

Chapter 9
GUIDELINES FOR THE DEVELOPMENT AND
ADMINISTRATION OF AN INDEPENDENT LIVING PLAN

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Chapter 9
GUIDELINES FOR THE DEVELOPMENT AND
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9.01 Introduction

The Department of Veterans Affairs (VA) Vocational Rehabilitation and Employment (VR&E) program uses a variety of rehabilitation plans in an effort to provide individualized services to individuals with disabilities. Individuals who cannot pursue an employment or vocational goal due to the limitations of a service connected disability (ies) and require assistance with activities of daily living may benefit from an Individualized Independent Living Plan (IILP). This chapter provides an overview of Independent Living (IL) processes; discusses how to develop and administer an IILP; and provides guidance on possible outcomes of IILPs. In addition, it includes a section specific to the home modification process in relation to the development of an IILP. Statutory and regulatory references are provided throughout the chapter. The term individual will be used throughout this chapter as a general term to refer to both Servicemembers and Veterans where appropriate.

9.02 References and Resources

- Laws: 38 United States Code (U.S.C.) 3101
 38 U.S.C. 3103
 38 U.S.C. 3104
 38 U.S.C. 3105
 38 U.S.C. 3109
 38 U.S.C. 3120
- Regulations: 38 Code of Federal Regulations (CFR) 21.35
 38 CFR 21.52
 38 CFR 21.53
 38 CFR 21.60
 38 CFR 21.62
 38 CFR 21.76
 38 CFR 21.94
 38 CFR 21.98
 38 CFR 21.120
 38 CFR 21.160
 38 CFR 21.162
 38 CFR 21.216
 38 CFR 21.260
 38 CFR 21.266
 38 CFR 21.274
 38 CFR 21.283

38 CFR 21.362
 38 CFR 21.364
 38 CFR 36.4402

VA Forms (VAF): FL 28-521, Request for Independent Living Extension
 VAF 119, Report of Contact
 VAF 4107, Your Rights to Appeal our Decision
 VAF 10-0103, Veterans Application for Assistance in Acquiring Home Improvement and Structural Alterations
 VAF 26-4555, Veterans Application in Acquiring Specially Adapted Housing or Special Home Adaptation Grant
 VAF 28-0791, Preliminary Independent Living Assessment
 VAF 28-0814, Checklist for Independent Living Plan Approval
 VAF 28-0851, Activities of Daily Living Checklist
 VAF 28-0852, Case Support Checklist
 VAF 28-0947, Independent Living-Specially Adapted Housing Coordination Checklist
 VAF 28-0957, Vocational Rehabilitation Guidelines and Debt Prevention
 VAF 28-1902b, Counseling Record-Narrative Report
 VAF 28-1902n, Counseling Record-Narrative Report (Supplemental Sheet)
 VAF 28-8861, Request for Medical Services-Chapter 31
 VAF 28-8872, Rehabilitation Plan
 VAF 28-8872a, Rehabilitation Plan-Continuation Sheet
 VAF 90-2237, Request, Turn-in and Receipt for Property or Services

Resources: VA Handbook 6500.6, Contract Security, dated 03/12/10

Websites: <http://www.benefits.va.gov/homeloans/adaptedhousing.asp>
<http://www.prosthetics.va.gov/HISA2.asp>
<http://benefits.va.gov/BENEFITS/factsheets.asp>
<http://www.ebenefits.va.gov/>
http://www.benefits.va.gov/HOMELOANS/contact_agents.asp
<http://benefits.va.gov/homeloans/adaptedhousing.asp>

9.03 Independent Living Plan Overview

Independent living plans are designed to enable an individual to achieve maximum independence in daily living and, whenever possible, increase the individual's ability to participate in an extended evaluation to explore the potential to return to work. This section provides definitions of key terms;

describes the purpose of independent living services; outlines entitlement criteria; discusses the duration of services; provides a list of services available to individuals who are participating in an IILP; and discusses limitations when providing independent living services.

a. Definitions

38 U.S.C. 3101 and 38 CFR 21.35 provide definitions to the most commonly used terms in VR&E. The most commonly used terms in an IILP are:

1. Independence in Daily Living

Independence in daily living refers to the ability of an individual, without the service of others, or with a reduced level of service from others, to live and function within his/her family and community.

2. Serious Employment Handicap

A serious employment handicap means a significant impairment of the individual's ability to prepare for, obtain, or retain employment consistent with his/her abilities, aptitudes and interests. See 38 CFR 21.52 for additional information on the classification of serious employment handicap.

3. Vocational Goal

A vocational goal means gainful employment that is consistent with the individual's abilities, aptitudes and interests.

4. Achievement of a Vocational Goal is not Currently Reasonably Feasible

This phrase means that the effects of the individual's disability, when considered in relation to his/her circumstance at the time of the determination, indicates that the achievement of a vocational goal would not be feasible at this time; or the effects are expected to worsen within the period needed to achieve a vocational goal, therefore making the achievement not reasonably feasible. See 38 CFR 21.53 for additional information if needed.

b. Purpose

The purpose of independent living services is to enable the individual, to the maximum extent possible, to live independently and participate in family and community life. Independent living services are also provided to increase the individual's potential to return to work by providing services designed to lessen or accommodate the effects of the disability (ies).

c. Entitlement Criteria

38 U.S.C. 3102, 38 U.S.C. 3103, 38 U.S.C. 3109, 38 U.S.C. 3120, and 38 CFR 21.162 provide the statutory and regulatory guidance for the provision of a program of independent living services. The following criteria must be met to provide a program of independent living services:

