Texas Department of Assistive and Rehabilitative Services

Division for Blind Services

Vocational Rehabilitation Services Portion of the Texas Combined State Plan

Federal Fiscal Years 2017–2020

Texas Department of Assistive and Rehabilitative Services (DARS) Vision Statement
A Texas where people with disabilities and families with children who have developmental delays enjoy the same opportunities as other Texans to pursue independent and productive lives.

DARS Division for Blind Services Vision Statement
A Texas where people who are blind or visually impaired enjoy the same opportunities as other Texans to pursue independence and employment.
# Table of Contents

**WIOA COMBINED STATE PLAN** ................................................................. 1  
Texas Department of Assistive and Rehabilitative Services (DARS) Vision Statement ........ 1  
DARS Division for Blind Services Vision Statement .............................................. 1  
Section 1: Input of State Rehabilitation Council ........................................................ 3  
Section 2: Request for Waiver of Statewideness ....................................................... 6  
Section 3: Cooperative Agreements with Agencies Not Carrying Out Activities under the Statewide Workforce Development System .................................................. 7  
Section 4: Coordination with Education Officials .................................................. 10  
Section 5: Cooperative Agreements with Private Nonprofit Organizations ............. 13  
Section 6: Arrangements and Cooperative Agreements for the Provision of Supported Employment Services ........................................................ 15  
Section 7: Coordination with Employers ................................................................. 17  
Section 8: Interagency Cooperation ......................................................................... 18  
Section 9: Comprehensive System of Personnel Development; Data System on Personnel and Personnel Development ................................................................. 18  
Section 10: Statewide Assessment ....................................................................... 29  
Section 11: Annual Estimates ................................................................................. 34  
Section 12: State Goals and Priorities ................................................................. 37  
Section 13: Order of Selection ................................................................................. 38  
Section 14: Goals and Plans for Distribution of Title VI Funds ............................. 38  
Section 15: State’s Strategies ................................................................................. 39  
Section 16: Evaluation and Reports of Progress: VR and Supported Employment Goals .... 50  
Section 17: Quality, Scope, and Extent of Supported Employment Services ............ 58  
Public Input Received During DARS/TWC Joint Public Meetings ....................... 60  
Appendix A – Texas Combined State Plan for Programs Authorized Under the Federal Workforce Innovation and Opportunity Act ................................................. 65  
Appendix B: Joint Development of the Texas Combined State Plan ......................... 67  
Appendix C: Texas Workforce Commission Organizational Chart Effective September 2016 .. 70  
Appendix D-Acronyms ........................................................................................ 71
Section 1: Input of State Rehabilitation Council

Summary of Input of the State Rehabilitation Council for Federal Fiscal Year 2017 Vocational Rehabilitation Portion of the Combined State Plan for the State of Texas

The Rehabilitation Council of Texas (RCT), which is the state rehabilitation council for Texas, met with Division for Blind Services (DBS) quarterly as a part of the council meeting. During these meetings, DBS provided quarterly updates and RCT provided input and recommendations to DBS.

RCT uses a committee structure to provide focused review and comment to DBS. These committees are: the executive committee; the program planning and review committee; the policy, procedures and personnel development committee; the consumer satisfaction and needs assessment committee; and the membership and education committee. Much of the interaction included exchanges of information in order to achieve greater clarity and understanding. While the detail work is done in the committee structure, all comments and recommendations are made from the full RCT.

The following is a list of RCT activities and accomplishments for the reporting period:

- RCT produced the annual report that included its accomplishments as well as consumer success stories.
- RCT worked with the DARS commissioner to update RCT’s administrative support position consistent with the Resource Plan and Management Agreement.
  - RCT was represented at the National Coalition of State Rehabilitation Councils and Council of State Administrators of Vocational Rehabilitation 2015 spring conference.
- RCT worked with the governor’s office to fill membership vacancies.
- RCT conducted four quarterly meetings including a joint meeting with the State Independent Living Council.
- In response to the request for input regarding the movement of the vocational rehabilitation (VR) program to the Texas Workforce Commission (TWC), RCT drafted a letter to provide information regarding the federal requirements and VR needs of Texans with disabilities. The following principles were affirmed:
  - The VR programs maintain sufficient full-time equivalents (FTEs) to support programmatic and fiscal decision making and controls to ensure quality and timely delivery of client services.
  - VR staff must maintain supervision, including fiscal and programmatic direction, from the VR program regardless of where the VR staff is located.
  - Maintaining the program serving Texans who are blind and visually impaired that support a result of greater independence and employment should remain under the direction of a separate VR program that serves the blind and visually impaired.
  - The final organizational structure must be consistent with the federal requirements of VR programs funded under §110 of the Rehabilitation Act of 1973, as amended, to ensure that the proposed new structure does not jeopardize Texas’ eligibility to receive federal...
funds for the VR program.

The following is a summary of the input and recommendations made from July 1, 2014, through July 31, 2015. Recommendations are transmitted to DBS both verbally at RCT meetings, and in writing throughout the year by committee reports, the full RCT minutes, and the to-do list.

RCT Input: RCT commends the increased collaboration between DBS and DARS Division for Rehabilitation Services (DRS), which is evident in the state plan materials and policies in a number of areas for the benefit of Texans with multiple disabilities.

DBS Response: DBS appreciates RCT recognizing this increased collaboration.

RCT Recommendation: RCT is concerned about the delay in securing a vendor to conduct the DBS consumer satisfaction surveys. The procurement process for the DBS’s consumer satisfaction survey was initiated over 12 months ago. We are concerned about the timeliness of receiving consumer satisfaction data for the Division for Blind Services to report for FY 2015, which is required as a part of the required annual VR state plan and the independent living annual report. The Council is deeply concerned that not only will we not be able to meet a federal requirement but, as important, we will not be able to ascertain whether consumers are satisfied or dissatisfied with the services that they have received. Feedback from consumers is a critical part of program evaluation and this lack of information impedes the program’s ability to evaluate itself.

DBS Response: DBS has awarded and executed a contract to conduct the consumer satisfaction survey. The contractor is collecting data and will report 2015 consumer satisfaction data.

RCT Recommendation: RCT partnered with DBS, DRS, and DARS to design and conduct the needs assessment. RCT recommended that the needs assessment continue and focus more in-depth on the VR needs for youth with disabilities, including those youth who are homeschooled. RCT also recommended that the contractor attend the committee meetings so that ongoing input could be provided on the needs assessment.

DBS Response: DBS appreciates the partnership with RCT on the comprehensive statewide needs assessment. We will continue to work together and consider these recommendations to improve the assessment.

RCT Recommendation: RCT supports travel policy that ensures fiscal responsibility and does not create an undue hardship on the traveler with the most significant support needs. RCT members applauded the exception portion of the policy; however, the policy does not include feedback to the person if the request is denied. RCT recommends that the policy include an explanation of the reason to the individual requesting the reimbursement if an exception to policy is denied.
DBS Response: DBS agrees and has revised policy to reflect that if the request for rate exception is denied, DARS will notify the requester and will document the reason on the Attendant Care Reimbursement Request for Rate Exception form.

RCT Recommendation: RCT strongly urges that the state of Texas continues its high standard for VR counselors. This standard requires a master’s degree and qualifications consistent with the certified rehabilitation counselor.

DBS Response: DBS agrees and plans to continue its high standard for VR counselors and the system to recruit and hire individuals as VRCs who have master’s degrees and qualifications consistent with the certified rehabilitation counselor.

RCT Recommendation: RCT expresses its concern that it is not involved in the development of policy but rather responding to policy that has already been developed. RCT requested a review of the policy development system with focus on involving RCT at an earlier point in time and at the same time would not impede the progress of needed policy change.

DBS Response: DARS agrees and has implemented a process to involve RCT in policy development and review at an earlier point in time.

RCT Recommendation: RCT noted that the language of an impartial hearing officer (IHO) decision focused more on a negative bias of the person rather than providing information on why the VR service was denied the individual. RCT recommended that training for hearing officers should include being more factual and specific to VR service delivery issues.

DBS response: DARS agrees with the recommendation. This issue was included in training to the IHO on July 8, 2015. DARS will provide additional written guidance to the IHOs emphasizing RCT’s recommendation.

RCT 2017 State Plan Recommendation related to Title VI, Part B Funds for the supported employment program: With regard to the goals and plans for Title VI, Part B funds, the goals should include the number of persons that are expected to be served along with the goal for successful supported employment outcomes.

DBS Response: DBS agrees with RCT’s recommendation and will work closely with the DARS Program Reporting and Analysis Program (PRA) to develop the methodology for reporting the number of individuals expected to be served under Title VI, Part B funds.

RCT 2017 State Plan Recommendation: With regard to coordination with the education officials to facilitate the transition of students with disabilities from school to the receipt
of VR services, RCT recommends that VR counselors liaison with the transition and employment designee, as required by §29.011 of the Texas Education Code, for Local Education Agency (LEA), or shared services arrangement. The purpose of this relationship should include sharing information about VR services, including how to make application for VR services and identifying youth who might benefit from VR services.

DBS Response: DBS agrees with this recommendation. The Texas Education Agency (TEA) and DARS convened a stakeholder group and a workgroup for the purpose of sharing information, processes, and service coordination strategies. This initiative will enable TEA and DARS to collaborate more effectively in the transition of students with disabilities.

RCT 2017 State Plan Recommendation: With regard to coordination with the education officials to facilitate the transition of students with disabilities from school to the receipt of VR services, RCT is concerned that students with disabilities who reside in state-supported living centers and attend public schools are included among the students who are provided information about VR services.

