**Selected Q & A from WIOA Webinars**

*ILRU NOTE: Following are answers to questions selected by ACL from among questions submitted from CILs and SILCs prior to January 26 and 27 for answers during the webinars. More Q & A will be posted addressing additional questions.*

# [Webinar on Workforce Innovation and Opportunity Act (WIOA) and Independent Living for CILs, January 26, 2015](http://www.ilru.org/training/workforce-innovation-and-opportunity-act-wioa-and-independent-living-for-cils)

# [Webinar on Workforce Innovation and Opportunity Act (WIOA) and Independent Living for SILCs, January 27, 2015](http://www.ilru.org/training/workforce-innovation-and-opportunity-act-wioa-and-independent-living-for-silcs)

**Response to SILC QUESTIONS**

**Is the requirement that funds for the DSE be limited to 5% of the Part B funds already in effect? If not, when will it be in effect? Slide 8**

The Workforce Innovation and Opportunity Act of 2014 (WIOA), P.L. 113-128, transfers the Independent Living Services and Centers for Independent Living programs funded under title VII, Chapter 1, of the Rehabilitation Act of 1973 (Rehabilitation Act) from the Rehabilitation Services Administration (RSA), Department of Education, to the Administration for Community Living (ACL), Department of Health and Human Services (HHS). Technical Assistance to the Independent Living (IL) programs, issued September 30, 2014[[1]](#footnote-1) (Technical Assistance) and is posted on the ACL website, explains that ACL is providing policy, legal, and programmatic direction throughout this transition.

As indicated in the Technical Assistance, a State Plan for Independent Living (SPIL) has already been approved in each State through fiscal year 2016. To ensure the orderly transition of the IL programs to ACL, HHS will not require Designated State Units, State Independent Living Councils or centers for independent living to implement the new IL provisions of WIOA until such provisions have been incorporated into a SPIL.

A state may submit an amended SPIL to reflect the new WIOA requirements at any time, but no later than July 1, 2016, to ensure that the state has an approved SPIL for the period beginning in fiscal year 2017.  We strongly encourage stakeholders to take advantage of this time to proactively engage in a collaborative strategic planning process with all interested parties around the development of a SPIL that incorporates the new WIOA provisions and addresses the unique needs in each state.  The Technical Assistance describes the process a State must follow if it chooses to amend its SPIL.

Questions, concerns, or suggestions regarding WIOA implementation or the IL programs may be submitted to ACL at [wioa@acl.hhs.gov](mailto:wioa@acl.hhs.gov). Grant-specific questions should be directed to the IL program staff at RSA assigned to the particular grant.

**WIOA provides that the DSE be designated in the SPIL and be one of the signers of the SPIL. Will there be any other clarification on expectations for this entity?**

In general terms, the role and responsibilities of the DSE includes responsibility to receive, account for, and disburse federal funds  . DSEs still have the responsibility to develop the SILC resource plan in conjunction with the SILC, provide administrative support services to the ILS program, provide written assurances on a number of things for which they are responsible, administrating contracts and various recordkeeping and reporting requirements. This is one rationale for the DSE director’s signature on the SPIL after it is developed.  There will be policy guidance to clarify this development since the DSE will haveresponsibility for the funds that are used to implement SPIL goals and objectives.  Keeping this responsibility in mind, if entities are approached to consider being a DSE,  the DSE roles and responsibilities should be shared to ensure those entities are informed of what’s required and what to expect.

**What is the process if a SPIL needs to be amended to change the DSE? How long does the approval take?**

WIOA has not materially changed the process to amend SPILs. States are encouraged to begin identifying the changes that may occur in the State Plan resulting from WIOA and be prepared to move forward on those changes in the next SPIL cycle. For example, if a state chooses to change its DSE, this is considered a substantive change to the State Plan and will require a SPIL amendment. Please keep in mind that not all changes to the SPIL should wait until the next SPIL cycle. You should work directly with your IL Unit staff member to identify appropriate timing and ensure the requirements for a SPIL amendment are met.

