

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

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

State Authority

State Authority
Federal Authority
Federal Authority
Federal Authority

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

Committee Members' Direct 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' Indirect 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
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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 activates 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 interpreter 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.

- Matters relating to recommendations on possible disciplinary actions and settlement of disciplinary actions relating to BEI certified interpreters.
- 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

- September 18, 2015
- 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			
July 24, 2015	Member's Name	Present	Absent
	Sharon Hill	X	
	Laura Hill	X	
	Lisa Bosson	X	
	Sherri Roberts	X	
	Deborah Martinez	X	
	Alaina Webb	X	
	Todd Agan		X
October 16, 2015	Member's Name	Present	Absent
	Sharon Hill	X	
	Laura Hill	X	
	Lisa Bosson	X	
	Sherri Roberts	X	
	Deborah Martinez	X	
	Alaina Webb	X	
	Todd Agan	X	
January 8, 2016	Member's Name	Present	Absent
	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)	Member's Name	Present	Absent
	Sharon Hill		
	Laura Hill		
	Lisa Bosson		
	Sherri Roberts		
	Deborah Martinez		
	Alaina Webb		
	Todd Agan		

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:

Early Childhood Intervention Advisory Committee (ECI AC)

Number of Members:

22

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

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:

1997

Date to Be Abolished:

N/A

Budget Strategy (Strategies)
(e.g. 1-2-4)

1.1.1

Strategy Title (e.g. Occupational Licensing)

ECI Services

Budget Strategy (Strategies)

Strategy Title

State / Federal Authority	Select Type	Identify Specific Citation
State Authority	Statute	Human Resources Code Chapter 117
State Authority	Admin Code	T.A.C.§101.507 regulations
State Authority	Statute	United States Code, Title 20,
Federal Authority	Rules	34 C.F.R. Part 303, Subpart G
Federal Authority		
Federal Authority		

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	\$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
	Total, Committee Expenditures	\$9,943	\$13,887	\$14,000
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
	Total, Committee Expenditures	\$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	\$18,757	\$13,746	\$22,000
		\$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 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 staff spends 5-15% of their time on ECI AC activities.

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? The ECI AC meets quarterly in Austin. It is required to meet quarterly.

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 ECI AC advises and assists DARS ECI in the development and implementation of the policies that constitute the statewide ECI System.

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?

ECI AC members review and approve the Annual Performance Report (APR) yearly and set targets for four performance indicators every four years which is submitted to the Office of Special Education Programs (OSEP). In 2015, the performance targets were reviewed by the ECI AC. All the members’ recommendations for the performance targets were accepted and will be followed for the next four years. Members review past program performance targets, current factors that may impact performance and stakeholder feedback when determining the new performance targets. ECI is also currently developing the State Systemic Improvement Plan (SSIP) which is a new OSEP indicator that focuses on child outcomes versus performance. The ECI AC members are involved in this initiative and because of their vast professional expertise and statewide representation; they have assisted the ECI program in identifying gaps and developing strategies that will improve child outcomes. ECI AC members reviewed and provided feedback on Phase 1 and Phase 2 of the SSIP which were submitted to OSEP April 1, 2015 and 2016.

Additionally this past fiscal year, ECI AC members reviewed several proposed rules and provided valuable comment and requested more clarity on the proposed language and processes.

And finally, they have advocated for educational materials that focus on the importance of ECI to explain the overall return on investment, cost effectiveness, positive impact and value of ECI services for Texas families and children. An informational piece, “The Value of ECI,” was created as a tool to assist staff and stakeholders as an outreach and public awareness tool that is now being used statewide to help with educating stakeholders on the benefit, value and effectiveness of ECI services.

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?

941.0

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

ECI AC Liaison tasks: Plans, organizes, and conducts or facilitates the ECI AC quarterly meetings to support ongoing program operations. Duties include coordinating the work of the 24 member federally required ECI advisory committee. Works with Chair, Chair-Elect and ECI Assistant Commissioner to plan four quarterly meetings including setting annual meeting dates, preparing agenda, helping ECI staff and others prepare for presentations, coordinating with support staff to arrange for travel, requested accommodations for persons with disabilities, transcribing minutes, distributing minutes to members, following up with ECI staff and others to address any concerns raised in meetings; coordinating distribution of materials, assuring publication of the agenda in a timely manner and other supports as needed. ECI Staff also assist with logistics and preparation of materials presented to the ECI Advisory Committee. ECI staff also present at each meeting therefore presentation preparation is required and staff time is spent in preparation of each meeting.

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

No

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 Texas Register and 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?

No

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

Clayton Travis, Texas Pediatric Society, Stephanie Rubin, Texans Care for Children, Steven Aleman, Disability Rights Texas, Martha Aki, Katy ISD

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.

Yes, the ECI AC members are comprised of various stakeholders that represent specific early intervention/childhood groups state and system wide. Due to the members broad expertise and statewide representation, Advisory Committee members provide input and share the mission of ECI in their local communities.

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 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

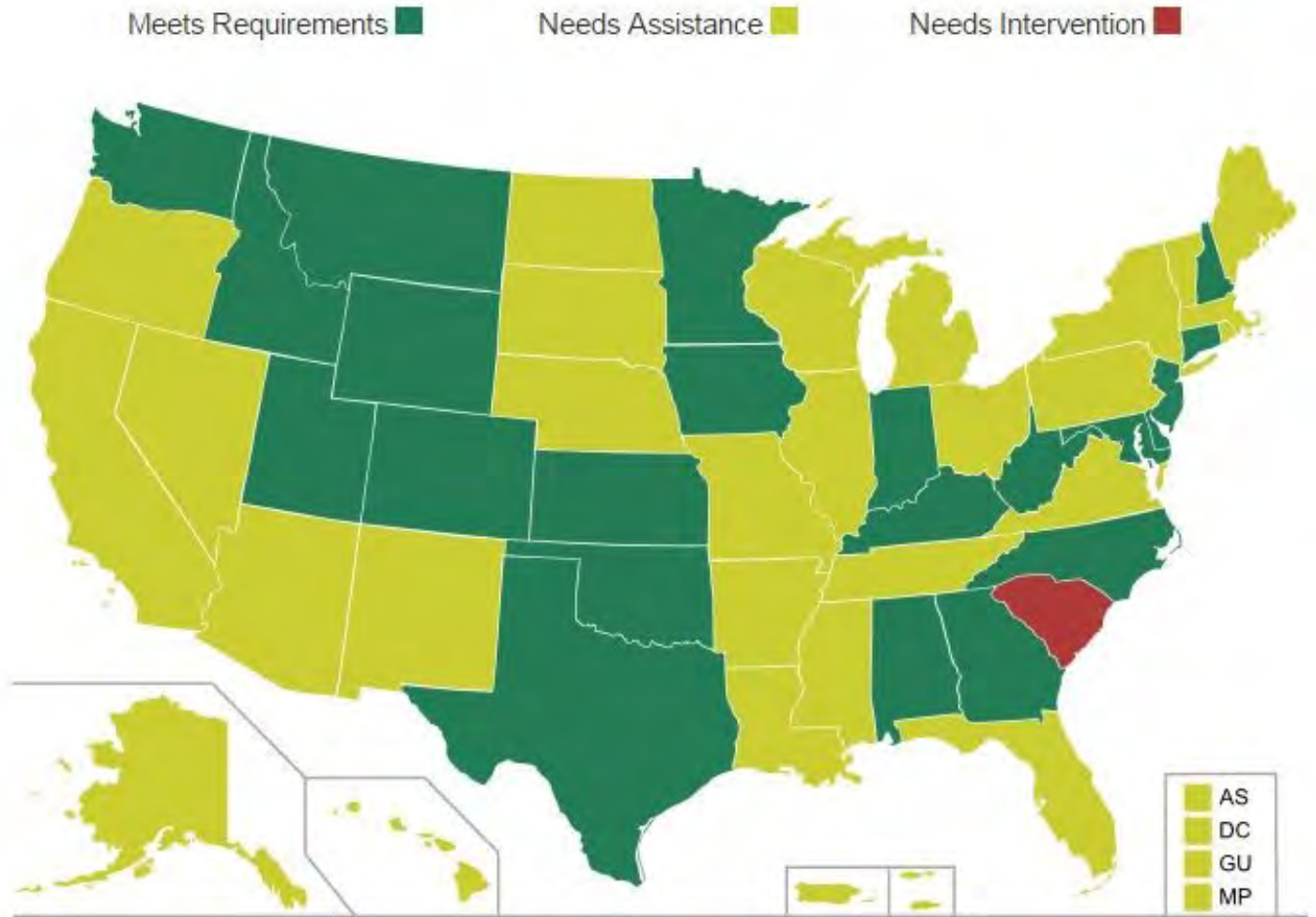
1. We will continue to focus on strengthening and supporting our contractor base, including:
 - Working to improve the performance of the system as a whole; and
 - Evaluating state requirements to more closely align with federal requirements.
2. We will continue to work to ensure efficient oversight 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:



- 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

Children Referred and Serviced

Data Points (as of June 2015)	SFY 2014	Q1 SFY 2015	Q2 SFY 2015	Q3 SFY 2015	SFY 2015 YTD as of June 2015
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% 2015 Target = 28,372 2015 % of Target Met = 92.3%	25,912	26,057	25,744	26,476	26,174
Cumulative Total Clients Served (unduplicated)	49,685	30,458	36,607	43,745	46,202

Delivered Services and Evaluations

Data Points (as of June 2015)	SFY 2014	Q1 SFY 2015	Q2 SFY 2015	Q3 SFY 2015	SFY 2015 YTD as of June 2015
Average Monthly Delivered Service Hours (not parent arranged)	69,603	69,286	66,083	73,749	70,267
Average Service Hours per Child per Month (Average Monthly Delivered Service Hours ÷ Average Monthly Served) 2014 Target = 2.90 % of Target Met = 92.8% 2015 Target = 2.90 % of Target Met = 92.6%	2.69	2.66	2.57	2.79	2.68
Average Monthly SC/TCM Hours	17,748	15,622	14,457	15,699	N/A
Average Monthly SC/TCM Hours per Child per Month (Average SC/TCM Hrs ÷ Average Monthly Served)	0.68	0.60	0.56	0.59	N/A
Average Monthly Initial Comprehensive Evaluations	3,283	3,325	3,055	3,568	N/A

Expenditures and Collections

Data Points (as of June 2015)	SFY 2014	Q1 SFY 2015	Q2 SFY 2015	Q3 SFY 2015	SFY 2015 YTD as of June 2015
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	N/A
% of overall expenditures locally collected funds* (Locally collected Funds / (DARS contract expenditures + Locally Collected Funds))	56.2%	42.5%	48.1%	50.6%	N/A

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.

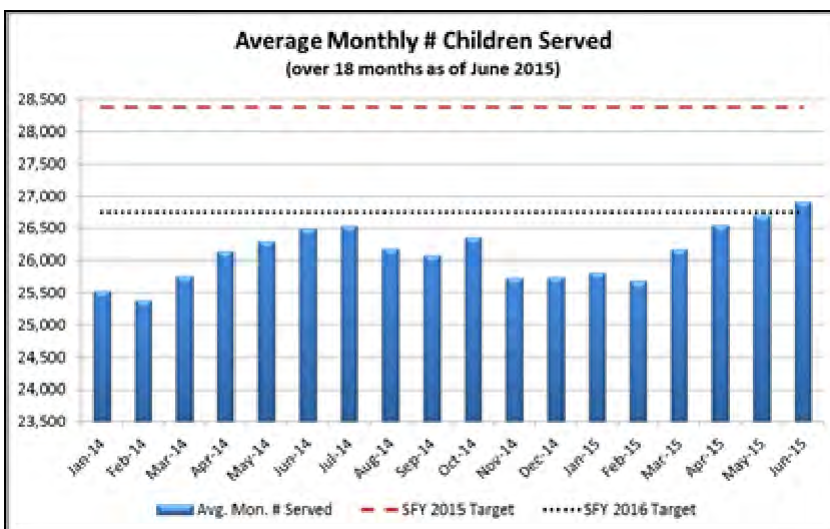
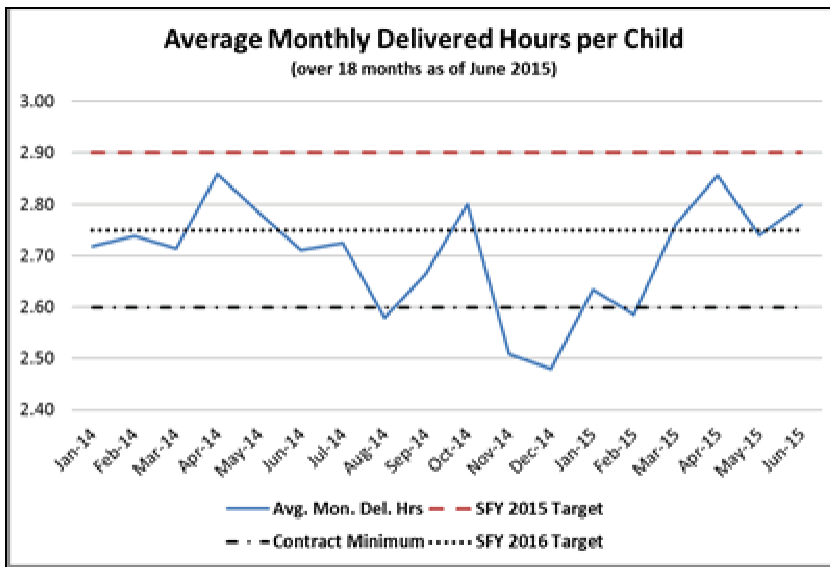
"Initial Comprehensive Evaluations" are measured quarterly. Monthly averages are calculated from the quarterly measurement. An initial comprehensive evaluation is used to determine eligibility for children who do not have a qualifying diagnosis or a documented hearing or vision impairment that meets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

Children Referred and Serviced

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
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%	25,912	26,055	25,739	26,476	26,813	26,269	26,776
2015 Target = 28,372							
2015 % of Target Met = 92.6%							
Cumulative Total Clients Served (unduplicated)	49,685	30,458	36,607	43,745	50,631	50,631	26,776

Delivered Services and Evaluations

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
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	N/A

Expenditures and Collections

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
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%	N/A	N/A	N/A

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:			
Reason Eligible*	Percent (SFY 2013)	Percent (SFY 2014)	Percent (SFY 2015)
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: **			
Reason Eligible*	Percent (SFY 2013)	Percent (SFY 2014)	Percent (SFY 2015)
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

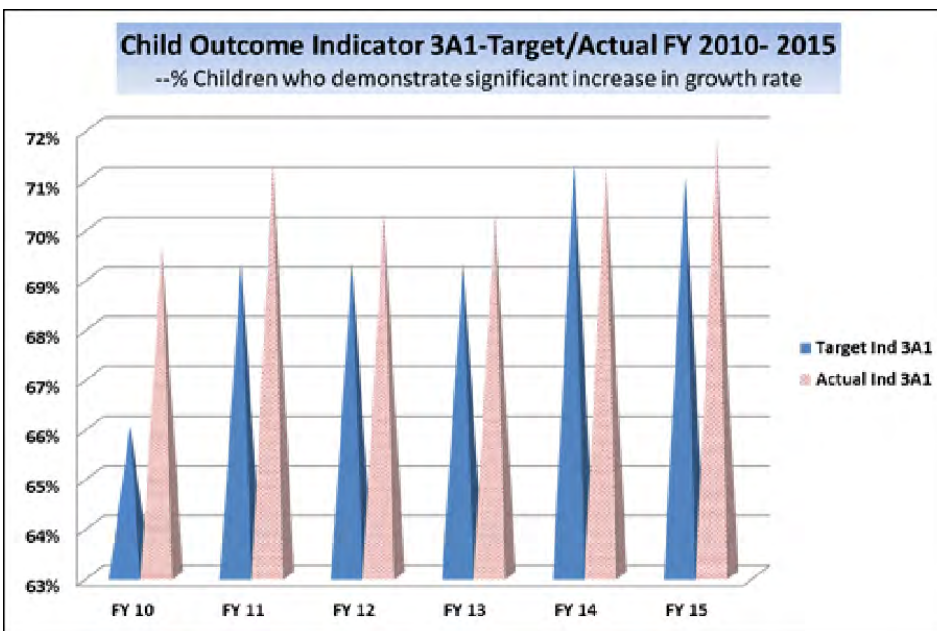
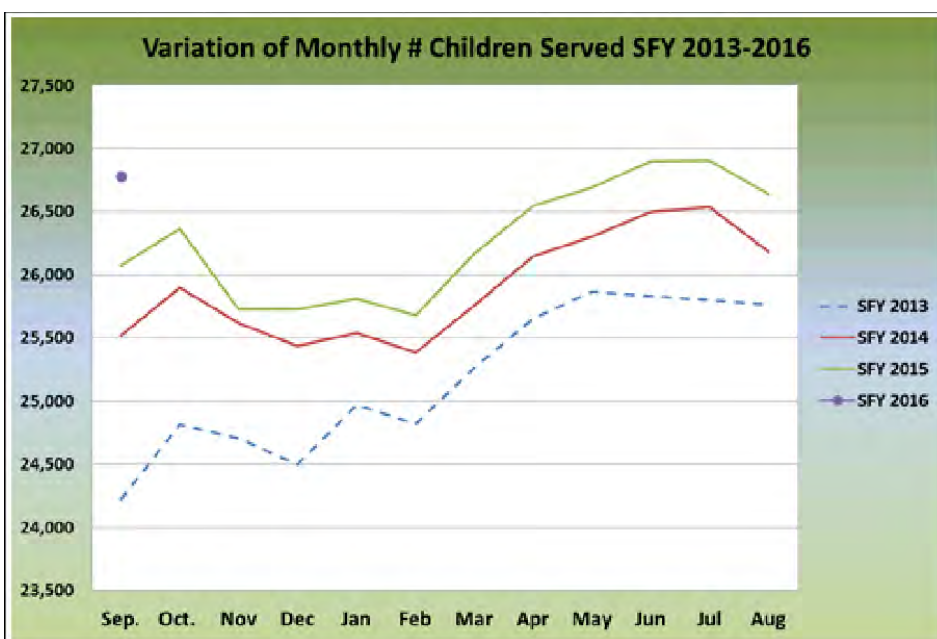
Planned Service Types	Percent (SFY 2013)	Percent (SFY 2014)	Percent (SFY 2015)
Service Coordination	100	100	100
Specialized Skills Training (Developmental Services)	84	83	82
Speech Language Therapy	55	58	59
Occupational Therapy	30	30	30
Physical Therapy	24	25	26
Nutrition	9	8	8
Psychological/Social Work	6	5	4
Audiology	2	2	2
Vision	2	2	2
Behavioral Intervention	N/A	1	1