DBS Response: DARS agrees that students residing in state-supported living centers who are attending public schools, like other students with disabilities, should be provided information about VR services. As DARS does not maintain data pertaining to these students, DARS will contact the Texas Department of Aging and Disability Services (DADS) to discuss and coordinate strategies for providing this information.

RCT 2017 State Plan Recommendation: With regard to the CSPD portion of the VR plan and to better understand the workload expectations of VR counselors, RCT recommends that a reference be added of population numbers of VR counselors who are blind or a reference to the growth of the population by numbers.

DBS Response: DBS agrees and has added information to the CSPD addressing the effects of population growth.

Section 2: Request for Waiver of Statewideness

DARS DBS is not requesting a waiver of statewideness.
Section 3: Cooperative Agreements with Agencies Not Carrying Out Activities under the Statewide Workforce Development System

DBS has appropriate cooperative arrangements with, and uses the services and facilities of, various federal, state, and local agencies and programs. Both DARS and DBS have contracts with Texas Industries for the Blind and Handicapped (TIBH) and the Texas State Use Program, to provide services in support of agency and divisional operations.

DBS coordinates with other agencies and programs to ensure people with disabilities receive appropriate services. These include:

- Texas Health and Human Services Commission to create administrative efficiencies and better services to consumers of health and human services statewide. Initiatives include co-location of offices across the Health and Human Services System for improved access by consumers and reduction of administrative costs;

- Texas Education Agency (TEA) to develop a Memorandum of Understanding (MOU) so DARS, education service centers (ESCs), and independent school districts (ISDs) can enhance coordination of joint service provisions; continuing to develop services provided to improve and expand services for transition-age students, including a stakeholder workgroup, which is working across stakeholders to generate ideas to better provide transition services and work with Admission, Review, and Dismissal (ARD) meetings;

- Texas School for the Blind and Visually Impaired (TSBVI) to coordinate to provide specialized programs to prepare students to transition to postsecondary life and the workplace;

- Texas Department of Insurance’s Division for Workers’ Compensation to facilitate the referral process of injured workers to DARS to enhance return-to-work efforts;

- Social Security Administration to collaborate on employment incentives and supports and maximize Social Security Administration/Vocational Rehabilitation (SSA/VR) reimbursement activity through the Ticket to Work Program;

- U.S. Department of Veterans Affairs (VA) to maximize case service funds through better access to comparable benefits, and to enhance the case management process while avoiding duplication of services;

- Texas Veterans Commission to help identify veterans who need additional supports in securing benefits, gaining employment, and accessing advocacy services;

- Texas Coordinating Council for Veteran Services to help identify trends that have an adverse effect on the veteran population, and create strategies to address and resolve those issues on a state level;
Texas Workforce Commission (TWC) to verify for Texas businesses that job applicants for the Work Opportunity Tax Credit program are receiving, or have received, vocational rehabilitation (VR) services under an individualized plan for employment;

TWC for access to electronic wage data to verify employment history and income for consumers for the purpose of closure data and SSA/VR reimbursement submission;

Workforce Solutions Offices to collaborate to provide consumers training and support in employment goals, including symposiums, job fairs, and providing disability awareness training;

U.S. Department of Labor Office of Federal Contract Compliance Programs (OFCCP) to create symposiums and job fairs throughout Texas to meet the federal regulation that requires federal contractors ensure that no less than 7 percent of their workforce includes individuals with disabilities;

DADS and the Texas Department of State Health Services (DSHS) to reduce duplication and increase coordination of employment services provided to the shared consumer populations of DARS and DADS;

Texas Department of Transportation to coordinate services since inadequate transportation is often a major factor in a consumer’s ability to maintain employment;

Texas Criminal Justice Coalition for juveniles and adults to assist and strengthen supports and employment goals by exploring career opportunities;

Texas A&M AgriLife Extension Service and Texas AgrAbility to assist consumers with modifications of agricultural equipment and tools and to allow agricultural producers with disabilities to continue farming and ranching;

Other federal, state, and local public agencies providing services related to the rehabilitation of an individual who is blind or has a visual impairment. For example, DBS participates in Community Resource Coordination Groups (CRCGs), which are local interagency groups comprised of public and private providers who come together to develop individualized service plans for children, youth, and adults whose needs can be met only through interagency coordination and cooperation; and

Other private and public, for-profit and nonprofit entities, such as corporations, partnerships, and sole proprietorships, to provide a number of rehabilitation services purchased from vendors. Contracts with vendors are referenced in the DBS Standards for Providers and specify the terms and conditions of the relationship, including approved services, expected outcomes, fees, staff qualifications, and required documentation.
Cooperative Agreement Regarding Individuals Eligible for Home and Community-Based Waiver Programs, Individuals with Developmental Disabilities, and Individuals that Receive Mental Health Services

DARS and DADS have an MOU to provide VR services to eligible individuals, who are eligible for home and community-based services under a Medicaid waiver or Medicaid State Plan Amendment. DADS is the state agency that provides services to individuals with developmental disabilities. DARS also is currently working collaboratively with DSHS and will develop a MOU to provide cooperative VR services to individuals that receive mental health services.

Coordination with Assistive Technology Act
DBS works with organizations across the state to ensure that the agency meets the assistive technology needs of VR consumers, including transition services for students and youth with disabilities and pre-employment transition services for students with disabilities. These organizations include:
- contracted assistive technology evaluation sites across the state; and
- the DBS Assistive Technology Unit.

Contract providers are required to meet a thorough testing program to ensure these providers meet minimal standards of proficiency to become approved assistive technology providers. DBS coordinates with other parts of DARS when assistive technologies are needed that are not vision related. DBS also utilizes programs such as Computer/Electronics Accommodations Program (CAP) when a consumer is interested in employment with the federal government, Specialized Telecommunications Assistance Program (STAP) for the obtaining of telecommunication devices, and various assistive technology programs for the deaf and hard of hearing.

Each of the regional DARS offices have a Consumer Resource Room where consumers may use accessible equipment to assist the individual to improve their quality of life, increase productivity at work, and to expand educational/vocational options that increase their opportunities for success.

Coordination with Ticket to Work and Self-Sufficiency Program
DBS coordinates with state agencies and private providers functioning as employment networks under the Ticket to Work and Self-Sufficiency Programs by:
- cooperating with the SSA to encourage Community Rehabilitation Program providers (CRPs) to become employment networks (ENs) under the Ticket to Work Program; and
- providing advanced payments to CRP-ENs through the Ticket to Work Partnership Plus Program, which allows CRP-ENs to provide ongoing support or job retention services that advance employment or increase earnings after a consumer’s VR case is closed.
Section 4: Coordination with Education Officials

The provision of quality VR services for Texas students and youth who are blind or visually impaired, and who may have other disabilities, is a strategic priority for DBS. DBS works closely with the public education system through DBS Transition Services.

State Education Agency Partnership
DARS established an interagency letter of agreement with TEA for coordination of transition planning services for students and youth receiving special education services in Texas as required in 34 CFR §361.22(b). This agreement represents each agency’s commitment to collaborate and cooperatively facilitate the successful transition of students and youth with disabilities from high school to postsecondary life, including training and competitive, integrated employment.

DARS and TEA are working to update the letter of agreement to include:
- pre-employment transition services (Pre-ETS) as defined in 34 CFR §361.48 and other requirements of the Workforce Innovation and Opportunity Act of 2014 (WIOA);
- a mechanism to target areas of the state with the highest need for transition services; and
- the development of consistent policies for coordination between transition counselors and schools, including for ARD meetings.

The current letter of agreement provides for:
- consultation and technical assistance in planning for the transition of students with disabilities from school to post-school activities, including VR services;
- transition planning for students with disabilities that facilitates the development and completion of the individual education plan (IEP);
- clarification of the agencies’ respective roles and responsibilities, including financial responsibilities for providing transition planning services for students who are blind or significantly visually impaired; and
- a description of procedures for outreach to and identification of students with disabilities who are in need of transition services.

Local Education Agency Partnerships
DBS works with the TEA Special Education Division, TSBVI, Texas School for the Deaf (TSD), ESCs, and ISDs to provide a variety of training for staff and pre-employment transition services to students with disabilities. One example of training opportunities is the DBS-sponsored “Working with Children and Families,” in which DBS and the TSBVI staff provide specialized instruction on the special education process and working with students who may have multiple disabilities. Additionally, DBS collaborates with a number of ISDs and ESCs across the state to provide relevant seminars, workshops, camps, and summer work experiences for students.

DBS partnered with DRS and other health and human services agencies to assist TEA in the development of a Texas Transition and Employment Guide for students enrolled in special
education programs and their parents. The guide provides information on statewide services and programs that help facilitate the transition to life outside the public school system. DBS will continue to be a part of updating this guide as needed in the future.

ISDs maintain fiscal responsibility for transition services that are also considered special education or related services, and that are necessary for ensuring a free appropriate public education (FAPE) to children with disabilities within Texas, including those outlined in the Individualized Education Program (34 CFR §361.22(c)).

In accordance with 34 CFR §397.31, neither the state education agency nor the LEA will enter into a contract or other arrangement with an entity, as defined in 34 CFR §397.5(d), for the purpose of operating a program under which a youth with a disability is engaged in subminimum wage employment.

**Educational Support and Services**

DBS policy states that transition is a collaborative, student-centered, and student-driven process. Transition is an integral part of the education and rehabilitation process and is based on the student’s individual needs, interests, and preferences. Effective transition planning happens as early as possible to help students develop the skills and attitudes necessary to work and live in the community.

