



Minnesota Statewide  
Independent Living Council



# MINNESOTA STATEWIDE INDEPENDENT LIVING COUNCIL

## 2021 ANNUAL REPORT

OCTOBER 1, 2020 — SEPTEMBER 30, 2021



## LETTER FROM THE MNSILC CHAIR

### Innovation and Resiliency in Extraordinary Times

Welcome to Minnesota's Independent Living Network annual report on independent living programs and services. The Independent Living Network consists of Minnesota's Independent Living Council (MNSILC), the Centers for Independent Living (CILs), State Services of the Blind (SSB), the Designated State Entity – the Department of Employment and Economic Development/ Vocational Rehabilitation Services (DSE- DEED/VRS) and numerous partners and stakeholders.

MNSILC members are appointed by the governor and, along with the CILs, are tasked with developing a statewide independent living plan addressing the needs of people with disabilities.

In Minnesota there are eight CILs whose staff provide direct services to state residents of all ages and disabilities. Each Center has unique services based on the needs of residents in their catchment area. They are federally mandated to provide five core services: advocacy, information and referral, independent living skills, peer support and mentoring, and transition.

Each of the past several annual reports highlighted one of the five core services. This year, because of the extreme circumstances, MNSILC and the CILs had to change their methods of doing business and providing services. This annual report highlights the innovation and resiliency they've demonstrated in these extraordinary times.

Because many people who live with a disability experience more isolation than the general public, it was imperative that the CILs develop alternative methods of contacting and providing services to consumers. In this report you will find stories about the ways the Centers adapted to ensure that consumers always had access to the services they needed, stories about supplying technology or necessary supplies and personal protective equipment (PPE), stories about collaboration with other agencies to ensure that services were not interrupted, and stories about frontline staff modifying their duties to meet consumer needs. The stories speak to the efficiency, thoroughness, and compassion our Centers exhibited during this trying time.

MNSILC also had to adjust its method of doing business and gathering information. The Council used technology to meet, discuss, and work on necessary business and recruit and train new members. We also developed a Facebook page to conduct surveys and gather information from the disability community across the state.

I am extraordinarily honored to have been part of Minnesota's Independent Living Network. Please enjoy the stories and information included in this year's annual report.

Gratefully,

*Anita Olson*



*Anita Olson, MNSILC Chair*



1309 East 40th Street

## CONCEPTUALIZING NEW WAYS TO SERVE THE COMMUNITY

As 2020 came to an end, the theme that emerged was one of resiliency and what it means to be resilient. Going into 2020 we anticipated a year filled with life and celebration in the new decade. We had plans and goals. We were gearing up for the 2020 Census, the election, the 30th birthday of the ADA, and Access North's 35th year as an agency. What came instead no one was prepared for. From a psychological standpoint, resilience identifies as the ability to mentally or emotionally cope with a crisis. This means using our personal assets and skills built over the years to protect ourselves from the negative effects of a stressor, or "the capacity to recover quickly from difficulties." As if a global pandemic wasn't enough to test our resiliency skills, we had an emotionally charged society and politically divided nation to boot. It was, needless to say, a rough year. But we as a CIL have a lot to be proud of.

The Access North team went right to work on conceptualizing ways to serve our consumers and the greater disability community. This is a time where CILs shine. We are the platform, we are the voice, we are essential, and it was time to put our personal assets and skills to the test. We focused on how our consumers and the entire disability community might be affected by this sudden and severe change to our "normal" lives. To gather this information, we simply called more than 1,000 consumers to check in and see how they were doing, how they were coping, and what they needed. This information helped to focus our work during the pandemic. Mitigating isolation, connecting individuals to basic needs including PPE, ensuring home accessibility (physical and environmental), and systems advocacy efforts were going to be crucial to those we serve.

To reduce isolation, Access North put in place technology that would help the team have better connection to our consumers and community. We added two professional Zoom accounts to utilize for consumer appointments and virtual groups. We offered several groups including Doodle Me This (a positive space for young adults with disabilities to express themselves through drawing), Introduction to Self-Advocacy, and Circle of Friends Virtual Hang. We also offered consumers the opportunity to adopt an outdoor garden plot in our Hibbing and Walker locations for individuals to get outside safely in a healthy and productive way. We learned that offering Groups and Classes in a different way also allowed the team to creatively think of how we can offer groups in the future.

Virtual platforms such as Zoom allowed us to directly connect with consumers. We also utilized our virtual accounts internally, allowing our staff to stay connected when it wasn't safe to be together in person. Connectivity is such an important aspect of providing successful services and having a successful team. The IL Team began meeting weekly as opposed to once monthly and we met with all staff on weekly COVID-19 updates. We also took the opportunity to stay connected on a national level attending ILRU and ADA forums related to the pandemic.

We became familiar with virtual platforms such as Zoom and Google Hangs, and we added a new phone system that routed calls directly to our cell phones. By keeping our offices staffed by reception throughout the day, and by using the new phone technology, we were able to continue providing services without interruption. To engage a larger population, we used social media to post important messages related to COVID-19 and as a place to educate people about our services. Instead of hosting an in-person 35th anniversary celebration we used social media to celebrate the disability community and its history by highlighting different disability topics for 35 days in a row. We called it “Access North’s 35th Anniversary – 35 Days of Inclusive Messaging”.

