**State Plan for
Independent Living**

**(SPIL)**

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

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

**Part B**

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

**Part C**

**FISCAL YEARS 2011- 2013**

**Effective Date: October 1, 2010**

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PART I: Assurances

State of: \_\_\_Texas\_\_\_\_\_\_\_\_\_

Section 1: Legal Basis and Certifications

* 1. The designated State unit (DSU) eligible to submit the State Plan for Independent Living (SPIL or the plan) and authorized under State law to perform the functions of the State under the State Independent Living Services (SILS) and Centers for Independent Living (CIL) programs is \_Department of Assistive and Rehabilitative Services (DARS), Division for Rehabilitation Services (DRS). 34 CFR 76.104(a)(1) and (2); 34 CFR 364.22(a)
	2. The separate State agency eligible to submit the plan and authorized under State law to provide vocational rehabilitation (VR) services to individuals who are blind is DARS Division for Blind Services (DBS). Indicate N/A if not applicable. 34 CFR 76.104(a)(1) and (2); 34 CFR 364.20(d) and 364.22(c)
	3. The Statewide Independent Living Council (SILC) that meets the requirements of section 705 of the Act and is authorized to perform the functions outlined in section 705(c) of the Act in the State is Texas State Independent Living Council. 34 CFR 364.21(a)
	4. The DSU and, if applicable, the separate State agency authorized to provide VR services to individuals who are blind, and the SILC are authorized to jointly develop, sign and submit this SPIL on behalf of the State, and have adopted or otherwise formally approved the SPIL. 34 CFR 76.104(a)(7); 34 CFR 364.20(c) and (d)
	5. The DSU, and, if applicable, the separate State agency authorized to provide VR services to individuals who are blind, may legally carry out each provision of the plan and will comply with all applicable Federal statutes and regulations in effect with respect to the three-year period it receives funding under the SPIL. 34 CFR 76.104; 34 CFR 80.11(c)
	6. The SPIL is the basis for State operation and administration of the program. All provisions of the SPIL plan are consistent with State law. 34 CFR 76.104(a)(4) and (8)
	7. The representative(s) of the DSU and, if applicable, of the separate State agency authorized to provide VR services to individuals who are blind, who has/have the authority under State law to receive, hold, and disburse Federal funds made available under the SPIL and to submit the SPIL jointly with the SILC chairperson is/are: \_Jim Hanophy, Assistant Commissioner, DARS-DRS and Barbara J. Madrigal, Assistant Commissioner, DARS-DBS. 34 CFR 76.104(a)(5) and (6)

Section 2: SPIL Development

* 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:
1. The provision of State independent living services;
2. The development and support of a statewide network of centers for independent living; and
3. 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)*
	1. The DSU and SILC conduct public meetings to provide all segments of the public, including interested groups, organizations and individuals, an opportunity to comment on the State plan prior to its submission to the Commissioner and on any revisions to the approved State plan. *34 CFR 20(g)(1)*
	2. The DSU and SILC establish and maintain a written description of procedures for conducting public meetings in accordance with the following requirements:

The DSU and SILC shall provide:

1. Appropriate and sufficient notice of the public meetings (that is, at least 30 days prior to the public meeting through various media available to the general public, such as newspapers and public service announcements, and through specific contacts with appropriate constituency groups and organizations identified by the DSU and SILC);
2. 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
3. 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)*
	1. At the public meetings to develop the State plan, the DSU and SILC identify those provisions in the SPIL that are State-imposed requirements beyond what would be required to comply with the regulations in 34 CFR parts 364, 365, 366, and 367. *34 CFR 364.20(h*)
	2. The DSU will seek to incorporate into and describe in the State plan any new methods or approaches for the provision of IL services to older individuals who are blind that are developed under a project funded under chapter 2 of title VII of the Act and that the DSU determines to be effective. *34 CFR 364.28*
	3. The DSU and SILC actively consult, as appropriate, in the development of the State plan with the director of the Client Assistance Program (CAP) authorized under section 112 of the Act. *34 CFR 364.20(e)*

Section 3: Independent Living Services

3.1 The State, directly or through grants or contracts, will provide IL services with Federal, State, or other funds. *34 CFR 364.43(b)*

3.2 Independent living services shall be provided to individuals with significant disabilities in accordance with an independent living plan mutually agreed upon by an appropriate staff member of the service provider and the individual, unless the individual signs a waiver stating that such a plan is unnecessary. *34 CFR 364.43(c)*

3.3 All service providers will use formats that are accessible to notify individuals seeking or receiving IL services under chapter 1 of title VII about:

1. The availability of the CAP authorized by section 112 of the Act;
2. The purposes of the services provided under the CAP; and
3. How to contact the CAP.*34 CFR 364.30*

3.4 Participating service providers meet all applicable State licensure or certification requirements. *34 CFR 365.31(c)*

Section 4: Eligibility

4.1 Any individual with a significant disability, as defined in 34 CFR 364.4(b), is eligible for IL services under the SILS and CIL programs authorized under chapter 1 of title VII of the Act. Any individual may seek information about IL services under these programs and request referral to other services and programs for individuals with significant disabilities, as appropriate. The determination of an individual's eligibility for IL services under the SILS and CIL programs meets the requirements of 34 CFR 364.51. *34 CFR 364.40(a), (b) and (c)*

4.2 Service providers apply eligibility requirements without regard to age, color, creed, gender, national origin, race, religion or type of significant disability of the individual applying for IL services. *34 CFR 364.41(a)*

4.3 Service providers do not impose any State or local residence requirement that excludes any individual who is present in the State and who is otherwise eligible for IL services from receiving IL services. *34 CFR 364.41(b)*

Section 5: Staffing Requirements

5.1 Service provider staff includes personnel who are specialists in the development and provision of IL services and in the development and support of centers. *34 CFR 364.23(a*)

 5.2 To the maximum extent feasible, a service provider makes available personnel able to communicate:

(1) With individuals with significant disabilities who rely on alternative modes of communication, such as manual communication, nonverbal communication devices, Braille or audio tapes, and who apply for or receive IL services under title VII of the Act and (2) in the native languages of individuals with significant disabilities whose English proficiency is limited and who apply for or receive IL services under title VII of the Act. *34 CFR 364.23(b)*

5.3 Service providers establish and maintain a program of staff development for all classes of positions involved in providing IL services and, if appropriate, in administering the CIL program. The staff development programs emphasize improving the skills of staff directly responsible for the provision of IL services, including knowledge of and practice in the IL philosophy. *34 CFR 364.24*

5.4 All recipients of financial assistance under parts B and C of chapter 1 of title VII of the Act will take affirmative action to employ and advance in employment qualified individuals with significant disabilities on the same terms and conditions required with respect to the employment of individuals with disabilities under section 503 of the Act. *34 CFR 364.31*

Section 6: Fiscal Control and Fund Accounting

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

Section 7: Recordkeeping, Access and Reporting

7.1 In addition to complying with applicable EDGAR recordkeeping requirements, all recipients of financial assistance under parts B and C of chapter 1 of title VII of the Act will maintain records that fully disclose and document:

1. The amount and disposition by the recipient of that financial assistance;
2. The total cost of the project or undertaking in connection with which the financial assistance is given or used;
3. The amount of that portion of the cost of the project or undertaking supplied by other sources;
4. Compliance with the requirements of chapter 1 of title VII of the Act and Part 364 of the regulations; and
5. Other information that the Commissioner determines to be appropriate to facilitate an effective audit. *34 CFR 364.35(a) and (b)*

7.2 All recipients of financial assistance under parts B and C of chapter 1 of title VII of the Act will submit reports that the Commissioner determines to be appropriate with respect to the records that are required by 34 CFR 364.35 and .*36*

7.3 All recipients of financial assistance under parts B and C of chapter 1 and chapter 2 of title VII of the Act will provide access to the Commissioner and the Comptroller General, or any of their duly authorized representatives, to the records listed in 34 CFR 364.37 for the purpose of conducting audits, examinations and compliance reviews. *34 CFR 364.37*

Section 8: Protection, Use and Release of Personal Information

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

Section 9: Signatures

After having carefully reviewed all of the assurance in sections 1 – 8 of this SPIL, the undersigned hereby affirm that the State of \_Texas\_ is in compliance and will remain in compliance with the aforementioned assurances during the three-year period of this SPIL (FY 2011 – FY 2013).

The effective date of this SPIL is: October 1, 2010

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

SIGNATURE OF SILC CHAIRPERSON DATE

\_ Michelle Crain \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME OF SILC CHAIRPERSON

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNATURE OF DSU DIRECTOR DATE

Jim Hanophy, Assistant Commissioner, DARS-DRS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME AND TITLE OF DSU DIRECTOR

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Barbara J. Madrigal, Assistant Commissioner, DARS-DBS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

The Texas State Plan for Independent Living is a collaborative effort between the State Independent Living Council (SILC) and the Department of Assistive and Rehabilitative Services (DARS). This document is based on substantial input from the network of Centers for Independent Living (CILs), including the Texas Association of Centers for Independent Living (TACIL) and persons with disabilities residing throughout the state. The overall mission of the independent living services network is to empower Texans with disabilities to live as independently as possible, via equal access and full inclusion within the community of their choice.

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

GOAL I - Improve and expand the overall operational capacity of the IL services network.

GOAL II - Support and advance the efforts of Texans with disabilities to establish and maintain an independent lifestyle.

GOAL III - Enhance opportunities for older Texans who are blind to enjoy the same opportunities as other Texans to live independently in their communities.

GOAL IV - Promote systemic change that will positively impact public policy and/or procedure through systems change activities of the IL network of CILs.