DBS transition services provides consumers ages 10 through 22 years with VR services to prepare them for employment and enable them to make informed decisions about their future postsecondary goals. Transition services are often the link between the DBS Blind Children’s Vocational Discovery and Development Program (BCVDD) and adult VR. Although the BCVDD Program will not be among the DARS programs transferred to TWC on September 1, 2016, consumers will continue to benefit from seamless delivery of services throughout each stage of development.

Twenty-five and a half dedicated Transition Counselors throughout the state provide significant counseling and guidance and informed choice in preparing students and youth with visual loss for entry into the world of work. They serve as informational resources for teachers and other educational staff, and provide resources and information about blindness for parents and transitioning students throughout development and execution of their individualized plan for employment (IPE). They work closely with parents, education staff, and community service providers to promote development of skills needed for students to become as independent as possible and competitive in terms of integrated employment.

Pursuant to 34 CFR §361.22(a)(2), DBS VR policies and procedures provide for the development and approval of an individualized plan for employment (IPE) at the earliest point possible, but no later than the student's exit from the school system or 90 days after eligibility determination, whichever occurs first (34 CFR §361.45(e)).

In addition to training parents and students about their special education rights and
responsibilities, DBS provides educational support by working with the transition team at school to develop and implement the IEP. Goals developed in the IEP are considered and coordinated with services in the IPE to facilitate successful completion of those goals.

For all programs, DBS services focus on these six skill areas:
- adjustment to blindness;
- independent living skills;
- travel skills;
- communication;
- support systems; and
- vocational skills.

Additionally, DBS transition services also provides and coordinates Pre-ETS for students with disabilities. Core focus areas for Pre-ETS include:
- career exploration counseling;
- work-based learning (internships, apprenticeships, volunteer work);
- counseling on postsecondary training options;
- job readiness (including social and independent living skills training); and
- self-advocacy training and mentoring.

For students and youth with the most significant disabilities, supported employment can also be considered, when appropriate for the consumer, and can be initiated before the youth completes secondary education.

Referral
DBS staff works closely with TEA, TSBVI, regional ESCs, and ISDs to ensure students who are blind and visually impaired are referred to DBS. DBS staff participates in outreach activities to help identify students who are blind or significantly visually impaired and who need transition services.

Outreach activities and technical assistance to schools may include:
- provision of information about transition services;
- description of available services and eligibility requirements for VR;
- the application process for services; and
- attendance at ARD meetings, which may be provided in-person or via alternative means for meeting participation, including video conferencing or conference calls, according to 34 CFR §361.22(b)(1).

DBS transition staff, which also includes two program specialists, serves as a community resource for local schools and education agencies.

Interagency Partnerships and Strategies to Strengthen Partnerships
DBS and TSBVI have a long-standing interagency agreement to coordinate critical services for blind and visually impaired students. DBS and TSBVI co-produce the Sense Abilities newsletter,
a publication for professionals, families, and students with worldwide readership. DBS also coordinates with TSBVI on postsecondary services for up to four students per month, and a summer work experience, held in Austin, for up to 15 Transition students.

Additionally, DBS partners with ISDs, ESCs, universities, and community rehabilitation providers to provide regional summer work experience programs in the Lubbock, Dallas, Fort Worth, Waco, and College Station areas.

DBS participates with DRS in Project HIRE and Project SEARCH, two innovative and successful programs currently sponsored through grants from the Texas Council on Developmental Disabilities, which help students and youth with developmental disabilities successfully transition to postsecondary training and integrated employment respectively.

DBS has begun updating policy and providing training to staff to increase their awareness of WIOA and its requirements. In addition to providing training and guidance to staff, DBS continues to enhance and expand quality assurance processes to ensure that all staff working with transition-age consumers use consistent practices and processes.

DBS will enhance state-level collaboration with TEA, the Texas Higher Education Coordinating Board, and TWC to increase coordination, information sharing, and planning. Additionally, DBS will continue to work with state and local educational partners and businesses to identify best and promising practices for providing successful training and workplace experiences for transition consumers.

**Section 5: Cooperative Agreements with Private Nonprofit Organizations**

**Private Nonprofit Providers**
DBS has a long history of partnering with private nonprofit community rehabilitation service providers. These partnerships were originally limited to facilities designed to provide opportunities for individuals with vision loss, namely organizations in the Lighthouse Industries for the Blind of Texas (LIBT) network and Goodwill Services. Private nonprofit providers of rehabilitation services are an important part of the VR service delivery process for many consumers. Over the last several years, the number and diversity of nonprofit vendors has grown extensively. A wide variety of community organizations are now involved in service delivery to DBS consumers.

**Availability of Information on Service Providers**
In an effort to provide quality resources to assist consumers in making an informed choice regarding VR providers, DARS developed and maintains ReHabWorks, an electronic case management system. ReHabWorks contains information specific to each Community Rehabilitation Program (CRP) vendor. DARS staff have access to and share provider information regarding qualifications, services provided, location, experience in working with target populations, foreign languages, and other communication skills (for example, braille).
Provider Contracting Process
DBS establishes contractual relationships with providers of rehabilitation services, including private nonprofit providers. To expand opportunities and increase efficiency related to recruiting providers, DBS posts notification of contracting opportunities on the Electronic State Business Daily (ESBD) where organizations can complete an application to become a provider, if the organization meets the requirements listed in the ESBD posting.

Service Provider Contracts
The DBS Standards Manual for Consumer Services Contract Providers (SM) is published on the DARS website and specifies the scope of work for providing contracted goods and services. Contracted providers are required to follow the standards, which specify the terms and conditions of the contractual relationship, approved services, expected outcomes, fees, staff qualifications, and required documentation. Revisions to the standards are made periodically. Notices of upcoming changes are published on the DARS website at least 30 days in advance of the effective date of the changes. Each provider is contractually responsible for maintaining compliance with the most recent standards and their individual contract. Basic services include:

- Vocational Evaluation and Assessment;
- Orientation and Mobility;
- Work Adjustment;
- Job Readiness;
- Job Placement;
- Job Coaching;
- On-the-Job Training;
- Trial Work;
- Specialized training programs; and
- Supported Employment Service.

Establishment grants are also used within this network to promote training and employment assistance directed toward integrated competitive employment.

Oversight and Monitoring of Contracted Service Providers
DBS contractors and providers are subject to both ongoing and periodic programmatic and financial monitoring. DBS purchases services only from providers that are in compliance with the appropriate standards in the SM. Risk assessment tools are used; on-site monitoring visits may be scheduled. As DBS determines the need, providers not identified through the risk assessment tools may also be monitored. A monitoring team comprises representatives from the DARS staff. Providers found in noncompliance with DBS standards may be placed on a corrective action plan; sanctions vary and may include financial restitution where appropriate. All providers are provided ongoing technical assistance. In addition to monitoring, the SM also specifies requirements for ongoing self-evaluation by each CRP.

Employment Provider Credentialing Requirements
Approved providers receive training in the field from VR Counselors, Employment Assistance Specialists, University of North Texas online courses, the DARS Center for Learning.
Management and/or the Criss Cole Rehabilitation Center staff. Training may include:

- disability awareness and blind consumers to give providers a better understanding of the challenges and limitations faced by DBS consumers;
- education on the Americans with Disabilities Act (ADA) requirements to ensure the providers understand the guidelines and law in providing accommodations to the consumer;
- education on other employment-related laws and recruitment, job matching, job customization, work accommodations, and retention;
- Texas Confidence Builders training for DBS, which provides the philosophy DBS has adopted to help consumers gain personal independence, acceptance, and adjustment to blindness, and find meaningful work; and
- accessible writing courses, which promote awareness and education related to the importance of accessibility of documents.

Identifying and Developing Vendors
A Regional Program Support Specialist (RPSS) in each region is responsible for identification and development of providers who are interested in providing CRP services. The RPSS provides technical assistance and guidance as new providers are approved and as existing providers add new services.

Section 6: Arrangements and Cooperative Agreements for the Provision of Supported Employment Services

DBS recognizes that collaboration with community organizations and other state agencies is essential to achieving successful employment outcomes for consumers with the most significant disabilities.

Establishing Funding
DBS collaborates with community organizations that provide direct services and state agencies serving various disability populations when establishing funding and services that assist an individual with the most significant disabilities.

Potential funding sources include Medicaid waivers; Social Security Administration (SSA) Ticket to Work Program; DSHS, the mental health state agency; DADS, the intellectual and developmental disabilities state agency that is the authority for many 1915(c) state Home and Community-based Services (HCS) Medicaid waivers; and a variety of local community-level sponsorships.

Evidence of Collaboration, Contracts, and Agreements
DBS and DRS have implemented supported employment service contracts and standards that require commitment from community organizations to provide individualized, time-limited services that consumers need and to arrange for extended services. These organizations are responsible for locating or creating the extended services needed by each consumer and securing necessary funding. Extended services are provided or arranged by the community organizations.
and through developing natural supports.

Revisions to the outcome-based supported employment payment system, implemented December 2014, were developed through collaboration between DBS and DRS. The system standardizes required forms, documentation, and expectations for quality provider performance. The system also allows DBS to share providers with DRS, which significantly increases provider resources for DBS.

DBS collaborated with DRS on an American Recovery and Reinvestment Act of 2009–funded project to develop a supported employment training curriculum for current and potential providers. This online training and certification is provided by the University of North Texas Workplace Inclusion and Sustainable Employment program.