We discovered right away that not everyone has good internet access and reliable technology, especially in the rural areas across our 10-county region, and that helping our communities access the internet and get access to technology would be extremely important. Access North provided Samsung tablets to 100 individuals through our Assistive Technology Lending Library and gave 25 prepaid hotspots to consumers who needed access for work, medical appointments, staying connected with family and friends.

We also continued in-person services when it made sense and was safe to do so. Not everyone we served benefited in reaching their goals through virtual means. Safety protocols were established for staff to meet with consumers in their homes or at our offices.

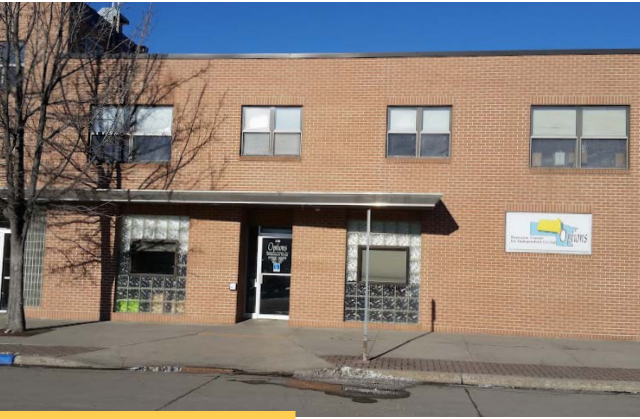
Many of our consumers lacked adequate access to household items such as laundry soap, band aids, batteries, sanitizing wipes, toilet paper, and PPE. We put together and distributed 300 care packages, filled to the brim with essential items, and delivered them right to our consumer’s doors. It was a tangible way to feel like we could be a help to them during a seemingly hopeless time. The care packages were such a success we eventually were able to open outdoor pantries in our Hibbing, Brainerd, and Walker locations. Pantries are open and available to those in need 24 hours a day. The pantries have been a wonderful addition and a needed benefit to our communities.

We realized how valuable our home access and assistive technology programs are for helping individuals stay in their homes and out of hospitals and nursing facilities. These programs became vital to individual safety during the COVID-19 pandemic, and we continued to provide these services throughout the year.

On a systems advocacy level we continued to ensure equitability for our disability communities. Access North was able to partner with the Minnesota Department of Health as a COVID Community Coordinator. A designated staff kept our consumers and the community informed on up-to-date information on the pandemic and offered information and referral services, including information about testing and vaccine sites and ensuring that physical and environmental accommodations were granted for those in need. We also assisted seniors to physically sign up for the vaccine when access and use of the internet proved to be a barrier for our elder populations. We also looked at the system barriers, such as transportation options, regarding testing and vaccinations sites.

As you can see, Access North as a CIL was extremely resilient during this time. But is this time really over? Resilience also means the ability to “spring back to shape”. Now, I know that this doesn’t exactly refer to the human experience as much as it does to a physical object but, one could argue the human psyche also offers the ability to “spring back”. As our communities reopen and the health restrictions are lifted, we enter the second stage of resiliency, bouncing back to “normal”. The need for resiliency continues as we face challenges ahead and only time will tell how it will look as we come out the other side.

**“ We realized how valuable our home access and assistive technology programs are for helping individuals stay in their homes and out of hospitals and nursing facilities. ”**



### INNOVATION AND RESILIENCY DURING COVID-19

Independent Lifestyles, Inc. – A Center for Independent Living was a fierce provider and advocate for people with all disabilities during this unprecedented pandemic. While many organizations shut down, or slowed down, ILICIL sped up. We developed and designed new ways for employees to work virtually, we developed videos, emails, and new outreach media methods to stay in touch with consumers and keep them informed of their rights and choices. ILICIL provided THREE rounds of PPE supplies and one Thanksgiving dinner to over 1,000 consumers. In addition, ILICIL took on new roles with CARES

funding and with the Minnesota Department of Health to ensure people with disabilities were educated, connected, and informed. We assisted hundreds of consumers in getting vaccinated and gave them the tools, resources and advocacy and support to maintain their independence and function during these incredibly frightening and difficult times. For many, it was a pause. For us, we hit the accelerator and have not stopped!

Here are some of the creative ways that ILICIL found to stay engaged and provide services during this unprecedented time:

- We created several new videos ranging from exercise to nutrition to socialization to reach out and interact with consumers.
- We did the videos, remained in constant contact, and provided several rounds of PPE supplies.
- Our staff felt proud to be a part of the remaining front line and to continue to serve consumers. They also had to cope with their own fears around COVID and protecting themselves and their families.
- We were able to continue to meet the needs of consumers with five core services. We never shut down. Much was on the phone and virtual and in videos and emails.