1. The individual must have a service connected disability (SCD) rating of at least 20%.
2. The individual must have a serious employment handicap resulting in substantial part from the SCD(s).
3. The Vocational Rehabilitation Counselor (VRC) must determine that the achievement of a vocational goal is not currently reasonably feasible.
4. The individual must have limitations in activities of daily living that impact his/her level of independence.
5. There must be a reasonable likelihood that the services provided will increase the individual's level of independence.
6. There must be a reasonable likelihood that the gains in independence will continue following completion of the program of independent living services.

d. Duration

Per 38 U.S.C. 3105 and 38 CFR 21.76, a program of independent living services cannot exceed 24 months unless one the following criteria are met:

1. The VRC determines that a longer period is necessary and likely to result in a substantial increase in the individual's level of independence in daily living. In this situation, an extension of up to six months is possible.
2. If the individual served on active duty during the Post 9/11 Global Operations period and has a severe disability incurred or aggravated in such service, the VRC may request an extension of up to two six-month periods if the additional period(s) will result in a substantial increase in the individual's level of independence in daily living.

e. Extension Beyond 24 Months

1. VR&E Concurrence

VR&E Officer concurrence is required for any request for an extension of IL services beyond 24 months. The VRC must document the extension request on FL 28-521, Request for IL Extension. See Appendix O, VA Forms, for information on how to access this form.

2. Vocational Rehabilitation Panel Review

The Vocational Rehabilitation Panel (VRP) must review requests for extensions of IL services beyond 24 months and make recommendations on whether this action is consistent with the needs of the individual. The request for an extension beyond 24 months is a required referral to the VRP. See M28R.IV.C.2 for additional information on the VRP.

3. Director, VR&E Service Concurrence

The Director of VR&E Service must approve all extensions of IL services beyond 36 months.

- f. Services

The services offered by the VR&E program are governed by 38 U.S.C. 3104. Independent living services are outlined in 38 CFR 21.160. In independent living planning, services are individualized and designed to assist the individual achieve the maximum level of independence possible, and when feasible, to increase the individual's potential to return to work. The need for any supplies or equipment being considered to address an independent living need must be substantiated by results of both the preliminary and comprehensive independent living assessments. A variety of services are available to assist in meeting the individual's IL needs, to include:

1. Short-term Training or Certificate Completion

The IILP can include short-term training or the completion of a certificate program to enhance independent living skills per 38 CFR 21.120.

2. Subsistence Allowance

Subsistence allowance is permissible when training is part of the rehabilitation plan and all criteria outlined in 38 CFR 21.260 and 38 CFR 21.266 are met.

3. Revolving Fund Loan

Advances from the revolving fund are permissible in an IILP per 38 CFR 21.274.

4. Assistive Technology Assessment

The VRC may consider an assistive technology (AT) assessment to determine if independence could be improved through the use of AT.

5. Medical and Mental Health Services

The VRC must coordinate medical and mental health services as needed with the Veterans Health Administration (VHA) to ensure the individual's health conditions are treated and stabilized to the maximum extent possible. This includes services designed to address personal adjustment issues the individual or family may be experiencing as a result of the effects of the disability (ies). See 38 CFR 21.155 for guidance on the delivery of services to an individual's family.

6. Identifying Appropriate Housing Accommodations

VR&E must work closely with other entities within VA to identify appropriate housing accommodations when indicated to ensure that the accommodations are necessary, feasible, and provided in an appropriate manner. See section 9.06 for additional information on housing modifications/accommodations.

7. Coordination with Community-Based Resources

The VRC must coordinate the delivery of services with community based resources when these services are required to address IL services.

8. Equipment to Increase Independence in Activities of Daily Living

VA prosthetics and/or Home Improvements and Structural Alterations (HISA) grant programs are the primary providers for equipment to increase independence in daily living. However, the VRC may provide equipment needed to increase activities of daily living as indicated on the Preliminary Independent Living Assessment if such equipment is not provided by prosthetics and/or HISA.

Examples of this type of equipment include, but are not limited to the following:

- Grab bars to increase independence and safety with bathing and toileting

- Shower chairs
- Raised toilet seats
- Shoe horns
- Grabbers to extend reach and mobility

g. Limitations

1. Number of New Independent Living Cases

Congress currently limits the number of new independent living cases that can be initiated each year. The current limit is 2,700 new cases per year. VR&E Service monitors new programs of independent living services by tracking the number of individuals entering independent living case status each year and notifying the field of any necessary action if/when the statutory limit is being approached.

It is important to note that new IL cases that are a result of the individual being displaced or otherwise adversely affected by a natural or other disaster do not count in the overall limit of new IL cases per year.

See 38 U.S.C. 3120(e) for additional information on the limitation of new IL cases.

2. Retroactive Induction and Payments

Retroactive inductions and payments are not permitted when providing a program of independent living services.

3. Mobility Aids

If the preliminary or comprehensive independent living needs assessment indicates that the individual would benefit from a mobility device, such as a wheelchair or mobility scooter, the VRC must send a medical referral to the prosthetics staff at the VA medical center and request a mobility assessment. The referral is made via VAF 28-8861, Request for Medical Services-Chapter 31. See Appendix O, VA Forms, for information on how to access this form. The VA medical center staff will determine what type of mobility device the individual may need and decide whether it can be provided by VHA. The VA physician must concur on the need for a mobility device to ensure that the device is a medical need and not a desired want of the individual.

If the VA physician agrees that the mobility device is needed and arrangements cannot be made to provide the device through the VHA, VR&E may provide the device as part of an IILP. However, in no circumstance, should a tractor, mower, or similar equipment be identified as a mobility device or as a solution to an independent living need, and authorized as part of an IILP.

4. Avocational Needs

The preliminary independent living assessment investigates the impact of the individual's disability on avocational pursuits. The delivery of services to address avocational needs is limited. See section 9.05 for detailed information on the provision of services designed to address avocational pursuits.

