

(F) ASSURANCES. -The designated State agency shall assist the Council in obtaining the appropriate State plan assurances and in ensuring that the plan is consistent with State law.

(G) MEMORANDUM OF UNDERSTANDING. -On the request of the Council, the designated State agency shall enter into a memorandum of understanding with the Council delineating the roles and responsibilities of the designated State agency.

Are the roles and responsibilities of the DSA described?	Yes / No
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PART E. Calendar Year DSA was Designated. [Section 125(d)(2)(B)]

Is the calendar year of DSA designation provided?	Yes / No
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SECTION 2: DESIGNATED STATE AGENCY [Section 125(d)].

Conclusions/Summary

Strengths

Weaknesses

Compliance Concerns

Section 2: Designated State Agency Score: (0-5)

- 0= No response
- 1= Not understandable
- 2= Poor
- 3 = Basic
- 4= Good
- 5=Excellent

SECTION 3: COMPREHENSIVE REVIEW AND ANALYSIS

[Section 124(c)(3)]

INTRODUCTION

Does the introduction provide an overview that adequately explains the process used to develop the Comprehensive Review and Analysis (CRA)?

Yes, (if yes, provide comments about strengths)

No, (if no, provide comments as to why)

Comments:

- a. Provides information that demonstrates Council members and members of the public from diverse backgrounds provided input into the development of the plan and how their feedback was used to developing the goals and objectives outlined in the five-year plan.

Yes, if yes, provide comments about strengths

No, if no, provide comments as to why

SECTION 3: COMPREHENSIVE REVIEW AND ANALYSIS

[Section 124(c)(3)]

Comments:

b. Provides information on the data, research and/or information that influenced the Council's goal selections

Yes, if yes, provide comments about strengths

No, if no, provide comments as to why

Comments

c. Provides Information on any federally assisted State programs, plans and policies that are not included in Parts A . D of the CRA

Yes, if yes, provide comments about strengths

No, if no, provide comments as to why

Comments

d. Describes how information was gathered from focus groups and/or directly from people with developmental disabilities and their families

Yes, (if yes, provide comments about strengths)

No, (if no, provide comments as to why)

Comments

e. Includes other, broader issues, such as social policy, culture change, funding issues, etc. that are not incorporated into Parts A . D.

Yes, (if yes, provide comments about strengths)

No, (if no, provide comments as to why)

SECTION 3: COMPREHENSIVE REVIEW AND ANALYSIS

[Section 124(c)(3)]

Comments

PART A. State Information

(i) Racial and Ethnic Diversity of the State Population

Has the chart been completed?

Yes / No

(ii) Poverty Rate

Has the Poverty rate been identified from the Census Bureau?

Yes / No

(iii) State Disability Characteristics

a) Prevalence of Developmental Disabilities in the State

Has the estimated number of people with developmental disabilities living in the State been provided?

Yes / No

Does it include a brief description of how the estimate was created (e.g., using national prevalence rate or some other source)?

Yes / No

b) Residential Settings

Has information been provided in the Residential Settings chart on the number of people with developmental disabilities living in the different types of residential settings

Yes / No

c) Demographic Information about People with Disabilities

Using information collected by the Census Bureau through the American Community Survey, are the charts complete?

Yes / No

PART B. Portrait of the State Services [Section 124(c)(3)(A)(B)]:

SECTION 3: COMPREHENSIVE REVIEW AND ANALYSIS

[Section 124(c)(3)]

(i) Health/health care This section is required

- a. Adequately describes available medical assistance, maternal and child health care, services for children with special health care needs, mental health services for children and adults, institutional care options, and other comprehensive health and mental health services?

Yes, (if yes, provide comments about strengths)

No, (if no, provide comments as to why)

Comments

- b. Adequately describes public/private insurance access, prevention and wellness initiatives, and long term services and supports available in the state.

Yes, (if yes, provide comments about strengths)

No, (if no, provide comments as to why)

Comments

- c. To that the information is available, includes data regarding the number of children and adults with developmental disabilities and, as applicable, their families receiving each type of such health services and supports?

Yes, (if yes, provide comments about strengths)

No, (if no, provide comments as to why)

Comments

(ii) Employment This section is required

- a. Adequately describes job training, job placement, worksite accommodation, vocational rehabilitation, and other work assistance incentive and benefits programs that are available to people with developmental disabilities
Information about "school to work" transition efforts can also be included here.