The Texas workforce system includes 28 Workforce Development Boards (WDB) charged with the planning and oversight responsibilities for workforce programs and services in their areas. DARS will continue to collaborate with TWC and the 28 WDBs to improve VR services and will develop a Memorandum of Understanding (MOU) with each entity. The MOU will define each party’s responsibilities related to helping consumers to take advantage of competitive integrated employment or career exploration opportunities. The MOU will address VR services for adults as well as transition services for youth with disabilities.

DARS continues to work with DADS to align DARS and DADS employment services. The agencies have a Memorandum of Agreement (MOA) that defines each agency’s responsibilities for coordinating employment services to mutual consumers and provides for a systematic exchange of consumer-identifying information for those receiving services from both agencies.

Through its MOA with the VA, DARS and the VA continue to improve communication and further align VR services to advance, improve, and expand the work opportunities and independent living for veterans with disabilities. DARS and the VA-Vocational Rehabilitation Employment (VA-VRE) share and coordinate activities and services to ensure no duplication of services and continually share information as appropriate and in accordance with applicable statutes that support the objectives of the MOA, Title I and Title VII of the Rehabilitation Act of 1973, as amended; and Title 38 U.S.C., as amended.

DBS will continue to collaborate and work toward a cooperative agreement with the Texas Health and Human Services Commission, the state agency responsible for administering the state Medicaid plan under Title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) that outlines the roles and responsibilities of all parties regarding the delivery of VR services, including extended services, for individuals with the most significant disabilities who have been determined to be eligible for home and community-based services under a Medicaid waiver, Medicaid state plan amendment, or other authority related to a State Medicaid program.

DBS uses its current partnership with the SSA to encourage CRP providers to become ENs under the SSA Ticket to Work Program. DBS offers incentive payments to CRP-ENs that provide 1)
supported employment or job placement services during the provision of VR services, and 2) extended supports to Ticket to Work consumers after VR case closure in order to advance employment or increase consumer earnings.

Documentation of Supported Employment Services and Extended Services
Documentation of the supported employment services and extended services needed after a consumer’s VR case successfully closes is included in the IPE. The IPE includes the name of the public or private provider of extended services or a statement explaining that there is a reasonable expectation extended services will become available before VR case closure.

As a consumer progresses through the supported employment process, DBS uses naturally occurring work supports as extended services. As appropriate, paid supports are administered through other state agencies or community resources not funded by DBS. Documentation requirements for supported employment services require the CRP to identify strategies for using the naturally occurring work or social supports (including ongoing natural and paid supports) for extended services.

Training
DBS has partnered with DRS in providing training on VR, Youth with Disabilities, and Independent Living (IL) services to DADS Home and Community-based Services (HCS) waiver utilization review nurses, Private Provider Association of Texas members, community centers, TWC employment services, and the Statewide Intellectual and Developmental Disabilities Consortium. DBS also provides input on the STAR+PLUS Long-term Supports and Services waiver portion of HHSC Medicaid/CHIP Division’s 1115 Healthcare Transformation waiver.

Section 7: Coordination with Employers
DBS coordinates with employers through several avenues and in-process initiatives, all of which are designed to enhance efforts to identify competitive integrated employment and career exploration opportunities in order to facilitate the provision of VR services and transition services, including pre-employment transition services, for students and youth with disabilities.

These initiatives include:
- a DARS website for businesses to use to learn about hiring individuals with disabilities. This includes a best practice guide regarding the areas a business should address to recruit and employ individuals with disabilities;
- the redesigned role of the Business Relations Coordinators to present a seamless front to business, which will improve DARS’ knowledge about the availability of jobs across the state and improve DARS’ ability to match employment opportunities to job seekers;
- the development of a Business Tracking Tool, which allows DARS to document ongoing relationships with businesses and ensure deliverables and services are provided; and
- using the Talent Acquisition Portal through the National Employment Team to open further
opportunities for employment in Texas and the country.

Section 8: Interagency Cooperation

DBS will continue to collaborate and work towards a cooperative agreement with the Texas Health and Human Services Commission (HHSC), the state agency responsible for administering the state Medicaid plan under Title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) that outlines the roles and responsibilities of all parties regarding the delivery of VR services, including extended services, for individuals with the most significant disabilities who have been determined to be eligible for home and community-based services under a Medicaid waiver, Medicaid state plan amendment, or other authority related to a state Medicaid program.

Specific examples of collaboration include:
- working collaboratively with DADS and HHSC to develop long-term supports needed for supported employment consumers;
- posting of job vacancy notices on the Texas HHSC Jobs Center website, which includes positions for the five Texas health and human services agencies. Also, postings are available on WorkInTexas.com, which is the statewide job site maintained by TWC; and
- creation of administrative efficiencies and better services to consumers of health and human services statewide, including co-location of offices across the enterprise for improved access by consumers and reduction of administrative costs.

As mentioned in Section 6 of this document, DBS uses its current partnership with the SSA to encourage CRP providers to become ENs under the SSA Ticket to Work Program.

Section 9: Comprehensive System of Personnel Development; Data System on Personnel and Personnel Development

DBS is committed to ensuring that consumers receive services from qualified rehabilitation professionals as set forth in §101(a)(7) of the Rehabilitation Act of 1973 as amended by WIOA and 34 C.F.R. §361.18. DBS has established procedures to support the Comprehensive System of Personnel Development (CSPD). RCT provides input to DBS and DRS in addressing issues related to personnel development. The Policy, Procedures, and Personnel Development Committee of the RCT meets quarterly to discuss the development and maintenance of policies and procedures in support of the CSPD standard.

DBS has established and maintains a Qualified Vocational Rehabilitation Counselor (QVRC) Database to track and maintain VRC education requirements. This is an electronic database linked to relevant fields from the Health and Human Services Administrative System (HHSAS). The hiring manager must obtain a transcript for any candidate for vocational rehabilitation counselor/transition counselor (VRC/TC) with a bachelor’s degree or higher prior to making a
salary offer for employment.

For VRC/TC candidates with a master’s degree or a current CRC/LPC certificate, the manager must provide the transcript or license certificate for review to the CSPD Coordinator who will verify whether the applicant meets the educational requirements or CSPD standard. This verification must be completed prior to the hiring manager making a salary offer. The CSPD Coordinator tracks VRC graduate enrollment, academic progress, and graduation. The CSPD Coordinator collects enrollment and graduation statistics from universities preparing VR professionals. Additionally, DARS PRA is able to access personnel information to prepare specific analytical reports.

Personnel Needs
As of August 2015, DBS had 351 FTE positions available to meet direct VR consumer needs. The following is a breakdown by personnel category:

- 109.5 VR Counselors (VRCs) and VR Coordinator FTEs (97.5 Transition and Non-transition VRCs, 4 Criss Cole Rehabilitation Center (CCRC) VRCs, 7 VR Coordinators, and 1 CCRC Coordinator)
- 72 Non-transition VR Counselor (VRC) FTEs
- 25.5 Transition VR Counselor (TC) FTEs
- 93.50 Support Staff FTEs
- 39 VR Teacher (VRT) FTEs (not including CCRC)
- 8 VR Supervisor FTEs
- 12 Field Director (FD) FTEs
- 97 CCRC FTEs (does not include 4 CCRC VRCs and 1 VR Coordinator)

As of August 2015, 72 VRCs and 25.5 TCs served consumers. The average size of a VRC caseload was 64 consumers while the average size of a TC caseload was 72. Projections for numbers of employees needed are based on historical numbers of eligible consumers served, historical turnover rates for each position, and projected turnover.

The following table identifies the number of staff needed to provide direct consumer services and projections of numbers needed over five years based on estimates of the Texas total population projections Texas State Data Center released November 2014, and the number of staff expected to leave their positions. VRC and management staffing projections are based on the continuation of current practices and do not reflect upcoming organizational changes directed by the Texas Sunset Advisory Commission and its report to the 84th Texas Legislature.
Based on the 2014 Texas population of 27,695,284, DBS had a ratio of one VRC/TC to 293,072 people at the beginning of FFY15. As the population continues to grow and age, DARS anticipates increased demand for VR services, which may require additional counselors to serve eligible consumers with significant and most significant disabilities.

DBS operates under an FTE cap that is established by the Texas legislature. Each biennium, DARS prepares and submits a Legislative Appropriations Request, which includes requests for additional FTEs needed by DARS to address population growth and other factors requiring additional staffing levels. The legislature considers these requests during the appropriations process in each legislative session. Staffing levels are sufficient to support program operations for the current biennium. DARS will monitor staffing levels and reevaluate these projections on an annual basis. As needed, DARS will request additional FTEs in Legislative Appropriations Requests for future biennia.

Personnel Development
Texas has a total of six university rehabilitation master’s degree level programs. All six reported a combined enrollment of 453 students for fiscal year 2015.

The University of North Texas and Texas Tech University offer distance learning. Of the DBS VRCs presently enrolled in master’s programs, 100 percent are participating via distance learning.

For FFY’15, the following table lists six universities in Texas that are preparing VR
professionals.