Not all changes to the SPIL, because of WIOA or otherwise, necessarily will require an amendment. If the change is not substantive, an administrative change may be appropriate. Let me take the time to remind you of what requires an amendment vs. an administrative change.

SPIL Amendments

SPIL amendments are changes to the SPIL that result in a significant and relevant change in the information in, or operation of, the SPIL and require public hearings, e.g., changes in the SPIL objectives; changes in the designation of unserved or underserved areas and the priorities for serving those areas; or changes in the distribution method of, or formula for distributing excess funds to centers.

SPIL Administrative Changes

SPIL administrative changes are changes to the SPIL that do not constitute a significant or relevant change in the information in, or operation of, the SPIL, and do not require public hearings, but that are necessary in order to reflect correctly changes that have occurred in practice. e.g., (1) including a funding formula that had been included in previous SPILs but was left out of the approved SPIL; or (2) the entity performing a SPIL objective changes, but the objective itself remains the same.

It is difficult to answer how long the approval process will take. We can say that once the State has completed all the requirements necessary for either an amendment or administrative change, the IL Unit will move the process forward as quickly as possible.

**Response to CIL QUESTIONS**

**Will all CILs be required to provide all three aspects of transition as the fifth core service (youth services, services to those at risk of institutionalization, and services to transition from institution to community)? Slide 15**

The Rehabilitation Act requires every CIL to provide each of the IL core services. WIOA has added a new 5th core service that includes 3 subparts: transition out of institutions, diversion from institutions and post- secondary youth transition. We will be looking for your input on what this means to you and how these services may be implemented and evaluated.

You can expect guidance from ACL in the future on these issues , including guidance for tracking, documenting and reporting on each of the core services in the 704 Report. We welcome input from the IL community on this issue and encourage you to send your comments to [wioa@acl.hhs.gov](mailto:wioa@acl.hhs.gov)

**What will be the impact on the 704 reports and when do we need to make changes in our data collection systems for the fifth core service?**

The 704 Part I and Part II instruments were in a revision process prior to the passage of WIOA, which included working closely with an external stakeholder group to develop a more user friendly, streamlined report. Because the need for changes had been previously identified and WIOA resulted in the need for additional changes, the 704 revision effort will continue with the transition to ACL. Several new stakeholders have been added to the workgroup and meetings will continue in February.

The current 704 instrument expires June 2017. This means the current template or a revised 704 template will need to go through the clearance process to capture data. It has not yet been determined if a new template will be ready for clearance at that time. However, guidance has been issued that explains where 5th core services can be reflected in the current 704 instrument. We will provide this guidance again with the webinar materials that will be available on the ILRU website.

When and how you make changes to your data collection systems will vary depending on your particular circumstances. We can say that when a new 704 template is cleared, training and guidance will be provided prior to the data collection process.

**Which Centers are eligible to vote for/sign off on the SPIL. Part C only? Part B only? Parts B and C? Organizations that meet the definition of a CIL but do not receive federal funding? Can Part B centers be considered part of the 51% of CILs that will be voting on the SPIL?**

Currently, CILs that receive Part C funding and those that receive a combination of both Parts C and Part B funding are recognized as centers under the IL program. However, resulting from WIOA, this is an area where ACL will consider new definitions and provide future clarification to grantees.

For now, organizations that provide IL services may participate in SPIL development activities as stakeholders, but only those CILs that receive Part C or a combination of Parts C and Part B funding are considered CILs for SPIL signature purposes.

DSEs have already been notified about the new requirement but for now, the existing process will remain in effect until ACL issues regulations and guidance.

1. *Technical Assistance on the Independent Living Programs and Informational Update Regarding the Transition from the Department of Education to ACL*, (September 30, 2014), <http://www.acl.gov/NewsRoom/NewsInfo/2014/2014_09_29.aspx>. [↑](#footnote-ref-1)