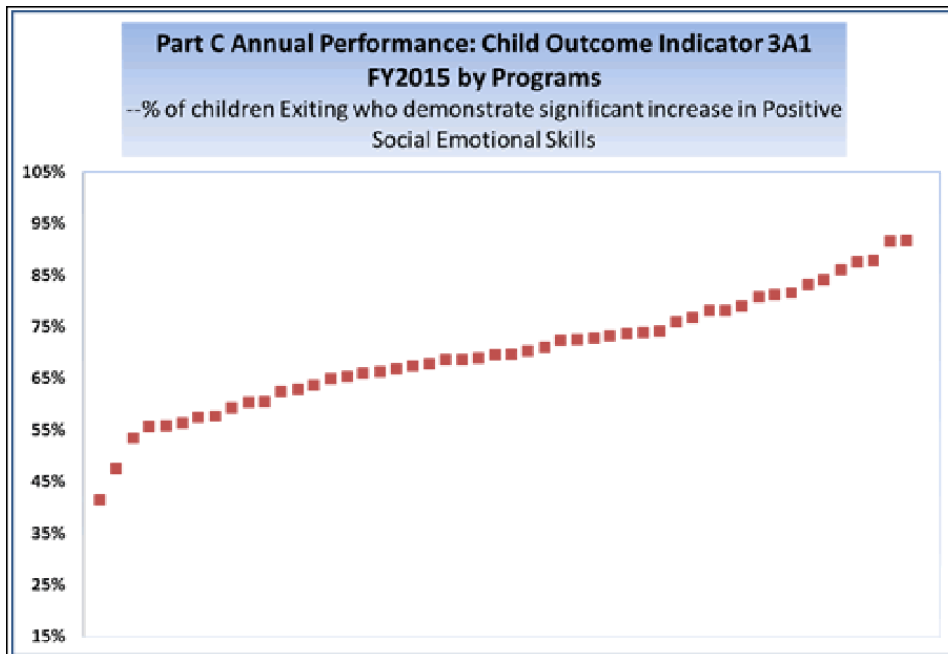
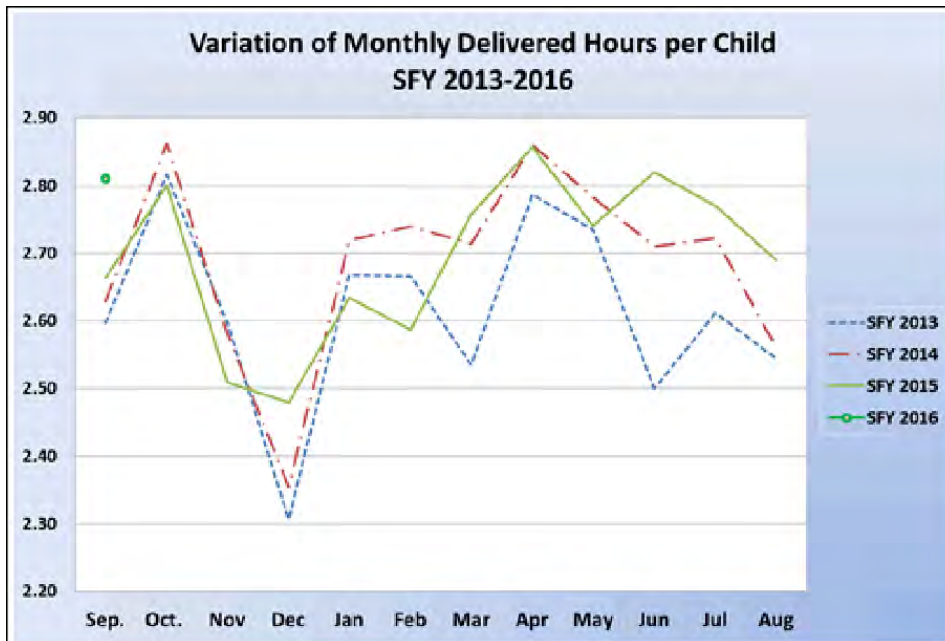
Race/Ethnicity ***	Percent (SFY 2013)	Percent (SFY 2014)	Percent (SFY 2015)
Hispanic/Latino	52	53	52
White	35	35	36
Black/African American	10	10	9
Asian/Pacific Islander	3	3	3
American Indian/Alaskan	<1	<1	<1
Two or More Races	1	1	1

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

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

Understanding the Keys to Successful Supervision
WHAT? WHY? HOW? WHO? WHEN? MORE RESOURCES
Incorporate strategies to enhance efficiencies in supervision.

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

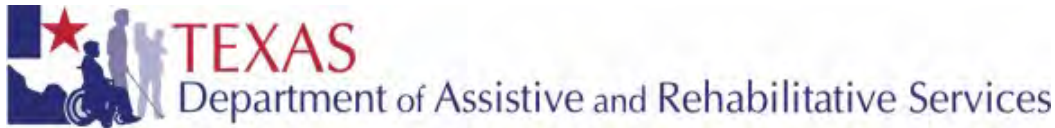
Move to investing in staff supervision to make a positive impact in the lives of children and families

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:	<u>SS1</u> <u>SS2</u>	<u>SS1</u> <u>SS2</u>	<u>SS1</u> <u>SS2</u>
a. Positive social-emotional skills;	71.8 53.8	71.3 53.4	71.0 53.8
b. Acquisition and use of knowledge and skills;	77.7 44.3	77.4 45.0	77.1 45.1
c. Use of appropriate behaviors to meet their needs.	78.1 51.3	77.7 51.4	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;	87.5%	86.6%	87.0%
b. Effectively communicate their children's needs;	88.2%	87.7%	87.7%
c. Help their children develop and learn.	88.7%	87.8%	87.8%
EFFECTIVE GENERAL SUPERVISION OF PART C			
<i>Child Find</i>	SFY 2015 Performance FFY 2014	SFY 2014 Performance FFY 2013	Target FFY 2014
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%
<i>Effective Transition</i>	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:			
a. IFSPs with transition steps and services;	97.2%	98.9%	100%
b. Notification to LEA, if child is potentially eligible for Part B;	95.2%	98.7%	100%
c. Transition conference, if child is potentially eligible for Part B.	95.8%	96.8%	100%

General State Supervision	SFY 2015 Performance FFY 2014	SFY 2014 Performance FFY 2013	Target FFY 2014
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 fewer than 10 complaints per year.
10. Percent of mediations held that resulted in mediation agreements.	0	0	Not required if fewer than 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

Types of Supervision

- Administrative
- Clinical
- Reflective

Understanding the Keys to Successful Supervision

WHAT?
What is supervision?
Types of supervision

WHY?
Value of reflective supervision
Benefits to family, staff, community

HOW?
How to observe & provide reflective supervision
How to keep staff comfortable
How to create a supportive community of reflective supervision

WHO?
Skills & abilities of effective supervisors
Self-reflection

WHEN?
Frequency
Timing

MORE RESOURCES
Group supervision
Supervision tools

Check Your Understanding
Lily explains you about the lack of progress for a child on her caseload. You go with Lily to the visit to help provide additional clinical guidance.

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

Follow various approaches to reflective supervision through video demonstrations.

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

Incorporate strategies to enhance efficiencies in supervision.

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.

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	SFY2015	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

Public Law	Rehabilitation Act of 1973, as amended by the Workforce
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
Total, Committee Expenditures		\$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
Total, Committee Expenditures		\$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 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?

The SILC meets quarterly in different locations across Texas. It typically meets in Austin once a year. It is required to meet quarterly.

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 SILC is required to participate in the development of the State Plan for Independent Living (SPIL), monitor, review and evaluate the SPIL; coordinate activities with the Rehabilitation Council of Texas; submit periodic reports requested; and keep all records and afford access as necessary to verify periodic reports. The SILC may also hold public hearings forums as necessary to carry out its duties. This SILC provides information annually to the federal funding source as a part of the required 704 Report.

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 SILC provides updates on the implementation of the goals and objectives of the State Plan for Independent Living on a quarterly basis as part of the SILC meetings. DARS has worked very closely with the SILC on the development of a framework to measure consumer outcomes and a return on investment methodology which will be used by the Centers for Independent Living.

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?

150.0

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

Agency staff serve as Ex Officio members and monitor and support the grant.

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.)?

Time is set aside in each meeting for public comment and meeting notices are published in the Texas Register 30 days in advance.

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

No

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.

The Texas Centers for Independent Living

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.

The SILC worked on the development of the 2014-2016 State Plan for Independent Living (SPIL) and had been monitoring that SPIL. They are currently working on the 2017-2019 SPIL.

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?

No

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.

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

State Plan for Independent Living Instrument - 2013 Extension
State: Texas

State Plan for Independent Living

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 2017-2019

Effective Date: October 1, 2016

OMB NUMBER: 1820-0527

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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 (State Plan for Independent Living 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 Texas Health and Human Services Commission. *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 N/A (insert name of separate State agency). Indicate N/A if not applicable. *34 CFR 76.104(a)(1) and (2); 34 CFR 364.20(d) and 364.22(c)*
- 1.3 The Statewide Independent Living Council 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 State Independent Living Council are authorized to jointly develop, sign and submit this State Plan for Independent Living on behalf of the State, and have adopted or otherwise formally approved the State Plan for Independent Living. *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 State Plan for Independent Living. *34 CFR 76.104; 34 CFR 80.11(c)*
- 1.6 The State Plan for Independent Living is the basis for State operation and administration of the program. All provisions of the State Plan for Independent Living are consistent with State law. *34 CFR 76.104(a)(4) and (8)*
- 1.7 The representative of the DSU and, if applicable, of the separate State agency authorized to provide VR services to individuals who are blind, who has the authority under State law to receive, hold, and disburse Federal funds made available under the State Plan for Independent Living and to submit the State Plan for Independent Living jointly with the State Independent Living Council chairperson, Jimmy Batchelor, and Charles Smith, Executive Commissioner, Texas Health and Human Services Commission, and _(Name, title of separate State agency director, if applicable). *34 CFR 76.104(a)(5) and (6)*

Section 2: State Plan for Independent Living 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:
- The provision of State Independent Living Services;
 - The development and support of a statewide network of Centers for Independent Living; and
 - 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 State Independent Living Council 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 364.20(g)(1)*
- 2.3 The DSU and State Independent Living Council establish and maintain a written description of procedures for conducting public meetings in accordance with the following requirements. The DSU and State Independent Living Council shall provide:
- 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 State Independent Living Council);
 - 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
 - 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 State Independent Living Council identify those provisions in the State Plan for Independent Living 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 Independent Living 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 Texas State Independent Living Council 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 Independent Living 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 Independent Living Services under chapter 1 of title VII about:
- the availability of the CAP authorized by section 112 of the Act;
 - the purposes of the services provided under the CAP; and
 - 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 Independent Living Services under the SILS and CIL programs authorized under chapter 1 of title VII of the Act. Any individual may seek information about Independent Living 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 Independent Living Services under the SILS and Center for Independent Living 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 Independent Living 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 Independent Living Services from receiving Independent Living 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 Independent Living 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:
- 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 Independent Living Services under title VII of the Act; and
 - in the native languages of individuals with significant disabilities whose English proficiency is limited and who apply for or receive Independent Living 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 Independent Living Services and, if appropriate, in administering the Center for Independent Living program. The staff development programs emphasize improving the skills of staff directly responsible for the provision of Independent Living 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:
- the amount and disposition by the recipient of that financial assistance;
 - The total cost of the project or undertaking in connection with which the financial assistance is given or used;
 - the amount of that portion of the cost of the project or undertaking supplied by other sources;

- compliance with the requirements of chapter 1 of title VII of the Act and Part 364 of the regulations; and
- other information that the Commissioner determines to be appropriate to facilitate an effective audit. *34 CFR 364.35(a) and (b)*

7.2 With respect to the records that are required by 34 CFR 364.35, 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. *34 CFR 364.36*

7.3 All recipients of financial assistance under parts B and C of chapter 1 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)*

Section 9: Signatures

After having carefully reviewed all of the assurances in sections 1 - 8 of this State Plan for Independent Living, the undersigned hereby affirm that the State of Texas is in compliance and will remain in compliance with the aforementioned assurances during FY 17-19.

The effective date of this State Plan for Independent Living is October 1, 2016.

SIGNATURE OF SILC CHAIRPERSON

DATE

Jimmy Batchelor

NAME OF SILC CHAIRPERSON

SIGNATURE OF DSU DIRECTOR

DATE

Charles Smith, Executive Commissioner, Texas Health and Human Services
Commission

NAME AND TITLE OF DSU DIRECTOR

N/A

SIGNATURE OF DIRECTOR OF THE SEPARATE
STATE AGENCY FOR INDIVIDUALS WHO ARE BLIND

DATE

N/A

NAME AND TITLE OF THE DIRECTOR OF THE
SEPARATE STATE AGENCY FOR INDIVIDUALS WHO ARE BLIND

State of: TEXAS

Part II: Narrative

Section 1: Goals, Objectives and Activities

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

Describe the overall goals and mission of the State's IL programs and services. The State Plan for Independent Living must address the goals and mission of both the State Independent Living Services and the Center for Independent Living programs, including those of the State agency for individuals who are blind as they relate to the parts of the State Plan for Independent Living administered by that agency.

Mission: “To empower Texans with disabilities to live as independently as they choose.”

Goal 1—Advocacy: Texans with disabilities receive necessary supports and services to become more independent.

Goal 2—Network Capacity and Sustainability: The Independent Living Network operates effectively, is adequately funded, and has the capacity to expand.

Goal 3—Community Integration: Individuals with disabilities receive the community integration and community-based living supports needed to be more independent.

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.

The indicators and target progress levels set for each objective are totals to be achieved on a statewide basis and are collective of all activities to be achieved during the specified time period and by the identified organization(s) and partners.

Goal 1—Advocacy: Texans with disabilities receive necessary supports and services to become more independent.

Objective 1.1—Systems Change: Individuals with disabilities are represented on boards, commissions, advisory committees, and other planning bodies with jurisdiction over services that impact individuals with disabilities.

Measurable Indicators:

- Number of presentations given on an annual basis; participation rate by Centers
- Number of outreach toolkits for boards/commissions
- Number of outreach toolkits/trainings for advocates

Scope: Statewide

Target Performance Levels for 2019: Boards/Commissions are identified; advocate and board toolkits created and utilized

Target Progress for FY17-19:

- FY17: Boards and commissions that have disabilities represented are identified; Boards and Commissions targeted for outreach are identified
- FY18: Centers for Independent Living/Texas State Independent Living Council create board outreach toolkit; utilize toolkit
- FY19: Centers for Independent Living/Texas State Independent Living Council create advocate toolkits; utilize toolkit

Activities:

- Identify the boards and commissions that have disabilities represented
- Encourage boards and commissions to place individuals with disabilities on their boards
 - Presentations to Council of Governments, education boards, etc. and their staff by Centers for Independent Living
- Create an outreach toolkit for boards/commissions to bring awareness to disability types and their influence
- Create an outreach toolkit and training protocol for advocates
- Bring awareness of accessibility issues of public meetings

Lead Organizations: Centers for Independent Living

Potential Partners: Texas State Independent Living Council, Disability Rights of Texas, The Arc of Texas, Texas Council on Developmental Disabilities, Coalition of Texans with Disabilities, ADAPT of Texas

Funding Sources: State General Revenue; SSA-VR; Title VII Part B; Title VII Part C; Program Funds; Unrestricted Funds

Objective 1.2—Personal Care Attendants: Individuals with disabilities have access to a strong network of quality Personal Care Attendants to assist them in gaining and retaining as much independence as they choose.

Measurable Indicators:

- Number of advocacy activities on personal care attendant issues
- Number of toolkits created for consumer support for personal care attendant issues
- Number of activities to increase awareness of consumer directed services to consumers

Scope: Statewide

Target Performance Levels for 2019: 150 advocacy activities on personal care attendant issues over 3 years; 150 activities on increasing awareness of consumer directed services for consumers; consumer support toolkit created and disseminated to 300 consumers.

Target Progress for FY17-19:

- **FY17:** 25 advocacy activities on personal care attendant issues; create consumer support toolkit; 25 activities to increase awareness of consumer directed services for consumers

- **FY18:** 50 advocacy activities on personal care attendant issues; distribute 150 consumer support toolkits; 50 activities to increase awareness of consumer directed services for consumers
- **FY19:** 75 advocacy activities on personal care attendant issues; distribute 150 consumer support toolkits; 75 activities to increase awareness of consumer directed services for consumers

Activities:

- Increase awareness of consumer directed services to consumers
- Advocate for retention activities, strategies including increasing wages for Personal Care Attendants
- Support the consumer in addressing issues with their personal care attendant; creation of a toolkit

Lead Organizations: Centers for Independent Living, Texas State Independent Living Council

Potential Partners: ADAPT of Texas, Personal Attendant Coalition of Texas, Coalition of Texans with Disabilities, Area Health Education Centers

Funding Sources: State General Revenue; SSA-VR; Title VII Part B; Title VII Part C; Program Funds; Unrestricted Funds

Objective 1.3—Emergency Preparedness: State and local emergency officials include individuals with disabilities and their unique needs in their emergency planning processes.

Measurable Indicators:

- Number of advocacy activities at the state level
- Number of advocacy activities at the local level; percent of Center for Independent Living engagement
- Number of activities to increase awareness in the disability community
- Feedback submitted on Texas Health and Human Services Commission plan

Scope: Statewide

Target Performance Levels for 2019: (Over the State Plan for Independent Living cycle) 15 advocacy activities at the state level; 60 advocacy activities at the local level; 60 advocacy activities to increase awareness in the disability community.

Target Progress for FY17-19:

- **FY17:** 5 advocacy activities at the state level; 20 advocacy activities at the local level; 20 advocacy activities to increase awareness in the disability community.
- **FY18:** 5 advocacy activities at the state level; 20 advocacy activities at the local level; 20 advocacy activities to increase awareness in the disability community.
- **FY19:** 5 advocacy activities at the state level; 20 advocacy activities at the local level; 20 advocacy activities to increase awareness in the disability community.

Activities:

- Increase awareness in the disability community of emergency preparedness; foster opportunities for tools and techniques for communicating with individuals with disabilities before and during disasters/emergencies
- Advocate at the state level to require individuals with disabilities to be included in disability planning

- Encourage participation of individuals with disabilities and Centers for Independent Living at the local level

Lead Organizations: Centers for Independent Living, Texas State Independent Living Council

Potential Partners: 211; Association of County Governments; Council of Governments; Area Agencies on Aging; Federal Emergency Management Agency; Red Cross; Texas Department of Public Safety, Texas Disability Task Force on Emergency Management, Texas Governor's Committee on People with Disabilities, local Offices of Emergency Management, Voluntary Organization Active in Disasters

Funding Sources: State General Revenue; SSA-VR; Title VII Part B; Title VII Part C; Program Funds; Unrestricted Funds

Objective 1.4—Transportation: Individuals with disabilities advocate for and utilize accessible public and private transportation.

Measurable Indicators:

- Number of advocacy activities with the Texas Legislature on policy changes
- Number of people trained as advocates for accessible transportation
- Number of advocacy activities for expanded accessible transportation
- Number of transportation summits held

Scope: Statewide

Target Performance Levels for 2019: (Over State Plan for Independent Living cycle) 25 advocacy activities with Texas Legislature on policy changes; 30 advocacy activities for expanded accessible transportation; 250 people trained as advocates for accessible transportation; 3 transportation summits held.