<table>
<thead>
<tr>
<th>Institution</th>
<th>University Students Enrolled</th>
<th>Employees Sponsored by Agency and/or RSA</th>
<th>Graduates Sponsored by University and/or RSA</th>
<th>University Graduates from the Previous Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Texas Tech University</td>
<td>126</td>
<td>8</td>
<td>31</td>
<td>23</td>
</tr>
<tr>
<td>University of North Texas</td>
<td>127</td>
<td>3</td>
<td>24</td>
<td>43</td>
</tr>
<tr>
<td>University of Texas–Rio Grande Valley</td>
<td>135</td>
<td>0</td>
<td>36</td>
<td>46</td>
</tr>
<tr>
<td>University of Texas at Austin</td>
<td>14</td>
<td>0</td>
<td>5</td>
<td>7</td>
</tr>
<tr>
<td>Stephen F. Austin University</td>
<td>12</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>University of Texas at El Paso</td>
<td>39</td>
<td>0</td>
<td>15</td>
<td>8</td>
</tr>
<tr>
<td>TOTAL</td>
<td>453</td>
<td>11</td>
<td>112</td>
<td>169</td>
</tr>
</tbody>
</table>

**Recruitment**

DBS has forged productive, proactive working relationships with Texas universities that train rehabilitation professionals. The DBS CSPD Coordinator serves as a board member of the University of North Texas (UNT), which is a rehabilitation education advisory committee that meets yearly. The CSPD Coordinator made one recruiting trip to the University of Texas Pan American in Edinburg to acquaint students with DBS and career opportunities in public vocational rehabilitation. DBS campus involvement with Texas universities results in pre-service student requests for practicum and internship placement with DBS. Internships have been offered since 1999 for students completing master’s degrees in Rehabilitation Counseling or Rehabilitation. In fiscal year 2015, DBS hosted three paid internship students, 17 unpaid internship students, and one unpaid practicum student. Evaluations of student interns come directly from certified, licensed, or QVRC DBS internship supervisors and department advisors from the intern’s university.

Efforts to recruit personnel from minority backgrounds include preference for bilingual candidates who speak Spanish/English for positions located in areas with high Spanish-speaking populations. Opportunities to promote employment to all community sectors are achieved by sharing job postings with university interns.

DBS strives to ensure that the staff represents the diversity of the state and the consumers we serve. Ethnic distribution of DBS employees is:

- 50.85 percent Caucasian;
• 29.94 percent Hispanic;
• 17.70 percent African American; and
• 1.51 percent other (including Asian American and American Indian).

Approximately 7.24 percent of DBS employees have a reported blindness or visual impairment disability.

DARS Program Reporting and Analysis (PRA) calculates turnover by dividing the number of employee losses by the average number of employees for the reporting period and multiplying by 100 to determine the percent turnover. For the purpose of calculating the agency turnover, losses are counted only when an individual terminates employment with the agency. Losses do not include vacancies created as a result of employee promotions, reclassifications, demotions, or transfers within the agency. The overall DBS state fiscal year 2015 turnover rate was 8.75 percent, while the VRC and TC turnover rate was 4.49 percent.

Preparation
DARS has a system to recruit and hire individuals as VRCs who have master’s degrees in Rehabilitation Counseling. DARS maintains the QVRC database to monitor the number of counselors required to meet CSPD qualifications. Monitoring includes the number of counselors with master’s degrees in Rehabilitation Counseling or closely related fields, as well as the number who are Certified Rehabilitation Counselors (CRCs) or Licensed Professional Counselors (LPCs). As of September 29, 2014, there were 102 counselor positions required to meet the CSPD standard. Of those 102, 70 counselors met the standard and 24 had not yet met them; the other eight are vacant positions. A status report is provided to management on a quarterly basis.

Applicants who meet the CSPD standard for counselor positions are given preference for jobs. The hiring manager must obtain a transcript for any candidate for VRC and TC with a bachelor’s degree or higher prior to making a salary offer. For VRC/TC candidates with a master’s degree or a current CRC/LPC certificate, the manager must provide the transcript or license certificate for review to the CSPD Coordinator, who will verify whether the applicant meets the educational requirements or CSPD standard. This verification must be completed prior to the hiring manager making a salary offer.

If a candidate is hired who does not meet the CSPD standard, he or she must participate in the QVRC program and complete the required coursework within seven years after completing the initial training year. In the next 24 months, this policy will be reviewed, and any changes will be included in an upcoming plan modification.

VRCs/TCs are required to sign the DARS1362, Qualified Vocational Rehabilitation Counselor (QVRC) Acknowledgment form within 30 days of hire. By signing this required form, the VRC/TC agrees that in order to hold a counselor position they must meet the CSPD standard at the time of employment or by completing the educational requirements within the established CSPD timeline. VRCs/TCs not achieving the standard within the prescribed time are not
allowed to continue functioning in this capacity. DBS provides funding for master’s degrees in Rehabilitation Counseling if alternate funding sources are not available.

Growth and development for all levels of staff is essential. The DBS staff attend external trainings provided by such agencies as the American Association of Diabetes Educators, the Texas Association for Education and Rehabilitation of the Blind and Visually Impaired (TAER), the Association for Education and Rehabilitation of the Blind and Visually Impaired (AER), the Assistive Technology Industry Association (ATIA), the Council of State Administrators for Vocational Rehabilitation (CSAVR), the National Council of State Agencies for the Blind (NCSAB), and the University of Arkansas CURRENTS. Staff is encouraged to attend national, state, and local conferences related to vocational rehabilitation. In so doing, they have the opportunity to receive training as well as to network.

The DARS Center for Learning Management (CLM) collaborates with DBS to provide training to staff. Training needs and priorities are identified on an ongoing basis. The training provided during 2014–15 included such topics as diabetes, substance abuse, caseload management, employment assistance, basic worker’s compensation, criminal background checks, mental health first aid, counseling and adjustment to blindness, career choice counseling, autism, and self-employment. During the initial year, counselors attend internal training conducted by CLM and DBS subject matter experts to enhance skills and develop a basic understanding of policy and how to implement processes.

Mississippi State University (MSU) has a graduate certificate program for Vision Specialists in Vocational Rehabilitation. This program provides specialized training for VRCs/TCs from around the country. The program consists of four graduate courses designed to train VRCs/TCs to become more effective in their work with consumers who are blind or visually impaired. These increased professional skills enable graduates to help consumers with vision loss learn independent living skills and assist them in becoming employed. At the end of the program, they receive the Vision Specialist in Vocational Rehabilitation Certificate. In FY15 MSU provided a full stipend for one VRC to attend this program from January 2015 through August 2015.

Retention
The Texas legislature sets the state’s classification schedule, which determines pay grades for counselors and other classified positions as well as the salary schedule for the pay range agencies must use for compensation. Working within current classification and salary schedules, DARS has developed and implemented policies to recruit and retain a diverse workforce, including:

- optional work schedules and telework opportunities, if appropriate for the position;
- reimbursement to VRCs who meet CSPD requirements for one CRC application fee, one CRC exam fee, and in-state travel expenses to take the exam; and
- internal and external continuing education training opportunities so DBS staff members can maintain various certifications.

DBS is proactively working on capacity building and leadership development. The Executive Leadership Academy (ELA) and Aspiring Leaders Academy (ALA) are two developmental...
opportunities available to DARS DBS through the Health and Human Services (HHS) Leadership Development Program. The ELA is designed for high-potential employees who are one or two levels from senior or executive leadership. The nine-month program includes presentations, mentoring, shadowing, and an action learning project.

The ALA is intended for high-potential employees who are newer to their career or leadership development. They participate in the six-month program that provides an introduction to leadership, management, and the role of each agency in the enterprise. Three DBS employees graduated from ALA in December 2014 and one graduated in June 2015.

**Personnel Standards**

The State of Texas does not have a certification standard for rehabilitation counselors; DBS bases its new hiring and personnel development policies on academic preparation consistent with national requirements for CRCs. This includes, at a minimum, a course in Theories and Techniques of Counseling and a course in Medical or Psychosocial Aspects of Disabilities. DBS recognizes the LPCs as an acceptable alternate standard, because coursework required for this license also meets the educational requirements noted above.

DBS job vacancy notices identify a master’s degree in Rehabilitation Counseling with a minimum of a 600 clock-hour practicum supervised by a CRC as the preferred academic preparation for VRCs and TCs. When the applicant pool does not include anyone with this preparation, positions may be filled by applicants with a (in decreasing order of preference):

- master’s degree in Counseling, Education, Social Work, Psychology, or Sociology supplemented by one year rehabilitation experience working with people who are blind, visually impaired, or who have other disabilities;
- other master’s degree with two years of work experience as described above; and
- other bachelor’s degree in related human services field with equivalent combination of education, training, and experience plus the ability to meet the CRC eligibility requirements within seven years from completion of the initial training year of employment in a VRC position.

DBS has 102 positions required to meet CSPD standards. Currently, 70 VRCs/TCs meet the required academic standards. Of the 32 VRC positions not meeting academic standards:

- 14 are enrolled in graduate programs;
- 12 have not enrolled in a graduate program;
- 2 are within their first year of hire and are completing required core trainings before beginning graduate school; and
- 4 are vacant positions.

Candidates who do not meet academic standards are informed by the hiring manager prior to making a salary offer that they have seven years to meet the standards following completion of the initial training year. Candidates for VR Coordinator positions must meet the CSPD standard to be eligible for job postings. DBS has encouraged but has not required counselors to obtain CRC certification, though 15 are presently certified as CRC, three hold LPC certifications, and
one has both a CRC and LPC.

The In-Service Training Grant funded by the Rehabilitation Services Administration was reserved for training staff members to meet the CSPD standard, providing succession training, and supporting DBS’ Texas Confidence Builders philosophy, Eye Medical Training, and other external training opportunities. Although the In-Service Training Grant expired on September 30, 2015, DARS will continue to fund these activities.

DBS employs other professional staff in full-time or contractual capacities, including physical therapists, occupational therapists, psychologists, psychiatrists, psychotherapists, and Orientation and Mobility Specialists who are required to have valid licenses from certifying bodies appropriate to their professions. DBS is 100 percent compliant in these areas.