GOAL V - Allocate Title VII, Part B funds for a statewide demonstration project with the purpose of assisting the SILC in promoting the value and visibility of the network of CILs.

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

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

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

Given the expansiveness of these objectives, time to accomplish specific components of each will vary, but all activities will be accomplished during the 2011-2013 SPIL cycle as required. Progress on all objectives will be assessed annually.

Objectives toward the achievement of Goal I are:

1. Operation of an independent living services program through the Division of Rehabilitation Services, which will assist 1,785 Consumers in 2011, 1,786 in 2012, and 1,787 in 2,013.
2. Achievement of at least 80% of CSRs closed by DRS will be due to completing all goals set annually.
3. Provision of information and referral assistance through the Division for Blind Services to 1,245 individuals with vision loss in 2011, 1,245 in 2012, and 1,245 in 2013.
4. Provision of direct IL services through the network of CILs in Texas for 10,516 Consumers in 2011, 10,937 in 2012, and 11,374 in 2013.
5. Coordination of direct services that will enable 1,000 individuals to relocate from nursing facilities into the community annually.
6. Provision of information and referral assistance through the network of CILs to 121,723 contacts in 2011, 123,549 in 2012, and 125,402 in 2013.

Objectives toward the achievement of Goal II are:

1. Expand the availability of appropriate housing options for people with disabilities through:
* The appointment of an ex officio member to the SILC from the Texas Department of Housing and Community Affairs by September 30, 2013;
* The establishment of quarterly dialogue between the IL community and the Texas Department of Rural Affairs (TDRA);
* Seventy-five percent participation of CILs in the Project Open House initiative by September 30, 2013;
* The approach of at least fifteen public housing authorities by the CILs and SILC annually to establish set-aside vouchers for individuals transitioning from residential institutions; and
* An increase of housing services to Consumers by the network of CILs, which include 3,771 services in 2011, 4,375 in 2012, and 5,074 in 2,013.
1. Increase mobility options for people with disabilities through:
* The appointment of an ex officio member to the SILC from the Texas Department of Transportation (TXDOT) by September 30, 2013;
* The mutual exchange of information/education between the IL network and TDRA twice annually in order to improve the lack of para-transit and public transportation services for persons with disabilities living in remote areas;
* Fifty percent of CILs will participate in local, county, and regional TXDOT meetings for their service areas by September 30, 2013.
* An increase of transportation services to Consumers by the network of CILs, which include 1,617 services in 2011, 1,649 in 2012, and 1,682 in 2013.
1. Elevate access for individuals with disabilities to healthcare services and supports by promoting ongoing participation in initiatives such as Medicaid Buy-In, home and community services, and managed care services.
2. Increase the use of the Consumer Directed Service option by offering Consumer training in at least fifty percent of the CILs in Texas by September 30, 2013.
3. Increase access to assistive technology (AT) to individuals with disabilities through:
* The presentation of Assistive Technology exhibits and demonstrations at all annual SILC conferences;
* Ongoing representation of the DSU, SILC and/or CIL to the Texas Technology Access Program; and,
* An increase of AT services provided by the network of CILs, to include 1,585 services in 2011, 1,838 in 2012, and 2,132 in 2013.
1. Collaborate with DARS Transition Counselors to increase youth participation in IL transition, with 75% of CILs offering assistance to parents participating in the ARD (Admission, Review, and Dismissal) process by September 30, 2013.

Objectives toward the achievement of Goal III are:

A. Distribution of the Independent Living Resource Guide to sixty percent of all new contacts for the purpose of providing information and referral to promote self-advocacy and use of available disability, aging, blindness and independent living resources;

B. Provision of independent living services to older Consumers with visual disabilities meeting program eligibility requirements - 1,387 Consumers in 2011, 1,387 Consumers in 2012, and 1,387 Consumers in 2013;

C. Achievement of established IL goals by 600 Older Blind Consumers in 2011, 575 in 2012, and 575 in 2013.

Objectives toward the attainment of Goal IV include:

1. Identification of key issues through input obtained from Consumers and stakeholders through:
* A needs assessment conducted by the SILC, in collaboration with the Rehabilitation Council of Texas (RCT), to be completed by September 30, 2012;
* The opportunity to provide public comment at 100% of regular SILC meetings; and,
* The collection and analysis of at least 25% of Consumer satisfaction surveys conducted by the network of CILs.
1. Formation of a Consumer Advocacy Group of the IL community which will meet twice annually to develop, implement and monitor a three-year systems advocacy plan.
2. Ongoing participation by representatives of the IL community in activities facilitated by the Texas Disability Policy Consortium.
3. Incorporation of 90% of CILs in their local emergency preparedness plans by September 30, 2013.

Objectives toward the accomplishment of Goal V include:

1. Require that the recipient of Part B funding to support the initiatives of the SILC, DSU, and network of CILs maintaining a minimum of 1.5 FTEs annually.
2. Develop and maintain a marketing/outreach strategy that will promote the value and visibility of the SILC and Texas network of CILs, to be fully implemented by September 30, 2012.
3. Provide presentations and/or educational materials to 100% of state legislators at least twice annually.
4. Coordinate and facilitate trainings at least twice annually to equip the Consumer Advocacy Group with the skills they need to be effective advocates in the furtherance of the IL Movement and its philosophy.

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

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

In preparation for development of the SPIL, the SILC held three public hearings in currently unserved/underserved areas to solicit input from local residents with disabilities and other interested parties. These hearings were conducted in Victoria, Plano and Galveston. Other opportunities for input included public comment invited at all regularly scheduled meetings of the Council and sessions related to the SPIL as part of the SILC annual conference.

Comments from the public, individual CILs, TACIL and SILC dialogue reflected the need for:

* Several additional CILs to complete the network in Texas (see map in Attachment 2)
* Outreach to individuals who are deaf
* Outreach to young adults with disabilities who have recently left the public school system
* Outreach to persons in long-term care residential facilities who are seeking relocation into the community
* Outreach to older individuals who have developed age-related disabilities
* Outreach to veterans with disabilities

Service areas cited in the public hearings as lacking or insufficient in target areas were:

* Sign language interpreters
* Certified sign language interpreters
* Peer support for deaf individuals
* Information & referral
* Employment counselors
* IL skills training
* Accessible housing
* Disaster preparedness
* Managed care
* Transition services and summer programs for youth
* Comprehensive service coordination to facilitate deinstitutionalization
* Public transportation

Strategies to address the IL needs of individuals from minority group backgrounds in areas will include:

* Continuing to focus on transition services for youth, both through the DSU and the CILs. The DSU and CILs will sustain the established goals and objectives initiated through their participation in the CHIRP (Centers Hatching Initiatives for Realizing Potential) pilot, designed to strengthen the capacity for youth transition services;
* Analyzing and promoting the availability of services to individuals of diverse racial and ethnic groups; and
* Increasing public awareness of independent living through outreach and education activities to both rural and urban areas.

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

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

1.3A Financial Plan Tables

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

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

**Year 1**

|  |  |
| --- | --- |
| **Sources** | **Approximate Funding Amounts and Uses** |
|  | SILC Resource Plan | IL Services | General CIL Operations | Other SPIL Activities |
| **Title VII Funds** |  |  |  |  |
| Chapter 1, Part B  | $247,497 | $1,329,111 |  | $123,426 |
| Chapter 1, Part C |  |  | $6,526,028 |  |
| Chapter 2, Individuals Who are Older Blind |  | $1,258,333 |  |  |
|  |  |  |  |  |
| **Other Federal Funds** |  |  |  |  |
| Sec. 101(a)(18) of the Act (Innovation and Expansion) |  |  |  |  |
| Other (1) |  | $84,805 | $2,700,000 |  |
| Other (2) |  | $817,091 | $1,440,283 |  |
|  |  |  |  |  |
| **Non-Federal Funds** |  |  |  |  |
| State Funds (GR) |  |  | $1,250,000 |  |
| Other |  |  |  |  |

IL Services

Other (1) ARRA, Part B for IL Services

Other (2) ARRA, Older Blind for IL Services

General CIL Operations

Other (1) Relocation funds from Department of Aging and Disability Services (approximated from previous experience)

Other (2) SSA-VR Funds (approximated from previous experience)

**Year 2**

|  |  |
| --- | --- |
| **Sources** | **Approximate Funding Amounts and Uses** |
|  | SILC Resource Plan | IL Services | General CIL Operations | Other SPIL Activities |
| **Title VII Funds** |  |  |  |  |
| Chapter 1, Part B  | $242,886 | $1,329,111 |  | $123,426 |
| Chapter 1, Part C |  |  | $6,526,028 |  |
| Chapter 2, Individuals Who are Older Blind |  | $1,412,765 |  |  |
|  |  |  |  |  |
| **Other Federal Funds** |  |  |  |  |
| Sec. 101(a)(18) of the Act (Innovation and Expansion) |  |  |  |  |
| Other (1) |  |  | $2,700,000 |  |
| Other (2) |  |  | $1,440,283 |  |
|  |  |  |  |  |
| **Non-Federal Funds** |  |  |  |  |
| State Funds (GR) |  |  | $1,250,000 |  |
| Other |  |  |  |  |

Other (1) Relocation funds from Department of Aging and Disability Services (approximated from previous experience)

Other (2) SSA-VR Funds (approximated from previous experience)

**Year 3**

|  |  |
| --- | --- |
| **Sources** | **Approximate Funding Amounts and Uses** |
|  | SILC Resource Plan | IL Services | General CIL Operations | Other SPIL Activities |
| **Title VII Funds** |  |  |  |  |
| Chapter 1, Part B  | $237,848 | $1,329,111 |  | $123,426 |
| Chapter 1, Part C |  |  | $6,526,028 |  |
| Chapter 2, Individuals Who are Older Blind |  | $1,405,774 |  |  |
|  |  |  |  |  |
| **Other Federal Funds** |  |  |  |  |
| Sec. 101(a)(18) of the Act (Innovation and Expansion) |  |  |  |  |
| Other (1) |  |  | $2,700,000 |  |
| Other (2) |  |  | $1,440,283 |  |
|  |  |  |  |  |
| **Non-Federal Funds** |  |  |  |  |
| State Funds (GR) |  |  | $1,250,000 |  |
| Other |  |  |  |  |

Other (1) Relocation funds from Department of Aging and Disability Services (approximated from previous experience)

Other (2) SSA-VR Funds (approximated from previous experience)

1.3B Financial Plan Narratives

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

Availability of these funds provides the framework through which SPIL objectives will be realized. The SPIL addresses the IL service network in Texas and anticipated results. Specific SPIL objectives are delineated for the DSU(DRS and DBS), CILs and the SILC overall. Funding details and specific objectives are noted in the appropriate sections of the SPIL and are broken down in Attachment 4.