Target Progress for FY17-19:

- **FY17:** 5 advocacy activities with the Texas Legislature on policy changes; 10 advocacy activities for expanded accessible transportation; 100 people trained as advocates for accessible transportation; 1 transportation summit held.
- **FY18:** 5 advocacy activities with the Texas Legislature on policy changes; 10 advocacy activities for expanded accessible transportation; 50 people trained as advocates for accessible transportation; 1 transportation summit held.
- **FY19:** 5 advocacy activities with the Texas Legislature on policy changes; 10 advocacy activities for expanded accessible transportation; 100 people trained as advocates for accessible transportation; 1 transportation summit held.

Activities:

- Advocate for accessible transportation with the Texas Legislature on specific recommendations for policy changes
- Train consumers/general public to be transportation advocates
- Advocate for expansion of accessible transportation
- Advocate for additional Center for Independent Living activities with local transportation planning commissions, boards
- Host an annual Transportation Summit (Texas State Independent Living Council)

Lead Organizations: Texas State Independent Living Council, Centers for Independent Living

Potential Partners: Texas Council on Developmental Disabilities; Texas Department of Transportation; Regional Transportation Planning Commissions; ADAPT of Texas; National Federation of the Blind; American Council of the Blind

Funding Sources: State General Revenue; SSA-VR; Title VII Part B; Title VII Part C; Program Funds; Unrestricted Funds; Texas Council on Developmental Disabilities grant funds

Objective 1.5—Housing: Individuals with disabilities have access to integrated, affordable, and accessible housing within the community of their choice.

Measurable Indicators:

- Number of advocacy activities for accessible housing
- Number of universal design and universal communication access awareness activities provided to businesses, housing providers, and developers
- Number of housing coalitions/partnerships created toward increasing housing opportunities for individuals with disabilities

Scope: Statewide; Local

Target Performance Levels for 2019: 150 advocacy activities for accessible housing; 45 universal design and universal communication access awareness and visitability activities provided to businesses, housing providers, developers, associations, and local governments; 15 housing coalitions/partnerships created toward increasing housing opportunities for individuals with disabilities.

Target Progress for FY17-19:

- **FY17:** 50 advocacy activities for accessible housing; 15 universal design and universal communication access awareness and visitability activities provided to businesses, housing providers, developers, associations, and local governments; 5 housing coalitions/partnerships created toward increasing housing opportunities for individuals with disabilities.
- **FY18:** 50 advocacy activities for accessible housing; 15 universal design and universal communication access awareness and visitability activities provided to businesses, housing providers, developers, associations, and local governments; 5 housing coalitions/partnerships created toward increasing housing opportunities for individuals with disabilities.
- **FY19:** 50 advocacy activities for accessible housing; 15 universal design and universal communication access awareness and visitability activities provided to businesses, housing providers, developers, associations, and local governments; 5 housing coalitions/partnerships created toward increasing housing opportunities for individuals with disabilities.

Activities:

- Advocate for accessible housing
- Create awareness of housing accessibility issues to businesses, housing providers, developers, etc.
- Create additional housing coalitions that work toward increasing housing opportunities

Lead Organizations: Centers for Independent Living

Potential Partners: Texas State Independent Living Council; Texas Department of Housing and Community Affairs; Veterans Administration; Texas Department of Aging and Disability Services; Aging and Disability Resource Centers; Area Agencies on Aging; Texas Workforce Commission (Fair Housing), local housing coalitions; Texas Veterans Commission; Texas Association of Builders; Rural Rental Housing Association of Texas, Texas Apartment Association; Accessible Housing Austin!; Easter Seals of Texas, Disability of Rights Texas; Texas State Affordable Housing Corporation, local governments

Funding Sources: State General Revenue; SSA-VR; Title VII Part B; Title VII Part C; Program Funds; Unrestricted Funds

Goal 2—Network Capacity and Sustainability: The Independent Living Network operates effectively, is adequately funded, and has the capacity to expand.

Objective 2.1—IL Transition: The network of Centers for Independent Living have adequate resources and capacity to provide Independent Living Services for Texans with disabilities.

Measurable Indicators:

- Number of private funding sources secured to help provide Independent Living Services in the community
- Number of teleconferences/meetings for Center for Independent Living peer support during the Independent Living Services transition period
- Technical assistance requested and provided to appropriate parties
- Number of community awareness activities by Centers for Independent Living

Scope: Statewide

Target Performance Levels for 2019: 15 new private funding sources secured to help provide Independent Living Services in the community; 9 teleconference/meetings for Center for Independent Living peer support during the Independent Living Services transition period; technical assistance provided to appropriate parties; 90 community awareness activities by Centers for Independent Living.

Target Progress for FY17-19:

- **FY17:** 5 new private funding sources secured to help provide Independent Living Services in the community; 3 teleconference/meetings for Center for Independent Living peer support during the Independent Living Services transition period; technical assistance provided to appropriate parties; 30 community awareness activities by Centers for Independent Living.
- **FY18:** 5 new private funding sources secured to help provide Independent Living Services in the community; 3 teleconference/meetings for Center for Independent Living peer support during the Independent Living Services transition period; technical assistance provided to appropriate parties; 30 community awareness activities by Centers for Independent Living.
- **FY19:** 5 new private funding sources secured to help provide Independent Living Services in the community; 3 teleconference/meetings for Center for Independent Living peer support during the Independent Living Services transition period;

technical assistance provided to appropriate parties; 30 community awareness activities by Centers for Independent Living.

Activities:

- Encourage Centers for Independent Living to utilize private funding to support their efforts to provide Independent Living Services in their communities
- Create opportunities for Center for Independent Living peer support during IL transition issues
- Coordinate appropriate technical assistance for the Independent Living Services program outsourcing process
- Encourage community awareness of Center for Independent Living and Independent Living Services and philosophy of choice/consumer direction

Lead Organizations: Centers for Independent Living, Texas Health and Human Services Commission

Potential Partners: Texas State Independent Living Council, Texas Workforce Commission, Texas Rehab Association

Funding Sources: State General Revenue; SSA-VR; Title VII Part B; Title VII Part C; Program Funds; Unrestricted Funds

Objective 2.2—Coordinating Funding for the Network: The network of Centers for Independent Living receives funding to provide current, additional, and expanded services to underserved and unserved areas of Texas.

Measurable Indicators:

- Number of mobile/virtual services provided by Centers for Independent Living
- Number of community partners/funders assisting the Center for Independent Living to provide mobile or virtual services to consumers
- Number of requests/contacts to utilize community space or partner with other entity to use space to provide services
- Number of activities to obtain feedback from individuals with disabilities on the use of Part B dollars in Texas by surveying consumers through public forums, townhalls, public comment sessions, workshops, etc.

Scope: Statewide

Target Performance Levels for 2019: 45 advocacy activities targeted to the Texas Legislature or Texas Health and Human Services Commission to include secure state-funded Center for Independent Living funding in statute or biennial appropriations bills; 30 activities conducted in an effort to increase mobile/remote/virtual service options for Centers; 30 outreach contacts to community partners to use office space or locations on a regular basis; 12 activities in obtaining feedback from individuals with disabilities on the use of Part B dollars in Texas by surveying consumers through public forums, townhalls, public comment sessions, workshops, etc.

Target Progress for FY17-19:

- **FY17:** 15 advocacy activities targeted to the Texas Legislature or Texas Health and Human Services Commission to include secure state-funded Center for Independent Living funding in statute or biennial appropriations bills; 10 activities conducted in an effort to increase mobile/remote/virtual service options for

Centers; 10 outreach contacts to community partners to use office space or locations on a regular basis; 4 activities in obtaining feedback from individuals with disabilities on the use of Part B dollars in Texas by surveying consumers through public forums, townhalls, public comment sessions, workshops, etc.

- **FY18:** 15 advocacy activities targeted to the Texas Legislature or Texas Health and Human Services Commission to include secure state-funded Center for Independent Living funding in statute or biennial appropriations bills; 10 activities conducted in an effort to increase mobile/remote/virtual service options for Centers; 10 outreach contacts to community partners to use office space or locations on a regular basis; 4 activities in obtaining feedback from individuals with disabilities on the use of Part B dollars in Texas by surveying consumers through public forums, townhalls, public comment sessions, workshops, etc.
- **FY19:** 15 advocacy activities targeted to the Texas Legislature or Texas Health and Human Services Commission to include secure state-funded Center for Independent Living funding in statute or biennial appropriations bills; 10 activities conducted in an effort to increase mobile/remote/virtual service options for Centers; 10 outreach contacts to community partners to use office space or locations on a regular basis; 4 activities in obtaining feedback from individuals with disabilities on the use of Part B dollars in Texas by surveying consumers through public forums, townhalls, public comment sessions, workshops, etc.

Activities:

- Advocate for more secure funding stream at the state level by including Center for Independent Living base funding in statute or biennial appropriations bills
- Encourage mobile services for Centers or other virtual ways of providing services (mobile outreach station)
- Outreach to community partners to use office space, locations on a regular basis
- Obtain feedback from individuals with disabilities on the use of Part B dollars in Texas by surveying consumers through public forums, townhalls, public comment sessions, workshops, etc.

Lead Organizations: Centers for Independent Living

Potential Partners: Texas State Independent Living Council, Agrilife Extension; Texas Department of Aging and Disability Services; Texas Health and Human Services Commission; Workforce Centers; other available public facilities

Funding Sources: State General Revenue; SSA-VR; Title VII Part B; Title VII Part C; Program Funds; Unrestricted Funds

Objective 2.3—Reporting Consistency/Information Shared to Policymakers: The Independent Living Network reports accurate and consistent outcomes-based information to policymakers, grantors, and decision-makers.

Measurable Indicators:

- Annual State Plan for Independent Living evaluation summary posted
- Number of success stories/impact of State Plan for Independent Living outcomes publicly shared

- Percent of Centers for Independent Living reporting on outcomes based framework
- Percent of Centers for Independent Living adhering to federal reporting guidelines
- Number of advocacy activities to use a single reporting tool and process for federal and state funded Centers for Independent Living

Scope: Statewide Network of Centers for Independent Living

Target Performance Levels for 2019:

- **FY19:** Provide annual State Plan for Independent Living evaluation summary on website; 90 highlights of success stories and impacts of State Plan for Independent Living outcomes by Centers for Independent Living and the Texas State Independent Living Council; 30 outreach activities to the Texas Legislature on the success of Center for Independent Living and Independent Living Services; 80 percent of Centers for Independent Living reporting on outcomes based framework as agreed to in the FY14-16 State Plan for Independent Living Goal 4 project; 100 percent providing annual 704 performance reports (or other federally required reports) to the Texas State Independent Living Council; 6 advocacy activities to have a single reporting tool and process for federal and state funded Centers.

Target Progress for FY17-19:

- **FY17:** Provide annual State Plan for Independent Living evaluation summary on website; 30 highlights of success stories and impacts of State Plan for Independent Living outcomes by Centers for Independent Living and the Texas State Independent Living Council; 10 outreach activities to the Texas Legislature on the success of Center for Independent Living and Independent Living Services; 80 percent of Centers for Independent Living reporting on outcomes based framework as agreed to in the FY14-16 State Plan for Independent Living Goal 4 project; 100 percent providing annual 704 performance reports (or other federally required reports) to the Texas State Independent Living Council; 2 advocacy activities to have a single reporting tool and process for federal and state funded Centers.
- **FY18:** Provide annual State Plan for Independent Living evaluation summary on website; 30 highlights of success stories and impacts of State Plan for Independent Living outcomes by Centers for Independent Living and the Texas State Independent Living Council; 10 outreach activities to the Texas Legislature on the success of Center for Independent Living and Independent Living Services; 80 percent of Centers for Independent Living reporting on outcomes based framework as agreed to in the FY14-16 State Plan for Independent Living Goal 4 project; 100 percent providing annual 704 performance reports (or other federally required reports) to the Texas State Independent Living Council; 2 advocacy activities to have a single reporting tool and process for federal and state funded Centers.
- **FY19:** Provide annual State Plan for Independent Living evaluation summary on website; 30 highlights of success stories and impacts of State Plan for Independent Living outcomes by Centers for Independent Living and the Texas State Independent Living Council; 10 outreach activities to the Texas Legislature

on the success of Center for Independent Living and Independent Living Services; 80 percent of Centers for Independent Living reporting on outcomes based framework as agreed to in the FY14-16 State Plan for Independent Living Goal 4 project; 100 percent providing annual 704 performance reports (or other federally required reports) to the Texas State Independent Living Council; 2 advocacy activities to have a single reporting tool and process for federal and state funded Centers.

Activities:

- Provide State Plan for Independent Living evaluation summaries on the website
- Highlight and share success stories from Center for Independent Living's/agency programs and highlight specific impacts of outcomes on a regular basis—newsletters, Texas State Independent Living Council website, social media push
- Provide outreach to Texas Legislature on success of Center for Independent Living and Independent Living Services on a regular basis
- Report outcomes as agreed to in the FY14-16 State Plan for Independent Living Goal 4 project
- Advocate for a single reporting tool and process for federal and state funded Centers for Independent Living

Lead Organizations: Centers for Independent Living, Texas State Independent Living Council

Potential Partners: Centers for Independent Living, Texas State Independent Living Council, Texas Health and Human Services Commission, Texas Department of Aging and Disability Services, Texas Workforce Commission

Funding Sources: State General Revenue; SSA-VR; Title VII Part B; Title VII Part C; Program Funds; Unrestricted Funds

Goal 3—Community Integration: Individuals with Disabilities receive the community integration and community-based living supports needed to be more independent.

Objective 3.1—Youth Transition: Youth with disabilities access and utilize transition services provided by Centers for Independent Living and other providers.

Measurable Indicators:

- Number of outreach points to school systems regarding Center for Independent Living participation in Admission, Review and Dismissal meetings or outreach to education service centers
- Number of outreach activities to youth in underserved counties, populations, or races
- Increase in youth consumers served by Centers as well as youth that might not be consumers that are receiving other services or information/resources from a Center

Scope: Statewide

Target Performance Levels for 2019: 75 outreach points to school systems regarding Center for Independent Living participation in Admission, Review and Dismissal

meetings or outreach to education service centers; 150 outreach activities to youth in underserved counties, populations, or races; 3 percent increase in youth consumers served by Centers.

Target Progress for FY17-19:

- **FY17:** 25 outreach points to school systems regarding Center for Independent Living participation in Admission, Review and Dismissal meetings or outreach to education service centers; 50 outreach activities to youth in underserved counties, populations, or races; 1 percent annual increase in youth consumers served by Centers.
- **FY18:** 25 outreach points to school systems regarding Center for Independent Living participation in Admission, Review and Dismissal meetings or outreach to education service centers; 50 outreach activities to youth in underserved counties, populations, or races; 1 percent annual increase in youth consumers served by Centers.
- **FY19:** 25 outreach points to school systems regarding Center for Independent Living participation in Admission, Review and Dismissal meetings or outreach to education service centers; 50 outreach activities to youth in underserved counties, populations, or races; 1 percent annual increase in youth consumers served by Centers.

Activities:

- Reach out to school systems regarding participating in Admission, Review and Dismissal meetings , reach out to education service centers
- Attend Transition fairs
- Make connections with transition specialists at region education service centers and at local schools
- Target outreach activities to youth with disabilities in underserved counties, populations, races
- Seek data on youth with disabilities preparing for transition for activity and outreach planning purposes

Lead Organizations: Centers for Independent Living

Potential Partners: Texas State Independent Living Council, Texas Education Agency, local school districts, Education Service Centers, Texas Workforce Commission, the Arc of Texas, Special Olympics, Texas School for the Deaf, Texas School for the Blind, Partners Resource Network, Disability Rights Texas, Texas Parent to Parent, Texas Health and Human Services Commission

Funding Sources: State General Revenue; SSA-VR; Title VII Part B; Title VII Part C; Program Funds; Unrestricted Funds

Objective 3.2—Relocation: Individuals with disabilities residing in institutions or nursing homes are aware of and access relocation services provided by Centers for Independent Living.

Measurable Indicators:

- Number of outreach and/or resources to nursing facilities, institutions (jails, rehab facilities)

- Number of individuals provided with resources regarding relocation services
- Number of advocacy activities for Centers for Independent Living to obtain contracts or subcontracts to provide relocation services as mandated by the Workforce Innovation and Opportunity Act
- Number of coordination efforts with outside entities such as the Ombudsman, managed care organization, etc.

Scope: Statewide

Target Performance Levels for 2019: 150 outreach activities to nursing facilities, institutions; 30 advocacy activities to increase number of Centers for Independent Living obtaining contracts or subcontract to provide relocation services; 90 coordination efforts with outside entities on relocation issues.

Target Progress for FY17-19:

- **FY17:** 50 outreach activities to nursing facilities, institutions; 10 advocacy activities to increase number of Centers for Independent Living obtaining contracts or subcontract to provide relocation services; 30 coordination efforts with outside entities on relocation issues.
- **FY18:** 50 outreach activities to nursing facilities, institutions; 10 advocacy activities to increase number of Centers for Independent Living obtaining contracts or subcontract to provide relocation services; 30 coordination efforts with outside entities on relocation issues.
- **FY19:** 50 outreach activities to nursing facilities, institutions; 10 advocacy activities to increase number of Centers for Independent Living obtaining contracts or subcontract to provide relocation services; 30 coordination efforts with outside entities on relocation issues.

Activities:

- Conduct outreach/resources activities to nursing facilities, institutions
- Coordinate efforts with the ombudsman
- Report on relocation contract activities
- Work with Texas Health and Human Services Commission on future relocation contracts and advocate for additional funding after the expiration of Money Follows the Person
- Coordinate with managed care organizations on relocation activities

Lead Organizations: Centers for Independent Living

Potential Partners: Texas State Independent Living Council, Texas Department of Aging and Disability Services, Texas Health and Human Services Commission, Maximus/Managed Care Organizations, State Supported Living Centers

Resources: \$4,161,537 CMS Money Follows the Person Grant Funds and State General Revenue

Funding Sources: State General Revenue; SSA-VR; Title VII Part B; Title VII Part C; Program Funds; Unrestricted Funds; CMS Money Follows the Person Grant Funds

Objective 3.3—Diversion: Individuals with disabilities who are at risk for entering institutions or nursing homes access to diversion services provided by Centers for Independent Living.

Measurable Indicators:

- Percent of Centers for Independent Living use an assessment process/tool for determining risk
- Number of outreach activities to those typically underserved
- Number of education opportunities for parents and consumers on accessing Medicaid Long Term Services and Supports or waiver services
- Number of advocacy activities to increase the number of community-based services

Scope: Statewide

Target Performance Levels for 2019: 50 percent of Centers for Independent Living use an assessment process/tool for determining risk; 150 outreach activities to those typically underserved such as those with age-related disabilities, mental illness, substance abuse disorders, and youth; 150 education opportunities for parents or consumers on accessing waiting lists for Medicaid Long Term Services and Supports or waiver services.

