



## National Assistive Technology Act Data System

### Annual Progress Report - Full Report

Florida 2019

#### General Information

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

State AT Program Title: Florida Alliance for Assistive Services and Technology  
 State AT Program Title:  
 State AT Program URL: www.faast.org  
 Mailing Address: 820 E Park Ave D - 200  
 City: TALLAHASSEE  
 State: FL  
 Zip Code: 32301  
 Program Email: info@faastinc.org  
 Phone: 8504873278  
 TTY: 8505754216

#### Lead Agency

Agency Name: Florida Department of Education Division of Vocational Rehabilitation  
 Mailing Address: 4070 Esplanade Way  
 City: Tallahassee  
 State: FL  
 Zip Code: 32399  
 Program URL: vr.fldoes.org

#### 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: Florida Alliance for Assistive Services and Technology  
 Mailing Address: 820 E Park Ave D - 200  
 City: Tallahassee  
 State: FL  
 Zip Code: 32301  
 Program URL: www.faast.org

#### Program Director and Other Contacts

Program Director for State AT Program (last, first): Daniels, Michael  
 Title: Executive Director  
 Phone: 8504873278  
 E-mail: mdaniels@faastinc.org  
 Program Director at Lead Agency (last, first): Moyer, Monica  
 Title: CAMS Unit Manager  
 Phone: 8502457004  
 E-mail: Monica.Moyer@vr.fldoe.org  
 Primary Contact at Implementing Agency (last, first) Daniels, Michael  
 - If applicable:  
 Title: Executive Director  
 Phone: 8504873278  
 E-mail: mdaniels@faastinc.org

#### Person Responsible for completing this form if other than Program Director

Name (last, first): Harris, Whitney

Title: Comptroller  
 Phone: 8504873278  
 E-mail: wharris@faastinc.org

**Certifying Representative**

Name (last, first): Moye, Monica  
 Title: CAMS Unit Manager  
 Phone: 8502457004  
 E-mail: Monica.Moye@vr.fldoe.org

**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 Residence		Total
	Metro RUC 1-3	Non-Metro RUC 4-9	
Approved Loan made	37	03	40
Approved Not made	02	00	02
Rejected	27	02	29
<b>Total</b>	<b>66</b>	<b>05</b>	<b>71</b>

**2. Income of Applicants to Whom Loans Were Made**

Lowest/Highest Incomes			
Lowest Income:	\$9,000	Highest Income:	\$90,000

Average Income		
Sum of Incomes	Loans Made	Average Annual Income
\$1,189,700	40	\$29,743

Number 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	10	09	15	04	01	01	40
Percentage of Loans	25%	22.5%	37.5%	10%	2.5%	2.5%	100%

**3. Loan Type**

Loan Type		
Type of Loan	Number of Loans	Percentage of loans
<b>Revolving Loans</b>	35	87.5%
<b>Partnership Loans</b>		
Without interest buy-down or loan guarantee	00	0%
With interest buy-down only	01	2.5%
With loan guarantee only	04	10%
With both interest buy-down and loan guarantee	00	0%
<b>Total</b>	40	100%

Loan Type Summary		
Type of Loan	Number of Loans	Dollar Value of Loans
<b>Revolving Loans</b>	35	\$228,527
<b>Partnership Loans</b>	05	\$137,769
<b>Total</b>	40	\$366,296

**4. Interest Rates**

Interest Rates	
<b>Lowest</b>	5%
<b>Highest</b>	6%

Interest Rate Summary		
Sum of Interest Rates	Number of Loans Made	Average Interest Rate
218	40	5.45%

Number of Loans Made by Interest Rate	
Interest Rate	Number of loans
<b>0.0% to 2.0%</b>	00
<b>2.1% to 4.0%</b>	00

4.1% to 6.0%	40
6.1% to 8.0%	00
8.1% - 10.0%	00
10.1%-12.0%	00
12.1%-14.0%	00
14.1% +	00
<b>Total</b>	<b>40</b>

#### 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	03	\$10,875
Hearing	13	\$31,555
Speech communication	00	\$0
Learning, cognition, and developmental	00	\$0
Mobility, seating and positioning	08	\$21,511
Daily living	04	\$17,338
Environmental adaptations	02	\$31,343
Vehicle modification and transportation	14	\$155,588
Computers and related	05	\$2,432
Recreation, sports, and leisure	07	\$95,654
<b>Total</b>	<b>56</b>	<b>\$366,296</b>