5. Independent Living Services to Servicemembers

It is important to note that Servicemembers who are entitled to independent living services under Public Law 110-181, National Defense Authorization Act of 2008 as extended by Public Law 112-56, Vow to Hire Heroes Act, can only receive independent living services that focus on the transition to civilian life, not retention in the military. Many areas of need, such as assisting the transitioning Servicemember with integrating into the home community or identifying appropriate non-military housing resources, can be addressed under the IL plan. Services provided under Chapter 31 should not duplicate the efforts of any Department of Defense or VHA programs per 38 U.S.C. 3101(2).

6. Long Term Training

Long term training, such as college degree programs, is not permitted as part of an IILP. Training is limited to short term training programs that are specifically focused on improving one's independence in daily living.

7. Participation in Medical Marijuana Programs

Independent living services may not be denied based on a Veteran's participation in a state medical marijuana program. However, the VRC must evaluate feasibility of an IL goal prior to developing an IILP for any Veteran. The VRC must consider state laws and any concerns about the individual Veteran's use of medical marijuana other than as prescribed. Plan goals may not include provision of medical marijuana or tools for its cultivation or consumption. IILPs may not include training or other services related to the medical marijuana industry, which are likewise prohibited in employment plans.

8. Independent Living Services in Foreign Countries

The provision of independent living services is limited to the United States and its territories. Independent living services cannot be provided to individuals residing in foreign countries.

9.04 Independent Living Planning Process

Independent living rehabilitation plans require a number of pre-plan development activities to ensure that the proposed plan is feasible, viable, and addresses the individual's needs. The following activities must be completed prior to plan development.

a. Preliminary Independent Living Assessment

The Preliminary Independent Living Assessment, VAF 28-0791, is designed to determine if the individual has any impairments to activities of daily living. The questionnaire focuses on 25 specific activities of daily living and is designed to ascertain in which of those activities the individual's independence is limited. In addition, the individual's housing, emotional spiritual, leisure and avocational needs are discussed to ensure that all aspects of the individual's needs are addressed. See Appendix O, VA Forms, for information on how to access this form.

1. Preliminary Independent Living Assessment Findings

The preliminary independent living assessment findings will assist the VRC in determining if either of the following applies:

(a) Independent Living Services are Warranted

The preliminary assessment indicates that IL needs are present and appropriate IL goals are determined to be feasible. If so, then the VRC will schedule a comprehensive evaluation.

(b) Independent Living Services are Not Warranted

If no IL needs are identified and/or no appropriate IL goals are determined to be feasible, the VRC must obtain VR&E Officer (VREO) concurrence of the decision prior to taking action to close the case. If the VREO concurs that no services are needed, then the VRC must notify the individual of the adverse action in writing and provide the individual a VAF 4107, Your Rights to Appeal our Decision. See Appendix O, VA Forms, for information on how to access this form. The case remains in Evaluation and Planning status during the due

process period. After 30 days, the VRC can close the case using Reason Code (RC) 09 using the date of the decision.

2. Document the Findings of the Preliminary Needs Assessment

The VRC must document the findings of the preliminary needs assessment into a written report, either on a VAF 28-1902b, VAF 28-1902n, or in a Corporate WINRS (CWINRS) case note. See Appendix O, VA Forms, for information on how to access these forms.

b. Comprehensive Evaluation

If the preliminary independent living assessment indicates that the individual has impairments in activities of daily living, the VRC must coordinate the completion of a comprehensive evaluation. It is imperative that the evaluation be completed by a person who is trained to evaluate independent living needs. 38 U.S.C. 3120 and 38 CFR 21.294 reiterate this point by stating that the person or facility that is conducting the evaluation must have a "demonstrated capability" in provision of independent living services. This is customarily evidenced by specialized IL experience and/or training.

The comprehensive evaluation is designed to delve deeper into the issues identified on the preliminary assessment, as well as any other issues that were not identified during the assessment process. It is designed to identify issues that may cause potential barriers to living independently. Where feasible, the comprehensive evaluation should also address issues that could increase the potential for the individual to obtain and maintain suitable employment. This assessment is generally conducted in the individual's home.

1. Relevant Information for the Comprehensive Evaluation

The comprehensive evaluation requires the analysis of information from a variety of other sources, such as:

- Medical records
- Functional capacity testing
- Consultations with medical providers
- Social service evaluations/reports
- Home based healthcare reports

- Specialized independent living assessments, such as occupational therapy or physical therapy evaluations
 - Rehabilitation engineer reports
 - Family members and caregivers (with the individual's permission)
2. Completing the Comprehensive Evaluation

The VRC may use a contract counselor to complete the comprehensive evaluation if contractual agreements are in place for the provision of this service. The VRC, or contracted VRC, must address a variety of issues during the comprehensive evaluation, to include, but not limited to:

(a) Mobility

Mobility refers to the individual's ability to move efficiently from place to place within the home and community. In addition, the evaluator should address the individual's means of transportation to ensure that it is accessible, if appropriate.

(b) Communication

Communication refers to the accurate and efficient transmission and/or reception of information, both verbally and non-verbally. It includes the individual's access to a telephone or adaptive equipment to ensure communication with family, medical providers, friends, and others in the community is possible.

(c) Self-Care

Self-care refers to the skills necessary to fulfill basic needs, such as health care, safety, food preparation, hygiene and grooming, and money management.

(d) Self-Direction

Self-direction describes the capacity to organize, structure, and manage activities in a manner that best meets the individual's goals and objectives. Adequate self-direction requires that the individual be able to plan, initiate, and monitor behavior with respect to an identified outcome.