Target Progress for FY17-19:

- **FY17:** 50 percent of Centers for Independent Living use an assessment process/tool for determining risk; 50 outreach activities to those typically underserved such as those with age-related disabilities, mental illness, substance abuse disorders, and youth; 50 education opportunities for parents or consumers on accessing waiting lists for Medicaid Long Term Services and Supports or waiver services.
- **FY18:** 50 percent of Centers for Independent Living use an assessment process/tool for determining risk; 50 outreach activities to those typically underserved such as those with age-related disabilities, mental illness, substance abuse disorders, and youth; 50 education opportunities for parents or consumers on accessing waiting lists for Medicaid Long Term Services and Supports or waiver services.
- **FY19:** 50 percent of Centers for Independent Living use an assessment process/tool for determining risk; 50 outreach activities to those typically underserved such as those with age-related disabilities, mental illness, substance abuse disorders, and youth; 50 education opportunities for parents or consumers on accessing waiting lists for Medicaid Long Term Services and Supports or waiver services.

Activities:

- Provide youth transition activities/services to reduce chance of institutionalization
- Provide education for parents and consumers on accessing waiting lists for Medicaid Long Term Services and Supports or waiver services
- Advocate for additional community-based services
- Use of an assessment process/tool by Centers for Independent Living for determining risk
- Reaching out to those typically underserved such as those with age-related disabilities, mental illness, substance abuse

Lead Organizations: Centers for Independent Living

Potential Partners: Texas State Independent Living Council, Texas Department of Aging and Disability Services, Texas Health and Human Services Commission, Local Intellectual and Developmental Disability Authority, Texas Medical Board, Hogg Foundation for Mental Health, Veterans Affairs, Promoting Independence Advisory Committee

Funding Sources: State General Revenue; SSA-VR; Title VII Part B; Title VII Part C; Program Funds; Unrestricted Funds; CMS Money Follows the Person Grant 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 State Plan for Independent Living 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.**

Description of Underserved and Unserved:

The Texas State Independent Living Council and the Network of Centers for Independent Living recognizes that all counties and areas currently served by a Center for Independent Living are underserved. Despite the large number of Centers for Independent Living in Texas, the Independent Living needs in their service areas are greater than the resources and capacity available to them. Federal and State funding for the Texas Network has remained stagnant despite increased mandates and additional requirements. The Centers for Independent Living have worked to diversify their funding sources and secure private sources of funding, but a majority of Centers for Independent Living rely on federal and state sources for their base funding. It is imperative for the Network to secure additional funding to ensure they can meet the needs and serve the counties and populations within their current service areas and priorities. The fact remains that as long as the Network continues to be underfunded, the current Network's service areas and populations will also continue to be underserved.

Geographic Locations:

Section 3.2 identified 116 counties in Texas as underserved and 92 counties as unserved, which represents both rural and urban populations. Twenty-three percent of served counties (or 38 counties) represent the most severely underserved as no consumers have been served by a Center for Independent Living over the last three fiscal years (FY13-15).

Racial Populations:

A Needs Assessment survey was conducted and respondents identified Hispanic and

Black/African American as the two categories that were most in the need of Independent Living Services in Texas.

Disability Populations:

The following number reflect those served with a consumer service record only and do not include Information and Referral services to these populations provided by a Center for Independent Living. Those with a consumer service record have significant disabilities and are seeking specific Independent Living services with often complex needs. Annual 704 Report data compiled from FY13-15 shows that hearing and vision disabilities are underserved by Centers for Independent Living compared to the rate of service for other disabilities such as physical and cognitive disabilities. These rates were calculated by totaling and averaging the number of services provided by Centers for Independent Living over the Fiscal Years 13-15 and comparing those figures to the number of people over the age of five residing in counties currently served by a Center for Independent Living that have self-identified as having difficulties with specific functions according to the 2013 American Community Survey.

Additional Groups:

A Needs Assessment survey was conducted and respondents identified the following populations as in need of additional Independent Living Services:

- Veterans
- Homeless
- Individuals residing in long term residential facilities or institutions
- Adults residing with their family
- Traumatic Brain Injury
- Youth

Outreach Strategy:

The Goals and Objectives' intent to address the underserved and unserved populations in Texas is clear. For example, Objectives 2.1 and 2.2 are focused on the IL Network receiving the funding and supports needed to provide current and expanded Independent Living Services for underserved and unserved areas of Texas. This will be achieved through expanded partnerships with existing service providers and established entities in unserved or underserved areas as well as the use of mobile or virtual technologies. In addition, by also focusing on new funding opportunities and improving communication to policymakers and funders the current successes, the State Plan for Independent Living hopes to encourage efforts to expand financial resources to reach these populations.

In addition, Objectives 3.1 and 3.2 specifically target services and outreach activities to youth and individuals residing in long-term care facilities or institutions. In addition, the Centers for Independent Living are encouraged to provide special outreach to the populations identified on a statewide basis as well as the underserved and unserved populations they see in their own communities.

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 State Plan for Independent Living objectives.

1.3A Financial Plan Tables

Complete the financial plan tables covering years 1, 2 and 3 of this State Plan for Independent Living. For each funding source, provide estimated dollar amounts anticipated for the applicable uses. The financial plan table should include only those funding sources and amounts that are intended to support one or more of the objectives identified in section 1.2 of the State Plan for Independent Living. To the extent possible, the tables and narratives must reflect the applicable financial information from centers for independent living. Refer to the State Plan for Independent Living 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 - Approximate Funding Amounts and Uses

Sources	Texas State Independent Living Council Resource Plan	IL Services	General Center for Independent Living Operations	Other State Plan for Independent Living Activities
Title VII Funds - Chapter 1, Part B	\$409,564	\$944,449	\$11,200	\$0
Title VII Funds - Chapter 1, Part C	N/A	N/A	\$5,985,616	N/A
Title VII Funds - Chapter 2, OIB (only those provided by the OIB grantee to further a State Plan for Independent Living objective)	N/A	\$2,085,836	N/A	\$0

Sources	Texas State Independent Living Council Resource Plan	IL Services	General Center for Independent Living Operations	Other State Plan for Independent Living Activities
Other Federal Funds - Sec. 101(a)(18) of the Act (Innovation and Expansion)	\$0	\$0	\$0	\$0
Other Federal Funds - Other (SSA-VR)	\$0	\$7,146,543	\$1,439,283	\$0
Other Federal Funds - Other	\$0	\$1,447,839 (Relocation)	\$0	\$0
Non-Federal Funds -State Funds (GR)	\$0	\$2,713,698 (relocation) \$3,646,212 (IL Services)	\$1,325,676	\$0
Non-Federal Funds - Other	\$0	\$6,036 (Blind Endowment and Appropriated Receipts)	\$0	\$0

Year 2 - Approximate Funding Amounts and Uses

Sources	Texas State Independent Living Council Resource Plan	IL Services	General Center for Independent Living Operations	Other State Plan for Independent Living Activities
Title VII Funds - Chapter 1, Part B	\$409,564	\$944,449	\$11,200	\$0
Title VII Funds - Chapter 1, Part C	N/A	N/A	\$5,985,616	N/A

Sources	Texas State Independent Living Council Resource Plan	IL Services	General Center for Independent Living Operations	Other State Plan for Independent Living Activities
Title VII Funds - Chapter 2, OIB (only those provided by the OIB grantee to further a State Plan for Independent Living objective)	N/A	\$2,085,836	N/A	\$0
Other Federal Funds - Sec. 101(a)(18) of the Act (Innovation and Expansion)	\$0	\$0	\$0	\$0
Other Federal Funds - Other (SSA-VR)	\$0	\$7,146,543	\$1,439,283	\$0
Other Federal Funds - Other	\$0	\$1,447,839 (Relocation)	\$0	\$0
Non-Federal Funds - State Funds (GR)	\$0	\$2,713,698 (relocation) \$3,646,212 (IL Services)	\$1,325,676	\$0
Non-Federal Funds - Other	\$0	\$6,036 (Blind Endowment and Appropriated Receipts)	\$0	\$0

Year 3 - Approximate Funding Amounts and Uses

Sources	Texas State Independent Living Council Resource Plan	IL Services	General Center for Independent Living Operations	Other State Plan for Independent Living Activities
Title VII Funds - Chapter 1, Part B	\$409,564	\$944,449	\$11,200	\$0
Title VII Funds - Chapter 1, Part C	N/A	N/A	\$5,985,616	N/A
Title VII Funds - Chapter 2, OIB (only those provided by the OIB grantee to further a State Plan for Independent Living objective)	N/A	\$2,085,836	N/A	\$0
Other Federal Funds - Sec. 101(a)(18) of the Act (Innovation and Expansion)	\$0	\$0	\$0	\$0
Other Federal Funds - Other (SSA-VR)	\$0	\$7,146,543	\$1,439,283	\$0
Other Federal Funds - Other	\$0	\$1,447,839 (Relocation)	\$0	\$0
Non-Federal Funds -State Funds (GR)	\$0	\$2,713,698 (relocation) \$3,646,212 (IL Services)	\$1,325,676	\$0
Non-Federal Funds - Other	\$0	\$6,036 (Blind Endowment and Appropriated Receipts)	\$0	\$0

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 State Plan for Independent Living objectives.

Part B and Part C Funding Furthering State Plan for Independent Living Objectives:

Part B funds support the framework through which State Plan for Independent Living objectives are realized. Specific State Plan for Independent Living objectives are delineated for the Centers for Independent Living and the Texas State Independent Living Council as outlined in Section 1.2(A), with funding sources appropriately noted. Part B funds support the Independent Living Services for the State of Texas as well as the Texas State Independent Living Council Resource Plan and administrative support for the Designated State Entity. Part B funds also partially funds one Center for Independent Living. Part C Funds are provided to 21 of the 27 Centers for Independent Living in Texas.

1.3B(2) Describe efforts to coordinate Federal and State funding for centers and Independent Living Services, including the amounts, sources and purposes of the funding to be coordinated.

State and federal funds are coordinated in order to provide Independent Living Services on a Statewide basis. Specifically, \$944,449 is provided in Part B funding for the provision of Independent Living Services along with \$7,146,543 in funding from SSA-VR and \$3,646,212 in State General Revenue dollars. Funding for Centers for Independent Living is coordinated as well. Currently 21 Centers receive \$5,985,616 in Part C funding, 1 Center receives \$11,200 in Part B funding, 10 Centers receive \$1,439,283 in SSA-VR funding, and 5 Centers receive \$1,325,676 in State General Revenue funding. In addition to the funds provided for Independent Living Services and base Center for Independent Living funding, the Designated State Entity provides \$4,161,537 in funding for relocation services for individuals with disabilities relocating from nursing homes or institutions into community-based services.

The following represents the base funding sources for each of the 27 Centers for Independent Living in Texas. This and additional information is also included in Section 3.1.

State General Revenue Funded Centers for Independent Living

1. Disability in Action
2. LIFE Inc. - Disability Connections
3. Mounting Horizons
4. REACH of Plano Resource Center on Independent Living
5. Valley Association for Independent Living-South Texas

State SSA-VR and Federal Part C Funded Centers for Independent Living

1. ARCIL INC.
2. CBFL/Houston Center for Independent Living
3. Crockett Resource Center for Independent Living
4. LIFE Inc. - LIFE/RUN
5. Panhandle Independent Living Center
6. REACH of Dallas Resource Center on Independent Living
7. San Antonio Independent Living Services
8. Valley Association for Independent Living-Rio Grande Valley
9. Volar Center for Independent Living

State SSA-VR and Federal Part B Funded Center for Independent Living

1. REACH of Fort Worth Resource Center on Independent Living

Federal Part C Funded Centers for Independent Living

1. ABLE Center for Independent Living
2. ARCIL San Marcos
3. Brazos Valley Center for Independent Living
4. CBFL/Brazoria County Center for Independent Living
5. CBFL/Fort Bend Center for Independent Living
6. Coastal Bend Center for Independent Living
7. East Texas Center for Independent Living
8. Heart of Central Texas Independent Living Center, Inc.
9. Palestine Resource Center for Independent Living
10. REACH of Denton Resource Center on Independent Living
11. RISE Center
12. Williamson County Center for Independent Living Services

1.3B(3) Describe any in-kind resources including plant, equipment or services to be provided in support of the Texas State Independent Living Council resource plan, Independent Living Services, general Center for Independent Living operations and/or other State Plan for Independent Living objectives.

The Texas Health and Human Services Commission will provide services to receive, deposit, and disburse state and federal funds allocated for the Texas State Independent Living Council budget and resource plan, general Center for Independent Living operations, or State Plan for Independent Living objectives, in accordance with the approved State Plan for Independent Living and with applicable state and federal law and generally accepted accounting procedures, as per the Title VII requirements of the Designated State Entity.

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

1.4 Compatibility with Chapter 1 of Title VII and the Center for Independent Living Work Plans – 34 CFR 364.42(c) and (e)

1.4A Describe how the State Plan for Independent Living 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.

The State Plan for Independent Living objectives listed in 1.2A are the means by which the criteria outlined in 34 CFR 364.2 will be satisfied. The following list is a breakdown of how the FY17-19 State Plan for Independent Living's Goals are consistent with the purpose of the programs authorized by chapter I of title VII of the Act.

Goal 1—Advocacy: Texans with disabilities receive necessary supports and services to become more independent.

- Promotion of the philosophy of Independent Living, including a philosophy of consumer control, peer support, self-help, self-determination, equal access, and individual and system advocacy, to maximize the leadership, empowerment, independence, and productivity of individuals with significant disabilities, and to promote and maximize the integration and full inclusion of individuals with significant disabilities into the mainstream of American society.

Goal 2—Network Capacity and Sustainability: The Independent Living Network operates effectively, is adequately funded, and has the capacity to expand.

- Providing, expanding, and improving the provision of Independent Living services.
- Improving working relationships among Centers, Texas State Independent Living Councils, Vocational Rehabilitation programs, and other programs funded under the Rehabilitation Act and through non-federal sources.

Goal 3—Community Integration: Individuals with Disabilities receive the community integration and community-based living supports needed to be more independent.

- Promotion of the philosophy of Independent Living, including a philosophy of consumer control, peer support, self-help, self-determination, equal access, and individual and system advocacy, to maximize the leadership, empowerment, independence, and productivity of individuals with significant disabilities, and to promote and maximize the integration and full inclusion of individuals with significant disabilities into the mainstream of American society.
- Providing, expanding, and improving the provision of Independent Living services.
- Improving working relationships among Centers, Vocational Rehabilitation programs, and other programs funded under the Rehabilitation Act and through non-federal sources.

1.4B Describe how, in developing the State Plan for Independent Living objectives, the DSU and the State Independent Living Council considered and incorporated, where appropriate, the priorities and objectives established by centers for independent living under section 725(c)(4) of the Act.

The FY17-19 State Plan for Independent Living goals and objectives were developed after extensive dialogue between the Texas State Independent Living Council and the Network of Centers for Independent Living and receiving input from Texans with disabilities. In all during Fiscal Year 2016, the Texas State Independent Living Council hosted two public hearings, one in San Antonio and one in Houston, attended by over 120 individuals with disabilities, providers, and advocates and two virtual online discussions with over 50 participants to gather the feedback of the public and the Network of Centers on their Independent Living priorities. Public hearings were also held in Alpine and McAllen in 2015 and Austin and Amarillo in 2014.

In addition, seven State Plan for Independent Living workgroups consisting of Center for Independent Living Directors, Center for Independent Living staff, Texas State Independent Living Council staff, and Texas State Independent Living Council board members met a total of 12 times to discuss and draft sections of the State Plan for Independent Living. In addition, the Texas State Independent Living Council and the Center for Independent Living Directors had three in-person meetings to discuss and review State Plan for Independent Living drafts. In total, the Texas State Independent Living Council and the Centers for Independent Living participated in over 40 hours of discussion on the contents of the FY17-19 draft. The Centers for Independent Living and the Texas State Independent Living Council drafted the State Plan for Independent Living together in consultation with the Designated State Entity with each party providing feedback reflecting their own organizations' priorities and objectives. Representatives of the Texas State Independent Living Council, Centers for Independent Living, and Designated State Entity were invited to participate in every State Plan for Independent Living workgroup, discussion, and hearing.

These public input activities will continue through FY 2017-19. The public will be asked to provide comment on current and potential services, provided under this State Plan and funded through Part B and other sources in the context of identified best practices and all allowable uses of funds.

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 the SILS program, the SILC, and centers; the DSU, other State agencies represented on the State Independent Living Council and 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 collaborative framework is in place to promote unity and singleness of purpose among the Texas State Independent Living Council, the Designated State Entity, and the

Centers for Independent Living. The Texas State Independent Living Council composition includes a Center for Independent Living Representative, as well as Ex-Officio members from Texas Health and Human Services Commission, Texas Department of Housing and Community Affairs, and Texas Department of Aging and Disability Services. Recruiting efforts are underway to include additional Ex-Officio representation from other state agencies that provide services to individuals with disabilities as per Workforce Innovation and Opportunity Act.

State agencies represented on the Texas State Independent Living Council as Ex-Officio members include the Health and Human Services Commission, the Department of Aging and Disability Services, and the Texas Department of Home and Community Administration. Efforts are underway to recruit Ex-Officios from other state agencies that provide services for individuals with disabilities such as the Veterans Commission, the Texas Department of Transportation, the Texas Workforce Commission, and Texas Education Agency. Regardless of placement on the Texas State Independent Living Council, it also coordinates with several agencies including the Texas Department of Transportation, the Texas Education Agency, the Texas Council on Developmental Disabilities, and others. The Texas State Independent Living Council and the Centers for Independent Living also work with various entities, advisory councils, and non-profits such as the Promoting Independence Advisory Council, Texas Disability Policy Consortium, Disability Rights Texas, ADAPT of Texas, and the Coalition of Texans with Disabilities. A member of the Texas State Independent Living Council acts as a representative liaison to the Rehabilitation Council of Texas. Plans are underway to include a representative of the Rehabilitation Council of Texas on the Texas State Independent Living Council as well.

Activities related to Council meetings, interim workgroups, and shared priorities provide understanding of respective programs, collective support, and promotion of Independent Living Services statewide. The Texas State Independent Living Council invites all Centers for Independent Living in Texas to participate in State Plan for Independent Living activities. Activities defined for State Plan for Independent Living objectives cite a number of entities with whom coordination will be important to achieve progress on objectives.

1.6 Coordination of Services – 34 CFR 364.27

Describe how Independent Living 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.

During 2014 and 2015, the Texas Sunset Commission reviewed the agencies and programs within the Texas Health and Human Services Commission, including those agencies that administer the Independent Living program. Sunset is the regular assessment of the continuing need for a state agency or program to exist. The process

creates a unique opportunity and powerful incentive for the Texas Legislature and stakeholders to look closely at each agency and make key improvements to how state government works.