SECTION 3: COMPREHENSIVE REVIEW AND ANALYSIS

[Section 124(c)(3)]

Yes, (if yes, provide comments about strengths)	No, (if no, provide comments as to why)
Comments:	
<p style="margin-left: 40px;">b. To the extent available, provides adequate information on competitive, integrated employment efforts; sheltered workshops; Employment First policies/efforts; and sub-minimum wage been included?</p>	
Yes, (if yes, provide comments about strengths)	No, (if no, provide comments as to why)
Comments:	
<p style="margin-left: 40px;">c. To the extent available, has data regarding the number of youth and adults with developmental disabilities receiving each type of such employment services and supports been included?</p>	
Yes, (if yes, provide comments about strengths)	No, (if no, provide comments as to why)
Comments:	
<p style="margin-left: 20px;">(i) Informal and formal services and supports This section is required</p> <p style="margin-left: 40px;">a. Adequately describes available social, child welfare, aging, independent living, and other such services not described elsewhere that are available to people with developmental disabilities and their families?</p>	
Yes, (if yes, provide comments about strengths)	No, (if no, provide comments as to why)
Comments:	
<p style="margin-left: 40px;">b. To the extent available, includes information on family support efforts/policies, peer support initiatives, faith-based community efforts, volunteer activities, home and community based services, and long term services and supports?</p>	
Yes, (if yes, provide comments about strengths)	No, (if no, provide comments as to why)

SECTION 3: COMPREHENSIVE REVIEW AND ANALYSIS

[Section 124(c)(3)]

Comments:

- c. To the extent available, includes data regarding the number of children and adults with developmental disabilities and, as applicable, their families receiving each type of such services and supports?

Yes, (if yes, provide comments about strengths)

No, (if no, provide comments as to why)

Comments:

(ii) Interagency Initiatives This section is required

- a. Adequately describes the extent to which agencies operating other federally assisted State programs (including activities authorized under section 101 or 102 of the Assistive Technology Act of 1998 (29 U.S.C. 3011, 3012)) pursue interagency initiatives to improve and enhance community services, individualized supports, and other forms of assistance for individuals with developmental disabilities?

Yes, (if yes, provide comments about strengths)

No, (if no, provide comments as to why)

Comments:

- b. To the extent available, includes information on other state collaborations, such as the state early learning councils required under the Head Start program, State Interagency Coordinating Councils required under Part C of IDEA, Work Investment Boards, Centers for Independent Living, State Rehabilitation Council, Aging and Disability Resource Centers and other relevant state-established Councils, Committees, and/or Cabinets

Yes, (if yes, provide comments about strengths)

No, (if no, provide comments as to why)

Comments:

- c. As possible, includes specific information about participation of individuals with developmental disabilities, family members, and organizations representing people with disabilities on these Councils, Committees and/or Cabinets

SECTION 3: COMPREHENSIVE REVIEW AND ANALYSIS

[Section 124(c)(3)]

Yes, (if yes, provide comments about strengths)

No, (if no, provide comments as to why)

Comments:

(v) Quality Assurance This section is optional. Provided adequate information on monitoring of services, supports, and assistance to prevent abuse, neglect, sexual or financial exploitation, violation of legal or human rights, and inappropriate use of restraints or seclusion; interagency coordination and systems integration efforts that result in improved and enhanced services, supports, and other assistance; access to person-centered planning services; and training in leadership, self-advocacy, and self-determination

Yes, (if yes, provide comments about strengths)

No, (if no, provide comments as to why)

Comments:

(vi) Education/Early Intervention This section is optional. Provided adequate information on general and special education services; early intervention services; early childhood services; private school services; education supports; and teacher training

Yes, (if yes, provide comments about strengths)

No, (if no, provide comments as to why)

Comments:

(vii) Housing This section is optional Provides adequate information on the availability of affordable, accessible, integrated housing; housing supports and services; and services related to renting, owning, or modifying a residence

Yes, (if yes, provide comments about strengths)

No, (if no, provide comments as to why)

Comments:

(viii) Transportation This section is optional. Provided adequate information on accessible public transportation services, paratransit services, and/or programs that promote community accessibility?