(e) Interpersonal Skills

Interpersonal skills refers to the individual's ability to interact in a socially acceptable manner with family, service providers, neighbors, and others encountered in routine interactions in the community.

(f) Productive Activities

This area refers to the individual's ability to perform activities which contribute to family and/or community.

(g) Future Goals

It is important to address the individual's goals for the future to ensure that the rehabilitation plan adequately addresses those goals.

3. Documenting the Findings of the Comprehensive Evaluation

The VRC, or contracted counselor, must document the findings of the comprehensive evaluation into a written report, either on a VAF 28-1902b, VAF 28-1902n, or in a CWINRS case note, and file documentation on the right side of the CER folder. See Appendix O, VA Forms, for information on how to access these forms.

4. Reviewing the Results of the Comprehensive Evaluation

The VRC may utilize the VRP to assist with reviewing the results of the comprehensive evaluation to ensure that the evaluation has identified the issues that need to be addressed in the IILP. The VRP can provide technical assistance in the development of the rehabilitation plan to ensure that the proposed program of services will enable the individual to achieve maximum independence. See 38 CFR 21.60 and 21.62, M28R.II.A.4, and M28R.IV.C.2 for additional information on the use of the VRP.

The VRC must review the findings of the comprehensive evaluation, and the VRPs recommendations if applicable, with the individual. This information will lead to the development of the ILLP.

9.05 Avocational Options

The preliminary independent living assessment investigates the impact of the individual's disability on avocational pursuits. If the preliminary or comprehensive evaluation indicates that the individual has limitations in the pursuit of avocational interests, the VRC may address those needs in the IILP.

Services may be provided in support of an avocational activity that the individual can no longer perform due to the effects of a disability(ies). For example, the individual may have been active in sports, but is no longer able to perform this activity due to physical limitations. In this situation, the VRC may provide resources for community adaptive sports or adaptive equipment to enable the individual to continue the activity in an effort to increase community involvement, as well as functional ability and mobility.

a. Definition

Avocational is defined as activities or hobbies outside one's main occupation that are done for enjoyment that enables or enhances the individual's ability to engage in family and/or community activities that are integral to the achievement of the goals of the IILP.

b. Eligibility Criteria

The following criteria must be met before providing services designed to support the pursuit of an avocational interest:

1. The disability condition(s) limits or prevents participation in the avocational interest.
2. The activity must have been previously performed for a significant amount of time, defined as over a twelve-month period.
3. A medical and/or mental health provider must provide documentation that continued support of the activity is not contraindicated.
4. An expert consultation to identify accommodations required to enable continued support of the activity must be completed by a qualified person, such as an occupational therapist.
5. The pursuit of the avocational interest must improve the individual's independence in daily living in a measurable and verifiable manner.
6. The individual must have the ability and resources to sustain the activity or pursuit after the period of rehabilitation services are completed.

The VRC must document this information on VAF 28-1902b, VAF 28-1902n, or in a CWINRS case note. See Appendix O, VA Forms, for information on how to access these forms.

c. Limitations

1. Number of Avocational Needs

Services related to an avocational activity should not expand to more than one type of activity. For example, if adaptive sports equipment is provided for one avocational activity, then additional services for other avocation activities may not be provided even if the individual expresses interest in other activities.

2. Updating or Replacing Existing Equipment

The VRC should not update or replace existing equipment that enables participation in an avocational activity. For example, providing a more complex camera or an updated computer program is prohibited.

9.06 Home Modification Options

This section provides procedures related to home modifications that will require construction to the home. The construction process requires extensive coordination with other VA programs, as well as outside sources via the assistance of VA Acquisitions. These procedures do not apply to adaptive equipment that will assist the individual with increase in activities of daily living that do not require construction services, such as raised seats for toileting, shower chairs, etc.

If the comprehensive evaluation indicates that home modifications that will require construction to the home are needed to maximize the individual's independence, the VRC must coordinate those services with other VA programs. If the individual is eligible under one of the programs listed below, then the home modification must be provided under that program before VR&E can provide assistance with the identified home modifications. Per 38 CFR 21.216, the individual must be found ineligible for needed special equipment, such as home modification to improve access, under other programs and benefits administered by VA before any services can be authorized and provided by VR&E. If an identified housing modification is beyond the scope of VA's authority, the VRC should help the individual identify other resources that may be able to meet that need.

a. Housing Grants for Individuals with Disabilities

VA has four main grant programs to assist Servicemembers and Veterans with disabilities obtain necessary home modifications. Included in these grants is a grant to assist with modifications to a temporary residence.

1. Specially Adapted Housing (SAH) Grant

SAH grants are available to Servicemembers and Veterans with certain permanent and total service-connected disabilities to help purchase or construct an adapted home, or modify an existing home to accommodate a disability. The Veteran can use the grant up to three times as needed, but cannot exceed the total amount of the grant, which is updated annually. See <http://benefits.va.gov/homeloans/adaptedhousing.asp> for the current annual limit.

For specific information on SAH procedures and policies, see the M26-12 at http://www.benefits.va.gov/WARMS/M26_12.asp

2. Special Housing Adaption (SHA) Grant

SHA grants are available to Servicemembers and Veterans with certain permanent and total service-connected disabilities to help purchase or construct an adapted home, or modify an existing home to accommodate a disability. The Veteran can use the grant up to three times as needed, but cannot exceed the total amount of the grant, which is updated annually. See <http://benefits.va.gov/homeloans/adaptedhousing.asp> for the current annual limit.

3. Temporary Residence Assistance (TRA) Grant

A temporary grant may be available to SAH/SHA eligible Veterans and Servicemembers who are or will be temporarily residing in a home owned by a family member. The maximum amount available to adapt a family member's home for the SAH grant is \$28,518, and \$5,092 for the SHA grant.