(https://www.sunset.texas.gov/public/uploads/files/reports/Sunset_percent20in_percent20Texas_0.pdf page 7)

The Sunset Commission recommended and the Texas Legislature passed, HB 2463, SB 200, and SB 208, which makes significant changes to the way some programs for individual with disabilities will be administered in Texas. The review process looked at all of the disability programs and reviewed them for duplication of services and effectiveness. They made several recommendations to increase efficiency and effectiveness. Among the most significant changes is that the Department of Assistive and Rehabilitative Services will be dissolved as of September 1, 2016 and its programs and functions will be transferred to the Health and Human Services Commission and the Texas Workforce Commission. The Vocational Rehabilitation programs will be transferred to the Texas Workforce Commission effective September 1, 2016. The Independent Living Program for Older Individuals who are Blind and the Business Enterprises of Texas program will also transfer to the Texas Workforce Commission with the Vocational Rehabilitation Blind program, since both must be administered by the Designated State Unit serving individuals who are blind as required by the Rehabilitation Act of 1973, as amended. The legislation also requires that the blind and general Independent Living Services programs be combined into one Independent Living program and transferred to the Health and Human Services Commission effective September 1, 2016. In addition, the Sunset Commission recommended and the Texas Legislature included in HB 2463 a requirement that the Health and Human Services Commission contract with the Centers for Independent Living and other providers to provide services under the Independent Living program. Previously, the Department of Assistive and Rehabilitative Services provided Independent Living Services to consumers directly. The Texas Workforce Commission intends to execute an interagency agreement with the Health and Human Services Commission to enable Older Individuals who are Blind program services to be administered by Centers for Independent Living as part of the outsourced Independent Living Services program.

HB 2463 requires that the Centers for Independent Living are provided the right of first refusal to receive contracts to provide Independent Living services directly or to subcontract out with another Center for Independent Living, organization, or individual. If no Center is willing or able to provide Independent Living Services in a particular service area, the State may contract directly with an organization or person to provide these services. There is clear legislative intent that Centers for Independent Living in Texas are to become the one stop shop for all Independent Living Services in Texas regardless of age, disability type, or service required.

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 Independent Living Service network is promoted so that staff can make appropriate and timely referrals. The Independent Living 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. Centers for Independent Living provide five core services (information and referral, individual and system advocacy, peer support, Independent Living skills training, and transition/relocation services from nursing homes and other institutions and diversion services that keep a person with a disability out of a nursing home or other institutions). Each Center for Independent Living's local community needs define its service priorities. Examples of community services that Texas Centers for Independent Living provide, include but are not limited to: assistance with accessing benefit counseling and Social Security Work Incentives technical assistance programs, managing housing voucher programs, coordinating transportation services and mobility management to include travel training and identification and utilization of all transportation resources, operating assistive technology demonstration sites, providing various emergency preparedness technical assistance for people with disabilities, durable medical equipment loan programs and clothing closets, home modifications for accessibility, obtaining utility assistance, sponsoring local independent living conferences and service provider expos, working with local Workforce Solutions to establish a disability sub-committees to improve access of their services to job seekers with disabilities.

Texas Health and Human Services Commission Cooperative Agreements:

Texas Health and Human Services Commission enters into appropriate cooperative arrangements with, and utilizes the services and facilities of, various federal, state, and local agencies and programs. Texas Health and Human Services Commission coordinates with other agencies and programs to ensure individuals with disabilities receive appropriate services. These agencies and programs include:

- 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 and the Texas Workforce Commission, 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; and
- The Texas Department of Aging and Disability Services, the Department of State Health Services, and Texas Workforce Commission for the purpose of reducing duplication and fragmentation of employment services provided to the shared client population of these entities.

Department of Aging and Disability Services:

The Texas Department of Aging and Disability Services 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 in 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. Service examples are: adaptive aids, attendant services, meals, medication assistance, medical supplies, nursing services and therapy. Medicaid recipients may be eligible for over two dozen community care programs with varying eligibility criteria and availability.

Texas Department of Aging and Disability Services provide an array of services to persons over 60 years through the network of local Area Agencies on Aging (benefits counseling, help for caregivers, health information counseling, and state ombudsman related to nursing homes). The Aging and Disability Resource Centers are funded through the Texas Department of Aging and Disability Services to develop “no wrong door” systems for access to long-term services and supports. Centers for Independent Living are partners with many of the local Aging and Disability Resource Centers and local Area Agencies on Aging, with some holding subcontracts to provide Housing Navigator and other services. The Texas State Independent Living Council and representatives from Centers for Independent Living collaborate with the Texas Department of Aging and Disability Services to ensure respective parties are aware of services and initiatives within each network.

The Promoting Independence Initiative focuses on relocation from institutions to community. This has been and continues to be a major initiative. A representative of the Texas Department of Aging and Disability Services is an Ex-Officio member of the Texas State Independent Living Council and in this capacity is the conduit for information between the two entities.

Texas Department of Housing and Community Affairs:

Texas Department of Housing and Community Affairs is leading an effort to coordinate with Centers for Independent Living 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:

Texas Department of Transportation 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 Texas State Independent Living Council and several Centers for Independent Living 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 Independent Living 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.

N/A

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 State Plan for Independent Living Instrument table indicating the types of Independent Living Services to be provided to meet the objectives identified in section 1.2 of this State Plan for Independent Living, and whether the services will be provided by the Centers for Independent Living or by the DSU (directly and/or through contract or grant).

Table 2.1A: Independent living services

	Provided by the DSU (directly)	Provided by the DSU (through contract and/or grant)	Provided by the Centers for Independent Living (Not through DSU contracts/ grants)
Table 2.1A: Independent living services			
Core IL Services - Information and referral		Y	Y
Core IL Services - IL skills training		Y	Y
Core IL Services - Peer counseling		Y	Y
Core IL Services - Individual and systems advocacy		Y	Y
Core IL Services – Transition Services		Y	Y
Counseling services, including psychological, psychotherapeutic, and related services		Y	Y
Services related to securing housing or shelter, including services related to		Y	Y

	Provided by the DSU (directly)	Provided by the DSU (through contract and/or grant)	Provided by the Centers for Independent Living (Not through DSU contracts/ grants)
Table 2.1A: Independent living services			
community group living, and supportive 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)			
Rehabilitation technology		Y	Y
Mobility training		Y	Y
Services and training for individuals with cognitive and sensory disabilities, including life skills training, and interpreter and reader services		Y	Y
Personal assistance services, including attendant care and the training of personnel providing such services		Y	Y
Surveys, directories and other activities to identify appropriate housing, recreation, accessible transportation and other support services		Y	Y
Consumer information programs on rehabilitation and Independent Living 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		Y	Y
Education and training necessary for living in the community and participating in community activities		Y	Y
Supported living			Y
Transportation, including referral and assistance for such transportation		Y	
Physical rehabilitation		Y	Y
Therapeutic treatment		Y	N
Provision of needed prostheses and other appliances and devices		Y	N

	Provided by the DSU (directly)	Provided by the DSU (through contract and/or grant)	Provided by the Centers for Independent Living (Not through DSU contracts/ grants)
Table 2.1A: Independent living services			
Individual and group social and recreational services		Y	Y
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		Y	Y
Services for children with significant disabilities	Y	Y	Y
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		Y	Y
Appropriate preventive services to decrease the need of individuals with significant disabilities for similar services in the future		Y	Y
Community awareness programs to enhance the understanding and integration into society of individuals with disabilities		Y	Y
Other necessary services not inconsistent with the Act		Y	Y

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

The State Plan for Independent Living Goals and Objectives have identified the following services as priorities during FY17-19 to address some of the issues, populations, and areas as targeted for outreach:

- Increased Systems Advocacy (Objective 1.1)
- Advocacy for Personal Care Attendant Issues (Objective 1.2)
- Advocacy for Coordination of Emergency Preparedness and Planning (Objective 1.3)
- Advocacy for Accessible Transportation (Objective 1.4)
- Expanded services to unserved and underserved populations (Objective 2.2)

- Youth Transition (Objective 3.1)
- Relocation from Nursing Facilities or Institutions (Objective 3.2)
- Diversion (Objective 3.3)

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 Independent Living Services, specify the types of Independent Living 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:

- Any consideration of financial need is applied uniformly so that all individuals who are eligible for Independent Living Services are treated equally; and
- 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.

The Independent Living Services provider will administer the consumer participation system in accordance with the Independent Living Services rules being promulgated with a September 1, 2016 effective date, the Independent Living Program Standards Manual that will be effective on September 1, 2016, and other applicable contract requirements established by the Texas Health and Human Services Commission. If a purchased service is part of the consumer's independent living plan, the service provider gathers financial information about the consumer to determine the consumer's participation. In summary, the service provider determines the consumer's requirement and ability to participate by:

1. Collecting financial information;
2. Calculating the consumer's household size and adjusted gross income;
3. Assessing the consumer participation fee according to the published scale;
4. Processing the consumer participation agreement with the consumer; and
5. Documenting the agreement in the consumer service record.

Purchased independent living services defined in the Independent Living Standards are subject to consumer participation and comparable benefits requirements of these standards. Policies regarding record retention and determining consumer eligibility are outlined in the Independent Living Standards.

Centers for Independent Living provide independent living core services, and any necessary assessments for the purpose of determining eligibility, and evaluations for determination of appropriate independent living service provision as defined in the Independent Living Program Standards Manual, at no cost to the consumer.

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

2.2A If the DSU will provide any of the Independent Living Services identified in

section 2.1A through grants or contractual arrangements with third parties, describe such arrangements.

The Texas Health and Human Services Commission awards contracts, whether by grant or other form of agreement, to service providers under the Independent Living Services program pursuant to Texas Human Resources Code, Section 117.079. These service providers include Centers for Independent Living and other organizations or persons skilled in the delivery of Independent Living services. Service providers must comply with the requirements under Title 1, Part 15, Chapter 392, Purchase of Goods and Services for Specific Health and Human Services Commission Programs, Subchapter J, Independent Living Services Program Contracts, the Independent Living Services rules, and Independent Living Services Program Standards Manual.

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.

In the HHSC Standards for Providers, direction is provided for Centers for Independent Living that a Center staff person will document determination of eligibility. Routine on-site monitoring visits by Texas Health and Human Services Commission will help ensure Center for Independent Living compliance with this requirement.

<http://www.hhsc.state.tx.us/>

Section 3: Design for the Statewide Network of Centers

3.1 Existing Network – 34 CFR 364.25

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.

The State of Texas contains diverse racial and disability populations in the vast rural and urban areas of the state. The Centers for Independent Living in Texas serve all disability and racial populations and adapt their programs and services to reflect the unique populations and needs in their service areas.

The following list contains the base operating funding sources for the 27 Centers for Independent Living in Texas.

State General Revenue Funded Centers for Independent Living

1. Disability in Action
2. LIFE Inc. - Disability Connections
3. Mounting Horizons

4. REACH of Plano Resource Center on Independent Living
5. Valley Association for Independent Living-South Texas

State SSA-VR and Federal Part C Funded Centers for Independent Living

1. ARCIL INC.
2. CBFL/Houston Center for Independent Living
3. Crockett Resource Center for Independent Living
4. LIFE Inc. - LIFE/RUN
5. Panhandle Independent Living Center
6. REACH of Dallas Resource Center on Independent Living
7. San Antonio Independent Living Services
8. Valley Association for Independent Living-Rio Grande Valley
9. Volar Center for Independent Living

State SSA-VR and Federal Part B Funded Center for Independent Living

1. REACH of Fort Worth Resource Center on Independent Living

Federal Part C Funded Centers for Independent Living

1. ABLE Center for Independent Living
2. ARCIL San Marcos
3. Brazos Valley Center for Independent Living
4. CBFL/Brazoria County Center for Independent Living
5. CBFL/Fort Bend Center for Independent Living
6. Coastal Bend Center for Independent Living
7. East Texas Center for Independent Living
8. Heart of Central Texas Independent Living Center, Inc.
9. Palestine Resource Center for Independent Living
10. REACH of Denton Resource Center on Independent Living
11. RISE Center
12. Williamson County Center for Independent Living Services

The CILs listed above are also listed below in alphabetical order with more detailed information such as location, counties served, and additional funding sources.

ABLE Center for Independent Living (SPIL Signatory) (ABLE)

4803 Plaza Blvd. Suite 401 Odessa, Texas

Counties Served:

Andrews, Crane, Ector, Martin, Midland, Upton and Ward

Funding Sources:

Federal Title VII, Part C; Fee for Service

ARCIL INC. (SPIL Signatory)
(ARCIL)

825 E. Rundberg Ln. Austin, Texas 78753

Counties Served:

Travis, Bastrop, Lee

Funding Sources:

Federal Title VII, Part C; SSA-VR; Other Federal Funds; Fee for Service; Private

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

agreement: Social Security Administration Work Incentive Planning and Assistance:
Atascosa, Bandera, Bexar, Brooks, Cameron, DeWitt, Duval, Frio, Gillespie, Gonzales,
Guadalupe, Hidalgo, Jim Hogg, Jim Wells, Karnes, Kendall, Kenedy, Kerr, LaSalle,
Live Oak, McMullen, Medina, Starr, Webb, Willacy, Wilson, Zapata

Texas Department of Aging and Disability Services Relocation:

Bosque, Brazos, Burleson, Coryell, Falls, Fayette, Freestone, Grimes, Hamilton, Hill,
Lampasas, Lee, Leon, Limestone, Llano, McLennan, Madison, Mills, Robertson San
Saba, Washington

ARCIL San Marcos (SPIL Signatory)
(ARCIL)

618 S Guadalupe #103, San Marcos TX 78666

Counties Served:

Hays, Blanco, Caldwell, Comal

Funding Sources:

Federal Title VII, Part C

Brazos Valley Center for Independent Living (SPIL Signatory)
(BVCIL)

1869 Briarcrest Drive, Bryan, TX 77802

Counties Served:

Brazos, Burleson, Madison, Robertson & Washington

Funding Sources:

Federal Title VII, Part C; Local Government; Fee for Service; Private

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

DARS – DBS, IL Skills, Statewide authorization; DARS – DBS, Vocational Adjustment
Training/Work Adjustment Training, Statewide authorization but not required to accept
all referrals; DARS – DBS, Job Readiness Training/Job Placement, Statewide
authorization but not required to accept all referrals; Brazos Transit District (5310)

Mobility Management and Operating

Origins/destinations in the counties of Grimes, Leon; Texas Department of Aging and
Disability Services Financial Management Services Agency- MDCP, Bastrop, Bell,
Blanco, Bosque, Burnet, Caldwell, Coryell, Falls, Fayette, Freestone, Grimes, Hamilton,
Hays, Hill, Lampasas, Lee, Leon, Limestone, Llano, McLennan, Milam, Mills, San Saba,

Travis, Williamson; Texas Department of Aging and Disability Services Financial Management Services Agency – CLASS Bastrop, Bell, Blanco, Bosque, Burnet, Caldwell, Coryell, Falls, Fayette, Freestone, Grimes, Hamilton, Hays, Hill, Lampasas, Lee, Leon, Limestone, Llano, McLennan, Milam, Mills, San Saba, Travis, Williamson

**CBFL/Brazoria County Center for Independent Living (SPIL Signatory)
(BCCIL)**

1104-D East Mulberry, Angleton, Texas 77515

Counties Served:

Brazoria and Matagorda

Funding Sources:

Federal Title VII, Part C; Private; Fee for Service

**CBFL/Fort Bend Center for Independent Living (SPIL Signatory)
(FBCIL)**

12946 Dairy Ashford Road, Suite 110, Sugar Land, TX 77478

Counties Served:

Austin, Colorado, Fort Bend, Walker, Waller, Wharton

Funding Sources:

Federal Title VII, Part C; Private; Fee for Service

**CBFL/Houston Center for Independent Living (SPIL Signatory)
(HCIL)**

6201 Bonhomme Road, Suite 150-S, Houston, TX
77036

Counties Served:

Harris

Funding Sources:

Federal Title VII, Part C; SSA-VR; Other Federal Funds; Fee for Service; Private

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

agreement: Austin, Colorado, Brazoria, Chambers, Fort Bend, Galveston, Harris, Liberty, Matagorda, Montgomery, Walker, Waller, Wharton, Washington, Grimes (SSA WIPA and Texas Department of Aging and Disability Services Relocation)

**Coastal Bend Center for Independent Living (SPIL Signatory)
(CBCIL)**

1537 Seventh St., Corpus Christi, TX, 78404

Counties Served:

Aransas, Bee, Brooks, Duval, Jim Wells, Kenedy, Kleberg, Live Oak, McMullen, Nueces, Refugio, San Patricio

Funding Sources:

Federal Title VII, Part C; State, General Revenue, Other Federal Funds; Local Government, Fee for Service; Private

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

agreement: Aransas, Bee, Brooks, Cameron, Duval, Hidalgo, Jim Wells, Jim Hogg, Kenedy, Kleberg, Live Oak, McMullen, Nueces, Refugio, San Patricio, Starr, Webb, Willacy, Zapata Counties (Texas Department of Aging and Disability Services Relocation); Nueces catchment area, Hidalgo catchment area (Consumer Direct Services: MCO-United Healthcare, Superior Healthcare, Molina Healthcare and Healthspring); Aransas, Bee, Calhoun, Goliad, Jackson, Jim Wells, Kleberg, Lavaca, Live Oak, McMullen, Nueces, Refugio, San Patricio (CLASS Case Management Texas Department of Aging and Disability Services); Aransas, Bee, Brooks, Duval, Jim Wells, Kenedy, Kleberg, Live Oak, McMullen, Nueces, Refugio, San Patricio (MOP-Mobility Options Program) (Home Modifications- Amy Young Barrier Removal (TDHC) (City of Corpus Christi CDBG); Tenant Based Rental Assistance (TBRA TDCHA)

**Crockett Resource Center for Independent Living (SPIL Signatory)
(CRCIL)**

1020 Loop 304 East, Crockett, Texas 75835

Counties Served:

Houston, Trinity, Leon, Polk, Tyler, San Augustine, Sabine, Shelby, Panola, Rusk, Freestone, Alabama Coushatta Indian Reservation

Funding Sources:

SSA-VR; Federal Title VII, Part C

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

Texas Department of Aging and Disability Services Relocation Contract: Anderson, Cherokee, Henderson, Van Zandt, Angelina, Nacogdoches, Trinity, Limestone, Leon, Grimes, Madison, Brazos, Robertson, Washington, Falls, Milam

**Disability in Action, Inc. (SPIL Signatory)
(DIA)**

317 N. Willis St. Abilene, Texas 79603

Counties Served:

Stephens, Callahan, Taylor, Jones, Shackelford, Eastland

Funding Sources:

State, General Revenue; Other Federal Funds

**East Texas Center for Independent Living (SPIL Signatory)
(ETCIL)**

4713 Troup Hwy. Tyler Texas 75703

Counties Served:

Camp, Cherokee, Gregg, Harrison, Henderson, Marion, Panola, Rains, Rusk, Smith, Upshur, Van Zandt, Wood

Funding Sources:

Federal Title VII, Part C; Fee for Service; Private; State Contracts

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

agreement: Specialized Telecommunications Assistance Program Contract and Texas Department of Aging and Disability Services Relocation Subcontract: Anderson, Camp, Titus, Red River, Franklin, Hopkins, Delta, Lamar, Bowie, Marion, Cass, Morris

**Heart of Central Texas Independent Living Center, Inc. (SPIL Signatory)
(HOCTIL)**

222 E. Central Ave., Belton, Texas 76513

Counties Served:

Bell, Coryell, McLennan, and Hill

Funding Sources:

Federal Title VII, Part C; SSA-VR; Fee for Service; Private; Other State Funds; Other Federal Funds

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

Central Texas Council of Governments ADRC Housing Navigator and Respite Services: Hamilton, Lampassas, Milam, Mills, SanSaba; Texas Department of Aging and Disability Services Relocation Subcontract: Hamilton, Lampassas, Milam, Mills, SanSaba, Limestone, Freestone, Falls, Bosque, Brazos, Robertson; Consumer Directed Services: Hamilton, Lampassas, Milam, Mills, SanSaba, Limestone, Freestone, Falls, Bosque, Williamson, Travis; Ticket to Work: Hamilton, Lampassas, Milam, Mills, SanSaba; Limestone, Freestone, Falls, Bosque, Brazos, Williamson

**LIFE Inc. - LIFE/RUN (SPIL Signatory)
(LIFE Inc.)**

8240 Boston Avenue, Lubbock, TX 79423

Counties Served:

Crosby, Lubbock, Lynn, Terry, Lamb, Floyd, Garza, Hale, Hockley

Funding Sources:

Federal Title VII, Part C; SSA-VR; Other Federal Funds; Local Government; Fee for Service; Private

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

Texas Department of Aging and Disability Services Relocation Contract: 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, Ochiltree, 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

LIFE Inc. - Disability Connections (SPIL Signatory)

2809 Southwest Blvd., San Angelo TX 76904

Counties Served:

Tom Green, Sterling, Coke, Schleicher, Concho, Runnels, Irion, Menard

Funding Sources:

State, General Revenue

Mounting Horizons Inc. (SPIL Signatory)

(MHCIL)

4700 Broadway #C102, Galveston, Texas 77551

Counties Served:

Galveston

Funding Sources:

State, General Revenue; Other Federal Funds

Panhandle Independent Living Center (SPIL Signatory)

(PILC)

417 W. 10th Ave, Amarillo, Texas 79101

Counties Served:

Potter, Randall, Hartley, Deaf Smith, Parmer, Moore, Carson, Castro, Armstrong, Briscoe, Childress, Collingsworth, Dallam, Donley, Gray, Hall, Hansford, Hemphill, Hutchinson, Lipscomb, Ochiltree, Oldham, Roberts, Sherman, Swisher, Wheeler

Funding Sources:

Federal Title VII, Part C; SSA-VR; Other Federal Funds

Palestine Resource Center for Independent Living (SPIL Signatory)

(PRCIL)

421 Avenue A, Palestine, Texas 75801

Counties Served:

Anderson, Cherokee, Angelina, Nacogdoches, Smith

Funding Sources:

Federal Title VII, Part C

REACH of Dallas Resource Center on Independent Living (SPIL Signatory)

(REACH of Dallas)

8625 King George Drive, Suite 210, Dallas, TX 75235

Counties Served:

Dallas

Funding Sources:

Federal Title VII, Part C; SSA-VR; Fee for Service

REACH of Denton Resource Center on Independent Living

(REACH of Denton)

405 S. Elm Street, Suite 202, Denton, TX 76201

Counties Served:

Denton

Funding Sources:

Federal Title VII, Part C; Fee for Service

REACH of Fort Worth Resource Center on Independent Living

(REACH of Fort Worth)

1000 Macon Street, Suite 200

Fort Worth, TX 76102

Counties Served:

Tarrant

Funding Sources:

SSA-VR; Title VII, Part B

REACH of Plano Resource Center on Independent Living

(REACH of Plano)

720 E. Park Blvd., Suite 104, Plano, TX 75074

Counties Served:

Collin

Funding Sources:

State, General Revenue

RISE Center (SPIL Signatory)

(RISE Center for Independent Living)

755 S. 11th ST, STE 101, Beaumont, TX 77701

Counties Served:

Hardin, Orange, Jefferson

Funding Sources:

Federal Title VII, Part C; Fee for Service; Private

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

Texas Department of Aging and Disability Services Relocation Contract—Jefferson, Hardin, Orange, Polk, Sabine, Jasper, San Jacinto, San Augustine, Newton, Tyler

**San Antonio Independent Living Services (SPIL Signatory)
(SAILS)**

1028 South Alamo Street, San Antonio, Texas 78210

Counties Served:

Atascosa, Bexar, Calhoun, Comal, De Witt, Dimmit, Frio, Edwards, Gillespie, Goliad, Gonzales, Guadalupe, Bandera, Edwards, Karnes, Lavaca, Kerr, Jackson, Kendall, Kinney, Maverick, Medina, LaSalle, Uvalde, Val Verde, Real, Victoria, Zavala

Funding Sources:

SSA-VR; Federal Title VII, Part C; Other Federal Funds; Local Government; Fee for Service; Private

**Valley Association for Independent Living-Rio Grande Valley (SPIL Signatory)
(VAIL-Rio Grande Valley)**

3016 North McColl, Suite B, McAllen, TX 78501

Counties Served:

Cameron, Hidalgo, Starr, Willacy

Funding Sources:

Federal Title VII, Part C; SSA-VR; Fee for Service

**Valley Association for Independent Living-South Texas (SPIL Signatory)
(VAIL-South Texas)**

1419 Corpus Christi Street, Laredo, TX 78040

Counties Served:

Duval, Jim Hogg, Webb, Zapata

Funding Sources:

State, General Revenue

**Volar Center for Independent Living (SPIL Signatory)
(Volar CIL)**

1220 Golden Key Circle, El Paso, Texas 79925-5825

Counties Served:

El Paso

Funding Sources:

SSA-VR; Federal Title VII, Part C; Local Government; Private; Other Federal Funds

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

Specialized Telecommunications Assistance Program; Hearing Loss Resource
Specialist: Brewster, Culberson, Hudspeth, Jeff Davis, Presidio

Williamson County Center for Independent Living Services (SPIL Signatory)

(WCCIL)

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

Counties Served:

Williamson, Bell, Burnet, Milam

Funding Sources:

Federal Title VII, Part C

3.2 Expansion of Network – 34 CFR 364.25

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).

Strengthen the Network-- Statement of Funding Equity:

The Network of Centers for Independent Living and the Texas State Independent Living Council recognize the value and importance of implementing a statement of funding equity. The purpose of this statement is to increase access to services for individuals with disabilities and strengthen the Network. The Network is committed to pursuing increased funding that will allow for financial support to bring existing Centers for Independent Living up to a baseline level of \$500,000. Funding will also be pursued to expand the capacity of Centers for Independent Living to reach underserved populations and regions within existing coverage areas. Decreases in General Center for Independent Living Operating funds and stagnant funding levels jeopardize the ability of the Network to maintain their current level of services and adequately fund the activities of the five Core services. We believe funding for the Network should remain stable from year-to-year and every effort should be made to bring all Centers up to equal baseline funding. The Network will not accept expansion funds if it will potentially jeopardize the stability of the existing Network such as the reducing the continuation funding of existing Centers for Independent Living in the Network. Any funding to establish a new Center should be expected to continue from year-to-year indefinitely. As indicated in the Plan's Goals and Objectives, the Network will also pursue efforts to provide more security to the funding currently provided by the State of Texas.

The Texas State Independent Living Council and the Network of Centers for Independent Living worked together to identify a strategy for completing the network of Centers for Independent Living in the state. Based on 2010 U.S. Census Data, there are nearly 400,000 Texans with disabilities currently living in areas that are not served by a Center for Independent Living. Of the 254 counties in Texas, 162 receive at least the five core services by a Center for Independent Living.

Underserved Counties and Populations:

The Texas State Independent Living Council and the Network of Centers for Independent Living recognizes that all counties and areas currently served by a Center

for Independent Living are underserved. Despite the large number of Centers for Independent Living in Texas, the Independent Living needs in their service areas are greater than the resources and capacity available to them. Federal and State funding for the Texas Network has remained stagnant despite increased mandates and additional requirements. The Centers for Independent Living have worked to diversify their funding sources and secure private sources of funding, but a majority of Centers for Independent Living rely on federal and state sources for their base funding. It is imperative for the Network to secure additional funding to ensure they can meet the needs and serve the counties and populations within their current service areas and priorities. The fact remains that as long as the Network continues to be underfunded, the current Network's service areas and populations will also continue to be underserved.

Underserved Racial Populations:

A Needs Assessment survey was conducted and respondents identified Hispanic and Black/African American as the two categories that were most in the need of Independent Living Services in Texas.

Underserved Disability Populations:

The following number reflect those served with a consumer service record only and do not include Information and Referral services to these populations provided by a Center for Independent Living. Those with a consumer service record have significant disabilities and are seeking specific Independent Living services with often complex needs. Annual 704 Report data compiled from FY13-15 shows that hearing and vision disabilities are underserved by Centers for Independent Living compared to the rate of service for other disabilities such as physical and cognitive disabilities. These rates were calculated by totaling and averaging the number of services provided by Centers for Independent Living over the Fiscal Years 13-15 and comparing those figures to the number of people over the age of five residing in counties currently served by a Center for Independent Living that have self-identified as having difficulties with specific functions according to the 2013 American Community Survey.

Underserved Counties:

Data on the number of consumers receiving services in each county in FY13-15 from Center for Independent Living 704 Reports was compiled and analyzed to provide a list of those counties in Texas that are underserved. A three-year average of the number of Independent Living Services was calculated and compared to the number of individuals with disabilities residing in that county according to the American Community Survey. A rate of service was calculated for each county and an average rate of service for all served counties in Texas was calculated. There are 116 counties, which is approximately 72 percent of the counties served, receiving services at a rate below the statewide average rate of service and they are listed here as underserved counties.

Angelina
Armstrong
Atascosa
Bandera
Bastrop
Bexar
Blanco
Briscoe
Brooks
Burleson
Burnet
Calhoun
Callahan
Cameron
Carson
Castro
Childress
Collin
Collingsworth
Comal
Coryell
Crosby
Dallam
Dallas
Deaf Smith
Denton
DeWitt
Dimmit
Donley
Duval
Eastland
Edwards
Floyd
Fort Bend
Freestone
Frio
Gillespie
Goliad
Gonzales

Gray
Guadalupe
Hale
Hall
Hansford
Hardin
Harris
Harrison
Hartley
Hemphill
Henderson
Hidalgo
Hill
Hockley
Hutchinson
Jackson
Jim Hogg
Jim Wells
Karnes
Kendall
Kenedy
Kerr
Kinney
Lamb
Lavaca
Lee
Leon
Lipscomb
Live Oak
Lynn
Madison
Marion
Matagorda
Maverick
McLennan
Medina
Menard
Milam
Moore

Nacogdoches
Ochiltree
Oldham
Orange
Polk
Rains
Real
Roberts
Robertson
Rusk
Sabine
San Augustine
Shelby
Sherman
Starr
Swisher
Tarrant
Terry
Travis
Trinity
Tyler
Upshur
Upton
Uvalde
Val Verde
Van Zandt
Victoria
Waller
Ward
Washington
Webb
Wharton
Wheeler
Willacy
Wilson
Wood
Zapata
Zavala

Unserved Counties:

The following list represents the list of 92 unfunded and unserved counties in Texas with their respective disability populations according to the American Community Survey. The Centers remain aware of the unmet needs of those areas because they receive requests for additional services. It should be noted that Centers for Independent Living provide Information and Referral services to individuals in unserved counties at their

request. Should new state or federal funds become available for the purpose of establishing a new Center for Independent Living, the following counties (listed here with corresponding disability populations) would be eligible for such funding.

Archer	1,346	Grayson	19,049	Montgomery	48,057
Bailey	891	Grimes	3,665	Morris	3,068
Baylor	763	Hamilton	1,762	Motley	180
Borden	76	Hardeman	949	Navarro	8,379
Bosque	3,062	Haskell	1,275	Newton	2,658
Bowie	13,373	Hood	7,847	Nolan	2,729
Brewster	1,803	Hopkins	5,427	Palo Pinto	4,563
Brown	5,009	Howard	5,666	Parker	14,338
Cass	5,912	Hudspeth	724	Pecos	1,513
Chambers	4,718	Hunt	14,210	Presidio	1,904
Clay	1,927	Jack	1,604	Reagan	268
Cochran	569	Jasper	7,054	Red River	2,827
Coleman	1,075	Jeff Davis	685	Reeves	2,055
Comanche	2,474	Johnson	16,432	Rockwall	5,976
Cooke	5,386	Kaufman	13,198	San Jacinto	4,643
Cottle	329	Kent	168	San Saba	852
Crockett	398	Kimble	788	Scurry	2,454
Culbertson	445	King	31	Somervell	1,066
Dawson	1,680	Knox	756	Stonewall	244
Delta	797	La Salle	1,589	Sutton	356
Dickens	422	Lamar	8,989	Terrell	151
Ellis	19,086	Lampasas	2,998	Throckmorton	317
Erath	4,363	Liberty	13,516	Titus	5,476
Falls	3,003	Limestone	3,598	Walker	4,908
Fannin	5,550	Llano	4,265	Wichita	16,697
Fayette	2,924	Loving	13	Wilbarger	2,445
Fisher	589	Mason	779	Winkler	1,073
Foard	346	McCulloch	1,396	Wise	9,000
Franklin	2,270	Mills	620	Yoakum	860
Gaines	2,280	Mitchell	1,225	Young	3,076
Glasscock	85	Montague	3,449		

Expansion of the Network:

Efforts to expand and strengthen the network of Centers for Independent Living in Texas will involve working closely with state and federal entities toward the allocation of additional funding for the establishment and operation of Centers for Independent Living. Should funding become available, a competitive process will be conducted, which will define criteria for selection. In addition, as stated above, the network will not accept expansion funds if it will potentially jeopardize the stability of the existing network such as the reducing of the continuation funding of existing Centers for Independent Living in the 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.

Priority Unserved Or Underserved Area(s) in the State: Ninety-two counties in Texas remain unserved. In adherence with federal guidance, if Part C funds become available over the threshold of establishing a new Center, the priority will be to establish a new Center for Independent Living in an unserved area. Priority should be given to applicants with a cross-disability board in place that have filed for incorporation and obtained, or in a process of obtaining, 501(c)(3) tax exempt status. Such applicants will be in a position to initiate programming more readily. In addition, if additional funds from sources such as Part B, State General Revenue, or SSA-VR become available, the Network supports efforts for the following activities: 1) to add currently unserved areas/counties to an existing Center for Independent Living's catchment area for purposes of providing the five core services; 2) To expand the capacity of Centers for Independent Living to reach underserved populations and regions within existing coverage areas. The Network will not accept expansion funds if it will potentially jeopardize the stability of the existing Network.

Order Of Priority For Establishing New Centers for Independent Living in these Areas: Should funding become available to establish a new Center for Independent Living in an unserved area, the Network supports open competition among unserved areas and believes that all qualified applicants should be considered regardless of their presence on the priority areas list that follows. The following list contains the priority areas as required by the Rehabilitation Act. The areas are listed in descending order with the highest populations listed first; however, the order of listing should not be construed as being listed in any particular priority order. A map showing the priority areas is included in Appendix D.

- **Area A :** Location: Southeast Texas
Texas Health and Human Services Commission Region(s): 5,6,7
Unserved Counties with Disability Population: Chambers 4,718; Grimes 3,665; Liberty 13,516; Montgomery 48,057; San Jacinto 4,643; Walker 4,908
Total Disability Population: 79,507
- **Area B:** Location: North-East Texas
Texas Health and Human Services Commission Region(s): 4
Unserved Counties with Disability Population: Bowie 13,373; Cass 5,912; Delta 797; Franklin 2,270; Hopkins 5,427; Lamar 8,989; Morris 3,068; Red River 2,827; Titus 5,476
Total Disability Population: 48,139
- **Area C :** Location: North Texas
Texas Health and Human Services Commission Region(s): 2

Unserved Counties with Disability Population: Archer 1,346; Baylor 763; Clay 1,927; Cottle 329; Foard 346; Hardeman 949; Jack 1,604; Montague 3,449; Wichita 16,697; Wilbarger 2,445; Young 3,076
Total Disability Population: 32,931

- **Area D:** Location: North Texas
Texas Health and Human Services Commission Region(s): 3
Unserved Counties with Disability Population: Cooke 5,386; Fannin 5,550; Grayson 19,049
Total Disability Population: 29,985
- **Area E:** Location: Central Texas
Texas Health and Human Services Commission Region(s): 2,7,9
Unserved Counties with Disability Population: Brown 5,009; Coleman 1,075; Comanche 2,474; Hamilton 1,762; Lampasas 2,998; Llano 4,265; Mason 779; McCulloch 1,396; Mills 620; San Saba 852
Total Disability Population: 21,230
- **Area F:** Location: West Texas
Texas Health and Human Services Commission Region(s):9,10
Unserved Counties with Disability Population: Brewster 1,803; Culberson 445; Hudspeth 724; Jeff Davis 685; Loving 13; Pecos 1,513; Presidio 1,904; Reeves 2,055; Terrell 151; Winkler 1,073
Total Disability Population: 10,366
- **Area G :** Location: West Texas
Texas Health and Human Services Commission Region(s):9
Unserved Counties with Disability Population: Borden 76; Dawson 1,680; Gaines 2,280; Glasscock 85; Howard 5,666
Total Disability Population: 9,787

Funding Priorities:

The priorities for the designation of additional funds will be determined as funding becomes available through a process of negotiation among Texas Health and Human Services Commission, the Texas State Independent Living Council, and the Centers for Independent Living in the network. These basic guidelines will be employed to make such determinations:

- Short Term Funding: As previously stated, funds that are short-term in nature and do not have a provision for ongoing sustainability (beyond those used to establish a new Center for Independent Living if doing so does not jeopardize the Part C funding of existing Centers for Independent Living), will be used to expand the capacity of existing Centers for Independent Living consistent with the goals and objectives of the State Plan for Independent Living, with particular emphasis on underserved areas and populations. Such funds will be distributed among existing Centers for Independent Living in the same proportion as their regular Part C appropriation.