Staff Development
DARS Division for Blind Services (DBS) is committed to ensuring that its diverse workforce is highly skilled, professionally trained, and thoroughly prepared to provide the highest quality service to Texans who are blind or visually impaired. Our training curriculum is designed to help staff gain a 21st century understanding of the evolving labor force and the needs of people with disabilities. DBS will provide training regarding WIOA and the amendments made to the Rehabilitation Act of 1973 and training with respect to the Americans with Disabilities Act, and a comprehensive system of personnel development under the Individuals with Disabilities Education Act.

All staff has access to internal and external training designed to develop knowledge and skills necessary to achieve success in their positions, provide developmental activities for new and emerging leaders, and enhance service delivery for consumers. Trainings are delivered via classroom, webinar, or teleconference.

Although VR counselor job descriptions are developed with the requirement for an applicant to have a master’s degree in Rehabilitation Counseling, Counseling, or closely-related fields as preferred academic preparations, in some parts of the state a scarcity of graduate-level applicants exists. It is essential to hire bachelor’s level counselors to ensure that services to consumers are not delayed. VRCs and TCs who do not meet academic standards at the time of hiring have seven years from completion of their initial training year period in which to comply. DBS finances graduate degrees in Rehabilitation Counseling if alternate funding sources are not available.

Orientation to Rehabilitation and Blindness training is a one-week program attended by all newly hired DBS staff members, except for part-time employees. Participants develop an awareness of the nature of blindness and the impact it has on all aspects of a person’s life.

Introduction to Blindness training is a two-week program that introduces participants to the nonvisual blindfold training strategy. Under blindfold, staff members experience the key emotional factors and learn alternative techniques in the adjustment to blindness process,
discovering that blindness does not preclude an individual from living an independent and successful life.

Immersion Training is a four-to-six week program. Application of the Texas Confidence Builder philosophy, using the least restrictive adaptation model, structured discovery, problem-solving, and adult learning theory includes techniques to facilitate emotional adjustment to blindness. The Orientation and Mobility portion of Immersion Training allows for individualized training and opportunity for immediate feedback.

Eye Medical is a three-day training designed to provide staff members with a basic understanding of the anatomy of the eye, to familiarize them with pathological conditions causing vision loss, and to develop a referential body of knowledge related to diagnostics, treatment, training, and long-term vocational implications.

The staff is encouraged to be aware of current research by using the Internet Resources link available through the DBS intranet site. Information disseminated by the National Institute on Disability and Rehabilitation Research (NIDRR) and a variety of other government and university research centers can be reached from this link. DBS works closely with the Mississippi State University Research and Training (R&T) Center on Blindness and Low Vision and other R&T centers to stay current in the field of blindness. Many DBS staff members are leaders or active members of the Association of Education and Rehabilitation of the Blind and Visually Impaired (AER). The staff is active in the Texas Rehabilitation Action Network (TRAN) and has presented educational programs to familiarize participants with blindness-related issues.

ReHabWorks (RHW) is an automated statewide caseload management system that serves DBS and DRS. Five staff members were chosen to test RHW regularly to ensure functionality of the system and that the rehabilitation process continues to be properly followed. This group also assists in developing training materials.

Training plans for new employees foster competencies in skills required for different job categories. Structured on-the-job trainings supervised by experienced colleagues are common to all positions; CLM provides or coordinates more formal, extensive trainings for caseload carrying staff. A three-year Individual Training Plan (ITP) is developed for all VR and TCs, normally within two weeks of hiring.

During the first year of employment, almost seven nonconsecutive weeks of mandatory training provide counselors with critical information about processes and procedures, medical issues surrounding blindness, and employment assistance strategies. In the second and third years, counselors receive training in skills needed to facilitate consumer career choice and decision-making as well as counseling techniques to help consumers adjust to blindness.

Many of the courses in the master’s of Rehabilitation Counseling degree provide opportunities for practical application on actual caseloads. Counselors and other staff learn about assistive
technology (AT), including screen readers, braille devices, closed circuit televisions, portable note takers, etc., as part of the intensive Employment Assistance Training program. VR Teachers (VRTs) are provided with a three-year ITP that includes:

- four weeks wearing a blindfold at the CCRC participating in classes with consumers;
- three weeks of training in teaching, process, and procedures and employment assistance training for VRTs;
- extensive braille training. All VRTs must demonstrate competency annually by completing The Annual Braille Project and submitting it for review by the VRT Program Specialist; and
- training transcripts, letters of recommendation from a certified VRT, and funding to help interested teachers become Academy-certified.

CLM offers ongoing training for all DBS employees through the annual training calendar or through use of vendors. CLM provides a wide array of courses on blindness-specific topics, such as Eye Medical Training and Counseling/Adjusting with Blindness. While many courses are mandatory for caseload carrying staff, all other employees may request to participate.

All staff members participate with their supervisors in planning annual goals and identifying training needs and goals in their Employee Performance Plans. These processes, combined with input received from DBS managers and administrators, serve as needs assessments that determine annual training calendar offerings.

Below is a summary of the TACE 6 CURRENTS sponsored assessment compiled for DARS, which identifies the various level of training needs of DBS’ counselors and management.

**Summary of Region Training Needs Survey—DBS for 2014 and 2015**

**Demographics:** All positions, statewide

Respondents: 266 employees

Training Needs Identified: The following are the top five training needs as well as the specific issues that were identified in the survey:

- Specific Disabilities: Blindness and Vision Impairments, Traumatic Brain Injury and other Brain Injuries, Hearing Loss and Deafness, and Psych Disorders
- Counseling: Individual Counseling, Mental Health Counseling, Psychosocial and Cultural Issues in Counseling
- Foundations Question: Managing Time & Priorities; Medical, Functional, and Environmental Aspects of Disabilities; Problem-Solving Skills; and Technology Skills
- Leadership and Management: Leadership development at all levels and Building the VR team
- Employment Outcomes: Job Development and Business Development

Tenure:

Time in Position: 13.5 percent of DBS staff members have been in their position for less than a
year, 34.2 percent for 1 to 5 years, 18.1 percent for 5 to 10 years, and 34.2 percent for more than 10 years.

Time in Agency: DBS employees who have been with the agency for more than 10 years make up the largest percentage, at 43.7 percent; those who have been with the agency between 5 to 10 years is 21.5 percent; 1 to 5 years is 24.1 percent, and less than one year is 10.7 percent.

Specialty Areas: In correlation with the job categories addressed, 128 respondents (48.7 percent) considered themselves to be working in a “Specialty Area.” This is consistent with the number of VRC/TC, VR Teacher, Orientation and Mobility Instructor, and EAS employees who completed the survey.

Certification and Licenses:

Sixty (26.4 percent) of the respondents must maintain certification in the following:
- CRC: 30 respondents (50 percent)
- Social Work–Related: five respondents (8.3 percent)
- LPC: 11 respondents (18.3 percent)
- Braille Transcription: one respondent (1.7 percent)
- Certified Orientation & Mobility Specialist (COMS): 10 respondents (16.70 percent)
- National Orientation and Mobility Certification (NOMC): one respondent (1.70 percent)
- Certified Vision Rehabilitation Therapist (CVRT): two respondents (3.30 percent)

DBS meets adaptive communication needs. For example, with the Limited English Proficiency (LEP) Language Line, staff members can establish communication with consumers in numerous languages, including those commonly found in Texas.

Many consumers and staff members who are blind or visually impaired need alternate formats for printed communications. A full-time employee in the DBS Braille Unit prepares documents in braille, large print, or electronic format. Dedicated computers with braille translation software and braille embossers are available in each field office. Staff uses these to produce documents, such as letters, to consumers or meeting agendas.

DBS employs Assistive Technology (AT) specialists to support staff using assistive programs with standard agency software to complete their job duties. The AT specialist assesses staff skill levels, recommends and implements training approaches, and coordinates service delivery statewide.

Accessibility Specialists from the Center for Policy and External Relations (CPER) test the accessibility of internal electronic forms, propose training software, work closely with caseload management system developers, assist vendors to ensure that electronic educational options are equally accessible to all staff, and play a crucial role in testing accessibility within the Health and Human Services system.
In areas of Texas where a high percentage of the population speaks only Spanish, hiring preference is given to candidates who are bilingual in Spanish and English. Many employees in El Paso, Harlingen, Laredo, McAllen, and Corpus Christi offices are bilingual.

The Deafblind Unit serves consumers who are deafblind. Specialists fluent in sign language consult with caseload carrying staff, consumers, and community resources to develop and implement plans and services. DBS also purchases state-certified interpreter services as needed.

DBS works closely with the education system through the Transition Program. Transition counselors participate in training covering the Admission, Review, and Dismissal (ARD) process as well as the Individualized Education Plan (IEP). When conducting seminars/workshops for the ARD and IEP process, trainers may also include parents and professionals from:

- TEA’s Special Education Division;
- Regional ESCs and LEAs;
- Disability Rights Texas;
- Partners Resource Network, Inc.; and
- TSBVI.

Additionally, DBS staff participates in cross-trainings with other entities involved in education for students with visual loss, such as the Texas Association for Education and Rehabilitation of the Blind and Visually Impaired (TAER), and sponsors and participates in workshops and seminars to help education staff members develop expertise in working with these students.