See www.benefits.va.gov/homeloans/adaptedhousing.asp for additional information on SAH/SHA and TRA grants.

4. Home Improvements and Structural Alterations (HISA) Grant

Servicemembers and Veterans may receive assistance for any home improvement necessary for the continuation of treatment or for access to the home and essential lavatory and sanitary facilities. A Veteran may receive a HISA grant in conjunction with either a SAH or a SHA grant. The HISA program is available for Veterans with both service and non-service-connected disabilities. HISA benefits are limited to:

- \$6,800 for a Veteran with a service-connected disability

- \$2,000 for a Veteran with a non-service-connected disability

See <http://www.prosthetics.va.gov/HISA2.asp> for additional information about HISA grants.

b. Coordinate with Other VA Programs

The VRC must help the individual apply for VA housing grants when home modifications are an identified need and it appears the individual qualifies for such grants. For a general overview of eligibility criteria for housing grants, see <http://benefits.va.gov/BENEFITS/factsheets.asp>. The individual can apply for SAH, SHA, and TRA grants online at www.ebenefits.va.gov or by completing VAF 26-4555, Veterans Application in Acquiring Specially Adapted Housing or Special Home Adaptation Grant.

In order to apply for and potentially receive a HISA grant, the individual must have a prescription from a VA or fee-basis physician in addition to completing VAF 10-0103, Veterans Application for Assistance in Acquiring Home Improvement and Structural Alterations.

See Appendix O, VA Forms, for information on how to access these forms.

c. Verify Title Information

In order to qualify for home modifications that require construction under a VA program, such as SAH, SHA, or HISA, or as a part of an IILP, the Veteran must provide evidence of title information per 38 CFR 36.4402. This regulation ensures that the title is good and marketable, with no liens attached to the property, and verifies the ownership of the property.

1. Name on the Title

To qualify for home modifications that require construction as part of an IILP, the VRC must verify that the title to the home is held in one of the following ways:

- Veteran only
- Veteran and spouse
- Veteran and family member
- Veteran and non-family member when the Veteran is included on the title

- Family member, or a non-family member, when the Veteran resides or intends to reside in the property

This option is provided for the Veteran that does not own housing that can be adapted, or rents the home that will be adapted. The Veteran must provide documentation from the owner of the home that states he/she agrees to the modification plan and intends to allow the Veteran to reside in the home as long as needed. In addition, the Veteran must provide a personal statement indicating his/her intent to reside in the home on a permanent basis following the completion of the modification.

It is important that the VRC counsel the Veteran to ensure the Veteran understands that there is a limit to the amount of money that he/she can receive from VA grant programs. Once this limit has been met, VA grant programs will no longer provide assistance with home modifications if the Veteran moves to another residence. Although there is no such limitation on the delivery of services by VR&E, the VRC must still follow the procedure to ensure that the Veteran's intent is to remain in the home on a permanent basis following the modification. This process is necessary to ensure the allocation of public funds is done in a responsible manner. Therefore, the Veteran must be confident that this type of housing arrangement will be permanent prior to the modification to the home.

2. Good and Marketable Title

A good and marketable title is a title that has no clouds/encumbrances attached to it, and can be transferred.

- Good and marketable title means a title that a prudent buyer would accept.
- Cloud on a title is some defect in the title that prevents an owner from providing a good and marketable title. For example, a lien remains on the title after the owner has paid the lien amount.
- Encumbrance is an interest in the property held by someone other than the owner that affects the title or the use of the property. For example, the Internal Revenue Service has placed a lien on the property for non-payment of taxes.

The Veteran must provide verification that the title is good and marketable before the VRC can proceed with the development of the home modification plan. If the Veteran qualifies for a VA grant program,

such as SAH, SHA, or HISA, a representative from one of those programs will assist with the provision of this information. However, if the Veteran is solely dependent upon VR&E for the provision of home modifications as part of an IILP, then the Veteran must obtain this information.

Evidence of a good and marketable title can be obtained via a title company or attorney. There will be a cost associated with obtaining this information. If the Veteran provides the necessary information, the VRC can reimburse for the cost of obtaining this information. See M28R.V.A.3 for specific procedures for the reimbursement process.

d. Develop the Home Modification Plan

Once the coordination of other VA programs is complete and the individual has been informed whether or not he/she will qualify for a VA housing grant, the VRC is then ready to develop the proposed home modification plan. There are several steps required in this phase:

1. Addressing Suitability and Feasibility

The VRC must ensure that a review and analysis of the identified home modifications is completed to ensure the suggested modifications are suitable and feasible. This review and analysis can be done by a SAH agent who has expertise in this area. This assessment must address the issues surrounding the modification, to include, but not limited to:

- Does the modification address a specific need?
- Will the modification improve the individual's ability to live independently?
- Will the outcome of the modification provide a measurable increase in the individual's level of independence?
- Is the home safe and sanitary? Does it meet the standards considered acceptable in a permanent home in its locality? If not, how does the individual propose to complete these pre-modification needs?
- Is the home structurally sound and able to support the modification? Special consideration should be given to this area when the home is a mobile or manufactured home. Does the mobile or manufactured home have the structural integrity to support the modification? Is the mobile or manufactured home on a permanent foundation? Is the foundation of the mobile or manufactured home sufficient to support the proposed modification?

