



Ned Lamont
Governor

State of Connecticut
Department of Developmental Services

DDS

Jordan A. Scheff
Commissioner

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Notice of Opportunity

Assistive Technology/Enabling Technology/Remote Supports
INDIVIDUALS / FAMILIES/ IN HOME SUPPORTS (IHS):

The Department of Developmental Services (DDS) is currently accepting proposals for stakeholders interested in receiving grants to fund **Assistive Technology (AT)** to benefit individuals who are currently supported by DDS and are living in a **family home or residing independently with In Home Supports (IHS)**. Grants will assist with the procurement and utilization of Assistive Technology (AT), hardware, software, equipment, and internet connectivity to enhance access to virtual supports and services, including the development of remote supports. It may also include training, assessments, environmental modifications/adaptations designed to increase accessibility, safety, and independence. The intent of the grant is to support and advance the creative use of Assistive Technology to enhance independence and virtual interpersonal and community participation for individuals with intellectual disability.

Stakeholders may include individuals, families, and members of the Personal Support Team (PST).

Internet Connectivity- *This may include: Broadband /Internet or cellular services provided at fair market value for the purpose of access to activities related to achieving documented person-centered goals & objectives. Internet services shall be capped at \$50.00 per month for a period of up to one year, based on fair market value in CT.*

Stakeholders interested in this opportunity should include the following information in their responses to the department:

I. **Descriptions of Specific Utility / Statement of Need:**

- A) **Type and location of home.** Please include specific programmatic and/or environmental considerations for the use of AT.
- B) **Potential technology needs and hardship due to lack of AT.** Please include specific person-centered considerations for enhancing the health, safety, and/or autonomy of the proposed user(s). Please specify why such need has not been addressed through an individual's DDS waiver (e.g., person not active on the waiver, person already hit the AT cap, internet connectivity is not covered under the waiver etc.)

- C) **Proposed AT equipment and name of vendor.** This may include items such as: Hardware; software; environmental modifications/adaptations; specialized durable assistive technology products; or auxiliary items.
- D) **Proposed AT service(s) and name of vendor.** This may include services such as: Assessment/Evaluations; Installation Services; Remote Supports; or On/Off-Site Training.
- E) **Cost of proposed AT equipment or services.** (*Internet services shall be capped at \$50.00 per month for a period of up to one year, based on fair market value in CT*).

II. Rationale/ Program Parameters/ Intended Outcomes/ Longevity

- A) **How AT will enhance independence for the individual(s) supported.** (Please be specific by providing measurable **programmatic** goals and outcomes, including duration & frequency, where applicable).
- B) **How AT will enhance the health & safety of the individual(s) supported.** (Please be specific by providing measurable **clinical /safety/ health related** goals and outcomes).
- C) **Transition plan for the introduction of AT.** (Please be specific by providing measurable projected **transition** goals and outcomes, identifying duration & frequency, where applicable).
- D) **Funding plan on how these supports will be maintained once the grant ends.** (Please be specific by providing a projected measurable **funding** plan outlining how temporary (one-time) costs, as well as ongoing costs, will be maintained, where applicable, i.e., family, community, grants, philanthropic organizations, or potential waiver coverage).
- E) **Fade plan for staff supports.** (Please be specific by identifying projected measurable **titration** outcomes, including duration & frequency, where applicable).

Awardees will be expected to participate in follow up analysis and reporting, as well as sharing the use and impact of the products or services awarded ([AT Survey Form](#)). In addition, select awardees may be expected to act as ambassadors for the use of AT.

Questions regarding this opportunity may be directed to Patricia Cymbala at patricia.cymbala@ct.gov. All questions must be received in writing via e-mail by **June 8th, 2022**. Answers will be posted to the DDS website in a [Frequently Asked Questions](#) document by **June 17th, 2022**

Amendment Extended Time:

Proposals to this opportunity must be submitted via e-mail to Patricia Cymbala at patricia.cymbala@ct.gov by **July 8th, 2022**. Funding will be awarded by **July 22nd, 2022**. Awardees must purchase equipment or subscribe to approved service no later than **October 28th, 2022**.

Respectfully,

Amy M. Blazawski, MSW, LCSW, CESP

Director of Services Development & Support - Self Determination / Assistive Technology
State of CT, Department of Developmental Services