## Metropolitan Center for Independent Living (MCIL)

### INNOVATIONS, RESILIENCY, AND INSTANT ADAPTATION

All Metropolitan Center for Independent Living (MCIL) staff were affected by a rapid switch to remote work at the start of the COVID-19 pandemic, but none were so obviously and completely affected as the administrative staff, particularly those who cover the front desk. Positions we believed could not be done remotely quickly moved to working mostly from home when the facility was closed to the public and essential staff transitioned to working remotely for public health safety purposes. Cell phones, a phone system app, and a laptop, suddenly made it possible for “front desk” coverage to be done remotely. There was never any question that our admin staff are essential for the successful operation of the business. But it has never been clearer that, as the “faces of MCIL” and first point of contact for visitors and partners, admin staff were asked to instantly adapt to huge changes and keep things running.

Admin staff began calling housing properties from a master list to determine who had openings for housing consumers and assigning referrals to program staff. Staff who worked in the office for limited hours (with thorough protocols in place to ensure safety), often found their duties shifting as they were inundated with requests from remote workers to check on a physical file in the office, print something and mail it, or even being asked to rescue houseplants. This drove home how much we all rely on the administrative staff.

MCIL staff felt the loss of social interactions that occur when coworkers see each other in the office every day. Some teams pivoted to daily or weekly check-ins from a usual monthly meeting. Some of this helped to quickly adapt to fast-moving public health or regulatory changes, and some served to stave off isolation and loneliness. Teams such as the CADI case management team also increased their amount of contact with consumers for the same reasons, either by phone or by video conferencing. This allowed case managers to hear in real-time if their consumers had urgent needs that arose from the pandemic or civil unrest. Many consumers were isolated and cut off from usual supports, and case managers, advocates and direct service professionals had to brainstorm how to help them get even their basic needs met in a constantly changing and unprecedented environment.

With most employees working from home during the pandemic, many interactions that would normally be face-to-face became phone calls and video meetings. In some cases, this was convenient for consumers; no one had to leave their location to drive anywhere. Still, it was not always an easy change. Some consumers did not have easy access to extra cell phone minutes or the technology and internet access necessary to have a Zoom meeting. There was a level of planning and sequencing required to ensure that meetings went well that was sometimes overwhelming – did the consumer need the paperwork mailed because they don't have a printer? How easily could a deaf consumer, an interpreter, and an MCIL staff connect virtually, and then conference in a representative from Social Security? Was there anything an advocate could do to help a person learn to use public transportation while both staff and consumer connected over Zoom from back bedrooms-turned-offices, miles apart? Things didn't always go as planned but everyone worked extremely hard to make things succeed.

MCIL developed a new team during the pandemic in response to the crisis, formed in partnership with the Minnesota Department of Health (MDH) and other agencies. The COVID Community Coordinators worked to deliver up-to-date news on COVID testing, vaccines, and policy to the disability community, and to give MDH information about the needs of the disability community to increase accessibility and equitable access to resources such as PPE, tests, and vaccines. They identified gaps in services, such as the inability for homebound individuals to get to large public events for vaccinations. MCIL worked with other Centers for Independent Living, disability organizations, other culturally specific organizations, public health agencies, and governmental agencies and we hope these new efforts will continue. The importance of public health policy to the disability community is increasingly clear.





### A WHOLE NEW APPROACH – IN PAJAMAS OR IN FULL PPE

As it has been with all people and enterprises throughout the world, the pandemic has forced Southeastern MN Center for Independent Living (SEMCIL) to approach our work differently. Fortunately, SEMCIL was in a strong position to bring our work home and our team did an excellent job attempting to connect with and support people with disabilities throughout Southeast Minnesota.

While there are many accomplishments, stories of resiliency, and innovations that our team played a role in, to single out one over another is to state one as being more important than those that were

not listed. All the hurdles that were overcome, PPE provided, driving permits earned, new homes, jobs, opportunities, and everything else that the team at SEMCIL supported in the past year was done in the face of difficulty. For that, thank you. Thank you for coming to work, whether in your pajamas from your home or in full PPE. Thank you for bringing out the best in yourselves and your colleagues. Thank you for always putting our consumers first.

Thank you,

Jacob Schuller  
Executive Director  
Southeastern MN Center for Independent Living, Inc.

## Southwestern Center for Independent Living (SWCIL)

### FINDING MULTIPLE WAYS TO MEET LOCAL NEEDS

To meet local IL needs (both independent of and created by the pandemic) and to continue offering the five core services throughout the pandemic SWCIL conducted community needs assessments to respond to IL needs affected by the pandemic. Out of these assessments, conducted during the spring and fall of 2020, came opportunities to respond with information and resource requests, conduct check-ins with consumers requesting this service, and mail basic needs supplies to consumers including toiletries, thermometers, cleaning supplies, and masks (including children's masks). Through these assessments SWCIL was also able to work with individuals with disabilities requesting assistance developing emergency plans to prepare for potential periods of quarantine, isolation, or illness.

SWCIL implemented an agencywide COVID-19 Preparedness Plan that facilitated safe operations and provision of services. Workstations were separated and staff were relocated to home-based offices. Protocols were established to safely offer in-person services when remote services posed barriers to consumer goal progress or needed services. SWCIL also implemented additional sick leave policies and benefits to ensure proper isolation/quarantine of sick or exposed staff members.