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

Budget resources for the SPIL cycle are delineated in 1.3A. These funds are coordinated in the execution of SPIL activities. The CILs report previous awards of $2,700,000 from the Department of Aging and Disability Services (DADS) for relocation activities and have submitted requests for the next funding cycle. A mix of federal and state funding sources are used to maximize availability of IL services in Texas. DARS uses $1,440,283 from SSA-VR reimbursements to fund CIL operations and hold their funding at a constant level. The SILC and DSU propose to allocate $112,226 in Part B funds annually to assist in the ongoing promotion of the CIL network through a demonstration project to augment the goals and objectives outlined in the SPIL. These funds will be administered by the DSU. State funds primarily include general revenue match to complement the federal funding sources (Title VII, Chapter 1 - Part B & C; Title VII, Chapter 2).

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

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

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

N/A

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

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

Section 701 of the Act and 34 CFR 364.2 cite the intent of IL services to:

* 1. Promote a 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 by providing financial assistance to States;
	2. Provide financial assistance for expanding or improving the provision of IL services;
	3. Provide assistance to develop and support a Statewide network of CILs, operated by Consumer-controlled, community-based, cross-disability, nonresidential private nonprofit agencies that are operated within local communities by individuals with disabilities and that provide an array of IL services; and
	4. Advocate for improving working relationships among the various entities providing services to and for people with significant disabilities.

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

* Ensure that the SILC functions in accordance with the provisions set forth in the Rehabilitation Act for the operation of statewide independent living Councils.
* Support the maintenance and growth of the state’s IL service delivery system and ensure that persons with disabilities have access to the assistance they need to help themselves.
* Define the parameters for operating a program whereby older Texans who are blind will gain confidence and skills to realize their independent living goals.
* Provide the framework to increase public awareness of SILC and the CIL network, thus creating potential for greater use of available IL services and enhanced strategic collaborations.
* Allow the SILC and CILs to impact targeted issues through systemic advocacy, which is consistent with the fundamental purpose and mandate of the IL Movement.

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

The SPIL goals and objectives were developed based on extensive dialog through SILC meetings, public hearings, and input from attendees at the 2010 statewide IL conference. The CIL network is represented on the SILC through the Chair of the Texas Association of Centers for Independent Living, who brings concerns and priorities of the CILs to the attention of the Council.

Focus has been on identifying critical areas affecting the lives of Texans with disabilities within the scope of the IL legislation. An Ad Hoc Committee, consisting of CIL Directors the DSU and SILC members, reviewed and made recommendations regarding the SPIL. Special meetings were held specifically to discuss the goals, objectives, and specific actions to be accomplished through the SPIL by all partners. Drafts were made available and input also solicited from CILs in Texas who are not active participants in TACIL. The resulting document is a representative picture of a commonly shared vision regarding IL services in the state.

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:

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

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

1. A strong collaborative frame work is already in place to promote unity and singleness of purpose among the SILC, the DSUs, and the CILs. The SILC composition includes the representative appointed by TACIL, as well as ex officio members from the DSUs. Activities related to Council meetings, interim workgroups, and shared priorities provide understanding of respective programs, collective support and promotion of IL services statewide. The SILC makes every effort to include all CILs in Texas in SPIL activities.
2. State agencies represented on the SILC as ex officio members include Division for Blind Services and Division for Rehabilitation Services through the Department of Assistive and Rehabilitative Services, and the Department of Aging and Disability Services. Public entities include the Communication Axess Ability Group and the Texas Senior Corps. The SILC Chair is a liaison to the Rehabilitation Council of Texas. A member of the DARS Advisory Board also participates as an interested party. The SILC Director also participates in the Texas Disability Policy Consortium, VSA Arts of Texas, and Safeplace.
3. Activities defined for SPIL objectives cite a number of entities with whom coordination will be important to achieve objectives — the Aging and Disability Resource Centers, Housing and Urban Development, Texas Department of Housing and Community Affairs, Regional Transportation Service Planning committees, Area Agency on Aging network, Department of State Health Services, and Women, Adult and Child Protective Services.

1.6 Coordination of Services – 34 CFR 364.27

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

All of the service components described in the state plan are related to the overall goal of full inclusion in community life for Texans with disabilities. Information about respective offerings from each component of the IL service network is promoted so that staff in each sector can make appropriate and timely referrals.

Centers for Independent Living are community organizations that, under Title VII of the Rehabilitation Act, serve cross-disability populations. CILs are charged with four core services (information and referral, individual and system advocacy, peer support, and independent living skills training and enhancement), and local community needs define service priorities. Examples of various community services are assistance with accessing benefit programs, sponsoring housing voucher programs, clothing closets, and utility assistance. Coordinating the relocation of individuals from nursing facilities to the community (in conjunction with DADS grants) has been a major service to people with disabilities and has saved the state money each year. DADS provides contracts to CILs to coordinate the assistance necessary for individuals with severe disabilities to transition into the community. These individuals require services from CIL staff in order to be successful in the transition. According to DADS, with DADS’ funding for relocation and the core services of the IL staff, individuals have a lower failure rate than individuals receiving relocation from providers not using the IL philosophy.

DRS IL services target individuals with significant physical, mental or cognitive disabilities who have difficulty functioning in their home, family or community because of the severity of their disabilities. The twelve DRS ILS counselors assist ILS Consumers with obtaining needed rehabilitation technology, assistive devices and equipment and other services that are not available through the CILs or other resources.

The partnerships between Texas CILs and DRS ILS counselors maximize the use of funds and resources to serve Texans needing ILS. Examples include:

* ILS counselors referring applicants to CILs for information and referral, advocacy, peer counseling, independent living skills training and other needed services available from the CILs.
* CILs referring applicants to ILS counselors for rehabilitation technology, assistive devices and equipment and other needed services available through the DRS ILS that are not available through the CILs.

Cases where services available from both DRS ILS counselors and CILs are needed to enable Consumers to become or remain independent.

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

The Department of Aging and Disability Services (DADS) provides a wide array of personal and long term care services so that individuals with disabilities will be able to live in the community or the least restrictive setting with availability of needed supports. Services for Older Adults and for Persons with Disabilities are provided primarily through Medicaid and Medicare or related waiver programs. Medicaid recipients may be eligible for over two dozen community care programs with varying eligibility criteria and availability. Service examples are adaptive aids, attendant services, meals, medication assistance, medical supplies, nursing services, and therapy. DADS provides an array of services to persons over 60 through the network of local Area Agencies on Aging (benefits counseling, help for caregivers, health information counseling, state ombudsman related to nursing homes). The Promoting Independence Initiative focuses on relocation from institutions to community. This has been and continues to be a major initiative.

DADS is also the contracting entity with the Areas Agencies on Aging (AAA), which provide local services complementary to those available via CILs and DSUs. Through collaboration at the Central office level, meetings have delineated specific plans for cross training of respective staff in DARS, DADS and the AAA system.

The Manager of the Promoting Independence Initiative administered by DADS is an ex officio member of the SILC and in this capacity is the conduit for information between the two entities. Representatives from the SILC serve on the Promoting Independence Advisory Committee. Historically, the link between DADS and the IL service delivery system has not been maximized. However, with the focus on the implementation of the Olmstead decision, this collaboration has become much stronger.

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

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

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

Goal III - To enhance opportunities for older Texans who are blind to enjoy the same opportunities as other Texans to live independently in their communities.

Objectives:

1. Distribution of the Independent Living Resource Guide to sixty percent of all new contacts for the purpose of providing information and referral to promote self-advocacy and use of available disability, aging, blindness and independent living resources;
2. Provision of independent living services to older Consumers with visual impairments meeting program eligibility requirements - 1,387 Consumers in 2011, 1,387 Consumers in 2012, and 1,387 Consumers in 2013;
3. Achievement of established IL goals by 600 Older Blind Consumers in 2011, 575 in 2012, and 575 in 2013.

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

* Use of Independent Living Resource Guide as a critical information and referral opportunity early in the rehabilitation process to promote self-advocacy
* Expansion of group skills training opportunities to promote confidence building,

 experiential training in daily living skills related to vision loss, and peer support

* Concentration on networking to increase awareness of and maximize appropriate referrals from and to DBS and other community programs that can benefit older Texans who are blind.

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

Service system resources are likely to be challenged when ARRA funds are no longer available after 2011. DBS will also focus on enhancing local service networks to identify additional resources to assist in addressing the array of independent living issues impacted by vision loss, and often, other additional disabilities.