#### 6. Defaults

Defaults	
Number Loans in default	01
Net loss for loans in default	\$22,240

### 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

<b>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?</b>	00
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**C. State Financing Activities that Allow Consumers to Obtain AT at Reduced Cost**

**1. Overview of Activities Performed**

<b>How many state financing activities that allow consumers to obtain AT at a reduced cost were included in your approved state plan?</b>	00
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**D. Anecdote**

Juan and Steven are twin brothers with Cerebral Palsy. They use wheelchairs for almost all mobility, only being able to walk a very short distance with a walker at times. Their favorite hobbies include fishing, hunting and taking family trips to the beach. However, their everyday powerchairs cannot typically handle these activities. Juan and Steven were able to use the FFAST New Horizon Loan Program to obtain a bank guarantee loan to purchase Action Track Chairs. Through individual loans, they were both able to qualify for a new Track Chair to give them the freedom to hunt, fish, and ride down the beach on their own. FFAST also approved the purchase of an enclosed trailer so that their family can travel with both chairs at the same time to whatever outdoor destination they plan on heading to next. The loan program has provided a significant increase to their independence, their ability to be more active outside, and the ability for their family to participate in more community and outdoor activities together.

**Impact Area**  Education  Employment  Community Living

**Impact Area**  Education  Employment  Community Living

**E. Performance Measures**

Performance Measures				
Response	Primary Purpose for Which AT is Needed			Total
	Education	Employment	Community Living	
1. Could only afford the AT through the AT program.	00	05	19	24
2. AT was only available through the AT program.	00	01	02	03
3. AT was available through other programs, but the system was too complex or the wait time too long.	00	03	01	04
4. Subtotal	00	09	22	31
5. None of the above	00	01	07	08
6. Subtotal	00	10	29	39
7. Nonrespondent	00	01	00	01
8. Total	00	11	29	40
	NaN%	81.82%	75.86%	

9. Performance on this measure

F. Customer Satisfaction

Satisfaction		
Customer Rating of Services	Number of Customers	Percent
Highly satisfied	29	72.5%
Satisfied	10	25%
Satisfied somewhat	00	0%
Not at all satisfied	00	0%
Nonrespondent	01	2.5%
<b>Total Surveyed</b>	<b>40</b>	
<b>Response rate %</b>	<b>97.5%</b>	

G. Notes:

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	139
B. Device Refurbish/Repair - Reassign and/or Open Ended Loan	930
<b>C. Total</b>	<b>1,069</b>

Performance Measure	
D. Device Exchange - Excluded from Performance Measure	00
E. Reassignment/Refurbishment and Repair and Open Ended Loans - 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
<b>F. Number of Individuals Included in Performance Measures</b>	<b>1,069</b>

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

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	01	\$20	\$0	\$20
Hearing	01	\$100	\$0	\$100

Speech Communication	02	\$80	\$0	\$80
Learning, Cognition and Developmental	00	\$0	\$0	\$0
Mobility, Seating and Positioning	252	\$53,032	\$0	\$53,032
Daily Living	201	\$17,122	\$0	\$17,122
Environmental Adaptations	08	\$375	\$0	\$375
Vehicle Modification & Transportation	00	\$0	\$0	\$0
Computers and Related	01	\$30	\$0	\$30
Recreation, Sports and Leisure	05	\$145	\$0	\$145
<b>Total</b>	<b>471</b>	<b>\$70,904</b>	<b>\$0</b>	<b>\$70,904</b>

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

Device Reassign/Repair/Refurbish and/or OEL				
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	05	\$5,600	\$3,500	\$2,100
Hearing	17	\$1,762	\$0	\$1,762
Speech Communication	06	\$775	\$0	\$775
Learning, Cognition and Developmental	00	\$0	\$0	\$0
Mobility, Seating and Positioning	770	\$204,252	\$344	\$203,908
Daily Living	447	\$40,602	\$0	\$40,602
Environmental Adaptations	24	\$2,750	\$0	\$2,750
Vehicle Modification & Transportation	04	\$3,081	\$0	\$3,081
Computers and Related	07	\$779	\$0	\$779
Recreation, Sports and Leisure	05	\$145	\$0	\$145
<b>Total</b>	<b>1,285</b>	<b>\$259,746</b>	<b>\$3,844</b>	<b>\$255,902</b>

### D. Anecdote

Natalie H is a young woman in Tampa, Florida, with Cerebral Palsy and a speech impairment. She became aware of FFAST when she met FFAST Advisory Council Member, Thom DeLilla, at an event. Natalie reached out to FFAST and expressed a need for a desktop computer. Her current computer was slow, outdated, and was not

conductive for school, work or communication with others. FFAST went to work and with the assistance of the FFAST Northwest RDC coordinator, Jesse Hansen, a donated CPU was refurbished, loaded with an operating system and provided to Natalie. FFAST was also able to send a monitor, keyboard and mouse to Natalie that the organization had received through donation. The reuse activity allowed Natalie to keep up with her schoolwork and helped to promote further independence.

