

ASSESSMENT OF ADVISORY COMMITTEES
April, 2016
538 - Department of Assistive and Rehabilitative Services

To assist in the process required by Chapter 2110, Texas Government Code, state agencies should submit an assessment of advisory committees using the format provided. Please submit your assessment for each advisory committee under your agency's purview. Include responses for committees created through statute, administrative code or ad-hoc by your agency. Include responses for all committees, whether ongoing or inactive and regardless of whether you receive appropriations to support the committee. Committees already scheduled for abolishment within the 2016-17 biennium are omitted from the scope of this survey. When submitting information for multiple advisory committees, right-click the sheet "Cmte1", select Move or Copy, select Create a copy and move to end.

NOTE: Only the items in blue are required for inactive committees.

SECTION A: INFORMATION SUBMITTED THROUGH ADVISORY COMMITTEE SUPPORTING SCHEDULE IN LEGISLATIVE APPROPRIATIONS REQUEST

Committee Name: Board for Evaluation of Interpreters (BEI)

Number of Members: 7

Committee Status (Ongoing or Inactive): Ongoing
 Note: An Inactive committee is a committee that was created prior to the 2014-15 biennium but did not meet or supply advice to an agency during that time period.

Date Created: April, 1980
Date to Be Abolished: N/A

Budget Strategy (Strategies) (e.g. 1-2-4): 2-2-2
Strategy Title (e.g. Occupational Licensing): Training and Education and Interpreter Certification

Budget Strategy (Strategies):
Strategy Title:

State / Federal Authority
 State Authority
 State Authority
 Federal Authority
 Federal Authority
 Federal Authority

Select Type	Identify Specific Citation
Statute	Human Resources Code, Sec. 81.007
Admin Code	Title 40, Sec 101.601, 101.603, 101.605, 101.607, and 101.609
Admin Code	Title 40, Sec 109.207

Advisory Committee Costs: This section includes reimbursements for committee member costs and costs attributable to agency staff support.

Committee Members' <u>Direct</u> Expenses	Expended Exp 2015	Estimated Est 2016	Budgeted Bud 2017
Travel	\$3,508	\$4,500	\$4,500
Personnel	\$12,829	\$12,829	\$12,829
Number of FTEs	0.17	0.17	0.17
Other Operating Costs	\$3,500	\$3,500	\$3,500
<i>Total, Committee Expenditures</i>	\$19,837	\$20,829	\$20,829

Committee Members' <u>Indirect</u> Expenses	Expended Exp 2015	Estimated Est 2016	Budgeted Bud 2017
Travel	\$0	\$0	\$0
Personnel	\$0	\$0	\$0
Number of FTEs	0.0	0.0	0.0
Other Operating Costs	\$0	\$0	\$0
<i>Total, Committee Expenditures</i>	\$0	\$0	\$0

Method of Financing	Expended Exp 2015	Estimated Est 2016	Budgeted Bud 2017
Method of Finance			
1 - General Revenue Fund	\$19,837	\$20,829	\$20,829
	\$0	\$0	\$0
	\$0	\$0	\$0
	\$0	\$0	\$0
	\$0	\$0	\$0
Expenses / MOFs Difference:	\$0	\$0	\$0

Meetings Per Fiscal Year	4	4	4
	4	4	4

Committee Description: The Board for Evaluation of Interpreters (BEI) assists in testing and certifying interpreters to verify that they have reached varying levels of proficiency in skills necessary to facilitate communication between people who are deaf or hard of hearing and people who are not deaf or hard of hearing. The BEI board recommends standards to DARS Deaf and Hard of Hearing Services (DHHS) for each of several levels of certification based on proficiency, assists with complaints against certified interpreters, and assists with test development.

SECTION B: ADDITIONAL COMMITTEE INFORMATION

Committee Bylaws: Please provide a copy of the committee's current bylaws and most recent meeting minutes as part of your submission. BEI does not have Bylaws.

1. When and where does this committee typically meet and is there any requirement as to the frequency of committee meetings? Committee meets quarterly in Austin and participates in an Interpreter's Forum during the annual conference of the Texas Society of Interpreters for the Deaf (TSID), which is held in different cities around the state. There is no requirement regarding frequency of meetings.

2. What kinds of deliverables or tangible output does the committee produce? If there are documents the committee is required to produce for your agency or the general public, please supply the most recent iterations of those.

The committee members keep DARS DHHS apprised of interpreter related activities in their regions. The members participated in three test development initiatives serving as experts in American Sign Language (ASL), working with test development experts from the University of Arizona and volunteering their time to provide high level recommendations regarding test development. Through a contract with the University of Arizona, the BEI board has assisted in the development of a court performance test, a medical performance test, and is nearing completion of a test for interpreters who are deaf. The BEI board is not required to produce any documents for the agency or general public.

3. What recommendations or advice has the committee most recently supplied to your agency? Of these, which were adopted by your agency and what was the rationale behind not adopting certain recommendations, if this occurred?

Members served on the test development expert panels for the court, medical, and deaf interpreter tests. The feedback provided by the members was incorporated into the development of these tests. The BEI board provides valuable feedback regarding consumer complaints filed against BEI certified interpreters who are alleged to have violated DARS DHHS rules and the Codes of Professional Conduct for Interpreters. The BEI board also makes recommendations regarding disciplinary action; they review petitions for testing from convicted felons and provide feedback on rule development. The BEI board assisted in the drafting of recent DARS DHHS rules for fee increases for testing and annual certification. The advice provided by BEI is often incorporated into final work products. BEI recommendations or advice are not followed when recommendations conflict with state laws and regulations.

4a. Does your agency believe that the actions and scope of committee work is consistent with their authority as defined in its enabling statute and relevant to the ongoing mission of your agency? Yes

4b. Is committee scope and work conducted redundant with other functions of other state agencies or advisory committees? No

5a. Approximately how much staff time (in hours) was used to support the committee in fiscal year 2015? 360.0

5b. Please supply a general overview of the tasks entailed in agency staff assistance provided to the committee.

Securing of meeting room, reserving sign language interpreters for the meeting, preparation and dissemination of agenda and meeting materials, taking notes and transcribing minutes, meeting attendance and participation, preparing and providing assistance with travel reimbursements, and corresponding on as needed basis prior to advisory meeting or upcoming DHHS events.

6. Have there been instances where the committee was unable to meet because a quorum was not present? Yes

Please provide committee member attendance records for their last three meetings, if not already captured in meeting minutes.

7a. What opportunities does the committee provide for public attendance, participation, and how is this information conveyed to the public (e.g. online calendar of events, notices posted in Texas Register, etc.)?

BEI takes public comment at all advisory board meetings and annually meets with stakeholders during an interpreter's conference to provide agency updates and solicit public input regarding proposed changes, etc. Meeting notices are posted at Texas Register and on the DARS website.

7b. Do members of the public attend at least 50 percent of all committee meetings? Yes

7c. Are there instances where no members of the public attended meetings? Yes

8. Please list any external stakeholders you recommend we contact regarding this committee.

BEI certified interpreters; Texas Association for the Deaf (TAD); Texas Society of Interpreters for the Deaf (TSID)

9a. In the opinion of your agency, has the committee met its mission and made substantive progress in its mission and goals? Yes

9b. Please describe the rationale for this opinion.

Many of the board members are highly recognized in the field of interpreting and in the deaf community. Board members are dedicated and are highly supportive of the effective communication needs of consumers who are deaf or hard of hearing. The BEI board has helped Texas become a leader in the profession of sign language interpreting. Texas was the first in the nation to develop and administer certification testing for sign language interpreters under the guidance of the BEI board.

10. Given that state agencies are allowed the ability to create advisory committees at will, either on an ad-hoc basis or through amending agency rule in Texas Administrative Code:

10a. Is there any functional benefit for having this committee codified in statute? Yes

10b. Does the scope and language found in statute for this committee prevent your agency from responding to evolving needs related to this policy area? No

10c. If "Yes" for Question 10b, please describe the rationale for this opinion.

N/A

11a. Does your agency recommend this committee be retained, abolished or consolidated with another committee elsewhere (either at your agency or another in state government)?

Retain

11b. Please describe the rationale for this opinion.

Based on analysis recently conducted and recommendations approved by the HHSC Executive Commissioner on 10/31/15, this advisory committee should be retained.

12a. Were this committee abolished, would this impede your agency's ability to fulfill its mission?

Yes

12b. If "Yes" for Question 12a, please describe the rationale for this opinion.

The interpreting and deaf communities have come to rely on having a voice within government through the BEI board. The BEI board provides volunteer services to the state. To purchase the services provided by the board, specifically for test development, would have a higher cost than the current expenditures needed for the board.

13. Please describe any other suggested modifications to the committee that would help the committee or agency better fulfill its mission.

The statutory authority of BEI allows for flexibility to meet changing program needs. No changes are recommended.

**Brown Heatly Building
4800 North Lamar Blvd, Room 3501
Austin, TX 78751**

March 27, 2015
10:00am – 4:00pm

AGENDA

Call to Order (BEI Advisory Board Chair, Sharon Hill)

Advisory Board Present:

Sharon Hill, Chair
Dr. Cynthia Sturkie, Secretary
Roger Brown, Member
Lisa Bosson, Member
Laura Hill, Member

DARS Staff Present:

Lori Breslow, DHHS Director
Angela Bryant, DHHS BEI Staff
Connie Sefcik-Kennedy, BEI Staff
Yolanda Chavira, DHHS Staff
Barbara Lazard-Hernandez, DARS Assistant General Counsel

Interpreters:

Steven Nugent and Amanda Katz

Public Comment

There was no public comment given.

BEI Chairperson's Report – DARS Region 4 – Houston area (Sharon Hill)

- **Newsletter Plans:** Due in April. This newsletter will feature a story of Yolanda Chavira and introduction of new members. Sharon Hill will create new section discussing recent certified interpreters, issues with TX and how the state impacts interpreting.
- **Texas History:** Angela Bryant has been researching BEI history and reading through minutes from the 1980's. Compiled information was sent to Fran Herrington-Borre and Elizabeth Criswell before they passed away for their historical perspective. Sharon Hill suggested that there should be some kind of system to preserve this kind of data to put it on the BEI or DHHS website. Also suggested to see if TSID, Texas Society of Interpreters for the Deaf, is interested in collecting data about what Texas interpreters have done.
- **Help for Interpreting students:** An initiative to have a separate document on our website that lists BEI central abilities and NCIEC competencies. Students can use this to show their ITPs. This document is still in progress. For those that do not pass the exam, they can receive a letter to take a workshop.
- **Testing in August:** BEI is coming to UH, University of Houston, in August to give the TEP, Test of English Proficiency, and the performance test. Hopefully all ITP, Interpreter Training Program

students can come and take it. Angela Bryant said to include regional day programs for the deaf. It was done in the past but recently dropped. Angela sent North Harris an invitation sheet.

- **Deaf Awareness at Houston Rockets:** UH interpreting students performed the National Anthem at the Rockets game with the help and guidance of a language coach.
- **Nov. 12 & 13 – SAVE THE DATE:** No details given. Just a heads up.
- **Houston Theatre District:** Hobby Center contacted S. Hill because they are interested in interpreting services. Her goal is to provide and have students pair up with them.

DARS Region 1 Update – Amarillo area (Dr. Cynthia Sturkie): April 11, a workshop will be taking place. It is an all day event with a performance at night.

DARS Region 3 Update – Tyler area (Laura Hill): 6 out of 7 people in Tyler who took the exam passed. 5 passed the basic and 1 passed the advanced. The program has been modified to 65 hours. An interpreting student from Missouri was recommended to move to Texas because of the high passing rates here. East Texas Guide of Interpreters will be offering sight translation in May and Suzie will be leading the project.

DARS Region 3 Update – Austin area (Lisa Bosson) Deaf Interpreter Test Development: There is nothing in written form the CDI test. It is similar to the TEP but all in ASL. If someone fails the test, then the performance cannot be taken. It is two days in April. Videotaping has started for the similar ASL TEP style test. This will set the standard.

DARS Region 3 Update – Austin area (Roger Brown): Wimberley will be present in San Antonio. There is not much in San Antonio. BEI in Austin and University of Arizona both reviewed the court performance. Angela mentioned a successful rating session. Experts were brought in and there was a lot of input on my end. March 30th is the end date for this project. It was the best training they ever had. Sharon wants to put this in the archives.

DHHS Director's Report (Lori Breslow):

- There is extra money for exceptional items to use for a resource specialist. It is going well. The House and Senate are asking for \$1,500,000 for two years. This number has not been approved. They are also asking for additional money for that phase. There is no support from the House or the Senate. There is no word yet for phase 2. There is also money for medical but hope to get more money in the future. David Myers is asking for mandatory certification – no support yet. We are also looking at the Sunset Report and the budget needs to be approved. There are some interpreters that are against the David Myers bill. There is still a lot of confusion. Barbara Lazard-Hernandez brings up an issue regarding the definition of a license versus certification. Lori says the last day to vote for the bill is in two weeks. The bill is still in committee. Roger Brown suggests mentioning it to TSID and TAD to push for the bill to pass. Also suggest that this bill needs a companion bill or else it can die in committee. Sharon Hill mentions how this bill has many issues with both the deaf and interpreting communities. Also there are people asking for recorded stories however not sure if the deaf community wants to do that. This bill requires a lot of work.
- Education is a hot topic at the moment. Many people are complaining that they are losing their jobs due to the law of certification. Barbara is unsure on how the interpreting agencies feel about that. Also mentions that their prices will increase due to supply and demand. Yet there are many complaints about non-certified interpreters.

- Lori Breslow discusses the legislative process. The “Sunset Report” states that there is a minimum of 5 agencies that will become 1 agency. What will happen is that the house and the senate will be working on the same bill and there will be a conference in which they will come to an agreement, so the HHSC is in the works. Next, VR, DRS and DBS (Division of Blind Services) will be consolidated into one entity. There will be one group that will oversee DRS and DBS together. Last, DARS - Independent Living Centers and VR have some IR caseloads and are going to be working with VR to see if some people can be transferred over. Similar language is present in the house and the senate however each side still needs some tweaks before the final session. Also everything will be migrated to TWC including individuals who receive social security and disability services. Information is constantly changing.
- Lori Breslow added that if all agencies go under TWC it will probably occur in the fall. VR will move over also the last time this occurred, blind services were transferred. Living together becomes difficult because of expiring leases. Barbara Lazard-Hernandez mentions that TWC is anticipating movement for programs but not the bodies. This is an issue because TWC has a lot of contractors but we have staff. 80% is federal funding and the state picks up a percentage of that. While many things are going on we are caught between DHHS and TWC. The old house bill still had certain administrative functions that never happened so now people are going from HHSC. For April 1st we will have to refer people to HHSC for contract approvals, this will be easier.
- The court performance will be completed by next week. Court performance test will be finished by the following week. The test will be distributed around September 1, 2015. There are still some rules and policies to be written. Lisa will be presenting to the DARS counsel in April and as of Sept. 1 it will become policy. Many recommendations have been made. They want to do away with the requirement 120 hours to take the performance portion. Rules will remain the same for deaf interpreters. In addition, the fee is \$185 which matches trilingual fee. Also, they will speak to the commissioner about the differences between hearing and deaf interpreters. In the next meeting they will have a skit showcasing the dynamics of both interpreters to inform people how it works. Sharon mentions that NCIEC may have DVD’s that can be useful.
- Cynthia Sturkie mentions the cost for advance testing is \$160 and for master level it is \$185. This fee is inexpensive considering what RID charges.
- Christine Bucholz mentioned that NCIEC DVD’s are geared towards interpreters and not the hearing which have no background knowledge on this matter. The material needs to be able to explain to the hearing community the role of a deaf interpreter.

Medical Performance Test – Rules

- The goal is to have a medical test in place by December. This will require all rules and policies to be adopted by then.
- In a survey sent to 515 people who attend the University of Arizona showed that most interpreters specialize in appointments, primary care appointments, hospital visits and the top type of appointment is physical examinations, followed by OBGYN, pediatric care, and then psychiatric, etc. The most common conditions presented were diabetes, routine check-ups, nausea and vomiting followed by infections. Most common behavioral issue was depression followed by substance abuse, and then anxiety. All these issues are considered to fall under medical.
- If David Myers bill passes then certification will be required for all kinds of testing.
- Angela Bryant likes the idea of having a testing room, this will improve the testing process tremendously.
- Roger Brown suggested administering tests in Austin location only.
- Lori Breslow mentions the meeting taking place upstairs which is recommending 80 hours of instruction and 40 hour of practicum plus 16 hours for renewal every 2 years but DARS does not

have the means to do that. Sharon Hill mentions that they can keep the general requirements but what about the mentor. Connie Sefcik-Kennedy mentions that medical interpreters should have the same knowledge and background of the real world. Roger Brown mentions that the board cannot support 120 hours, mentoring is great but difficult in the medical setting due to deaf clients not wanting many people there. Ms. Kennedy and Ms. Breslow both want 120 hours of instruction. Sharon Hill believes that if something different is done than the 120 hours then there needs to be a good explanation for it.

- Barbara Lazard-Hernandez – There is a written for legal however no performance. And there is a performance for medical but not a written part.
- Lori Breslow - It is up to the interpreters if they want to take the test or not. It will help people market themselves.
- Angela Bryant asked who is responsible for establishing the rates of the payment for medical interpreters? Also asked how will people be grandfathered in and if they will benefit from this? Sharon Hill mentions that only a few people with the skill will pass the test.
- Barbara Lazard-Hernandez mentions that they will have to explain that this is a real test and people will suggest the requirements be lowered so that they can pass the test. There is no need for that since there will already be differences in the rules so maybe 120 hours can be put in afterwards. Roger Brown wants to drop it down to 80.

Motion: Roger Brown made a motion that medical interpreting testing should have a prerequisite of education in the amount of 80 hours, which is a reduction of the 120 hours which is required for court certification due to HIPPA regulations. Cynthia Sturkie seconds. The motion passes unanimously.

Laura Hill and Lisa Bosson are concerned about how this will affect the deaf interpreters.

Texas Higher Education Coordinating Board Update

- The board met Feb. 2nd and 3rd. They had 9 out of 10 people show up. They discussed the number of hours. Laura Hill mentions that they require 240 hours built in the last semester.
- Lori Breslow – Wants to coordinate with regional day schools. One day can be the written test and the next day can be the performance test. Also concerned about how they can support educational interpreters.

TSID Conference

- Some people are going and some cannot. The budget is \$4500.00

Proposed Court Performance Test Results

- Lori Breslow – Suggests that a form explaining the court exam is needed to give out to people. A board meeting is still necessary to discuss issues. Also Ms. Breslow has spoken to ITP students.

ITP Advisory Boards

- A meeting still needs to take place this summer. They visited 4-5 ITPs.

BEI Program Report (Angela Bryant)

Test Development Updates

- The court test will be developed by the end of the month. Arizona will send us a report to let us know how the performance test went for 12 participants. They contact by phone each individual. The next step is to produce the medical test. The process will be the same. Piloting will need to take place. Connie Sefcik-Kennedy agrees.

BEI Registry Online Portal

- More time was required so it got delayed due to migrating new data to the new system. The goal is to roll out by the end of March, but it might take longer because the staff needs to learn the new system. As of now, we are not ready to roll out the new program. Connie Sefcik-Kennedy added that CEU paperwork is available online and interpreters must keep up with the CEU's themselves. Cannot pay online but there is a possibility of it in the future.

New Business: Words of appreciation are given to the board members whose term are expiring: Dr. Marcus Myers, Roger Brown, Dr. Cynthia Sturkie, and Dan Diffie. Roger has been on the board since 2007 and Dr. Sturkie since 2009. Roger Brown felt honored that she was asked to join the board and also finishing the court certification was a great achievement. Also appreciates how the BEI staff does daily for the interpreting field and for deaf consumers. Cynthia Sturkie has enjoyed her service and likes how the board handles issues professionally. Also, mentioned the continued support for more webinars and the continued growth of the interpreting profession. The certificates of appreciate will be mailed to the members who are not present.

Executive Session (Closed)

The DARS BEI Advisory Board, a purely advisory body, complies with the Open Meetings Act. In accordance with the Act, the Board may enter into closed Executive Session for discussion and consideration of items posted on this agenda notice which involve: (a) pending or contemplated litigation matters or settlement offers requiring consultation with or advice from the Board's attorney, pursuant to Texas Government Code §551.071(1); (b) a matter in which the duty of the Board's attorney to the Board under the Texas Disciplinary Rules of Professional Conduct of the State Bar of Texas clearly conflicts with Chapter 551 of the Texas Government Code, pursuant to Texas Government Code §551.071(2); (c) a negotiated contract for a prospective gift or donation to the State or to the Board, pursuant to Texas Government Code §551.073; or (f) other matters as permitted pursuant to Chapter 551 of the Texas Government Code. The Board will reconvene following Executive Session for discussion of items considered in closed session and to take any final actions or vote on such matters in accordance with Texas Government Code §551.102.

- a. Matters relating to recommendations on possible disciplinary actions and settlement of disciplinary actions relating to BEI certified interpreters.
- b. Any other matter discussed on the agenda. If, during the discussion of any agenda item, a matter is raised that is appropriate for discussion in executive session the Board may, as permitted by law, adjourn into executive session to deliberate on the matter.

Reconvene in Open Session at 2:43pm

Motion: Laura Hill makes the motion to recommend Todd Agan, Alaina Webb, Sherri Roberts and Deborah Martinez to fill the four vacancies for the BEI Advisory board. Roger Brown seconds. The motion passes unanimously.

Closing Announcements (Sharon Hill):

Thanks board members for their years in service. To prepare for our next meeting, please prepare any news for your regions and issues in the local community. The next meeting will be July 24 2015.

Meeting adjourned at 2:47pm

July 24, 2015
10:00 AM – 4:00 PM

AGENDA

Call to Order (BEI Advisory Board Chair, Sharon Hill)

Present:

Sharon Hill
Laura Hill
Alaina Webb
Deborah Martinez
Sherri Roberts
Lori Breslow, DHHS Director
Barbara Lazard-Hernandez, DARS Assistant General Counsel
Lisa Bosson

Interpreters:

Steve Nugent
Amanda Katz

Visitors:

David Myers
Kristin Lund

Absent: Todd Agan

Welcome New Members (Sharon Hill and Lori Breslow)

Sharon Hill and Lori Breslow extended words of welcome to the new board members.

Public Comment

- David Myers stated that he was glad to be at the meeting and is pleased with what BEI is doing. We are trying to make certification a requirement but the legislature is being difficult so we will go back in two years and try again.
- Discussed an organization and how deaf people cannot choose their interpreters. They have to accept whoever shows up.
- Mr. Myers mentioned that education is the largest employer of interpreting and roughly 1/3 or those interpreters are not certified. Rules are not being enforced. BEI should take a stronger stand in solving this problem. TEA, Texas Education Agency, has been doing whatever they want for a while.
- One complaint is that the BEI tests are not specific to educational interpreting. RID, Registry of Interpreters for the Deaf, has accepted the EIPA, Educational Interpreter Performance Assessment, so they are trying.
- The BEI needs to try as well. EIPA is probably more reliable than RID-NIC, National Interpreter Certification.

- TAD, Texas Association of the Deaf, and DARS should work together to develop a test for educational interpreting.
- TEA funded money for a test for ASL, American Sign Language teachers. Maybe we can offer to work with TEA and then they would have to get in contact with DARS. This is an idea we can throw out to them.
- Kristin Lund gave public comments. She stated that when her term was completed and she was off the board, she now receives more feedback from the community.
 - The Austin community created the deaf/hearing interpreter group. We have some issues with deaf/hearing interpreters working together at jobs. We have had meetings for about one year. We are working with each of the interpreter agencies. There are 5 in total and we have worked with 2. We are able to figure out in which situations a hearing or deaf interpreter might be needed depending on the description.
 - We have been working on explaining to people what a deaf interpreter is. We use the mirror interpreting method.
 - RID CLIP/R – Conditional Licensing for Interpreting Provisional/R. We have no access to the law or to make modifications. There was a court code that we did not know about.
 - DARS website – The website is amazing, but the website has an outdated “updated date”. Also, the website would not have a meeting location or date on there so people felt like they were not welcome to attend the meetings. The Recommended Interpreter Certification – we should probably switch out the word to *Required* instead of Recommended.
 - There was also some conflicting information about whether or not an interpreter would be required for some court procedures. For example, during a dispute resolution people were not sure if they did or did not need a court certified interpreter. Situations like this are coming up.
 - Several bills were raised regarding interpreting this past legislative session. There was not one place where all the information was contained. The community was very confused with whether or not bills are being passed. Maybe DARS can put in on their website so people have one place where they can get information from. Also, the homepage will state one thing but the interpreter list will not have an updated date.

Sharon Hill stated: 1) A separate committee should be created to address the recommended levels of certification. 2) The BEI meeting lists should be resolved. We should have several dates posted for our next meeting.

BEI Chairperson’s Report – DARS Region 4 – Houston area (Sharon Hill)

- The issues with the DARS website are duly noted and Angela Bryant will make a priority to update.

- The recommended levels for certification needed to be tabled until revisions and updates were resolved. Meeting minutes are being compiled and are being edited and reviewed for accuracy. Will be given in next meeting. Also the list for BEI meetings are now resolved and will be posted on the website for everyone to feel welcome to attend.
- **DARS Summer Institute:** Started last year in August and completed a session in May. The next one is slated in August and I will be attending. Last year there were 50 students split into classes of 10. They have everyday class instruction in addition to one-on-one sessions. “Words of Appreciation” are shared. Thanks Lori Breslow for her work, it is great that DARS is investing in the future. The skill that was seen there was amazing. It reminds Ms. Hill of the opportunity for provisional certification. The provisional certification is a sticky topic but worth for future consideration.
- **Newsletter:** Should have received in June. S. Hill has tracked statistics for the website, it includes 168 clicks to view on “Newly Certified Interpreters”, 109 visited the home page, 49 clicks viewed “Testing”, 19 clicks to view the “Study Guide”, 5 clicks to view the “BEI Advisory Board”. I also want to add an article in regards to the Deaf interpreter Test. And is it worth it to brag about the summer institute? Any other topics we should include? I was wondering about encouraging individuals with Level I-II to take the new certification test.

Deborah Martinez: Suggested offering an incentive or some type of discount. **Lori Breslow:** will address this issue. Also mentions that some individuals may not have the education requirements/credits to test. **Sharon Hill:** The Deaf community wants interpreters who have basic, etc... And not interpreter certification levels from the old test. **Deborah Martinez:** To clarify, Level I was supposed to allow the interpreter to shadow. **Sharon Hill:** The recommendation levels stated they could interpret how to get a bus pass! Level I allowed for hands on experience but now we acknowledge the need for qualified interpreters. We want to encourage interpreters to raise the bars. **Alaina Webb:** Raising the bar also depends on the agencies. For example I don’t accept Level I’s. Perhaps we could put this could be added in the newsletter. **Sharon Hill:** There are individuals who have been interpreting for many years; it may be a good idea to send them a personal appreciation letter. Sharon Hill will be looking forward to retiring and getting her letter. **Sharon Hill:** Suggested articles for next E-Newsletter include; Deaf interpreter test, summer institute, statistics, taking the new test and incentives, and Meet Barbara Lazard-Hernandez. Need Barbara’s biography. Laura Hill and Alaina Webb didn’t receive the E-newsletter.

- **Street Leverage** is coming. Please plan to attend.
- **TAHIT, Texas Association of Healthcare Interpreters and Translators** symposium will be in Galveston, TX, September 25-26. TAHIT wants to have people from RID, Registry of Interpreters for the Deaf, BEI, Board for Evaluation of Interpreters to attend a panel discussion. Not sure if I can attend, but if interested please let me know by July 31.
- **CCIE, Commission on Collegiate Interpreter Education:** Impacts interpreters to be and programs which impacts BEI. This is a voluntary accreditation that credits programs. Big fees required to submit paperwork which totals about \$11,000. CCIE has decided that 2 year programs are out. Only includes graduate or 4 year programs. Lisa Bosson arrives 11:33a.m.

If 2 year programs want accreditation they can work with state universities to receive it. Two year programs are trying to figure out how to. Some community colleges have articulation agreements in place. CCIE standards are impossible for 2 year programs to meet. San Antonio College has lots of support and therefore is able to meet their requirements. The inability to

meet CCIE standards is an issue that needs to be addressed. Gallaudet is pushing to ensure that people are trained in a 4 year program. **Laura Hill:** TJC, Tyler Junior College and other colleges are stuck in the middle. **Sharon Hill:** I am encouraging community colleges to revamp their program. For example, have their exit exam be the TEP, Test of English Proficiency. Also encourage students to continue in a BA program. However BA programs are limited. **Barbara Lazard-Hernandez:** How does the University of Houston program sustain itself with funding with limited enrollment? **Sharon Hill:** ASL 1-4 is offered as a foreign language and therefore many non-majors take it. **Alaina Webb:** Our chancellors choose to implement 60 hours. First cohort just graduated, next cohort is required to take 65 hours. How do you find balance in a 4 year program? What can help us with the 65 hour limit could be to remove it or ask CCIE to work with us? I'm not sure how to balance that issue. **Sharon Hill:** This issue needs to be addressed and will be discussed in the next meeting. **Lori Breslow:** I think we use the band aid approach in the interpreting world. For example, the summer institute and workshop trainings are not focused on weak areas. What we can do is pull information from the database and use to recognize weaknesses and design workshops around that. I would like to set up an ad-hoc committee. **David Myers:** In recent years an increase of non-certified interpreters are showing up and I think it's because ITP, Interpreter Training Program students are graduating and claiming to be interpreters. Also, student graduates are a cheap supply and accepted into the school system. **Sharon Hill:** A provisional certification set up can help. For example a 12 month certification will give the opportunity to gain experience. **Laura Hill:** Back to ITP programs, the program tells students they aren't ready and when they fail they blame program. **Sharon Hill:** ITP is used as scapegoat. This is a common theme that is seen in any profession, the issue is this generation. **Sherri Roberts:** Spoken language interpreters have similar issues; we should consider a provisional certification for more control. **Sharon Hill:** The provisional certification is a great way to see how many pre-certified interpreters working out there. **Deborah Martinez:** In addition the non-certified interpreters would need to be given the appropriate work and who will be willing to guide them? **Sharon Hill:** Maybe we can work with the summer institute and their professors. We can think about this issue and the David Myers bill and tackle both issues.

DARS Region 3 Update – College Station area – (Sherri Roberts)

There is no interpreter training program in the area. There are many students that are taking ASL classes in Glenn College. We are trying to work with the educational interpreters a little bit more, but they are only interested in money. Oral interpreters are concerned that BEI is not letting them test because there are no graders. They feel ignored. Another concern is that oral interpreting classes are not being offered because ITP's had to cut down. Many people do not even know that oral interpreting requires certain skills. **Sharon Hill** states that maybe this can be something discussed in the newsletter. **Sherri Roberts** mentions that RID will stop offering oral interpreting.

DARS Region 3 Update – Tyler area (Laura Hill)

Two more students passed the BEI! We will be offering an ethics workshop on September 17th in TJC. Our program will celebrate a 20th anniversary in May.

DARS Region 2 Update – Fort Worth area (Alaina Webb)

Our first cohort went through 60 hours. It was not great but we had 4 graduates and 2 students took it without faculty “approval” who failed. The next cohort might be stronger since the hours were increased to 65 hours. We are not sure what is going to happen because of the CCIE. Several agencies have popped up in our area that is not following these practices. Out of state oral interpreting agencies are affecting areas as well. **Sharon Hill** wants some kind of stamp of approval from DARS where agencies pay and receive a stamp of approval for a code of ethics. **Alaina Webb** mentions that maybe they can find a way to make it more appealing for agencies to take on mentors. Sherri Roberts mentions that taking on an intern is a loss of revenue and it is a lot of responsibility. There needs to be an incentive for them to take it on. Sharon Hill adds this to her to-do list.

DARS Region 2 Update – Dallas area (Deborah Martinez)

ILPE for Interpreters is out there and my name is on there. I have no idea how they received that list of names – maybe the RID registry- I am not sure. The Dallas area is going to host the Deafhood workshop. It is for deaf only for three days. One day is for interpreters to come in (August). It is not BEI ethics approved. I was wondering if we could investigate. **Laura Hill** said that it was not approved for ethics. Some educational interpreters in the Plano area are complaining that they are certified but in schools they are being called Aides. The school system is refusing to call them interpreters because then they would have to be paid as interpreters. Those interpreters feel that they do not even have to take the test if they are not going to be called interpreters. They are also working as Aides in the classrooms. Those interpreters want to improve their skills and take the new test but they do not know what to do. We also have local legal groups that have discussed how we should approach our work before taking on assignments. I want to know if BEI is going to start having recommendations for when deaf interpreters will be needed? **Kristin Lund** interjects that it is listed on the website. It might not be clear on the website but it is there. **Deborah Martinez** mentions that when an arraignment takes place, then there should be a deaf interpreter there. Then the hearing interpreter does not have to be the gatekeeper. The deaf interpreter would have to be a Certified Court Interpreter. We need more interpreter training in Dallas even though some people have taken the hearing interpreter classes. Some people want the deaf training. **Kristin Lund** mentions that ACC will be offering a course soon.

Sharon Hill DARS Region 5 Update – San Antonio area (Todd Agan)

Todd Agan is absent.

The advisory board took a break from 12:10 p.m.-12:25 p.m.

DHHS Director’s Report (Lori Breslow)

- **BEI Advisory Board Manual** - Legal has not reviewed this manual. This requires documentation so it will take a while to put together. Applicable laws that we must follow are included in this manual as well as our responsibilities. The advisory board’s duties are also mentioned in it. BEI is housed in Austin, so we do not always see everything that happens in other areas. We have to work on more efficient sharing of communication.

- **Update on court interpreting rules/policies** - The old process required people to earn 120 hours of training and pass a written test to be court certified. The new court performance test will be available for use September 1 and applicants will take the written and a performance test, but the 120 hours have been removed for hearing applicants. Two years ago we received money from the legislature to create the court performance test. The court performance test is so tough that anyone who does not have the experience or knowledge would not be able to pass it anyway. People who have already been court certified through other means will be grandfathered in. There will be no reduced price if someone who is already court certified wants to take the new court performance test. The test is \$185. The certification will still be called CIC, Court Interpreter Certificate.
- **Update on medical interpreting rules/policies** - This is the second test we received funding for. This is also a performance test. This should be completed by August 12. Angela Bryant has been working continuously to complete this test. The medical test will not be ready to be given out until spring 2016. This will give time to get raters and polish it up. The board suggested having 80 hours of CEUs for medical training before taking the performance test because the test does not require a written portion. These CEUs will have to be taken during a specific timeline.
- **Update on deaf interpreting rules/policies** - The University of Arizona (UA) is working with us to develop a Deaf interpreter performance test. They helped get the grant. David Myers has helped select people for the test. All of the tests belong to us except for the Trilingual and Deaf tests. At the last test development meeting, the UA announced that test development is almost completed. We will know for sure around March 2016.

Name of Deaf Interpreter certification - Email is not the best way to receive results so maybe we can use Survey Monkey for feedback. **Deborah Martinez** mentioned that getting deaf interpreters for the survey can help. Also other interpreters that want to get that certification should be included. **Laura Hill** says that only certified and maybe the staff of DARS can be surveyed.

- **Lori Breslow** questions what to call the test. We do not have *BEI Master* so should we put down *BEI* or *Texas* in the beginning of the certification? **Kristin Lund** says that it states on the card where the test is from. **Sharon Hill** is comfortable with not having *BEI* or *Texas* on it. **David Myers** added that this is the first time we are having a deaf interpreter test being developed.
- **Poll results** - People are arguing about whether or not the name CDI, Certified Deaf Interpreter, should be changed to DCI, Deaf Certified Interpreter. There was a Facebook argument about it being stolen from RID, Registry of Interpreters for the Deaf, a few months ago. People have trouble understanding what a *Deaf* interpreter is doing. **Sharon Hill** mentions that she likes having the label of a *Deaf* interpreter, but if there is a person who does not know anything about deaf interpreters, then a *Liaison* might be a better option. Maybe we can get feedback from deaf interpreters. **Laura Hill** asks if deaf people will understand the term "*liaison*" interpreter? **Lisa Bosson** says that she is a little behind on the name-game. Someone mentioned that they are opposed to the term *facilitator*.
- **Lori Breslow** said that **Christine "CB" Buchholz** said that the term *facilitator* would help the general public. **Barbara Lazard-Hernandez** asked if deaf people know that there are deaf interpreters in the community? **Sherri Roberts** stated that only people in big cities might know. Maybe the term *linguistic* can be another option. This could explain their role. **Lori Breslow** refers back to the Facebook post – there is a group of interpreters that are working hard to get the deaf community more involved and that they prefer the term CDI. **Kristin Lund** clarified that the Facebook group were discussing how interpreters could

differentiate between state and national certification. **Laura Hill** says that people ask what the word *Intermediary* means and it requires a lot of explanation. **Lori Breslow** states a decision is not required immediately, but to start the discussion to be ready when the time arrives. **Kristin Lund** mentions that in Minnesota a conference was held and there was a discussion between whether or not *intermediary* is the correct term to use or not because it could mean “just average.” **Lori Breslow** says that she can add different acronyms onto the survey for the best option.

Deaf Interpreter Test Fees - This needs to be decided. The deadline was July 7, but we are going to continue to discuss it.

- **Philosophies in determining fees**
- It was \$50 to take the Level III or Level V Intermediary tests. We were trying to get more deaf people to take the test, but it did not work. We probably only had 20 certified deaf interpreters take it. The problem is that they get their certification but then do not get their CEUs to maintain the certificate because they aren't hired to interpret and therefore do not get paid. Possibly only 2-3 people have become certified.
- The new test has two parts. The ASL proficiency exam. First the deaf applicants need to take the ASL proficiency test. So do we want to keep the cost cheap or the same as hearing interpreters? The Test of English Proficiency (TEP) is \$95, and Trilingual Test of Spanish Proficiency is (\$95) and the Trilingual Advanced Performance Test is \$160. I have met a number of hearing interpreters that are angry about the deaf test being cheaper. It is a political thing so we need to decide the cost.

Deborah Martinez – Recently, the unemployment for deaf people has been high. Many deaf interpreters have backed out of the profession because there are not many jobs available. I do not think we need to increase the testing fee. **Lisa Bosson** – I would keep it the same at \$50 to encourage people to take the test. **Lori Breslow** – There's an ASL proficiency and then a performance test. So what should the cost be for each? Normally, we have 3-4 raters. It would be \$35 per rater. We would lose money on all of the tests. **Laura Hill** – If you really have the desire and you want to become a certified deaf interpreter, then you would want to pay a higher price. **Deborah Martinez**– For now, the price can stay the same and then change it later. Maybe it can be \$50/\$75. If the rules change again, then it would take 8 months to process. **Sharon Hill** – We are trying to make a political statement with this price. We want this test to be equivalent to all of the other tests according to BEI. The work may not compensate for the test, but the test was still developed in the same way as other tests. If it costs \$105 for raters to evaluate one test, then we need to charge that much or a little more. **Alaina Webb** – Agrees it would actually cost a little bit more. **Sharon Hill** – Proposed \$75 for each so a total for \$150.

Lisa Bosson motioned and seconded by Deborah Martinez to recommend the test fees for the ASL Proficiency test be \$75, and the performance test fee at \$75. The motion passes unanimously.

Initiatives for Educational interpreters

Lori Breslow –We've been working with Susan Tiggs from the Dallas/Ft. Worth area. Susan Tiggs wanted to come and present to us today but I suggested the next meeting due to our lengthy agenda. As an EIPA administrator she has a different interpretation from us. We think that IDEA establishes regulations that states can determine on their own. She wants to come and talk to us about what the rule actually means. She agreed to support the summer institute in

August, which will focus on educational interpreting. I have asked Susan Tiggs to find out from TEA what their rule means.

Lori Breslow - The legislative session just wrapped up. And the Sunset reports just came out. DARS was audited through the sunset process as well as TWC, Texas Workforce Commission. DARS will no longer be called DARS as of September 1, 2016. DARS programs will be HSSC, Health and Human Services Commission. It will be same program different name. The name change occurred to provide a one stop shop for consumers, not to save money. Other change, VR-DRS and DBS will be consolidated as well and will be under the legal level. This was recommended and passed by the legislature. TWC decided that VR and blind services will be moved to HCCS, Deaf services will be TWC. HSSC offices will be moved TBD. Sunset recommends that all deaf and hard of hearing services be evaluated to be moved to the independent living centers. Community members will be interviewed followed by a decision. There are about 25 living centers in Texas, but not enough staff to support them. Some centers showed up and would like to serve but don't have the money or the skill. There is only one database; we do all the work so a resource specialist will be an area of interest. An RFP will be sent out; the deadline is every 6 months but I am not sure. **Sharon Hill:** I will keep everyone posted on the manual and the survey.

BEI Program Report (Angela Bryant) – Lori Breslow provided report in Angela Bryant's absence.

Medical Interpreter Test:

- On June 25-26, the filming of talent to produce the demo DVD for pilot testing was completed.
- On July 25-26, July 31, pilot testing is scheduled to test a small sample of currently certified interpreters at minimum BEI Levels III-V, Advanced, or Master. These individuals were selected based on criteria established by the University of Arizona. These individuals are required to sign confidentiality statements prior to testing, after the test is administered must complete a questionnaire to solicit feedback about the appropriateness of the test and other important factors.
- On July 31-August 1, benchmark assessments are scheduled to determine cut scores and identify any adjustments that are needed based on questionnaire results.
- Test development project is on target to be completed by August 12, 2015.
- Implementation projects will be underway in preparation for general test administration to begin in December 2015.