- Minimum Funding Level Required To Establish A New Center for Independent Living: The minimum funding required to establish a new Center for Independent Living (Center for Independent Living) in Texas is \$500,000 for the provision of the five core services. This figure reflects the staffing needs necessary to establish and maintain a Center for Independent Living with an Executive Director, Program Director, Bookkeeper, three IL Specialists, an Outreach Coordinator, and a Secretary/Administrative Assistant. This funding level includes salary, fringe, space, contract services, supplies, travel, and other necessary expenses. This figure was determined after reviewing the staffing and program needs to provide adequate consumer services while looking at the average costs of personnel and overhead from both rural and urban centers from across the state.
 - Potential Funding Sources For This Minimum Level (i.e., Part C only or a combination of Part C, Part B, state or other funding): Texas will fully utilize as many funding resources as possible to achieve the minimum funding levels depending on the availability of such sources. Resources that could be used to fulfill the minimum level include sustainable Part C, Part B, State General Revenue, and SSA-VR funds. When Part C funding does become available, the Texas State Independent Living Council and the Designated State Entity will coordinate with ACL to determine if these alternative sources are available to reach a minimum funding level to establish a new Center for Independent Living.
 - If The Minimum Funding Level Required To Establish A New Center Will Not Be Met, The Method By Which The State Requests ACL Distribute The Additional Part C Funds: If the minimum funding level required to establish a new Center cannot be met, Texas requests that distribution of additional Part C funds first to Part C Centers for annual Cost of Living Adjustment. The remaining funds above a cost of living allowance when available, should be distributed among existing Centers for Independent Living receiving Part C funding that receive less than \$500,000 in Part C funds, in the same proportion as their regular Part C award is to the State's total Part C allocation. With this method, it is goal of the Network to bring Part C centers that are currently funded below the established minimum funding level up to a more equitable level.

Funding Reductions:

Due to recent reductions, both planned and unplanned, the IL Network encourages the development of contingency plans, should there be a future reductions or rescission of state or federal funds. If reductions take place, the Center for Independent Living Network is committed to providing the five 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. It is recommended that the State use Part B funding to replace reductions in Part C funding. Should general funding for Centers for Independent Living be reduced at the State level, the Network of Centers should receive a proportional funding reduction, rather than consider the closing of a Center. It is expected that any such reductions may impact the quantity and quality of services

offered by 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 Texas State Independent Living Council and the network of Centers (and Texas Health and Human Services Commission when appropriate) will coordinate on the distribution of funds previously allocated to the Center. Should such funds remain available for use in the State, the areas and populations previously served by the now-closed center will be given higher priority to reestablish a Center for Independent Living to serve those areas. If a Center is not reestablished to serve those areas they will be listed as unserved areas for purposes of determining future 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 SeState Independent Living Council 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 Center for Independent Living (Part C) program.

- Refer to the State Plan for Independent Living Instructions for additional information about administrative support services.**

Designated State Unit Designation:

The Texas Health and Human Services Commission will provide services to receive, deposit, and disburse state and federal funds allocated for the Texas State Independent Living Council budget and resource plan, general Center for Independent Living operations, or State Plan for Independent Living objectives, in accordance with the approved State Plan for Independent Living and with applicable state and federal law and generally accepted accounting procedures, as per the Title VII requirements of the Designated State Entity.

Contract Monitoring:

Contracts with service providers that provide Independent Living Services under the Independent Living Services program will be monitored in accordance with the Texas Health and Human Services Commission, Contract Management Handbook published pursuant to Texas Government Code, Section 2261.256 on the Texas Comptroller of Public Accounts webpage, titled Health and Human Services System Contract Management Handbook.

Contract monitoring is the systematic review of a service provider's records, business processes, deliverables, and activities to ensure compliance with the terms and conditions of the contract. The goal of contract monitoring is to protect the health and safety of clients that receive services, ensure delivery of quality goods and services, and protect the financial interest of the state. Monitoring includes planned, ongoing, periodic, or unscheduled activities that cover financial, programmatic and administrative components.

Technical Assistance:

Contract managers and other Texas Health and Human Services Commission staff provide technical assistance, as needed, throughout the term of the Independent Living Services contract.

Technical assistance may include help to expand a service provider's capacity to provide a full range of independent living services. Technical assistance may be provided by phone, email, or during on-site visits, and can include circumstances, such as:

- turnover in key agency or service provider staff;
- difficulty with following contract terms and conditions, policies and procedures, or reporting requirements;
- clarification of health and human services agency policies;
- clarification of monitoring and oversight requirements;
- billing or payment issues;
- service delivery, including conducting assessments, direct delivery of services, and development of Independent Living Plans and appropriate documentation; or
- other identified needs.

Technical assistance may be provided more frequently for new service providers or when significant program changes are being implemented. Technical assistance also may be necessary for improving contract performance, overseeing compliance, supporting successful contract outcomes, and clarifying expectations.

Training:

Training for Independent Living Service providers under this program may include:

- the Independent Living philosophy;
- methods for training and assessing the needs of older individuals who are blind;
- training techniques and service delivery methodologies for special populations; and

- the administration, operation, evaluation, and performance of Independent Living services according to the rules for Independent Living Services, these standards, and the contract requirements.

Training opportunities will be developed and coordinated with the Texas Health and Human Services Commission staff and service providers.

New service providers will be required to participate in comprehensive orientation that covers contract and program requirements, to be held shortly before or after the contract start date. Other training may include required and optional training opportunities for program improvement.

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 Texas State Independent Living Council 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 State Independent Living Council identified in section 705(c). The description must address the three years of this State Plan for Independent Living.

- **Refer to the State Plan for Independent Living Instructions for more information about completing this section.**

The State of Texas' recent legislative changes has provided the Texas State Independent Living Council additional issues to navigate and ensure continuation of the State's quality services to the nearly three million Texans with disabilities. Texas' consolidation of health and human service agencies and movement of vocational rehabilitation to a different agency, Texas Workforce Commission, has resulted in a changing landscape in which Texas State Independent Living Council must adapt. These changes will require the Texas State Independent Living Council to more closely engage with both the Texas Health and Human Services Commission and Texas Workforce Commission staff, increase coordination and advocacy efforts, and share its experience in the disability and Center for Independent Living arena. The Texas State Independent Living Council is enthusiastic about future changes in Independent Living in Texas and a national perspective and is excited about being tasked with new State and national responsibilities.

The primary funding for the operation of the Texas State Independent Living Council is through Title VII, Part B funding. The State Independent Living Council also pursues funding from other sources, both public and private, for additional activities to

accomplish its mission, further State Plan for Independent Living objectives, and address IL needs identified throughout the state. These activities do not impair or interfere with the Texas State Independent Living Council's ability to perform its statutory duties. The Texas State Independent Living Council has established and maintains fiscal and fund accounting controls ensuring proper separation between federal and non-federal funds.

More specifically, the Resource Plan for the Texas State Independent Living Council includes \$409,564 from Title VII, Part B funding per year for FY17-19 to complete the following duties and authorities as well as to participate as noted in the following State Plan Goals and Objectives listed in Section 1.2A.

- Advocacy on Systems Change (Objective 1.1)
- Advocacy for Personal Care Attendant Issues (Objective 1.2)
- Advocacy for Coordination of Emergency Preparedness and Planning (Objective 1.3)
- Advocacy for Accessible Transportation (Objective 1.4)
- Advocacy for Accessible Housing (Objective 1.5)
- Advocacy and Support for Independent Living Services Resources (Objective 2.1)
- Advocacy and Support for Expanded Services to Unserved and Underserved Populations (Objective 2.2)
- Advocacy for Youth Transition (Objective 3.1)
- Advocacy for Additional Relocations Services (Objective 3.2)
- Advocacy for Diversion Services (Objective 3.3)

The Texas State Independent Living Council's primary duties include five federally-mandated tasks pursuant to the Section 705(c) of the Rehabilitation Act of 1973 and Workforce Innovation and Opportunity Act:

- Develop the State Plan for Independent Living as required by Section 704 of the Rehabilitation Act;
- Monitor, review, and evaluate the implementation of the State Plan for Independent Living;
- Meet regularly and ensure that meetings of the Texas State Independent Living Council are open to the public and sufficient advance notice of such meetings is provided;
- Submit to the Administrator periodic reports as the Administrator may reasonably request, and keep records, and afford access to records, as the Administrator finds necessary to verify the information in reports; and
- As appropriate, coordinate activities with other entities in the State that provide services that are complementary to Independent Living services, such as entities that facilitate the provision of or provide long-term community-based services and supports.

Section 705(c)(2) of the Rehabilitation Act authorizes the Texas State Independent Living Council to work with Centers for Independent Living to improve services provided to individuals with disabilities; conduct resource development activities to support the provision of Independent Living services by Centers for Independent Living; and perform other functions as appropriate to carry out the organization's mission. The Texas State

Independent Living Council intends to fully utilize all of the authorities authorized by federal statute and is also responsible for other notable activities, which it plans to continue in the upcoming years.

The organization and several Center for Independent Living partners currently administers *Get Fit, Work, and Play!*, which is a health and fitness initiative funded by Texas Council for Developmental Disabilities that impacts hundreds of Texans with disabilities. Another endeavor the Texas State Independent Living Council is bringing to the forefront of Independent Living discussion is its work on accessible transportation. Transportation Works, initially a Texas Department of Transportation project but now funded by the Texas Council for Developmental Disabilities, is a project that brings transportation providers, local governments, and consumers together to develop accessible transportation options for Texans with disabilities. The Texas State Independent Living Council also hosts an annual conference for Texans with disabilities to learn more about the Independent Living philosophy and address a wide range of topics that impact the community. The Texas State Independent Living Council is privileged to participate in these projects and plans to exercise its authority to continue these and other projects in the upcoming fiscal years to ensure Texans with disabilities thrive in their respective communities.

5.1B Describe how the following Texas State Independent Living Council resource plan requirements will be addressed:

- **The State Independent Living Council’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 State Independent Living Council resource plan that may compromise the independence of the State Independent Living Council.**
- **Reliance, to the maximum extent possible, on the use of resources in existence during the period of implementation of the State plan.**

The Texas State Independent Living Council has established fiscal policies and procedures that govern the expenditure of funds. Proper use of fiscal resources will be routinely monitored by the Texas Health and Human Services Commission. This monitoring includes a review of Texas State Independent Living Council billings for reimbursements, discussion of budget status at quarterly Texas State Independent Living Council meetings, and compliance with established protocols, should budget changes be requested. Additional monitoring activities include annual independent audits and periodic self-assessment of Texas State Independent Living Council operations in relation to standards and indicators.

The Texas State Independent Living Council 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)

Describe how the establishment and placement of the Texas State Independent Living Council ensures its independence with respect to the DSU and all other State agencies.

- Refer to the State Plan for Independent Living Instructions for more information about completing this section.**

The Texas State Independent Living Council was established following revisions to the Rehabilitation Act of 1973, as amended in 1992, when the Texas State Independent Living Council requirement was introduced. The Texas State Independent Living Council was established and created as an independent council (40 Tex. Admin. Code § 101.401). Because of its standing as an independent council, the Texas State Independent Living Council is not subject to Section 2110 of the Texas Government Code regarding state advisory committees. The Texas State Independent Living Council received its 501(c)(3) status in 1998. The current structural reference for the Texas State Independent Living Council is found in Texas Administrative Code Title 40, Part 2, Chapter 101, Subchapter D, Rule §101.603.

The Texas State Independent Living Council is a private, non-profit 501(c)(3) organization that functions as a fully autonomous entity. In this capacity, the Texas State Independent Living Council leases offices, retains staff, conducts daily activities, and administers both public and private funds. Funding for the Texas State Independent Living Council originates with the Administration on Community Living. Those funds are then granted to the Texas State Independent Living Council by Texas Health and Human Services Commission. (Title 40, Part 2, Chapter 101, Subchapter L, Rule §101.9101, Texas Administrative Code) The Texas State Independent Living Council is also free to raise additional funds from other sources, both public and private, to accomplish its mission.

While the Texas State Independent Living Council has an effective collaborative working relationship with Texas Health and Human Services Commission 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 State Plan for Independent Living, and advocacy for Independent Living issues for Texans with disabilities. The Texas State Independent Living Council is an objective entity that organically connects the Independent Living network for the good of individuals with disabilities and is an ideal catalyst for implementing change using stakeholder feedback and leveraging contacts to develop innovative solutions.

5.3 Appointment and Composition – 34 CFR 364.21(b) – (f)

Describe the process used by the State to appoint members to the Texas State Independent Living Council who meet the composition requirements in section 705(b).

- **Refer to the State Plan for Independent Living Instructions for more information about completing this section.**

Members of the Texas State Independent Living Council 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. While the Texas State Independent Living Council may identify and make recommendations of potential candidates for Council membership to the Governor's appointments office, the Texas State Independent Living Council does not have the power to nominate members. Those wishing to serve on the Texas State Independent Living Council are encouraged to apply with the Governor's office directly.

Composition of the Texas State Independent Living Council is reflected in Appendix B, which is used as a tool to track compliance with the requirements for Texas State Independent Living Council composition defined in Workforce Innovation and Opportunity Act. The Texas State Independent Living Council consists of 10 Council Members and four Ex-Officio Council Members; however, the organization is likely to increase in size in FY17. Recently, the Council indicated support to increase the voting Council Members from 10 to 12 Members. Additionally, Section 705(b)(1)(C) of the Rehabilitation Act provides specific provisions for the composition of the Texas State Independent Living Council regarding Ex-Officio members. The section requires the Texas State Independent Living Council to include representatives of Texas agencies that represent individuals with disabilities. As such, the Texas State Independent Living Council is likely to increase in size to include representatives from State agencies as Ex-Officio members on the Council. Additional representation from the following agencies may include:

- Texas Workforce Commission;
- Texas Education Agency;
- Texas Department of Transportation;
- Texas Veteran's Commission; and
- Texas Department of Insurance, Division of Workers' Compensation.

5.4 Staffing – 34 CFR 364.21(j)

Describe how the following Texas State Independent Living Council 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.**

Responsibilities for supervision and evaluation of the Texas State Independent Living Council Executive Director lie primarily with the Texas State Independent Living Council

Chair. An annual evaluation of the Executive Director is standard protocol with input from the Texas State Independent Living Council Executive Committee. The Executive Director supervises and evaluates the performance of any other staff. All employees of the Texas State Independent Living Council 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. However, the Texas State Independent Living Council and/or the Executive Director may conduct employee evaluations at any time as appropriate.

Texas State Independent Living Council personnel are not employed by the Designated State Entity or any other state agency. The Designated State Entity does not have authority to hire, evaluate, or otherwise control Texas State Independent Living Council personnel. Particular attention is paid regarding personnel assignments to avoid any conflict of interest in relation to carrying out Texas State Independent Living Council-related duties. Conflict of interest policies are included in employee policy and procedure documents and Council bylaws.

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 Independent Living Services and in the development and support of Centers for Independent Living.**
- **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 Independent Living Services under Title VII of the Act.**
- **Establishment and maintenance of a program of staff development for all classes of positions involved in providing Independent Living Services and, where appropriate, in administering the Center for Independent Living program, improving the skills of staff directly responsible for the provision of Independent Living 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.

General Independent Living Services Personnel Requirements:

Staff Members with Disabilities

The Independent Living Service Provider's organizational and personnel assignment practices, as documented in written board policy, must comply with Section 503 of the Rehabilitation Act, including taking affirmative action to employ and promote qualified individuals with significant disabilities. An Independent Living Service Provider must also document that the majority of its staff members, including members in decision-making positions, are people with disabilities.

Staff Qualifications

The Independent Living Service Provider's staff members must include specialists in developing and providing Independent Living Services and in developing and supporting a Center for Independent Living. To the greatest extent possible, personnel should be available who are able to communicate:

- with individuals with significant disabilities who rely on alternative modes of communication, such as manual communication, nonverbal communication devices, braille, or audiotapes;
- with people who apply for or receive IL services under Title VII of the Act; and
- 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.

In accordance with the Independent Living Standards, staff managing independent living services cases, determining eligibility, and providing or coordinating services for adults who have a significant disability must have a bachelor's degree in an appropriate field. This degree requires a minimum of one-year experience in rehabilitation or two years' experience in providing similar independent living services for individuals who have a significant disability.

Staff Training and Development

The Independent Living Service Provider must establish and maintain a program of staff development for those involved in providing Independent Living Services. Staff development programs should emphasize improving the skills of staff members directly responsible for providing Independent Living Services, including knowledge and practice of the Independent Living philosophy. An Independent Living Service Provider must provide training to its staff on how to serve unserved and underserved populations, including minority groups and urban and rural populations, as evidenced by in-service training records.

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.

Fiscal control and fund accounting procedures and requirements are included in the Standards for Providers and the Independent Living Program Standards Manual. Compliance with requirements is examined during the application process before contracts are authorized. Compliance is reviewed as part of routine contract monitoring activities.

Centers for Independent Living receiving Part C funds comply with federal fiscal regulations as outlined under the Uniform Guidance (2 CFR § 200).

6.3 Recordkeeping, 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.**

Financial Management System

As outlined in the Independent Living Standards: The financial management system of the Independent Living Services provider must provide for the following:

- Identification, in its accounts, of all federal awards received and expended and the federal programs under which they were received. Federal award Catalog of Federal Domestic Assistance numbers will be provided as invoices are received and reimbursements are made.
- Accurate, current, and complete disclosure of the financial results of each federal award or program in accordance with the reporting requirements set forth under 2 Code of Federal Regulations (CFR), Subtitle A, Chapter II, Part 200, Uniform Guidance (UGG), Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards 200.327 Financial reporting, and 200.328 Monitoring and reporting program performance.
- Records that identify adequately the source and application of funds for federally funded activities, to contain information pertaining to federal awards, authorizations, obligations, unobligated balances, assets, expenditures, income and interest and be supported by source documentation.

- Effective control over, and accountability for, all funds, property, and other assets.
- Comparison of expenditures with budget amounts for each federal award.
- Written procedures to implement the requirements of 2 CFR, §200.305 Payment.
- Written procedures for determining the allowability of costs in accordance with 2 CFR, Part 200, Subpart E—Cost Principles of this part and the terms and conditions of the federal award.

The Independent Living Services provider must maintain an accounting system and records in which separate records are maintained for each funding source provided by the Texas Health and Human Services Commission and other funding sources. A cost center/objective must be set up for the Independent Living Services program contract separate from other Texas Health and Human Services Commission grants or contracts.

The Independent Living Services provider must be able to account for Independent Living Services program costs applicable to consumers served in accordance with the rules in the 40 TAC Chapter 104, Independent Living Services and 40 TAC Chapter 106, Subchapter D, Independent Living Services for Older Individuals who are Blind (OIB), and with these standards. The methods used to account for these costs, as documented, recorded and tracked, include:

- identifying eligible consumers served, including OIB, and recording services provided from intake to closure;
- setting up separate account codes for budget categories applicable to costs for services provided and other non-purchased service costs, including OIB;
- establishing a system for employees to record the time and/or resources spent and the costs salaries and wages and fringe benefits based on records that accurately reflect work performed, including for OIB consumers;
- recording and allocating all expenses applicable to program activities by budget category, including activities related to older individuals who are blind;
- reporting separate expenses by funding sources on invoices that bill for Independent Living Services Program costs, including older individuals who are blind; and
- entering information in the Independent Living Services Data Reporting System as required, including entering data related to older individuals who are blind.

Audit Requirements: In accordance with contract assurances, all Independent Living Services providers are required to obtain an annual financial audit conducted by an independent auditor in compliance with generally accepted auditing standards (GAAS), as published by the American Institute of Certified Public Accountants.