The agency increased its use of technologies, apps, and other means to offer IL services remotely. Training on new technologies and programs was provided to staff and consumers to support remote services. Two additional methods were established to securely share documentation online as necessary for consumer work.

Staff conducted online peer connection groups during the state issued stay-at-home order and other social gathering restrictions. Examples include: Parents Supporting Parents, Coffee and Me, and Coloring Club, Craft Nights, and other virtual social/recreational activities

Through FEMA's America Project Strong program and HHS/ACL, SWCIL received 32,500 adult size cloth face masks for local distribution. Through community needs assessments, outreach, and local partnerships, SWCIL distributed 21,045 of these masks between November 2020 and May 2021.

SWCIL focused on delivering community education classes online. These classes had previously been offered in-person at community locations. By offering the classes online SWCIL could reach a larger audience throughout its service area, and beyond. Several of these classes were recorded and are available for independent viewing on-line.

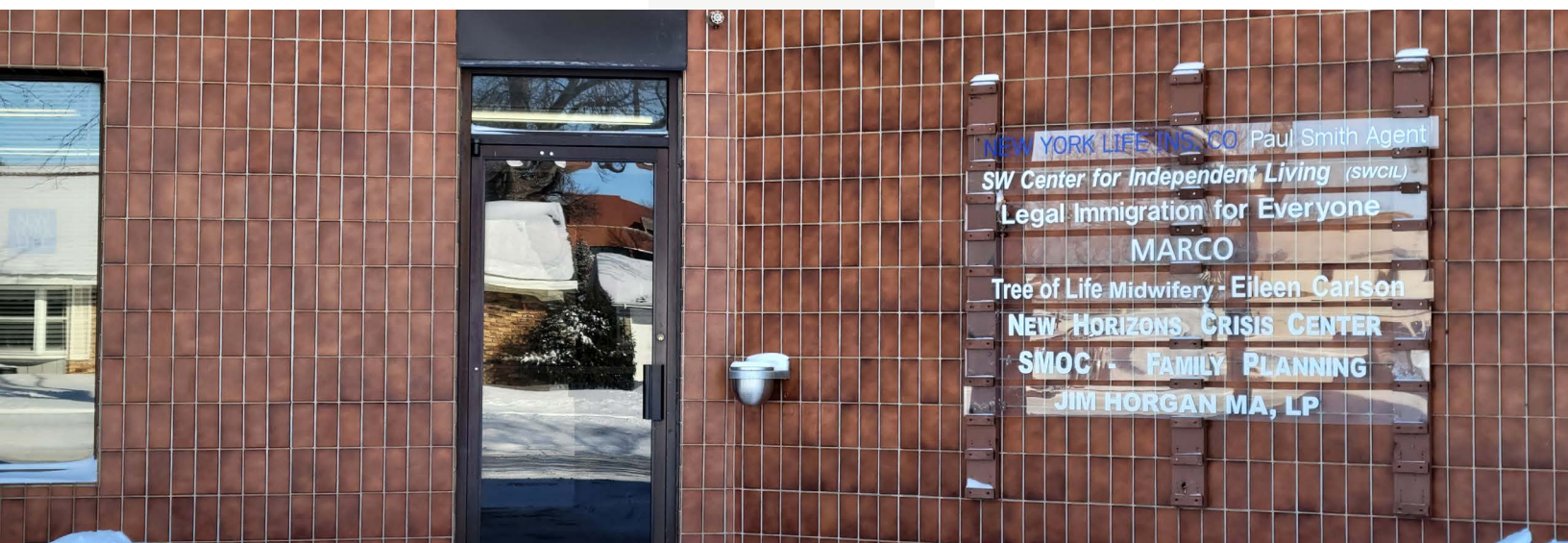
SWCIL has an extensive curriculum library, much of which is in printed or video format. One of the trusted resources launched a streaming library of their curricula and, as a response to the pandemic, SWCIL was able to utilize this streaming library for remote consumer services.

Through community needs assessments SWCIL offered and provided consumer check-ins during the pandemic, to offer opportunities to connect and provide information and referral and other services situations changed for consumers.

SWCIL has worked with other disability related programs in sharing resources and programming ideas, including transit, educational, healthcare, mental health, and other organizations. For example, a crisis center offering services to victims and survivors of crime, families, and communities was running low on masks for their supervised parenting time program. They were looking at a temporary closure of the program until more could be acquired. SWCIL was able to provide 1,000 Project America Strong masks which kept their program running for the parents and children who needed it.

SWCIL is collaborating with an AT advanced home monitoring consultant to stay current on innovations as well as sharing referrals.

SWCIL is collaborating with a Therapy Solution Nonprofit to have better access to available OT/ PT and SLP assessments, significant assistive technologies, durable home medical equipment, and specialty services in the future.