Sharon Hill: Health industries have an initiative where any language services provided will be done by certified interpreters. **Deborah Martinez:** Visited St. Paul for a healthcare symposium. The new trend for hospitals is to hire their own staff interpreters. More people are becoming aware for the need. St. Paul and Catherine's have set up medical training. **Sherri Roberts:** Hospitals are requiring credentials, they hire staff or use a third parties to check interpreters.

Deaf Interpreter Test

This update was obtained from John Bichsel at the University of Arizona.

Following the filming of the *ASL Proficiency Test* pilot in November and December, 2014 at San Antonio College, Stephanie Clark came to our offices at the UA to help produce the final test in January, 2015. A draft of the Candidate Handbook was filmed in Tucson in February, 2015. Piloting of the *ASL Proficiency Test* began in March, 2015 in San Antonio and Tucson. The final test and the preliminary pilot results of 12 candidates were presented to the Expert Panel in Austin in April, 2015 for review and approval. The Candidate Handbook was revised as a result of this meeting, and re-recorded in San Antonio in May and June, 2015.

Recently, a local CDI has worked with us to record a draft of several sections of *Deaf Interpreter Pilot Performance Test* that are based on topics agreed upon at the first Expert Panel meeting and subsequently revised by several members of the Expert Panel.

Next Steps

We have until March, 2016 to finish the project. During the next few months (September – October) we would like to arrange meetings with the Expert Panel to finalize and approve the performance test scripts and prepare for recording the pilot performance test. After these meetings the following activities will take place (times are estimated and not confirmed):

- Film the *Deaf Interpreter Pilot Performance Test (October – November)*;
- Production of the *Deaf Interpreter Pilot Performance Test (November)*;
- Pilot the *Deaf Interpreter Performance Test (November – December)*;
- Conduct benchmark scoring of the *Deaf Interpreter Pilot Performance Test (December - January)*;
- Conduct rater training for the *Deaf Interpreter Pilot Performance Test (January – February)*;
- Develop Rater Training Manual, Candidate Information, and final report for the *Deaf Interpreter Performance Test (January – February)*.

Court Performance Test Implementation Projects

- On March 30, 2015, the Court Performance Test development project was completed.
- Adoption of court rules is anticipated soon.
- On July 13, 2015, draft policies and forms were submitted to Center for Policy and External Relations (CPER). The expected adoption date is September 1, 2015.
- Prospective candidates will be able to apply after September 1, 2015.

BEI Registry Online Portal Progress Report

- On May 15, 2015, the new BEI online registry was launched. Approximately 3000 individuals received login instructions. This included 1500 certified interpreters and the remainder test applicants or individuals awaiting test results.
- As of July 20, over 800 individuals have setup their profiles.

- The feedback from users has been favorable, which makes all of our efforts worthwhile.
- Staff is adjusting to this new way of conducting business.

New Business

Review and Consider Petition for TEP Testing Applicant (Closed)

There was not sufficient information provided to consider this request. No action was recommended.

Review and Consider Conviction Finding for Certificate Holder (Closed)

The board recommended approving the applicant's request.

Review and Consider Completion of Terms of Final Agreed Order

The terms of the Order have been fulfilled.

Executive Session (Closed) at 2:30 p.m.

The DARS BEI Advisory Board, a purely advisory body, complies with the Open Meetings Act. In accordance with the Act, the Board may enter into closed Executive Session for discussion and consideration of items posted on this agenda notice which involve: (a) pending or contemplated litigation matters or settlement offers requiring consultation with or advice from the Board's attorney, pursuant to Texas Government Code §551.071(1); (b) a matter in which the duty of the Board's attorney to the Board under the Texas Disciplinary Rules of Professional Conduct of the State Bar of Texas clearly conflicts with Chapter 551 of the Texas Government Code, pursuant to Texas Government Code §551.071(2); (c) a negotiated contract for a prospective gift or donation to the State or to the Board, pursuant to Texas Government Code §551.073; or (f) other matters as permitted pursuant to Chapter 551 of the Texas Government Code. The Board will reconvene following Executive Session for discussion of items considered in closed session and to take any final actions or vote on such matters in accordance with Texas Government Code §551.102.

- a. Matters relating to recommendations on possible disciplinary actions and settlement of disciplinary actions relating to BEI certified interpreters.
- b. Any other matter discussed on the agenda. If, during the discussion of any agenda item, a matter is raised that is appropriate for discussion in executive session the Board may, as permitted by law, adjourn into executive session to deliberate on the matter.

Reconvene in Open Session at 3:20 p.m.

- Discuss and take action/vote on any matter discussed in Executive Session under Agenda Item 10, including voting on any recommendations relating to complaints against BEI certified interpreters, and recommendations for BEI member appointments.

Schedule next board meeting

- a. September 18, 2015
- b. January 8, 2016

Meeting adjourned at 3:35 p.m.

BEI Advisory Board

Note: A vacancy on the advisory committee will be created through the expiration of a term, resignation of a member, incapacity of member to the extent that the member is unable to fulfill the obligations of the position, or absence of a member for three consecutively scheduled meetings. To fill the vacancies, the committee may review applications of candidates and recommend appointments of such candidates to the Office.

FY 2015-'16 – Attendance Log

Meeting Dates	Member's Name	Present	Absent
July 24, 2015			
	Sharon Hill	X	
	Laura Hill	X	
	Lisa Bosson	X	
	Sherri Roberts	X	
	Deborah Martinez	X	
	Alaina Webb	X	
	Todd Agan		X
October 16, 2015			
	Sharon Hill	X	
	Laura Hill	X	
	Lisa Bosson	X	
	Sherri Roberts	X	
	Deborah Martinez	X	
	Alaina Webb	X	
	Todd Agan	X	
January 8, 2016			
	Sharon Hill	X	
	Laura Hill	X	
	Lisa Bosson	X	
	Sherri Roberts	X	
	Deborah Martinez	X	
	Alaina Webb	X	
	Todd Agan	X	
April 8, 2016 (canceled) / May 6, 2016 (rescheduled)			
	Sharon Hill		
	Laura Hill		
	Lisa Bosson		
	Sherri Roberts		
	Deborah Martinez		
	Alaina Webb		
	Todd Agan		

ASSESSMENT OF ADVISORY COMMITTEES
April, 2016
538 - Department of Assisive and Rehabilitative Services

To assist in the process required by Chapter 2110, Texas Government Code, state agencies should submit an assessment of advisory committees using the format provided. Please submit your assessment for each advisory committee under your agency's purview. Include responses for committees created through statute, administrative code or ad-hoc by your agency. Include responses for all committees, whether ongoing or inactive and regardless of whether you receive appropriations to support the committee. Committees already scheduled for abolishment within the 2016-17 biennium are omitted from the scope of this survey. When submitting information for multiple advisory committees, right-click the sheet "Cmte1", select Move or Copy, select Create a copy and move to end.

NOTE: Only the items in blue are required for inactive committees.

SECTION A: INFORMATION SUBMITTED THROUGH ADVISORY COMMITTEE SUPPORTING SCHEDULE IN LEGISLATIVE APPROPRIATIONS REQUEST

Committee Name:

Number of Members: Note: There are 24 official members, currently 22 members due to 2 vacancies

Committee Status (Ongoing or Inactive): Note: An Inactive committee is a committee that was created prior to the 2014-15 biennium but did not meet or supply advice to an agency during that time period.

Date Created: **Date to Be Abolished:**

Budget Strategy (Strategies) (e.g. 1-2-4) **Strategy Title (e.g. Occupational Licensing)**

Budget Strategy (Strategies) **Strategy Title**

[State / Federal Authority](#)

[Select Type](#)

[Identify Specific Citation](#)

[State Authority](#)
[State Authority](#)
[State Authority](#)
[Federal Authority](#)
[Federal Authority](#)
[Federal Authority](#)

Statute	Human Resources Code Chapter 117
Admin Code	T.A.C.§101.507 regulations
Statute	United States Code, Title 20, Chapter 33, §1441.
Rules	34 C.F.R. Part 303, Subpart G §303.600-605

Advisory Committee Costs: This section includes reimbursements for committee member costs and costs attributable to agency staff support.

Committee Members' <u>Direct</u> Expenses	Expended	Estimated	Budgeted
	Exp 2015	Est 2016	Bud 2017
Travel	\$9,943	\$13,887	\$14,000
Personnel	\$0	\$0	\$0
Number of FTEs	0.0	0.0	0.0
Other Operating Costs	\$0	\$0	\$0
<i>Total, Committee Expenditures</i>	\$9,943	\$13,887	\$14,000
Committee Members' <u>Indirect</u> Expenses	Expended	Estimated	Budgeted
	Exp 2015	Est 2016	Bud 2017
Travel	\$0	\$0	\$0
Personnel	\$0	\$0	\$0
Number of FTEs	0.0	0.0	0.0
Other Operating Costs	\$0	\$0	\$0
<i>Total, Committee Expenditures</i>	\$0	\$0	\$0
Method of Financing	Expended	Estimated	Budgeted
	Exp 2015	Est 2016	Bud 2017
Method of Finance			
1 - General Revenue Fund			
555 - Federal Funds	\$18,757	\$13,746	\$22,000
	\$0	\$0	\$0
	\$0	\$0	\$0
	\$0	\$0	\$0
Expenses / MOFs Difference:			
Meetings Per Fiscal Year	4	4	4

Committee Description: The federal law establishing the system of early intervention programs for infants and toddlers with developmental delays or disabilities is Part C of the Individuals with Disabilities Education Act (IDEA). Each state that operates a Part C program must include as a part of its program an advisory council that Part C of the IDEA calls the "Interagency Coordinating Council, or ICC. The DARS ECI Interagency Coordinating Council is the ECI Advisory Committee (AC). The function of the Advisory Committee is to advise and assist ECI in its

...operation of the statewide system of providing ECI services to eligible children and families in Texas. The multidisciplinary and multi-constituency representation on the Advisory Committee contributes to making it an important part of the ECI system. It is one of ECI's major sources of stakeholder input. Three ECI staff provide administrative and staffing support to perform ECI AC related activities. Each

SECTION B: ADDITIONAL COMMITTEE INFORMATION

Committee Bylaws: Please provide a copy of the committee's current bylaws and most recent meeting minutes as part of your submission.

1. When and where does this committee typically meet and is there any requirement as to the frequency of committee meetings?

2. What kinds of deliverables or tangible output does the committee produce? If there are documents the committee is required to produce for your agency or the general public, please supply the most recent iterations of those.

3. What recommendations or advice has the committee most recently supplied to your agency? Of these, which were adopted by your agency and what was the rationale behind not adopting certain recommendations, if this occurred?

4a. Does your agency believe that the actions and scope of committee work is consistent with their authority as defined in its enabling statute and relevant to the ongoing mission of your agency ?

4b. Is committee scope and work conducted redundant with other functions of other state agencies or advisory committees?

5a. Approximately how much staff time (in hours) was used to support the committee in fiscal year 2015?

5b. Please supply a general overview of the tasks entailed in agency staff assistance provided to the committee.

6. Have there been instances where the committee was unable to meet because a quorum was not present?

Please provide committee member attendance records for their last three meetings, if not already captured in meeting minutes.

7a. What opportunities does the committee provide for public attendance, participation, and how is this information conveyed to the public (e.g. online calendar of events, notices posted in Texas Register, etc.)?

7b. Do members of the public attend at least 50 percent of all committee meetings?

7c. Are there instances where no members of the public attended meetings?

8. Please list any external stakeholders you recommend we contact regarding this committee.

9a. In the opinion of your agency, has the committee met its mission and made substantive progress in its mission and goals?

9b. Please describe the rationale for this opinion.

10. Given that state agencies are allowed the ability to create advisory committees at will, either on an ad-hoc basis or through amending agency rule in Texas Administrative Code:

10a. Is there any functional benefit for having this committee codified in statute?

 Yes

Note: ECI AC is already in statute

10b. Does the scope and language found in statute for this committee prevent your agency from responding to evolving needs related to this policy area?

 No

10c. If "Yes" for Question 10b, please describe the rationale for this opinion.

N/A

11a. Does your agency recommend this committee be retained, abolished or consolidated with another committee elsewhere (either at your agency or another in state government)?

 Retain

11b. Please describe the rationale for this opinion.

Based on analysis recently conducted and recommendations approved by the HHSC Executive Commissioner on 10/31/15, this advisory committee should be retained and is federally required.

12a. Were this committee abolished, would this impede your agency's ability to fulfill its mission?

 Yes

12b. If "Yes" for Question 12a, please describe the rationale for this opinion.

This committee is federally required and if eliminated DARS/ECI would be out of compliance.

13. Please describe any other suggested modifications to the committee that would help the committee or agency better fulfill its mission.

None

**Bylaws
of the
Texas Interagency Coordinating Council**

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TEXAS INTERAGENCY COORDINATING COUNCIL

BY-LAWS

Article I Council Name

The name of the advisory committee to the Department of Assistive and Rehabilitative Services, Division for Early Childhood Intervention Services shall be the Texas Interagency Coordinating Council (ICC).

Article II Authority to Establish

The advisory committee of the Department of Assistive and Rehabilitative Services, Division for Early Childhood Intervention Services is authorized and required under Part C of the Individuals with Disabilities Education Act (20 USC 1441) as the state's Interagency Coordinating Council.

Article III ICC Duties

The Texas ICC ("the Committee") shall perform the following duties as required by the IDEA and the Texas Administrative Code:

- (1) advise and assist the Department of Assistive and Rehabilitative Services, Division for Early Childhood Intervention Services (the "Department") in the development and implementation of the policies that constitute the statewide Early Childhood Intervention (ECI) system;
- (2) advise and assist the Texas Education Agency regarding appropriate services and the transition of toddlers with developmental disabilities to services provided under IDEA, Part B, to preschool and other appropriate services;
- (3) assist the Department in achieving the full participation, coordination, and cooperation of all appropriate public agencies in the state;
- (4) assist the Department in the effective implementation of the statewide system, by establishing a process that includes-
 - (i) seeking information from service providers, service coordinators, case managers, parents, and others about any federal, state, or local policies that impede timely service delivery; and
 - (ii) taking steps to ensure that any identified policy problems are resolved;
- (5) assist the Department, to the extent appropriate, in the resolution of disputes;
- (6) advise and assist the Department in the identification of fiscal and other support for services for early intervention programs under the IDEA, Part C;
- (7) advise and assist the Department in the assignment of financial responsibility to the appropriate agency;
- (8) advise and assist the Department in the promotion of interagency agreements; assist the Department in the preparation of application under the IDEA, Part C, and amendments to those applications;

(9) with assistance from the Department, prepare an annual report to the Governor and to the Secretary of the United States Department of Education on the status of early intervention programs operated within the state for children eligible under IDEA, Part C and their families, and submit the report to the Secretary by a date the Secretary establishes.

The Texas ICC **may** perform the following duty as authorized by the IDEA and the Texas Administrative Code:

- (1) advise and assist the Department and the Texas Education Agency regarding the provision of appropriate services for children age birth to five, inclusive.

Article IV Membership

Voting Members: The Texas Interagency Coordinating Council shall have 24 voting members as described in the Texas Administrative Code. All voting members are appointed by the Governor. Those members representing state agencies are nominated by their respective Commissioners.

Advisory committee members, other than ex officio members, serve staggered six-year terms, with the terms of eight members expiring February 1 of each odd numbered year.

Ex officio members: Additional members may be appointed by the Department to perform specific, time-limited tasks as needed by the ICC. Ex officio members are not voting members.

The Chair of the ICC shall provide notice to the Governor of any current or upcoming vacancy and request an appointment be made to fill that vacancy.

Article V Officers

The officers of the Texas ICC are the Chair and the Chair-elect. The Chair and Chair-elect shall be selected by the Committee from among its membership. Each officer shall serve a two-year term of office that begins on February 1. The Chair-elect becomes the Chair if the Chair resigns or is unable to serve and the Committee will select a new Chair-elect. The Chair presides at meetings, communicates with the Department staff assigned to support the Committee, and represents the Committee to the public and other interested entities. In the absence of the Chair, the Chair-elect or another designee presides at the meetings.

Article VI Meetings

Attendance at Meetings: The Texas ICC shall meet at least quarterly. Additional meetings may be called if agreed to by the Chair and the Assistant Commissioner. Members are expected to attend all meetings of the Committee. A member who is unable to attend a regularly scheduled quarterly meeting should notify the Chair or state office. The Department may recommend to the Governor the removal of any member who is absent for more than half of the regularly scheduled meetings during each calendar year, or is absent from more than two consecutive regularly scheduled meetings. The ICC will provide a written report to the Governor annually of the attendance of all Governor appointees.

Location: Meetings will generally be held in Austin, Texas. All Committee meetings will follow rules established by the Texas Open Meetings Act, Government Code, Chapter 551. Written notice of the date, time, place, and subject of each meeting shall be posted in The Texas Register. The state office program staff is responsible for posting to the Texas Register within required timelines.

Meeting Notice and Agendas: The Department shall ensure that notice and tentative agendas of regularly scheduled meetings are distributed to all members at least one week prior to the meeting date.

Article VII Procedures

Except for procedures specifically addressed in either the bylaws or in applicable state or federal statutes and regulations, the Committee will use Robert's Rules of Order to conduct business.

A quorum of the Committee must be present to take action. A quorum is constituted when eight of the appointed members are present, at least one of whom must be a member appointed to fill a parent position. All actions taken by the Committee must be approved by a majority vote of the members present at the meeting.

The Chair can offer resolutions and discuss questions, but shall not vote except in the case of a tie. The Chair shall declare all votes. A roll call vote shall be taken upon the demand of any member present.

Members who cannot attend a meeting may send someone to observe the meeting for them, but that person will not be allowed to vote. Participation by an observer in discussions of Committee business is at the discretion of the chair. The appointed member will still be counted as absent.

Article VIII Conflict of Interest

No Committee member shall vote on any matter that would provide direct financial benefit to that member or otherwise give the appearance of a conflict of interest under state law. In the instance where there may appear to be a conflict of interest the Assistant Commissioner of the Department will seek legal clarification.

Article IX Organization

The majority of the work of the Committee will be done during the regularly scheduled meetings of the full Committee.

The Chair, with the approval of a majority of the Committee, may establish ad hoc committees to work on specific issues within prescribed timelines.

Article X Technical Support

The ICC is supported by Department of Assistive and Rehabilitation Services, Division for

Early Childhood Intervention Services program staff. The role of state program staff is to communicate concerns and issues regarding the statewide system that are under discussion, provide information and other technical resources including clerical support to support the work of the Committee and to otherwise assist in facilitating the work of the ICC.

Article XI Reimbursement of Expenses

Members of the Texas ICC, both official and ex officio, may be reimbursed for their travel and per diem expenses when on Texas ICC business, including child care or attendant care. Members will provide the required documentation of expenses incurred in the form required by the administrative support of the state office. Updated copies of current rules and regulations related to claiming travel and other expenses are provided to Texas ICC members by the Department staff prior to the first quarterly meeting of a fiscal year and for newly appointed members prior to their first meeting.

Article XII Public Participation

The ICC complies with all applicable requirements of the Texas Open Meetings Act in Chapter 551 of the Government Code, including posting of all meetings and agendas with the Texas Register. The ECI state office staff is responsible for posting meeting notices within required timelines.

All posted agendas will include information on how a member of the public can request an interpreter or other accommodation for a meeting of the Committee.

There will be time at the beginning of each meeting for introduction of visitors and for limited public testimony. Persons wanting to testify should contact the Chair in advance. There will also be time allotted at the discretion of the Chair for brief testimony by persons who have not requested time in advance. When allotting time for public testimony, the Chair may take into account the number of requests, the number of agenda items, and the time needed to complete the posted agenda.

Article XIII Amendment of the Bylaws

Amendments to these bylaws may be proposed at any regularly scheduled meeting of the Texas ICC. Amendments approved by a majority of the voting members take effect at the following regularly scheduled meeting.



DARS ECI Advisory Committee

ADVISORY COMMITTEE MEETING MINUTES August 5, 2015

The regular quarterly meeting of the Advisory Committee to the Department of Assistive and Rehabilitative Services (DARS); Division for Early Childhood Intervention (ECI) Services was held on Wednesday, August 5, 2015 in Austin, Texas at 4900 N. Lamar Blvd. in Room 1410, 1420 & 1430 of the Brown-Heatly Building.

Members Present:

Dr. Richard Adams, Chair
Alferma Giles
Barbara Knighton via teleconference
Benna Timperlake, Ex Officio
Diane Kazlow
Harvey Salinas
Holly Sanchez
Karen Meyer
Peter Smas on behalf of Katrina Daniel
Laura Kender
Laura Warren
Lynn Sullivan
Manda Hall
Pamela Perez
Pattie Rosenlund
Sarah Abrahams

Members Absent:

Barbara James
Emily Dean
Jenny Hinson
Kathy Lee
Phil Warner, Ex Officio
Terrie Breeden

Guests:

Alice Bufkin – Texans Care for Children
Clayton Travis – Texas Pediatric Society
Martha Aki – Katy ISD ECI
Steven Aleman – Disability Rights Texas
Susan Garnett – MHMR Tarrant County

Approval of Minutes

The committee approved the minutes of the April 8, 2015 meeting with no corrections.

Public Comment

Steven Aleman, Disability Rights Texas (DRT) provided comment on the following:

- DRT continues to make an effort to engage with the legislature on the importance of ECI.
- Due to the transfer of ECI to HHSC ECI may have a new structure and may need to develop a new way to do business.
- Thanked the ECI Advisory Committee members for their time which is needed for ECI to continue to thrive.

Clayton Travis, Texas Pediatric Society (TPS) provided comment on the following:

- Texas pediatricians have concerns related to the ECI appropriations but are committed to the ECI program and know the value.
- TPS wants to continue to partner with ECI.
- Exceptional item and budget cuts may significantly impact the ECI program and places uncertainty about ECI being the best program to refer children with disabilities.
- Suggested to shift funds if possible.

Alice Bufkin, Texans Care for Children provided an overview of a grant opportunity on engaging parents.

- Need strong ECI programs to support the grant and its testing.
- Requested to be able to actively talk to parents about the grant.

DARS Commissioner Report

DARS Commissioner Veronda L. Durden addressed the advisory committee members and provided the following update:

- Ms. Kim Wedel accepted a position at the HHSC Medicaid and CHIP Division, directing contract compliance and support, within Program Operations. Acknowledged and thanked Ms. Wedel for the more than 9 years of service in support of families and children with developmental delays.
- Ms. Rosalin Willis agreed to serve as the interim assistant commissioner for ECI. Ms. Willis has more than 7 years with the ECI program. Prior to coming to DARS, Ms. Willis worked with many of the enterprise agencies (DHS, DPRS, HHSC, DADS). Ms. Willis has more than 10 years of leadership experience including experience as the manager of Performance and Oversight and as the director of Performance and Oversight.
- The 84th Legislative Session adjourned sine die. Commissioner Durden addressed the major legislative decisions that impacted DARS.

Interim Assistant Commissioner Report and ECI State Office Update

Interim Assistant Commissioner Rosalin Willis addressed the advisory committee members and provided the following update:

Leadership Update

Ms. Willis accepted the position as interim ECI assistant commissioner. She stated that Kim Wedel has been a mentor and will continue to provide support as needed.

Dana McGrath, ECI director of Policy and Support, will be serving as the Texas Part C Coordinator as well as the DARS ECI state office representative to the ECI Advisory Committee.

Kim Lee has served for the past year as the manager of Performance and Oversight and was appointed as the interim director for Performance and Oversight.

High Level Priorities

1. We will continue to focus on strengthening and supporting our contractor base, including:
 - Working to improve the performance of the system as a whole; and
 - Evaluating state requirements to more closely align with federal requirements.
2. We will continue to work to ensure efficient oversight of individual contractor and system performance.
 - We want to further engage the executive leadership of our local ECI program; and
 - Provide technical assistance to identify and help programs address root causes of performance issues.
3. We will work to identify and develop a strong network for ECI that allows us to capitalize on opportunities for increased interagency collaboration with other organizations, entities and programs that share our purpose of serving children with disabilities and their families.
4. We will prepare for transition of the ECI program to HHSC.
 - We will ensure that the work of our staff aligns with the direction of HHSC; and
 - We want to effect up and down communication with HHSC, our staff, our contractors, and our other partners, including the ECI Advisory Committee, regarding plans and decisions for the transition as they are made available.

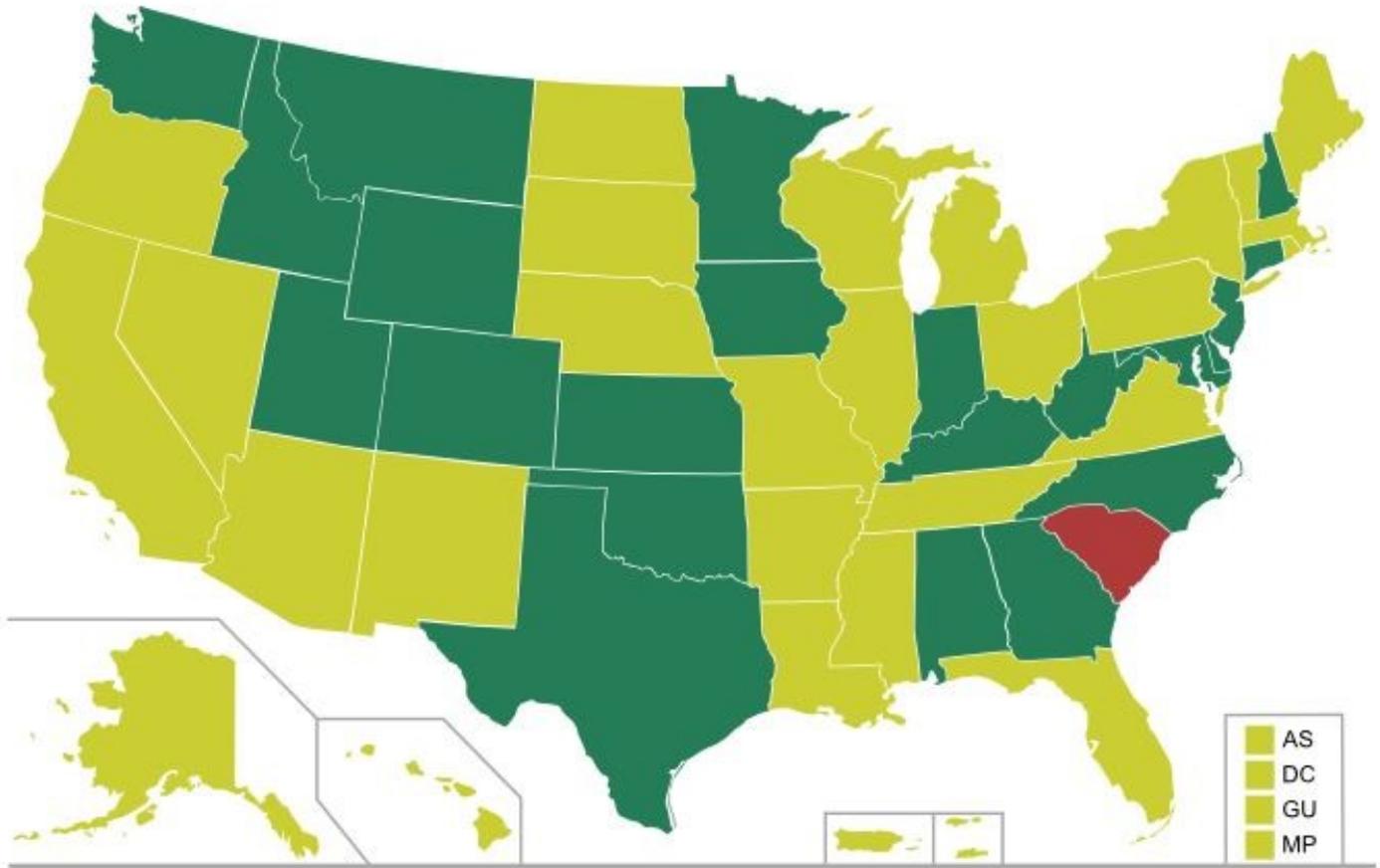
Overview of Agenda

- Steven Elkins, ECI Program Evaluation, Analysis and Reporting manager, will be reviewing the Annual Performance Report Determinations and provide an update on the State Systemic Improvement Plan.
- Brent Whitaker with DARS Center for Policy and External Relations will be providing a legislative wrap-up on Sunset activities since we last met in April.
- There is a vacancy in the Chair-Elect position. We will nominate and vote on a new Chair-Elect at the end of the meeting and also vote to extend Dr. Adams' current tenure to allow for mentoring of the new Chair-Elect if the Committee desires.

Data Update

Steven Elkins, DARS-ECI Data and Information Manager, presented the data points as depicted below:

Meets Requirements ■ Needs Assistance ■ Needs Intervention ■



- 22 states met requirements during the 2014 performance period.
- Texas received 100% as compared to last year's score of 85%.
- Texas is the one large state that met requirements compared to other large states such as California and New York.
- The full report can be viewed at the national Office of Special Education Programs website: <https://osep.grads360.org/#communities/pdc/documents/8305>

Data and Reporting Updates

Data Points (as of June 2015)		SFY 2014	Q1 SFY 2015	Q2 SFY 2015	Q3 SFY 2015	SFY 2015 YTD as of June 2015
Children Referred and Serviced	Average Monthly Referrals	5,812	6,047	5,790	6,327	6,100
	Average Monthly Initial Eligibility Determination	3,666	3,701	3,383	3,894	3,682
	Average Monthly Enrolled	23,671	23,750	23,611	24,223	23,931
	Average Monthly Served 2014 Target = 26,869 2014 % of Target Met = 96.4%	25,912	26,057	25,744	26,476	26,174
	2015 Target = 28,372 2015 % of Target Met = 92.3%					
Cumulative Total Clients Served (unduplicated)		49,685	30,458	36,607	43,745	46,202

	Average Monthly Delivered Service Hours (not parent arranged)	69,603	69,286	66,083	73,749	70,267
Delivered Services and Evaluations	Average Service Hours per Child per Month (Average Monthly Delivered Service Hours ÷ Average Monthly Served) 2014 Target = 2.90 % of Target Met = 92.8%	2.69	2.66	2.57	2.79	2.68
	2015 Target = 2.90 % of Target Met = 92.6%					
	Average Monthly SC/TCM Hours	17,748	15,622	14,457	15,699	
	Average Monthly SC/TCM Hours per Child per Month (Average SC/TCM Hrs ÷ Average Monthly Served)	0.68	0.60	0.56	0.59	
	Average Monthly Initial Comprehensive Evaluations	3,283	3,325	3,055	3,568	
Expenditures and Collections	Cost Reimbursement Vouchers Received (YTD, million)*	\$80.6	\$26.0	\$47.0	\$67.3	N/A
	Locally Collected Funds (YTD, million)*	\$103.3	\$19.2	\$43.5	\$68.9	
	% of overall expenditures locally collected funds* (Locally collected Funds / (DARS contract expenditures + Locally Collected Funds))	56.2%	42.5%	48.1%	50.6%	

Notes, Terms, and Definitions

"Monthly Enrolled" and "Monthly Served" both count the total children in each category each month they receive services.

"Cumulative Total Clients Served" represents an annual unduplicated client count.

"TCM" = Targeted Case Management

"SC" = Service Coordination. All children receive case management services. TCM and SC labels for case management services are loosely tied to billing and reimbursement sources.

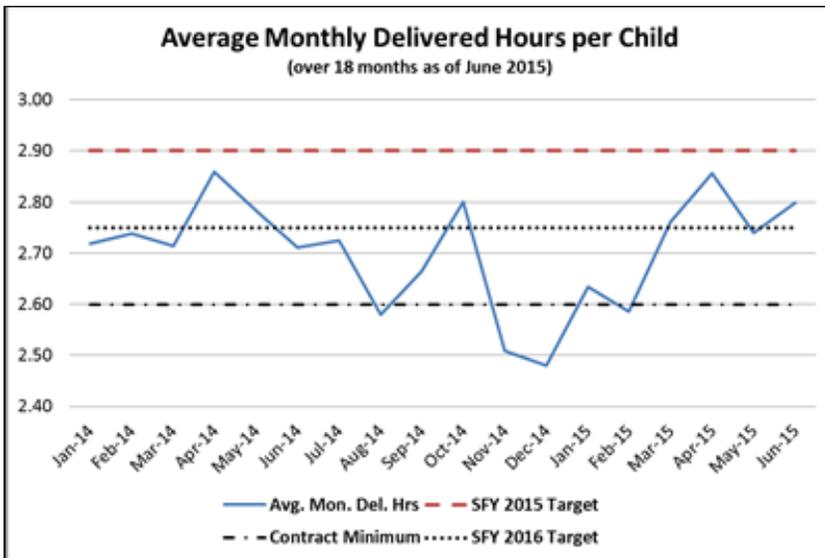
"Initial Comprehensive Evaluations" are measured quarterly. Monthly averages are calculated from the quarterly measurement. An initial comprehensive evaluation is used to determine eligibility for children who do not have a qualifying diagnosis or a documented hearing or vision impairment that meets TEA eligibility criteria.

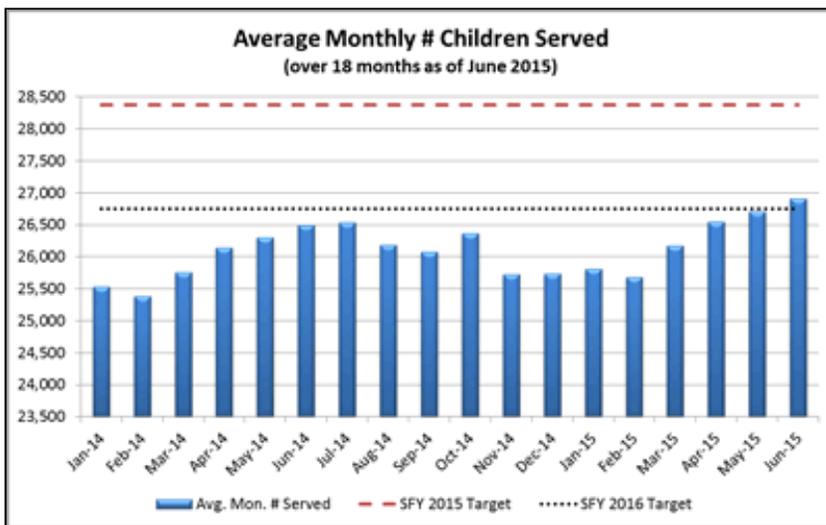
Comprehensive Evaluations include assessments of the following: skills/abilities: cognition, communication, gross or fine motor, social-emotional and adaptive/self-help.

*Cost Reimbursement Vouchers Received are not finalized until after complete reconciliation in February of each year. Therefore, the numbers captured only are at a specific time.

*The Locally Collected Funds includes DARS and HHSC appropriated Medicaid plus other contractor collected revenue. These are captured only quarterly.

NOTE: Updated through FY15 June 2015 with data from the July CRIB, 07/20/15.





Member Comments: Please provide an average number of children served beginning May 2013 for the next meeting to identify if there is a pattern.

State Systemic Improvement Plan (SSIP) Review

Steven Elkins, DARS-ECI Data and Information manager, provided an overview of the SSIP.

- The State-Identified Measurable Result was identified as: Texas Part C will substantially increase the rate of growth in infants and toddlers demonstrating positive social-emotional skills by 0.2% each year resulting in overall increase of 0.8% by the final year (SFY 2019).
- Phase 1 of the SSIP was submitted to OSEP and approved.
- DARS held a stakeholder meeting on August 4, 2015 to gain stakeholder feedback.
- The SSIP Phase 2 plan must be submitted to OSEP by April 1, 2016.

Legislative Wrap Up

Brent Whitaker, DARS Center for Policy and External Relations, Government Relations provided a legislative update.

Sunset Update

- On September 1, 2016, 309.1 M and 1,860.9 Full Time Equivalents will be transferred to the Texas Workforce Commission (TWC).
- SB200 created a legislative oversight committee to develop a transition plan by March 1, 2016 on how the DARS programs will transfer to TWC and the Health and Human Services Commission (HHSC).

General Updates

Total Funding for DARS: \$957.1 million (All Funds)

- \$17.1 million is new funding

Vocational Rehabilitation (VR) programs

- Transfers all funding and full time equivalents (FTEs), \$309.1 million and 1,860.9 FTEs, related to the DARS Vocational Rehabilitation (VR) programs, Business Enterprises of Texas (BET) program, Criss Cole Rehabilitation Center, and Independent Living Services–Older Blind to the Texas Workforce Commission (TWC) on September 1, 2016

Early Childhood Intervention (ECI)

- Reduces total funding by approximately \$35 million due to a decrease in projected caseloads
- Appropriates an additional \$5.4 million to increase the average monthly number of hours of service delivered per child to 2.75 hours in FY 2016-17

Autism Program

- Sets program funding at \$14.2 million, an increase of \$5.3 million over FY 2014-15
- Rider phases out comprehensive services and requires DARS to only enroll children in focused services

Blind Children's Program

- \$1.8 million to serve projected increase in children needing blindness services

Deafness Resource Specialists

- \$1.0 million to increase the number of Texans who have access to deafness resource specialists for communication services

Specialized Telecommunications Assistance Program (STAP)

- \$0.9 million to enhance the program's data system

Independent Living Services (ILS) – General

- \$1.3 million to reduce the number of individuals on the waiting list for services

Comprehensive Rehabilitation Services (CRS)

- \$0.8 million to reduce the number of individuals on the waiting list for services

Criss Cole Rehabilitation Center (CCRC)

- \$0.6 million for maintenance at CCRC

Administration

- \$2.1 million in FY 2017 for program administration to replace lost funding as a result of the transfer of Vocational Rehabilitation to the Texas Workforce Commission (TWC)

Member comments: How is the decision made on where each program will be placed?

DARS or DARS-ECI staff response: *The DARS and HHSC Commissioners along with the TWC Executive Commissioner will develop a transition oversight plan which will determine where each program will be placed. The plan will be submitted to the legislative oversight committee by March 1, 2016. The committee will review the transition plan and will provide comment and make changes if necessary for implementation. There will be several hearings held throughout the state for public comment on the transition process/plan. HHSC has also developed an Office of Transition that will focus on the transition process.*

Nominations and Approval of Chair-Elect

ECI Advisory Committee members voted and approved Holly Sanchez as the Chair-Elect effective August 5, 2015.

Approval of Chair Term Extension

ECI Advisory Committee members voted and approved the extension of the current Chair, Dr. Richard Adams to February 2017.

Select November 2015 Meeting Date and Location

ECI Advisory Committee members voted and approved November 18, 2015 as the next Advisory Committee meeting.

Rules Update

Ms. Cynthia Henderson provided a policy update on the following.

Fiscal Year Policy Planning

- Currently conducting internal meetings to plan for the new fiscal year with ample consideration on supporting the programs.

United States Administration for Children and Families Early Childhood Learning and Knowledge Center, Office of Head Start Performance Standard Review

Goals of the review:

- Ensure high curriculum standards
- Staff development
- Program duration based on effective practices and children's outcomes
- Increase clarity and transparency for better program delivery for current grantees
- Attract new perspective grantees
- Reduce administrative burdens so grantees can focus on providing high quality service delivery
- Maintain core head start principles including:
 - Strong comprehensive services
 - Maintaining parent and family engagement
 - Serving the neediest children and
 - Respecting diversity
- Extending length of day and number of years the head start centers would be required to operate
 - Currently required to operate for 128 days under the new proposed regulations would require centers to operate for 180 days changing to a full year service
 - Change from a 3.5 to 6 hours per day which is based on evidence based research
- Children in higher income brackets could enroll in the program with a minimal fee
- Emphasis on professional development including targeted intensive mentor coaching
- Requires a background check from all state, local, federal and tribal criminal checks on perspective and current employees and cleared through available child abuse and sex offender registries every 5 years
- There is an open comment period ending August 18, 2015

Program Directors Update

Pattie Rosenlund, Pam Perez, Diane Kazlow and Laura Kender, ECI Program Directors, provided an update on the following:

Budget Cuts/Proposed Medicaid Cuts

- Local legislative representatives supported ECI and were aware of the potential impacts to our program if budgets are cut.
- Program is serving at target but due to cuts may not be able to maintain that level of service.
- The Texas Home Visiting Program is expanding to Star County which means children that do not qualify for ECI can now receive supports from the home visiting program, and children aging out of ECI at 3 can continue to receive support from this program as well.
- Met with local legislators in El Paso which generated a letter of support for ECI that was sent to HHSC listing concerns related to budget cuts and the potential impact to the program. A news article and two news reports were generated regarding the potential budget cuts.
- The agencies will have to allow additional positions to be filled to meet the need with a very minimal budget.
- We may need to cut staff based on the proposed cuts which will equate in reduction of referrals and families we can serve.
- Need to look at ways to be more efficient and build, to maintain current level of services.
- Need to research other sources of funding for children to expand ECI.
- Need to anticipate potential growth.
- Developed a local advisory committee to help with challenges.
- Developed a parent group focused on Autism that may be able to be replicated at other programs.
- The transition process in region 11 has been successful and made ECI more visible with all the local school districts.

Training Update

Stephanie Powitzky, ECI training specialist, provided an update on training activities.

ICD-10 Training

- Located at this link: http://www.dars.state.tx.us/ecis/ICD10/ICD10_output/story.html
- The training addressed what is ICD-10 and how will it affect programs.
- The training included the following:
 - Resources for supervisors
 - Resources regarding occupational and physical therapy

Archived Webinars

- Located at this link: http://reg.abcsignup.com/reg/reg_webpage.aspx?wk=0059-0006-9CCA1A97297C429F85F3AA8043C74C63
- Is more user friendly and reorganized.