Impact Area  Education  Employment  Community Living

#### E. Performance Measures

Performance Measures				
Response	Primary Purpose for Which AT is Needed			Total
	Education	Employment	Community Living	
1. Could only afford the AT through the AT program.	05	10	777	792
2. AT was only available through the AT program.	04	05	148	157
3. AT was available through other programs, but the system was too complex or the wait time too long.	00	00	50	50
4. Subtotal	09	15	975	999
5. None of the above	00	01	57	58
6. Subtotal	09	16	1,032	1,057
7. Nonrespondent	00	00	12	12
8. Total	09	16	1,044	1,069
9. Performance on this measure	100%	93.75%	93.39%	

#### F. Customer Satisfaction

Satisfaction		
Customer Rating of Services	Number of Customers	Percent
Highly satisfied	835	78.11%
Satisfied	140	13.1%
Satisfied somewhat	00	0%
Not at all satisfied	00	0%
Nonrespondent	94	8.79%
Total Surveyed	1,069	
Response rate %	91.21%	



**G. Notes:**

**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**

<b>Loans By Purpose</b>	
<b>Primary Purpose of Short-Term Device Loan</b>	<b>Number</b>
<b>Assist in decision-making (device trial or evaluation)</b>	1,815
<b>Serve as loaner during service repair or while waiting for funding</b>	232
<b>Provide an accommodation on a short-term basis for a time-limited event/situation</b>	492
<b>Conduct training, self-education or other professional development activity</b>	892
<b>Total</b>	<b>3,431</b>

**B. Short-Term Device Loan by Type of Borrower**

<b>LOANS By Borrower Type</b>	
<b>Type of Individual or Entity</b>	<b>Number of Device Borrowers</b>
<b>Individuals with Disabilities</b>	952
<b>Family Members, Guardians, and Authorized Representatives</b>	702
<b>Representative of Education</b>	197
<b>Representative of Employment</b>	68
<b>Representatives of Health, Allied Health, and Rehabilitation</b>	1,429
<b>Representatives of Community Living</b>	49
<b>Representatives of Technology</b>	34
<b>Total</b>	<b>3,431</b>

**C. Length of Short-Term Device Loans**

<b>Length of Short-Term Device Loan in Days</b>	35
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**D. Types of Devices Loaned**

<b>Types of Devices Loaned</b>	
<b>Type of AT Device</b>	<b>Number</b>

<b>Vision</b>	732
<b>Hearing</b>	169
<b>Speech Communication</b>	1,397
<b>Learning, Cognition and Developmental</b>	237
<b>Mobility, Seating and Positioning</b>	150
<b>Daily Living</b>	438
<b>Environmental Adaptations</b>	228
<b>Vehicle Modification and Transportation</b>	13
<b>Computers and Related</b>	1,917
<b>Recreation, Sports and Leisure</b>	117
<b>Total</b>	5,398

**E. Anecdote**

CIL Disability Resource Center (CILDRC) had a table at Publix to sell tickets for a fundraiser. Jamie was struggling using a walker to walk up to the store, CILDRC staff asked her if she needed help. The team helped her and provided her with information on what programs CILDRC has to offer. She immediately got excited about how the FAAST program could help her. She later came into CILDRC and met with an Independent Living Specialist (ILS) and the Assistive Technology Program Specialist (ATPS) for the Gulf Coast Regional Demonstration Center. They were able to loan her a manual wheelchair for her to use. While she was leaving, the staff became aware of her struggle to lift her leg into her car. The ILS and ATPS brought out a Leg Lifter; this low-tech assistive technology will help her to remain independent by using it to get her legs into the car with just a bit of effort. She was very happy borrowing both the wheelchair and the Leg Lifter. These devices have changed her life, and she wants to share it with everyone