## IT'S MORE EVIDENT THAN EVER THAT CILS ARE ESSENTIAL

As the shelter in place order was issued early in the pandemic, SMILES staff scurried to devise plans to work remotely, continue providing core services to consumers with significant disabilities living independently and keep family safe. Staff contacted consumers to address needs, mitigate isolation caused by loss of jobs and day activities, and offer technology to meet with staff, caregivers, friends, and family remotely.

One story stands out. An individual tested positive for COVID-19 after a visit by their Personal Care Attendant. Even though symptoms did not require hospitalization, medical staff determined this person should spend the 14-day quarantine in a rehabilitation facility. The closest facility taking COVID-positive people was 50 miles from home. Thirty days after being admitted to the facility, this person called SMILES and expressed frustration as they were still in the facility with no discussions of returning home. The individual no longer exhibited symptoms and felt well. SMILES staff attempted to reach out to the county case manager and learned a new case manager was assigned, had not been in contact with the individual, and was not aware of the individual's circumstances.

SMILES facilitated virtual meetings for the individual, facility staff, and the case manager to arrange for the individual's return home with former services in place. This individual expressed deep appreciation: "Without SMILES' help, I'd still be in that place".

Centers for Independent Living are truly essential. During the pandemic, it was more evident than ever. Without Centers providing core services, individuals with disabilities might not have had the support needed to return or remain home.

## ACCEPTING THE CHALLENGE TO ADAPT AND SERVE

During the pandemic, social distancing made it challenging for many to enjoy the company of others. Freedom Resource Center took that challenge and adapted the way we bring people together and continued providing services.

All of our events and core services went virtual, and we made accommodations as much as possible. We utilized Zoom video conferencing, had phone appointments, gathered care packages to send to those who needed them most, assisted in acquiring technology for our consumers to use in meeting their goals, and helped reassure those we served that we were here for them. Moving forward, we continue to offer a hybrid option to accommodate those who prefer in-person or virtual meetings.

In addition to our five core services, Freedom continued to bring people together for our Freedom in Action events, a monthly social gathering that we offer in each of our Freedom Resource Center locations. Freedom in Action (FIA) events are a great way for others to learn how to create a craft, enjoy a holiday meal, learn new skills and knowledge, and grow social skills. No matter the type of event, the outcome is to develop new friendships and improve a skill. These events often lead to new opportunities to socialize and form new friendships, many of which go beyond our Freedom gatherings. Our former Executive Director, Nate Aalgaard, knew that FIA was something people looked forward to and was active in promoting it.

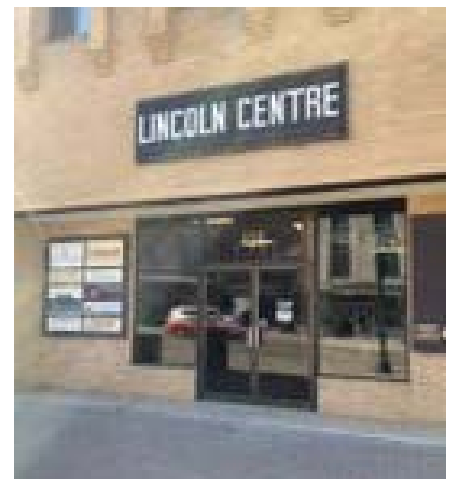
During COVID, with many of our group missing their friends, FIA was needed more than ever, and we still worked hard to offer it to our consumers. Due to the health restrictions, our gatherings had been happening on Zoom rather than face-to-face, with art and craft supplies being mailed out to our attendees.

For example, for our November 2020 Freedom in Action in Lisbon, Pam Foertsch, Independent Living Advocate, dropped off meals prepared by the local Senior Center. The consumers had a choice to eat together, yet socially distance, or take their meal to go. Those present made a take-home craft using supplies and materials provided by our generous donors.

“Keeping our consumers safe during the pandemic is important to us at Freedom Resource Center. Bringing a little joy with a Thanksgiving meal and activity is a way to say we care, and we will get through this together,” said Pam.

Freedom Resource Center has locations in Fargo, Jamestown, Lisbon, Wahpeton, and Fergus Falls.

“  
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## TAKING THE TIME TO HELP EACH PERSON ON AN INDIVIDUAL BASIS

Through sharing new strategies for getting things done and providing assistive tools and devices, the senior services team at State Services for the Blind helps seniors adapt to vision loss. When in-person services were paused because of pandemic restrictions, the team had to take those skills for adapting and apply them to their own work. “Every day we would show seniors new ways to complete a task,” said Senior Services Counselor Cindy Kauffman. “With the pandemic, we had to take our own advice and find our own new ways.”

Through the pandemic, SSB’s senior services staff spent long hours on the phone. Losing vision as an older adult is frightening and disorienting under the best of circumstances, but the added isolation brought on by the

pandemic often left seniors experiencing vision loss feeling vulnerable and panicked. “I found that many seniors needed extra time to talk about what they were experiencing,” Cindy remembers.