Section 2: Scope, Extent and Arrangements of Services

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

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

| Table 2.1A(1): Independent living services | Provided by the DSU (directly)  | Provided by the DSU (through contract and/or grant) | Provided by the CILs (Not through DSU contracts/ grants) |
| --- | --- | --- | --- |
| Core Independent Living Services, as follows:* Information and referral
* IL skills training
* Peer counseling
* Individual and systems advocacy
 |  |  |  |
| X | X | X |
| X | X | X |
| X | X | X |
| X | X | X |
| Counseling services, including psychological, psychotherapeutic, and related services | X | X | X |
| Services related to securing housing or shelter, including services related to community group living, and supportive of the purposes of this Act and of the titles of this Act, and adaptive housing services (including appropriate accommodations to and modifications of any space used to serve, or occupied by, individuals with significant disabilities) | X | X | X |
| Rehabilitation technology | X | X | X |
| Mobility training | X | X | X |
| Services and training for individuals with cognitive and sensory disabilities, including life skills training, and interpreter and reader services | X | X | X |
| Personal assistance services, including attendant care and the training of personnel providing such services |  | X | X |
| Surveys, directories and other activities to identify appropriate housing, recreation, accessible transportation and other support services | X | X | X |
| Consumer information programs on rehabilitation and IL services available under this Act, especially for minorities and other individuals with disabilities who have traditionally been unserved or underserved by programs under this Act | X | X | X |
| Education and training necessary for living in the community and participating in community activities | X | X | X |
| Supported living |  |  |  |
| Transportation, including referral and assistance for such transportation | X | X | X |
| Physical rehabilitation |  | X |  |
| Therapeutic treatment |  | X |  |
| Provision of needed prostheses and other appliances and devices |  | X |  |
| Individual and group social and recreational services |  | X | X |
| Training to develop skills specifically designed for youths who are individuals with significant disabilities to promote self-awareness and esteem, develop advocacy and self-empowerment skills, and explore career options | X | X | X |
| Services for children with significant disabilities | X | X | X |
| Services under other Federal, State, or local programs designed to provide resources, training, counseling, or other assistance of substantial benefit in enhancing the independence, productivity, and quality of life of individuals with significant disabilities | X | X | X |
| Appropriate preventive services to decrease the need of individuals with significant disabilities for similar services in the future | X | X | X |
| Community awareness programs to enhance the understanding and integration into society of individuals with disabilities | X | X | X |
| Other necessary services not inconsistent with the Act | X | X | X |

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

Texas has identified the following groups of unserved or underserved Texans:

* Individuals who are deaf
* Young adults with disabilities who have recently left the public school system
* Individuals in long-term care residential facilities who are seeking relocation into the community
* Older individuals who have developed age-related disabilities
* Veterans with disabilities

The DSU, the SILC and the network of CILs have further identified an array of services that will be necessary to address the needs of those unserved and underserved populations, and will continue to explore methods for expanding access to these services in Texas.  Such services include:

* Services to individuals with hearing loss in areas of high concentration of ethnic groups
* Sign language interpreter services through certified sign language interpreters
* Peer support for deaf individuals
* Information &referral resources to individuals who are deaf to enable them to locate needed IL services
* Employment counselors assisting IL Consumers to obtain suitable employment
* Independent Living Skills Training
* Availability and awareness of accessible housing
* Disaster preparedness across the state that expands availability and awareness of unserved and underserved Texans
* Managed care services
* Transition services and summer programs for youth
* Comprehensive service coordination to facilitate deinstitutionalization
* Public transportation

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

* 1. Any consideration of financial need is applied uniformly so that all individuals who are eligible for IL services are treated equally; and
	2. 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.

Both DRS and DBS have established protocols regarding Consumer participation in the cost of services.

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

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

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

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

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

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

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

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

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

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

DARS Standards for Providers (<http://www.dars.state.tx.us/drs/ProviderManual/default.htm>)

outlines the details, rules and guidance for specified DRS providers who provide services under contracts.

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.

The DSU includes in the Standards for Providers for independent living centers that a Center staff person will document determination of eligibility. Routine on-site monitoring visits by the DSU assure CIL compliance with this requirement.

Section 3: Design for the Statewide Network of Centers

3.1 Existing Network – 34 CFR 364.25

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

| **CIL Name & Address** | **State CIL****SSA-VR** | **Part B****(Federal)** | **Part C****(Federal)** | **Geographic Coverage & Disability Population from 2000 Census** |
| --- | --- | --- | --- | --- |
| ABLE - OdessaABLE Center for Independent Living1931 East 37thOdessa, TX 79762 |  |  | X |

|  |  |
| --- | --- |
| Andrews | 2,154 |
| Crane | 813 |
| Ector | 20,604 |
| Martin | 610 |
| Midland | 17,459 |
| Upton | 777 |
| Ward | 2,042 |
|  | **44,459** |

 |
| ARCIL - AustinAustin Resource Center for Independent Living825 East Rundberg Lane, Ste. E6Austin, TX 78753 | X |  | X |

|  |  |
| --- | --- |
| Bastrop | 9,971 |
| Lee | 2,497 |
| Travis | 111,514 |
|  | **123,982** |

 |
| ARCIL - San Marcos618 S. Guadalupe #103San Marcos, TX 78666 |  |  | X |

|  |  |
| --- | --- |
| Blanco | 1,409 |
| Caldwell | 6,071 |
| Comal\* | 6,469 |
| Hays | 13,219 |
|  | **27,168** |

 |
| ARCIL - Round Rock3010 Hesters Crossing, Suite 10Round Rock, TX 78681 |  |  | X |

|  |  |
| --- | --- |
| Bell\* | 17,840 |
| Burnet | 6,975 |
| Milam | 4,584 |
| Williamson | 29,818 |
|  | **59,217** |

 |
| CBCIL-Corpus Christi Coastal Bend Center for Independent Living1537 Seventh StreetCorpus Christi, TX 78704 |  |  | X |

|  |  |
| --- | --- |
| Aransas | 4,898 |
| Bee | 5,403 |
| Brooks | 1,935 |
| Duval\* | 1,439 |
| Jim Wells | 1,658 |
| Kenedy | 107 |
| Kleberg | 5,644 |
| Live Oak | 2,506 |
| McMullen | 208 |
| Nueces | 60,072 |
| Refugio | 1,658 |
| San Patricio | 12,561 |
|  | **98,089** |

 |
| CBFL/HCIL-HoustonCoalition for Barrier Free Living/Houston Center for Independent Living6201 Bonhomme Road, #150SHouston, TX 77036 | X |  | X |

|  |  |
| --- | --- |
| Harris | 573,025 |

 |
| CBFL/BCCIL - AngletonBrazoria Center for Independent Living1100 East MulberryAngleton, TX 77515 |  |  | X |

|  |  |
| --- | --- |
| Brazoria | 37,517 |
| Matagorda | 7,063 |
|  | **44,580** |

 |
| CBFL/FBCIL - Sugar LandFort Bend Center for Independent Living12946 Dairy Ashford Road, Suite 110Sugarland, TX 77478 |  |  | X |

|  |  |
| --- | --- |
| Austin | 4,173 |
| Colorado | 3,749 |
| Fort Bend | 46,724 |
| Waller | 5,914 |
| Wharton | 7,477 |

 **68,037** |
| CRCIL - CrockettCrockett Resource Center for Independent Living 1020 Loop 304 EastCrockett, TX 75835 | X |  | X |

|  |  |
| --- | --- |
| Freestone | 3,516 |
| Houston | 4,336 |
| Leon | 3,422 |
| Panola\* | 2,435 |
| Polk | 792 |
| Rusk\* | 4,774 |
| Sabine | 2,594 |
| San Augustine | 2,173 |
| Shelby | 5,831 |
| Trinity | 3,491 |
| Tyler | 4,876 |
|  | **38,240** |

 |
| CRCIL - PalestinePalestine Resource Center for Independent Living421 Avenue APalestine, TX 75801 |  |  | X |

|  |  |
| --- | --- |
| Anderson | 9,200 |
| Angelina | 16,023 |
| Cherokee\* | 5,025 |
| Nacogdoches | 10,869 |
| Smith\* | 17,512 |
|  | **58,629** |

 |
| ETCIL - TylerEast Texas Center for Ind. Living 4713 Troup Hwy.Tyler, TX 75703 |  |  | X |

|  |  |
| --- | --- |
| Camp | 2,472 |
| Cherokee\* | 5,025 |
| Gregg | 22,192 |
| Harrison | 12,777 |
| Henderson | 17,530 |
| Marion | 3,165 |
| Panola\* | 2,435 |
| Rains | 2,191 |
| Rusk\* | 4,774 |
| Smith\* | 17,512 |
| Upshur | 7,414 |
| Van Zandt | 10,888 |
| Wood | 8,082 |
|  | **116,456** |

 |
| HOCTIL - BeltonHeart of Central Texas Independent Living Center2180 N. MainP.O. Box 636Belton, TX 76513 |  |  | X |

|  |  |
| --- | --- |
| Bell\* | 17,840 |
| Coryell | 8,230 |
| Hill | 7,316 |
| McLennan | 40,564 |
|  | **73,950** |

 |
| LIFE - LIFE/RUN, LubbockLifetime Independence for Everyone, Inc. 4902 34th Street, Suite 5Lubbock, TX 79410 | X |  | X |