SECTION 3: COMPREHENSIVE REVIEW AND ANALYSIS

[Section 124(c)(3)]

Yes, (if yes, provide comments about strengths)

No, (if no, provide comments as to why)

Comments:

(ix) Child care **This section is optional.** Provides adequate information on before-school, after-school, and early care services in communities

Yes, (if yes, provide comments about strengths)

No, (if no, provide comments as to why)

Comments:

(x) Recreation **This section is optional** Provides adequate information on recreational, leisure, and social activities in communities that are available to individuals with developmental disabilities

Yes, (if yes, provide comments about strengths)

No, (if no, provide comments as to why)

Comments:

Information was provided for the required items:

Health/health care

Yes / No

Employment

Yes / No

Informal and formal services and supports

Yes / No

Interagency Initiatives

Yes / No

PART C. Analysis of State Issues and Challenges [Section 124(c)(3)(C)]	
<p>(i) Criteria for eligibility for services This information is required. Adequately summarizes the Council's analysis of the eligibility criteria used to determine access to specialized services provided by State agencies that may exclude individuals with developmental disabilities from receiving services.</p> <p><i>Note: This may include if available an analysis of eligibility criteria for generic services, waiver services, early intervention services, special education services, employment services, and long-term services and supports.</i></p>	
Yes, (if yes, provide comments about strengths)	No, (if no, provide comments as to why)
Comments:	
<p>(ii) Analysis of the barriers to full participation of unserved and underserved groups of individuals with developmental disabilities and their families* This information is required. a. Adequately reviews and summarizes the needs for the identified unserved and underserved population(s).</p>	
Yes, (if yes, provide comments about strengths)	No, (if no, provide comments as to why)
Comments:	
<p>b. Clearly identifies the populations that are unserved and underserved.</p> <p><i>Note: This may include populations such as individuals from racial and ethnic minority backgrounds; Lesbian, Gay, Bisexual, Transgender, Queer/ Questioning (LGBT); disadvantaged individuals, people who speak a primary language other than English, individuals from underserved geographic areas (rural or urban); specific groups of individuals within the population of individuals with developmental disabilities, including individuals who require assistive technology in order to participate in and contribute to community life; or some other group.</i></p>	
Yes, (if yes, provide comments about strengths)	No, (if no, provide comments as to why)
Comments:	

<p>c. The process the Council used to identify the unserved and underserved population in the State and the rationale for identifying these population(s) over others is adequately described.</p>	
<p>Yes, (if yes, provide comments about strengths)</p>	<p>No, (if no, provide comments as to why)</p>
<p>Comments:</p>	
<p>(iii) The availability of assistive technology* This information is required. Adequate summary provided of the Council's analysis of the availability of assistive technology, assistive technology services, rehabilitation technology, and/or the availability of information about these three things, to individuals with developmental disabilities?</p> <p><i>Note: This may include if available information about access to generic technologies, such as universally designed technology, smart home-based technology, monitoring technology, etc.</i></p>	
<p>Yes, (if yes, provide comments about strengths)</p>	<p>No, (if no, provide comments as to why)</p>
<p>Comments:</p>	
<p>(iv) Waiting Lists This information is required</p>	
<p>a) Does the plan provide the number of people waiting for residential services per 100,000?</p>	<p>Yes / No</p>
<p>b) To the extent possible, does it include state data on all other types of wait-lists per 100,000?</p>	<p>Yes / No</p>
<p>Are responses provided for questions b - h?</p>	<p>Yes / No</p>
<p>Comments:</p>	
<p>(i) Based on the information provided in items a - h, there is an adequate analysis of the issues, challenges, and limitations, if any related to the state waiting list(s) described adequately</p>	<p>Yes / No</p>
<p>Yes, (if yes, provide comments about strengths)</p>	<p>No, (if no, provide comments as to why)</p>