In normal situations, our staff visit seniors in their homes. This provides a natural setting to understand each person’s particular needs and assess how their vision loss is impacting their daily life. During the pandemic shutdown staff would mail out low vision test cards. Talking with seniors by phone after they had received the card, asking many questions to understand the seniors experience, and, mostly, giving plenty of time for each person to tell their story, name their fears, and express their frustrations, our staff could determine which resources would be most helpful. Our training staff would then work with individuals by phone or video conference to help customers learn various adaptive strategies. Counselors would mail out devices and then follow up with a phone call to talk each person through how to set up and use each device.

One senior that Cindy served was typical of our staff’s experience during the pandemic. After several long conversations it became clear that what would be most helpful for this customer would be a CCTV – a print-enlarging device that would enable him to go through documents, read, and do other things around the house. SSB has a supply of CCTVs that have been donated to us that we can lend to customers. Following pandemic protocols, Cindy dropped off the machine in her customer’s driveway. His son then brought it in the house and set it up for him. Cindy says that the gratitude that this customer expressed from having this simple tool that opened his life up is something that she will never forget.

Summing up, Cindy says: “Serving our seniors in the pandemic taught me that I needed to take the time with each individual to understand not only what tools and equipment will assist them, but also to find out how they are doing mentally. I think our world moves so fast and we all get caught up in the race to accomplish more. Taking the proper time to help each person on an individual basis is a real key in providing the support needed. In the long run, the time spent will go a lot further in terms of strengthening one’s independence.”



The mission of State Services for the Blind is to facilitate the achievement of vocational and personal independence by Minnesotans who are blind, visually impaired or DeafBlind.

## INNOVATIONS, RESILIENCY, AND INSTANT ADAPTATION

MNSILC conducted a survey in 2021 to determine the impact of COVID on people with disabilities. We learned people were frustrated with lack of information regarding wearing masks, vaccinations, and being isolated from friends and family.

**Comment:** *I am VERY ANGRY & UPSET at the mask mandate as I have a Lot of Difficulty with sensory that has gotten worse, I have Exercise Induced Asthma and I can't do my martial arts. I have broken out with hives and itchy after I wear a mask. I have tried wearing a face shield and it is very flimsy and comes off. My Mental health has worsened deeply due to wearing a mask and being excluded by doctor clinics where they don't have a virtual option. It is Very Difficult to go get Essential Needs for my home. Stores and Doctor's clinics do not want to hear accommodate someone who is unable to wear a mask. I have done self-harm due to the mask issue. Pretty soon I am just not going to go to doctor appointments that are Essential for underlying medical conditions, infections, and injuries. I am VERY ANGRY & UPSET.*

There were 90 responses to the survey. At the time of the survey 90% of those responding had not had COVID, 7.8% had COVID and recovered, and 2.2% had COVID and long-term side effects.

Compared to before COVID, access to transportation was about the same for 40.7% of the people responding, 27.5% of the people had not left their homes, 27.5% of the people found it more difficult to access transportation and 5.2% found accessing transportation easier.

Doctor appointments were less convenient during COVID than before. Obtaining prescriptions and groceries was about the same during COVID than before. Alternative methods of obtaining prescriptions and groceries increased.

Maintaining connections with friends decreased by 81.3% resulting in isolation and an increase in mental health concerns.

**Comment:** *I do NOT have a life. I am always in the home. Waivers should help out those with Developmental Disabilities where they don't have enough to do in their home. Some are on low income where they need things for their home for activities inside as they are unable to go out.*

When comparing pre-COVID to during COVID, 37.4% of those responding indicated they were unemployed, 36.3% were employed with the same number of hours, 12.1% said they were employed with a different job. There were no responses to the question that they were unemployed before COVID but are working now.

**Comment:** *COVID-19 has had a big impact on nearly every aspect of my life. Due to a sharp decline in travel, it has affected my part time self-employment as a house & pet sitter. Since I have multiple health conditions that put me at high risk for COVID-19, I have also had to give up my babysitting jobs. I rely on Minnesota's MAEPD program for my healthcare coverage. I need to maintain a minimum monthly income to qualify for this program. In an economy where healthy individuals are struggling to make ends meet, it's even more challenging for disabled people to maintain employment. I have experienced extreme levels of anxiety worrying about how I'm going to maintain minimum eligibility requirements for MAEPD.*

People knew where to get testing (38.5%). The majority (52.7%) had never tested positive for COVID and 37.4% had not been tested. For those who had COVID, 6.6% were able to get tested and 2.2% were not able to get tested.

The survey was conducted when vaccinations were just being provided: 53.8% indicated they were waiting to qualify for a vaccination based on the tiers that were in place, 15.4% were on the list waiting to be notified. 18.7% had been vaccinated; 1.1% were waiting for a single dose; 11% were not considering a vaccination at this time.