**Section 10: Statewide Assessment**

The Rehabilitation Act of 1973 (the Act) calls for periodic comprehensive statewide needs assessments to be conducted jointly by each state’s VR agency and state rehabilitation council to inform the VR State Plan. The Act requires certain areas be addressed by the needs assessment. In addition to the overall need for rehabilitation services in the state, the assessment must address several VR populations and services, such as:

- individuals with the most significant disabilities, including those in need of supported employment;
- unserved and underserved individuals, including minorities;
- individuals served by other parts of the statewide workforce investment employment system; and
- establishment, development, or improvement of Community Rehabilitation Programs (CRP).

DBS, DRS, and RCT collaborated with the Child and Family Research Institute of the University of Texas School of Social Work to conduct a comprehensive statewide needs assessment (CSNA) to learn more about VR needs in Texas. The information gathered will allow DARS to plan for the expansion and improvement of VR services throughout Texas. The DARS CSNA is conducted every three years. The next CSNA is due in 2017.

Development of the next CSNA has begun with an ongoing data collection and assessment.
process that will result in the 2017 report. DBS and DRS are continuing their collaboration with the Child and Family Research Institute of the University of Texas School of Social Work and RCT to accomplish a more robust and effective assessment of the needs of Texans with disabilities. In response to WIOA’s focus on students and youth with disabilities and pre-employment transition services (Pre-ETS), the current data collection focuses on the needs of those consumers. In addition to the methodology used in the 2014 CSNA, data collection for the 2017 CSNA includes surveys and/or focus groups throughout the state with staff, students and youth with disabilities, families, TEA representatives, homeschool networks, and other stakeholders.

Current (2014) Comprehensive Statewide Needs Assessment
Methodology

These activities were completed as part of the current CSNA:
• consumer satisfaction review;
• consumer data analysis;
• stakeholder input review; and
• staff survey.

Consumer Satisfaction Review
The consumer satisfaction survey for fiscal year 2013 was reviewed as part of the assessment. There were 1,025 responses. Ninety two percent of VR consumers were satisfied with their services. This survey was conducted via phone.

Consumer Data Analysis
National- and state-level data were taken from the 2008–2012 American Community Survey (ACS) 5-year Public Use Microdata sample. The ACS is an annual survey conducted by the U.S. Census Bureau that collects household level information about demographics and social, economic, and housing related topics. This data was used to determine the overall profile of the Texas population. This profile was compared to the profile of individuals served by DBS. Factors reviewed included age, ethnic composition, and metropolitan/nonmetropolitan residential status compared to those deemed eligible by DBS in FFY’13.

Stakeholder Input Review
RCT, DBS, and DRS conducted nine public meetings to gather public input on the VR service needs of people with disabilities, and analyze the need to establish, develop, or improve CRPs across the state. The public meetings were held in the following locations.
• Dallas, October 16, 2013
• San Antonio, October 24, 2013
• Houston, October 24, 2013
• Beaumont, October 29, 2013
• Laredo, October 29, 2013
• Austin, October 30, 2013
RCT, DBS, and DRS representatives attended all meetings. Information gathered from the public meetings, including comments submitted electronically, and comments and recommendations from the RCT and advocacy groups, were considered as part of the analysis.

Staff Survey
An online survey was distributed to DBS staff via DARS supervisors and administrators. Reminder e-mails were sent to encourage staff to complete the survey. After the survey had been distributed, it was discovered that screen reader users were not able to access the survey. Participants who had any issues with accessibility were asked to call the research team to complete the survey by phone. The survey was completed by 150 DBS employees. The survey asked for basic demographic information, the frequency with which consumer needs are met, barriers to employment, internal barriers to working with consumers, and the importance of various services for consumers. Descriptive statistics were produced for the report.

DBS staff identified the following barriers to serving DBS consumers:
- lack of available jobs;
- lack of community services;
- increase in the numbers of consumers with multiple disabilities;
- lack of quality relationships with potential employers;
- lack of quality relationships with agencies that work with consumers;
- lack of financial resources available to assist consumers; and
- limited information shared by those working with consumers.

Identified Barriers to Service
The CSNA identified barriers to serving DBS consumers in the following areas:
- community services;
- financial resources;
- employment services; and
- consumers with multiple disabilities.

Lack of Community Services
Potential service providers are unaware of the needs of DBS consumers.

Mitigation Strategies
Over the years DBS has implemented various strategies to increase public awareness of services provided to help persons who are blind retain or attain employment. DBS makes presentations to inform CRPs of the needs of DBS consumers, maintains relationships with consumer and advocacy organizations, and contacts the local medical community, specifically ophthalmologists and local mental health providers, to ensure individuals who are blind or visually impaired are informed about VR services.
The DBS staff has also established relationships with businesses to help consumers locate or maintain employment. DBS will continue with outreach to employers to address attitudes and perceptions, improve relationships between DARS and potential employers, and develop opportunities for self-employment.

Lack of Financial Resources
Some barriers, such as housing and transportation costs, may be outside the scope of DARS, but are significant barriers for those obtaining and maintaining employment. Knowledge of public benefits and how those benefits can be used to assist with employment is also noted as a barrier.

Mitigation Strategies
DBS will continue to seek financial resources to assist consumers. DBS policy allows VR counselors to purchase transportation services related to their rehabilitation program. DBS staff around the state participates in public transportation Health and Human Service Regional Coordination Forums to advocate for system improvements.

DBS began providing training to VR staff on benefits planning in 2013, joining DRS’ (SSA) benefits training initiative. Staff is being trained in how to obtain Social Security benefits queries as well as how to use the information to assist consumers in achieving employment goals.

Employment Services
In general, there are a lack of available jobs and services for individuals who are blind or significantly visually impaired.

Mitigation Strategies
DARS entered into a memorandum of understanding (MOU) that includes all state agencies involved in the workforce system. The MOU is to ensure that the workforce system operates effectively and efficiently for all persons needing employment services, including those with disabilities. These agreements address issues related to effective working partnerships. One key issue addressed is accessibility; the intended result is that individuals with disabilities have increased opportunities related to employment services and, ultimately, jobs.

Additionally, a DBS staff person has been assigned liaison responsibilities with each of the 28 Workforce Development Boards (WDB). Responsibilities include:
- informing the WDB and TWC Workforce Solutions Offices about VR services and eligibility criteria;
- processing referrals from TWC Workforce Solutions Offices;
- referring to TWC Workforce Solutions Offices’ customers who can benefit from the employment services they provide;
- providing technical assistance to boards regarding assistive technology; and
- providing disability awareness presentations, including blindness training, to TWC Workforce Solutions Offices staff.
DBS has established relationships with staff that perform Disability Navigator duties in most of the local workforce areas. DBS will continue to establish quality business relationships to assist in creating employment opportunities for persons who are blind or visually impaired.

Services for Consumers Who Are Blind and Have Significant Secondary Disabilities and/or Attendant Factors

More individuals who are blind with significant secondary disabilities or attendant factors could benefit from access to functional assessments and trial work experiences to assist with eligibility determination and ongoing training and service provision to prepare for employment.

Mitigation Strategies
DBS will work with current CRP providers of employment services to identify if work trial experiences can be developed across the state.

DBS VR counselors are provided training and support on how to work more effectively with consumers with significant secondary disabilities and attendant factors. DBS will build on the current training and support in order to further increase counselor capacity to effectively serve consumers with significant disabilities and attendant factors. DBS continues to partner with DRS statewide to coordinate service provision for consumers with serious secondary disabilities.

Conclusion
DBS conducted a CSNA jointly with RCT to determine the need to establish, develop, or improve CRP providers within the state, as well as the VR needs of individuals who are blind or significantly visually impaired residing in Texas, particularly the VR service needs of individuals with:

- the most significant disabilities, including their need for supported employment services; and
- disabilities served through other components of the statewide workforce investment system.

Assessment results indicate:

- more individuals with the most significant disabilities could benefit from trial work experiences and situational assessments;
- a need for increased public awareness of VR services available to persons who are blind or significantly visually impaired;
- services for individuals who are unserved or underserved continues to be an issue and could benefit from more community outreach; and
- individuals who are blind or significantly visually impaired could benefit from continued, closer collaboration between the VR program and other components of the statewide workforce system.
**Section 11: Annual Estimates**

DBS, after experiencing a slight decrease in individuals applying for VR services between 2011 and 2013, is seeing a slight increase in applications as of 2015 (see Table 1).

**Table 1: Individuals Applying for DBS VR Services (FFY 2011–2015)**

<table>
<thead>
<tr>
<th>Federal Fiscal Year</th>
<th>Number of Applications</th>
<th>Percent Change From Prior Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>2011</td>
<td>3,374</td>
<td></td>
</tr>
<tr>
<td>2012</td>
<td>3,324</td>
<td>(1.48)</td>
</tr>
<tr>
<td>2013</td>
<td>3,071</td>
<td>(7.61)</td>
</tr>
<tr>
<td>2014</td>
<td>3,215</td>
<td>4.69</td>
</tr>
<tr>
<td>2015</td>
<td>3,089</td>
<td>(3.92)</td>
</tr>
</tbody>
</table>

DBS expects applications will increase in FFY 2017–2018. Each field office is currently implementing outreach plans that will increase referrals by identifying individuals who need VR services. This anticipated increase in applications will also result from planned activities designed to partner with community organizations serving individuals with disabilities, as well as participation in statewide initiatives focusing on underserved populations and veterans.

**Eligibility Determinations**

Identify the number of eligible individuals who will receive services provided with funds under:

- Part B of Title I;
- Part B of Title VI; and
- Each priority category, if under an order of selection.