Comments:	
<p>(v) Analysis of the adequacy of current resources and projected availability of future resources to fund services This information is required. Using available tools and/or data, is there an adequate summary and analysis of the State's current resources to fund services for people with developmental disabilities and their families?</p> <p><i>Note: This may include information on the state's fiscal resources to fund home and community-based services, long-term services and supports, education services, employment services, transportation services, etc., Estimates of the State's future resources for funding services (sources for this type of information may be the State's proposed budget, studies of State spending trends, etc.). Use data from the National Core Indicators project, the State of the State in Developmental Disabilities study, the Annual Residential Services and Trends Report, the Annual Report on Day and Employment Supports, and the Special Education Expenditure Project.</i></p>	
Yes, (if yes, provide comments about strengths)	No, (if no, provide comments as to why)
Comments:	
<p>(vi) Analysis of the adequacy of health care and other services, supports, and assistance that individuals with developmental disabilities who are in facilities receive This information is required</p> <p>Is there sufficient analysis of the adequacy of health care and other services, supports, and assistance that people with developmental disabilities who are in facilities receive?</p> <p><i>Note: This description should be based in part on each independent review (pursuant to section 1902(a)(30)(C) of the Social Security Act (42 U.S.C. 1396a(a)(30)(C))) of an Intermediate Care Facility within the State, which the State shall provide to the Council not later than 30 days after the availability of the review. Adequacy may be described in terms of quality and/or population served versus need. Facilities can include state-run institutions, privately run institutions, intermediary care facilities, nursing homes or some other type of facility identified by the Council.</i></p>	
Yes, (if yes, provide comments about strengths)	No, (if no, provide comments as to why)
Comments:	

(vii) Adequacy of home and community-based waivers services (authorized under section 1915(c) of the Social Security Act (42 U.S.C. 1396n(c))) **This information is required.** There is sufficient analysis of the adequacy of services provided through home and community-based waivers for people with developmental disabilities authorized under Section 1915(c) of the Social Security Act.

Note: Adequacy may be described in terms of quality and/or population served versus need.

Yes, (if yes, provide comments about strengths)

No, (if no, provide comments as to why)

Comments:

PART D. Rationale for Goal Selection [Section 124(c)(3)(E)]

The rationale is required

- a. There is an adequate rationale for the Council's selection of specific goals based on and related to the information in Part A and information from the CRA provided in Parts B and C

Yes, (if yes, provide comments about strengths)

No, (if no, provide comments as to why)

Comments:

- b. There is a direct relationship between the goals and the needs identified based on the data collected and/or reviewed and feedback from a wide range of stakeholders.

Yes, (if yes, provide comments about strengths)

No, (if no, provide comments as to why)

Comments:

- c. There is sufficient information on how the Council prioritized issues to be addressed in the Plan

Yes, (if yes, provide comments about strengths)

No, (if no, provide comments as to why)

Comments:

<p>Overview of the CRA The CRA demonstrates a <i>thorough</i> understanding and analysis of the extent to which services, supports, and other assistance are available to individuals with developmental disabilities and their families from diverse backgrounds</p>	
<p>Yes, (if yes, provide comments about strengths)</p>	<p>No, (if no, provide comments as to why)</p>
<p>Comments:</p>	
<p><u>Conclusions/Summary</u></p>	
<p><u>Strengths</u></p>	<p><u>Weaknesses</u></p>
<p><u>Compliance Concerns</u></p>	
<p><u>Section 3 Comprehensive Review and Analysis Score: (0-5)</u> 0= No information 1= Not understandable 2= Poor 3 = Basic 4= Good 5=Excellent</p>	

PART E. 5-YEAR GOALS [Section 124(4); Section 125(c)(5)]	
1. Does the plan have 5 year goals, objectives, and expected outcome listed?	
Yes, (if yes, provide comments about strengths)	No, (if no, provide comments as to why)
Comments:	
2. Self-advocacy Goal(s) and or objective(s)	
<p><i>Note: The plan must include a goal and/or objective to:</i></p> <ul style="list-style-type: none"> • Establish or strengthen a program for the direct funding of a State self-advocacy organization led by individuals with developmental disabilities; • Support opportunities for individuals with developmental disabilities who are considered leaders to provide leadership training to individuals with developmental disabilities who may become leaders; and <p><i>Support and expand participation of individuals with developmental disabilities in cross-disability and culturally diverse leadership coalitions</i></p>	
Does the plan include 1-3 Goals and/or objective to address all components of the self-advocacy requirement?	Yes / No
Yes, (if yes, provide comments about strengths)	No, (if no, provide comments as to why)
Comments:	
3. Targeted Disparity	
<p><i>Note: The plan must include a goal and/or objective that:</i></p> <p><i>Based on the findings of the comprehensive review and analysis (1) identify a subpopulation (i.e., racial, ethnic, sexual orientation, gender minority groups with developmental disabilities) vulnerable to disparities (e.g., health, education, employment, housing, etc.) (2) Identify a disparity and develop an impact statement in a targeted area of emphasis around individual/family advocacy and/or systems change; and implement strategies to decrease the differences in access, service use, and outcomes among such sub population during the course of the 5 year state plan implementation. These strategies should include evidenced based, best and/or promising practices, to the extent feasible.</i></p>	