### Comments regarding vaccinations:

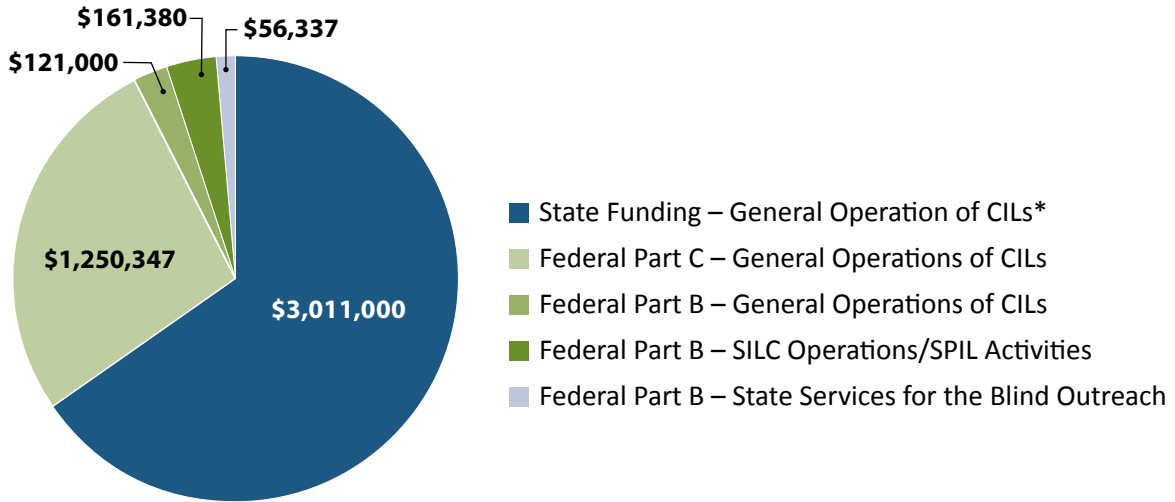
*I am 23 and live at home with 24-hour home care nursing. My staff & parents have been vaccinated. I am still waiting to become eligible for the vaccine. What is wrong with Minnesota that I am the most vulnerable individual in my house & I will be the last to be vaccinated?*

*The tiers in place suck. People with disabilities should not be in the same tier as healthy 16-year-olds*

*Due to underlying conditions, I'm eligible in North and South Dakota, Iowa, Missouri, and Illinois but NOT in Minnesota*

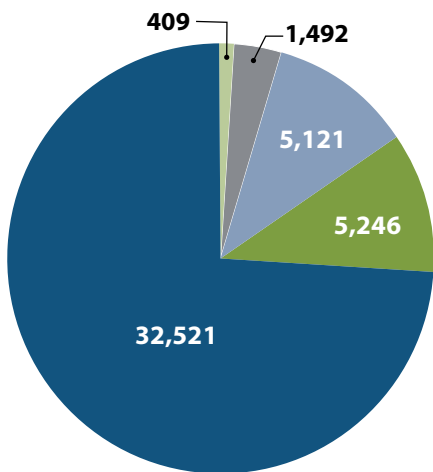
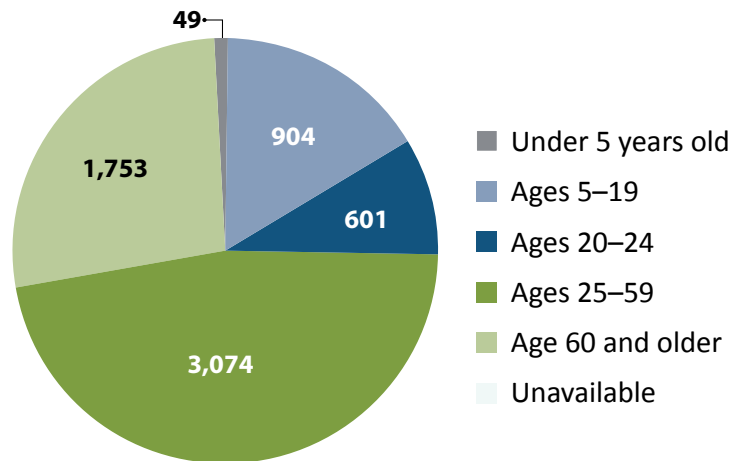
MNSILC would like to thank the people who responded to the survey.