Impact Area  Education  Employment  Community Living

**F. Access Performance Measures**

Access Performance Measures				
Response	Primary Purpose for Which AT is Needed			Total
	Education	Employment	Community Living	
<b>Decided that AT device/service will meet needs</b>	710	187	723	1,620
<b>Decided that an AT device/ service will not meet needs</b>	13	03	18	34
<b>Subtotal</b>	723	190	741	1,654
<b>Have not made a decision</b>	51	01	33	85
<b>Subtotal</b>	774	191	774	1,739

<b>Nonrespondent</b>	38	09	29	76
<b>Total</b>	812	200	803	1,815
<b>Performance on this measure</b>	93.41%	99.48%	95.74%	

### G. Acquisition Performance Measures

<b>Acquisition Performance Measures</b>				
Response	Primary Purpose for Which AT is Needed			Total
	Education	Employment	Community Living	
1. Could only afford the AT through the AT program.	277	34	161	472
2. AT was only available through the AT program.	91	30	146	267
3. AT was available through other programs, but the system was too complex or the wait time too long.	55	10	51	116
4. Subtotal	423	74	358	855
5. None of the above	350	02	57	409
6. Subtotal	773	76	415	1,264
7. Nonrespondent	250	02	100	352
8. Total	1,023	78	515	1,616
9. Performance on this measure	54.72%	97.37%	86.27%	

### H. Customer Satisfaction

<b>Satisfaction</b>		
Customer Rating of Services	Number of Customers	Percent
Highly satisfied	2,420	70.53%
Satisfied	112	3.26%
Satisfied somewhat	10	0.29%
Not at all satisfied	02	0.06%
Nonrespondent	887	25.85%
Total Surveyed	3,431	
Response rate %	74.15%	

**I. Notes:****Device Demonstration****A. Number of Device Demonstrations by Device Type**

Type of AT Device / Service	Number of Demonstrations of AT Devices / Services
Vision	139
Hearing	55
Speech Communication	364
Learning, Cognition and Developmental	171
Mobility, Seating and Positioning	56
Daily Living	162
Environmental Adaptations	36
Vehicle Modification and Transportation	04
Computers and Related	83
Recreation, Sports and Leisure	17
<b>Total # of Devices Demonstrated</b>	<b>1,087</b>

**B. Types of Participants**

<b>Demonstrations by Participant Type</b>	
Type of Participant	Number of Participants in Device Demonstrations
Individuals with Disabilities	1,204
Family Members, Guardians, and Authorized Representatives	800
Representatives of Education	156
Representatives of Employment	27
Health, Allied Health, Rehabilitation	754
Representative of Community Living	149
Representative of Technology	273
<b>Total</b>	<b>3,363</b>

**C. Number of Referrals**

<b>Referrals</b>	
<b>Type of Entity</b>	<b>Number of Referrals</b>
<b>Funding Source (non-AT program)</b>	05
<b>Service Provider</b>	152
<b>Vendor</b>	375
<b>Repair Service</b>	00
<b>Others</b>	00
<b>Total</b>	532

#### D. Anecdote

A young man, diagnosed with ASD came to the South Florida Regional Demonstration Center (SFRDC) along with his mother to preview assistive technology (AT) that could help him expand his communication abilities. During their visit, the consumer and his mother took part in our AT Demonstration Program. The SFRDC staff demonstrated an array of AT to help with communication. The team demonstrated the following devices: LAMP Words for Life, Proloqu2Go, and TouchChat. After trying them, the consumer decided that the LAMP Words for Life application would be the item that would best suit his needs. The consumer participated in the loan program and obtained the software on their own at the end of the trial.

**Impact Area**  Education  Employment  Community Living

#### E. Performance Measures

<b>Performance Measures</b>				
<b>Response</b>	<b>Primary Purpose for Which AT is Needed</b>			<b>Total</b>
	<b>Education</b>	<b>Employment</b>	<b>Community Living</b>	
<b>Decided that AT device/service will meet needs</b>	351	155	515	1,021
<b>Decided that an AT device/ service will not meet needs</b>	02	00	03	05
<b>Subtotal</b>	353	155	518	1,026
<b>Have not made a decision</b>	29	02	25	56
<b>Subtotal</b>	382	157	543	1,082
<b>Nonrespondent</b>	03	01	01	05
<b>Total</b>	385	158	544	1,087
<b>Performance on this measure</b>	91.69%	98.1%	95.22%	