- Does the home and proposed modification meet local building codes, which will be necessary to obtain a building permit in certain situations?
 - What repairs are needed to facilitate the proposed modification? For example, does the floor need to be reinforced prior to the installation of a walk-in tub?
 - Are there extensive home repairs that must be completed before the home modification can be done? VR&E cannot provide home maintenance/repair services as part of the IILP.
 - Can the individual maintain the modification after the completion of VR&E services?
 - Will the individual have to vacate the home during the modification process? If so, where will the individual reside? Does the individual have the resources necessary to live in the alternate setting for the expected length of time, and longer if necessary? Are the alternate living arrangements adequate and free of barriers? Does the individual qualify for a TRA grant during this temporary residence situation? VR&E Service cannot provide assistance with the cost of alternative living arrangements during the modification period.
2. Resources for Review of the Home Modification Plan

To assist with the analysis of the home modification plan, the VRC may consult with a SAH/SHA agent. The SAH/SHA Agent will serve as a consultant when addressing the individual's home modification needs even if the individual is not eligible for assistance under those grant programs. SAH/SHA agents have special training in this area and are uniquely qualified to provide a professional opinion on viability and feasibility of the home modification plan. VA Form 28-0947 can be used as a guide for this review. SAH/SHA agents can provide a Site Feasibility Report/Worksheet that outlines the needs of the home modification plan, which can be used when the VRC works with the Contracting Officer in the development of the statement of work. See www.benefits.va.gov/HOMELOANS/contact_agents.asp for a list of SAH agent's contact information.

e. Conduct an Analysis of the Proposed Home Modification Plan

The VRC must meet with the individual to discuss the findings of the proposed home modification plan to ensure that all modifications are

necessary and would lead to an increased level of independence. The plan must clearly outline the individual's goals and objectives, as well as criteria for measuring the success of those goals and objectives. The VRC must ensure that the objectives of the plan specifically address all identified needs to increase independence, as well as address the:

- Allocation of resources
- Coordination of other VA programs
- Feasibility of Modifications

f. Pre-Solicitation Requirements

The procurement process for obtaining home modification services is a two-step process. The procedures outlined in this section represent step one of the process. See section 9.07.j of this chapter for the procedures on step two of the process.

Once the required home modification has been identified and determined to be feasible, the VRC must work closely with the Contracting Officer to complete a series of steps to ensure that the solicitation process is completed accurately and within regulations set forth in the Federal Acquisition Regulation (FAR) and Veterans Affairs Acquisition Regulations (VAAR).

The following information outlines the procedure to complete the first step in the procurement process.

1. Develop a Statement of Work that clearly defines all aspects of the proposed home modification.
2. Complete VAF 90-2237, as well as the checklist provided in Appendix A of VA Handbook 6500.6. See Appendix O, VA Forms, for information on how to access these forms.
3. Submit these documents to the Contracting Officer for review.

The Contracting Officer will secure the services of a Construction Management Service (CMS). The CMS provides an estimate of construction costs, and develops a technical description of the work that will be suitable for obtaining bids from construction contractors.

- If the cost of CMS services is less than \$2,500, the Contracting Officer will request that VR&E pay the CMS via a government purchase card.

- If the cost of CMS services is more than \$2,500, the Contracting Officer will issue a purchase order to pay for the service.

Note: Step two of the acquisition process occurs after the IILP has been developed and approved. The procedures for this process are described below in 9.07j.

9.07 Independent Living Plan Development

The following information outlines the development of an independent living plan.

a. Analysis and Concurrence of Proposed Home Modification Plan

If home modifications are part of the proposed IILP, the VRC must complete develop an analysis of the home modification plan for review and concurrence by the VREO, Regional Officer Director, or Director of VR&E Services. The level of review depends on the amount of cost associated with the modification.

This analysis must address the questions outlined above in section 9.06, as well as any additional supporting documentation relevant to the individual's request for home modification. The summation should clearly identify the viability of the home modification. The VRC must:

1. Summarize information from the home modification plan into a written report, either in a VAF 28-1902b, VAF 28-1902n, or in a CWINRS case note. See Appendix O, VA Forms, for information on how to access these forms.
2. Obtain the written report from the SAH/SHA agent who assisted in reviewing the home medication plan, if applicable. Include a copy of this report to the VREO for review, as well as placing a copy in the individual's CER folder.
3. Obtain all documentation from the CMS, if applicable. Submit a copy of this information to the VREO for review, as well as placing a copy in the individual's CER folder.

Submit this information to the VREO for review and concurrence. If additional levels of review are required based on approval level, the VREO will forward to the next concurrence level, as indicated.

b. Develop the Independent Living Plan

All rehabilitation plans have common elements, but the VRC must individualize the elements to fit the individual's identified needs. The elements of an IILP are:

1. Program Goal

The program goal for an IILP is to stabilize and increase the individual's independence in daily living, and when appropriate to enable the individual to participate in a program of services directed toward employment. The rehabilitation plan must include a specific occupational goal or occupational cluster and 3 digit *Dictionary of Occupational Titles* (DOT) code. However, since the goal of IILP's are not vocationally based, the VRC must use DOT code 000.

2. Intermediate Objectives

Intermediate objectives identify secondary goals that contribute directly to the achievement of the program goal. The VRC must ensure that each objective:

- Is clear and easily understood
- Relates to achieving the goal
- Is observable and can be evaluated
- Has a measurable outcome

3. Anticipated Completion Date

An anticipated completion date helps track progress toward the goal and keeps the plan moving forward. It also informs both the VRC and the individual of the time frame in which services will be provided.

4. Services

There are a number of services that can be provided during an IILP. See section 9.03 of this chapter for examples of those services.

When documenting services, ensure that the description is:

- Specific and detailed, and
- Clear and unmistakable as to its relationship to a specific intermediate objective

5. Duration of Services

Duration of services indicates a start and end date for each intermediate objective.

6. Service Providers

Services can be provided by a variety of sources that have expertise in the delivery of independent living services, to include VR&E, VHA, medical personnel, education/training facilities, state vocational rehabilitation agencies, non-profit entities, and private companies or individuals.