Office of Special Education Programs Leadership Conference Overview

Dr. Adams shared information received at the conference via email to the ECI Advisory Committee members on the SSIP and the following areas:

- Performance Planning
- Recommended Practice
- Other State Interagency Coordinating Council Information
- Aspen Institute presentation

Member Updates

The Navigate Life website <https://www.navigatelifetexas.org/en> went live on July 1, 2015. Posters were provided to members.

ADJOURNMENT

Meeting was adjourned at 2:55 p.m.



DARS ECI Advisory Committee Meeting Minutes

Wednesday, November 18, 2015

4900 North Lamar Boulevard
 Public Hearing Room 1410, 1420, 1430
 10:00 a.m. – 3:00 p.m.
 Austin, Texas 78756

Members Present:

Dr. Richard Adams, Chair
 Aureka Sanders
 Barbara Knighton
 Diane Kazlow
 Emily Dean
 Harvey Salinas
 Jenny Hinson
 Laura Kender
 Laura Warren
 Lynn Sullivan
 Manda Hall
 Pattie Rosenlund
 Peter Smas on behalf of Katrina Daniel
 Phil Warner-Ex Officio
 Sarah Abrahams
 Terrie Breeden

Members Absent:

Holly Sanchez-Chair Elect
 Alferma Giles
 Barbara James
 Benna Timperlake-Ex Officio
 Karen Meyer
 Kathy Lee

Guests:

Brenda Frizzell – Bluebonnet Trails ECI
 Brian Dees – Health & Human Services Commission
 Claire Merkl – ECI IDD Nueces County
 Martha Aki – Katy ISD ECI
 Rebecca Hornbach – Texans Care for Children
 Stephanie Rubin – Texans Care for Children
 Steven Aleman – Disability Rights Texas
 Tammy Sajak – Department of State Health Services

Interim Assistant Commissioner's Report

Interim Assistant Commissioner Rosalin Willis welcomed attendees, addressed the advisory committee members and provided the following update:

Newsletter

ECI launched a newsletter, the *ECI Connection*. The newsletter was distributed directly to the ECI contractor Chief Executive Officers, Program Directors and Chief Financial Officers with the recommendation for widespread distribution to local program staff. The plan is to issue the newsletter approximately quarterly, and future editions will continue to include information on topics such as:

- state trends from monitoring and quality assurance visits,
- areas of focus from a state or contractor perspective,
- ECI state office position updates (new hires/retirements/major assignments),
- website changes and updates,
- statewide and national early intervention system resources,
- data trends,
- training and technical assistance updates, and
- conferences, continuing education, exhibiting and recruitment opportunities.

Texas ECI Presented at National and State Conferences

DARS ECI staff were selected to present at the National Division of Early Childhood Conference. Rachel Moyer-Trimyer, IDEA Part C Specialist, and Stephanie Powitzky, ECI Lead Training and Personnel Development Specialist, delivered a presentation titled Early Intervention Specialist Individual Professional Development Plan: Building Knowledge and Skills through Online Learning and Supervisor Support, which:

- shared information about the history of Texas ECI's credentialing process;
- discussed how Texas' credentialing and oversight is in line with the practices described in the DEC Position Statement on The Role of Special Instruction in Early Intervention;
- explained how the EIS Individualized Professional Development Plan is developed acknowledging the individual's prior knowledge, strengths and needs;
- provided an overview of the EIS Registry and how it tracks the EIS' progress;
- demonstrated how the EIS Individualized Professional Development Plan Supervisor Guidelines support the supervisor throughout the credentialing process with answer keys and further explanation of activities; and
- provided an overview of the upcoming Keys To Successful Supervision module.

Attendees included national Part C coordinators and other representatives from Part C State Offices. Attendees from Georgia, Louisiana, Mississippi, and Washington were among the participants interested in obtaining source files to replicate within their states. One attendee stated she had been researching our training and credentialing system and was so excited to see Texas on the agenda because they want to use all of our material.

Carol Maupin-Macias, Quality Assurance Therapist also presented at the DEC conference on the Quality Assurance process and how that process has evolved in recent years. Carol shared examples of the tools Texas QA staff use in conducting their visits that were also met with great interest from other states.

Rachel and Stephanie also presented at the Partners in Prevention Conference. The presentation was titled "Texas Early Childhood Intervention: Supporting the Parent-Child Relationship to Improve Developmental Outcomes" and

- Focused on the impact of the child's environment and relationships on brain development and developmental trajectory and the importance of positive relationships for young children
- Described the Texas ECI process from referral through service delivery
- Explained the importance of developing collaborative partnerships with the local ECI agencies
- Provided activities for learners to assess their activities that support and strengthen the parent-child relationship
- Gave participants the opportunity to choose activities to incorporate into their own practice

Attendees included staff from different home visiting programs such as Prevention and Early Intervention, Home Visitors, Child Protective Services and ECI. After the presentation, attendees requested additional training on the same topic in different parts of the state for their staff including Nurse Family Partnership in the Dallas area and Texas Health Steps in El Paso.

Lastly, Rachel and Stephanie presented at the Texas Association for the Education of Young Children. The presentation was titled "Developmental Red Flags: What to Look For, Who Can Help and What You Can DO!"

The presentation provided many of the same topics as the previous presentation but also:

- included information about "red flags" in all developmental areas that would indicate a need for referral,
- provided tips for discussing developmental concerns with families,
- gave information about universal design/inclusive early education settings, and
- provided examples of low-tech assistive technology.

Services Profile Report Changes

As our system works to meet performance measures, we're providing additional tools to help contractors monitor and track performance. Beginning this month, the Services Profile reports used by our contractors to track performance will now be available monthly instead of quarterly. The reports will now only reflect data for one month (instead of 3 months) and will include "Year to Date" data on all of the reports to help track averages.

Therapy Rates

We received an update from the Office of Rate Analysis within the Health and Human Services Commission regarding the proposed therapy rate cuts. Per HHSC Rate Analysis, until the litigation is resolved, HHSC will abide by the injunction and not implement any proposed rate changes. The next court date will be held in January 2016. We will keep the Advisory Committee apprised of any relevant updates regarding therapy rates as they are provided to DARS.

Pamela Perez Retired

Pamela Perez, EL Paso Elinor Zind ECI Program Director retired in late September after 29 years of serving Texas families and children within the ECI program. During her time as an advisory committee member Pam contributed significantly to create a positive impact on the Texas early childhood system. During her tenure as the ECI Advisory Committee Chair she provided guidance, expertise and support needed to:

- implement the Battelle Developmental Inventory standardized rating tool;
- standardize orientation and mentoring for new ECI Advisory Committee members; and
- enhance ECI eligibility requirements.

Quote from Ms. Perez: ***"ECI will always hold a special place in my heart and I have loved being a part of it. I have especially enjoyed being on the Advisory Committee for the last 9 years and hope that I was able to make a difference for the infants and toddlers we serve."***

Public Comment

Steven Aleman, Disability Rights Texas, a protection and advocacy organization for people with disabilities, provided comment on the following:

- The ECI Advocacy Coalition is a group of non-profit stakeholders focused on improving the ECI system statewide. The Coalition met with acting Interim Commissioner Willis in October to inform the ECI Leadership about the ECI Advocacy Coalition and their willingness to help inform state leaders about the importance of ECI and increased funding. Provider support and sustainability is also an area of importance for the ECI Advocacy Coalition.

Texans Care for Children Grant Update

Stephanie Rubin, Texans Care for Children Director, provided an update on the following activities.

- Rebecca Hornbach has joined Texans Care for Children as a research specialist.
- Texans Care for Children has developed an ECI steering committee.
- Texans Care for Children received a one year grant from the Children's Defense Fund and Episcopal Foundation to conduct research efforts, raise awareness and provide advocacy support for ECI.
- They are part of a cohort with five other states funded by Packard to increase developmental screening rates and strengthen the Part C programs.
- They have access to two national research groups that will monitor the research and advocacy efforts around ECI throughout the country: Georgetown Center for Children and Families and National Association of State Health Policy.
- Texans Care for Children is working closely with Disability Rights Texas and the Texas Pediatric Society to reach out to the community and interview and survey families and partners on barriers and coordination efforts at the local level that may inhibit families from accessing ECI and identify any billing challenges for providers.
- They intend to interview other states about their performance measures and determine what is working in their states.
- They also intend to add questions about ECI on various children's surveys as an opportunity to seek more information about barriers within ECI.
- They will seek additional family stories to better inform the public about the importance of ECI, which will ultimately help with future policy improvements.

Data Update

Steven Elkins, DARS-ECI Data and Information Manager, presented the data points as depicted below:

DARS ECI Services Data Points SFY 2015 & SFY 2016		SFY 2014	Q1 SFY 2015	Q2 SFY 2015	Q3 SFY 2015	Q4 SFY 2015	SFY 2015	SFY 2016 as of Sept. 2015
Children Referred and Serviced	Average Monthly Referrals	5,812	6,048	5,789	6,330	6,329	6,124	6,364
	Average Monthly Initial Eligibility Determination	3,666	3,702	3,383	3,906	3,884	3,719	3,626
	Average Monthly Enrolled	23,671	23,747	23,605	24,213	24,373	23,985	24,369
	Average Monthly Comp Served							
	2014 Target = 26,869 2014 % of Target Met = 96.4%							

	2015 Target = 28,372 2015 % of Target Met = 92.6%	25,912	26,055	25,739	26,476	26,813	26,269	26,776
	Cumulative Total Clients Served (unduplicated)	49,685	30,458	36,607	43,745	50,631	50,631	26,776
Delivered Services and Evaluations	Average Monthly Delivered Service Hours (not parent arranged)	69,603	69,281	66,092	73,770	74,041	70,796	75,238
	Average Service Hours per Child per Month (Average Monthly Delivered Service Hours ÷ Average Monthly Served) 2014 Target = 2.90, % of Target Met = 92.8%	2.69	2.66	2.57	2.79	2.76	2.69	2.81
	2015 Target = 2.90, % of Target Met = 92.8%							
	2016 Target = 2.75, YTD % of Target Met = 102%							
	Average Monthly SC/TCM Hours	17,748	15,622	14,457	15,699	14,819	15,149	15,134
	Average Monthly SC/TCM Hours per Child per Month (Average SC/TCM Hrs ÷ Average Monthly Served)	0.68	0.60	0.56	0.59	0.55	0.58	0.57
	Average Monthly Initial Comprehensive Evaluations	3,283	3,325	3,055	3,568	3,527	3,369	
Expenditures and Collections	Cost Reimbursement Vouchers Received (YTD, million)*	\$80.6	\$26.0	\$47.0	\$67.3	Pending	Pending	\$8.5
	Locally Collected Funds (YTD, million)*	\$103.3	\$19.2	\$43.5	\$68.9	Pending	Pending	Pending
	% of overall expenditures locally collected funds* (Locally collected Funds / (DARS contract expenditures + Locally Collected Funds))	56.2%	42.5%	48.1%	50.6%	NA	NA	NA

Notes, Terms, and Definitions

"Monthly Enrolled" and "Monthly Served" both count the total children in each category each month they receive services.

"Cumulative Total Clients Served" represents an annual unduplicated client count.

"TCM" = Targeted Case Management

"SC" = Service Coordination. All children receive case management services. TCM and SC labels for case management services are loosely tied to billing and reimbursement sources.

"Initial Comprehensive Evaluations" are measured quarterly. Monthly averages are calculated from the quarterly measurement. An initial comprehensive evaluation is used to determine eligibility for children who do not have a qualifying diagnosis or a documented hearing or vision impairment that meets TEA eligibility criteria. Comprehensive Evaluations include assessments of the following: skills/abilities: cognition, communication, gross or fine motor, social-emotional and adaptive/self-help.

*Cost Reimbursement Vouchers Received are not finalized until after complete reconciliation in February of each year. Therefore, the numbers captured only are at a specific time.

*The Locally Collected Funds includes DARS and HHSC appropriated Medicaid plus other contractor collected revenue. These are captured only quarterly.

Data and Reporting Updates

Comparison of Early Childhood Intervention Services Consumer Profile SFY 2013-2015

Children Referred / Served	SFY 2013	SFY 2014	SFY 2015
Children Referred	68,172	69,740	73,488
Children Received Comprehensive Services	48,193	49,685	50,634
Children Received Follow Along	2,595	1,658	1,562

Reason Eligible*	Percent (SFY 2013)	Percent (SFY 2014)	Percent (SFY 2015)
Medical Diagnosis	20	19	18
Of those with medically diagnosed condition:			
Chromosomal Anomalies	20	20	20

Congenital Anomalies--Brain/Spinal Cord	12	12	12
Symptoms and Ill-Defined Conditions	15	13	13
Congenital Anomalies--Musculoskeletal & Other	14	15	15
Diseases of the Nervous System	14	14	14
Congenital Anomalies--Facial Clefts	6	6	6
Conditions Originating in Perinatal Period	9	10	10
Congenital Anomalies - Other	3	3	3
Autism Spectrum Disorders	5	5	5
Endocrine, Nutritional and Metabolic Diseases	2	2	2
Developmental Delay	78	79	81
Hearing / Vision	2	2	2
Of those with Developmental Delay or Hearing / Vision: **			
Speech/Communication	78	78	79
Physical/Motor	50	50	51
Cognitive	50	48	49
Adaptive/Self-Help	41	39	39
Personal/Social	35	31	30
Hearing	2	2	2
Vision	1	1	1
Children with more than one area of delay	64	64	61

Planned Service Types	Percent (SFY 2013)	Percent (SFY 2014)	Percent (SFY 2015)
Service Coordination	100	100	100
Specialized Skills Training (Developmental Services)	84	83	82
Speech Language Therapy	55	58	59

Occupational Therapy	30	30	30
Physical Therapy	24	25	26
Nutrition	9	8	8
Psychological/Social Work	6	5	4
Audiology	2	2	2
Vision	2	2	2
Behavioral Intervention	NA	1	1

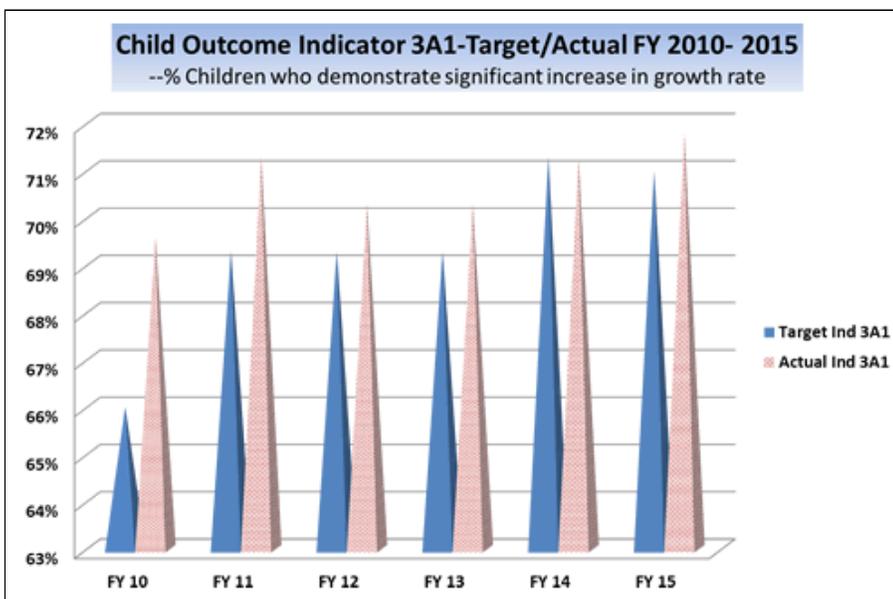
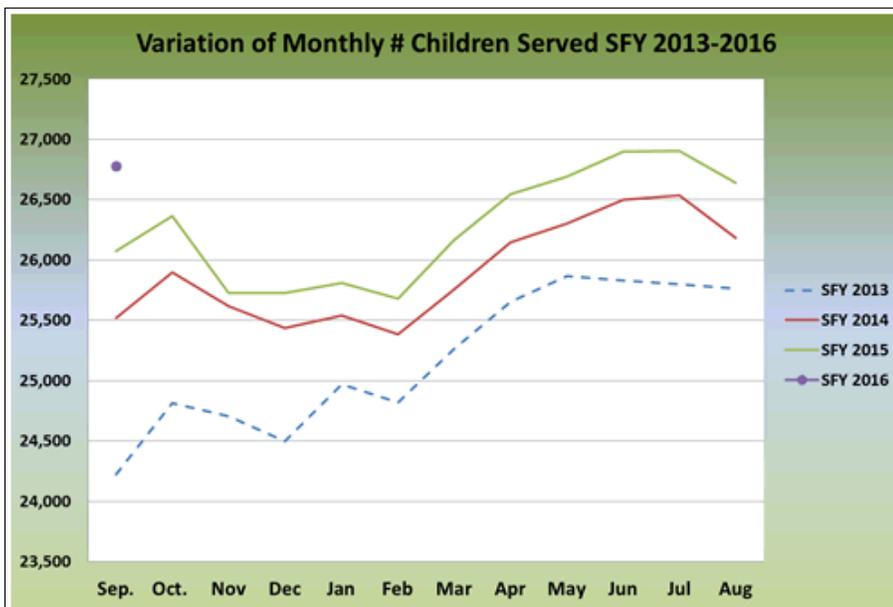
Race/Ethnicity ***	Percent (SFY 2013)	Percent (SFY 2014)	Percent (SFY 2015)
Hispanic/Latino	52	53	52
White	35	35	36
Black/African American	10	10	9
Asian/Pacific Islander	3	3	3
American Indian/Alaskan	<1	<1	<1
Two or More Races	1	1	1

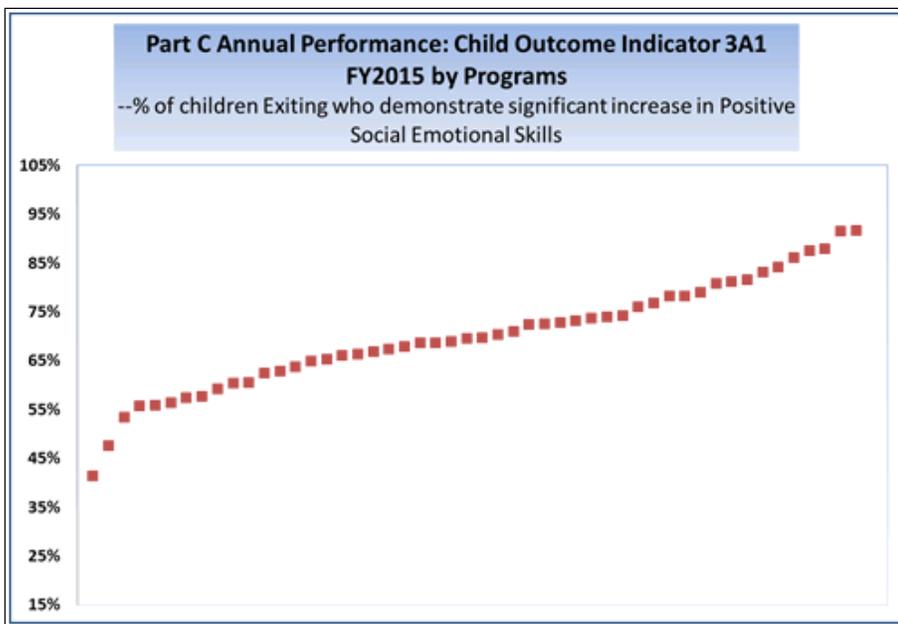
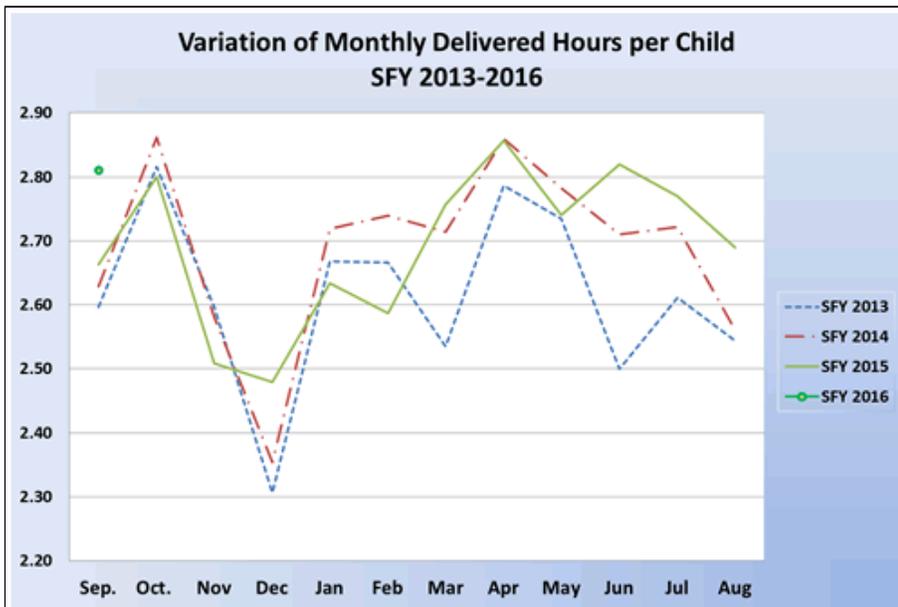
Age at Enrollment *	Percent (SFY 2013)	Percent (SFY 2014)	Percent (SFY 2015)
0-12 months	36	37	37
13-24 months	34	34	34
25-36 months	30	29	30

Other Information	Percent (SFY 2013)	Percent (SFY 2014)	Percent (SFY 2015)
Males	64	64	64
Females	36	36	36
Medicaid	65	65	66
Primary Language English	83	85	83

Primary Language Spanish	17	17	16
Primary Language Other	1	<1	<1

Referral Sources (for all referrals)	Percent (SFY 2013)	Percent (SFY 2014)	Percent (SFY 2015)
Medical/Health Services	49	50	51
Parent/Family/Friends	28	27	25
Social Services	15	14	14
ECI Programs	6	7	8
Educational	2	2	2





- Seventeen programs were recognized with a certificate of achievement for reaching the highest designation of "meets requirements" for 3 or 4 years in a row.
- Tarrant County achieved "meets requirements" this year, which they had not received in many years and were in needs assistance and needs intervention prior to Laura Kender accepting the program director position.

Member comments:

- Program expenses for evaluations for children that are not found eligible are not captured in service delivery but very costly.
- Children referred from DFPS via CAPTA may also impact time and costs to the programs.
- To get a better understanding of what ECI does and how ECI interfaces with partners and families the number of referrals where an assessment was made and the child was not determined eligible should be captured and reflected somehow.
- Follow along is also done with some children that are not determined eligible.

Program Directors Update

Martha Aki, Claire Merkl and Brenda Frizzell, ECI Program Directors, provided an update on the following.

Martha Aki, Katy ISD Program Director, provided the following comments:

- A consortium of ECI program directors meets quarterly to collaborate and discuss topics, issues, concerns and upcoming trainings with ECI leadership.
- At the most recent consortium meeting, participants discussed the administrative efficiencies project, including ways to identify

efficiencies in delivery of services and administrative costs to programs. 15-20 options were identified and ECI State Office is working toward resolutions or changes in these areas to support the programs.

- Managing a program in the current climate and not knowing about the Medicaid rate reimbursement is difficult for programs to be able to plan ahead for change.
- Balancing all contractor requirements and doing more with less staff can be a burden to programs.
- Programs are looking at different ways of providing services and hiring practices.

Claire Merkl, Nueces County ECI Program Director, provided the following comments:

- They experienced an increase in referrals and are always looking for ways to meet the needs of the program and staffing challenges for enrolled children.
- It is difficult to meet the higher delivered hours with the same number of staff.

Brenda Frizzell, Bluebonnet Trails ECI Program Director, provided the following comments:

- Started group services to help with the demand.
- This has been a great way for parents to experience the coaching model and transition model to Part B services.

General Member Comments:

Dr. Richard Adams providing the following comments:

- There were two letters from TPS for public comment delivered verbally and written related to ECI that state: In addition to the current draft policies TPS would like to see an emphasis for children under the age of 3 to enter into the Early Childhood Intervention (ECI) program as a first choice for developmental delays and services. The evidence base supporting ECI as the best practice model to improve and alleviate delays in these young children is clear.

Transformation Update

Brent Whitaker from DARS Government Relations provided an update on the transformation process of DARS to the Texas Workforce Commission and the Health and Human Services Commission (HHSC).

Overview

DARS continues to work with the Texas Workforce Commission (TWC) and HHSC on transition activities related to Sunset legislation.

- S.B. 208, 84th Legislature, directs the transfer of the Vocational Rehabilitation (VR) programs, including the Criss Cole Rehabilitation Center, the Business Enterprises of Texas (BET) program, and the Independent Living for Older Individuals who are Blind program from DARS to the Texas Workforce Commission (TWC) effective September 1, 2016. The statute requires that the transition of these programs be included in the HHSC transition plan and overseen by the HHSC Legislative Oversight Committee required by S.B. 200, 84th Legislature.
- The draft transition plan was completed and approved by the TWC Commissioners at their meeting on Monday, September 28, 2015 and submitted to the Legislative Oversight Committee, Office of the Lt. Governor, Office of the Governor, and the Speaker of the House on October 1, 2015.
- Implementation of plan activities has been initiated and teams comprised of DARS, TWC and HHSC staff are meeting regularly to ensure a successful transition of programs to TWC.
- SB 200 directs the transfer of those programs not transferring from DARS to TWC to HHSC on September 1, 2016. These programs include: Autism; Blind Children's Vocational Discovery and Development Program (BVDDP); Blindness, Education Screening and Treatment (BEST) Program; Comprehensive Rehabilitation Services (CRS) Program; Deaf and Hard of Hearing Services; Disability Determination Services (DDS); Early Childhood Intervention (ECI); and Independent Living (IL) Services - General and Blind.
- In October all HHS agencies completed a functional review. The review consisted of a survey for business units designed to produce relevant information about each business function performed in each HHS agency while capturing facts about each program, division, and unit within the HHS system. The functional review will provide a system-wide inventory of responsibilities, roles, resources, and each unit's interactions and interdependencies both inside and outside the HHS system. Results from the functional review, along with input from staff throughout the HHS organization and stakeholders in statewide public hearings and through other feedback channels, will help in the development of the transition plan.
- Upon completion of the functional reviews, 13 cross-agency transition workgroups were formed. Seven of the workgroups will focus on the core functions of the health and human services system: Eligibility and Enrollment; Direct Delivery & Contracted Services; Clinical Services & Quality Initiatives; Regulatory Services; State-operated Facilities; DSHS - Public Health; and DFPS - Protective Services. The other 6 workgroups will be looking at ways to improve administrative support services: Financial Services; Information Technology; Procurement & Contracting Services; Legal Services; System Support & Internal Audit; and Communications, Media and Government Relations. The goal of the workgroups is to develop recommendations on the organization structure of HHSC. DARS has representatives on each of the 13 workgroups.
- SB 200 also directed HHSC to evaluate all HHS advisory committees, determine whether a committee should be continued, consolidated, or discontinued and create an advisory committee structure that informs agency leadership about key issues. DARS staff served on the HHSC workgroup evaluating these committees and provided relevant information about each committee impacting DARS and its programs. All committees related to DARS have been recommended to continue.

Legislative Oversight Committee

Senate Bill 200 of the 84th Texas Legislature requires establishment of a Health and Human Services Transition Legislative Oversight Committee to help direct the HHS transformation.

- The committee is to be made up of 11 voting members - four members of the Senate appointed by the Lieutenant Governor; four members of the House of Representatives appointed by the Speaker; and three public members appointed by the Governor. The Texas Health and Human Services Executive Commissioner, DARS Commissioner and TWC Executive Director serve as an ex officio, nonvoting member.

The following have been appointed to serve on the committee:

Governor Greg Abbott appointments:

- John D. Colyandro, Austin
- Billy C. Hamilton, Austin
- Heather Griffith Peterson, Austin

Speaker of House Joe Straus appointments:

- State Rep. Four Price (Co-Chair), Amarillo
- State Rep. Richard Raymond, Laredo
- State Rep. Toni Rose, Dallas
- State Rep. Cindy Burkett, Garland

Lieutenant Governor Dan Patrick appointments:

- State Sen. Jane Nelson (Co-Chair), Flower Mound
- State Sen. Brian Birdwell, Granbury
- State Sen. Juan "Chuy" Hinojosa, McAllen
- State Sen. Charles Schwertner, Georgetown

General Timeline (subject to change)

- October 1, 2015 – The draft TWC/DARS transition plan was submitted to the Legislative Oversight Committee
- October 1, 2015 – Functional analysis of all HHS operational areas completed
- October 26, 2015 – 13 HHSC cross-functional transition teams appointed to plan and oversee transition to new organizational structure
- November 1, 2015 – Publication of new advisory committee structure in the Texas Register
- November 9, 2015 – DARS employees notified of agency transitioning to
- March 1, 2016 – Rules promulgated for all new or revised advisory committees
- March 1, 2016 – HHS transition plan due to Legislative Oversight Committee
- September 1, 2016 – Transfer of programs from DARS to HHSC and TWC

Latest Developments

- On November 9th DARS employees were notified of which agency they would be transitioning to. All ECI employees will transition to HHSC.
- HHSC has not finalized the date of when the HHS plan, including transfer of ECI, will be released to the public and Legislative Oversight Committee, but it must be completed by no later than March 1, 2016.
- HHSC is currently working on developing a plan to gather public input for both before and after the plan is published.

Updates on transformation activities can be found at <http://www.hhsc.state.tx.us/hhs-transformation/index.shtml>

STAR Kids Update

Brian Dees from the HHSC Medicaid Office presented the following:

- SB7 of the 83rd Texas Legislature (Regular Session), directed HHSC to implement the STAR Kids Program.
- In October 2015 the contracts were awarded to ten Managed Care Organizations (MCO).
- STAR Kids serves children and youth with special health care needs.
- All members receiving STAR Kids services are required to have a service coordinator.
- A comprehensive needs assessment is administered at the beginning of services and yearly.
- The Medically Dependent Children's Program managed by DADS was also incorporated into STAR Kids.
- Information sessions will be conducted throughout the state beginning in January 2016 to inform family and clients about STAR Kids, what to expect and address questions.
- Services are provided to children ages birth through 20.

Member Comments:

- Can ECI still bill for service coordination? *Brian Dees: Yes it is a dual function; the MCO service coordination is part of their capitation.*

State Systemic Improvement Plan

Dana McGrath, DARS-ECI Policy and Support Director and Sharon Stone, DARS-ECI Quality Assurance, provided an overview of the SSIP.

Overview

- DARS' oversight entity, the U.S. Department of Education, Office of Special Education Programs (OSEP) has been implementing a revised accountability system under the Individuals with Disabilities Education Act in an effort to shift from a primary emphasis on compliance to a framework that focuses on improved results for children with disabilities.
- This Results Driven Accountability approach emphasizes improving child outcomes. And to support this effort, States are being required to develop a State Systemic Improvement Plan as part of their State Performance Plan and Annual Performance Report.
- OSEP's goal for states in developing, implementing, and evaluating the SSIP is to drive innovation in the use of evidence-based practices in the delivery of services to children with disabilities, which will lead to improved results for those children.
- The SSIP is a six-year plan for systems analysis and improvement that is to be implemented in three phases.
 1. Phase 1 focused on data and system analysis. We successfully submitted our Phase I plan on April 1, 2015. It was accepted by OSEP and determined to meet their expectations.
 2. We are currently working on Phase II, which is focused on planning and project development.
 3. Phase 3, implementation and evaluation, will be our focus in 2017-2020.
- Phase I was a critical component of this multi-year project because it laid the foundation by analyzing our data to determine areas where we may need to focus on for improved results and analyzing our infrastructure to determine where our strengths and opportunities for improvement may lie as well as what weaknesses or barriers we may have to overcome or work around as we move forward and build capacity for the improvements we want to target.
- That work culminated in our State-identified Measurable Result for Infants and Toddlers with Disabilities and Their Families (or SIMR), which for Texas, based on that extensive data and infrastructure analysis and with input from our stakeholders, was selected to be improving social emotional outcomes.
- As part of Phase I we began to determine what Improvement Strategies we wanted to undertake in an effort to achieve our measureable results and developed a Theory of Action for how we envisioned our infrastructure and strategies interacting to achieve our desired outcomes.

Improvement Strategies

Six strategies were identified as part of our ongoing work.

1. Identify evidence-based practices and challenges with the child outcomes rating process, with consideration of using child outcomes rating data in the local program determination process.
2. Identify additional evidence-based practices and challenges in identifying children with delays in social-emotional development and providing appropriate interventions.
3. Ensure a properly trained workforce by providing relevant staff with recommended trainings or access to technical assistance resources on topics such as: typical social-emotional development, recognizing social-emotional concerns, writing IFSP outcomes to address social emotional development, interventions to address social-emotional development, understanding the role of the parent-child relationship, and parent participation in services.
4. Modify and adjust oversight and quality assurance procedures to ensure content from the recommended trainings and technical assistance are implemented into program practices.
5. Increase families' knowledge about their role in supporting their child's development, including their social-emotional development.
6. Inform primary referral sources, parents and other early intervention providers about the importance of social and emotional development in young children within the context of the parent/child relationship, and its foundational role in development across all domains.

Evidence-based Practices (EBPs)

DARS ECI held a webinar for SSIP stakeholders that focused on five EBPs that are already being utilized in varying degrees in some or all programs throughout the state:

1. Coaching
2. Activity Based Intervention
3. Family Centered Outcomes and Intervention
4. Primary Provider
5. Relationship Based Services

The EBP that was selected for implementation throughout the state with fidelity was coaching.

- Coaching is about adult learning to help implement strategies to help children learn.
- Coaching consists of five steps:
 1. Joint planning
 2. Observation
 3. Action/practice
 4. Feedback
 5. Reflection
- Coaching allows the caregiver to practice strategies with support and experience success. The provider gives feedback about how to "tweak" the strategy to use it during multiple routines.

Member Comments:

- Is the issue that these EBPs are being implemented throughout the state but without fidelity? *DARS-ECI staff: Yes*
- Coaching is like teaching, are we looking at ongoing professional development? *DARS-ECI staff: Yes, that is being explored at this time and researching EBP.*
- What does fidelity mean? *DARS-ECI staff: It starts with joint planning and reflection but there is not a specific dosage.*
- Dr. Adams presented slides on the Play and Language for Autistic Youngster (PLAY) randomized control trial study that takes practice based evidence to evidence based practice.
- How do you determine fidelity and monitor fidelity? *DARS-ECI staff: This is what we will be determining throughout the SSIP process.*

Maternal Child Health Title V 2015 Needs Assessment Findings

Tammy Sajak, Department of State Health Services, Director of the Office of Title V & Family Health, and Dr. Manda Hall, provided an update on the maternal child health Title V needs assessment findings.

- Every five years a needs assessment is required; information about the assessment can be found at the following link: <http://www.dshs.state.tx.us/mch/default.shtm>
- Performance measures are a requirement for receiving block grant funds.
- Two surveys, regional stakeholder meetings and focus groups were administered to identify the state's main priorities.
- Safe sleep, breast feeding and a developmental screening were priority areas identified for children 0-3.
- Access, education, coordination of resources and services were identified as needs.

Policy Update

Cynthia Henderson, ECI Policy Specialist provided the following update on policy activities but was not heard during the meeting.

In order to enhance the sustainability and performance of the ECI system, DARS ECI is partnering with DARS ECI contractor staff to:

- assess current programmatic requirements found in:
 - rule,
 - contract, and
 - forms;
- identify potential changes or clarifications to current programmatic requirements, while maintaining compliance with all applicable federal and state requirements; and
- Implement changes as appropriate.

The first step for this project was to:

- Gather initial recommendations from the DARS ECI Program Directors.
- The Program Directors submitted thoughtful suggestions for ways to improve efficiencies within the ECI system, and these suggestions were discussed at the DARS ECI Program Directors' Consortium meeting.

The second step for this project was to:

- Create the Administrative Efficiencies Contractor Committee.
- The Administrative Efficiencies Contractor Committee is a committee made up of DARS ECI contractor staff and DARS ECI State Office staff to conduct a systematic review of programmatic requirements and recommend possible changes to the current requirements or clarification of the current requirements.

The Administrative Efficiencies Contractor Committee membership represents the diversity of the ECI system, including:

- contractor staff/State Office staff;
- program size;
- program type;
- rural/urban service area;
- socio-economic makeup of service area; and
- geographic location.

Of the nominees submitted, a committee was formed of ECI professionals from varying roles, including:

- Program Directors
- Assistant Directors
- Program Supervisors
- Quality Assurance Specialist
- EIS Lead/Supervisors
- Licensed Therapist
 - Physical Therapist
 - Licensed Professional Counselor
 - Licensed Speech Language Pathologist
 - Occupational Therapist, Registered
 - Licensed Social Worker
- Early Intervention Specialist
- Data/Billing Manager
- Office managers
- Oversight Coordinator and Accountant

The final step for this project is to implement appropriate changes. Any changes to rule will be promulgated through the rule making process including:

- presenting any proposed changes to the ECI Advisory Committee;
- presenting any proposed changes to the DARS Council;
- posting proposed changes for public comment;
- circulating proposed changes to stakeholders; and
- holding public hearings to collect public testimony.

Training Update

Stephanie Powitzky, ECI Training Specialist provided the following update on training activities but was not heard during the meeting.



Keys to Successful Supervision

A training module designed for supervisors by supervisors

For program directors, supervisors, and managers
Available Summer 2016

Features of the module:

- Interactive exercises that provide insight on the benefits of reflective supervision
- Illustrations of how effective feedback and coaching will lead to better service delivery for families
- Input from program personnel incorporated throughout the development and review process



Develop your knowledge of the three types of supervision and the benefits of each.

WHAT?	WHY?	HOW?
What is supervisor types of supervision?	How do reflective supervision benefit family, staff, supervisor?	How to observe & provide reflective supervision How to keep staff motivated How to organize & collaborate
WHO?	WHEN?	MORE RESOURCES
Who are children of reflective supervision & staff supervisor?	When is reflective supervision?	Group supervision & supervisor work

Incorporate strategies to enhance efficiencies in supervision.

Move to investing in staff supervision to make a positive impact in the lives of children and families



Apply what you've learned in life-like scenarios and receive feedback on performance.



Follow various approaches to reflective supervision through video demonstrations.



Keys to Successful Supervision created by the Texas DARS Early Childhood Intervention (ECI) state office. Contact: Stephanie Powitzky at 512-424-6785 or Stephanie.Powitzky@dars.state.tx.us

ADJOURNMENT

Meeting was adjourned at 3:30 p.m.



DARS ECI Advisory Committee Meeting Minutes

Wednesday, January 13, 2016

4900 North Lamar Boulevard
Public Hearing Room 1410, 1420, 1430
10:00 a.m. – 3:00 p.m.
Austin, Texas 78756

Members Present:

Richard Adams, Chair
Alferma Giles via Teleconference
Barbara Knighton
Benna Timperlake-Ex Officio
Diane Kazlow
Holly Sanchez-Chair Elect via Teleconference
Laura Kender
Laura Warren
Manda Hall
Pattie Rosenlund
Sarah Abrahams

Members Absent:

Aureka Sanders
Emily Dean
Harvey Salinas
Jenny Hinson
Karen Meyer
Kathy Lee
Lynn Sullivan
Peter Smas on behalf of Katrina Daniel
Phil Warner-Ex Officio
Terrie Breeden

Guests:

Clayton Travis – Texas Pediatric Society
Martha Aki – Katy ISD ECI
Steven Aleman – Disability Rights Texas

Approval of Minutes

The committee approved the minutes of the November 18, 2015, meeting with no corrections.

Public Comment

There were no public comments.

Interim Assistant Commissioner's Report

Interim Assistant Commissioner Rosalin Willis welcomed attendees/advisory committee members and provided the following update:

Welcome

Ms. Willis welcomed members and visitors in attendance and provided an overview of the agenda. She informed members the program directors would be leaving at lunch to join their peers at the ECI Summit; therefore, a tight schedule would be followed to ensure appropriate time for each presenter.

Act Early Texas Autism Project

Ms. Willis provided an update on Act Early Texas!, which is a group of professionals and parents interested in improving services in Texas for children and youth with autism spectrum disorder (ASD) and related developmental disabilities. Funded by a federal Maternal and Child Health Bureau (MCHB) planning grant, a workgroup with statewide, diverse representation has been meeting quarterly in Austin to develop an "Autism Plan" for Texas. The Plan will address current gaps in services and resources, identify other opportunities for improvement, and detail the workgroup's comprehensive recommendations for better services and resources to these populations. As part of the planning effort, a needs assessment survey involving more than 1500 Texas families was conducted to ensure the group's recommendations are closely aligned with families' needs and desires. The hope is to implement some or all of the Plan's recommendations through effective advocacy, work with state leadership and submit a successful application for a MCHB implementation grant sometime in 2016.

Newsletter

DARS ECI received great feedback about the inaugural edition of the *ECI Connection* newsletter. The next edition is slated for distribution on January 25, 2016.

Transformation

Provided a brief update on transfer/transformation preparation from DARS to the Health and Human Services Commission (HHSC).

In October all HHS agencies completed a functional review. The review consisted of a survey for business units designed to produce relevant information about each business function performed in each HHS agency while capturing facts about each program, division, and unit within the HHS system.

The functional reviews provided a system-wide inventory of responsibilities, roles, resources, and each unit's interactions and interdependencies both inside and outside the HHS system.