- The Independent Living Services provider must arrange for a financial and compliance audit (Single Audit) if required in accordance with 2 CFR Part 200, Uniform Guidance, Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards and/or Uniform Grant Management Standards (UGMS) State of Texas Audit Circular.

- If a Single Audit is not required, the service provider shall obtain an annual audit of its financial statements.

The Independent Living Services provider will be given instructions for audit submission to the Texas Health and Human Services Commission.

Centers for Independent Living receiving Part C funds comply with federal fiscal regulations as outlined under the Uniform Guidance (2 CFR § 200).

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 Independent Living Services under the State Independent Living Services and Center for Independent Living programs.**
- **Ability of any individual to seek information about Independent Living 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 Independent Living Services under the State Independent Living Services and Center for Independent Living 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 Independent Living Services.**
- **Non-exclusion from receiving Independent Living Services of any individual who is present in the State and who is otherwise eligible for Independent Living Services, based on the imposition of any State or local residence requirement.**

To be eligible for Independent Living Services, a consumer must:

- have a significant disability as defined in Independent Living Standards; and
- be present in Texas.

Eligibility requirements are applied without regard to a person's age, color, creed, gender, national origin, race, religion, or length of time present in Texas.

Eligibility is determined by the Independent Living Services provider, based on the documented diagnosis of a licensed practitioner, and information gathered from the consumer to define their ability to benefit from services and reach Independent Living goals. All source records gathered to document eligibility should be maintained entered as part of the consumer service record.

The Independent Living Services provider must document the eligibility decision, including the records of diagnosis from a licensed practitioner, in the consumer service record.

Once a consumer is determined to be eligible for services, the Independent Living Services provider:

1. gathers financial information from the consumer to include the most recent federal tax return or documents to assess and confirm household size, gross income and allowable expenses;
2. verifies the benefits of all consumers who may be covered for independent living services by comparable services or benefits and maintains all related documentation;
3. assesses the consumer's ability to pay according to the federal poverty limit guidelines; and
4. notifies the consumer, or the consumer's representative, in writing about the eligibility decision and the assessment of ability to pay and the anticipated percentage to be applied as fee for service.

Ineligibility:

If an Independent Living Services provider determines that a consumer is not eligible based on the eligibility criteria, the service provider documents the determination of ineligibility and provides the Texas Health and Human Services Commission with a copy that is signed and dated by the service provider's executive director or designee. This ineligibility determination should be filed in the consumer service record along with any supporting documentation.

The Independent Living Services provider may determine a consumer to be ineligible for independent living services only after consultation with the consumer or after providing a clear opportunity for consultation.

6.5 Independent Living Plans – 34 CFR 364.43(c)

- **Provision of Independent Living 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.**

After determining eligibility, the next step in the independent living services process is to develop the Independent Living Plan or waived Independent Living Plan.

The Independent Living Services provider uses all available information to counsel with the consumer regarding service options available to help the consumer:

- identify the independent living goals;
- complete the consumer cost participation requirements; and
- develop the Independent Living Plan or waived Independent Living Plan.

All Consumers served by Centers for Independent Living 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 Independent Living 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.**

As outlined in the Independent Living Standards, the Client Assistance Program (CAP) is a federally-funded program created by the Rehabilitation Act of 1973. The Client Assistance Program helps inform and advise all consumers or applicants of all available benefits under the Act. The Client Assistance Program also helps and advocates for consumers or applicants in their relationships with projects, programs, and service providers under the Act. The Client Assistance Program has the ability to pursue legal, administrative, or other appropriate remedies to ensure protection of the rights of such consumers.

The Client Assistance Program was created to:

- Provide information about the services and benefits from the Independent Living Program
- Inform applicants and consumers of their rights in the Independent living program
- Assist and advocate for clients in their relationships with Independent Living Program and Centers for Independent Living
- Assist consumers and applicants in understanding and using the appeals process,
- Assist in individual and systemic advocacy in relation to the Independent Living Program, including addressing policy issues and changes.

Centers for Independent Living and Independent Living Services providers must use accessible formats to notify individuals with disabilities who are prospective or current consumers about

- the availability of the CAP,
- the purposes of the services provided under the CAP, and
- how to contact the CAP.

Centers for Independent Living and Independent Living Service providers should notify clients of the Client Assistance Program at application, the development of the Independent Living Plan, and anytime services are reduced, suspended or terminated.

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 service provider adopts and implements policies and procedures to safeguard confidential personal information, including photographs and lists of names.

These policies and procedures comply with 34 Code of Federal Regulations, §364.56, and assure that:

- specific safeguards protect current and stored personal information;
- all consumers of independent living services and, as appropriate, consumers' representatives, and interested persons are informed and the conditions for gaining access to and releasing this information; and
- all consumers and consumers' representatives are informed about the service providers need to collect personal information, and the policies governing its use.

In addition to requirements above, the service provider complies with the information and security and confidentiality requirements in the contract uniform terms and conditions.

Federally-funded Centers for Independent Living comply with confidentiality requirements established by ACL. 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

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

Implementation Plan:

The evaluation of the implementation of the State Plan will be performed by the Texas State Independent Living Council staff and reported to the Texas State Independent Living Council and Centers for Independent Living on a semi-annual basis. An annual report summary will be included in the Texas State Independent Living Council's annual 704 Report and will be posted on the Texas State Independent Living Council website for review by the public. Evaluation findings will be used to discuss needed improvements, revisions, or changes to the State Plan. Information and data on participation, resources, and activities underway will be collected from State Plan for Independent Living partners in the IL Network.

Progress on Objectives Plan:

The evaluation of the progress on objectives of the State Plan will be performed by the Texas State Independent Living Council on a quarterly basis. An annual report will be included in the Texas State Independent Living Council's annual 704 report and a summary will be posted on the Texas State Independent Living Council website for review by the public. Evaluation findings will be used to discuss needed improvements and possible revisions to objectives, targets, or indicators. Information and data will be evaluated for each objective, its corresponding activities, and indicators (see Section 1.2A) as appropriate as it is received from State Plan for Independent Living partners in

the IL Network.

Consumer Satisfaction Plan:

The evaluation of consumer satisfaction on a statewide basis will be conducted by the Texas State Independent Living Council annually based on evaluations conducted by the Center for Independent Living Network. The Texas State Independent Living Council will work with the Centers for Independent Living to include a standard set of questions within their own consumer satisfaction tools to ensure continuity of data across the Network for this purpose. The data and conclusions will be reported in the aggregate to the Texas State Independent Living Council, Centers for Independent Living, and the Designated State Entity. A summary of the conclusions and findings will be posted online via the Texas State Independent Living Council website for viewing by the public. The findings will be used to make recommendations for service delivery improvements.

Section 8: State-Imposed Requirements

Identify any State-imposed requirements contained in the provisions of this State Plan for Independent Living. Indicate N/A if not applicable. 34 CFR 364.20(h)

Waiting List

Independent Living Services are provided when funding is available. When funding is not available for purchased services in the Independent Living Services program, the Independent Living Service provider maintains a waiting list.

A consumer is placed on a waiting list by the service provider when:

- the consumer meets the eligibility requirements for the program. and
- the consumer has a signed Independent Living Plan or a signed waiver and there is no funding for the purchase service; therefore, the consumer is placed on the waiting list until funds are available.

The waiting list is reviewed every six months by the service provider to determine whether consumers are still eligible for or interested in services. Consumers are removed from the waiting list when funding becomes available for the purchased service, or if the consumer is no longer eligible, or the consumer is no longer interested in the purchased service.

APPENDIX A: Signatures of CIL Directors

Marilyn Hancock; ABLE Center for Independent Living

Ronald Rocha; ARCIL INC., ARCIL San Marcos, Williamson County Center for Independent Living Services

Jackie Pacha; Brazos Valley Center for Independent Living

Sandra Bookman; CBFL/Houston Center for Independent Living, CBFL/Brazoria County Center for Independent Living, CBFL/Fort Bend Center for Independent Living

Linda Fallwell Stover; Coastal Bend Center for Independent Living

Sara Minton; Crockett Resource Center for Independent Living, Palestine Resource Center for Independent Living

Leah Beltran, Disability In Action

Laura Mattheis; East Texas Center for Independent Living

Peggy Cosner; Heart of Central Texas Independent Living Center, Inc.

Michelle Crain; LIFE Inc. - Disability Connections, LIFE Inc. - LIFE/RUN

Perry Hunter; Mounting Horizons

Joe Rogers; Panhandle Independent Living Center

Charlotte Stewart; REACH of Plano Resource Center on Independent Living, REACH of Denton Resource Center on Independent Living, REACH of Dallas Resource Center on Independent Living, REACH of Ft. Worth Resource Center on Independent Living

James Brocato; RISE Center

Dr. Kitty Brietzke; San Antonio Independent Living Services

Susan Nelson; Valley Association for Independent Living-Rio Grande Valley, Valley Association for Independent Living-South Texas

Luis Enrique Chew; Volar Center for Independent Living

APPENDIX B: Texas State Independent Living Council Composition

Jimmy Batchelor, Chair
County: Delta
Term: Expires October 24, 2017
Position: Person with a disability

Lynne Richardson, Vice Chair
County: Williamson
Term: Expires October 24, 2017
Position: Person with a disability

Karen Swearingen, Treasurer
County: Dallas
Term: Expires October 24, 2016
Position: Parent of a person with a disability

Shannon Alexander, Secretary
County: Brazos
Term: Expires October 24, 2017
Position: Person with a disability

Jim Brocato, Council Member
County: Jefferson
Term: Expires October 24, 2018
Position: Center for Independent Living Director

Mack Marsh, Jr., Council Member
County: Williamson
Term: Expires October 24, 2018
Position: Person with a disability

Paul Luther, Council Member
County: Williamson
Term: Expires October 24, 2017
Position: Business Representative

Colton Read, Council Member
County: Comal
Term: Expires October 24, 2016
Position: Person with a disability

Ralph Jones, Ph.D.
County: Cameron
Term: Expires October 24, 2018
Position: Person with a disability

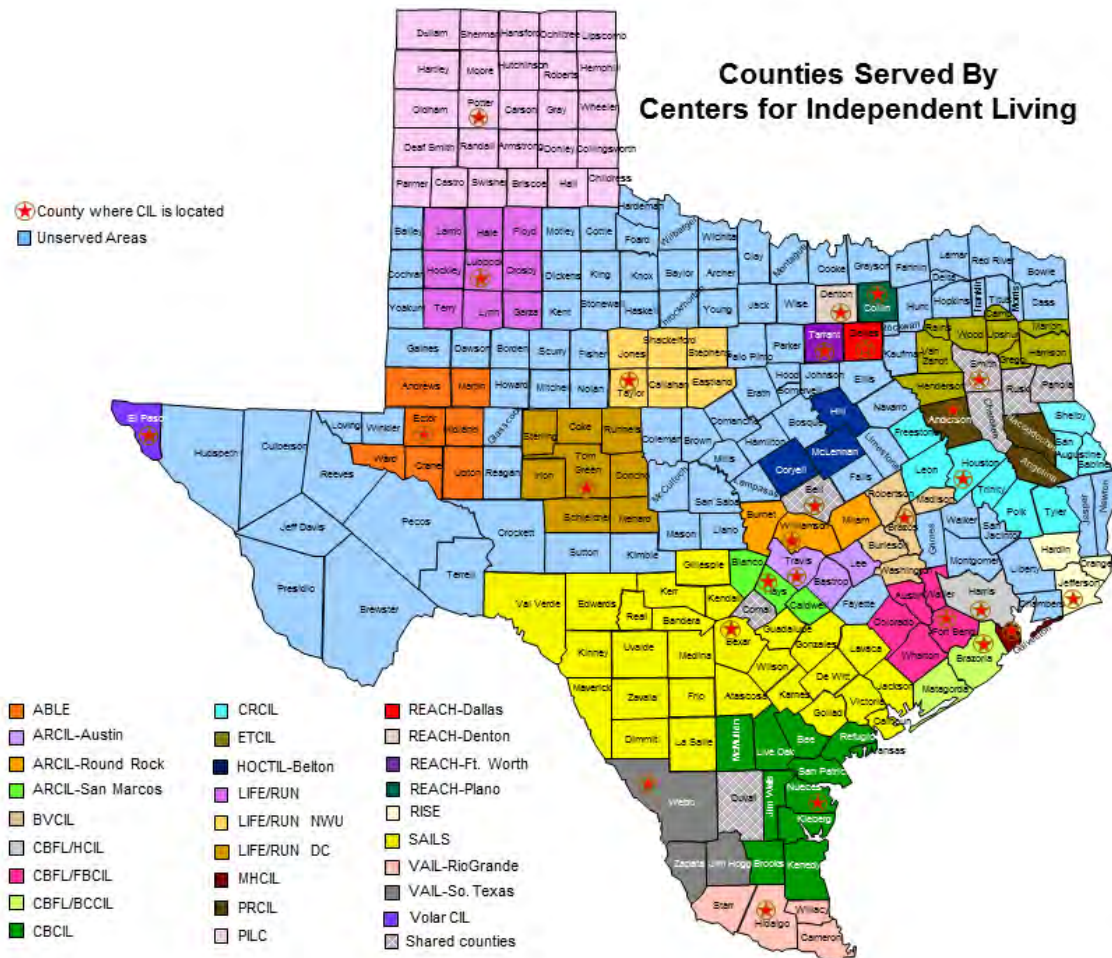
Martha Bagley, Department of Assistive and Rehabilitative Services
October 24, 2017
Position: Ex-Officio

Jonas Schwartz, Department of Assistive and Rehabilitative Services
October 24, 2017
Position: Ex-Officio

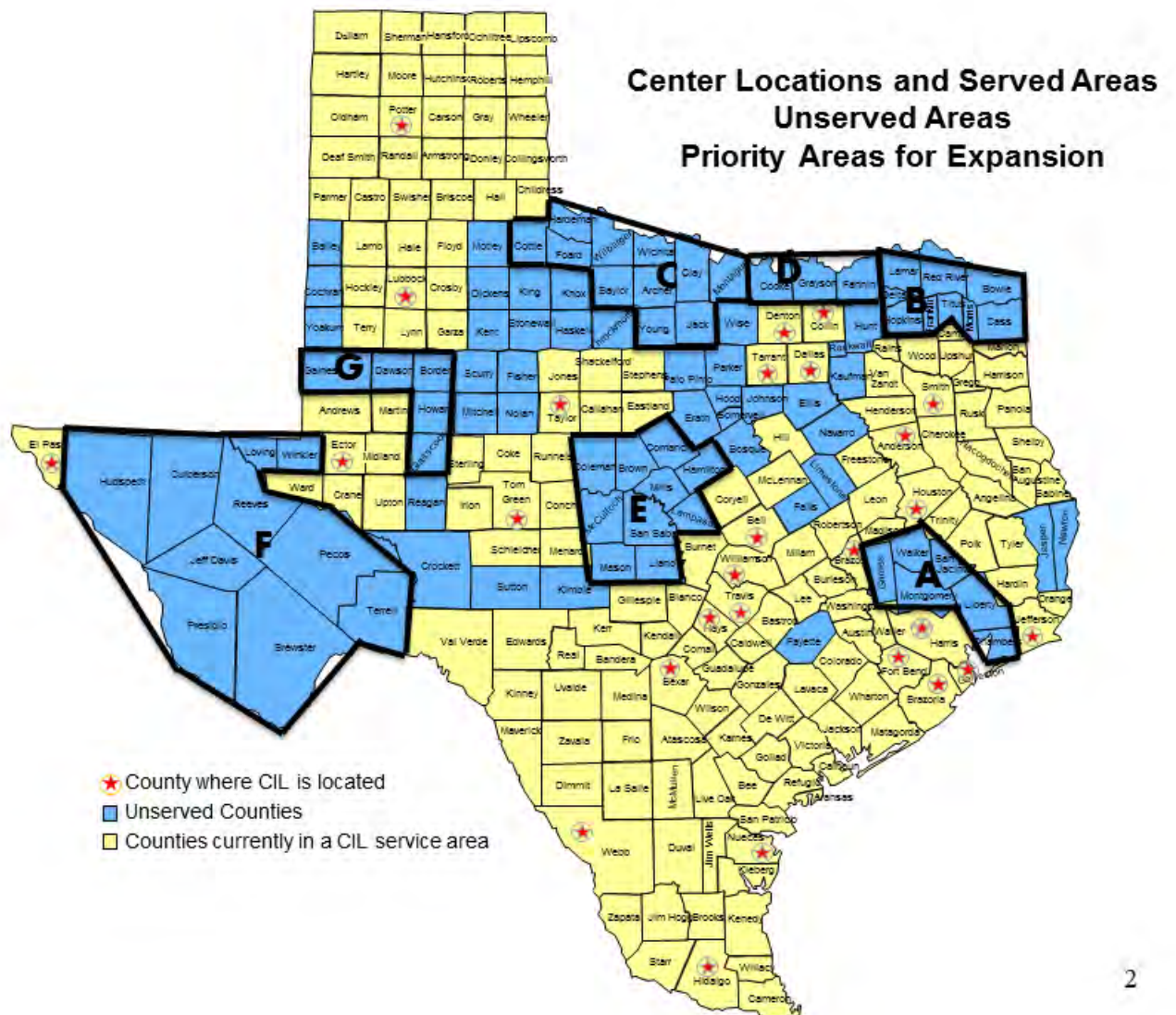
Terri Richard, Texas Department of Housing and Community Affairs
October 24, 2016
Position: Ex-Officio

Wesley Yeager, Texas Department of Aging and Disability Services
October 24, 2017
Position: Ex-Officio

APPENDIX C: Texas Center for Independent Living Coverage Map



APPENDIX D: Center for Independent Living Expansion Map



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:

Texas Council on Autism and Pervasive Developmental Disorders

Number of Members:

4 Public, 6 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:

9/1/1987

Date to Be Abolished:

Budget Strategy (Strategies)
(e.g. 1-2-4)

1-3-1

Strategy Title (e.g. Occupational Licensing)

Autism Program

Budget Strategy (Strategies)

A-3-1

Strategy Title

State / Federal Authority	Select Type	Identify Specific Citation
State Authority	Statute	Human Resources Code, Chapter 114, Texas Council on Autism and Pervasive Developmental Disorders (S.B. 257, 70th Legislature, Regular Session, 1987)
State Authority		
State Authority		
Federal Authority		
Federal Authority		
Federal Authority		

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		\$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
Total, Committee Expenditures		\$8,846	\$7,251	\$13,000
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
Total, Committee Expenditures		\$0	\$0	\$0
Method of Financing		Expended Exp 2015	Estimated Est 2016	Budgeted 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		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? Committee meets quarterly in Austin

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 ?

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?

480.0

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?

No

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?

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.

None

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.

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?

No

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.

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 UTHHealth:

Octavius Bonacquisti updated the Council on the status of the Council/DARS contract with UTHHealth. UTHHealth 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



Meeting Minutes

**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