The rehabilitation plan must list the contact information of who will be providing services, including the following:

- Name
- Address
- Telephone number
- Email address (if available and appropriate based on the individual's use of electronic communication)

7. Evaluation Information

This section provides information on how the individual's progress will be measured during the rehabilitation process, and provides an evaluation schedule. The following sources may be used to establish evaluation criteria:

- Medical records
- Activity logs
- Consultations with medical and mental health providers
- VRC observations during case support visits
- Reports from training/service providers
- Self-report by the individual and/or the individual's family are appropriate for self-care activities
- Other sources as appropriate

This section also outlines the terms that will be used to measure satisfactory conduct, as required by 38 U.S.C. 3111. The VRC and individual must collaborate on the development of these terms since the successful development and implementation of a rehabilitation plan requires the full and effective participation of the individual in the rehabilitation process. See 38 CFR 21.362 and 38 CFR 21.364 for additional information and guidance on measuring conduct.

8. Progress Notes

Progress notes provide a place to document any additional information related to the plan.

It is important to note that when a court with proper jurisdiction has appointed a legal guardian or custodian for the individual, VR&E must develop the plan in consultation with the guardian or custodian.

c. Determine Case Management Level

There are three levels of case management based on the individual's needs. For those individual's participating in an IILP, the case management level must be Level 3. Level 3 case management for IILP's requires a minimum of monthly face-to-face case management visits, generally conducted in the individual's home. It is important to note that monthly contacts can be done instead of face-to-face visits for periods of up to three months while waiting for cost approvals, coordination of construction, or other administrative delays in the provision of services. The VRC may use a contract counselor to complete monthly case management visits if contractual agreements are in place for the provision of this service.

d. CWINRS Activity

CWINRS activity requires updates to the claims processing and disposition tabs prior to the development of the rehabilitation plan. This is accomplished by:

- Ensuring that the Serious Employment Handicap indicator is set to "Yes" by using the Update Disposition function on the Claim Processing tab.
- Entering the date that Evaluation and Planning status is closed.
- Selecting Entitlement Code from the drop-down list.

- Selecting the correct Rehabilitation Claim Disposition from the drop-down list.
- Allowing CWINRS default selection of Award Payment System.
- Entering Pre-Rehab Salary using 4 digits, with the maximum entry of 9999.

When the VRC and the individual have agreed upon the services to be provided during the IILP, the VRC must complete the rehabilitation plan data fields under the REHAB tab of CWINRS by completing the following steps:

1. Select Add Plan on the Rehab Tab to enable IILP functionality.
2. Select Independent Living from the track selection drop-down options.
3. Set Program Cost Limit from the drop-down option.
4. Enter the annual review date.
5. Enter the Plan Modified date.
6. Chose "no" under self-employment goal.
7. Set case management level 3, referred to as Supervision Level in CWINRS, from the drop-down option.
8. Enter the DOT code as 000.
9. Enter the program goal.
10. At this point, the VRC must click OK to save the plan, then to add individual objectives using functionality on the Rehabilitation Plan screen.
11. Click OK to save
12. Click Print Plan to print VAF 28-8872, Rehabilitation Plan, and VAF 28-8872a, Rehabilitation Plan Continuation Sheet (see Appendix O, VA Forms, for information on how to access VA Forms).
13. Prepare High Cost Memo as needed based on approval levels for program costs (see M28R.IV.C.1 for information on cost approval levels).

14. Use "Print Letters" to generate VAF 28-0957, Vocational Rehabilitation Guidelines and Debt Prevention if the Veteran is pursuing IL services at a facility and is receiving a subsistence allowance, and/or VR&E is paying tuition for IL services at a rehabilitation facility.
15. Update CWINRS case status to independent living (when the VREO approves the plan). This action will automatically update Benefits Delivery Network (BDN) with the Case Status and DOT code. A BDN CAST is required to update the serious employment handicap indicator in BDN.

e. Independent Living Plan Concurrence

All IILPs, including the analysis of the home modification plan if modifications are part of the proposed plan, must be approved before the VRC and individual sign the plan. There are various levels of approval based on the type of service included in the IILP.

1. VR&E Officer Concurrence

The VRC must submit the IILP, VAF 28-0814, Checklist for Independent Living Plan Approval, and any additional relevant information to the VREO for approval. Per 38 CFR 21.162, the VREO must approve all IILPs. The VREO may approve:

- IILPs with annual cost up to \$75,000 that do not contain construction
- IILPs that contain construction costs up to \$2,000

2. Director, Regional Office Concurrence

The Director of the regional office must approve the following:

- IILPs with an annual cost of \$75,000-\$100,000 that do not contain construction
- IILPs that contain construction costs between \$2,000 and \$25,000

The VREO must submit the Director's Checklist for Independent Living (IL) Home Modifications Cost Approval, as well as all the required documentation noted on the checklist, to the Director for approval when the IILP contains construction costs between \$2,000 and \$25,000.

3. Director, VR&E Service Concurrence

The Director of VR&E Service must approve the following:

- IILPs with an annual cost that exceeds \$100,000 that do not contain construction
- IILPs with construction costs that exceed \$25,000

The VREO must submit the Director's Checklist for Independent Living (IL) Home Modifications Cost Approval, as well as all the required documentation noted on the checklist, to the Director for approval when the IILP contains construction costs that exceed \$25,000.

f. Independent Living Plan Non-Concurrence

If the IILP is not approved at any of these levels, then the VRC must perform one of the following tasks:

1. Take the recommended corrective action(s) for approval of a revised independent living plan, or
2. Consider alternative rehabilitation options if revision will not result in approval.