Upon completion of the functional reviews 13 cross-agency transition workgroups were formed. Seven of the workgroups will focus on the core functions of the health and human services system: Eligibility and Enrollment; Direct Delivery & Contracted Services; Clinical Services & Quality Initiatives; Regulatory Services; State-operated Facilities; DSHS - Public Health; and DFPS - Protective Services. The other 6 workgroups will be looking at ways to improve administrative support services: Financial Services; Information Technology; Procurement & Contracting Services; Legal Services; System Support & Internal Audit; and Communications, Media and Government Relations.

Ms. Willis was selected to represent DARS on the HHS transformation workgroup for Direct Delivery and Contracted Client Services, which focuses on the following:

- Contracted Provider Services
- Contracted Social Services
- Client Delivery Social Services

This workgroup reviewed contracted services throughout Health and Human Services and identified how best to coordinate and align contracted services efficiently and consistently.

Results from the functional review, along with input from staff throughout the HHS organization and stakeholders in statewide public hearings and through other feedback channels, will help in the development of the transition plan.

Appointments

Ms. Willis informed members that the Governor will be making new appointments soon; therefore, Ms. Willis thanked the following ECI Advisory Committee members for their service to the committee if not re-appointed.

1. Kathy Lee, parent representative
2. John Cissik, parent representative
3. Diane Kazlow, Program Provider Representative
4. Laura Kender, Program Provider Representative
5. Barbara James, Homeless Youth Representative
6. Jenny Hinson, Department of Family and Protective Services Representative
7. Sarah Abrahams, Health and Human Services Commission Representative

Maternal Child Health Title V Update

Ramah Leith and Manda Hall accepted questions from members on the maternal and child health Title V needs assessment findings and

described the Project Launch grant.

Member Comments: *(items italicized are responses from presenters)*

- How long is the grant and will there be any expansion opportunities? *It's a 4 year grant, which is an expansion and hopefully it will continue to expand in other areas.*
- On the state-selected priorities has there been any discussion about combination of efforts/coordination of efforts as we move forward with the SSIP? *As we move forward Project Launch will present opportunities for further collaborations with ECI as well as ongoing current efforts.*
- On the national performance measures related to parent nicotine and smoking do you know where Title V is nationally amongst other states? *We have access to all the other states tables and focus areas and we can see which states picked that initiative that is a high risk for developmental outcomes.*

Annual Performance Report

Steven Elkins, DARS-ECI Data and Information Manager, presented the draft APR as depicted below:

EARLY INTERVENTION SERVICES IN NATURAL ENVIRONMENTS	SFY 2015 Performance FFY 2014	SFY 2014 Performance FFY 2013	Target FFY 2014
1. Percent of infants and toddlers with IFSPs who received the early intervention services on their IFSPs in a timely manner (within 28 days of signing IFSP).	95.0%	97.8%	100%
2. Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or in community-based settings.	99.5%	99.4%	99.0%
3. Percent of infants and toddlers with IFSPs who demonstrate improved: a. Positive social-emotional skills; b. Acquisition and use of knowledge and skills; c. Use of appropriate behaviors to meet their needs.	<u>SS1</u> <u>SS2</u> 71.8 53.8 77.7 44.3 78.1 51.3	<u>SS1</u> <u>SS2</u> 71.3 53.4 77.4 45.0 77.7 51.4	<u>SS1</u> <u>SS2</u> 71.0 53.8 77.1 45.1 77.4 51.5
4. Percent of families participating in Part C who report that early intervention services have helped the family: a. Know their rights; b. Effectively communicate their children's needs; c. Help their children develop and learn.	87.5% 88.2% 88.7%	86.6% 87.7% 87.8%	87.0% 87.7% 87.8%
EFFECTIVE GENERAL SUPERVISION OF PART C			
Child Find			
5. Percent of infants and toddlers birth to 1 with IFSPs compared to national data.	0.99%	0.99%	0.99%
6. Percent of infants and toddlers birth to 3 with IFSPs compared to national data.	2.05%	2.03%	1.98%
7. Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.	97.5%	99.3%	100%
Effective Transition			
	SFY 2015 Performance FFY 2014	SFY 2014 Performance FFY 2013	Target FFY 2014
8. Percent of children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday, including:	97.2% 95.2%	98.9% 98.7%	100% 100%

a. IFSPs with transition steps and services; b. Notification to LEA, if child is potentially eligible for Part B; c. Transition conference, if child is potentially eligible for Part B.	95.8%	96.8%	100%
General State Supervision			
9. Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements (applicable if Part B due process procedures are adopted).	0	0	Not required if < 10 complaints per year.
10. Percent of mediations held that resulted in mediation agreements.	0	0	Not required if < ten 10 complaints per year.
11. State Systemic Improvement Plan-Full report submission April 1, 2016 SiMR: Texas Part C will substantially increase the rate of growth in infants and toddlers demonstrating positive social-emotional skills by 0.2% each year resulting in overall increase of 0.8% by the final year (FFY 2018).	71.8%	71.3%	71.0%
Identification and timely correction of noncompliance on SFY 2014, as soon as possible but no later than one year from identification.	100 %	100%	100%

- 2,271 surveys were returned and all programs were surveyed.
Member Comments: *(items italicized are responses from Steven Elkins, ECI Data Manager)*
- Please provide data for severity of disability which will provide more clarity in indicator 3 SS2.
- In 3a we exceeded our target; do we need to change our target? *We can discuss at a future meeting if OSEP determines that is an area we need to change our targets.*

Training Update

Stephanie Powitzky, ECI Training Specialist, provided a live demonstration of the Keys to Successful Supervision training module. <https://dmzwebdev.dars.state.tx.us/qa/eciapps/story.html>. Members were very pleased with the ease of navigation and rich content.



Keys to Successful Supervision

A training module designed for supervisors by supervisors

For program directors, supervisors, and managers
Available Summer 2016

Features of the module:

- Interactive exercises that provide insight on the benefits of reflective supervision
- Illustrations of how effective feedback and coaching will lead to better service delivery for families
- Input from program personnel incorporated throughout the development and review process



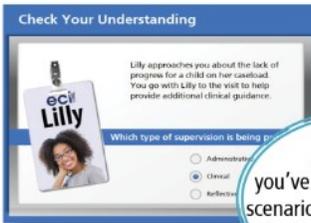
Develop your knowledge of the three types of supervision and the benefits of each.



Incorporate strategies to enhance efficiencies in supervision.



Move to investing
in staff supervision to
make a positive impact in
the lives of
children and families



Apply what you've learned in life-like scenarios and receive feedback on performance.



Follow various approaches to reflective supervision through video demonstrations.



Keys to Successful Supervision created by the Texas DARS Early Childhood Intervention (ECI) state office. Contact: Stephanie Powitzky at 512-424-6785 or Stephanie.Powitzky@dars.state.tx.us

Policy Update

Cynthia Henderson, ECI Policy Specialist provided the following update on the Administrative Efficiencies Project.

In order to enhance the sustainability and performance of the ECI system, DARS ECI state office is partnering with DARS ECI contractor staff to

- assess current programmatic requirements found in:
 - rule,
 - contract, and
 - forms;
- identify potential changes or clarifications to current programmatic requirements, while maintaining compliance with all federal and state requirements; and
- implement changes as appropriate.

The first step for this project was to gather initial recommendations from the DARS ECI Program Directors. The Program Directors submitted thoughtful suggestions for ways to improve efficiencies within the ECI system, and these suggestions were discussed at the DARS ECI Program Directors' Consortium meeting.

The second step for this project was to create the Administrative Efficiencies Contractor Committee. The Administrative Efficiencies Contractor Committee is a committee made up of DARS ECI contractor staff and DARS ECI State Office staff to conduct a systematic review of programmatic requirements and recommend possible changes to the current requirements or clarification of the current requirements.

The Administrative Efficiencies Contractor Committee membership represents the diversity of the ECI system, including:

- contractor staff/State Office staff;
- program size;

- program type;
- rural/Urban service area;
- socio-economic makeup of service area; and
- geographic location.

Of the nominees submitted, a committee was formed of ECI professionals from varying roles, including:

- Program Directors
- Assistant Directors
- Program Supervisors
- Quality Assurance Specialist
- EIS Lead/Supervisors
- Licensed Therapist
 - Physical Therapist
 - Licensed Professional Counselor
 - Licensed Speech Language Pathologist
 - Occupational Therapist, Registered
 - Licensed Social Worker
- Early Intervention Specialist
- Data/Billing Manager
- Office managers
- Oversight Coordinator and Accountant

Currently reviewing all recommendations and the final step for this project is to recommend appropriate changes. Any changes to rule will be made through the rule making process, including:

- presenting any proposed changes to the ECI Advisory Committee;
- presenting any proposed changes to the DARS Council;
- posting proposed changes for public comment;
- circulating proposed changes to stakeholders; and
- holding public hearings to collect public testimony.

Financial Report

Rebecca Trevino, DARS Chief Financial Officer provided an update on Appropriations, Performance Measures and Financial Reporting relative to ECI.

From FY15 to FY16 there was a 16% cut in federal funds and a \$730,000 increase in GR.

ECI Funding			
FY	Appropriation	Change from Prior Year	Percent Change
FY12	\$161,087,946	---	---
FY13	\$161,087,946	\$0	0%
FY14	\$154,708,131	-\$6,379,815	-4%
FY15	\$163,362,353	-8,654,222	5%
FY16	\$140,295,296	-\$23,067,057	-16%
FY17	\$142,484,508	\$2,189,212	2%

ECI has multiple funding streams, 4 different types of general revenue and 7 different federal sources. This table breaks down the funding cuts by funding source.

ECI Funding

REVENUE SOURCE	FY2015	FY2016	DIFFERENCE
General Revenue	\$31,113,089	\$31,843,537	\$730,448
FSF	\$16,498,102	\$16,498,102	\$0
Part B	\$5,131,125	\$5,131,125	\$0
Part C	\$48,359,863	\$41,023,959	-\$7,335,904
TANF	\$16,102,792	\$10,000,000	-\$6,102,792
TCM	\$16,119,626	\$11,618,609	-\$4,501,017
SST	\$21,906,752	\$19,055,101	-\$2,851,651
MAC	\$8,131,004	\$5,124,863	-\$3,006,141
Total	\$163,362,353	\$140,295,296	-\$23,067,057

Appropriations are set based on how the system has performed in previous years.

	FY12	FY13	FY14	FY15
APPROPRIATION	\$163,087,946	\$161,087,946	\$154,708,131	\$163,362,353
EXPENDED	\$133,167,953	\$127,206,701	\$133,211,571	\$139,877,065
DIFFERENCE	\$27,919,993	\$33,881,245	\$21,496,560	\$23,485,288

Looking Forward

HB 1 (84th Legislative Session), Article II DARS Rider 11 permits DARS to seek additional federal funding if needed and justified.

The basis for requesting additional federal funds requires:

- A detailed explanation of the proposed use of additional funds requested and whether the expenditures will be one-time or ongoing
- The available balance of federal funds after the expenditure
- An estimate of the impact to performance levels and/or targets

Data Update

Steven Elkins, DARS-ECI Data and Information Manager, presented the data points as depicted below:

DATA POINTS STATE FISCAL YEAR 2015-2016 Q1; Children Referred and Serviced					
ECI MEASURES	SFY2012	SFY2013	SFY2014	SFY2015	SFY2016-Q1
Average monthly referrals	5,640	5,681	5,812	6,125	6,010

Average Monthly Initial Eligibility Determinations	3,557	3,554	3,666	3,723	3,758
Average Monthly Enrolled	22,715	23,062	23,671	23,972	24,287
Average Monthly Served SFY2016 Target=26,753 YTD % of Target Met = 99.7%	25,035	25,208	25,912	26,260	26,680
Cumulative Total Children Served (upduplicated)	49,198	48,193	49,685	50,634	31,404

DATA POINTS STATE FISCAL YEAR 2015-2016 Q1; Outcomes, Expenditures & Collections					
ECI MEASURES	SFY2012	SFY2013	SFY2014	SFY 2015	SFY 2016-Q1
Child Outcomes Indicator 3A1: % Child who demonstrate positive social emotional skills Target: 2015 = 71.8% 2016= 71.2%	70.3%	70.3%	71.3%	71.8%	-
Cost Reimbursement Vouchers Received (million)*	\$ 76.8	\$72.5	\$80.6	\$98.2	\$24.2
Locally Collected Funds (Annual/YTD, million)*	\$96.8	\$98.9	\$103.3	\$104.2	\$21.0
% of overall expenditures locally collected NOTE: (Locally collected Funds / (DARS contract expenditures + Locally Collected Funds))	55.8%	57.7%	56.2%	51.5%	46.5%

DATA POINTS STATE FISCAL YEAR 2015-2016 Q1; Delivered Services & Evaluations					
ECI MEASURES	SFY2012	SFY2013	SFY2014	SFY2015	SFY2016-Q1
Average Monthly Delivered Service Hours (not parent arranged)	66,918	65,831	69,603	70,819	76,345
Average Service Hours per Child per Month SFY 2016 Target = 2.75, YTD % of Target Met = 104%	2.67	2.61	2.69	2.70	2.86
Average Monthly SC/TCM Hours	-	-	17,748	15,149	14,325
Average Monthly SC/TCM Hours per Child	-	-	0.68	0.58	0.54
Average Monthly Initial Comprehensive Evaluations	2,971	3,169	3,283	3,369	3,486

- Average monthly referrals are down but eligibility determinations are up.
- Average monthly served is 99.7 to target.
- We exceeded our target of 2.75 hours per month by 100.4%.

Member Comments (*items italicized are responses from Steven Elkins, ECI Data Manager*):

- The number of referrals looks optimistic initially but seems like there is an education gap at the initial meeting and all services are declined.
- 2,273 children were found ineligible; about 30% of babies being referred are not eligible, why? *There may be an education issue with referral sources.*

State Systemic Improvement Plan (SSIP)

Dana McGrath, DARS-ECI Policy and Support Director, provided an overview of the SSIP.

Overview

- Members were informed they would continue to be provided updates at the ECI Advisory Committee meetings and all ECI AC members are encouraged to participate in the SSIP Stakeholder (SH) workgroup meetings that are focused on the SSIP work.
- Currently developing Phase 2 of the SSIP which focuses on planning and is due to OSEP April 2016.
- The SSIP SH workgroups is focused on describing our plan to achieve our desired measurable results, support local program implementation and develop evaluation strategies.
- The first SSIP Phase 2 draft will be reviewed by the SH workgroup and then shared with the Technical Assistance Centers for further guidance and feedback for incorporation by the April submittal due date to OSEP.
- Phase 3 of the SSIP focuses on implementation; we will need and encourage more input from the ECI AC on implementation activities and evaluating the results of those activities.

Discussion questions: Three discussion questions were shared with the ECI AC members for input (*items italicized are responses from DARS-ECI staff*).

1. What kind of information or updates on the State Systemic Improvement Plan (SSIP) would be most useful for the Advisory Committee going forward?
 - Regarding the total number of children served:
 - What are the expectations per category of social emotional rates by the children's demographics?
 - Are there different growth rates within different populations of children?
 - Cognitively severely delayed vs non cognitively physically delayed?
We would have to develop an ad hoc report to get at these issues.
 - The challenge is how would we break up the groups?
2. How have you approached stakeholder involvement in evaluating major projects or initiatives in your organizations and what suggestions do you have for us as we begin this process? How do you suggest we involve stakeholders in course corrections and implementation?
 - We have to think about family and professional involvement, use webinars and focus groups.
 - One unique thing that is happening is our Adolescent Director of Title V is putting together a workgroup working with family groups which covers all work we do. ECI can work with Title V to replicate the model.
3. What are you doing in your organizations that relate to or focuses on social emotional development that we should include or partner with in our SSIP work?
 - Make sure we hear about and tap into other work and share any work related to social emotional initiatives.
 - Look at Project Launch and discussions with Pattie Rosenlund on the PLAY group model and coaching provided by consultants.
 - We need to think about planning to ensure fidelity to achieve the outcomes we are proposing to meet.
 - There are some low tech things that can be implemented and always the DEC recommended practices can be expanded and replicated.
 - We should look at the gold standard and raise the bottom up and say we can reach the gold standard in 5 years.

Member Reports

Sarah Abrahams provided an update on the following:

- Family engagement work connected to **House Bill 4** legislation establishing state support for a high quality Pre-k program, a grant program and expansion of early childhood education program for all Texas public schools. HB4 is overseen by TEA. Funding will be made available this summer for the next school year. HB4 requires a family engagement plan; therefore, a workgroup was developed which includes Ms. Abrahams as well as Rosalin Willis. The workgroup developed a family engagement plan and public comment was received by stakeholders. TEA is currently developing a final draft plan that will be open for public comment soon.
- Prevention and Early Intervention merger with the Texas Home Visiting Program should be effective February 1, 2016. They are working to ensure a smooth transition and that client/contracting services are not affected. Collaborating with stakeholders on a five

year strategic plan which will be released for public comment in June. A series of regional/community meetings will be held in Laredo, San Marcos, Dallas, El Paso and Amarillo.

- More information on this transition/merger can be found at this link:
http://www.dfps.state.tx.us/Prevention_and_Early_Intervention/Texas_Prevention_Network/default.asp

Benna Timperlake provided an update on the Texas Deaf and Hard of Hearing Leadership Council.

- Focusing on newborn screening and data sharing between DSHS, ECI and TEA.
- All newborn babies are being tested 100%.

Richard Adams invited members to the Texans Care for Children Conference on February 24, 2016. There will be a panel on ECI.

ADJOURNMENT

Meeting was adjourned at 3:08 P.M.

ASSESSMENT OF ADVISORY COMMITTEES
April, 2016
538 - Department of Assistive and Rehabilitative Services

To assist in the process required by Chapter 2110, Texas Government Code, state agencies should submit an assessment of advisory committees using the format provided. Please submit your assessment for each advisory committee under your agency's purview. Include responses for committees created through statute, administrative code or ad-hoc by your agency. Include responses for all committees, whether ongoing or inactive and regardless of whether you receive appropriations to support the committee. Committees already scheduled for abolishment within the 2016-17 biennium are omitted from the scope of this survey. When submitting information for multiple advisory committees, right-click the sheet "Cmte1", select Move or Copy, select Create a copy and move to end.

NOTE: Only the items in blue are required for inactive committees.

SECTION A: INFORMATION SUBMITTED THROUGH ADVISORY COMMITTEE SUPPORTING SCHEDULE IN LEGISLATIVE APPROPRIATIONS REQUEST

Committee Name: State Independent Living council

Number of Members: 9 voting and 4 ex-officio

Committee Status (Ongoing or Inactive): ongoing Note: An Inactive committee is a committee that was created prior to the 2014-15 biennium but did not meet or supply advice to an agency during that time period.

Date Created: 6/14/1905 **Date to Be Abolished:** N/A

Budget Strategy (Strategies) (e.g. 1-2-4): 2.1.1 **Strategy Title (e.g. Occupational Licensing):** IL Services and Council- Blind

Budget Strategy (Strategies): 2.3.3 **Strategy Title:** IL Services and Council - General

State / Federal Authority
 State Authority
 State Authority
 State Authority
 Federal Authority
 Federal Authority
 Federal Authority

Select Type	Identify Specific Citation
Public Law	Rehabilitation Act of 1973, as amended by the
Other	34CFR §361.21

Advisory Committee Costs: This section includes reimbursements for committee member costs and costs attributable to agency staff support.

Committee Members' <u>Direct</u> Expenses	Expended Exp 2015	Estimated Est 2016	Budgeted Bud 2017
Travel	\$0	\$0	\$0
Personnel	\$0	\$0	\$0
Number of FTEs	0.0	0.0	0.0
Other Operating Costs	\$323,230	\$422,228	\$422,228
<i>Total, Committee Expenditures</i>	\$323,230	\$422,228	\$422,228
Committee Members' <u>Indirect</u> Expenses	Expended Exp 2015	Estimated Est 2016	Budgeted Bud 2017
Travel	\$0	\$0	\$0
Personnel	\$0	\$0	\$0
Number of FTEs	0.0	0.0	0.0
Other Operating Costs	\$0	\$0	\$0
<i>Total, Committee Expenditures</i>	\$0	\$0	\$0
Method of Financing	Expended Exp 2015	Estimated Est 2016	Budgeted Bud 2017
Method of Finance			
1 - General Revenue Fund	\$0	\$0	\$0
555 - Federal Funds	\$323,230	\$422,228	\$422,228
	\$0	\$0	\$0
	\$0	\$0	\$0
	\$0	\$0	\$0
Expenses / MOFs Difference:	\$0	\$0	\$0
Meetings Per Fiscal Year	4	4	4

Committee Description: The State Independent Living Council (SILC) is required by the Federal Rehabilitation Act of 1973, as amended by the Workforce Innovation and Opportunity Act (WIOA). To be eligible to receive assistance under Chapter 1 of Title VII of the Act each state must establish a SILC that meets the requirements of section 705 of the Act (34 CFR §361.21(a)). Federal regulations specify the SILC's independence from any state agency, its composition, appointment of members, duties, staff, reimbursement and compensation, and

independent living state agency, its composition, appointment of members, salary, term, reappointment and compensation, and resource plan. Each state must have a SILC that meets the requirements set forth in federal regulation in order to receive federal funding for Independent Living Services and Centers for Independent Living.

SECTION B: ADDITIONAL COMMITTEE INFORMATION

Committee Bylaws: Please provide a copy of the committee's current bylaws and most recent meeting minutes as part of your submission.

1. When and where does this committee typically meet and is there any requirement as to the frequency of committee meetings?

2. What kinds of deliverables or tangible output does the committee produce? If there are documents the committee is required to produce for your agency or the general public, please supply the most recent iterations of those.

3. What recommendations or advice has the committee most recently supplied to your agency? Of these, which were adopted by your agency and what was the rationale behind not adopting certain recommendations, if this occurred?

4a. Does your agency believe that the actions and scope of committee work is consistent with their authority as defined in its enabling statute and relevant to the ongoing mission of your agency?

4b. Is committee scope and work conducted redundant with other functions of other state agencies or advisory committees?

5a. Approximately how much staff time (in hours) was used to support the committee in fiscal year 2015?

5b. Please supply a general overview of the tasks entailed in agency staff assistance provided to the committee.

6. Have there been instances where the committee was unable to meet because a quorum was not present? Please provide committee member attendance records for their last three meetings, if not already captured in meeting minutes.

7a. What opportunities does the committee provide for public attendance, participation, and how is this information conveyed to the public (e.g. online calendar of events, notices posted in Texas Register, etc.)?

7b. Do members of the public attend at least 50 percent of all committee meetings?

7c. Are there instances where no members of the public attended meetings?

8. Please list any external stakeholders you recommend we contact regarding this committee.

9a. In the opinion of your agency, has the committee met its mission and made substantive progress in its mission and goals?

9b. Please describe the rationale for this opinion.

10. Given that state agencies are allowed the ability to create advisory committees at will, either on an ad-hoc basis or through amending agency rule in Texas Administrative Code:

10a. Is there any functional benefit for having this committee codified in statute?

10b. Does the scope and language found in statute for this committee prevent your agency from responding to evolving needs related to this policy area?

10c. If "Yes" for Question 10b, please describe the rationale for this opinion.

11a. Does your agency recommend this committee be retained, abolished or consolidated with another committee elsewhere (either at your agency or another in state government)?

11b. Please describe the rationale for this opinion.

Based on analysis recently conducted and recommendations approved by the HHSC Executive Commissioner on 10/31/15, this advisory committee should be retained.

12a. Were this committee abolished, would this impede your agency's ability to fulfill its mission?

12b. If "Yes" for Question 12a, please describe the rationale for this opinion.
Funding would not be available to continue to provide Independent Living services.

13. Please describe any other suggested modifications to the committee that would help the committee or agency better fulfill its mission.
None

TEXAS STATE INDEPENDENT LIVING COUNCIL

BY-LAWS

As Amended, June 2011
New Amendment, October 2014



TEXAS STATE INDEPENDENT LIVING COUNCIL BY-LAWS

As Amended, June 2011

I. ESTABLISHMENT

The 1986 Amendments to the Rehabilitation Act of 1973, and amended in 1992, established the State Independent Living Council (hereafter referred to as the Council). In order for any State to receive Independent Living funds, each State shall establish an Independent Living Council. The Council shall not be established as an entity within another State agency.

The purpose or purposes for which the Council is organized are charitable, scientific, literary, and educational. The Council is created solely as an organization described in Section 501(c) (3) of the Internal Revenue Code. The Council shall be operated exclusively for such purposes. No part of its net earnings shall inure to the benefit of any Director or individual; no part of its activity shall be carrying on propaganda, or otherwise attempting to influence legislation, and it shall not participate nor intervene (including the publishing or distribution of statements) in any political campaign on behalf of or in opposition to any candidate for public office.

II. DUTIES

The Council shall:

- A. provide guidance for the development and expansion of independent living programs and concepts on a statewide basis;
- B. in conjunction with the Centers for Independent Living, jointly develop the State Plan for Independent Living;
- C. submit the State Plan for Independent Living in coordination with Centers for Independent Living and the Designated State Entity, to the Rehabilitation Services Administration (RSA) or Health and Human Services as appropriate;
- D. monitor, review, and evaluate the implementation of the Independent Living Plan and prepare a progress report annually;

- E. coordinate activities with the Rehabilitation Council of Texas, (RCT), and advisory bodies that address the specific disability populations and issues under other Federal law;
- F. ensure that all regularly scheduled meetings of the Council are open to the public, and that at least one week's advance notice of the meeting is provided;
- G. submit to the RSA Commissioner such periodic reports as the RSA Commissioner may reasonably request, and keep such records, and afford such access to such records as the RSA Commissioner finds necessary to verify such reports;
- H. provide guidance to State agencies and to local planning and administrative entities assisted under this title; and
- I. hold public hearings and forums as necessary to monitor and evaluate the development and implementation of the State Plan and to assess the quality and effectiveness of the duties carried out by the Council.

III. COUNCIL MEMBERSHIP

A. MEMBERS

The membership will be composed as follows:

1. A majority of the membership of the Council shall be individuals with disabilities not employed by any State agency or Center for Independent Living.
2. One member shall be a Director of a Center for Independent Living chosen by the directors of Centers for Independent Living within the State.
3. Other members shall include representatives from centers for independent living, parents, and guardians of individuals with disabilities, advocates of and for individuals with disabilities, representatives from private businesses, representatives from organizations that provide services for individuals with disabilities, and other appropriate individuals.
4. An Ex-Officio non-voting member from the Division for Rehabilitation Services, (DRS), an Ex-Officio non-voting member from the Division for Blind Services, (DBS), and at least one other

Ex-Officio non-voting member from another public or private agency serving people with disabilities.

5. All members of the Council, both voting and Ex-Officio, shall be appointed by the Governor.

B. TERMS OF SERVICE

Length of term of appointment to the Council will be three years to ensure continuity. Members may be reappointed by the Governor for a term of up to three years. Members of the Council cannot be reappointed to serve more than two full terms consecutively. Appointment of members shall be on a Federal fiscal year basis.

C. PARTICIPATION

1. Members are expected to attend all Council meetings and all meetings of those Committees to which they are assigned. If possible, members shall notify the appropriate Chairperson at least five days prior to the meeting of any necessary absence. Absence from three consecutive meetings without good cause will result in the Chair recommending dismissal from the Council by the Governor.
2. Failure to fulfill the responsibilities of the Council without good cause may result in a recommendation from the Council to the Governor for dismissal.

D. VACANCIES

Vacancies will be filled as soon as possible. The Governor will make all appointments to ensure that representation complies with the Rehabilitation Act of 1973, as amended.

E. OFFICERS

1. Selection of officers

A Nominating Committee will prepare a slate of candidates to present to the Council. Nominations will also be accepted from the floor. Each office will be filled every two years by a majority vote of the membership by secret ballot. Officers of the Council shall be a Chair, Vice-Chair, Secretary, and Treasurer. Officers may be

nominated for re-election through the prescribed nomination process.

2. Responsibilities of the Officers (see attached job descriptions)

a. The Chair has responsibility for facilitating and supervising Council activities through Council and committee meetings and for working with Council members needing clarification about Council functions. The responsibilities of the Chair shall include, but not be limited to, the following duties;

1. Presiding at all meetings of the Council and voting only in the event of ties;
2. Serving as the Chair of the Executive committee and as a non-voting Ex-Officio member of all other committees;
3. Appointing the Chairs and members of all committees;
4. Calling special meetings of the Council, as necessary, within budget allocations;
5. Preparing the formal agenda for each Council meeting and ensuring that a copy in accessible format is sent to all members one week prior to scheduled meetings;
6. Appointing Ad Hoc Committees and delegating assignments.

b. The responsibilities of the Vice-Chair shall include, but not be limited to, the following duties:

1. Performing the duties of the Chair in all cases when the Chair is unable to serve;
2. Serving as a member of the Executive Committee and an Ex-Officio member of all other committees;
3. Assuming such additional duties as may be requested by the Chair.

c. The responsibilities of the Secretary shall include keeping the Minutes of the full Council and Executive Committee meetings, and other administrative duties that may be assigned by the Chair.

- d. The Treasurer will oversee all fiscal matters of the SILC and other duties assigned by the Chair.

F. LIAISONS

The Council will name Liaisons to other agencies or Councils that address the needs of specific disability populations and issues under other Federal law.

G. EXPENSES OF COUNCIL MEMBERS

1. Council members shall serve without salary, but shall be entitled to receive reimbursement for expenses for all approved activities. Reimbursement will be in accordance with laws of the State of Texas. Such expenses shall include, but not be limited to, travel, long distance telephone calls, meals and lodging.
2. Council members who have disabilities and need personal attendant services shall be entitled to reimbursement for these costs.
3. Council members shall file expenses on a timely basis and claim only expenses incurred in performing duties as Council members.

H. BUDGET FOR THE COUNCIL

Potential funding to support the efforts of the Council will be allocated through Title VII, Part B of the Rehabilitation Act and from other public and private sources.

A resource development plan shall be drafted by the Council for inclusion in each three-year State Plan for Independent Living. Prior to the beginning of each fiscal year, the Executive Committee will develop a budget related to anticipate Council expenditures during the upcoming year. The budget will include, but is not limited to, the following line items:

1. reimbursement for Council members travel expense, lodging, and food costs within specified amounts;
2. Usual office expenses such as phone, fax, Internet, supplies, printing, and postage;
3. ADA required accommodations;

4. Rental of space and equipment for organizational operations and for Council and other meetings;
5. Contractual fees;
6. Salary and benefits for the SILC staff;
7. Property liability, directors, and officers insurance.

I. CONFLICT OF INTEREST

SILC members shall abstain from voting on the selection, award, or administration of a contract from which they or a group or organization they represent may benefit. In such instances, a SILC member may propose motions and participate in discussion on above referenced contracts.

IV. COMMITTEES OF THE COUNCIL

1. The Council Chair shall appoint members for all committees and shall designate the committee Chairs. The committee Chair shall select a Vice-Chair for the committee who will act in the Chair's absence. A committee quorum shall be a simple majority of the current members of the committee. Membership to a committee shall be automatically terminated after three (3) consecutive absences by a member from the meetings of a committee without due cause.
2. A committee may make recommendations based on the simple majority of the members present. Actions recommended by the members present shall be presented to the full Council for consideration. Written reports of each committee meeting are to be received by the Council Chair.
3. All recommendations proposed by any Committee shall be presented to the full Council for ratification unless the Committee is authorized by the Council to act in its behalf. Any clarifications must be made by a Committee member or Chair.

A. The Executive Committee

1. The Executive Committee consists of the Council Chair, Vice-Chair, and Secretary.

2. The Council Chair and Vice-Chair shall serve as the Executive Committee Chair and Vice-Chair, respectively.
3. The Executive Committee shall have the following powers and duties, as well as, others that may be delegated by the Council:
 - a. to act for the full Council on emergency matters when the full Council cannot meet. In such cases, the Council will be notified of all actions at the next full Council meeting;
 - b. to monitor the internal and fiscal functions of the organization;
 - c. to report regularly its work and actions to the Council by forwarding Minutes of Executive Committee meetings to all Council members.

B. The Planning and Evaluation Committee

1. The chair of the Planning and Evaluation Committee shall be appointed by the Council chair;
2. The Planning and Evaluation Committee shall have the following duties:
 - a. to assume the lead in the preparation of the State Plan for Independent Living;
 - b. to ensure that techniques are in place to obtain consumer and public input into the development of the Plan;
 - c. to determine data needed to monitor the implementation of the Plan;
 - d. to collect and analyze specified data in order to evaluate progress;
 - e. to plan and oversee techniques for determining current needs and trends that should be considered in the development of future Plans.

C. The Systems Advocacy Committee

1. The chair of the Systems Advocacy Committee shall be appointed by the Council chair;

2. The Systems Advocacy Committee shall have the following duties, and others that may be delegated by the Council:

- a. In conjunction with representatives from the state's network of CILs, to develop a three-year, proactive, systems advocacy plan;
- b. To recruit, train, and involve people with disabilities and others in systems advocacy efforts;
- c. To take the lead in organizing community response to emerging issues that require immediate action.

D. The Community Relations Committee

1. The chair of the Community Relations Committee shall be designated by the Council Chair.

2. The Community Relations Committee shall have the following duties, as well as, other responsibilities that may be delegated by the Council:

- a. To monitor outreach and education activities conducted through and by the Council;
- b. To take the lead in publishing a quarterly Council newsletter;
- c. To monitor the content and presentation of information on the Council website;
- d. plan and implement strategies to advance public awareness of the work of the Council and the network of CILs.

V. MEETINGS OF THE COUNCIL

The entire Council will meet a minimum of four times a year. Additional meetings of the full Council, committees, and subcommittees may be called by the Chair, and are not to exceed provisions for this purpose in the budget.

A. Quorum

Council business is conducted by a quorum. A quorum consists of a simple majority of the voting members present.

B. Agenda

With input from Council members and agency liaisons, the Chair will prepare an agenda and ensure a copy in accessible format is sent to each member of the Council at least two weeks prior to each Council meeting.

C. Public comments

The Council Chair shall ensure that the agenda for each full Council meeting allows an opportunity for the public to offer comments or questions to the Council about business items and other issues before the Council. The agenda and meeting notice will be published in the Texas Register one week prior to each meeting of the Council.

D. Parliamentary Procedure

The rules contained in the current edition of Robert's Rules of Order, Newly Revised, shall govern the Council except as otherwise provided by these Council policies or by statute.

E. Review and Discussion

Recognizing that committees have extensively reviewed and discussed items prior to offering recommendations for Council consideration, action by the full Council on committee recommendations shall be limited to:

1. voting to approve and/or amend a recommendation;
2. rejecting a recommendation through motion and Council vote;
3. voting to take no action on a recommendation;
4. asking questions aimed at clarifying the intent of committee recommendations to be answered by committee members only;
5. referring a recommendation back to the committee for further development and/or tabling a recommendation to a later date;

6. action taken by the full Council on any committee recommendations shall be limited to those items which have previously been posted in the agenda.

VI. POLICIES

A. Preferred Accessible Format

All materials related to Council business must be in preferred accessible format for Council members requiring such accommodation;

B. Action

Any item requiring discussion and/or action at any full Council meeting must be received by each member in the preferred accessible format prior to the meeting.

C. Individual Activities

A member shall give prior notice to the Chair of any planned activities in which such member is acting on behalf of the Council, representing the positions of the Council, carrying out the objectives in the State Plan, or conducting any activity related to the composition, structure, or funding of the Council. The Chair shall inform the Designated State Units and seek to ensure that activities of the Council are carried out as collaborative efforts and that members or other interested parties are informed. In such case that the Council charges a committee with certain tasks, an individual on the committee shall give prior notice of planned activities to the Chair of the committee.

VII. AMENDMENTS TO BY-LAWS

A. The Executive Committee shall be responsible for reviewing the By-Laws to address procedural obstacles encountered by the Council and shall develop proposed amendments for consideration by the Council.

B. Individual members shall retain the right to propose amendments to the By-Laws for consideration by the Council.

C. Any amendment to the By-Laws must be received by the full Council at least a minimum of two weeks prior to the meeting, where the amendments will be presented for vote. Amendments to the By-Laws must be approved by a two-thirds vote of the members present at the specified meeting.

Approved By:

Date:



Texas State Independent Living Council



Meeting Minutes
Austin Marriott South
4415 S IH 35 Frontage Road
Austin, TX 78744
Meeting Room: Salon C
Monday January 25, 2016

Opening:

With no executive committee in place. Marsh called for an election pro tem. Brocato nominated Luther to be chair pro tem and Batchelor nominated himself. With a voice vote, Luther became the Chair pro tem and he brought the meeting to order at 9:11 a.m.

Present:

Members in Attendance – *Jim Brocato, Jim Batchelor , *Lynne Richardson, Paul Luther, Colton Read, Mack Marsh, Dr. Ralph Jones, Shannon Alexander, Martha Bagley, *Wesley Yeagar , Jonas Schwartz

Members Not in Attendance – Karen Swearingen and Terri Richard

Others in Attendance - Regina Blye, Staff; Craig Davis, Staff; Shiloh Gonzalez, DARS Stakeholder Relations Liaison; Keisha Rowe, DARS; Coy Jones, PCG; Karen Latta, TWC; Jackie Pacha, BCVIL; Sue Fielder, DADS

*Richardson, Brocato, and Yeager were present but could not stay the entire meeting.

Elections

- Marsh made a motion to suspend the rules to have a nominating committee. Motion passed
 - Brocato and Luther removed their names from consideration.
 - Marsh made a motion to vote for chair before any other offices. Brocato Seconded. Motion passed.
 - All voting was completed by secret ballot and was gathered and counted by SILC staff.
 - Votes for the Chair position were tied. A second election was held with Batchelor winning the Chair position.
 - Marsh made a motion to move the chair title from Luther to Batchelor. Brocato seconded. Motion passed.
 - Election for Vice Chair was held with Richardson winning the position
 - Election for Secretary was held with Alexander winning the position
 - Election was held for Treasurer with Swearingen winning the position.
 - The ballots were given to the new Secretary for review.

By-Laws

- Brocato made a motion to form a committee that would review and recommend changes to the current by-laws. Marsh seconded. Motion passed.

- The committee was then formed on a volunteer basis: Committee Chair: Read. Members: Luther, Richardson, Brocato, Jones, and Marsh.

APPROVAL OF AGENDA AND MINUTES

- Motion to approve the January Minutes and for the October Quarterly Meeting in San Antonio, TX was made by Luther and seconded by Brocato. Motion passed.
- Motion to approve the Agenda was made by Luther and seconded by Brocato. Motion passed.

OLD BUSINESS

● POLICY AND PROCEDURE MANUAL

- Davis emailed the Policy and Procedure Manual that reflected the changes approved at the October meeting two weeks prior to the meeting.
- A copy of the Policy and Procedure manual was signed by Alexander, Secretary.

● MEETING SCHEDULE

- Brocato made a motion to have a joint meeting with all CIL directors during Conference. Marsh seconded motion. Motion passed.
- Brocato also made a motion to add SILC Congress to the next agenda under New Business. Marsh seconded. Motion passed.

NEW BUSINESS

● BOARD MEMBERSHIP

- Blye stated that Richard Couder sent an email to Blye and the governor's office to rescind his resignation letter.
- Governor's office did not know if it would be possible due to federal laws.
- It was discussed whether the council had input on the decision. The consensus was that it would be up to the Governor's office.
- Marsh made a motion to accept Blye's report on Couder. Luther seconded and motion passed.

● ORGANIZATIONAL FLOWCHART

- Blye went over the organizational flowchart that showed current SILC employees.
- There was discussion on the role of having a volunteer in the financial role. Marsh, Brocato, and Luther stated that a full-time financial person was needed.
- Blye agreed and stated that staff is working on locating a person, securing funding, and adding language into the SPIL for the Financial Officer and other positions.

STATE PLAN FOR INDEPENDENT LIVING

- Breitengross Bitter gave an update of the FY14-16 State Plan. She referred the Executive Summary handout that outlined the FY15 progress of the SPIL Objectives.
 - FY17-19 Drafting Discussion – Breitengross Bitter with through the current drafting workgroups for the new members. The SILC will be hosting two webinars to obtain stakeholder input on what should be included in the next SPIL. The SILC will also be hosting two SPIL hearings with the first one being held during the SILC Conference in San Antonio and the second one to be determined.
 - WIOA Update – SILC provided public comment on the proposed changes on 1/15/2016. Blye then went over the SILC indicators that were presented at SILC Congress.
 - Advocacy Update – Brietengross Bitter went over the SPIL activities the committee could pursue.

PUBLIC COMMENT

- Public comment was given by Jackie Pacha, Executive Director of the Brazos Valley Center for Independent Living.

INVITED SPEAKERS

- Keisha Rowe, DARS and Coy Jones, Public Consulting Group (PCG) were invited to present to the council their role in the transition of IL services from DARS to the CILs.
 - PCG is currently evaluating each CIL to assess their ability to take on these services.
 - PCG will be holding three public hearings to obtain feedback from stakeholders.
 - Services are set to transition by September 1, 2016.

FINANCIAL REPORT

- Blye presented the SILC financial report.
 - Brocato made the point that the SILC has used \$160,996.32 in Part B and SSA-VR money. He wanted a document sent to the council members that shows how much and is left in each grant or life of grant report. Blye agreed to provide that information.
 - Blye then reported that the SILC had recently been gathering bids from CPA's to complete the SILC's FY15 audit. The best bid received was Montemayor Hill & Company at \$14,000.00.
 - Brocato asked for quotes outside of Austin.
 - Colton made a motion to accept the bid. Marsh seconded. Motion passed with two dissents Brocato and Luther.