|  |  |
| --- | --- |
| Crosby | 1,547 |
| Floyd | 1,490 |
| Garza | 1,063 |
| Hale | 6,183 |
| Hockley | 4,211 |
| Lamb | 3,109 |
| Lubbock | 43,000 |
| Lynn | 1,197 |
| Terry | 1,991 |
|  | **63,791** |

 |
| LIFE - Not Without Us!, Abilene3303 N. 3rd., Suite BAbilene, TX 79603 | X |  |  |

|  |  |
| --- | --- |
| Callahan | 2,612 |
| Eastland | 4,510 |
| Jones | 3,454 |
| Shackleford | 581 |
| Stephens | 2,153 |
| Taylor | 22,525 |
|  | **35,835** |

 |
| LIFE - Disability Connections, San Angelo3184 Executive DriveSan Angelo, TX 76904 | X |  |  |

|  |  |
| --- | --- |
| Coke | 792 |
| Concho | 533 |
| Irion | 337 |
| Menard | 564 |
| Runnels | 2,569 |
| Schleicher | 654 |
| Sterling | 241 |
| Tom Green | 19,365 |
|  | **25,055** |

 |
| MHCIL - League CityMounting Horizons Center for Independent Living3027 Marina Bay #360League City, TX 77573 | X |  |  |

|  |  |
| --- | --- |
| Galveston | 42,616 |
|  |  |
|  |  |

 |
| PILC - AmarilloPanhandle Independent Living Center 1118 South TaylorAmarillo, TX 79101 | X |  | X |

|  |  |
| --- | --- |
| Armstrong | 9,200 |
| Briscoe | 387 |
| Carson | 1,080 |
| Castro | 1,297 |
| Childress | 1,313 |
| Collingsworth | 661 |
| Dallam | 1,213 |
| Deaf Smith | 3,732 |
| Donley | 836 |
| Gray | 3,966 |
| Hall | 927 |
| Hansford | 895 |
| Hartley | 509 |
| Hemphill | 407 |
| Hutchinson | 4,761 |
| Lipscomb | 490 |
| Moore | 2,970 |
| Ochiltree | 1,448 |
| Oldham | 384 |
| Parmer | 1,559 |
| Potter | 22,148 |
| Randall | 15,034 |
| Roberts | 124 |
| Sherman | 342 |
| Swisher | 1,838 |
| Wheeler | 1,372 |
|  | **78,893** |

 |
| REACH - Dallas8625 King George Drive, Suite 210Dallas, TX 75235-2275 | X |  | X |

|  |  |
| --- | --- |
| Dallas | 392,311 |

 |
| REACH-Denton404 South Elm, Suite 202Denton, TX 76201-6066 |  |  | X |

|  |  |
| --- | --- |
| Denton | 47,873 |

 |
| REACH - Fort Worth1205 Lake StreetFort Worth, TX 76102-4501 | X | X |  |

|  |  |
| --- | --- |
| Tarrant | 231,504 |

 |
| REACH - Plano720 E. Park Blvd., Suite 104, Plano, TX 75074-8844 | X |  |  |

|  |  |
| --- | --- |
| Collin | 51,910 |

 |
| RISE - BeaumontResource, Information, Support, and Empowerment755 S, 11th Street, Suite 101Beaumont, TX 77701 |  |  | X |

|  |  |
| --- | --- |
| Hardin | 8,688 |
| Jefferson | 48,472 |
| Orange | 17,399 |
|  | **74,559** |

 |
| SAILS – San AntonioSan Antonio Independent Living Services 1028 South AlamoSan Antonio, TX 78210 | X |  | X |

|  |  |
| --- | --- |
| Atascosa | 8,221 |
| Bandera | 3,438 |
| Bexar | 261,387 |
| Calhoun | 3,831 |
| Comal\* | 6,469 |
| DeWitt | 4,338 |
| Dimmit | 2,387 |
| Edwards | 422 |
| Frio | 2,912 |
| Gillespie | 4,518 |
| Goliad | 1,208 |
| Gonzales | 3,877 |
| Guadalupe | 15,464 |
| Jackson | 3,189 |
| Karnes | 2,271 |
| Kendall | 3,587 |
| Kerr | 156 |
| Kinney | 719 |
| La Salle | 1,299 |
| Lavaca | 4,227 |
| Maverick | 8,784 |
| Medina | 6,943 |
| Real | 760 |
| Uvalde | 5,366 |
| Val Verde | 8,213 |
| Victoria | 14,874 |
| Wilson | 5,707 |
| Zavala | 2,779 |
|  | **387,346** |

 |
| VAIL - McAllenValley Association for Independent Living3016 N. McColl, Ste BMcAllen, TX 78501 | X |  | X |

|  |  |
| --- | --- |
| Cameron | 65,392 |
| Hidalgo | 105,965 |
| Starr | 13,537 |
| Willacy | 3,596 |
|  | **188,490** |

 |
| STAARS (VAIL) - LaredoSouth Texas Advocacy & Accessibility Resource Services1419 Corpus Christi Street, Laredo, TX 78040 | X |  |  |

|  |  |
| --- | --- |
| Duval | 1,439 |
| Jim Hogg | 1,147 |
| Webb | 34,548 |
| Zapata | 2,924 |
|  | **40,058** |

 |
| VOLAR- El PasoVolar Center for Independent Living1220 Golden Key Circle, Suite CEl Paso, TX 79925-5825 | X |  | X |

|  |  |
| --- | --- |
| El Paso | 122,545 |

 |

**\*Indicates counties that are served by more than one CIL.**

3.2 Expansion of Network – 34 CFR 364.25

3.2A Describe the design for the further expansion of the network, including identification of the unserved and underserved areas in the State and the order of priority for serving these areas as additional funding becomes available (beyond the required cost-of-living increase).

A special Ad Hoc Committee comprised of representatives from the SILC, the DSU, and CILs worked together to identify a strategy for completing the network of CILs in the state. When this work group was convened, the determination was that fourteen additional CILs are needed to complete the network. Based on 2000 U.S. Census Data, there are an estimated half a million state residents with disabilities currently living in areas that are not served by a CIL.

The SILC, in collaboration with the DSU, has designated the following targeted areas as immediate priorities for the establishment of a CIL, should new state or federal funds become available for this purpose during the term of the 2011/2013 State Plan:

* Archer, Baylor, Clay, Foard, Hardeman, Haskell, Jack, Knox, Montague, Throckmorton, Wichita, Wilbarger, Young. Population: 43,980
* Cooke, Fannin, Grayson. Population: 35,476
* Brazos, Burleson, Madison, Robertson, and Washington. Population: 32,824
* Ellis, Johnson, Kaufman, Rockwall. Population: 59,552

Though the counties above are designated as “immediate priorities,” this does not preclude the following unserved areas from submitting proposals, should federal or state funds become available:

* Bowie, Cass, Franklin, Morris, Titus. Population: 36,140
* Delta, Hopkins, Hunt, Lamar, Red River. Population: 38,600
* Bosque, Hood, Parker, Somervell, Wise. Population: 34,982
* Brown, Coleman, Comanche, Erath, Hamilton, Mills, Palo Pinto. Population: 27,663
* Ellis, Johnson, Kaufman, Rockwall. Population: 59,552
* Falls, Limestone, Navarro. Population: 19,038
* Borden, Dawson, Fisher, Gaines, Glasscock, Howard, Mitchell, Nolan, Reagan, Scurry. Population 20,499
* Brewster, Crockett, Culberson, Jeff Davis, Pecos, Reeves, Terrell. Population: 12,654
* Kimble, Lampasas, Llano, Mason, McCulloch, San Saba, Sutton. Population: 13,688
* Grimes, Montgomery, Walker. Population: 60,040
* Chambers, Liberty, San Jacinto. Population: 22,980

The SILC and DSU have designated some Texas counties as “stray counties” due to their geographic location not falling within an expansion area or current CIL service area. These counties may be absorbed by an existing CIL, should state or federal funds become available for future negotiation. These counties and their disability populations include:

* Bailey Population: 1,641
* Cochran Population: 712
* Cottle Population: 441
* Dickens Population: 573
* Fayette Population: 4,403
* Jasper Population: 7,693
* Kent Population: 176
* King Population: 55
* Loving Population: 22
* Motley Population: 302
* Newton Population: 3,513
* Stonewall Population: 343
* Winkler Population: 1,384
* Yoakum Population: 1,374

Efforts to expand the CIL network will continue during future state legislative sessions.
Should funding become available, a competitive process will be conducted, which will define criteria for selection. 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.

The SILC has become increasingly concerned about the high percentage of underserved areas within the existing network of CILs. Close examination of recent 704 reports submitted by CILs throughout the state revealed that, even where CILs exist, individuals with disabilities are dramatically underserved by population and/or geographic area. Data reviewed indicates that:

* Every CIL in the existing network is serving less than 1% of the disability population for its designated coverage area.
* Of those Consumers served by each CIL, the vast majority are in the county where the CIL is located, leaving surrounding counties in the coverage area virtually unserved.
* Statewide, individuals served in the CIL network comprise only .3% of the projected total number of individuals with disabilities in the catchment areas.

Efforts to expand and strengthen the network of CILs in Texas will involve working closely with state and federal entities toward the allocation of additional funding for the establishment and operation of CILs. In addition to adding CILs to the network, the SILC and DSU are committed to pursuing increased funding that will allow for financial support to bring existing CILs up to a baseline level to be determined by the SILC and DSU. Funding will also be pursued to expand the capacity of CILs to reach underserved populations and regions within existing coverage areas.