#### F. Customer Satisfaction

Satisfaction		
Customer Rating of Services	Number of Customers	Percent
Highly satisfied	3,133	93.16%
Satisfied	228	6.78%
Satisfied somewhat	02	0.06%
Not at all satisfied	00	0%
Nonrespondent	00	0%
Total	3,363	
Response rate %	100%	

## G. Notes:

## Overall Performance Measures

## Overall Acquisition Performance Measure

Acquisition Performance Measures				
Response	Primary Purpose for Which AT is Needed			Total
	Education	Employment	Community Living	
1. Could only afford the AT through the AT program.	282	49	957	1,288
2. AT was only available through the AT program.	95	36	296	427
3. AT was available through other programs, but the system was too complex or the wait time too long.	55	13	102	170
4. Subtotal	432	98	1,355	1,885
5. None of the above	350	04	121	475
6. Subtotal	782	102	1,476	2,360
7. Nonrespondent	250	03	112	365
8. Total	1,032	105	1,588	2,725
9. Performance on this measure	48.21%	82.52%	84.21%	72.27%
ACL Performance Measure				85%
Met/Not Met				Not Met

## Overall Access Performance Measure

Access Performance Measures				
Response	Primary Purpose for Which AT is Needed			Total
	Education	Employment	Community Living	
Decided that AT device/service will meet needs	1,061	342	1,238	2,641
Decided that an AT device/ service will not meet needs	15	03	21	39
<b>Subtotal</b>	1,076	345	1,259	2,680
Have not made a decision	80	03	58	141
<b>Subtotal</b>	1,156	348	1,317	2,821
Nonrespondent	41	10	30	81
<b>Total</b>	1,197	358	1,347	2,902
Performance on this measure	92.84%	98.85%	95.52%	94.83%
ACL Performance Measure				90%
Met/Not Met				Met

#### Overall Satisfaction Rating

Customer Rating of Services	Percent	ACL Target	Met/Not Met
Highly satisfied and satisfied	99.80%	95%	Met
Response Rate	87.57%	90%	Not Met

#### Training

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

Training by Participant Type	
Type of Participant	Number
Individuals with Disabilities	4,121
Family Members, Guardians and Authorized Representatives	1,824
Representatives of Education	795
Representatives of Employment	142
Rep Health, Allied Health, and Rehabilitation	4,261
Representatives of Community Living	884

<b>Representatives of Technology</b>	216
<b>Unable to Categorize</b>	1,191
<b>TOTAL</b>	13,434

<b>Geographic Distribution of Participants</b>			
<b>Metro</b>	<b>Non Metro</b>	<b>Unknown</b>	<b>TOTAL</b>
10,485	2,949	00	13,434

**B. Training Topics**

<b>Trainings by Topic</b>	
<b>Primary Topic of Training</b>	<b>Participants</b>
<b>AT Products/Services</b>	11,816
<b>AT Funding/Policy/ Practice</b>	79
<b>Combination of any/all of the above</b>	470
<b>Information Technology/Telecommunication Access</b>	116
<b>Transition</b>	953
<b>Total</b>	13,434

**B. Description of Training Activities**

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

A woman in her 30s, diagnosed dysarthria, came to the South Florida Regional Demonstration Center to receive training on a communication system utilizing head tracker as a means of access. The consumer is using an Accent 1000 with NuPoint. During the training, the consumer asked particular questions about the vocabulary systems available on the device, how to customize the vocabularies, how to access the computer to use other features. The consumer learned how to do these features and how to complete them independently using head tracking.

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

During the Family Café 2019, FAAST staff led an Assistive Technology Transition Training. Topics include Early Steps, Project 10, and obtaining assistive technology through Vocational Rehabilitation for post-secondary education and the workforce. Early Steps is a program of the Florida Department of Health. Early Steps can provide some assistive technology to their students for educational purposes. After a short discussion with the audience, the staff determined that the audience members had young children, which drove the focus of the training to Early Steps and SB 772: AT Follows a Child. After briefly discussed Project 10 and Vocational Rehabilitation. As previously stated, I briefly discussed Project 10: The Transition Education Network. This program's primary focus is to provide school districts with tools to be able to assist students with disabilities in post-secondary education planning. I continued to explain that planning for post-secondary education can include assistive technology, and FAAST Inc. can help with assistive technology needs. The training presentation concluded by going over how to transition into the workforce with assistive technology as a Vocational Rehabilitation client. Vocational Rehabilitation can provide assistive technology if it is needed to complete post-secondary education and the workforce. Staff went over the application process and what to expect when working with Vocational Rehabilitation.