MEETING ADJOURNED



Texas State Independent Living Council



Meeting Minutes
Austin Marriott South
4415 S IH 35 Frontage Road
Austin, TX 78744
Meeting Room: Salon C/D
Tuesday January 26, 2016

Opening:

The joint quarterly meeting of the Texas State Independent Living Council (SILC) and the Rehabilitation Council (RCT) of Texas was brought to order by the RCT Vice-Chair, Joyce Taylor and SILC Chair, Jim Batchelor at 9:05 a.m.

Present:

SILC Members in Attendance – Jim Brocato, Jim Batchelor , Paul Luther, Colton Read, Mack Marsh, Dr. Ralph Jones, Shannon Alexander Terri Richard, Martha Bagley, Wesley Yeagar , Jonas Schwartz

RCT Members in Attendance – Joyce Taylor, Karen Stanfill, Ron Ayer, Davis Nornan, Paul Hunt, Dr. Renen Gonzalez, Crystal Stark, JoAnne Fluke, Mark Schroeder, Joe Tims, Bruce Hooper, Casey Hertel, Matt Berend, Neva Fairchild, Troy Myree, Susan May

Members Not in Attendance – Paul Luther, Lynne Richardson, Karen Swearingen

Others in Attendance - Regina Blye, SILC Staff; Craig Davis, SILC Staff; Sandra Breitengross Bitter, SILC Staff; Brian White, SILC Staff; Don Roy, DARS; Shiloh Gonzalez; Peggy Lyons, TWC; Karen Latta, TWC; Kirk Land, TWC; Steve Alamon, Disability Rights Texas; Lisa Godwin, RCT Coordinator;

RCT/SILC RELATIONSHIP MOVING FORWARD

- Breitengross Bitter stated that even though SILC will be moving to HHSC and RCT to TWC, the SILC would like to continue the great relationship and yearly joint meeting.
- SILC would like to continue its participation in the needs assessment.
- The SILC will still have a representative on the RCT board.

NEEDS ASSESSMENT UPDATE

- RCT is mandated to complete a needs assessment every three years. SILC works with RCT to complete the needs assessment.
- This cycle, the RCT is drafting an assessment during the first year and will drill down to more specifics over the remaining two years.
- This year's focus will be on youth and students with disabilities.
- The 2015 draft report was shared with the RCT Council. Once edited, it will be released widely.

SPIL/COMBINED STATE PLAN

- Breitengross Bitter stated that the FY17-19 SPIL is in the drafting stage.
- The SPIL has seven sections. Workgroups were formed based on the seven sections. The workgroups are comprised of CILs, SILC board members, and SILC staff.
- SILC will be hosting webinars and public hearings to get stakeholder buy-in.
- The first public hearing will be held during the SILC Conference on April 3, 2016.

EX-OFFICIO, LIAISON, AND CHAIR REPORTS

- Ex-Officio, liaison, and chair reports were given by members of RCT and the SILC.
 - Client Assistance Program - Karen Stanfill
 - Texas Education Agency - Susie May
 - Texas Workforce Investment Council - Joyce Taylor
 - Division for Blind Services – Martha Bagley
 - Department of Assistive and Rehabilitative Services – Stakeholder Relations Liaison – Shiloh Gonzalez
 - Division for Rehabilitation Services – Jonas Schwartz
 - Texas Department of Housing and Community Affairs – Terri Richard
 - Department of Aging and Disability Services – Wesley Yeager
 - Centers for Independent Living/SILC Liaison- Jim Brocato

MEETING ADJOURNED

Minutes drafted by: Craig Davis

Signed by: X

Date:

Shannon Alexander, Secretary or Executive board member

Next Meeting April 2, 2016 in San Antonio, Texas



Texas State Independent Living Council



Meeting Minutes
Hilton San Antonio Airport
611 NW Loop 410
San Antonio, TX 78216
Meeting Room: Brazos
Saturday, October 24, 2015

Opening:

The quarterly meeting of the Texas State Independent Living Council (SILC) was called to order by Randell Resneder, Chair.

Present:

Members in Attendance – Randell Resneder, Jim Brocato*, Jim Batchelor, Lynne Richardson, Karen Swearingen, Paul Luther, Terri Richard, Martha Bagley, Wesley Yeager*, Jonas Schwartz

Members Not in Attendance – Richard Couder, Shannon Alexander

Others in Attendance - Regina Blye, Staff; Craig Davis, Staff; Jay Davis, Volunteer; Kitty Brietzke J.D., Executive Director, SAILS; Michelle Crain, Executive Director, Life Inc.; Shiloh Gonzalez, DARS Stakeholder Relations Liaison; Beverly Delarza, advocate

*Brocato had to leave after his liaison report due to a family emergency. Yeager arrived later in the meeting due to inclement weather.

APPROVAL OF AGENDA AND MINUTES:

- Motion to approve the Minutes and from the February 28th Quarterly Meeting in Austin, TX was made by Brocato and seconded by Batchelor. Motion passed.
- Motion to approve the Agenda was made by Brocato and seconded by Batchelor. Motion passed.

EX-OFFICIO, LIAISON, AND CHAIR REPORTS

- Division for Blind Services – Martha Bagely
- Department of Assistive and Rehabilitative Services – Stakeholder Relations Liaison – Shiloh Gonzalez
- Division for Rehabilitation Services – Jonas Schwartz
- Texas Department of Housing and Community Affairs – Terri Richard
- Department of Aging and Disability Services – Wesley Yeager
- Centers for Independent Living- Jim Brocato
- SILC Chair – Randell Resneder

OLD BUSINESS

- **POLICY AND PROCEDURE MANUAL**

- Blye went through the Policy and Procedure Manual pointing out extensive recommended changes made by staff and Council Member, Luther.
- A motion was made to accept the recommended changes by Batchelor and seconded by Swearingen. Motion passed.

NEW BUSINESS

- **MEETING DATES**

- Blye presented the meeting schedule for the rest of the year and opened the discussion on meetings at the CILs and weekend meetings.
- After discussion, the consensus of the Council was that meetings could be a burden on the CILs and that the hotel should be the base for the meetings.
- There was also concerns on the Council about transportation between the hotel and the CILs.
- It was also the consensus of the Council that there should be more outreach to the CILs in order to invite their staff, board, or consumers to our meetings.

- **CHART OF ACCOUNTS**

- Blye introduced the FY16 Chart of Accounts. Volunteer Jay Davis went over the account codes and how the chart was organized as a whole.
- A motion was made by Batchelor to approve the FY16 Chart of Accounts and was seconded by Swearingen. Motion passed.

- **DARS MONITORING REVIEW**

- Blye reported that the SILC had a DARS monitoring visit at the end of August.
- The DARS review yielded no findings and had a perfect report.
- The report shows financial procedures implemented throughout the year has the SILC on the right track.

- **PART B FUNDING**

- The new SPIL being written should specify what we can do with the funding.
- Mentioning the Part B Funding in the SPIL could protect it moving forward.
- More communications will be sent once the writing of the funding part of the new SPIL begins.

- **ELECTIONS**

- Blye started the discussion stating that all Executive terms were up. Resneder, Chair and Brocato, Vice Chair came in 9 months earlier to fulfill the term left vacant by former Chair, Saul Herrera. All Executive elections are held every two years in the first meeting of the fiscal year.
- Swearingen made the motion to nominate Couder as Chair. Batchelor seconded. Motion Passed.

- Resneder made a motion to nominate Batchelor as Vice Chair. Luther seconded motion. Motion Passed.
- Richardson made a motion to nominate herself as Treasurer. Luther seconded motion. Motion Passed.
- Batchelor made a motion to re-elect Swearingen as Secretary. Luther seconded. Motion Passed
- A gavel mounted plaque was presented to Resneder in appreciation of his time and dedication on the Council and as Chair. Resneder served on the SILC Council from 2009-2015

PUBLIC COMMENT

- The Council heard three people give public comment. These people included Kitty Brietzke J.D., Executive Director, SAILS; Michelle Crain, Executive Director, Life Inc.; and Beverly Delarza, advocate and mother of a person with a disability.

FINANCIAL REPORT

- Blye went over the FY13 and FY14 internal audit findings. She referenced the reports that were in the member's packets.
- Jay Davis went over the Cost Allocation Plan which has been shortened to one page.
- A motion to approve the Cost Allocation Plan was made by Batchelor and was seconded by Swearingen. Motion passed.
- Jay Davis then went over the FY16 Budget. The SILC has been operating under this budget since September 1, 2015, but was unable to have a vote in August due to no quorum.
- A motion was made by Batchelor to approve the budget and was seconded by Luther. Motion Passed.
- Blye gave an overview of the SILC's Organizational Flowchart.
- A motion was made by Luther to approve the Organization Flowchart and was seconded by Batchelor. Motion passed.

MEETING ADJOURNED



Texas State Independent Living Council



Meeting Minutes
Hilton San Antonio Airport
611 NW Loop 410
San Antonio, TX 78216
Meeting Room: Brazos
Sunday, October 25, 2015

Opening:

The quarterly meeting of the Texas State Independent Living Council was brought to order by Randell Resneder, Chairman.

Present:

Members in Attendance – Randell Resneder, Jim Batchelor, Lynne Richardson, Karen Swearingen, Paul Luther, Terri Richard, Martha Bagley, Wesley Yeagar, Jonas Schwartz

Members Not in Attendance – Richard Couder, Shannon Alexander, Jim Brocato

Others in Attendance - Regina Blye, Staff; Craig Davis, Staff; Jay Davis, Volunteer

STATE PLAN FOR INDEPENDENT LIVING

- **SPIL Goal 4-** Blye provided historical information on SPIL Goal 4 starting from its inception on up to the present beginning of year three.
- **WIOA Side-By-Side High Level Comparison**
 - Blye introduced the WIOA Comparison packet. The table reflected the Department of Rehabilitation's first phase of identifying changes in the vocational rehabilitation through the Workforce Innovation and Opportunity Act (WIOA). (See Attachment)

SILC TRAINING

- Blye presented a PowerPoint training presentation to illustrate the Council Overview, Mission/Vision/Purpose and Committee Responsibilities. The training also highlighted the CILs 5 core services and functions.

SUBCOMMITTEE ITEMS

- Blye went over the functions of the Executive, Planning & Evaluation, Community Relations & Conference, and System Advocacy committees.
- Board members were assigned to available spots on each committee.

- As an action item, each committee was given the goal of having at least one subcommittee meeting before the next quarterly meeting.

MEETING ADJOURNED

Minutes drafted by: Craig Davis

Signed by: X

Date:

Karen Swearingen, Secretary or Executive board member

Next Meeting April 2, 2016 in San Antonio, Texas



Texas State Independent Living Council



Meeting Minutes – NO QUORUM

MCM Elegante Hotel

801 Avenue Q

Lubbock, Texas 79401

Meeting Room: Parlor Suite

August 15, 2015

Opening:

The quarterly meeting of the Texas State Independent Living Council (SILC) was called to order by Randell Resneder, Chair. Resneder recognized that not enough voting members were present to establish a quorum and no business was conducted. The meeting was conducted with reports only and was adjourned.

Present:

Members in Attendance – Richard Couder, Randell Resneder, Jim Batchelor, Terri Richard, Martha Bagley, Wesley Yeagar, Jonas Schwartz

Members Not in Attendance – Jim Brocato, Lynne Richardson, Shannon Alexander, Karen Swearingen, Paul Luther

Others in Attendance - Regina Blye, Staff; Craig Davis, Staff; Sandra Breitengross Bitter, Staff; Adriana Rojas, Staff

MEETING ADJOURNED

Minutes drafted by: Craig Davis

Signed by: X

Date:

Karen Swearingen, Secretary or Executive board member

Next meeting January 25-26th in Austin, TX



Texas State Plan For Independent Living 2014 - 2016



State Plan for Independent Living (SPIL)

Chapter 1, Title VII of the Rehabilitation Act of 1973, as Amended

**State Independent Living Services (SILS) Program
Part B**

**Centers for Independent Living (CIL) Program
Part C**

**FISCAL YEARS 2014-2016
Effective Date: October 1, 2013**

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PART I: ASSURANCES

State of: Texas

Section 1: Legal Basis and Certifications

- 1.1 The designated State unit (DSU) eligible to submit the State Plan for Independent Living (SPIL or the plan) and authorized under State law to perform the functions of the State under the State Independent Living Services (SILS) and Centers for Independent Living (CIL) programs is the Department of Assistive and Rehabilitative Services (DARS), Division for Rehabilitation Services (DRS). 34 CFR 76.104(a)(1) and (2); 34 CFR 364.22(a)
- 1.2 The separate State agency eligible to submit the plan and authorized under State law to provide vocational rehabilitation (VR) services to individuals who are blind is DARS Division for Blind Services (DBS). 34 CFR 76.104(a)(1) and (2); 34 CFR 364.20(d) and 364.22(c)
- 1.3 The Statewide Independent Living Council (SILC) that meets the requirements of section 705 of the Act and is authorized to perform the functions outlined in section 705(c) of the Act in the State is the Texas State Independent Living Council. 34 CFR 364.21(a)
- 1.4 The DSU and, if applicable, the separate State agency authorized to provide VR services to individuals who are blind, and the SILC are authorized to jointly develop, sign and submit this SPIL on behalf of the State, and have adopted or otherwise formally approved the SPIL. 34 CFR 76.104(a)(7); 34 CFR 364.20(c) and (d)
- 1.5 The DSU, and, if applicable, the separate State agency authorized to provide VR services to individuals who are blind, may legally carry out each provision of the plan and will comply with all applicable Federal statutes and regulations in effect with respect to the three-year period it receives funding under the SPIL. 34 CFR 76.104; 34 CFR 80.11(c)
- 1.6 The SPIL is the basis for State operation and administration of the program. All provisions of the SPIL plan are consistent with State law. 34 CFR 76.104(a)(4) and (8)
- 1.7 The representative(s) of the DSU and, if applicable, of the separate State agency authorized to provide VR services to individuals who are blind, who has/have the authority under State law to receive, hold, and disburse Federal funds made available under the SPIL and to submit the SPIL jointly with the SILC chairperson is/are: Jim Hanophy, Assistant Commissioner, DARS-DRS and Barbara J. Madrigal, Assistant Commissioner, DARS-DBS. 34 CFR 76.104(a)(5) and (6)

Section 2: SPIL Development

- 2.1 The plan shall be reviewed and revised not less than once every three years, to ensure the existence of appropriate planning, financial support and coordination, and other assistance to appropriately address, on a statewide and comprehensive basis, the needs in the State for:

- a) The provision of State independent living services;
 - b) The development and support of a statewide network of centers for independent living; and
 - c) Working relationships between programs providing independent living services and independent living centers, the vocational rehabilitation program established under title I, and other programs providing services for individuals with disabilities. *34 CFR 364.20(f)*
- 2.2 The DSU and SILC conduct public meetings to provide all segments of the public, including interested groups, organizations and individuals, an opportunity to comment on the State plan prior to its submission to the Commissioner and on any revisions to the approved State plan. *34 CFR 20(g)(1)*
- 2.3 The DSU and SILC establish and maintain a written description of procedures for conducting public meetings in accordance with the following requirements:
The DSU and SILC shall provide:
- a) Appropriate and sufficient notice of the public meetings (that is, at least 30 days prior to the public meeting through various media available to the general public, such as newspapers and public service announcements, and through specific contacts with appropriate constituency groups and organizations identified by the DSU and SILC);
 - b) Reasonable accommodation to individuals with disabilities who rely on alternative modes of communication in the conduct of the public meetings, including providing sign language interpreters and audio-loops; and
 - c) Public meeting notices, written material provided prior to or at the public meetings, and the approved State plan in accessible formats for individuals who rely on alternative modes of communication. *34 CFR 364.20(g)(2)*
- 2.4 At the public meetings to develop the State plan, the DSU and SILC identify those provisions in the SPIL that are State-imposed requirements beyond what would be required to comply with the regulations in 34 CFR parts 364, 365, 366, and 367. *34 CFR 364.20(h)*
- 2.5 The DSU will seek to incorporate into and describe in the State plan any new methods or approaches for the provision of IL services to older individuals who are blind that are developed under a project funded under chapter 2 of title VII of the Act and that the DSU determines to be effective. *34 CFR 364.28*
- 2.6 The DSU and SILC actively consult, as appropriate, in the development of the State plan with the director of the Client Assistance Program (CAP) authorized under section 112 of the Act. *34 CFR 364.20(e)*

Section 3: Independent Living Services

- 3.1 The State, directly or through grants or contracts, will provide IL services with Federal, State, or other funds. *34 CFR 364.43(b)*
- 3.2 Independent living services shall be provided to individuals with significant disabilities in accordance with an independent living plan mutually agreed upon by an appropriate staff member of the service provider and the individual, unless the

individual signs a waiver stating that such a plan is unnecessary. *34 CFR 364.43(c)*

- 3.3 All service providers will use formats that are accessible to notify individuals seeking or receiving IL services under chapter 1 of title VII about:
 - a) The availability of the CAP authorized by section 112 of the Act;
 - b) The purposes of the services provided under the CAP; and
 - c) How to contact the CAP.*34 CFR 364.30*
- 3.4 Participating service providers meet all applicable State licensure or certification requirements. *34 CFR 365.31(c)*

Section 4: Eligibility

- 4.1 Any individual with a significant disability, as defined in *34 CFR 364.4(b)*, is eligible for IL services under the SILS and CIL programs authorized under chapter 1 of title VII of the Act. Any individual may seek information about IL services under these programs and request referral to other services and programs for individuals with significant disabilities, as appropriate. The determination of an individual's eligibility for IL services under the SILS and CIL programs meets the requirements of *34 CFR 364.51*. *34 CFR 364.40(a), (b) and (c)*
- 4.2 Service providers apply eligibility requirements without regard to age, color, creed, gender, national origin, race, religion or type of significant disability of the individual applying for IL services. *34 CFR 364.41(a)*
- 4.3 Service providers do not impose any State or local residence requirement that excludes any individual who is present in the State and who is otherwise eligible for IL services from receiving IL services. *34 CFR 364.41(b)*

Section 5: Staffing Requirements

- 5.1 Service provider staff includes personnel who are specialists in the development and provision of IL services and in the development and support of centers. *34 CFR 364.23(a)*
- 5.2 To the maximum extent feasible, a service provider makes available personnel able to communicate:
 - (1) With individuals with significant disabilities who rely on alternative modes of communication, such as manual communication, nonverbal communication devices, Braille or audio tapes, and who apply for or receive IL services under title VII of the Act and
 - (2) in the native languages of individuals with significant disabilities whose English proficiency is limited and who apply for or receive IL services under title VII of the Act. *34 CFR 364.23(b)*
- 5.3 Service providers establish and maintain a program of staff development for all classes of positions involved in providing IL services and, if appropriate, in administering the CIL program. The staff development programs emphasize improving the skills of staff directly responsible for the provision of IL services, including knowledge of and practice in the IL philosophy. *34 CFR 364.24*
- 5.4 All recipients of financial assistance under parts B and C of chapter 1 of title VII of the Act will take affirmative action to employ and advance in employment qualified

individuals with significant disabilities on the same terms and conditions required with respect to the employment of individuals with disabilities under section 503 of the Act. *34 CFR 364.31*

Section 6: Fiscal Control and Fund Accounting

- 6.1 All recipients of financial assistance under parts B and C of chapter 1 of title VII of the Act will comply with applicable EDGAR fiscal and accounting requirements and will adopt those fiscal control and fund accounting procedures as may be necessary to ensure the proper disbursement of and accounting for those funds. *34 CFR 364.34*

Section 7: Recordkeeping, Access, and Reporting

- 7.1 In addition to complying with applicable EDGAR recordkeeping requirements, all recipients of financial assistance under parts B and C of chapter 1 of title VII of the Act will maintain records that fully disclose and document:
- a) The amount and disposition by the recipient of that financial assistance;
 - b) The total cost of the project or undertaking in connection with which the financial assistance is given or used;
 - c) The amount of that portion of the cost of the project or undertaking supplied by other sources;
 - d) Compliance with the requirements of chapter 1 of title VII of the Act and Part 364 of the regulations; and
 - e) Other information that the Commissioner determines to be appropriate to facilitate an effective audit. *34 CFR 364.35(a) and (b)*
- 7.2 All recipients of financial assistance under parts B and C of chapter 1 of title VII of the Act will submit reports that the Commissioner determines to be appropriate with respect to the records that are required by *34 CFR 364.35* and *.36*
- 7.3 All recipients of financial assistance under parts B and C of chapter 1 and chapter 2 of title VII of the Act will provide access to the Commissioner and the Comptroller General, or any of their duly authorized representatives, to the records listed in *34 CFR 364.37* for the purpose of conducting audits, examinations and compliance reviews. *34 CFR 364.37*

Section 8: Protection, Use, and Release of Personal Information

- 8.1 Each service provider will adopt and implement policies and procedures to safeguard the confidentiality of all personal information, including photographs and lists of names in accordance with the requirements of *34 CFR 364.56(a)(1-6)*. *34 CFR 364.56(a)*

State of: _____Texas_____

PART II: NARRATIVE

Section 1: Goals, Objectives, and Activities

1.1 Goals and Mission – 34 CFR 364.42(b)(1)

1.1A Describe the overall goals and mission of the State's IL programs and services. The SPIL must address the goals and mission of both the SILS and the CIL programs.

The Texas State Plan for Independent Living is a collaborative effort between the State Independent Living Council (SILC) and the Department of Assistive and Rehabilitative Services (DARS). This document is based on substantial input from the network of Centers for Independent Living (CILs), and persons with disabilities residing throughout the state.

SPIL Mission: To empower Texans with disabilities to live as independently, with as much choice, as possible.

DARS Mission: To work in partnership with Texans with disabilities and families with children who have developmental delays to improve the quality of their lives and enable their full participation in society.

Division of Blind Services Mission: To work in partnership with Texans who are blind or have low vision to reach their goals.

The goals cited below reflect current priorities of the SILC, DSU, and network of CILs toward the fulfillment of this mission:

GOAL I: Texans with disabilities establish and maintain an integrated, independent lifestyle.

GOAL II: Independent Living Services Network builds capacity and sustains expansions.

GOAL III: Persons underserved and underrepresented in the IL network have an increased presence within the network.

GOAL IV: The Independent Living Network coordinates on advocacy, training, and educational opportunities to promote systems change.

1.2 Objectives – 34 CFR 364.42(a)(1) and (d); 34 CFR 364.32; 34 CFR 364.33

1.2A Specify the objectives to be achieved and the time frame for achieving them.

Specific objectives are presented to support each of the goals listed in Section 1.1 A above.

Given the expansiveness of these objectives, time to accomplish specific components of each will vary, but all activities will be accomplished during the FY 2014-2016 SPIL cycle as required. Progress on all objectives will be assessed quarterly and annually.

Goal #1: Texans with disabilities establish and maintain an integrated, independent lifestyle.

Objective 1.1: Key stakeholders and policymakers collaborate with the Independent Living (IL) Network to increase the availability of affordable and accessible housing for individuals with disabilities.

- Measurable Indicators: 1) 5% combined increase in housing assistance for individuals with disabilities through the Texas Department of Housing and Community Affairs (TDHCA) HOME Tenant Based Rental Assistance (TBRA) and TDHCA Project Access programs (based on the annual average assistance provided for FY10-FY12). 2) 3 CILs are TDHCA TBRA vendors. 3) Addition of 2 TDHCA TBRA vendors serving people with disabilities (based on the annual average number of vendors from FY10-FY12).
- Scope: Statewide
- Target Performance Levels for 2016: 1) 5% combined increase in housing assistance for individuals with disabilities through the TDHCA HOME Tenant Based Rental Assistance and TDHCA Project Access programs (based on the annual average assistance provided for FY10-FY12). 2) 3 CILs are TDHCA TBRA vendors. 3) Addition of 2 TDHCA TBRA vendors serving people with disabilities (based on the annual average number of vendors from FY10-FY12).
- Target Progress FY2014-FY2016: FY14—1% increase in housing assistance, 1 CIL is a TDHCA TBRA vendor, begin recruitment of additional TDHCA TBRA vendors to serve people with disabilities; FY15—2% increase in housing placements, 2 CILs are TDHCA TBRA vendors, addition of 1 TDHCA TBRA vendor serving people with disabilities; FY16—5% increase in housing assistance, 3 CILs are TDHCA TBRA vendors, addition of 2 TDHCA TBRA vendors serving people with disabilities (based on the annual average number of vendors from FY10-FY12).
- Activities: 1) Utilizing and accessing TDHCA Project Access vouchers and TDHCA HOME TBRA more efficiently. 2) Encouraging new TDHCA TBRA vendors in the community, including CILs. 3) Facilitating partnerships and communication efforts among municipal government, non-profits, developers, and government agencies to integrate affordable housing into planning activities.
- Lead Organization: Relocation contractors, TDHCA TBRA administrators

- Partners: TDHCA, CILs, Easter Seals Central Texas, Public Housing Authorities (PHAs)
- Resources: For FY12, \$3,794,677 was allocated by the TDHCA HOME program funding for rental assistance activities and \$5,573,940 was allocated by the TDHCA Section 8 program for the State of Texas. Funding is subject to federal appropriation.
- Funding Sources: TDHCA through federal and State General Revenue funds

Objective 1.2: Individuals with disabilities access and utilize public transportation and non-traditional transportation options in non-metropolitan, rural (under 50,000), and small urban (50,000-200,000) areas.

- Measurable Indicators: 1) 20 public hearings, town hall meetings, or community events held to assess the needs of rural and small urban areas. 2) 5,000 needs assessment surveys disseminated to determine the transportation needs of individuals with disabilities. 3) 4 regional workgroup meetings facilitated to discuss hearing and survey findings. 4) Submit a report to the Texas Department of Transportation (TxDOT) and the network of CILs summarizing the findings and suggestions derived from the public hearing and needs assessment process. 5) 5 CILs participate in Regionally Coordinated Transportation Plan meetings.
- Scope: Statewide
- Target Performance Levels for 2016: 1) 20 public hearings, town hall meetings, or community events. 2) 5,000 needs assessment surveys. 3) 4 regional workgroup meetings. 4) Report to TxDOT. 5) 5 CILs participate in Regionally Coordinated Transportation Plan meetings.
- Target Progress FY2014-FY2016: FY14—1) Hold 6 hearings, town hall meetings, or community events, 2) Distribute up to 1,500 surveys, 3) 1 CIL participates in Regionally Coordinated Transportation Plan meetings; FY15—1) Hold 12 hearings, town hall meetings, or community events, 2) Distribute up to 3,000 surveys, 3) 2 CILs participate in Regionally Coordinated Transportation Plan meetings; FY16—1) Hold 20 hearings town hall meetings, or community events, 2) Distribute up to 5,000 surveys, 3) Hold 4 regional workgroup meetings, 4) Report on findings, 5) 5 CILs participate in Regionally Coordinated Transportation Plan meetings.
- Activities: 1) Assessing the availability and use of transportation resources for individuals with disabilities in rural and small urban areas. 2) Communicating the transportation needs of individuals with disabilities to regional and statewide transportation planners and stakeholders through participation by the network of CILs at Regionally Coordinated Transportation Plan meetings.
- Lead Organization: SILC
- Partners: Federal Transit Administration, Texas Department of Transportation, CILs, Universities, and Community Colleges

- Resources: \$866,959 over the SPIL cycle
- Funding Sources: Texas Department of Transportation, Federal Transit Administration, SILC, CIL funding

Objective 1.3: Job seekers with disabilities have an awareness of workplace expectations, employment opportunities, and access to job and soft skills training.

- Measurable Indicators: 1) 20 contacts per year between CILs and community groups on training and employment opportunities for individuals with disabilities. 2) 5 soft skills and employment readiness trainings conducted at CILs per year.
- Scope: Statewide network of CILs
- Target Performance Levels for 2016: 1) 60 contacts between CILs and community groups on training and employment opportunities, 2) 15 soft skills and employment readiness trainings.
- Target Progress FY2014-FY2016: FY14—20 contacts between CILs and community groups on training and employment opportunities, 5 soft skills and employment readiness trainings; FY15—40 contacts between CILs and community groups on training and employment opportunities, 10 soft skills and employment readiness trainings; FY16—60 contacts between CILs and community groups on training and employment opportunities, 15 soft skills and employment readiness trainings.
- Activities: 1) Coordinating with local Workforce Commissions and other community groups to collaborate on training and referral opportunities for individuals with disabilities seeking to enter the workforce. 2) Coordinating with local employers' programs to hire individuals with disabilities. 3) Implementing soft skills and employment readiness training at CILs.
- Lead Organization: CILs
- Partners: Texas Workforce Commission, DARS, DADS
- Resources: \$8,310,229 (estimated annual General CIL Operations funding)
- Funding Sources: Part B, Part C, SSA-VR, State General Revenue

Objective 1.4: Individuals with disabilities, rehabilitation counselors, and CILs have increased access to, and are informed of, new innovations in Assistive Technology (AT).

- Measurable Indicators: 1) At least one AT expert exhibit at the annual IL conference. 2) At least three trainings on AT held by 2016. 3) AT is featured quarterly in a SILC and/or CIL newsletter.
- Scope: Statewide
- Target Performance Levels for 2016: 1) 3 expert AT exhibits at the annual IL conference. 2) 3 trainings on AT. 3) 12 articles on AT in a SILC or CIL newsletter.

- Target Progress FY2014-FY2016: FY14—1 expert AT exhibit, 1 training on AT, 4 newsletter articles; FY15—2 expert AT exhibits, 2 trainings on AT, 8 newsletter articles; FY16—3 expert AT exhibits, 3 trainings on AT, 12 newsletters on AT.
- Activities: 1) Highlighting innovations in technologies at the annual statewide IL conference. 2) Featuring breakthroughs in AT research and innovation in regular newsletters to the IL community. 3) Training IL counselors and rehabilitation counselors at the annual statewide IL conference and the Texas Assistive Technology Regional Conference on available and emerging AT.
- Lead Organization: CILs, SILC
- Partners: SILC, DARS, CILs, TCDD, Texas Technology Access Program, TACIL
- Resources: \$8,310,229 (estimated annual General CIL Operations funding)
- Funding Sources: Part B, Part C, SSA-VR, State General Revenue, TCDD, Texas Technology Access Program, program income, and other funds to be determined from other community resources.

Goal #2—IL Services Network builds capacity and sustains expansions.

Objective 2.1: CILs partner with Aging and Disability Resource Centers (ADRCs), Area Agency on Aging (AAAs), and/or Local Authorities to coordinate IL services within their communities.

- Measurable Indicators: 1) At least five CILs will work closely with ADRCs, AAAs, and/or Local Authorities to collaborate on resources. 2) At least once a year, the CILs, SILC, or TACIL will contact the ADRCs, AAAs, and/or Local Authorities to create awareness of CIL resources and service offerings.
- Scope: Statewide
- Target Performance Levels for 2016: 1) 5 CILs work with ADRCs, AAAs, and/or Local Authorities. 2) 3 contacts with ADRCs, AAAs, and Local Authorities to create awareness of CIL resources and service offerings.
- Target Progress FY2014-FY2016: FY14—2 CILs work with ADRCs, AAAs, and/or Local Authorities, 1 contact to create awareness; FY15—4 CILs work with ADRCs, AAAs, and/or Local Authorities, 2 contacts to create awareness; FY16—5 CILs work with ADRCs, AAAs, and/or Local Authorities, 3 contacts to create awareness.
- Activities: 1) Creating awareness of CIL presence in the community and the services they provide. 2) Working as a resource coach to ADRCs, AAAs, and/or Local Authorities along with other community partners. 3) Collaborating with ADRCs, AAAs, and/or Local Authorities to assess needed services for consumers. 4) Coordinating with CILs, SILC, and their community-based partners on the establishment of a new ADRC in the IL network. 5) Submit at least one ADRC grant proposal, should a RFP be issued.
- Lead Organization: CILs

- Partners: TACIL, SILC, DADS, ADRCs, AAAs, Local Authorities
- Resources: \$8,310,229 (estimated annual General CIL Operations funding)
- Funding Sources: Part B, Part C, SSA-VR, State General Revenue

Objective 2.2: The SILC coordinates additional grants and outside funding opportunities to expand consumer services and promote the value and services of CILs.

- Measurable Indicators: 1) Identify at least three potential funding opportunities. 2) 10% of CILs partners with the SILC, TACIL, community stakeholders, and/or state agencies on new funding opportunities.
- Scope: Statewide
- Target Performance Levels for 2016: 3 funding opportunities identified, 10% of CILs partner on new funding opportunities
- Target Progress FY2014-FY2016: FY14—1 funding opportunity identified, 1 CIL partners on new funding opportunity; FY15—2 funding opportunities identified, 2 CILs partner on new funding opportunities; FY16—3 funding opportunities identified, 3 CILs partner on new funding opportunity
- Activities: 1) Researching new funding or grant opportunities to collaborate with CILs to expand consumer services. 2) Partnering with CILs and other stakeholders on potential funding opportunities. 3) Providing technical assistance regarding and/ or administering grants to CILs for expansion of programs or awareness of CIL services and programs.
- Lead Organization: SILC
- Partners: CILs, TACIL
- Resources: To be determined
- Funding Sources: Volunteer hours, Non-federal dollars, Unrestricted funds

Goal #3—Persons underserved and underrepresented in the IL network have an increased presence within the Network.

Objective 3.1: Older Texans who are blind or have low vision receive IL training.

- Measurable Indicators: 1) 5 additional training contracts executed. 2) 225 consumers receive IL contract services.
- Scope: Statewide
- Target Performance Levels for 2016: 1) 5 training contracts executed. 2) 225 consumers receive IL contract services.
- Target Progress FY2014-FY2016: FY14—1 training contract executed, 50 consumers receive IL contract services; FY15—2 training contracts executed, 125 consumers receive IL contract services; FY16—5 training contracts executed, 225 consumers receive IL contract services.

- Activities: 1) Recruiting the necessary contractors to conduct IL training for individuals who are blind or have low vision. 2) Executing contracts with qualified vendors to perform IL contract services. 3) Conducting outreach to CILs, ADRCs, AAAs, and other stakeholders to identify consumers to receive training.
- Lead Organization: DBS
- Partners: DARS, CILs, DADS, ADRCs, AAAs
- Resources: \$250,000 per year
- Funding Sources: SSA-VR

Objective 3.2: Individuals that are Deaf or hard of hearing are aware of, and access, IL services.

- Measurable Indicators: 1) 12 programs and/ or activities per year in coordination with the CILs, specifically targeted to the Deaf and hard of hearing community.
- Scope: Statewide network of CILs.
- Target Performance Levels for 2016: 1) 36 programs and/or activities per year in coordination with the CILs, specifically targeted to the Deaf and hard of hearing community.
- Target Progress FY2014-FY2016: FY14—12 programs and/or activities per year in coordination with the CILs; FY15—24 programs and/or activities per year in coordination with the CILs; FY16—36 programs and/or activities per year in coordination with the CILs.
- Activities: 1) Facilitating connections, training opportunities, and IL programs among the Deaf and hard of hearing community, the CILs, ADRCs, and AAAs.
- Lead Organization: CILs
- Partners: DARS, DADS, ADRCs, AAAs
- Resources: \$8,310,229 (estimated annual General CIL Operations funding)
- Funding Sources: Part B, Part C, SSA-VR, State General Revenue, Program income

Objective 3.3: Youth with disabilities, including those who qualify for protection under Sec. 504 of the Americans with Disabilities Act, in transition toward community integration, employment, or higher education access available IL resources, peer-support, and mentoring programs.

- Measurable Indicators: 1) Five CILs participating in youth outreach and mentoring programs. 2) 3% increase in youth consumers served by CILs annually (as compared to youth consumers served in FY12). 3) 12 young adults identified as emerging leaders in the IL community. 4) The young adults identified will receive stipends to attend the annual statewide IL conference and/or the Association of Programs for Rural Independent Living (APRIL) conference. Scope: Statewide

- Target Performance Levels for 2016: 1) Five CILs participating in youth outreach and mentoring programs. 2) 9% increase in youth consumers served by CILs. 3) 12 young adults identified as emerging leaders in the IL community. 4) 12 young adults receive stipends to attend the annual statewide IL conference and/ or the Association of Programs for Rural Independent Living (APRIL) conference.
- Target Progress FY2014-FY2016: FY14—1) 1 CIL participates in youth outreach and mentoring programs. 2) 3% increase in youth consumers served by CILs. 3) 4 young adults identified as emerging leaders in the IL community. 4) 4 young adults receive stipends to attend the annual statewide IL conference and/ or the APRIL conference; FY15—1) 3 CILs participate in youth outreach and mentoring programs. 2) 6% increase in youth consumers served by CILs. 3) 8 young adults identified as emerging leaders in the IL community. 4) 8 young adults receive stipends to attend the annual statewide IL conference and/ or the APRIL conference; FY16—1) 5 CILs participate in youth outreach and mentoring programs. 2) 9% increase in youth consumers served by CILs. 3) 12 young adults identified as emerging leaders in the IL community. 4) 12 young adults receive stipends to attend the annual statewide IL conference and/ or the APRIL conference.
- Activities: 1) Facilitating soft skills, social skills, and employment readiness training at CILs for youth. 2) Establishing and/or expanding youth outreach and mentoring programs at CILs. 3) Promoting young advocates for leadership positions at CILs, non-profit organizations, state boards, etc.
- Lead Organization: CILs
- Partners: Local school districts, Texas Council on Developmental Disabilities (TCDD)
- Resources: \$8,310,229 (estimated annual General CIL Operations funding)
- Funding Sources: Part B, Part C, SSA-VR, State General Revenue, TCDD

Goal #4—The IL Network coordinates on advocacy, training, and educational opportunities to promote systems change.

Objective 4.1: The network of CILs uses new and existing reporting systems and unified descriptions of services when reporting SPIL activities to the SILC, DARS, and RSA.

- Measurable Indicators: 1) 100% of CILs participate in submitting IL activities and consumer data recorded in the 704 report to the SILC and RSA or DARS. 2) The SILC tracks SPIL activities on a quarterly basis and reports overall SPIL progress. 3) 80% of CILs are represented at workgroup meetings on reporting methods and unified descriptions of services.
- Scope: Statewide network of CILs

- Target Performance Levels for 2016: 1) 100% of CILs participate in submitting IL activities and consumer data recorded in the 704 report to the SILC and RSA or DARS. 2) The SILC tracks SPIL activities on a quarterly basis and reports overall SPIL progress. 3) 80% of CILs are represented at workgroup meetings on reporting methods and unified descriptions of services.
- Target Progress FY2014-FY2016: FY14—1) 100% of CILs participate in submitting IL activities and consumer data recorded in the 704 report to the SILC and RSA or DARS, 2) The SILC tracks SPIL activities on a quarterly basis and reports overall SPIL progress, 3) Majority of CILs are represented at workgroup meetings on reporting methods and unified descriptions of services; FY15—1) 100% of CILs participate in submitting IL activities and consumer data recorded in the 704 report to the SILC and RSA or DARS, 2) The SILC tracks SPIL activities on a quarterly basis and reports overall SPIL progress, 3) Majority of CILs are represented at workgroup meetings on reporting methods and unified descriptions of services; FY16—1) 100% of CILs participate in submitting IL activities and consumer data recorded in the 704 report to the SILC and RSA or DARS, 2) The SILC tracks SPIL activities on a quarterly basis and reports overall SPIL progress, 3) 80% of CILs are represented at workgroup meetings on reporting methods and unified descriptions of services.
- Activities: 1) Coordinating data collection by working with new and existing software systems used at CILs. 2) Formulating unified descriptions of services with the input of the SILC, DARS, and the CILs. 3) Facilitating workgroup meetings with the CILs on reporting methods and unified descriptions of services. 4) Developing a reporting schedule at the workgroup sessions by SILC and CIL staff. 5) Holding discussions with the National Council on Independent Living and RSA on systems change.
- Lead Organization: SILC, CILs
- Partners: TACIL, CILs, DARS
- Resources: Amount listed in SILC Resource Plan and “Other SPIL Activities” in Section 1.3A
- Funding Sources: Part B

Objective 4.2: Policymakers and key stakeholders have return on investment and funding justification data for IL services and programs.

- Measurable Indicators: 1) Return on investment (ROI) calculation, justification scenarios, or other measuring methods are created and approved by the IL network. 2) An education campaign and outreach plan for policymakers and key stakeholders are created and implemented.
- Scope: Network of CILs
- Target Performance Levels for 2016: 1) ROI, justification scenarios, or measuring methods determined. 2) Education and outreach plan implemented. 3) Project outcomes reviewed.
- Target Progress FY2014-FY2016: FY14—1) Research ROI calculations, justification scenarios, or other measuring methods and plan for implementation;

FY15—1) Continued implementation of calculations and methods, 2) Creation of education and outreach plan for policymakers and key stakeholders; FY16—1) Review project outcomes, 2) Education and outreach continues for policymakers and key stakeholders.