The priorities for the designation of additional funds will be determined as funding becomes available through a process of negotiation among the DSU, the SILC and the CILs in the network. These basic guidelines will be employed to make such determinations:

Funds under the determined amount of the regular Title VII, Part C allocation and/or are from a source that includes a provision for continuation, will be used first to bring existing CILs whose funding is below the baseline up to baseline. Funds will be distributed based on the order of greatest to least disparity between current funding and the designated amount. Eligible CILs will receive the percentage of the available funds that corresponds with their levels of funding disparity. Once all CILs have reached the baseline level, any additional funds will be distributed among existing CILs in the same proportion as their regular Part C appropriation.

Funds above the determined amount of the regular Title VII, Part C allocation that are from a source that includes a provision for continuation, or, if non-sustaining and will not jeopardize the Part C funding of existing CILs, will be used for the establishment of new CILs, provided a need in one or more priority areas has been identified.

Funding of new Centers will not be considered if such funding would jeopardize the Part C funding of existing CILs.

Funds that are short-term in nature and do not have a provision for ongoing sustainability, beyond those used to establish a new CIL if doing so does not jeopardize the Part C funding of existing CILs, will be used to expand the capacity of existing CILs consistent with the goals and objectives of the SPIL, with particular emphasis on under-served areas and populations. Such funds will be distributed among existing CILs in the same proportion as their regular Part C appropriation.

3.3 Section 723 States Only – 34 CFR 364.39

3.3A If the State follows an order of priorities for allocating funds among Centers within a State that is different from what is outlined in 34 CFR 366.22, describe the alternate order of priority that the DSU Director and the SILC Chair have agreed upon. Indicate N/A if not applicable.

N/A

3.3B Describe how the State policies, practices and procedures governing the awarding of grants to Centers and the oversight of these Centers are consistent with 34 CFR 366.37 and 366.38.

N/A

Section 4: Designated State Unit (DSU)

4.1 Administrative Support Services – 34 CFR 364.4; 34 CFR 364.22(b)

4.1A Describe the administrative support services to be provided by the DSU for the SILS (Part B) program and, if the State is a Section 723 State, for the CIL (Part C) program.

Refer to the SPIL Instructions for additional information about administrative support services.

DSU provides staff and fiscal resources to provide financial and technical assistance in planning, budget development and evaluation of CIL activities; financial management support including audits, personnel development, recordkeeping activities and administrative support.

In-kind administrative support is available via staff involved as ex officio members of SILC and execution of related functions. Liaisons from DRS and DBS actively participate in plan development, SILC meetings and interim matters. Financially, the DSU provides funding for SILC operations with a proportionate participation by DRS and DBS. The DSU also channels funds to CILs to facilitate the operations for the independent CIL network.

4.1B Describe other DSU arrangements for the administration of the IL program, if any.

N/A

Section 5: Statewide Independent Living Council (SILC)

5.1 Resource plan – 34 CFR 364.21(i)

5.1A Describe the resource plan prepared by the SILC in conjunction with the DSU for the provision of resources, including staff and personnel, made available under Parts B and C of Chapter 1 of Title VII, section 101(a)(18) of the Act, and from other public and private sources that may be necessary to carry out the functions of the SILC identified in section 705(c). The description must address the three years of this SPIL.

Refer to the SPIL Instructions for more information about completing this section.

During the duration of this state plan, the primary support for the SILC will be an annual grant from Title VII, Part B of the Rehabilitation Act of 1973, as amended, administered by DARS. The SILC has approved the following budgets for expenditure of these funds. While the SILC anticipates the receipt of additional revenues, only Title VII, Part B funds are detailed in these budgets. Unrestricted funds are used to cover expenses not allowed through Title VII, Part B grants and to provide a safety net when costs such as hotel rooms exceed allotted amounts. Ten percent of the proposed expenditures can be reclassified by the SILC without the need for amendment. The budgets can be revised by mutual agreement of the SILC and the DSU. This is the proposed budget and is contingent on available funds.

**Texas State Independent Living Council Resource Development Plan**

|  |  |  |  |
| --- | --- | --- | --- |
| **Line Item** | **2010-2011** | **2011-2012** | **2012-2013** |
| Salary/Wages | $99,000  | $99,000  | $99,000  |
| Fringe | $25,815  | $25,815  | $25,815  |
| Travel | $73,636  | $70,636  | $65,598  |
| Equipment | $0  | $0  | $0  |
| Supplies | $6,000  | $6,000  | $6,000  |
| Contractual Services | $38,388  | $36,777  | $36,777  |
| Other | $4,658  | $4,658  | $4,658  |
| **Total** | **$247,497**  | **$242,886**  | **$237,848**  |

5.1B Describe how the following SILC resource plan requirements will be addressed:

* The SILC’s responsibility for the proper expenditure of funds and use of resources that it receives under the resource plan.
* Non-inclusion of conditions or requirements in the SILC resource plan that may compromise the independence of the SILC.
* Reliance, to the maximum extent possible, on the use of resources in existence during the period of implementation of the State plan.

The SILC has established fiscal policies and procedures, that govern the expenditure of funds. Proper use of fiscal resources is routinely monitored through the DSU. This includes: review of SILC billings for reimbursements, discussion of budget status at quarterly SILC meetings, and compliance with established protocols should budget changes be requested. Additional monitoring activities include annual independent audits and periodic self-assessment of SILC operations in relation to standards and indicators.

The SILC remains very aware of and safeguards its independence. Nothing in the resource plan jeopardizes its autonomy. Furthermore, the resource plan reflects prudent planning for operational needs while taking into account full use of available resources.

5.2 Establishment and Placement – 34 CFR 364.21(a)

5.2A Describe how the establishment and placement of the SILC ensures its independence with respect to the DSU and all other State agencies.

Refer to the SPIL Instructions for more information about completing this section.

The SILC was established following revisions to the Rehabilitation Act of 1973, as amended in 1992, when the SILC requirement was introduced. In the formative years, the DSU worked closely with the SILC to establish required processes and protocols consistent with federal requirements. The 1996-1998 SPIL contained specific language referencing independent physical operations, staffing, and fiscal support details. The SILC received its 501(c)(3) status in 1998. The current structural reference for the SILC is found in Texas Administrative Code Title 40, Part 2, Chapter 101, Subchapter D, Rule §101.603.

The SILC is a private, not-for-profit 501(c)(3) organization which functions as a fully autonomous entity. In this capacity, the SILC leases offices, retains staff, conducts daily activities, and administers both public and private funds. Funding for the SILC originates with the Rehabilitation Services Administration. Those funds are then granted to the SILC by the DARS Division for Rehabilitation Services and Division for Blind Services. (Title 40, Part 2, Chapter 101, Subchapter L, Rule §101.9101, Texas Administrative Code) The SILC is also free to raise additional funds from other sources, both public and private, to accomplish its mission.

While the SILC has a very effective collaborative working relationship with the DSU and other state agencies, the organization is recognized and operates as an independent entity with autonomy in its daily operations, development and implementation of the SPIL, and advocacy for independent living issues for Texans with disabilities.

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

5.3A Describe the process used by the State to appoint members to the SILC who meet the composition requirements in section 705(b).

Members of the SILC are appointed by the Governor and serve on a voluntary basis. Potential nominees meeting established criteria for cross disability representation, geographic coverage, knowledge of independent living, etc. are submitted for consideration to the Governor’s Office when vacancies arise. SILC bylaws address selection of Chair and Executive Committee (by SILC vote) and also define term limits.

While the SILC may identify and make recommendations of potential candidates for Council membership to the Governor’s appointments office, the SILC does not have the power to nominate members. Composition of the SILC is reflected in Attachment 3: this tool is used to track compliance with the requirements for SILC composition defined in the Rehabilitation Act.

5.4 Staffing – 34 CFR 364.21(j)

5.4A Describe how the following SILC staffing requirements will be met:

* SILC supervision and evaluation, consistent with State law, of its staff and other personnel as may be necessary to carry out its functions.
* Non-assignment of duties to SILC staff and other personnel made available by the DSU, or any other State agency or office that would create a conflict of interest while assisting the SILC in carrying out its duties.

Responsibilities for supervision and evaluation of the SILC Executive Director lie primarily with the SILC Chair. An annual evaluation is standard protocol with input from the SILC Executive Committee.

Particular attention is paid regarding assignments to avoid any conflict of interest in relation to carrying out SILC related duties. This is especially true in consideration of individuals selected, for example, for review of technical assistance grants to CILs.

Section 6: Service Provider Requirements

Describe how the following service provider requirements will be met:

6.1 Staffing – 34 CFR 364.23; 34 CFR 364.24; 34 CFR 364.31

* Inclusion of personnel who are specialists in the development and provision of IL services and in the development and support of centers.
* Availability, to the maximum extent feasible, of personnel able to communicate (1) with individuals with significant disabilities who rely on alternative modes of communication, such as manual communication, nonverbal communication devices, Braille, or audio tapes and (2) in the native languages of individuals with significant disabilities whose English proficiency is limited and who apply for or receive IL services under Title VII of the Act.
* Establishment and maintenance of a program of staff development for all classes of positions involved in providing IL services and, where appropriate, in administering the CIL program, improving the skills of staff directly responsible for the provision of IL services, including knowledge of and practice in the IL philosophy.
* Affirmative action to employ and advance in employment qualified individuals with significant disabilities on the same terms and conditions required with respect to the employment of individuals with disabilities under section 503 of the Act.

DRS has 12 Counselor positions and DBS has 21 IL Worker positions that provide IL services to Consumers. Program Specialists within the DSU provide technical assistance in the development and support of CILs. Service Coordinators within the CILs are qualified to provide the four core services.