If the IILP is not approved, and efforts by the VRC to develop an approved plan did not meet the individual's expectations or request for service, the individual can appeal the disagreement over the development of the plan per 38 U.S.C. 3107 and 38 CFR 21.98. In this situation, the individual must submit a written statement to the VRC requesting a review of the proposed plan and detailing his/her objections to the terms and conditions of the proposed plan.

g. Complete the Orientation Process

When the IILP is approved, the VRC must provide an orientation to ensure the individual understands both the VRC's role and his/her role, as well as answer any questions the individual may have regarding the rehabilitation process. The rehabilitation plan, as well as VAF 28-0957 if training is a part of the IILP, is used to guide the orientation process. The orientation emphasizes the following:

- Expectations for conduct and cooperation
- Requirement to report changes in dependency, contact information, and performance immediately

- Process for obtaining supplies, medical treatment and other services outlined in the plan

If home modification is part of the IILP, then the orientation should also include discussions about the following:

- Where will the individual reside during the construction if it is necessary to vacate the home during the modification process?
- Is the individual prepared for possible delays in the construction process?
- How will issues that arise and are identified during the construction process be addressed?
- Does the individual understand the coordination of services will require communication and cooperation with a number of different entities? Does the individual understand the roles and responsibilities of each?
- Any other questions specific to the individuals home modification plan.

h. Sign the Plan

Following orientation, both the VRC and the individual must sign the rehabilitation plan, as well as VAF 28-0957 if training is part of the IILP. Place the originals of both on the right side of the CER folder and provide the individual with a copy.

i. Document the Planning and Orientation Process

It is imperative that the VRC document the planning and orientation process, as well as the decisions made during plan development. The following information must be documented on either VAF 28-1902n or in a CWINRS case note:

- Type of Plan
- Planned Services
- Program Charges and Costs
- Level of Case Management
- Other Considerations

j. Procure Home Modifications

The procedures outlined here are step two of the procurement process. Step one of the process was discussed above in section 9.06.f.

If home modifications are part of the IILP and the cost of the modification is greater than \$2,000, the VRC must work closely with the Contracting Officer to secure the acquisition of these services. The VRC must complete the following activities:

1. Submit Information to the Contracting Officer

The information outlined here contains the same information that was submitted to the Contracting Officer when the services of the CMS were obtained (as described above in section 9.06.f), with the addition of a few other documents. The required information includes:

- VAF 90-2237, which confirms that funding is available
- Documentation of VR&E approval of funds, as indicated by the document on which the appropriate approval was provided
- Description of the work to be performed, as outlined in the information provided by the CMS
- Copy of the checklist from VA Handbook 6500.6, Appendix A, that was submitted when the services of the CMS were obtained
- Copy of the IILP, with the redaction of the individual's social security number

2. Contracting Officer Activities

The Contracting Officer will complete the following activities to ensure that the procurement of home modification services is performed accurately and within the guidelines set forth in the FAAR and VAAR.

- Issue a solicitation for bids
- Obtain quotes for the home modification
- Make an award for the completion of the home modification
- Monitor the process to ensure that the contractor is paid in an accurate and timely manner

- Perform a final site visit to sign off on project completion

k. Administer the Plan

The VRC must implement the services identified in the plan, as well as document all case activity in CWINRS notes or on VAF 119, Report of Contact. See Appendix O, VA Forms for information on accessing VA Forms.

The VRC, or contracted counselor, provides case management services to ensure that the objectives and goals of the rehabilitation plan are being addressed and met. Additionally, the VRC or contracted counselor discusses any concerns with the individual and takes appropriate action(s) to address those concerns, ensuring that the individual has every opportunity to succeed.

The VRC or contracted counselor must utilize VAF 28-0852, Case Support Checklist, as a guide during case management meetings that occur on a monthly basis. The VRC must address all issues identified on the checklist and document either on the checklist or in a CWINRS case note. This checklist must be filed in the center section of the CER folder.

See M28R, Part V, Section A for detailed information on plan implementation.

l. Evaluate and Amend the Plan

It is necessary to review and evaluate the individual's progress toward completion of the objectives of the rehabilitation plan. If additional or different services are needed to achieve the objectives of the plan, then the 9-30VRC must amend the plan as appropriate per 38 CFR 21.94. If the amendment to the plan includes additional construction costs, the VRC must obtain the proper level of approval as outlined in section 9.07 of this chapter.

It is important to note that it may be necessary to change the status of the case to Interrupted during this process to ensure that the statutory limitations on the delivery of IL services are not exceeded. Interrupting the case allows the VRC time to explore options and decide upon the most appropriate route to lead to a positive outcome of rehabilitated. Or, in some situations, provide due process and notice as the VRC moves toward the discontinuation of services.

9.08 Outcomes of Independent Living Plans

a. Rehabilitated

The intent of independent living plans is to enable individuals, to the maximum extent possible, increase independence and, when feasible, improve his/her potential to return to work. Per 38 CFR 21.283, the VRC may move the case to rehabilitated status when the individual has:

- Successfully completed all program goals, or
- Achieved a substantial increase in the level of independence in daily living through program assistance, and
- Maintained this level of independence for at least 60 days, and
- Further assistance is unlikely to significantly increase the individual's level of independence.

The VRC must utilize VAF 28-0851, Activities of Daily Living Checklist, when conducting the assessment for the determination of rehabilitated status. This checklist is used to provide subjective data that indicates improvement in activities of daily living as a result of the services provided in the IILP. See Appendix O, VA Forms, for information on how to access this form.

See M28R.V.A.10 for detailed information on how to complete the rehabilitation process.

b. Discontinued

If the individual decides not to pursue services, or does not respond to attempts by the VRC to participate in the rehabilitation plan, then it may be necessary to discontinue the case. See M28R.V.A.10 for information on the discontinuation process.