- Activities: 1) Researching return on investment (ROI) calculations, justification scenarios, or methods to measure outcomes in the IL network that other states or organizations have used. 2) Coordinating with CILs and DARS on proposed funding calculations, justification scenarios, and methods to measure outcomes. 3) Adjusting reporting requirements to ensure appropriate data and tracking information is available from the CILs to the SILC and DSU. 4) Creating an education campaign and outreach plan for policymakers and key stakeholders. 5) Implementing said strategy and disseminating ROI or justification data to the network of CILs, DARS, and the SILC.
- Lead Organization: SILC, CILs
- Partners: DARS, TACIL, Disability Policy Consortium
- Resources: Amount listed in SILC Resource Plan and “Other SPIL Activities” in Section 1.3A
- Funding Sources: Part B, Part C, Program funds, Unrestricted funds

1.2B Describe the steps planned regarding outreach to populations in the State that are unserved or underserved by programs under title VII, including minority groups and urban and rural populations. This section of the SPIL must:

- **Identify the populations to be designated for targeted outreach efforts;**
- **Identify the geographic areas (i.e., communities) in which the targeted populations reside; and**
- **Describe how the needs of individuals with significant disabilities from minority group backgrounds will be addressed.**

Feedback from a Comprehensive Needs Assessment conducted by the Rehabilitation Council of Texas with the assistance of the SILC along with comments from the public, individual CILs, TACIL, and SILC dialogue reflected the need to reach out to the populations listed below regarding IL services. A representative from the SILC serves on the Rehabilitation Council of Texas and is assigned to the Needs Assessment Committee.

Populations:

Disabilities:

- Intellectual disabilities, cognitive disorders
- Deaf and Hard of Hearing
- Autism
- Dual Diagnosis

- Traumatic Brain Injury
- Developmental Disabilities
- Mental illness

Groups:

- Individuals with guardians
- Adults residing with their parents or other family members
- Individuals residing in long-term residential care facilities
- Ex-offenders
- Homeless
- Individuals who do not meet DARS eligibility criteria
- Veterans

Ages:

- Students transitioning to IL services and incorporating into the community
- Older adults aging into disabilities

Geographic Areas of Targeted Populations:

- Rural areas, including Colonias
- Unserved areas (see section 3.2)

Needs of Minorities with Disabilities:

- Hispanic
- Asian
- Non-English speaking

Strategies to address the IL needs of individuals from above populations, minority groups, and geographic areas will include:

- Continuing to focus on transition services for youth, both through DARS and the CILs. This strategy is reflected in Objective 3.3 regarding youth with disabilities. Specifically, this objective includes providing outreach, IL resources, peer supports, and mentoring for this population to assist them in transition toward community integration, employment or higher education.
- Targeted outreach to blind and low vision and Deaf and hard of hearing populations, particularly in rural areas. This strategy is reflected in Objective 3.1 and 3.2, respectively. Objective 3.1 focuses on outreach to the blind and low vision population to ensure they receive IL training. Objective 3.2 includes targeted outreach strategies to reach out to the Deaf and hard of hearing populations regarding access and awareness of IL services.
- Analyzing and promoting the availability of services to individuals of diverse racial and ethnic groups. CILs actively participate and develop culturally appropriate

outreach and service delivery strategies to meet the needs of growing minority populations with disabilities.

- Increasing public awareness of Independent Living through outreach and education activities to both rural and urban areas.
- Expanding the network and capacity of the CILs. The strategy for helping address the need to expand the geographic scope of the network as well as the capacity of the network is reflected in Objectives 2.1, 2.2, 4.1, and 4.2. Specifically, Objective 2.1 encourages CIL partnership with ADRCs and AAAs to coordinate IL services in their communities. In addition, Objective 2.2 reflects the need for the coordination of additional grants and outside funding opportunities to expand consumer services and promote the value and services of CILs. To help strengthen and build capacity in the network of CILs, Objective 4.1 ensures the SILC can help make certain the network is unified in information gathering and reporting activities in order to better report the progress and success of the CILs. Objective 4.2 expands upon this information gathering effort and allows the SILC, DARS, and the network to increase and promote the value of CILs at the local, state, and federal levels by coordinating funding justifications for IL services and programs.

1.3 Financial Plan – 34 CFR 364.42(a)(2) and (3); 34 CFR 364.29

Describe in sections 1.3A and 1.3B, below, the financial plan for the use of Federal and non-Federal funds to meet the SPIL objectives.

1.3A Financial Plan Tables

Complete the financial plan tables covering years 1, 2 and 3 of this SPIL. The first column in each of the tables lists the potential SPIL funding sources. The four other columns represent the potential uses of funds. For each funding source, provide estimated dollar amounts anticipated for the applicable uses. To the extent possible, the tables and narratives must reflect the applicable financial information from centers for independent living. Refer to the SPIL Instructions for additional information about completing the financial tables and narratives.

Insert additional rows for the specific funding sources and amounts expected within the categories of Other Federal Funds and Non-Federal Funds.

Year 1

Sources	Approximate Funding Amounts and Uses			
	SILC Resource Plan	IL Services	General CIL Operations	Other SPIL Activities
Title VII Funds				
Chapter 1, Part B	\$395,083	\$1,092,957		
Chapter 1, Part C			\$5,609,746* \$5,250,722**	

Chapter 2, Individuals Who are Older Blind		\$1,551,616		
Other Federal Funds				
Sec. 101(a)(18) of the Act (Innovation and Expansion)				
Other		\$4,981,929	\$1,439,283	
Non-Federal Funds				
State Funds (GR)		\$1,616,625	\$1,250,000	
Other			\$4,161,537	

IL Services

Other Federal Funds SSA-VR Funds (approximated from previous experience)

General CIL Operations

Other Federal Funds SSA-VR Funds (approximated from previous experience)

Other Non-Federal Funds Relocation funds from DADS (approximated from previous experience)

*As reported by the CILs in the FY12 704 reports

**Includes the Budget Control Act of 2011 sequestration amount of 6.4%

Year 2

Sources	Approximate Funding Amounts and Uses			
	SILC Resource Plan	IL Services	General CIL Operations	Other SPIL Activities
Title VII Funds				
Chapter 1, Part B	\$395,083	\$1,092,957		
Chapter 1, Part C			\$5,609,746* \$5,250,722**	
Chapter 2, Individuals Who are Older Blind		\$1,551,616		

Other Federal Funds				
Sec. 101(a)(18) of the Act (Innovation and Expansion)				
Other		\$4,981,929	\$1,439,283	
Non-Federal Funds				
State Funds (GR)		\$1,616,625	\$1,250,000	
Other			\$4,161,537	

IL Services

Other Federal Funds SSA-VR Funds (approximated from previous experience)

General CIL Operations

Other Federal Funds SSA-VR Funds (approximated from previous experience)

Other Non-Federal Funds Relocation funds from DADS (approximated from previous experience)

*As reported by the CILs in the FY12 704 reports

**Includes the Budget Control Act of 2011 sequestration amount of 6.4%

Year 3

Sources	Approximate Funding Amounts and Uses			
	SILC Resource Plan	IL Services	General CIL Operations	Other SPIL Activities
Title VII Funds				
Chapter 1, Part B	\$395,083	\$1,092,957		
Chapter 1, Part C			\$5,609,746* \$5,250,722**	
Chapter 2, Individuals Who are Older Blind		\$1,551,616		
Other Federal Funds				
Sec. 101(a)(18) of the Act (Innovation and Expansion)				

Other		\$4,981,929	\$1,439,283	
Non-Federal Funds				
State Funds (GR)		\$1,616,625	\$1,250,000	
Other			\$4,161,537	

IL Services

Other Federal Funds SSA-VR Funds (approximated from previous experience)

General CIL Operations

Other Federal Funds SSA-VR Funds (approximated from previous experience)

Other Non-Federal Funds Relocation funds from DADS (approximated from previous experience)

*As reported by the CILs in the FY12 704 reports

**Includes the Budget Control Act of 2011 sequestration amount of 6.4%

1.3B Financial Plan Narratives

1.3B(1) Specify how the Part B, Part C and Chapter 2 (Older Blind) funds, if applicable, will further the SPIL objectives.

Part B, Part C, and Chapter 2 Funds Furthering SPIL Objectives:

These funds support the framework through which SPIL objectives are realized. The SPIL describes the IL service network in Texas and anticipated results. Specific SPIL objectives are delineated for DARS (DRS and DBS), CILs and the SILC I. Details about funding and objectives are noted in Section 1.2(A) of the SPIL.

SILC Resource Plan: Specifically, the SILC is the lead organization for Objectives 4.1 and 4.2, in which the resources to fulfill these objectives are designated in the SILC Resource plan in Financial Plan table.

Objective 4.1 is centered on reporting consumer-related activities to the SILC and DARS so that they may track SPIL progress and advocate at the local, state, and national level for the CIL network. Specifically, the SILC, DARS, and the network of CILs will create unified descriptions of services to ensure consistency of reporting throughout the network. In addition, the SILC will work with the network of CILs to use new and/or existing reporting systems within each CIL to ensure consumer activities and SPIL activities data is reported regularly. This will help ensure the SILC has accurate and consistent information to track, monitor, and report SPIL activities in a timely manner.

Objective 4.2 will work off of the improved information gathering activities in Objective

4.1. The SILC will work with DARS and the network of Centers to create mutually agreed upon return on investment or funding justification data for IL services and programs. The SILC will research and create calculations, justifications, scenarios, and methods to measure outcomes in the IL network. As part of this effort, the SILC will create an education campaign and outreach plan for policymakers and key stakeholders to ensure outcomes measures are appropriately communicated.

Funding for Services to Individuals Who Are Blind:

The Division of Blind Services, a division of DARS, provides services to those that are blind or have low vision. The figures listed in the Financial Plan Tables (Section. 1.3A) for IL Services includes the funding figures for both DRS and DBS combined. The funding breakdown between DRS and DBS for IL Services is as follows:

- Title VII, Chapter 1, Part B Funds—\$254,832 DBS; \$838,125 DRS: Total \$1,092,957
- Title VII, Chapter 2, Individuals Who are Older Blind—\$1,551,616 DBS
- SSA-VR— \$3,985,637 DRS; \$996,292 DBS: Total \$4,981,929
- State GR—\$1,416,625 DRS; \$200,000 DBS: Total: \$1,616,625

1.3B(2) Describe efforts to coordinate Federal and State funding for CILs and IL services, including the amounts, sources and purposes of the funding to be coordinated.

Budget resources for the SPIL cycle are delineated in 1.3A. These funds are coordinated in the execution of SPIL activities. Federal and state funds are used to maximize the availability of IL services in Texas. For example, DADS anticipates providing approximately \$4,161,537 in state funding each year for relocation contracts held by the CILs and other entities (funding is dependent on appropriations of funds from the legislature). In addition, each year DARS uses reimbursements from SSA-VR to fund CIL operations (\$1,439,283) and to fund IL services (\$4,981,929), which helps sustain funding.

1.3B(3) Describe any in-kind resources including plant, equipment or services to be provided in support of the SILC resource plan, IL services, general CIL operations and/or other SPIL objectives.

In-kind contributions support the framework of IL services in Texas. The DSU provides operational support as needed for SILC, CIL, and SPIL related activities—e.g. multi-media assistance, reproduction of materials in alternate formats, space for meetings, and technical support particularly regarding administrative issues. Contingent on available funds, the SILC provides stipends for CIL Consumers and Board members to attend the annual statewide conference and sponsors a yearly training for CIL personnel. CILs provide support by circulating outreach materials and needs assessments developed by the SILC and by cosponsoring the annual conference. A spirit of collaboration is encouraged to maximize use of resources.

1.3B(4) Provide any additional information about the financial plan, as appropriate.

The primary funding for operation of the SILC originates with the Rehabilitation Services Administration, which grants Title VII, Part B funds to DARS, which, in turn, allocates a portion of these funds to the Council. The State Independent Living Council also pursues funding from other sources, both public and private, for additional activities to accomplish its mission, further SPIL objectives, and address IL needs identified throughout the state. The SILC also locates resources for the network of CILs to allow them to pursue capacity building activities. These activities do not impair or interfere with the SILC's ability to perform its statutory duties. The SILC has established and maintains fiscal and fund accounting controls ensuring proper separation between federal and non-federal funds. The following describes the SILC's funding sources and activities outside of its statutory authority:

Health and Fitness Project:

Getting Fit to Live, Work, and Play! develops health and fitness programs for people with disabilities in the Brazos Valley and West Texas areas by providing them with the ability to gain access to health and wellness programs and physical fitness education. The programs are funded by the Texas Council for Developmental Disabilities (TCDD) and housed and operated by SILC partners, the Brazos Valley Center for Independent Living and LIFE/RUN Center for Independent Living. These partnerships ensure that services are designed, directed, and delivered by qualified individuals with disabilities themselves.

Texas Statewide Independent Living Conference:

The SILC implements an annual, innovative, statewide, cross-disability, multi-agency Conference to promote advocacy and awareness about the Independent Living philosophy. The Texas Statewide Independent Living Conference is an important opportunity for people in the disability community to come together and learn more about the services that people with disabilities use to maintain independent lives. Conference planning and activities are funded by DARS. TCDD, through the Leadership, Development, and Advocacy Skills Training grant, provides stipends for consumers to attend the Conference as well as funding to support a Project Advisory Committee.

Transportation Works Project:

Transportation Works is a pilot project funded by the Texas Department of Transportation and is in partnership with the ABLE Center for Independent Living. The project focuses on improving transportation options for people with disabilities living in rural counties near Midland and Odessa. The Transportation Works pilot program will develop a comprehensive online consumer resource guide used by people with disabilities, CILs, local businesses, and regional non-profits to highlight local economic and transportation services available to the disability community. In addition, the project will initiate and implement alternative forms of transportation for individuals with disabilities with employment-related transportation needs.

Transportation Works—Assess and Deliver Project:

Transportation Works: Assess & Deliver, which is funded by the Texas Department of Transportation, expands the scope of the original Transportation Works project to include all rural and small urban areas of Texas. Specifically, the Texas SILC will adhere to the Independent Living philosophy by identifying service, infrastructure, and other barriers to the use of existing public transportation in rural and small urban areas by individuals with disabilities. Understanding barriers to the use of accessible public transportation in rural areas will help in addressing the overall employment gap that hinders independence. In addition, the project will educate and provide technical training to CIL leadership and regional transportation providers seeking to implement additional transportation programs or service to improve employment opportunities.

1.4 Compatibility with Title VII and the CIL Work plans – 34 CFR 364.42(c) and (e)

1.4A Describe how the SPIL objectives are consistent with and further the purpose of Chapter 1 of Title VII of the Act as stated in section 701 of the Act and 34 CFR 364.2.

SPIL objectives noted in 1.2A are the means by which the above stated criteria will be satisfied. In summary, the objectives will:

Goal I: Texans with disabilities establish and maintain an integrated, independent lifestyle.

- Maximizing the integration and full inclusion of individuals with significant disabilities into the mainstream of society.
- Promoting a philosophy of Independent Living.

Goal II: IL Services network builds capacity and sustains expansions.

- Providing assistance to develop and support a Statewide network of CILs.
- Advocating for improved working relationships among the various entities providing services to and for people with significant disabilities.

Goal III: Persons underserved and underrepresented in the IL network have an increased presence within the network.

- Promote a philosophy of Independent Living to maximize the leadership, empowerment, independence, and productivity of individuals with significant disabilities.
- Maximizing the integration and full inclusion of individuals with significant disabilities into the mainstream of American society.

Goal IV: The network coordinates on advocacy, training, and educational opportunities to promote systems change.

- Providing assistance to develop and support a statewide network of CILs.
- Advocating for improved working relationships among the various entities providing services to and for people with significant disabilities.
- Promoting a philosophy of Independent Living to maximize the leadership, empowerment, independence, and productivity of individuals with significant disabilities.

1.4B Describe how, in developing the SPIL objectives, the DSU and the SILC considered and incorporated, where appropriate, the priorities and objectives established by Centers for Independent Living under section 725(c)(4) of the Act.

Focus has been on identifying critical areas affecting the lives of Texans with disabilities within the scope of the IL legislation. The resulting document is a representative picture of a commonly-shared vision regarding IL services in the state.

The SPIL goals and objectives were developed based on extensive dialogue through SILC meetings, public hearings, and input from attendees at the 2013 Statewide IL Conference. In preparation for development of the SPIL, the SILC held four public hearings to solicit input from local residents with disabilities and other interested parties. These hearings were conducted in Wichita Falls, Big Spring, Liberty, and Corpus Christi. Other opportunities for input included workgroup sessions held in Dallas and El Paso, public comment invited at all regularly scheduled meetings of the Council, and sessions related to the SPIL as part of the SILC annual Conference.

Special meetings, conference calls, and public hearings were held specifically to discuss the goals, objectives, and specific actions to be accomplished through the SPIL by all partners. CIL Directors and staff, DARS, SILC members, and other stakeholders reviewed and made recommendations regarding the SPIL. The CIL network has a representative on the SILC who brings concerns and priorities of the CILs to the attention of the Council. Drafts were made available and input was also solicited from all CILs and more than 50 percent of CILs participated in these discussions.

1.5 Cooperation, Coordination, and Working Relationships Among Various Entities – 34 CFR 364.26

Describe the steps that will be taken to maximize the cooperation, coordination and working relationships among:

- a) The SILS program, the SILC, and centers; and**
- b) The DSU, other State agencies represented on the SILC, other Councils that address the needs of specific disability populations and issues, and other public and private entities determined to be appropriate by the SILC.**

The description must identify the entities with which the DSU and the SILC will cooperate and coordinate.

A strong, collaborative framework is already in place to promote unity and singleness of purpose among the SILC, the DSUs, and the CILs. The SILC composition includes the representative appointed by TACIL, as well as Ex-Officio members from DARS. Activities related to Council meetings, interim workgroups, and shared priorities provide understanding of respective programs, collective support, and promotion of IL services statewide. The SILC makes every effort to include all CILs in Texas in SPIL activities.

State agencies represented on the SILC as Ex-Officio members include the Division for

Blind Services and Division for Rehabilitation Services through the Department of Assistive and Rehabilitative Services and the Department of Aging and Disability Services. A SILC representative is a liaison to the Rehabilitation Council of Texas. The SILC Director also participates in the Texas Disability Policy Consortium.

Activities defined for SPIL objectives cite a number of entities with whom coordination will be important to achieve objectives — the Aging and Disability Resource Centers, the Texas Division of Aging and Disability Services, the Federal Transit Administration, the Texas Department of Housing and Community Affairs, the Texas Department of Transportation, the Texas Workforce Commission, the Texas Education Agency, the Texas Association of Centers for Independent Living, the Regional Transportation Service Planning committees, the Area Agency on Aging network, Easter Seals, the Texas Workforce Commission, and the Department of State Health Services.

1.6 Coordination of Services – 34 CFR 364.27

Describe how IL services funded under Chapter 1 of Title VII of the Act will be coordinated with and complement other services to avoid unnecessary duplication with other Federal, State, and local programs, including the OIB program authorized by Chapter 2 of Title VII of the Act, that provide IL- or VR-related services.

All service components described in the state plan relate to the overall goal of full inclusion in community life for Texans with disabilities. Information about offerings from each component of the IL service network is promoted so that staff can make appropriate and timely referrals. The IL services funded under Chapter 1 of Title VII of the Rehabilitation Act are coordinated at the federal, state, and local level to ensure each program is complemented, rather than duplicated. The following is a brief description of how specific services are coordinated, followed by an overview of the core agencies that coordinate these services for individuals with disabilities.

Centers for Independent Living:

Centers for Independent Living are community organizations that, under Title VII of the Rehabilitation Act, serve cross-disability populations. CILs provide four core services (information and referral, individual and system advocacy, peer support, and Independent Living skills training and enhancement.) Each CIL's local community needs define its service priorities. Examples of community services CILs provide are: assistance with accessing benefit programs, managing housing voucher programs, coordinating transportation services, providing clothing closets, and obtaining utility assistance.

In addition, some CILs coordinate relocation of individuals from nursing facilities to the community. DADS provides contracts to CILs to coordinate the assistance necessary for individuals with severe disabilities to transition into the community. This has been a major service to people with disabilities and has saved the state money each year. These individuals require services from CIL staff in order to be successful in transitioning. According to DADS, with DADS' funding for relocation and the core services of the IL staff, individuals have a lower failure rate than individuals receiving relocation services from providers who do not use the IL philosophy.

Division of Rehabilitative Services:

DRS Independent Living services target individuals with significant physical, mental, or cognitive disabilities who have difficulty functioning in their homes, with their families, or in their communities because of the severity of their disabilities. Twelve DRS ILS counselors help ILS consumers obtain needed rehabilitation technology, assistive devices, and equipment and other services.

Partnerships between Texas CILs and DRS ILS counselors maximize use of funds and resources to serve Texans needing Independent Living services. Examples include:

- Counselors referring applicants to CILs for information and referral, advocacy, peer counseling, Independent Living skills training, and other needed services available from the CILs.
- CILs referring applicants to counselors for rehabilitation technology, assistive devices and equipment and other needed services available through DRS that are not available through the CILs.
- Cases where services available from both DRS ILS counselors and CILs are needed to enable Consumers to become or remain independent.

The DRS enters into appropriate cooperative arrangements with, and utilizes the services and facilities of, various federal, state, and local agencies and programs. DRS coordinates with other agencies and programs to ensure people with disabilities receive appropriate services. These agencies and programs include:

- The Texas Health and Human Services Commission, for the purpose of creating administrative efficiencies and better services to consumers of health and human services statewide. Initiatives include co-location of offices across the HHS enterprise for improved access by consumers and to reduce administrative costs;
- The Texas Education Agency and Education Service Centers, for the purpose of coordinating services to transition age students with disabilities;
- The Texas Department of Insurance's Division of Workers' Compensation, for the purpose of enhanced referrals for return-to-work efforts;
- The Social Security Administration, for the purpose of collaboration on employment incentives and supports and the maximization of SSA/VR reimbursement activity through the Ticket to Work;
- The Department of Veterans Affairs, to save case service funds through better access to comparable benefits. A Memorandum of Agreement provides for concurrent employment plans to enhance case management, while avoiding duplication of services;
- The Texas Workforce Commission, for the purpose of facilitating for Texas businesses the electronic verification that job applicants for the Work Opportunities Tax Credit program are receiving or have received vocational rehabilitation services under an individualized plan for employment;
- The Texas Department of Aging and Disability Services and the Department of Social and Health Services, for the purpose of reducing duplication and

fragmentation of employment services provided to the shared client population of DARS and DADS;

- Other federal, state, and local public agencies for providing services related to the rehabilitation of persons with disabilities. For example, to provide services to eligible consumers, DRS participates in Community Resource Coordination Groups (known as CRCGs), which are local interagency groups comprised of public and private providers who come together to develop individual service plans for children, youth, and adults whose needs can be met only through interagency coordination and cooperation;
- Other private and public, for-profit and not-for-profit entities, corporations, partnerships, and sole proprietorships, for the purpose of providing a number of rehabilitation services purchased only from entities that have been approved as Community Rehabilitation Programs. Contracts with these providers reference the DRS Standards for Providers and specify the terms and conditions of the relationship, including approved services, expected outcomes, fees, staff qualifications, and required documentation.

Division of Blind Services:

DBS IL services target individuals who are blind and have unique challenges in addressing the impact of vision loss. Program services focus extensively on understanding and experiencing the possibilities of living without fear and/or dependence on others for daily activities. The primary approach is based on the Consumer handling their own daily living activities, rather than someone doing the task for them, and thus, service methodologies are designed to reduce or diminish the need for long-term care. Examples include: learning to travel using a cane, preparing one's meals, identifying medications, using Braille to record and read information, managing one's financial records, and participating in recreation and other community events. As needed, individuals are referred to other community resources. Individuals who, through becoming more independent, realize their potential for returning to work are referred for VR services. DBS staff offers a "train the trainer" service to institutional settings to promote independence. Services are available statewide.

Department of Aging and Disability Services:

DADS provides a wide array of personal and long-term care services so that individuals with disabilities will be able to live in the community or the least restrictive setting with availability of needed supports. Services for Older Adults and for Persons with Disabilities are provided primarily through Medicaid and Medicare or related waiver programs. Medicaid recipients may be eligible for over two dozen community care programs with varying eligibility criteria and availability. Service examples are: adaptive aids, attendant services, meals, medication assistance, medical supplies, nursing services, and therapy.

DADS provides an array of services to persons over 60 through the network of local Area Agencies on Aging (benefits counseling, help for caregivers, health information counseling, state ombudsman related to nursing homes). In addition, the Aging and Disability Resource Centers (ADRCs), which are funded through DADS, provide local

services complementary to those available via CILs and DARS. Through collaboration at the Central office level, meetings have delineated specific plans for cross training of respective staff in DARS, DADS, and the network of ADRCs and AAAs.

The Promoting Independence Initiative focuses on relocation from institutions to community. This has been and continues to be a major initiative. The Manager of the Promoting Independence Initiative administered by DADS is an Ex-Officio member of the SILC and in this capacity is the conduit for information between the two entities.

Texas Department of Housing and Community Affairs:

TDHCA is leading an effort to coordinate with CILs and other community stakeholders to facilitate additional housing opportunities for individuals with disabilities by effectively utilizing existing federal, state, and local housing resources.

Texas Department of Transportation:

TxDOT works closely with local lead transportation agencies to coordinate projects that impact and improve transportation options for individuals with disabilities. In addition, they work closely with the SILC and several CILs to facilitate specific programs and projects and further local efforts to facilitate options for their communities.

1.7 Independent Living Services for Individuals who are Older Blind – 34 CFR 364.28

Describe how the DSU seeks to incorporate into and describe in the State plan any new methods or approaches for the provision of IL services to older individuals who are blind that are developed under the Older Individuals who are Blind program and that the DSU determines to be effective.

This plan includes specific goals and objectives related to older individuals who are blind:

Goal #3—Persons underserved and underrepresented in the IL network have an increased presence within the Network.

Objective 3.1: Older Texans who are blind or have low vision receive IL training.

- Measurable Indicators: 1) 5 additional training contracts executed. 2) 225 consumers receive IL contract services.
- Scope: Statewide
- Target Performance Levels for 2016: 1) 5 training contracts executed. 2) 225 consumers receive IL contract services.
- Target Progress FY2014-FY2016: FY14—1 training contract executed, 50 consumers receive IL contract services; FY15—2 training contracts executed, 125 consumers receive IL contract services; FY16—5 training contracts executed, 225 consumers receive IL contract services.
- Activities: 1) Recruiting the necessary contractors to conduct IL training for individuals who are blind or have low vision. 2) Executing contracts with qualified

vendors to perform IL contract services. 3) Conducting outreach to CILs, ADRCs, AAAs, and other stakeholders to identify consumers to receive training.

- Lead Organization: DBS
- Partners: DARS, CILs, DADS, ADRCs, AAAs
- Resources: \$250,000 per year
- Funding Sources: SSA-VR

With limited resources in relation to its target population, DBS has focused on the introduction and assimilation of various service delivery strategies to enhance IL services. Among the more successful strategies currently employed by DBS are:

- Use of the Independent Living Resource Guide as a critical information and referral opportunity early in the rehabilitation process to promote self-advocacy.
- Expansion of group skills training opportunities to promote confidence building, experiential training in daily living skills related to vision loss, and peer support.
- Concentration on networking to increase awareness of and maximize appropriate referrals from and to DBS and other community programs that can benefit older Texans who are blind.
- Expansion of a vendor network for contracted services related to Independent Living skills training, so that more blind Texans have access to services in a timely manner across the state.

In addition, focus will continue to be directed during this SPIL cycle to strengthening the opportunities for employment for individuals interested in returning to the workforce. Many individuals in our society today opt to continue employment past the age when they are eligible for retirement. It has been DBS' experience that some individuals, after participating in various training opportunities, come to realize that their vision loss does not need to be a deterrent to returning to work and decide to request vocational rehabilitation services.

Section 2: Scope, Extent, and Arrangements of Services

2.1 Scope and Extent – 34 CFR 364.42(b)(2)(3); 34 CFR 364.43(b); 34 CFR 364.59(b)

2.1A Check the appropriate boxes in the SPIL Instrument table indicating the types of IL services to be provided to meet the objectives identified in section 1.2 of this SPIL, and whether the services will be provided by the CILs or by the DSU (directly and/or through contract or grant).

Table 2.1A(1): Independent Living services	Provided by the DSU (directly)	Provided by the DSU (through contract and/or grant)	Provided by the CILs (Not through DSU contracts/ grants)
Core Independent Living Services, as follows:			
- Information and referral	X	X	X
- IL skills training	X	X	X
- Peer counseling	X	X	X
- Individual and systems advocacy	X	X	X
Counseling services, including psychological, psychotherapeutic, and related services	X	X	X
Services related to securing housing or shelter, including services related to community group living, and supportive of the purposes of this Act and of the titles of this Act, and adaptive housing services (including appropriate accommodations to and modifications of any space used to serve, or occupied by, individuals with significant disabilities)	X	X	X
Rehabilitation technology	X	X	X
Mobility training	X	X	X
Services and training for individuals with cognitive and sensory disabilities, including life skills training, and interpreter and reader services	X	X	X
Personal assistance services, including attendant care, and the training of personnel providing such services		X	X
Surveys, directories and other activities to identify appropriate housing, recreation, accessible transportation and other support services	X	X	X
Consumer information programs on rehabilitation and IL services available under this Act, especially for minorities and other individuals with disabilities who have traditionally been unserved or underserved by programs under this Act	X	X	X
Education and training necessary for living in the community and participating in community activities	X	X	X
Supported living			
Transportation, including referral and assistance for such transportation	X	X	X
Physical rehabilitation		X	
Therapeutic treatment		X	

Table 2.1A(1): Independent Living services	Provided by the DSU (directly)	Provided by the DSU (through contract and/or grant)	Provided by the CILs (Not through DSU contracts/grants)
Provision of needed prostheses and other appliances and devices		X	
Individual and group social and recreational services		X	X
Training to develop skills specifically designed for youths who are individuals with significant disabilities to promote self-awareness and esteem, develop advocacy and self-empowerment skills, and explore career options	X	X	X
Services for children with significant disabilities	X	X	X
Services under other Federal, State, or local programs designed to provide resources, training, counseling, or other assistance of substantial benefit in enhancing the independence, productivity, and quality of life of individuals with significant disabilities	X	X	X
Appropriate preventive services to decrease the need of individuals with significant disabilities for similar services in the future	X	X	X
Community awareness programs to enhance the understanding and integration into society of individuals with disabilities	X	X	X
Other necessary services not inconsistent with the Act	X	X	X

2.1B Describe any service provision priorities, including types of services or populations, established for meeting the SPIL objectives identified in section 1.2.

DARS, the SILC, and the network of CILs have further identified an array of services that will be necessary to address the needs of those unserved and underserved populations referenced in section 1.2. Such services are listed below and, when applicable, include strategies to achieve these service priorities. The SILC will continue to explore methods for expanding access to these and other services in Texas through Objective 2.2.

- Peer support and information and referral resources to individuals who are Deaf and hard of hearing to enable them to locate needed IL services (Objective 3.2, Objective 1.4)
- Employment counselors assisting IL Consumers to obtain suitable employment

(Objectives 1.3, 3.3)

- Independent Living Skills Training (Objectives 1.3, 1.2, 1.4, 3.1, 3.2, 3.3)
- Availability and awareness of accessible housing (Objective 1.1)
- Managed care services (Objective 2.1)
- Transition services and advocacy training for youth (Objective 3.3)
- Comprehensive service coordination to facilitate deinstitutionalization (Objectives 1.1, 2.1)
- Accessible public transportation, especially in rural areas (Objective 1.2)

2.1C If the State allows service providers to charge Consumers for the cost of services or to consider the ability of individual Consumers to pay for the cost of IL services, specify the types of IL services for which costs may be charged and for which a financial need test may be applied, and describe how the State will ensure that:

- a) **Any consideration of financial need is applied uniformly so that all individuals who are eligible for IL services are treated equally; and**
- b) **Written policies and Consumer documentation required by 34 CFR 364.59(d) will be kept by the service provider.**

Indicate N/A if not applicable.

DRS and DBS have protocols regarding Consumer participation in the cost of services. More specific information can be found in the DRS Rehabilitation Policy Manual (<http://www.dars.state.tx.us/drs/rpm/default.htm>) and the DBS Rehabilitation Policy Manual (<http://www.dars.state.tx.us/dbs/vr/default.htm>).

To enable DRS to use its limited funds to serve the maximum number of eligible Consumers, all Consumers and their families are asked to participate in the cost of services, regardless of the Consumer's financial resources.

Consumers whose net income or liquid assets exceed established basic living requirements (BLR) are required to participate in the cost of services, unless participation would keep the Consumer from receiving a necessary service.

DRS Consumers are not required to participate in the cost of:

- Services paid or reimbursed by a source other than DRS;
- Assessments for determining eligibility and determining Independent Living needs, including any associated maintenance and transportation;
- Counseling, guidance, and referral provided by DRS staff;
- Personal assistant services;
- Auxiliary aids (except hearing aids) or services, e.g.,
 - Interpreter services,
 - Reader services, and
 - Translator services.

All Consumers of the Division for Blind Services, and their families, are asked to participate in the cost of services, regardless of the Consumer's financial resources, in order to maximize use of limited program funds. Consumer participation in the cost of services is based on the economic resources of all persons in the individual's family who have a legal obligation of support for the applicant/Consumer, compared to 200% of US Department of Health and Human Services Poverty Guidelines. Program manuals delineate service categories where participation is required when individuals exceed the maximum allowable amounts, as well as those categories of goods and services not subject to Consumer participation.

DBS Consumers exceeding the maximum allowable amounts are required to participate in cost of the following services:

- Prosthetic devices,
- Maintenance (excludes maintenance for diagnostic services),
- Transportation (excludes transportation for diagnostic services),
- Adaptive aids/appliances over \$50, and
- Teacher supplies over \$100.

Texas CILs do not ask Consumers to participate in cost of services.

2.2 Arrangements for State-Provided Services – 34 CFR 364.43(d) and (e)

2.2A If the DSU will provide any of these IL services through grants or contractual arrangements with third parties, describe such arrangements.

DARS Standards for Providers (<http://www.dars.state.tx.us/drs/ProviderManual/default.htm>) outlines the details, rules and guidance for specified DRS providers who provide services under contracts.

DBS IL Services utilizes contracts for certain services provided to consumers. The *Standards Manual for Consumer Services Contract Providers* provides information regarding provider contracts, the scope of services, rules, reimbursement rates, as well as documentation and billing requirements.

(http://www.dars.state.tx.us/dbs/standards/sm_dbs/default.htm)

2.2B If the State contracts with or awards a grant to a Center for the general operation of the Center, describe how the State will ensure that the determination of an individual's eligibility for services from that Center shall be delegated to the Center.

DARS includes, in the DARS Standards for Providers, direction for CILs that a Center staff person will document determination of eligibility. Routine on-site monitoring visits by DARS helps ensure CIL compliance with this requirement.

Section 3: Design for the Statewide Network of Centers

3.1 Existing Network – 34 CFR 364.25

3.1A Provide an overview of the existing network of Centers, including non-Part C-funded Centers that comply with the standards and assurances in section 725 (b) and (c) of the Act, and the geographic areas and populations currently served by the Centers.

ABLE Center for Independent Living (ABLE)

1931 East 37th, Ste. 1, Odessa, TX 79762

Counties Served with Disability Population:

Andrews, 2,571

Crane, 762

Ector, 20,163

Martin, 869

Midland, 20,295

Upton, 609

Ward, 1,831

Total: 47,100

Disability Populations Served: Cognitive, Mental, Physical, Hearing, Vision, Multiple, Other

Race Categories Served: American Indian, Asian, Black, Hawaiian, White, Hispanic

Funding Sources: Title VII, Part C; Other federal sources

Geographic Type: Rural/Urban Mix

Austin Resource Center for Independent Living, Austin (ARCIL-Austin)

825 East Rundberg Lane, Suite E6, Austin, TX 78753

Counties Served with Disability Population:

Bastrop, 11,161

Lee, 2,465

Travis, 90,894

Total: 104,520

Disability Populations Served: Cognitive, Mental, Physical, Vision, Multiple, Other

Race Categories Served: Asian, Black, White, Hispanic

Funding Sources: Title VII, Part C, Other federal sources, fees for service

Counties served and funding source(s) for areas outside Title VII, Part C agreement:

Anderson, Bowie, Camp, Cass, Cherokee, Delta, Franklin, Gregg, Harrison, Henderson, Hopkins, Lamar, Marion, Morris, Panola, Rains, Red River, Rusk, Smith, Titus, Upshur, Van Zandt, Wood, Angelina, Hardin, Houston, Jasper, Jefferson, Nacogdoches, Newton, Orange, Polk, Sabine, San Augustine, San Jacinto, Shelby, Trinity, Tyler, Bosque, Brazos, Burleson, Coryell, Falls, Fayette, Freestone, Grimes, Hamilton, Hill, Lampasas, Lee, Leon, Limestone, Madison, McLennan, Mills, Robertson, San Saba, and Washington

Funding; DADS Relocation Contract

Geographic Type: Rural/Urban Mix

Austin Resource Center for Independent Living, Round Rock (ARCIL-Round Rock)

525 Round Rock West, Suite A120, Round Rock, TX 78681

Counties Served with Disability Population:

Bell* 40,133
Burnet, 7,387
Milam, 3,641
Williamson, 42,946
Total: 94,107

Disability Populations Served: Cognitive, Mental, Physical, Hearing, Vision, Multiple, Other

Race Categories Served: Asian, Black, White, Hispanic, Two or more races

Funding Sources: Title VII, Part C, Other federal sources

Counties served and funding source(s) for areas outside Title VII, Part C agreement:

Anderson, Bowie, Camp, Cass, Cherokee, Delta, Franklin, Gregg, Harrison, Henderson, Hopkins, Lamar, Marion, Morris, Panola, Rains, Red River, Rusk, Smith, Titus, Upshur, Van Zandt, Wood, Angelina, Hardin, Houston, Jasper, Jefferson, Nacogdoches, Newton, Orange, Polk, Sabine, San Augustine, San Jacinto, Shelby, Trinity, Tyler, Bosque, Brazos, Burleson, Coryell, Falls, Fayette, Freestone, Grimes, Hamilton, Hill, Lampasas, Lee, Leon, Limestone, Madison, McLennan, Mills, Robertson, San Saba, and Washington

Funding; DADS Relocation Contract

Geographic Type: Rural/Urban Mix

**Austin Resource Center for Independent Living, San Marcos (ARCIL-San Marcos)
618 South Guadalupe, Suite 103, San Marcos, TX 78666**

Counties Served with Disability Population:

Blanco, 1,820
Caldwell, 5,703
Comal*, 14,994
Hays, 16,664
Total: 39,181

Disability Populations Served: Cognitive, Mental, Physical, Hearing, Vision, Multiple

Race Categories Served: American Indian, Black, White, Hispanic

Funding Sources: Title VII, Part C, Other Federal Funds

Counties served and funding source(s) for areas outside Title VII, Part C agreement:

Anderson, Bowie, Camp, Cass, Cherokee, Delta, Franklin, Gregg, Harrison, Henderson, Hopkins, Lamar, Marion, Morris, Panola, Rains, Red River, Rusk, Smith, Titus, Upshur, Van Zandt, Wood, Angelina, Hardin, Houston, Jasper, Jefferson, Nacogdoches, Newton, Orange, Polk, Sabine, San Augustine, San Jacinto, Shelby, Trinity, Tyler, Bosque, Brazos, Burleson, Coryell, Falls, Fayette, Freestone, Grimes, Hamilton, Hill, Lampasas, Lee, Leon, Limestone, Madison, McLennan, Mills, Robertson, San Saba, and Washington

Funding; DADS Relocation Contract

Geographic Type: Rural/Urban Mix

**Brazos Valley Center for Independent Living (BVCIL)
1869 Briarcrest Drive, Bryan, TX 77802**

Counties Served With Disability Population:

Brazos, 19,808
Burleson, 3,102
Madison, 2,465
Robertson, 3,013
Washington, 6,065
Total: 34,453

Disability Populations Served: Cognitive, Mental, Physical, Hearing, Vision, Multiple, Other

Race Categories Served: Asian, Black, White, Hispanic, Unknown

Funding Sources: Other federal funds

Geographic Type: Rural/Urban Mix

Coastal Bend Center for Independent Living (CBCIL)

1537 Seventh Street, Corpus Christi, TX 78404

Counties Served With Disability Population:

Aransas, 5,102
Bee, 6,959
Brooks, 1,360
Duval*, 2,584
Jim Wells, 8,953
Kenedy, 79
Kleberg, 6,062
Live Oak, 2,519
McMullen, 155
Nueces, 62,668
Refugio, 1,611
San Patricio, 12,145
Total, 110,197

Disability Populations Served: Cognitive, Mental, Physical, Hearing, Vision, Multiple, Other

Race Categories Served: American Indian, Asian, Black, Hawaiian, White, Hispanic, Unknown

Funding Sources: State, Title VII, Part C, Other federal funds, Foundations, Private

Counties served and funding source(s) for areas outside Title VII, Part C agreement:

Aransas, Bee, Brooks, Duval*, Jim Wells, Kenedy, Kleberg, Live Oak, McMullen, Refugio, San Patricio, Calhoun, DeWitt, Goliad, Gonzales, Lavaca, Karnes, Victoria, Cameron, Hidalgo, Jim Hogg, Starr, Web, Willacy, and Zapata.

Funding sources: Title VII, Part C, City of Corpus Christi, DADS (Relocation, ADRC, and CLASS Medicaid Waiver Program), Texas Department of Housing & Community Affairs, Texas Department of Transportation, and Superior and United Healthcare, Managed Care Organizations in STAR+PLUS.

Geographic Type: Rural/Urban Mix

Coalition for Barrier Free Living/Houston Center for Independent Living (CBFL/HCIL)

6201 Bonhomme Road, Suite 150 South, Houston, TX 77036

Counties Served With Disability Population:

Harris, 378,254

Disability Populations Served: Cognitive, Mental, Physical, Hearing, Vision, Multiple, Other

Race Categories Served: American Indian, Asian, Black, White, Hispanic

Funding Sources: Title VII, Part C, Other federal funds, Private, Program Income

Counties served and funding source(s) for areas outside Title VII, Part C agreement:

Harris, Austin, Brazoria Chambers, Colorado, Fort Bend, Galveston, Liberty, Matagorda, Montgomery, Walker, Waller, and Wharton.