The IL program of each DSU has specific staff development criteria from orientation of new personnel (caseload and administrative) to ongoing training to enhance performance. Similarly, CILs, in accordance with requirements of the Rehabilitation Act, provide training opportunities for personnel both internally as well as through workshops and conferences in the community, such as the annual statewide IL conference. An annual joint staff training is sponsored by the SILC and targeted to the administrative staff of CILs and addresses operational issues.

DSU and CIL staff are provided training at both service delivery and management levels that address essential components of the staffing requirements:

* Awareness of IL network (including DSU and CILs)
* Emphasis on awareness of and application of IL philosophy
* Ability to effectively communicate and provide services to individuals needing alternate communication style for physical reasons such as hearing or vision loss or because of varying native language
* In areas where staff are unable to provide such accommodations, professionals are hired to meet the need.

Both the DSU and CILs adhere strongly to affirmative action practices to employ and advance in employment individuals with significant disabilities. The majority of CIL staff are individuals with disabilities, in compliance with IL standard requirements and federal regulations.

6.2 Fiscal Control and Fund Accounting – 34 CFR 364.34

* Adoption of those fiscal control and fund accounting procedures as may be necessary to ensure the proper disbursement of and accounting for funds made available through Parts B and C of Chapter 1 of Title VII of the Act, in addition to complying with applicable EDGAR fiscal and accounting requirements.

These requirements are laid out in the Standards for Providers, and compliance is required as part of the application process before contracts are authorized. Additional guidelines are available to DSU staff in the DRS Rehabilitation Policy Manual and DBS program operational guidelines. Compliance with this requirement is reviewed as part of the routine monitoring process.

CILs that are federally funded comply with RSA fiscal regulations and with OMB Circulars A-110, A-122 and A-133.

6.3 Record-Keeping, Access and Reporting – 34 CFR 364.35; 34 CFR 364.36; 34 CFR 364.37

* Maintenance of records that fully disclose and document the information listed in 34 CFR 364.35.
* Submission of annual performance and financial reports, and any other reports that the Secretary determines to be appropriate
* Access to the Commissioner and the Comptroller General, or any of their duly authorized representatives, for the purpose of conducting audits, examinations, and compliance reviews, to the information listed in 34 CFR 364.37.

These requirements are laid out in the Standards for Providers, and compliance is required as part of the application process before contracts are authorized. Additional guidelines are available to DSU staff in the DRS Rehabilitation Policy Manual and DARS Business Procedures Manual. Compliance with this requirement is reviewed as part of the routine monitoring process.

Federally funded CILs are required to meet standards for record keeping, access and reporting established by RSA and reflected in individual organization operational policies and procedures.

6.4 Eligibility – 34 CFR 364.40; 34 CFR 364.41

* Eligibility of any individual with a significant disability, as defined in 34 CFR 364.4(b), for IL services under the SILS and CIL programs.
* Ability of any individual to seek information about IL services under these programs and to request referral to other services and programs for individuals with significant disabilities.
* Determination of an individual's eligibility for IL services under the SILS and CIL programs in a manner that meets the requirements of 34 CFR 364.51.
* Application of eligibility requirements without regard to age, color, creed, gender, national origin, race, religion, or type of significant disability of the individual applying for IL services.
* Non-exclusion from receiving IL services of any individual who is present in the State and who is otherwise eligible for IL services, based on the imposition of any State or local residence requirement.

These requirements are laid out in the Standards for Providers, and compliance is required as part of the application process before contracts are authorized. Additional guidelines are available to DSU staff in the DRS Rehabilitation Policy Manual and DBS Independent Living Manual. Compliance with this requirement is reviewed as part of the routine monitoring process.

Centers supported through federal grants use the criteria for service eligibility defined in the Rehabilitation Act. Determination of disability is self-verifying.

6.5 Independent Living Plans – 34 CFR 364.43(c)

* Provision of IL services in accordance with an IL plan complying with Sec. 364.52 and mutually agreed upon by the individuals with significant disabilities and the appropriate service provider staff unless the individual signs a waiver stating that an IL plan is unnecessary.

These requirements are laid out in the Standards for Providers, and compliance is required as part of the application process before contracts are authorized. Additional guidelines are available to DSU staff in the DRS Rehabilitation Policy Manual and DBS Independent Living Manual. Compliance with this requirement is reviewed as part of the routine monitoring process.

All Consumers served by CILs supported by federal or state sources are required to develop an Independent Living Plan or to sign a waiver relinquishing their right to the development of such a plan.

6.6 Client Assistance Program (CAP) Information – 34 CFR 364.30

* Use of accessible formats to notify individuals seeking or receiving IL services under Chapter 1 of Title VII about the availability of the CAP program, the purposes of the services provided under the CAP, and how to contact the CAP.

These requirements are laid out in the Standards for Providers, and compliance is required as part of the application process before contracts are authorized. Additional guidelines are available to DSU staff in the DRS Rehabilitation Policy Manual and DBS Independent Living Manual. Compliance with this requirement is reviewed as part of the routine monitoring process.

All Consumers of federally funded CILs are informed of the availability of and the purpose and contact information for the Client Assistance Program. This notification is provided in alternate formats. Consumers are required to provide signed verification that they have received such information.

6.7 Protection, Use and Release of Personal Information – 34 CFR 364.56(a)

* Adoption and implementation of policies and procedures meeting the requirements of 34 CFR 364.56(a), to safeguard the confidentiality of all personal information, including photographs and lists of names.

These requirements are laid out in the Standards for Providers, and compliance is required as part of the application process before contracts are authorized. Additional guidelines are available to DSU staff in the DRS Rehabilitation Policy Manual and DBS Independent Living Manual. Compliance with this requirement is reviewed as part of the routine monitoring process.

Federally funded CILs comply with confidentiality requirements established by RSA. No information concerning a Consumer, including a photo of a Consumer, is released to another individual or entity without signed authorization from the Consumer. Consumer service records are maintained in locked files.

Section 7: Evaluation

7.1A Describe the method that will be used to periodically evaluate the effectiveness of the plan in meeting the objectives established in Section 1. The description must include the State’s evaluation of satisfaction by individuals with significant disabilities who have participated in the program. *34 CFR 364.38*

Specific indicators have been identified for each goal cited in the SPIL. The SILC will annually, as well as intermittently, review its progress through its regular meetings via input from DSU representatives, CIL representatives, joint preparation and review of federal reports, and feedback from other entities regarding independent living issues and concerns for Texans with disabilities.

Additional opportunities for assessing effectiveness include acquisition of input from Consumers through:

* Inviting public comment during each regularly scheduled meeting of the SILC;
* Posting a copy of the SPIL on the Internet and providing a method for Consumer and public comment;
* Reviewing public input collected by other entities, including but not limited to, DSUs and CILs;
* Presenting up-to-date information on the implementation of the SPIL at the annual independent living conference and soliciting public comment; and
* Maintaining a toll-free telephone line for public access.

Consumer satisfaction is addressed through several methods. The DSUs have established processes to solicit feedback from Consumers served to identify satisfaction with services and their IL program experience. Data is collected and compiled by independent evaluators and reviewed by the SILC. The SILC Chair participates as a standing member of the State Rehabilitation Council, affording the opportunity for dialog, input, updates and annual reporting and review regarding SILC activities.

The network of CILs in Texas has implemented a standard Consumer Satisfaction Questionnaire that is distributed to Consumers. Analysis of responses is included in the 704 reports which are provided to the SILC for review. Consumers are invited to express satisfaction or concerns with the IL service delivery system at all SILC meetings or through the SILC’s toll free telephone line. Consumers are informed of the availability of the Client Assistance Program as a means of resolving concerns.

Section 8: State-Imposed Requirements

8.1A Identify any State-imposed requirements contained in the provisions of this SPIL.

Indicate N/A if not applicable.

To receive IL services in Texas from DRS or DBS, a Consumer must be in the United States legally. The DBS and DRS policy manuals require Consumers to provide original documents to establish identification and that the Consumer is legally in the United States. If the Consumer is unable to provide appropriate documentation at application, the Consumer is allowed to complete the application and the counselor counsels the Consumer on the need for the documentation before DRS or DBS can determine eligibility for services. CILs do not require Consumers to provide proof of legal status.

Both DARS and DBS have established protocols regarding Consumer participation in the cost of services as described in 2.1.C.

**Division for Rehabilitation Services (DRS) ILS Waiting List Description**

Because the majority of requests for independent living services from the DRS ILS program in Texas are for rehabilitation technology, assistive equipment and devices, and similar services, the amount of available funds were not sufficient to provide purchased services immediately. It therefore became necessary for the DRS ILS program to implement a list of all Consumers waiting to receive purchased services. This became the ILS waiting list, which consists of all Consumers from initial contact through plan/waiver initiated statuses who have not yet received purchased services.

The DRS Rehabilitation Policy Manual, Chapter 8 provides guidance to the 12 ILS counselors regarding the waiting list procedures.

**The purpose of the ILS Waiting List** is to:

* Identify who is to be served next when funds become available,
* Track the timeliness of services provision,
* Track the number of Consumers who are waiting, and
* Identify the estimated amount of additional funds that are needed.

The ILS waiting list is available to counselors on the DRS Intranet by caseload, with Consumers sorted by initial contact date, ILS status, and ready or not ready to receive services. Consumers are automatically added to the waiting list when an initial contact is completed.

**ILS Waiting List Procedure**

Following the development of a plan or waived plan and becoming ready to receive purchased services, Consumers on the ILS waiting list are served within each caseload in order of their initial contact date.