<p>a. Does the plan include a clearly identified targeted disparity goal or objective?</p> <p>b. Is the sub-population identified?</p> <p>c. Is the disparity identified?</p> <p>d. Is the strategy to address the disparity identified?</p> <p>e. Does the targeted disparity correspond to Section III, Part C (ii) of the CRA?</p>	<p>Yes / No</p> <p>Yes / No</p> <p>Yes / No</p> <p>Yes / No</p> <p>Yes / No</p>
<p>Comments:</p>	

<p>Collaboration <i>This section is required</i></p>	
<p>1. Does the plan include a goal and/or objective on the DD Network collaborating on an effort?</p>	
<p>Yes, (if yes, provide comments about strengths)</p>	<p>No, (if no, provide comments as to why)</p>
<p>Comments:</p>	
<p>2. There is an adequate description of how, through interagency agreements or other mechanisms, the UCEDD(s) and P&A will collaborate with the Council to achieve outcomes consistent with the Council purpose?</p> <p><i>Note: This may include joint meetings, joint planning events, joint plans, joint trainings, co-sponsored events, etc.</i></p>	
<p>Yes, (if yes, provide comments about strengths)</p>	<p>No, (if no, provide comments as to why)</p>
<p>Comments:</p>	
<p>3. There is adequate description of the collaborative plans of the Council, P&A, and UCEDD(s)</p>	
<p>Yes, (if yes, provide comments about strengths)</p>	<p>No, (if no, provide comments as to why)</p>
<p>Comments:</p>	
<p>4. There is an adequate description of the plans the Council has to collaborate with the UCEDD(s). Describe plans the Council has to collaborate with the P&A?</p>	

Yes, (if yes, provide comments about strengths)	No, (if no, provide comments as to why)
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Comments:

5. There is an adequate description of how the DD Network will collaborate with other entities in the State, including both disability and non-disability organizations, as well as the State agency responsible for developmental disabilities services.

Note: Adequate description will identify the organizations and summarize the collaborative activities planned, such as joint meetings, joint public education events/initiatives, joint trainings, etc.

Yes, (if yes, provide comments about strengths)	No, (if no, provide comments as to why)
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Comments:

Conclusions/Summary

<u>Strengths</u>	<u>Weaknesses</u>

Compliance Concerns

<u>Section 3 (E) 5 Year Goals Score: (0-5)</u> 0= No information 1= Not understandable 2= Poor 3 = Basic 4= Good 5=Excellent	
Section 3(E)(LM):Logic Model	
1. A 5 year logic model of the state plan was submitted?	Yes / No
2. A 5 year logic model provides a sense of the outcomes the Council is working towards achieving at the end of the state plan cycle?	Yes / No
<u>Conclusions/Summary</u>	
Strengths	Weaknesses
Compliance Concerns	
<u>Section 3 (E) (LM) Logic Model Score: (0-5)</u> 0 = No information 1= Not understandable 2= Poor 3 = Basic 4= Good 5= Excellent	
<u>SECTION IV: EVALUATION PLAN</u> [Section 125(c)(3) and (7)]	
1. The evaluation plan (EP) clearly outlines how the Council <u>will examine the progress made</u> in achieving the goals of the State Plan to determine the extent to which the goals were achieved	
Yes, (if yes, provide comments about strengths)	No, (if no, provide comments as to why)
Comments:	