Funding Source: DADS relocation

Geographic Type: Urban

Coalition for Barrier Free Living/ Fort Bend Center for Independent Living (CBFL/FBCIL)

12946 Dairy Ashford Road, Suite 110, Sugarland, TX 77478

Counties Served With Disability Population:

Austin, 5,189

Colorado, 3,581

Fort Bend, 41,934

Waller, 4,975

Wharton, 7,060

Total: 62,739

Disability Populations Served: Cognitive, Mental, Physical, Hearing, Vision, Multiple, Other

Race Categories Served: American Indian, Asian, Black, White, Hispanic, Unknown

Funding Sources: Title VII, Part C, other federal funds, fees for service, other resources

Geographic Type: Rural/Urban Mix

Coalition for Barrier Free Living/Brazoria County Center for Independent Living (CBFL/BCCIL)

1104 D East Mulberry, Angleton, TX 77515

Counties Served With Disability Population:

Brazoria, 40,512

Matagorda, 6,290

Total: 46,802

Disability Populations Served: Cognitive, Mental, Physical, Hearing, Vision, Multiple

Race Categories Served: American Indian, Asian, Black, White, Hispanic, Unknown

Funding Sources: Title VII, Part C, other federal funds, fees for service, other resources

Geographic Type: Rural/Urban Mix

Crockett Resource Center for Independent Living (CRCIL)

1020 East Loop 304, Crockett, TX 75835

Counties Served With Disability Population:

Freestone, 3,792

Houston, 4,419

Leon, 3,035
Panola*, 4,322
Polk, 8,528
Rusk*, 9,764
Sabine, 2,267
San Augustine, 1,847
Shelby, 5,323
Trinity, 2,741
Tyler, 4,529
Total: 50,567

Disability Populations Served: Cognitive, Mental, Physical, Hearing, Vision

Race Categories Served: American Indian, Black, White, Hispanic

Funding Sources: Title VII, Part C, Other federal funds

Counties served and funding source(s) for areas outside Title VII, Part C agreement:

Bowie, Camp, Cass, Delta, Fannin, Franklin, Gregg, Hardin, Harrison, Henderson, Hopkins, Jasper, Jefferson, Kaufman, Lamar, Marion, Morris, Navarro, Newton, Orange, Rains, Red River, San Jacinto, Titus, Upshur, Van Zandt, Wood

Funding Source: WIPA

Geographic Type: Rural

East Texas Center for Independent Living (ETCIL)

4713 Troup Highway, Tyler, TX 75703

Counties Served With Disability Population:

Camp, 2,689
Cherokee*, 9,261
Gregg, 18,734
Harrison, 10,084
Henderson, 16,045
Marion, 2,271
Panola*, 4,322
Rains, 2,377
Rusk, 9,764
Smith*, 30,686
Upshur, 8,516
Van Zandt, 11,338
Wood, 9,097
Total: 135,184

Disability Populations Served: Cognitive, Mental, Physical, Hearing, Multiple, Other

Race Categories Served: American Indian, Asian, Black, White, Hispanic, Two or more races, Unknown

Funding Sources: Title VII, Part C, Private donations, Fee for service

Counties served and funding source(s) for areas outside Title VII, Part C agreement:

Hopkins, Delta, Lamar, Franklin, Red River, Titus, Morris, Bowie, Cass and Anderson

Funding Sources: DADS, DARS Deaf and Hard of Hearing, Sign Language Interpreting Coordinating Program (self-sustaining, unrestricted program)

Geographic Type: Rural/Urban Mix

Heart of Central Texas Independent Living (HOCTIL)

222 East Central or P.O. Box 636, Belton, TX 76513

Counties Served With Disability Population:

Bell*, 40,133

Coryell, 8,231

Hill, 6,717

McLennan, 32,930

Total: 88,011

Disability Populations Served: Cognitive, Mental, Physical, Hearing, Vision, Multiple, Other

Race Categories Served: American Indian, Asian, Black, Hawaiian, White, Hispanic,

Funding Sources: Title VII, Part C, other federal funds, private, fees for service

Geographic Type: Rural/Urban Mix

LIFE/RUN

8240 Boston Avenue, Lubbock, TX 79423

Counties Served With Disability Population:

Crosby, 949

Floyd, 995

Garza, 1,005

Hale, 5,600

Hockley, 3,559

Lamb, 2,159

Lubbock, 41,653

Lynn, 915

Terry, 1,957

Total: 58792

Disability Populations Served: Cognitive, Mental, Physical, Hearing, Vision, Multiple, Other

Race Categories Served: American Indian, Asian, Black, Hawaiian, White, Hispanic, Two or more races, Unknown

Funding Sources: State, Title VII, Part C, Other federal funds, local government, fees for service

Counties served and funding source(s) for areas outside Title VII, Part C agreement:

Armstrong, Bailey, Briscoe, Carson, Castro, Childress, Cochran, Collingsworth, Crosby, Dallam, Deaf Smith, Dickens, Donley, Floyd, Garza, Gray, Hale, Hall, Hansford, Hartley, Hemphill, Hockley, Hutchinson, King, Lamb, Lipscomb, Lubbock, Lynn, Moore, Motley, Ochilree, Oldham, Parmer, Potter, Randall, Roberts, Sherman, Swisher, Terry, Wheeler, Yoakum, Archer, Baylor, Brown, Callahan, Clay, Coleman, Comanche, Cottle, Eastland, Fisher, Foard, Hardeman, Haskell, Jack, Jones, Kent, Knox, Mitchell, Montague, Nolan, Runnels, Scurry, Shackelford, Stonewall, Stephens, Taylor, Throckmorton, Wichita, Wilbarger, Young, Andrews, Borden, Coke, Concho, Crane, Crockett, Dawson, Ector, Gaines, Glasscock, Howard, Irion, Kimble, Loving, Martin, Mason, McCulloch, Menard, Midland, Pecos, Reagan, Reeves, Schleicher, Sterling, Sutton, Terrell, Tom Green, Upton, Ward, Winkler, Brewster, Culberson, El Paso,

Hudspeth, Jeff Davis, Presidio
Funding Source: DADS relocation
Geographic Type: Rural/Urban Mix

LIFE/RUN Not Without Us! (LIFE/RUN NWU)

3303 North 3rd, Suite B, Abilene, TX 79603

Counties Served With Disability Population:

Callahan, 2,226

Eastland, 3,030

Jones, 3,856

Shackelford, 644

Stephens, 1,829

Taylor, 21,253

Total, 32,838

Disability Populations Served: Cognitive, Mental, Physical, Hearing, Vision, Multiple, Other

Race Categories Served: American Indian, Asian, Black, Hawaiian, White, Hispanic, Two or more races, Unknown

Funding Sources: State

Geographic Type: Rural/Urban Mix

LIFE/RUN Disability Connections (LIFE/RUN DC)

3184 Executive Drive, San Angelo, TX 76904

Counties Served With Disability Population:

Coke, 451

Concho, 740

Irion, 287

Menard, 403

Runnels, 1,884

Schleicher, 628

Sterling, 206

Tom Green, 15,114

Total, 19,713

Disability Populations Served: Cognitive, Mental, Physical, Hearing, Vision,

Race Categories Served: American Indian, Asian, Black, White, Hispanic, Two or more races, Unknown

Funding Sources: State, Other federal funds, fee for service

Mounting Horizons Center for Independent Living (MHCIL)

501 Gulf Freeway, Suite 104, League City, TX 77573

Counties Served With Disability Population:

Galveston, 35,024

Disability Populations Served: Cognitive, Mental, Physical, Hearing, Multiple

Race Categories Served: Black, White, Hispanic

Funding Sources: State

Geographic Type: Urban

Panhandle Independent Living Center (PILC)

417 West 10th Ave., Amarillo, TX 79101

Counties Served With Disability Population:

Armstrong, 238

Briscoe, 204

Carson, 776

Castro, 1,015

Childress, 881

Collingsworth, 383

Dallam, 852

Deaf Smith, 2,449

Donley, 458

Gray, 2,827

Hall, 416

Hansford, 708

Hartley, 758

Hemphill, 481

Hutchinson, 2,761

Lipscomb, 416

Moore, 2,770

Ochiltree, 1,302

Oldham, 258

Parmer, 1,303

Potter, 15,230

Randall, 12,115

Roberts, 117

Sherman, 382

Swisher, 982

Wheeler, 679

Total, 50,761

Disability Populations Served: Cognitive, Mental, Physical, Hearing, Vision, Multiple, Other

Race Categories Served: Asian, Black, Hawaiian, white, Hispanic, Unknown

Funding Sources: Title VII, Part C, Other federal funds, Private, Fees for service

Geographic Type: Rural/Urban Mix

Palestine Resource Center for Independent Living

421 Avenue A, Palestine, TX 75801

Counties Served With Disability Population:

Anderson, 11,907

Angelina, 14,613

Cherokee*, 9,261

Nacogdoches, 10,925

Smith*, 30,686

Total, 77,392

Disability Populations Served: Cognitive, Mental, Physical, Hearing, Vision, Multiple,
Race Categories Served: Asian, Black, White, Hispanic, Two or more races, Unknown
Funding Sources: Title VII, Part C, Other federal funds
Counties served and funding source(s) for areas outside Title VII, Part C agreement:
Van Zandt, Henderson, Bursleson, Madison, Brazos, Robertson, Grimes, Limestone
Funding Source: DADS relocation
Geographic Type: Rural/Urban Mix

**REACH-Rehabilitation, Education and Advocacy for Citizens with Handicaps
(Disabilities), Dallas (REACH, Dallas)**

8625 King George Drive, Suite 210, Dallas, TX 75235

Counties Served With Disability Population:

Dallas, 232,580

Disability Populations Served: Cognitive, Mental, Physical, Hearing, Vision, Multiple,
Other

Race Categories Served: American Indian, Asian, Black, Hawaiian, White, Hispanic,
Two or more races, Unknown

Funding Sources: State, Title VII, Part C, Other federal funds, Fee for service

Geographic Type: Urban

**REACH-Rehabilitation, Education and Advocacy for Citizens With Handicaps
(Disabilities), Denton (REACH, Denton)**

404 South Elm, Suite 202, Denton, TX 76201

Counties Served With Disability Population:

Denton, 52,823

Disability Populations Served: Cognitive, Mental, Physical, Vision, Multiple, Other

Race Categories Served: American Indian, Black, White, Hispanic

Funding Sources: Title VII, Part C, Other federal funds

Geographic Type: Urban

**REACH-Rehabilitation, Education and Advocacy for Citizens With Handicaps
(Disabilities), Ft. Worth
(REACH-Ft. Worth)**

1000 Macon Street, Suite 200, Fort Worth, TX 76102

Counties Served With Disability Population:

Tarrant, 187,080

Disability Populations Served: Cognitive, Mental, Physical, Vision, Multiple

Race Categories Served: American Indian, Asian, Black, Hawaiian, White, Hispanic

Funding Sources: State, Title VII, Part B, Fees for service

Geographic Type: Urban

**REACH-Rehabilitation, Education and Advocacy for Citizens With Handicaps
(Disabilities), Plano
(REACH-Plano)**

720 East Park Blvd., Suite 104, Plano, TX 75074

Counties Served With Disability Population:

Collin, 50,069

Disability Populations Served: Cognitive, Mental, Physical, Hearing, Vision, Multiple, Other

Race Categories Served: American Indian, Asian, Black, White, Hispanic

Funding Sources: State

Geographic Type: Urban

RISE Center for Independent Living (RISE)

755 South 11th Street, Suite 101, Beaumont, TX 77701

Counties Served With Disability Population:

Hardin, 10,309

Jefferson, 42,590

Orange, 15,332

Total, 68,231

Disability Populations Served: Cognitive, Mental, Physical, Hearing, Vision, Multiple, Other

Race Categories Served: American Indian, Asian, Black, White, Hispanic, Two or more races

Funding Sources: Title VII, Part C, Private, Fee for service

Counties served and funding source(s) for areas outside Title VII, Part C agreement:

Jasper, Newton, Tyler, Polk, San Jacinto, San Augustine, and Sabine

Funding Source: DADS Relocation

Geographic Type: Urban

San Antonio Independent Living Services (SAILS)

1028 South Alamo, San Antonio, TX 78210

Counties Served With Disability Population:

Atascosa, 8,790

Bandera, 3,587

Bexar, 236,410

Calhoun, 3,767

Comal*, 14,994

De Witt, 3,866

Dimmit, 1,529

Edwards, 306

Frio, 3,000

Gillespie, 4,337

Goliad, 1,402

Gonzales, 3,839

Guadalupe, 18,199

Jackson, 2,442

Karnes, 2,864

Kendall, 5,912

Kerr, 8,622

Kinney, 549

La Salle, 1,065

Lavaca, 3,280
Maverick, 8,369
Medina, 8,065
Real, 506
Uvalde, 4,042
Val Verde, 7,492
Victoria, 15,108
Wilson, 8,467
Zavala, 1,789
Total, 382,598

Disability Populations Served: Cognitive, Mental, Physical, Hearing, Vision, Multiple, Other

Race Categories Served: American Indian, Asian, Black, White, Hispanic, Two or more races, Unknown

Funding Sources: State, Title VII, Part C, Local Government, Fee for service, private

Geographic Type: Rural/Urban Mix

Valley Association for Independent Living-Rio Grande Valley (VAIL-Rio Grande Valley)

3016 North McColl, Suite B, McAllen, TX 78501

Counties Served With Disability Population:

Cameron, 52,483
Hidalgo, 110,168
Starr, 11,524
Willacy, 4,206
Total, 178,381

Disability Populations Served: Cognitive, Mental, Physical, Hearing, Vision, Multiple, Other

Race Categories Served: Asian, Black, White, Hispanic

Funding Sources: State, Title VII, Part C, Other federal funds, Local government, Fee for service

Geographic Type: Rural/Urban Mix

Valley Association for Independent Living- South Texas (VAIL-South Texas)

1419 Corpus Christi Street, Laredo, TX 78040

Counties Served With Disability Population:

Duval*, 2,584
Jim Hogg, 1,000
Webb, 33,944
Zapata, 2,671
Total, 40,199

Disability Populations Served: Mental, Physical, Hearing, Multiple, Other

Race Categories Served: White, Hispanic

Funding Sources: State

Geographic Type: Rural/Urban Mix

Volar Center for Independent Living
1220 Golden Key Circle, Suite C, El Paso, TX 79925

Counties Served With Disability Population:

El Paso, 99,067

Disability Populations Served: Cognitive, Mental, Physical, Hearing, Vision, Multiple

Race Categories Served: Asian, Black, White, Hispanic

Funding Sources: State, Title VII, Part C, Other federal funds, Local government, Fee for service

Geographic Type: Urban

The preceding CIL-specific data was compiled by reviewing FY12 704 Reports of each CIL within the network. The disability populations for each county are as reported by the Texas Workforce Investment Council in *People With Disabilities: A Public Profile* and were developed by the DARS. The estimates were calculated by compiling U.S. Census American Community Survey data, and for the counties not represented on the survey, allocation factors developed by the Missouri Census were used to align public use microdata areas with Texas counties.

***Indicates counties that are served by more than one CIL.**

3.2 Expansion of Network – 34 CFR 364.25

3.2A Describe the design for the further expansion of the network, including identification of the unserved and underserved areas in the State and the order of priority for serving these areas as additional funding becomes available (beyond the required cost-of-living increase).

The SILC, DARS, and the network of CILs worked together to identify a strategy for completing the network of CILs in the state. The determination was that fourteen additional CILs are needed to complete the network. Based on 2010 U.S. Census Data, there are an estimated half a million state residents with disabilities currently living in areas that are not served by a CIL.

Underserved Counties and Populations:

The SILC has become increasingly concerned about the high percentage of underserved areas within the existing network of CILs. Close examination of recent 704 reports submitted by CILs throughout the state revealed that, even where CILs exist, individuals with disabilities are dramatically underserved by population and/or geographic area. The following data was compiled by reviewing FY12 704 Reports of each CIL within the network.

ABLE Center for Independent Living

Counties Underserved: Andrews, Crane, Martin, Midland, Upton, Ward

Disability Populations Underserved: Hearing, Vision, Other

Race Categories Underserved: Asian, White, Two or More Races

Austin Resource Center for Independent Living, Austin

Counties Underserved: Bastrop, Lee

Disability Populations Underserved: Hearing, Vision, Other
Race Categories Underserved: American Indian, Asian, Hawaiian, Hispanic, Two or more races

Austin Resource Center for Independent Living, Round Rock

Counties Underserved: Burnet, Milam, Bell*
Disability Populations Underserved: Hearing, Vision, Other
Race Categories Underserved: American Indian, Asian, Hawaiian, Hispanic, Two or more races

Austin Resource Center for Independent Living, San Marcos

Counties Underserved: Blanco, Comal*
Disability Populations Underserved: Hearing, Vision, Other
Race Categories Underserved: Asian, Black, Hawaiian, Hispanic, Two or more races

Brazos Valley Center for Independent Living

Counties Underserved: Burleson, Madison, Robertson, Washington
Disability Populations Underserved: Hearing, Vision, Other
Race Categories Underserved: American Indian, Asian, Hawaiian, Hispanic, Two or more races

Coastal Bend Center for Independent Living

Counties Underserved: Aransas, Bee, Brooks, Duval*, Jim Wells, Kenedy, Kleberg, Live Oak, McMullen, Refugio, San Patricio
Disability Populations Underserved: Cognitive, Hearing, Vision
Race Categories Underserved: American Indian, Asian, Black, Hawaiian, White, Two or more races

Coalition for Barrier Free Living/Houston Center for Independent Living

Counties Underserved: N/A
Disability Populations Underserved: Cognitive, Vision, Other
Race Categories Underserved: Hawaiian, White, Hispanic, Two or more races

Coalition for Barrier Free Living/Brazoria County Center for Independent Living, Angleton

Counties Underserved: Matagorda
Disability Populations Underserved: Hearing, Vision, Other
Race Categories Underserved: Asian, Hawaiian, Hispanic, Two or more races

Coalition for Barrier Free Living/ Fort Bend Center for Independent Living

Counties Underserved: Austin, Colorado, Waller, Wharton
Disability Populations Underserved: Cognitive, Hearing, Multiple
Race Categories Underserved: American Indian, Hawaiian, White, White, Hispanic, Two or more races

Crockett Resource Center for Independent Living

Counties Underserved: Freestone, Leon, Shelby, Trinity, Polk, Sabine, San Augustine, Panola*, Rusk*

Disability Populations Underserved: Mental, Multiple, Other

Race Categories Underserved: Asian, Hawaiian, Hispanic, Two or more races

East Texas Center for Independent Living

Counties Underserved: Camp, Cherokee*, Harrison, Henderson, Marion, Panola*, Rains, Rusk,

Upshur, Van Zandt, Wood

Disability Populations Underserved: Cognitive, Hearing, Vision

Race Categories Underserved: American Indian, Asian, Hawaiian, Hispanic, Two or more Races

Heart of Central Texas Independent Living

Counties Underserved: Coryell, Hill, McLennan

Disability Populations Underserved: Hearing, Vision, Other

Race Categories Underserved: American Indian, Asian, White, Hispanic, Two or more races

LIFE/RUN

Counties Underserved: Crosby, Floyd, Garza, Hale, Hockley, Lamb, Lynn, Terry

Disability Populations Underserved: Hearing, Vision, Other

Race Categories Underserved: American Indian, Asian, White, Hispanic, Two or more races

LIFE/RUN Not Without Us!

Counties Underserved: Calhahan, Eastland, Jones, Stephens, Shackelford,

Disability Populations Underserved: Hearing, Vision, Other

Race Categories Underserved: Asian, Black, Hispanic, Two or more races

LIFE/RUN Disability Connections

Counties Underserved: Runnels, Coke, Concho, Irion, Menard, Scheicher, Sterling

Disability Populations Underserved: Hearing, Vision, Other

Race Categories Underserved: American Indian, Asian, Black, Hawaiian, Hispanic, Two or more races

Mounting Horizons Center for Independent Living

Counties Underserved: N/A

Disability Populations Underserved: Hearing, Vision, Other

Race Categories Underserved: American Indian, Asian, Hawaiian, Hispanic, Two or more races

Panhandle Independent Living Center

Counties Underserved: Armstrong, Briscoe, Carson, Castro, Childress, Collingsworth, Dallam,

Deaf Smith, Donley, Gray, Hall, Hansford, Hartley, Hemphill, Hutchinson, Lipscomb,

Moore,

Ochiltree, Oldham, Parmer, Roberts, Sherman, Swisher, Wheeler

Disability Populations Underserved: Mental, hearing, Other

Race Categories Underserved: American Indian, Asian, Black, Hispanic, Two or more races

Palestine Resource Center for Independent Living

Counties Underserved: Angelina, Nacogdoches, Smith*

Disability Populations Underserved: Hearing, Multiple, Other

Race Categories Underserved: American Indian, Asian, Hawaiian, Hispanic

REACH-Rehabilitation, Education and Advocacy for Citizens With Handicaps (Disabilities), Dallas

Counties Underserved: N/A

Disability Populations Underserved: Hearing, Vision, Other

Race Categories Underserved: American Indian, Asian, Hispanic, Two or more races

REACH-Rehabilitation, Education and Advocacy for Citizens With Handicaps (Disabilities), Denton

Counties Underserved: N/A

Disability Populations Underserved: Cognitive, Hearing, Other

Race Categories Underserved: Asian, Black, Hawaiian, Hispanic, Two or more races

REACH-Rehabilitation, Education and Advocacy for Citizens With Handicaps (Disabilities), Ft. Worth

Counties Underserved: N/A

Disability Populations Underserved: Hearing, Vision, Other

Race Categories Underserved: American Indian, Asian, White, Hispanic, Two or more races

REACH-Rehabilitation, Education and Advocacy for Citizens With Handicaps (Disabilities), Plano

Counties Underserved: N/A

Disability Populations Underserved: Hearing, Vision, Other

Race Categories Underserved: American Indian, Asian, Hawaiian, White, Hispanic, Two or more races

RISE Center for Independent Living

Counties Underserved: Hardin, Orange

Disability Populations Underserved: Hearing, Multiple, Other

Race Categories Underserved: American Indian, Asian, Hawaiian, Hispanic, Two or more races

San Antonio Independent Living Services

Counties Underserved: Atascosa, Bandera, Calhoun, Comal*, De Witt, Dimmit, Edwards, Frio, Gillespie, Goliad, Gonzales, Guadalupe, Jackson, Karnes, Kendall, Kerr,

Kinney, La Salle, Lavaca, Maverick, Medina, Real, Uvalde, Val Verde, Victoria, Wilson, Zavala

Disability Populations Underserved: Cognitive, Vision, Other

Race Categories Underserved: American Indian, Asian, Hawaiian, White, Two or more races

Valley Association for Independent Living-Rio Grande Valley

Counties Underserved: Starr, Willacy

Disability Populations Underserved: Mental, Vision, Other

Race Categories Underserved: American Indian, Asian, Hawaiian, White, Two or more races

Valley Association for Independent Living- South Texas

Counties Underserved: Duval, Jim Hogg, Zapata

Disability Populations Underserved: Cognitive, Vision, Other

Race Categories Underserved: American Indian, Asian, Black, Hawaiian, White, Two or more races

Volar Center for Independent Living

Counties Underserved: N/A

Disability Populations Underserved: Cognitive, Vision, Other

Race Categories Underserved: American Indian, Asian, Black, Hawaiian, White, Two or more races

Underserved race categories were calculated by comparing the FY12 704 Report data for each CIL to the race categories in the state, according to the 2010 U.S. Census. Those race categories served by a CIL, which were below the statewide race categories, were listed as underserved. Counties underserved were calculated by comparing the FY12 704 Report data for each CIL to the disability populations of each specific county. Those counties in which the CIL served less than 1% of the disability population were listed as underserved. Disability Population Underserved was determined by reporting the three populations that received the lowest service percentage by that CIL.

Unserved Counties:

The following list represents the list of unserved counties. Should new state or federal funds become available for the purpose of establishing a new CIL, these areas would be eligible for such funding. Within the first year, the SILC, in coordination with the network of CILs, will determine a list of priority areas within the list of targeted expansion areas.

In addition, the SILC, in collaboration with DARS, has designated some counties as “stray counties” due to their geographic location not falling near other unserved counties, or within a current CIL service area. These counties may be absorbed by an existing CIL, should state or federal funds become available for future negotiation.

Targeted Expansion Areas:

Archer, 1,591	Grayson, 20,080	Montgomery, 52,265
Baylor, 649	Grimes, 4,805	Morris, 2,614
Borden, 115	Hamilton, 1,447	Navarro, 9,165
Bosque, 2,982	Hardeman, 725	Nolan, 2,895
Bowie, 15,842	Haskell, 1,117	Palo Pinto, 5,372
Brewster, 1,595	Hood, 8,450	Parker, 15,796
Brown, 6,479	Hopkins, 7,125	Pecos, 2,673
Cass, 5,223	Howard, 6,303	Presidio, 1,349
Chambers, 5,092	Hudspeth, 601	Reagan, 610
Clay, 1,883	Hunt, 15,456	Red River, 2,590
Coleman, 1,516	Jack, 1,588	Reeves, 2,381
Comanche, 2,279	Jeff Davis, 402	Rockwall, 9,150
Cooke, 6,372	Johnson, 17,246	San Jacinto, 5,000
Crockett, 670	Kaufman, 12,002	San Saba, 1,044
Culberson, 413	Kimble, 832	Scurry, 3,232
Dawson, 2,487	Knox, 647	Somervell, 1,408
Delta, 1,063	Lamar, 10,053	Sutton, 746
Ellis, 20,791	Lampasas, 3,388	Terrell, 169
Erath, 6,202	Liberty, 10,847	Throckmorton, 311
Falls, 3,421	Limestone, 4,480	Titus, 6,577
Fannin, 6,036	Llano, 3,298	Walker, 2,659
Fisher, 751	Mason, 723	Wichita, 20,775
Foard, 233	McCulloch, 1,493	Wilbarger, 2,373
Franklin, 2,152	Mills, 839	Wise, 10,520
Gaines, 3,065	Mitchell, 1,789	Young, 3,245
Glasscock, 220	Montague, 3,456	

Stray Counties:

Bailey, 1,122	Jasper, 7,419	Newton, 2,982
Cochran, 485	Kent, 152	Stonewall, 282
Cottle, 263	King, 44	Winkler, 1,234
Dickens, 377	Loving, 14	Yoakum, 1,234
Fayette, 3,634	Motley, 186	

Expansion of the Network:

Efforts to expand and strengthen the network of CILs in Texas will involve working closely with state and federal entities toward the allocation of additional funding for the establishment and operation of CILs. Should funding become available, a competitive process will be conducted, which will define criteria for selection. The network will not accept expansion funds if it will potentially jeopardize the stability of the existing network. Priority will be given to applicants with a cross-disability board in place that have filed for incorporation and obtained, or are in the process of obtaining, 501(c)(3) tax exempt status. Such applicants will be in a position to initiate programming more readily.

Strengthen the Network:

In addition to adding CILs to the network, the SILC and DSU are committed to pursuing increased funding that will allow for financial support to bring existing CILs up to a baseline level to be determined by the SILC and DSU. Funding will also be pursued to expand the capacity of CILs to reach underserved populations and regions within existing coverage areas.

Funding Priorities:

The priorities for the designation of additional funds will be determined as funding becomes available through a process of negotiation among DARS, the SILC and the CILs in the network. These basic guidelines will be employed to make such determinations:

- Funds Below Regular Allocation: Funds under the determined amount of the regular Title VII, Part C allocation and/or are from a source that includes a provision for continuation, will be used first to bring existing CILs whose funding is below the baseline up to baseline. Funds will be distributed based on the order of greatest to least disparity between current funding and the designated amount. Eligible CILs will receive the percentage of the available funds that corresponds with their levels of funding disparity. Once all CILs have reached the baseline level, any additional funds will be distributed among existing CILs in the same proportion as their regular Part C appropriation.
- Funds Above Regular Allocation: Funds above the determined amount of the regular Title VII, Part C allocation that are from a source that includes a provision for continuation, or, if non-sustaining and will not jeopardize the Part C funding of existing CILs, will be used for the establishment of new CILs, provided a need in one or more priority areas has been identified.
- Short Term Funding: Funds that are short-term in nature and do not have a provision for ongoing sustainability, beyond those used to establish a new CIL if doing so does not jeopardize the Part C funding of existing CILs, will be used to expand the capacity of existing CILs consistent with the goals and objectives of the SPIL, with particular emphasis on under-served areas and populations. Such funds will be distributed among existing CILs in the same proportion as their regular Part C appropriation.

Funding Requirements for CIL Start-Up:

The Independent Living Research Utilization program conducted a nationwide study of urban and rural CILs to determine the minimum budget for a Center. For comparison purposes, they assumed that a typical start-up CIL would need a director, bookkeeper, secretary, and two IL specialists to be able to meet Title VII, Part C requirements. The study reviewed the line item budgets of ten rural and ten urban CILs to determine the annual operating costs for their communities. The general findings are below and they include figures that have been adjusted for inflation.

Rural communities average annual cost: \$227,991 in 1999, which when adjusted for inflation is \$318,548.

Urban communities average annual cost: \$272,231 in 1999, which when adjusted for inflation is \$380,360.

National Average average annual cost: \$250,111 in 1999, which when adjusted for inflation is \$349,454.

According to an analysis by the SILC, the annual average funding levels (adjusted for inflation) stated in this study are consistent with federal funding recently awarded to establish a new CIL and the budgetary realities the newly funded Center continues to face as a start-up CIL. It is expected that any start-up Center, whether or not it is established by federal or state funds,

would require similar funding levels to provide services as required under Title VII, Part C in their designated catchment area. It is expected that future funding sources may include Title VII, Part C funding, or state funding resources as a base funding level. Traditionally, the network of Centers have had to secure additional funding from other federal, state, and/or private sources in order to provide services because base funding provided for Centers from the state and federal government have generally not kept pace with rising costs and inflation.

Funding Reductions:

With the recent implementation of the sequestration of federal funds as required by the Budget Control Act of 2011, the SILC encourages the development of contingency plans, should there be an unexpected reduction or rescission of state or federal funds. It is expected that such reductions may impact the quantity and quality of services offered by a Center. Should this be the case, the SILC and DARS encourage the CILs to focus on providing the four core services to consumers in the Center's catchment area to ensure their status as Center for Independent Living under Title VII, Part C is not jeopardized. In addition, Centers are also encouraged to diversify their funding sources to help lessen the impact of a sudden reduction of funding from one entity or program. Should general funding for CILs be reduced at the State level, the network of Centers should receive a proportional funding reduction, rather than consider the closing of a center.

Closing of a Center for Independent Living:

In the event that a Center funded by Title VII, Part B or Part C should close, the SILC, DARS, and the network of Centers will coordinate on the distribution of funds previously allocated to the Center. Should such funds remain available for use in the State, funding will be distributed based on the priorities mentioned previously in this section. Of note, however, is that the areas and populations previously served by the now-closed center will be considered unserved areas for purposes of determining priorities as outlined previously in this section.

3.3 Section 723 States Only – 34 CFR 364.39

3.3A If the State follows an order of priorities for allocating funds among Centers within a State that is different from what is outlined in 34 CFR 366.22, describe the alternate order of priority that the DSU Director and the SILC Chair have agreed upon. Indicate N/A if not applicable.

N/A

3.3B Describe how the State policies, practices and procedures governing the awarding of grants to Centers and the oversight of these Centers are consistent with 34 CFR 366.37 and 366.38.

N/A

Section 4: Designated State Unit (DSU)

4.1 Administrative Support Services – 34 CFR 364.4; 34 CFR 364.22(b)

4.1A Describe the administrative support services to be provided by the DSU for the SILS (Part B) program and, if the State is a Section 723 State, for the CIL (Part C) program. Refer to the SPIL Instructions for additional information about administrative

support services.

DARS provides financial/technical assistance and resources in planning, budget development, budget management and evaluation of CIL activities. Financial management supports include: audits, trainings, recordkeeping activities, and administrative support.

In-kind administrative support is available, and the DARS Standards for Providers includes these requirements. Compliance is reviewed as part of routine contract monitoring activities via DRS and DBS staff involved as Ex-Officio members of SILC. They actively participate in plan development, SILC meetings, and ongoing collaborations. DARS provides funding for SILC operations with proportionate participation by DRS and DBS. DARS also channels funds to CILs to facilitate operations for the independent CIL network.

**4.1B Describe other DSU arrangements for the administration of the IL program, if any.
N/A**

Section 5: Statewide Independent Living Council (SILC)

5.1 Resource plan – 34 CFR 364.21(i)

5.1A Describe the resource plan prepared by the SILC in conjunction with the DSU for the provision of resources, including staff and personnel, made available under Parts B and C of Chapter 1 of Title VII, section 101(a)(18) of the Act, and from other public and private sources that may be necessary to carry out the functions of the SILC identified in section 705(c). The description must address the three years of this SPIL.

For the duration of this state plan, the primary support for the SILC will be an annual grant from Title VII, Part B of the Rehabilitation Act of 1973, as amended, and administered by DARS. The SILC has approved the following budgets for expenditure of these funds. While the SILC anticipates the receipt of additional revenues, only Title VII, Part B funds are detailed in these budgets. Unrestricted funds are used to cover expenses not allowed through Title VII, Part B grants and to provide a safety net. Ten percent of the proposed expenditures can be reclassified by the SILC without the need for amendment. The budgets can be revised by mutual agreement of the SILC and DARS. This is the proposed budget and is contingent on available funds.

Texas State Independent Living Council Resource Development Plan

	FY 2014	FY2015	FY2016
Salary & Wages	\$153,164	\$153,164	\$153,164
Fringe Benefits	\$43,356	\$43,356	\$43,356
Travel	\$75,000	\$75,000	\$75,000
Equipment	\$0	\$0	\$0
Supplies	\$3,800	\$3,800	\$3,800
Contractual	\$77,063	\$77,063	\$77,063
Conference	\$35,500	\$35,500	\$35,500
Other	\$7,200	\$7,200	\$7,200
Total	\$395,083	\$395,083	\$395,083

5.1B Describe how the following SILC resource plan requirements will be addressed:

- **The SILC's responsibility for the proper expenditure of funds and use of resources that it receives under the resource plan.**
- **Non-inclusion of conditions or requirements in the SILC resource plan that may compromise the independence of the SILC.**
- **Reliance, to the maximum extent possible, on the use of resources in existence during the period of implementation of the State plan.**

The SILC has established fiscal policies and procedures that govern the expenditure of funds. Proper use of fiscal resources is routinely monitored through DARS. This includes: review of SILC billings for reimbursements, discussion of budget status at quarterly SILC meetings, and compliance with established protocols, should budget changes be requested. Additional monitoring activities include annual independent audits and periodic self-assessment of SILC operations in relation to standards and indicators.

The SILC remains very aware of and safeguards its independence. Nothing in the resource plan jeopardizes its autonomy. Furthermore, the resource plan reflects prudent planning for operational needs, while taking into account full use of available resources.

5.2 Establishment and Placement – 34 CFR 364.21(a)

5.2A Describe how the establishment and placement of the SILC ensures its independence with respect to the DSU and all other State agencies.

The SILC was established following revisions to the Rehabilitation Act of 1973, as amended in 1992, when the SILC requirement was introduced. The SILC was established and created as an independent council (40 Tex. Admin. Code § 101.401). In the formative years, DARS worked closely with the SILC to establish required processes and protocols consistent with federal requirements. The SILC received its 501(c)(3) status in 1998. The current structural reference for the SILC is found in Texas Administrative Code Title 40, Part 2, Chapter 101, Subchapter D, Rule §101.603.

The SILC is a private, non-profit 501(c)(3) organization that functions as a fully autonomous entity. In this capacity, the SILC leases offices, retains staff, conducts daily activities, and administers both public and private funds. Funding for the SILC originates with the Rehabilitation Services Administration. Those funds are then granted to the SILC by the DARS Division for Rehabilitation Services and Division for Blind Services. (Title 40, Part 2, Chapter 101, Subchapter L, Rule §101.9101, Texas Administrative Code) The SILC is also free to raise additional funds from other sources, both public and private, to accomplish its mission.

While the SILC has a very effective collaborative working relationship with DARS and other state agencies, the organization is recognized and operates as an independent entity with autonomy in its daily operations, development and implementation of the SPIL, and advocacy for Independent Living issues for Texans with disabilities.

5.3 Appointment and Composition – 34 CFR 364.21(b) – (f)

5.3A Describe the process used by the State to appoint members to the SILC who meet the composition requirements in section 705(b).

Members of the SILC are appointed by the Governor and serve on a voluntary basis. Potential

nominees meeting established criteria for cross-disability representation, geographic coverage, knowledge of Independent Living, etc. are submitted for consideration to the Governor's Office when vacancies arise. SILC bylaws address selection of Chair and Executive Committee (by SILC vote) and also define term limits.

While the SILC may identify and make recommendations of potential candidates for Council membership to the Governor's appointments office, the SILC does not have the power to nominate members. Composition of the SILC is reflected in Attachment 3, which is used as a tool to track compliance with the requirements for SILC composition defined in the Rehabilitation Act.

5.4 Staffing – 34 CFR 364.21(j)

5.4A Describe how the following SILC staffing requirements will be met:

- **SILC supervision and evaluation, consistent with State law, of its staff and other personnel as may be necessary to carry out its functions.**
- **Non-assignment of duties to SILC staff and other personnel made available by the DSU, or any other State agency or office that would create a conflict of interest while assisting the SILC in carrying out its duties.**

The SILC will regularly apprise employees of their job performance and employer expectations. All employees of the SILC shall receive a periodic written evaluation of their job performance. Employees shall be evaluated upon completion of the probationary period. Formal written evaluation shall be conducted at least annually thereafter. The SILC and/or the Executive Director may conduct employee evaluations at any time. Responsibilities for supervision and evaluation of the SILC Executive Director lie primarily with the SILC Chair. An annual evaluation is standard protocol with input from the SILC Executive Committee.

Particular attention is paid regarding assignments to avoid any conflict of interest in relation to carrying out SILC-related duties. This is especially true in consideration of individuals selected, for example, for review of technical assistance grants to CILs.

Section 6: Service Provider Requirements

Describe how the following service provider requirements will be met:

6.1 Staffing – 34 CFR 364.23; 34 CFR 364.24; 34 CFR 364.31

- **Inclusion of personnel who are specialists in the development and provision of IL services and in the development and support of centers.**
- **Availability, to the maximum extent feasible, of personnel able to communicate (1) with individuals with significant disabilities who rely on alternative modes of communication, such as manual communication, nonverbal communication devices, Braille, or audio tapes and (2) in the native languages of individuals with significant disabilities whose English proficiency is limited and who apply for or receive IL services under Title VII of the Act.**
- **Establishment and maintenance of a program of staff development for all classes of positions involved in providing IL services and, where appropriate, in administering the CIL program, improving the skills of staff directly responsible**

for the provision of IL services, including knowledge of and practice in the IL philosophy.

- **Affirmative action to employ and advance in employment qualified individuals with significant disabilities on the same terms and conditions required with respect to the employment of individuals with disabilities under section 503 of the Act.**

DRS has 12 ILS Counselor positions and DBS has 22 IL Worker positions that provide IL services to Consumers. Program Specialists within DARS provide technical assistance in developing and support the state network of CILs. Service Coordinators within the CILs are qualified to provide the four core services.

Both IL programs within the DSU have staff development activities from orientation of new personnel (caseload and administrative staff) to ongoing trainings. Similarly, CILs, in accordance with requirements of the Rehabilitation Act, provide training opportunities for personnel internally and through workshops and conferences in the community, such as the annual statewide IL Conference. Contingent on available funds, the SILC sponsors a yearly training for CIL personnel that is targeted to the administrative staff of CILs and addresses operational issues.

DARS and CIL staff receive training at service delivery and management levels that address essential components of these staffing requirements:

- Awareness of IL network (including DSU and CILs).
- Emphasis on awareness of and application of IL philosophy.
- Ability to effectively communicate and provide services to individuals needing alternate communication styles for reasons such as hearing or vision loss or because of varying native languages.
- In areas where staff is unable to provide such accommodations, professionals are hired to meet the need.

CILs also adhere strongly to affirmative action practices to employ, and advance in employment, individuals with significant disabilities. The majority of CIL staff are individuals with disabilities.

6.2 Fiscal Control and Fund Accounting – 34 CFR 364.34

- **Adoption of those fiscal control and fund accounting procedures as may be necessary to ensure the proper disbursement of and accounting for funds made available through Parts B and C of Chapter 1 of Title VII of the Act, in addition to complying with applicable EDGAR fiscal and accounting requirements.**

These requirements are included in the DARS Standards for Providers. Compliance with requirements is examined during the application process before contracts are authorized. Compliance is reviewed as part of routine contract monitoring activities.

CILs that are federally-funded comply with RSA fiscal regulations and with OMB Circulars A-110, A-122, and A-133.

6.3 Record-Keeping, Access and Reporting – 34 CFR 364.35; 34 CFR 364.36; 34 CFR 364.37

- **Maintenance of records that fully disclose and document the information listed in 34 CFR 364.35.**
- **Submission of annual performance and financial reports, and any other reports that the Secretary determines to be appropriate**
- **Access to the Commissioner and the Comptroller General, or any of their duly authorized representatives, for the purpose of conducting audits, examinations, and compliance reviews, to the information listed in 34 CFR 364.37.**

The DARS Standards for Providers includes these requirements. Compliance is reviewed as part of routine contract monitoring activities.