**Independent Living Funding Distribution**

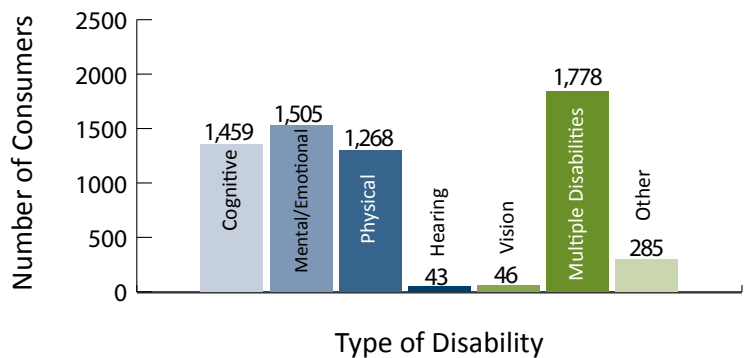


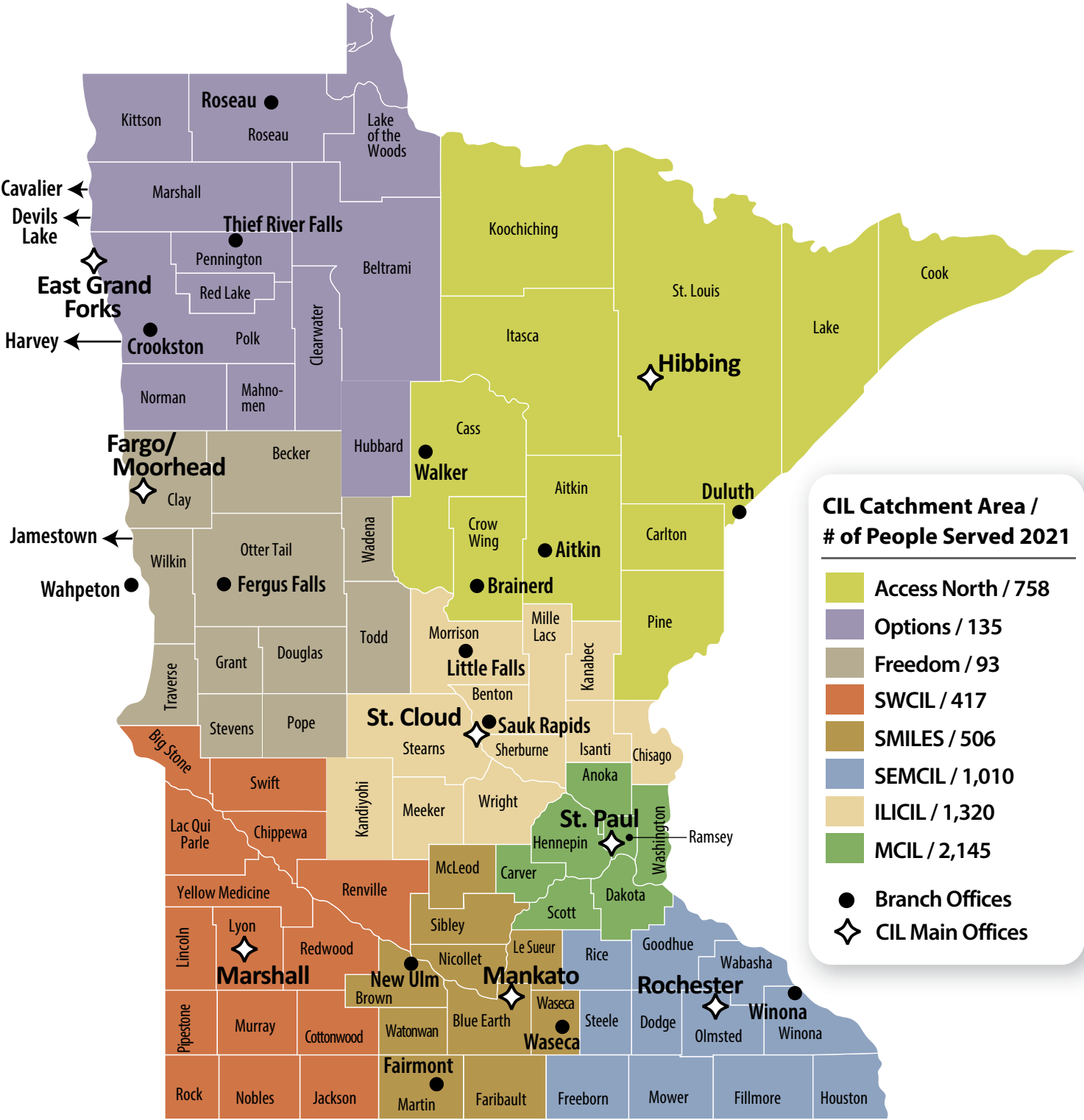
**Total Number of People Served by Centers for Independent Living**

In FFY 2021, 6,384 individuals were served by Minnesota’s eight CILs which provided a total 48,270 services, including the Independent Living (IL) core services.



- Advocacy
- IL Skills Training
- Information and Referral
- Peer Counseling
- Transition Services





MNSILC has worked collaboratively with many partners. Working together to improve the ability of Minnesotans with disabilities to live independently benefits our entire community.

The following partners were instrumental in the work done by this council:

- Access North Center for Independent Living
- FREEDOM Resource Center for Independent Living
- Independent Lifestyles, Inc. - A Center for Independent Living
- Metropolitan Center for Independent Living
- OPTIONS Interstate Resource Center for Independent Living
- Southern Minnesota Independent Living Enterprises and Services
- Southeast Center for Independent Living
- Southwestern Center for Independent Living
- Department of Employment and Economic Development Vocational Rehabilitation Services
- State Services for the Blind
- Minnesota Council on Disability
- State Rehabilitation Council-General
- State Rehabilitation Council-Blind
- Olmstead Implementation Office
- Access Press
- The Arc Minnesota



For more information about the Minnesota Statewide Independent Living Council or to request an alternative format go to: [mn.gov/deed/silc](http://mn.gov/deed/silc)

Contact Jo Erbes, Coordinator: **612-518-1487** or **MN Relay at 711**  
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