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

FAAST provided training on Accessible Microsoft Word Documents to eight Individuals. Most of the participants present were k-12 educators. The attendees were very engaged and asked questions. After the training, several participants asked for copies of the materials to share with their colleagues. The recording of the training was later posted on our YouTube Channel to share with others that want to learn how to create accessible Word documents.



**D. IT/Telecommunications Training Performance Measure**

<b>IT/Telecommunications Training Performance Measure</b>	
<b>Outcome/Result From IT/Telecommunications Training Received</b>	<b>Number</b>
<b>IT and Telecommunications Procurement or Dev Policies</b>	01
<b>Training or Technique Assistance will be developed or implemented</b>	43
<b>No known outcome at this time</b>	72
<b>Nonrespondent</b>	00
<b>Total</b>	116
<b>Performance Measure Percentage</b>	37.9%
<b>ACL Target Percentage</b>	70%
<b>Met/Not Met</b>	Not Met

**E. Notes:****Technical Assistance****A. Frequency and Nature of Technical Assistance**

<b>Technical Assistance by Recipient Type</b>	
<b>Education</b>	0%
<b>Employment</b>	0%
<b>Health, Allied Health, Rehabilitation</b>	0%
<b>Community Living</b>	77%
<b>Technology (IT, Telecom, AT)</b>	23%
<b>Total</b>	100%

**B. Description of Technical Assistance**

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

The Assistive Technology Advisory Council has been meeting to discuss the current service delivery model to find new and better ways to provide more services to Floridians.

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

FAAST secured a grant to assist individuals with Spinal Cord Injuries to transition into a more independent living situation. This grant will provide, train, and demonstrate smart home devices to Individuals and their caregivers. These devices include commercially available environmental adaptations such as Smart Home and Home automation devices to live a more independent lifestyle.

**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 quantitative numbers are available regarding the reach of the activity, please provide those: however, quantitative data is not required.

1. FAAST had the opportunity to speak to a group of young advocates about Assistive Technology and the many ways it is able to help people from every stage of life and in many different ways. The presentation shared how FAAST resources can help them find assistive technology that will fit their needs.
2. This year, FAAST was able to send a large amount of printed information to a wide range of professionals such as Speech-Language Pathologists, Rehab Specialists, Audiologists, and more for them to be able to better share what resources are available, with their customers.

## Information And Assistance

Information And Assistance Activities by Recipient			
Types of Recipients	AT Device/ Service	AT Funding	Total
Individuals with Disabilities	1,029	141	1,170
Family Members, Guardians and Authorized Representatives	828	93	921
Representative of Education	147	02	149
Representative of Employment	46	01	47
Representative of Health, Allied Health, and Rehabilitation	747	26	773
Representative of Community Living	275	12	287
Representative of Technology	33	04	37
Unable to Categorize	32	00	32
<b>Total</b>	<b>3,137</b>	<b>279</b>	<b>3,416</b>

### Notes:

### State Improvement Outcomes

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?	01
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#### A. 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.

FAAST received a grant from the Christopher and Dana Reeves Foundation to host three regional events that promoted access to and awareness of recreational AT in rural communities.

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 policies, practices and procedures, explain why.)

A training was created this year to educate Floridians on how to obtain funding to purchase recreational AT. This presentation can be obtained by emailing Matt Holloway at mholloway@faastinc.org.

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

Community Living

**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.

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 policies, practices and procedures, explain why.)

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

**Additional And Leveraged Funds**

**Additional and Leveraged Funds**

<b>Did you have Additional and Leveraged Funding to Report?</b>	Yes
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**A. Leveraged Funding for State Plan Activities**

<b>State Plan Activities</b>		
Fund Source	Amount	Use of Funds
State Appropriations	\$214,622	Public Awareness, I&A
State Appropriations	\$103,976	Device Loan
Federal	\$136,000	Training
State Appropriations	\$72,178	Training
State Appropriations	\$53,639	Demonstration
Federal	\$14,000	Device Loan
Amount: \$594,415		

**B. Leveraged Funding for Activities Not in State Plan (data not previously reported in other activity sections)**

<b>Non-State Plan Activities</b>				
Fund Source	Amount	Use of Funds	Individuals Served	Other Outcome

**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).**

No unique issues to report.