**First Served**

The first Consumer to receive purchased services on the ILS waiting list is the Consumer on the caseload with the oldest initial contact date who has a plan or waived plan and is ready for services. The Consumer receives all services agreed to on the Consumer’s plan or waived plan.

When there are not enough funds to serve the first Consumer ready for services, services are provided totheConsumer with the next oldest initial contact date who has a plan or waived plan and is ready for services. The first Consumer maintains their next-to-be-served status and is served when adequate ILS funds become available through the next quarterly allocation or redistribution of uncommitted funds from another ILS caseload.

#### Not Ready for Services

A Consumer with a written plan or waived plan may not be ready to receive services for a variety of reasons; for example:

* Medical reasons—the Consumer may need hospital treatment for a minor illness or a complication of his or her disability;
* Vehicle (van) not ready for modifications, perhaps:
	+ not yet purchased,
	+ not delivered,
	+ not inspected, or
	+ needs mechanical work; or
* Consumer reports:
	+ personal reasons, or
	+ family problems.

The counselor documents in a case note:

* The reasons a Consumer is not ready, and
* A projected date when the Consumer may be ready.

**Services provided to Consumers while on the ILS Waiting List include**

* Counseling and guidance,
* Information and referral,
* Referral to a CIL,
* Comparable benefits, (for example, Medicaid and Medicare), and
* Services paid for by other resources.

**Contact and Documentation**

While on the waiting list, ILS counselors are required to maintain regularly scheduled contact as needed by the Consumer, but at least every 60 days to:

* Provide updates and progress reports, and
* Request additional information.

DBS and the CILs do not have waiting lists at this time.PART III: EXHIBITS

Attachment 1 - SILC Standards & Indicators Developed at SILC Congress 2004

**SILC Standards and indicators**

**Developed at SILC Congress 2004**

**Preamble**

These standards and indicators are intended to assist states to fully implement the requirements outlined in Title VII of the Rehab Act.

They are intended as a guide for states in administering programs and services in compliance with the Act and Independent Living values and principles.

# Definitions

Consumer Control- The term “Consumer control” means, with respect to a SILC, that the SILC vests power and authority in individuals with disabilities regarding decision making, SPIL Development and approval, establishment of policies, direction, management and operations of the SILC.

Disability-The term “disability” means a person who has a physical, mental, cognitive, and/or sensory impairment, which substantially limits one or more of such person’s major life activities as a record of such impairment or is regarded as having such impairment.

# SILC Philosophy

**Standard #1**

The purpose of the SILC is to promote the philosophy of independent living, including a philosophy of Consumer control, peer support, self-help, self-determination, equal access, and individual and systems advocacy, in order to maximize the leadership, empowerment, independence, and productivity of individuals with disabilities, and the integration and full inclusion of individuals with disabilities into the mainstream of American society.

SILC membership shall always remain at or above 51% people with significant disabilities who represent a broad range of disabilities and are knowledgeable about CIL’s and Independent Living services.

**Indicators**

1. The SILC will provide statewide representation, represent a broad range of individuals with disabilities from diverse backgrounds, and consist of individuals who are knowledgeable about CILs and Independent Living Services.

2. The majority of voting SILC membership shall consist of individuals with disabilities who are not employed by any state agency or CIL.

3. In a state in which one or more projects are carried out under section 121, at least one representative of the directors of the projects; additional members may include other representatives from centers for independent living, parents and guardians of individuals with disabilities, advocates of and for individuals with disabilities, representatives from private businesses, representatives from organizations that provide services for individuals with disabilities, and other appropriate individuals

The SILC will develop a method for recruiting applicants and receiving applications and, on at least an annual basis, forward a list of qualified, knowledgeable, and diverse candidates to be appointed by the Governor or designee.

The SILC will provide training to its members, CILs, other providers, and Consumers on the Rehab Act and Independent Living

Minimum Standard: once a year

Acceptable Standard: twice a year

Optimal Standard: three times a year

The SILC shall provide each newly appointed member with training and orientation prior to voting.

Every SILC shall complete and submit an assessment of the SILC training needs to RRCEP, RTC (ILRU) on an annual basis.

**Standard #2**

SILC has an active and equal role in the development of the State Plan.

**Indicators**

1. A majority vote of the SILC membership is required to approve the State Plan.

2. Any revisions and changes made to the SPIL by the DSU Director, Staff, SILC Chair, SILC Committee or any other entity will be submitted and approved by the full SILC, prior to inclusion in the final approved SPIL.

**Standard #3**

The SILC has the freedom to advocate for issues of its own choice as evidenced in the state plan and in a list of advocacy issues that will be developed annually.

**Indicators**

1. The SILC will, on an annual basis, develop a list of advocacy issues.

2. Minutes of SILC meetings, public forums, 704 Report, member activity reports will be collected and compiled at least annually to demonstrate evidence of advocacy action and accomplishments.

**SILC Relationship with CILs**

**Standard #1**

In partnership with CILs, the SILC will maximize cooperation, coordination, and working relationships to strengthen independent living within the state.

**Indicators**

1. The SILC will have as a voting member at least one CIL director chosen by the directors of CILs that comply with Section 725 in that state.

2. The SILC will provide opportunities for CILs to acquire technical assistance and training.

3. The SILC will participate only as technical assistants in RSA site reviews at the request of CIL Directors.

**Standard #2**

The SILC will collaborate with CILs in the design, development, implementation, and evaluation of the SPIL.

**Indicators**

1. The SILC will work with CILs to conduct public forums and other mechanisms to gather information from people with disabilities in the development of the state plan.

2. The SILC will utilize CIL 704 reports and other tools to identify the trends for development of the state plan.

3. The SILC will cooperate, collaborate, and coordinate with CILs in the development of the design of the statewide network of CILs.

4. The SILC and CILs will collaborate on the design and implementation of tools to assess Consumer satisfaction with the state plan.

**Autonomy**

**Standard # 1:**

The SILC shall not be established as an entity within a state agency.

**Indicator:**

The SILC

* Develops its own vision and mission statement
* Reviews and monitors its own progress
* Controls the appointment process by
recommending members
* Has freedom to advocate about issues of its own choice
* Develops statutory authority, procedures and other systematic methods for gaining, maintaining and protecting its autonomy
* Accounts for its decisions and actions
* The SPIL describes the status of the Council and how that status demonstrates the autonomy of the Council
* Has a code of ethical behavior for Council members
* Has a conflict of interest policy for Council members
* Has a plan for training/mentoring of new members
* Is responsible and accountable for the actions of the SILC

**Standard # 2**

The SILC shall prepare, in conjunction with the DSU, a plan for the provision of such resources as may be necessary and sufficient to carry out the functions of the Council.

**Indicator:**

The SILC

* Develops, adopts and controls its own budget
* Develops, implements and maintains sound fiscal policies and procedures

**Standard # 3**

Each SILC shall, consistent with state law, supervise and evaluate personnel necessary to carry out the functions of the Council.

**Indicator:**

The SILC develops, implements, and maintains sound personnel policies and procedures in accordance with its organizational structure.

**Standard # 4**

The SILC shall jointly develop and sign (in conjunction with the DSU) the SPIL.

**Indicators:**

The SILC:

* Develops, implements and monitors its SPIL
* Chairperson shall sign the SPIL upon a majority vote of the Council
* Has a process for reviewing and determining if the SPIL has been implemented

**SILCs as System Advocates**

**Standard #1:**

The Council shall direct and develop the resources (including but not limited to funds, staff, volunteers, Council members, and partners) necessary to implement advocacy for systems change.

**Indicators:**

1. The Council will identify in the SPIL the resources to carry out advocacy efforts

towards systems change.

2. The Council will identify in the SPIL a contingency process to address unexpected emerging issues.

3. The Council will identify in the SPIL the process of expanding resources to carry out advocacy efforts which are addressed by the SPIL but are unfunded due to limited SILC resources.

4. The Council will report the percentage of their resources being used to implement advocacy efforts for systemic change.

**Standard #2:**

The Council will develop and implement advocacy efforts that promote the IL philosophy and results in meaningful and measurable systemic change.

**Indicators:**

1. The Council will identify priority systems change issues through statewide Consumer input.

2. The Council will develop a specific action plan for implementation of advocacy efforts toward their priority systems change issues.

3. The Council will establish a method for annual evaluation of the effectiveness of their action plan.

**Standard #3:**

The Council will develop and strengthen the network of CILs, including supporting their advocacy efforts.

**Indicators:**

1. The Council will work with the CILs to create statewide advocacy efforts toward systemic change.

2. The Council will share with CILs statewide Consumer input, including input from Consumers in unserved and underserved areas and populations, regarding systems change issues that need to be addressed by the network of CILs.

3. The Council will jointly plan with the CILs and DSU to determine systems change issues.

**Standard #4:**

The Council shall set forth the steps that will be taken to maximize the cooperation, coordination, and working relationships with other advocates working toward systemic change.

**Indicators;**

1. The Council will work with the CILs to establish statewide advocacy networks that partnership with coalitions and others who are addressing common systemic change issues.

2. The Council will identify the partners in the SPIL that they are working with in advocacy efforts to address systemic change issues.

3. The Council will outreach to additional organizations and partners in order to effectively address system change issues.

4. The Council will provide evidence in their role of the partnerships in the resource plan and evaluation process.

Attachment 2 – Center Locations, Expansion Areas and Stray Counties

* \*\*All population figures are of non-institutionalized persons with disabilities age 5 years and over (by county) from the 2000 U.S. Census Data. For more information, visit <http://quickfacts.census.gov/qfd/states/48000.html>.

**Attachment 3 – SILC Council Members & Staff**

**Attachment 4 – Goals & Objectives with Funding Indications**