Federally funded CILs are required to meet standards established by RSA for record keeping, access and reporting. These requirements are reflected in each entity's operational policies and procedures.

6.4 Eligibility – 34 CFR 364.40; 34 CFR 364.41

- **Eligibility of any individual with a significant disability, as defined in 34 CFR 364.4(b), for IL services under the SILS and CIL programs.**
- **Ability of any individual to seek information about IL services under these programs and to request referral to other services and programs for individuals with significant disabilities.**
- **Determination of an individual's eligibility for IL services under the SILS and CIL programs in a manner that meets the requirements of 34 CFR 364.51.**
- **Application of eligibility requirements without regard to age, color, creed, gender, national origin, race, religion, or type of significant disability of the individual applying for IL services.**
- **Non-exclusion from receiving IL services of any individual who is present in the State and who is otherwise eligible for IL services, based on the imposition of any State or local residence requirement.**

The DARS Standards for Providers includes these requirements. Compliance is reviewed as part of routine contract monitoring activities.

Centers supported through federal grants use the criteria for service eligibility defined in the Rehabilitation Act. Determination of disability is self-verifying.

6.5 Independent Living Plans – 34 CFR 364.43(c)

- **Provision of IL services in accordance with an IL plan complying with Sec. 364.52 and mutually agreed upon by the individuals with significant disabilities and the appropriate service provider staff unless the individual signs a waiver stating that an IL plan is unnecessary.**

The DARS Standards for Providers includes these requirements. Compliance is reviewed as part of routine contract monitoring activities.

All Consumers served by CILs supported by federal or state sources develop an Independent Living Plan. The consumer may choose to waive participation in developing a plan by signing a waiver that documents this choice.

6.6 Client Assistance Program (CAP) Information – 34 CFR 364.30

- **Use of accessible formats to notify individuals seeking or receiving IL services under Chapter 1 of Title VII about the availability of the CAP program, the purposes of the services provided under the CAP, and how to contact the CAP.**

The DARS Standards for Providers includes these requirements. Compliance is reviewed as part of routine contract monitoring activities.

All Consumers of federally funded CILs are informed of the availability of and the purpose and contact information for the Client Assistance Program. This notification is provided in alternate formats. Consumers provide signed verification that they have received such information.

6.7 Protection, Use and Release of Personal Information – 34 CFR 364.56(a)

- **Adoption and implementation of policies and procedures meeting the requirements of 34 CFR 364.56(a), to safeguard the confidentiality of all personal information, including photographs and lists of names.**

The DARS Standards for Providers includes these requirements. Compliance is reviewed as part of routine contract monitoring activities.

Federally-funded CILs comply with confidentiality requirements established by RSA. No information concerning a Consumer, including a photo of a Consumer, is released to another individual or entity without signed authorization from the Consumer. Consumer service records are maintained in secured files.

Section 7: Evaluation

7.1A Describe the method that will be used to periodically evaluate the effectiveness of the plan in meeting the objectives established in Section 1. The description must include the State's evaluation of satisfaction by individuals with significant disabilities who have participated in the program. 34 CFR 364.38

Specific activities and indicators have been identified for each goal and objective cited in the SPIL. The SILC will annually, as well as quarterly, review its progress through its regular meetings via input from DARS representatives, reports from the network of CILs, joint preparation and review of federal reports, and feedback from other entities regarding Independent Living issues and concerns for Texans with disabilities.

Additional opportunities for assessing effectiveness include acquisition of input from Consumers through:

- Inviting public comment during each regularly scheduled meeting of the SILC;
- Posting a copy of the SPIL on the Internet and providing a method for Consumer and public comment;

- Reviewing public input collected by other entities, including but not limited to, DSUs and CILs;
- Presenting up-to-date information on the implementation of the SPIL at the annual independent living conference and soliciting public comment.

Consumer satisfaction is addressed through several methods. DARSs has established processes to solicit feedback from Consumers served to identify satisfaction with services and their IL program experience. Data is collected and compiled by independent evaluators and reviewed by the SILC. A SILC representative participates as a standing member of the State Rehabilitation Council, affording the opportunity for dialogue, input, updates, and annual reporting and review regarding SILC activities.

The network of CILs in Texas has implemented a standard Consumer Satisfaction Questionnaire that is distributed to Consumers. Analysis of responses is included in the 704 reports, which are provided to the SILC for review. Consumers are invited to express satisfaction or concerns with the IL service delivery system at all SILC meetings. Consumers are informed of the availability of the Client Assistance Program as a means of resolving concerns.

Section 8: State-Imposed Requirements

8.1A Identify any State-imposed requirements contained in the provisions of this SPIL.

Indicate N/A if not applicable.

To receive IL services in Texas from DRS or DBS, a Consumer must be in the United States legally. DARS policy manuals require Consumers to provide original documents to establish identification and to indicate that the Consumer legally resides in the United States. If the Consumer is unable to provide appropriate documentation at application, the Consumer is allowed to complete the application and the counselor counsels the Consumer on the need for the documentation before DRS or DBS can determine eligibility for services. CILs do not require Consumers to provide proof of legal status.

Both DARS and DBS have established protocols regarding Consumer participation in the cost of services as described in 2.1.C.

Division for Rehabilitation Services ILS Waiting List Description

Because most requests for Independent Living services from the DRS ILS program in Texas are for rehabilitation technology, assistive equipment and devices, funds have not been sufficient to provide purchased services immediately. It became necessary for the program to implement a list of all ILS Consumers waiting to receive purchased services. This became the ILS waiting list, which consists of all Consumers from initial contact through plan/waiver-initiated statuses who have not yet received purchased services.

The DRS Rehabilitation Policy Manual, Chapter 8, provides guidance to ILS counselors regarding waiting list procedures.

The purpose of the ILS Waiting List is to:

- Identify who is to be served next when funds become available,
- Track timeliness of service provision,

- Track the number of Consumers who are waiting, and
- Identify the estimated amount of additional funds needed.

The ILS waiting list is available to counselors on the DRS Intranet by caseload, with Consumers sorted by initial contact date, ILS status, and readiness status (ready or not ready to receive services). A Consumer is automatically added to the waiting list when initial contact information for that consumer is entered in DARS electronic case management system .

ILS Waiting List Procedure

Following development of a plan or waived plan, and upon becoming ready to receive purchased services, Consumers on the waiting list are served within each caseload in order of earliest initial contact date.

First Served

The first Consumer to receive purchased services on the waiting list is the Consumer on a caseload who has earliest initial contact date who has a plan or waived plan and is ready for services. The Consumer receives all services agreed to on the plan or waived plan.

When there are not enough funds to serve the first Consumer ready for services, services are provided to the Consumer with the next oldest initial contact date that has a plan or waived plan and is ready for services. The first Consumer maintains his or her next-to-be-served status and is served when adequate ILS funds become available.

Not Ready for Services

A Consumer with a plan or waived plan may not be ready to receive services for a variety of reasons:

- Medical —for example, the Consumer may need hospital treatment for a minor illness or a complication of his or her disability;
- Vehicle (van) not ready for modifications, perhaps:
 - not yet purchased,
 - not delivered,
 - not inspected, or
 - needs mechanical work; or
- Consumer reports:
 - personal reasons, or
 - family problems.

The counselor documents:

- The reasons a Consumer is not ready, and
- A projected date when the Consumer may be ready.

Services provided to Consumers while on the ILS Waiting List include:

- Counseling and guidance,
- Information and referral,
- Referral to a CIL,
- Information about comparable benefits, (for example, Medicaid or Medicare), and
- Services paid for by other resources.

Contact and Documentation

ILS counselors maintain regularly scheduled contact as needed by the Consumer, but at least every 60 days, to:

- Provide updates and progress reports, and
- Request additional information.

PART III: EXHIBITS

Attachment 1 - SILC Standards & Indicators Developed at SILC Congress 2004

SILC Standards and indicators Developed at SILC Congress 2004 Preamble

These standards and indicators are intended to assist states to fully implement the requirements outlined in Title VII of the Rehab Act.

They are intended as a guide for states in administering programs and services in compliance with the Act and Independent Living values and principles.

Definitions

Consumer Control- The term "Consumer control" means, with respect to a SILC, that the SILC vests power and authority in individuals with disabilities regarding decision making, SPIL Development and approval, establishment of policies, direction, management and operations of the SILC.

Disability-The term "disability" means a person who has a physical, mental, cognitive, and/or sensory impairment, which substantially limits one or more of such person's major life activities as a record of such impairment or is regarded as having such impairment.

SILC Philosophy

Standard #1

The purpose of the SILC is to promote the philosophy of independent living, including a philosophy of Consumer control, peer support, self-help, self-determination, equal access, and individual and systems advocacy, in order to maximize the leadership, empowerment, independence, and productivity of individuals with disabilities, and the integration and full inclusion of individuals with disabilities into the mainstream of American society.

SILC membership shall always remain at or above 51% people with significant disabilities who represent a broad range of disabilities and are knowledgeable about CIL's and Independent Living services.

Indicators

1. The SILC will provide statewide representation, represent a broad range of individuals with disabilities from diverse backgrounds, and consist of individuals who are knowledgeable about CILs and Independent Living Services.
2. The majority of voting SILC membership shall consist of individuals with disabilities who are not employed by any state agency or CIL.
3. In a state in which one or more projects are carried out under section 121, at least one representative of the directors of the projects; additional members may include other representatives from centers for independent living, parents and guardians of individuals with disabilities, advocates of and for individuals with disabilities, representatives from private

businesses, representatives from organizations that provide services for individuals with disabilities, and other appropriate individuals

The SILC will develop a method for recruiting applicants and receiving applications and, on at least an annual basis, forward a list of qualified, knowledgeable, and diverse candidates to be appointed by the Governor or designee.

The SILC will provide training to its members, CILs, other providers, and Consumers on the Rehab Act and Independent Living
Minimum Standard: once a year
Acceptable Standard: twice a year
Optimal Standard: three times a year

The SILC shall provide each newly appointed member with training and orientation prior to voting.

Every SILC shall complete and submit an assessment of the SILC training needs to RRCEP, RTC (ILRU) on an annual basis.

Standard #2

SILC has an active and equal role in the development of the State Plan.

Indicators

1. A majority vote of the SILC membership is required to approve the State Plan.
2. Any revisions and changes made to the SPIL by the DSU Director, Staff, SILC Chair, SILC Committee or any other entity will be submitted and approved by the full SILC, prior to inclusion in the final approved SPIL.

Standard #3

The SILC has the freedom to advocate for issues of its own choice as evidenced in the state plan and in a list of advocacy issues that will be developed annually.

Indicators

1. The SILC will, on an annual basis, develop a list of advocacy issues.
2. Minutes of SILC meetings, public forums, 704 Report, member activity reports will be collected and compiled at least annually to demonstrate evidence of advocacy action and accomplishments.

SILC Relationship with CILs

Standard #1

In partnership with CILs, the SILC will maximize cooperation, coordination, and working relationships to strengthen independent living within the state.

Indicators

1. The SILC will have as a voting member at least one CIL director chosen by the directors of CILs that comply with Section 725 in that state.

2. The SILC will provide opportunities for CILs to acquire technical assistance and training.
3. The SILC will participate only as technical assistants in RSA site reviews at the request of CIL Directors.

Standard #2

The SILC will collaborate with CILs in the design, development, implementation, and evaluation of the SPIL.

Indicators

1. The SILC will work with CILs to conduct public forums and other mechanisms to gather information from people with disabilities in the development of the state plan.
2. The SILC will utilize CIL 704 reports and other tools to identify the trends for development of the state plan.
3. The SILC will cooperate, collaborate, and coordinate with CILs in the development of the design of the statewide network of CILs.
4. The SILC and CILs will collaborate on the design and implementation of tools to assess Consumer satisfaction with the state plan.

Autonomy

Standard # 1:

The SILC shall not be established as an entity within a state agency.

Indicator:

The SILC

- Develops its own vision and mission statement
- Reviews and monitors its own progress
- Controls the appointment process by recommending members
- Has freedom to advocate about issues of its own choice
- Develops statutory authority, procedures and other systematic methods for gaining, maintaining and protecting its autonomy
- Accounts for its decisions and actions
- The SPIL describes the status of the Council and how that status demonstrates the autonomy of the Council
- Has a code of ethical behavior for Council members
- Has a conflict of interest policy for Council members
- Has a plan for training/mentoring of new members
- Is responsible and accountable for the actions of the SILC

Standard # 2

The SILC shall prepare, in conjunction with the DSU, a plan for the provision of such resources as may be necessary and sufficient to carry out the functions of the Council.

Indicator:

The SILC

- Develops, adopts and controls its own budget
- Develops, implements and maintains sound fiscal policies and procedures

Standard # 3

Each SILC shall, consistent with state law, supervise and evaluate personnel necessary to carry out the functions of the Council.

Indicator:

The SILC develops, implements, and maintains sound personnel policies and procedures in accordance with its organizational structure.

Standard # 4

The SILC shall jointly develop and sign (in conjunction with the DSU) the SPIL.

Indicators:

The SILC:

- Develops, implements and monitors its SPIL
- Chairperson shall sign the SPIL upon a majority vote of the Council
- Has a process for reviewing and determining if the SPIL has been implemented

SILCs as System Advocates

Standard #1:

The Council shall direct and develop the resources (including but not limited to funds, staff, volunteers, Council members, and partners) necessary to implement advocacy for systems change.

Indicators:

1. The Council will identify in the SPIL the resources to carry out advocacy efforts towards systems change.
2. The Council will identify in the SPIL a contingency process to address unexpected emerging issues.
3. The Council will identify in the SPIL the process of expanding resources to carry out advocacy efforts which are addressed by the SPIL but are unfunded due to limited SILC resources.
4. The Council will report the percentage of their resources being used to implement advocacy efforts for systemic change.

Standard #2:

The Council will develop and implement advocacy efforts that promote the IL philosophy and results in meaningful and measurable systemic change.

Indicators:

1. The Council will identify priority systems change issues through statewide Consumer input.

2. The Council will develop a specific action plan for implementation of advocacy efforts toward their priority systems change issues.

3. The Council will establish a method for annual evaluation of the effectiveness of their action plan.

Standard #3:

The Council will develop and strengthen the network of CILs, including supporting their advocacy efforts.

Indicators:

1. The Council will work with the CILs to create statewide advocacy efforts toward systemic change.

2. The Council will share with CILs statewide Consumer input, including input from Consumers in unserved and underserved areas and populations, regarding systems change issues that need to be addressed by the network of CILs.

3. The Council will jointly plan with the CILs and DSU to determine systems change issues.

Standard #4:

The Council shall set forth the steps that will be taken to maximize the cooperation, coordination, and working relationships with other advocates working toward systemic change.

Indicators;

1. The Council will work with the CILs to establish statewide advocacy networks that partnership with coalitions and others who are addressing common systemic change issues.

2. The Council will identify the partners in the SPIL that they are working with in advocacy efforts to address systemic change issues.

3. The Council will outreach to additional organizations and partners in order to effectively address system change issues.

4. The Council will provide evidence in their role of the partnerships in the resource plan and evaluation process.

Attachment 3 – SILC Council Members & Staff

Council Members

Saul Herrera, Chairperson
County: Midland
Term: Expires on October 24, 2013
Position: Person with a disability

Randell Resneder, Vice-Council
Chairperson
County: Lubbock
Term: Expires on October 24, 2015
Position: Person with a disability

Karen Swearingen, Secretary
County: Dallas
Term: Expires on October 24, 2013
Position: Parent of person with a disability

Jim Batchelor, Council Member
County: Delta
Term: Expires on October 24, 2014
Position: Person with a disability

Shannon Alexander, Council Member
County: Brazos
Term: Expires on October 24, 2014
Position: Person with a disability

Calvin Turner, Council Member
County: Travis
Term: Expires on October 24, 2013
Anna Hundley, Council Member
Position: Person with a disability

County: Dallas
Term: Expires on October 24, 2014
Position: Advocate

Richard Couder, Council Member
County: El Paso
Term: Expires on October 24, 2015
Position: Advocate

Jim Brocato, Council Member
County: Jefferson
Term: October 24, 2015
Position: CIL Director

John Hobgood, Council Member
County: Lubbock
Term: October 24, 2015
Position: Person with a disability

Marc Gold, DADS
Position: Ex-Officio

Amy Kantoff, DARS
Position: Ex-Officio

Laurie Pryor, DBS
Position: Ex-Officio

SILC Staff

Office Location:
4319 James Casey, Ste. 100
Austin, TX 78745

Phone: 512-371-7353
Fax: 512-371-7370
Website: www.TXSILC.org

Name: Regina Blye
Title: Executive Director
Email: Regina@txsilc.org

Name: Sandra Breitengross Bitter
Title: Project Specialist
Email: Sandra@txsilc.org

Name: Christina Goebel
Title: Project Specialist
Email: Cgoebel@txsilc.org

Name: Christine Martin
Title: Web/ Marketing Specialist
Email: Christine@txsilc.org

Name: Seth Reed
Title: Financial Officer
Email: Seth@txsilc.org



ASSESSMENT OF ADVISORY COMMITTEES
April, 2016
538 - Department of Assistive and Rehabilitative Services

To assist in the process required by Chapter 2110, Texas Government Code, state agencies should submit an assessment of advisory committees using the format provided. Please submit your assessment for each advisory committee under your agency's purview. Include responses for committees created through statute, administrative code or ad-hoc by your agency. Include responses for all committees, whether ongoing or inactive and regardless of whether you receive appropriations to support the committee. Committees already scheduled for abolishment within the 2016-17 biennium are omitted from the scope of this survey. When submitting information for multiple advisory committees, right-click the sheet "Cmte1", select Move or Copy, select Create a copy and move to end.

NOTE: Only the items in blue are required for inactive committees.

SECTION A: INFORMATION SUBMITTED THROUGH ADVISORY COMMITTEE SUPPORTING SCHEDULE IN LEGISLATIVE APPROPRIATIONS REQUEST

Committee Name:

Number of Members:

Committee Status (Ongoing or Inactive): Note: An Inactive committee is a committee that was created prior to the 2014-15 biennium but did not meet or supply advice to an agency during that time period.

Date Created: **Date to Be Abolished:**

Budget Strategy (Strategies) (e.g. 1-2-4): **Strategy Title (e.g. Occupational Licensing):**

Budget Strategy (Strategies): **Strategy Title:**

State / Federal Authority
 State Authority

 State Authority

 State Authority
 Federal Authority
 Federal Authority

Select Type	Identify Specific Citation
Statute	Human Resources Code, Chapter 114, Texas Council on Autism and Pervasive Developmental Disorders (S.B. 257, 70th Legislature, Regular

Advisory Committee Costs: This section includes reimbursements for committee member costs and costs attributable to agency staff support.

Committee Members' <u>Direct</u> Expenses	Expended	Estimated	Budgeted
	Exp 2015	Est 2016	Bud 2017
Travel	\$8,771	\$6,663	\$12,500
Personnel	\$0	\$0	\$0
Number of FTEs	0.0	0.0	0.0
Other Operating Costs	\$75	\$588	\$500
<i>Total, Committee Expenditures</i>	\$8,846	\$7,251	\$13,000

Committee Members' <u>Indirect</u> Expenses	Expended	Estimated	Budgeted
	Exp 2015	Est 2016	Bud 2017
Travel	\$0	\$0	\$0
Personnel	\$0	\$0	\$0
Number of FTEs	0.0	0.0	0.0
Other Operating Costs	\$0	\$0	\$0
<i>Total, Committee Expenditures</i>	\$0	\$0	\$0

Method of Financing	Expended	Estimated	Budgeted
	Exp 2015	Est 2016	Bud 2017
Method of Finance			
1 - General Revenue Fund	\$3,697	\$2,157	\$3,250
	\$5,149	\$5,094	\$9,750
	\$0	\$0	\$0
	\$0	\$0	\$0
	\$0	\$0	\$0
Expenses / MOFs Difference:	\$0	\$0	\$0

Meetings Per Fiscal Year	2015	2016	2017
	0	0	0

Committee Description:

The TCAPDD was established by S.B. 257, 70th Legislature, Regular Session, 1987, adding Chapter 114, Texas Council on Autism and Pervasive Developmental Disorders, to the Human Resources Code. Based on the recommendation of a study published by the TCAPDD's titled, "Texas Autism Research and Resource Center: Feasibility and Cost Scenarios," the TARRC was established by H.B. 1574, 81st Legislature, Regular Session, 2009, and operates under Texas Human Resources Code, Section 114.013, Autism Spectrum Disorders Resource Center. Pursuant to the 2014-15 General Appropriations Act (Article II, Special Provisions, Section 10, 83rd Legislature, Regular Session, 2013, the executive director of the HHSC transferred administrative support for the TCAPDD and the TARRC from the Department of Aging and Disability Services (DADS), Strategy C.1.1., Central Administration, to the Department of Assistive and Rehabilitative Services (DARS), Strategy A.3.1, Autism Program, on September 1, 2014. At DARS, administrative support for the TCAPDD and the TARRC continue under the management of the DARS Office of Autism Services. The DARS Office of Autism Services also includes the DARS Autism Program. The TCAPDD is administratively supported by 1 FTE (TARRC Coordinator, Program Specialist VI). The position is budgeted out of the TARRC budget, rather than the TCAPDD budget. The purpose of the TCAPDD is to advise and make recommendations to state agencies and the state Legislature to ensure that the needs of persons of all ages with autism spectrum disorder and their families are addressed and that available resources are coordinated to meet those needs. It should be noted that while the governor-appointed TCAPDD is scheduled to be abolished on 9/1/2016 with HHSC assuming responsibility for those activities covered under Human Resources Code, Chapter 114, HHSC executive commissioner is establishing through rule the Texas Autism Council as an executive commissioner-appointed advisory committee to replace the TCAPDD and perform the duties prescribed in Human Resources Code, Chapter 114.

SECTION B: ADDITIONAL COMMITTEE INFORMATION

Committee Bylaws: Please provide a copy of the committee's current bylaws and most recent meeting minutes as part of your submission.

1. When and where does this committee typically meet and is there any requirement as to the frequency of committee meetings?

2. What kinds of deliverables or tangible output does the committee produce? If there are documents the committee is required to produce for your agency or the general public, please supply the most recent iterations of those.

Pursuant to Human Resources Code, Chapter 114, Texas Council on Autism and Pervasive Developmental Disorders, the duties of the TCAPDD further include 1) authoring a biennial report and 2) maintaining a state plan. 1) Report - Not later than November 1 of each even-numbered year, the TCAPDD shall submit a report to the governor, lieutenant governor, and speaker of the house. The report shall identify any additional services or improvements necessary to meet the needs of persons with autism spectrum disorder and their families. 2) State Plan - The TCAPDD shall develop and maintain a state plan to provide services to persons with autism spectrum disorders and make written recommendations.

3. What recommendations or advice has the committee most recently supplied to your agency? Of these, which were adopted by your agency and what was the rationale behind not adopting certain recommendations, if this occurred?

The Department of Assistive and Rehabilitative Services requested an exceptional item for \$675,000 in fiscal year 2016 and \$1,115,000 in fiscal year 2017 to fund the Office of Autism Services. If the exceptional item had been funded, the Office of Autism Services would have provided the following based on the recommendation of the TCAPDD: Early Universal Screening, Online Parent Training, First Responder Training, Training for Professionals, TARRC Research Conference, ASD Registry Study, Evaluation of the DARS Autism Program and Innovative Treatment Pilots, TCAPDD/TARRC Coordinator, TCAPDD Council Travel, Community Assessment and Planning Toolkit, Collaboration, Resource for the ombudsman. The exceptional item was not funded.

4a. Does your agency believe that the actions and scope of committee work is consistent with their authority as defined in its enabling statute and relevant to the ongoing mission of your agency?

4b. Is committee scope and work conducted redundant with other functions of other state agencies or advisory committees?

5a. Approximately how much staff time (in hours) was used to support the committee in fiscal year 2015?

5b. Please supply a general overview of the tasks entailed in agency staff assistance provided to the committee.

The coordinator (Program Specialist VI) for the TARRC provides administrative support for the TCAPDD. This includes posting public meetings in the Texas Register, taking minutes at council meetings, serving as an expert on Robert's Rules, and making travel arrangements for council members to conduct council business. Additionally, DARS technical writers assist in editing the councils biennial report, the DARS management reviews the report, the DARS accessibility team creates an accessible version of the report, and the DARS web support team creates an HTML version to be posted on the DARS public-facing website.

6. Have there been instances where the committee was unable to meet because a quorum was not present?

Please provide committee member attendance records for their last three meetings, if not already captured in meeting minutes.

7a. What opportunities does the committee provide for public attendance, participation, and how is this information conveyed to the public (e.g. online calendar of events, notices posted in Texas Register, etc.)?

The committee takes public comment at all meetings. Meeting notices are posted on the DARS website and in the Texas Register.

7b. Do members of the public attend at least 50 percent of all committee meetings?

7c. Are there instances where no members of the public attended meetings?

8. Please list any external stakeholders you recommend we contact regarding this committee.

None

9a. In the opinion of your agency, has the committee met its mission and made substantive progress in its mission and goals?

9b. Please describe the rationale for this opinion.

The TCAPDD prepares a biennial report with agency recommendations. The agency has acted on these recommendations by seeking an exceptional item for the 2016-2017 biennium. Also, TCAPDD members participate in the HRSA State Planning Grant (Act Early Texas!). Finally, DARS solicits the input of the TCAPDD on TARRC activities, including the annual Texas Autism Research Conference.

10. Given that state agencies are allowed the ability to create advisory committees at will, either on an ad-hoc basis or through amending agency rule in Texas Administrative Code:

10a. Is there any functional benefit for having this committee codified in statute?

10b. Does the scope and language found in statute for this committee prevent your agency from responding to evolving needs related to this policy area?

10c. If "Yes" for Question 10b, please describe the rationale for this opinion.

Not Applicable

11a. Does your agency recommend this committee be retained, abolished or consolidated with another committee elsewhere (either at your agency or another in state government)?

Retain

11b. Please describe the rationale for this opinion.

Based on analysis recently conducted and recommendations approved by the HHSC Executive Commissioner on 10/31/15, this advisory committee should be retained.

12a. Were this committee abolished, would this impede your agency's ability to fulfill its mission?

No

12b. If "Yes" for Question 12a, please describe the rationale for this opinion.

Not Applicable

13. Please describe any other suggested modifications to the committee that would help the committee or agency better fulfill its mission.

Adopted
December 12, 2014

Texas Council on Autism and Pervasive Developmental Disorders

Bylaws

I. DESIGNATION

The organization referred to in this document shall be known as the Texas Council on Autism and Pervasive Developmental Disorders, hereinafter referred to as the "Council".

II. AUTHORIZATION

The Council is established pursuant to the Texas Council on Autism and Pervasive Developmental Disorders Act of 1987, Texas Human Resources Code, Chapter 114 and as amended by 77(R) SB 361 and 79(R) SB 882.

III. MISSION

The Council shall annually review, modify if appropriate, and adopt a Mission Statement. The Council shall advise and make recommendations to state agencies and the state legislature to insure that the needs of persons of all ages with autism or other pervasive developmental disorders and their families are addressed and that all available resources are coordinated to meet those needs.

IV. ADVISORY TASK FORCE AND COMMITTEES OF THE COUNCIL

The Council may establish special, ad hoc, and interim committees composed of professionals, advocacy groups, and family members of persons with autism or other pervasive developmental disorders to assist the Council in performing its duties.

The Council may identify regions and appoint Regional Committees to serve as local informational and advisory resources and be responsive to the specific needs and questions of the Council.

The Statewide Advisory Task Force on Autism and PDD shall be comprised of the Chairs of the Regional Committees. An additional ten members on the Statewide Advisory Task Force may be appointed by the chair of the Council so as to assure representation by people with autism spectrum disorders and their family members, advocacy groups, and professionals (i.e. higher education, research, allied organizations, etc.).

V. STATE PLAN

The Council shall develop a multi-year state plan in accordance with state statute, revised periodically, and, not later than November 1 in even-numbered years, a report providing recommendations on strategies to provide additional or improved services to persons with autism or other pervasive developmental disorders.

VI. DUTIES

The Council shall perform its duties as detailed in the Human Resources Code 114.007 and the Council's Policies and Procedures.

VII. PROGRAM FUNDING REQUESTS

Funding opportunities and requests shall be considered and allocated in accordance with Human Resources Code 114.009 – 114.112.

VIII. MEMBERSHIP

The Council is composed of:

- A. Seven public members, the majority of whom are family members of a person with autism or a pervasive developmental disorder, appointed by the governor with the advice and consent of the senate; and
- B. One representative from each of the following state agencies to serve as ex officio members:
 1. Department of Aging and Disability Services (DADS);
 2. Department of State Health Services (DSHS);
 3. Health and Human Services Commission (HHSC);
 4. Texas Education Agency (TEA);
 5. Department of Assistive and Rehabilitative Services (DARS); and
 6. Department of Family and Protective Services (DFPS).

IX. TERMS OF APPOINTMENT

- A. Public members appointed by the governor serve staggered two-year terms with the terms of three or four members expiring on February 1 of each year. The public members may be reappointed.
- B. A representative of a state agency serves at the pleasure of the commissioner or executive head of that agency.
- C. A public member is entitled to reimbursement of the travel expenses incurred by the public member while conducting the business of the Council, as provided in the General Appropriations Act.

X. COUNCIL OFFICERS

- A. The governor shall designate a public member of the Council as chairperson of the Council to serve in that capacity at the pleasure of the governor. In the absence of the chairperson, the vice-chair shall serve as the alternate for the

purpose of conducting Council business. Should the Council chairperson leave the Council for any reason during his/her term of office, the governor shall appoint a new chairperson.

- B. The vice-chair shall be selected annually by a vote of the public members. The vice-chair shall serve renewable one year terms, and shall be chosen from the public members of the Council. In the event of a vacancy in the position of chair, the vice-chair shall serve as interim chair until such time as the governor appoints a new chair.

XI. COUNCIL MEETINGS

- A. The Council shall meet at least quarterly.
- B. Notification of meetings and agendas shall be given at least two (2) weeks in advance.
- C. All meetings shall be conducted in accordance with the Open Meetings Act, Texas Government Code, Chapter 551.
- D. A quorum shall consist of one half of the public members.
- E. The most current edition of Robert's Rules of Order shall govern the conduct of business when applicable and not in conflict with these Bylaws.

XII. VOTING

All public members present shall be entitled to vote on all matters before the Council. Any actions taken by the Council must be approved by a majority vote of the public members present. All votes shall be recorded.

XIII. BYLAWS REVISIONS

The adoption of these Bylaws, and any revisions thereto, shall be executed on the basis of a favorable vote by at least two-thirds (2/3) of the public members.

Dr. Pamela Rollins
Council Secretary

12/12/14
Date



**Texas Council on Autism and
Pervasive Developmental Disorders
April 8, 2015
Region XIII Education Service Center
Austin, Texas**

Present: **Public Members**
Frank McCamant, Chair, Austin
Stephanie Sokolosky, Vice-Chair, Harlingen
Pamela Rollins, Secretary, Dallas
Ann Hart, Austin

Absent: Tammy Lemoine, Center
Callie Vivion-Matthews, Fort Worth
Daniel Durany, Fort Worth

Present: **Ex Officio Members**
Joan Cooksey - DARS
Barbara Kaatz - TEA
Donna Claeys - HHSC
Kristen Jones - DFPS
Michael Hastie - DSHS

Absent: Jennifer Carrillo - DADS

**DARS
Support
Staff:** Mike Bright

**Other
DARS
Staff:** Octavius Bonacquisti
Toysha Martin

Guests: Cyndi O'Toole

T.J. Martin
Jo Webber

Call to Order:

- The meeting was called to order by Chair Frank McCamant at 10:00 a.m.
- A quorum was present.

Approve the Minutes of the February 18, 2015 Meeting:

The Chair called for a review of the minutes of the February 18, 2015 Council meeting. Stephanie Sokolosky moved that the minutes be approved as corrected. Pam Rollins seconded the motion. The motion was adopted.

Chair's Update:

Frank McCamant reported on:

- Legislative action update (David Hagerla joined the conversation by teleconference)
- Update: Budget items
- Update: Sunset bills
- Update: Key bills including legislation on behavior analyst licensure and telemedicine

No action was required on Mr. McCamant's report.

Report of the Status of the State Advisory Task Force and Regional Committees – Ann Hart

Ann Hart reported on her committee's activity to date on this project.

The Council left the report pending until legislative action on the future of the Council is finalized.

Report on the National Autism Leadership Collaborative (NALC) – Frank McCamant

The Chair made a brief report on the activities of the NALC.

No action was required on the NALC report.

Update on the Act Early Texas! (AET!) State Planning Commission – Frank McCamant

No report was offered on this topic.

Review of Financial Statement – Mike Bright

Mike Bright reviewed the Council's financial statement through March 31, 2015.

Mr. Bright's report required no action by the Council.

Update on the 2015 Texas Autism Research Conference – Mike Bright

Mike Bright updated the Council on planning activities for the 2015 Texas Autism Research Conference. The conference will be held in Austin on June 18-19.

Mr. Bright's report required no action by the Council.

Public Comments: There were no public comments.

Review of Council Meeting Dates:

Council meeting dates for 2015:

- May 27, 2015
- September 9, 2015
- December 9, 2015

The Council cancelled the May 27, 2015 Council meeting and set the next meeting for July 22, 2015. The Chair asked Mike Bright to send out a memo to Council members reminding them of this change.

Adjournment:

There being no further business, the Chair adjourned the meeting at 11:55 a.m.

Respectfully submitted,

Mike Bright – TARRC coordinator



**Texas Council on Autism and
Pervasive Developmental Disorders (TCAPDD)
August 12, 2015
The Arc of the Capital Area
Austin, Texas**

Present: Public Members

Frank McCamant, Chair, Austin
Stephanie Sokolosky, Vice-Chair, Harlingen
Pamela Rollins, Secretary, Dallas
Ann Hart, Austin
Daniel Durany, Haltom City

Absent: Tammy Lemoine, Center
Callie Vivion-Matthews, Fort Worth

Present: Ex Officio Members

Joan Cooksey - DARS
Barbara Kaatz - TEA
Kristen Jones - DFPS
Jennifer Carillo - DADS

Absent: Donna Claeys - HHSC
Michael Hastie – DSHS

**DARS
Support
Staff:**

Mike Bright

**Other
DARS
Staff:**

Octavius Bonacquisti - Manager, Office of Autism Services
David Hagerla - Director, Center for Policy and External Relations

Guests: Stephen Aleman - Disability Rights Texas
Jo Webber - Austin Regional Advisory Committee
Pat Herndon - University of Texas
Cyndi O'Toole - Region XIII Education Servicer Center

Call to Order:

The meeting was called to order by Chair Frank McCamant at 10:15 a.m. A quorum was present.

Approve the Minutes of the April 8, 2015 Meeting:

The Chair called for a review of the minutes of the April 8, 2015 Council meeting.

Ann Hart moved that the minutes be approved as presented. Pamela Rollins seconded the motion. The motion was adopted.

Chair's Update:

Frank McCamant discussed the following:

- National Autism Leadership Summit
- 2015 Texas Autism Research Conference
- His intent to keep the Council productive and relevant in 2015-2016 as agency transition initiatives move forward.

Update on the Council's Contract with UTHealth:

Octavius Bonacquisti updated the Council on the status of the Council/DARS contract with UTHealth. UTHealth has indicated their intent to terminate the contract before the contract's expiration date. No funds have been expended and the deliverable has not been submitted.

No action was required on Mr. Bonacquisti's report.

Review of the June 30, 2015 Financial Statement:

Mike Bright presented the Council's June 30, 2015 financial statement.

No action was required on the financial statement.

84th Texas Legislature Summary:

David Hagerla discussed the results of the 84th Texas Legislature. Items discussed included:

- Budgets for ASD services including: the DARS Autism program, increased support for TEA Autism Spectrum Disorder (ASD) professional development, and new funding for the University of Houston at Clear Lake and Texas Higher Education Board to support ASD objectives
- Funding supporting the Council
- Funding supporting the Texas Autism Research and Resource Center (TARRC)

No action was required on Mr. Hagerla's report.

TCAPDD Transition Plan for HHSC Consolidation:

David Hagerla discussed the plans for transitioning DARS services to the Health and Human Services Commission (HHSC) including:

- DARS Autism Services
- TARRC
- TCAPDD

Specific points of discussion included:

- Purpose and timing of the Council's 2016 report
- Providing information to families attempting to access ASD services through an evolving service delivery system
- Opportunities for public input

No action was taken.

Other Discussion items:

The Council also discussed the following items:

- Medicaid funding of services for children with ASD
- Pending therapy rate reductions
- Which agency might be the future administrator for the SPG Implementation Grant

- Possible application in 2018 for Texas to become a Centers for Disease Control and Prevention (CDC) ASD Surveillance State
- Texas Education Agency directive to the field regarding services to children with ASD, especially speech and language services

No action was required.

Public Comments:

Pat Herndon, University of Texas, on disability rights and supported decision making legislation

Suzanne Potts, Executive Director of the Autism Society of Central Texas, updated Council members on upcoming projects

Setting Future Council Meeting Dates:

The Council set December 9, 2015 as the date of its next meeting. 2016 meeting dates will be established at the December meeting.

Adjournment:

There being no further business, the Chair adjourned the meeting at 11:50.

Respectfully submitted,

Mike Bright – TARRC Coordinator



**Texas Council on Autism and
Pervasive Developmental Disorders (TCAPDD)
December 9, 2015
Region 13 Education Service Center
Austin, Texas**

Call to Order:

The meeting was called to order by Chair Frank McCamant at 10:30 a.m. A quorum was present.

Present: **Public Members**
Frank McCamant, Chair - Austin
Stephanie Sokolosky, Vice-Chair - Harlingen
Ann Hart - Austin
Daniel Durany - Haltom City

Absent: Pamela Rollins - Dallas

Present: **Ex Officio Members**
Joanie Cooksey - DARS
Michael Hastie - DSHS

Absent: Barbara Kaatz - TEA
Kristen Jones - DFPS
Donna Claeys - HHSC
Jennifer Carrillo - DADS

**DARS
Support
Staff:** Mike Bright

**DARS
Staff:** Octavius Bonacquisti - Manager, Office of Autism Services
David Hagerla - Deputy Commissioner
Elias Lorenzana - Legal Services

Jennifer Kaut - DARS State Autism Specialist

Guests: Cyndi O'Toole - Region XIII Education Servicer Center
Linda Logan – Texas Council on Developmental Disabilities

Approval of the Minutes of the August 12, 2015 Council meeting:

The Chair called for a review of the minutes of the August 12, 2015 Council meeting.

Stephanie Sokolosky moved that the minutes be approved. Ann Hart seconded the motion. The motion was adopted.

Chair's Update:

Frank McCamant discussed recent conversations about the future of state advisory committees.

No Council action was required on the Chair's report.

Update: SB200 Transition and HHSC Advisory Committees - Joey Reed, HHSC

Joey Reed - Special Projects Coordinator, HHSC Office of Transformation updated Council members on the implementation of the SB200 transition process and the future of HHSC advisory committees.

Mr. Reed's report included:

- Transition of health and human services to a new organizational model required by the legislature
- The current status and future of HHSC advisory committees
- How Council members can offer input into the transition process.

The Chair urged members to submit public comments through the HHSC website.

No Council action was required on Mr. Reed's report.

REPORT: National Autism Leadership Collaborative (NALC) Meeting – Ann Hart, Stephanie Sokolosky, and Joanie Cooksey

Ann Hart, Stephanie Sokolosky, and Joanie Cooksey reported on the OCALI conference and the National Autism Leadership Collaborative.

Items addressed in this report included:

- Continued work on the NALC Collective Impact process
- NALC support to ASD programs in other states
- NALC influence on governmental policies at the federal level
- Involving non-participating states in NALC activities.

The Council discussed hosting a meeting of ASD leaders in south central states, possibly the day prior to the June 14-15, 2016 Autism Research Conference. No formal action was taken but this topic will be an item of consideration at the next Council meeting.

Mike Bright will identify ASD contacts in Oklahoma, New Mexico, Arkansas, and Louisiana and distribute conference invitations.

Mike Bright will send out a notice assessing the interest in other states in participating in a regional meeting.

Discussion: 2016 Report - Ann Hart

Ann Hart presented a rough draft of the Council's 2016 Report. Council members provided input to the report.

Ann Hart will continue to work on the draft report and present an updated version at the next Council meeting.

Update: Texas Higher Education Coordinating Board (THECB) - Stacey Silverman, Allen Michie, and James Goeman, THECB

Stacey Silverman updated the Council on the implementation of new THECB ASD legislative mandates.

The Chair noted that the Council, Jennifer Kaut, Joanie Cooksey, and Cyndi O'Toole would be valuable resources during the implementation process.

The Chair asked Ms. Silverman to present an update report at a future Council meeting.
No Council action was required on this update.

Review of the Financial Statement - Mike Bright, DARS

Mike Bright presented the November 30, 2015 Financial Statement. No Council action was required on the Financial Statement.

Public Comments:

There were no public comments.

Future Council Meeting Dates:

The Chair will survey members on Doodle to set the next meeting date.

Adjournment:

There being no further business, the Chair adjourned the meeting at 3:00 p.m.

Respectfully submitted,

Mike Bright – Coordinator
Texas Autism Research and Resource Center