2. The EP clearly describes how the Council will assess (determine) the <u>effectiveness of the strategies used</u> that contributed to achieving the goals of the State Plan.	
Yes, (if yes, provide comments about strengths)	No, (if no, provide comments as to why)
Comments:	
3. The EP clearly describes how the Council will examine the progress made in achieving the outcomes on <u>the self-advocacy goal/objectives?</u>	
Yes, (if yes, provide comments about strengths)	No, (if no, provide comments as to why)
Comments:	
4. The EP clearly describes the process or method the Council will use to assess the information gained through evaluation to identify emerging trends and needs and/or other updates the CRA.	
Yes, (if yes, provide comments about strengths)	No, (if no, provide comments as to why)
Comments:	
5. The EP clearly describes how the Council will evaluate consumer satisfaction with Council conducted/supported activities.	
Yes, (if yes, provide comments about strengths)	No, (if no, provide comments as to why)
Comments:	
6. The EP describes the <u>methodology</u> , which may be qualitative or quantitative, that will be used to determine if the needs identified and discussed are being met and if the Council results are being achieved.	
Yes, (if yes, provide comments about strengths)	No, (if no, provide comments as to why)
Comments:	
7. The EP describes the <u>processes and/or procedures</u> the Council will use to monitor progress in meeting its goals?	
Yes, (if yes, provide comments about strengths)	No, (if no, provide comments as to why)
Comments:	

8. The EP adequately describes the Council's role in reviewing and commenting on the progress towards reaching the goals of the plan.

Yes, (if yes, provide comments about strengths)

No, (if no, provide comments as to why)

Comments:

Conclusions/Summary

Strengths

Weaknesses

Compliance Concerns

Section 4 Evaluation Plan Score : (0-5)

0 = No information

1= Not understandable

2= Poor

3 = Basic

4= Good

5= Excellent

SECTION 5: PROJECTED COUNCIL BUDGET [Section 124(c)(5) (B) and 125(c)(8)]

<p>1. The budget is broken down into three cost categories: Goals, General Management, and DSA functions for the first year of the 5 year state plan</p>	<p>Yes / No</p>
<p>2. Does the budget break down the costs associated with the goals of the plan by each goal?</p> <p><i>For example: if the Council has 5 goals, there should be 5 line items identifying the budget amount for each goal. The budget amounts for the goals may vary and should be based on the planned activities.</i></p>	<p>Yes / No</p>
<p>3. Does the budget's Part B total for goals amount to at least 70 percent of the Council total allotment?</p>	<p>AIDD Staff use only: Yes/No</p>
<p>4. Does the budget provide the amount of money provided to the DSA to carry out its functions?</p> <p><i>(Section 124(c)(5) requires that not more than 5 percent of the Council's allotment for any fiscal year, or \$50,000, whichever is less, shall be made available for total expenditures for the purposes of the DSA agency.)</i></p>	<p>Yes / No</p>
<p>5. The budget is complete and satisfactory</p>	
<p>Yes, (if yes, provide comments about strengths)</p>	<p>No, (if no, provide comments as to why)</p>
<p><u>Conclusions/Summary</u></p>	
<p>Strengths</p>	<p>Weaknesses</p>
<p>Compliance Concerns</p>	

SECTION 5: PROJECTED COUNCIL BUDGET [Section 124(c)(5) (B) and 125(c)(8)]

Section 5 Projected Council Budget Score: (0-5)

- 0= No information
- 1= Not understandable
- 2= Poor
- 3 = Basic
- 4= Good
- 5=Excellent

SECTION VI: ASSURANCES [Section [124(c)(5)(A)-(N)]

1. Have signed assurances been submitted to AIDD?	Yes / No
2. Are the Approving Officials for Assurances indicated?	Yes / No

Conclusions/Summary

Strengths	Weaknesses
Compliance Concerns	

Section 6 Assurances Score: (0-5)

- 0= No information
- 1= Not understandable
- 2= Poor
- 3 = Basic
- 4= Good
- 5=Excellent

SECTION VII: PUBLIC INPUT AND REVIEW [Section 124(d)(1)]

1. Is adequate information on how the Council received and used public input on the Plan provided?

Yes, (if yes, provide comments about strengths)

No, (if no, provide comments as to why)

Comments:

2. Is an adequate description of how the Council made the plan available for public review and comment, including how the Council provided appropriate and sufficient notice in accessible formats of the opportunity for review and comment included?

Yes, (if yes, provide comments about strengths)

No, (if no, provide comments as to why)

Comments:

3. Is an adequate description of the revisions made to the Plan to take into account and respond to significant comments provided?

Yes, (if yes, provide comments about strengths)

Not applicable (no significant comments received)

No, (if no, provide comments as to why)

Comments:

Conclusions/Summary

Strengths

Weaknesses

Compliance Concerns

Section 7 Public Input and Review Score: (0-5)

- 0= No information
- 1= Not understandable
- 2= Poor
- 3 = Basic
- 4= Good
- 5=Excellent

Section 8: Annual Work Plan for FFY 2017	
1. Is the State Plan Year identified?	Yes/No
2. Is the federal fiscal year identified?	Yes/No
3. Is the goal present?	
4. Are the expected outcomes for the goal present?	
5. Are the areas of emphasis identified?	
6. Are the strategies to be used identified?	
7. Are the areas the goal is addressing identified? (individual/family advocacy, system change, self-advocacy requirement, targeted disparity, DD Network collaboration, and capacity building)	
8. Are the planned collaborators identified?	Yes/No
9. Is there a justification for each effort of demonstration of new approaches or demonstration projects or activities+ planned for funding greater than 5 years?	Yes/No
10. Is there a logical link between the goals and the needs identified in the Comprehensive Review and Analysis?	Yes/No
Yes, (if yes, provide comments about strengths)	No, (if no, provide comments as to why)
Comment:	
11. The goal can be measured to determine whether the Council is getting closer to goal or further away from it.	
Yes, (if yes, provide comments about strengths)	No, (if no, provide comments as to why)
12. The goal(s) indicate the impact or expected 5 year outcome the Council is trying to achieve.	
Yes, (if yes, provide comments about strengths)	No, (if no, provide comments as to why)

Strategies to be used in achieving each goal	
13. The strategies checked for each goal seem appropriate to the goal, objectives and major activities	
Yes, (if yes, provide comments about strengths)	Yes, (if yes, provide comments about strengths)
Comments:	
Intermediaries/Collaborators Planned for this goal (if known):	
14. The plan identifies organizations/agencies the Council plans to work with and/or has commitments from in addressing the goal	
Yes, (if yes, provide comments about strengths)	No, (if no, provide comments as to why)
Comments:	
15. The organizations/agencies identified seem appropriate.	
Yes, (if yes, provide comments about strengths)	No, (if no, provide comments as to why)
Comments:	
Objectives/ Major Activities	
16. For each objective, major activities are identified that work towards accomplishing Council goals.	
Yes, (if yes, provide comments about strengths)	No, (if no, provide comments as to why)
Comments:	

17. The objectives include a measurement of the work to be accomplished (e.g., increase or decrease, the number of people to be trained; the number of outreach activities) or they may provide qualitative projections of the work to be accomplished (e.g., convening coalitions; researching state service models).	
Yes, (if yes, provide comments about strengths)	No, (if no, provide comments as to why)
Comments:	

Expected Outputs	
18. The Annual work plan identifies the <u>expected outputs</u> intended to be achieved for each objective?	
Yes, if yes, provide comments about strengths	No, if no, provide comments as to why
Comments:	

Expected Outcomes	
19. The Annual work plan identifies the <u>expected outcomes</u> intended to be achieved for each objective?	
Yes, if yes, provide comments about strengths	No, if no, provide comments as to why
Comments:	

Data Evaluation & Measurement	
20. The Annual work plan identifies the <u>data evaluation and measurement</u> for each objective?	
Yes, if yes, provide comments about strengths	No, if no, provide comments as to why
Comments:	

Projected Performance Measures	
21. The Annual work plan identifies the <u>projected performance measures</u> for each objective?	
Yes, if yes, provide comments about strengths	No, if no, provide comments as to why
Comments:	

Conclusions/Summary – FFY17 Work Plan	
Strengths:	Weaknesses
Compliance Concerns	
<u>Section 8 Annual Work Plan 2017</u> Score: (0-5) 0= No information 1= Not understandable 2= Poor 3 = Basic 4= Good 5=Excellent	
Conclusions/Summary – FFY18 Work Plan	

Strengths	Weaknesses
Compliance Concerns	
<u>Section 9 Annual Work Plan 2018</u> <u>Score: (0-5)</u> 0= No information 1= Not understandable 2= Poor 3 = Basic 4= Good 5=Excellent	