The number of eligibility determinations for the past three years are found in Table 2.
Table 2: Eligibility Determinations for DBS VR Services (FFY 2011–2015)

<table>
<thead>
<tr>
<th>Federal Fiscal Year</th>
<th>Number of Eligibility Determinations</th>
<th>Percent Change From Prior Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>2011</td>
<td>2,257</td>
<td></td>
</tr>
<tr>
<td>2012</td>
<td>2,223</td>
<td>(1.51)</td>
</tr>
<tr>
<td>2013</td>
<td>2,056</td>
<td>(7.51)</td>
</tr>
<tr>
<td>2014</td>
<td>2,249</td>
<td>9.39</td>
</tr>
<tr>
<td>2015</td>
<td>2,154</td>
<td>(4.22)</td>
</tr>
</tbody>
</table>

DBS expects the number of eligibility determinations for VR services made in FFYs 2017–2018 to increase in the same proportion as applications.

Outreach activities will be conducted to broaden the population of individuals with disabilities being served by DBS. Collaboration with community partners and statewide initiatives will result in increased service provision to unserved and underserved individuals who are blind or visually impaired and have additional disabilities, or persons who are deafblind, and veterans.

Average Cost to Support Successful Rehabilitation
DBS does not anticipate a significant change in the average cost to support a successful rehabilitation. This average considers the total costs of a case from application to closure for successfully closed cases with an employment outcome during the Federal Fiscal Year.

The average cost to support a successful rehabilitation in DBS is listed in Table 3.

Table 3: Average Cost to Support a Successful Rehabilitation (FFY 2011–2015)

<table>
<thead>
<tr>
<th>Federal Fiscal Year</th>
<th>Average Cost to Support a Successful Rehabilitation</th>
<th>Percent Change From Prior Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>2011</td>
<td>$9,001</td>
<td></td>
</tr>
<tr>
<td>2012</td>
<td>$8,950</td>
<td>(.57)</td>
</tr>
<tr>
<td>2013</td>
<td>$9,153</td>
<td>2.27</td>
</tr>
<tr>
<td>2014</td>
<td>$8,795</td>
<td>(3.91)</td>
</tr>
<tr>
<td>2015</td>
<td>$9,344</td>
<td>6.24</td>
</tr>
</tbody>
</table>
DBS will continue to look at strategies to more effectively use its resources and serve the greatest number of eligible individuals possible by maximizing use of comparable services and benefits and partnering with community service providers.

Individualized Plan for Employment (IPE) Carry-Forward
DBS carried over 5,033 IPEs into FFY’15. This is an increase from FFY’14 of 1.60 percent. DBS expects this slight increasing trend to continue unless unanticipated caseload makeup changes occur. For instance, significant changes in the number or severity of disabilities an individual has could affect the number of cases carried forward. The average time an individual spends in the DBS VR program is about two years.

Table 4: Carried-over Individual Plans for Employment (FFY 2011–2015)

<table>
<thead>
<tr>
<th>Federal Fiscal Year</th>
<th>IPEs Carried Over From Prior Year</th>
<th>Percent Change From Prior Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>2011</td>
<td>4,881</td>
<td></td>
</tr>
<tr>
<td>2012</td>
<td>4,956</td>
<td>1.54</td>
</tr>
<tr>
<td>2013</td>
<td>4,917</td>
<td>(0.79)</td>
</tr>
<tr>
<td>2014</td>
<td>4,954</td>
<td>0.75</td>
</tr>
<tr>
<td>2015</td>
<td>5,033</td>
<td>1.60</td>
</tr>
</tbody>
</table>

Estimated Cost of Services
DBS estimates for FFY 2017–2018 for the number of individuals in Texas who are blind or significantly visually impaired and eligible for VR services under Part B of Title I and Part B of Title VI are found in Table 5. These estimates are based on a number of factors, including:
- a review of the number of individuals applying for VR services in previous years; and
- a review of the number of eligible individuals served in previous years:
  - the anticipated population growth in Texas; and
  - other variables that may impact the number of eligible individuals in the state.

Table 5: Estimated Caseloads and Costs (FFY 2017–2018)

<table>
<thead>
<tr>
<th>Category</th>
<th>Federal Fiscal Year</th>
<th>Estimated Number to be Served</th>
<th>Average Cost of Services</th>
<th>Estimated Total Funds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vocational Rehabilitation – Title I</td>
<td>2017</td>
<td>7,446</td>
<td>$6,611</td>
<td>$49,226,285</td>
</tr>
<tr>
<td></td>
<td>2018</td>
<td>7,446</td>
<td>$6,611</td>
<td>$49,226,285</td>
</tr>
<tr>
<td>Supported Employment – Title VI</td>
<td>2017</td>
<td>360</td>
<td>$934</td>
<td>$357,735</td>
</tr>
<tr>
<td></td>
<td>2018</td>
<td>360</td>
<td>$974</td>
<td>$357,735</td>
</tr>
</tbody>
</table>
Assuming current trends continue, DBS believes there are funds available to serve all individuals currently eligible for DBS VR services and individuals in plan status. DBS anticipates having the necessary funds to cover the cost of expected eligibility determinations and postemployment services.

Please note that there are a number of factors which could change the DBS estimates. Some of these include:
• further guidance regarding implementation of WIOA once the final regulations are published;
• changes in federal and state appropriations; and
• implementation of new state statutes.

Should information become available about the impacts of these changes on VR programs administered by DBS, projections will be updated.

Section 12: State Goals and Priorities

DBS and RCT have collaborated to establish goals and priorities to advance the continued provision of high-quality VR services to eligible consumers. DBS and RCT agree that the following priorities are critical to the successful accomplishment of these goals:
• Enhance the quality and scope of services through appropriate coordination with other agencies and organizations; and
• Maximize the funding for the program by identifying and using available comparable services and benefits.

Information obtained from the following sources was used to establish the DBS goals and priorities:
• WIOA and the April 2015 Notice of Proposed Rulemaking;
• The Comprehensive Statewide Needs Assessment (CSNA) completed in May 2014;
• The internal and external assessments conducted by DARS for the Texas Health and Human Services System Strategic Plan 2015–2019;
• DBS performance on Rehabilitation Services Administration (RSA) Evaluation Standards and Performance Indicators; and
• Input from consumers, advocacy organizations, and providers.

Following are DBS goals and priorities for Federal Fiscal Years (FFY) 2017–2020.

Goal 1: Provide VR services that result in individuals who are blind or significantly visually impaired achieving competitive integrated employment outcomes.

Goal 2: Effectively provide VR services for individuals from minority backgrounds who are blind or significantly visually impaired and ensure they are satisfied with the services provided.
**Goal 3:** Provide a consumer service delivery system that makes information available for the consumer to consider regarding options for services, providers, careers, and other areas to (1) enable informed consumer choice and (2) deliver quality and timely services.

**Goal 4:** Increase access to and provide effective and quality-based supported employment services to youth and other individuals with the most significant disabilities who require extended supports in order to achieve and maintain an employment outcome.

**Goal 5:** Expand and improve VR services to include pre-employment transition services for students with disabilities who are transitioning from high school to postsecondary education and/or employment, and improve coordination with state and local secondary and postsecondary educational entities.

**Goal 6:** Enhance strategies and coordination to develop and maintain business relationships that result in competitive integrated employment outcomes for VR consumers.

The DBS strategies to achieve these goals, and the measures for determining progress toward each goal, are described in the section titled, State Strategies and Use of Title I Funds for Innovation and Expansion Activities.

**Section 13: Order of Selection**

DBS is not implementing an Order of Selection.

**Section 14: Goals and Plans for Distribution of Title VI Funds**

DBS provides supported employment services collaboratively with DRS for consumers with the most significant disabilities with funds received under Title VI, Part B §622 of the Rehabilitation Act of 1973, as amended.

VR consumers with the most significant disabilities may have multiple disabilities or functional limitations, in addition to blindness, that result in the requirement for extended support services in order to retain community integrated employment.

**Goals**

DBS considers competitive employment to be the primary objective when assisting consumers with the most significant disabilities. The goal for distribution of Title VI, Part B funds is to provide supported employment services that result in a competitive employment outcome for consumers who require supported employment.

Providers of supported employment services and supported self-employment services receive payment for providing services to eligible consumers when specific outcome benchmarks have been achieved.
Goal: Maintain the number of consumers receiving supported employment services within their home communities.

Measure: At least 50 percent of supported employment funds will be used for youth with the most significant disabilities.

Measure: Fifty percent or greater of consumers exiting the VR program after receiving supported employment services will achieve an employment outcome after 90 days on the job.

Goal: Increase the number of consumers receiving supported employment services who achieve employment outcomes.

Strategy: Continue expanding the availability of supported employment services statewide through collaborative efforts with the DRS in sharing supported employment service providers already contracted with DRS.

Measure: The number of providers available to provide supported employment services will be increased by 10 percent statewide during FFY 2017. As of the end of FFY 2015, there were 29 supported employment service providers working with DBS consumers statewide.

Consistent with prior years, Title VI, Part B funds will be used primarily to purchase supported employment services for individual consumers on a statewide basis. As WIOA requires, DBS will not use more than 2.5 percent of its supported employment funds to pay for administrative costs.

Funding
Title VI, Part B and/or 110 funding is available statewide to VR counselors to serve Texans with the most significant disabilities. Services leading to supported employment are integrated into the VR service delivery system. At case closure (or at the conclusion of any time-limited, post-employment services), the services paid for by the Title VI, Part B and/or 110 funds are terminated.

Title I funds are used to provide services leading to supported employment when Title VI, Part B funds are not available. This creates an opportunity for more consumers with the most significant disabilities to have access to supported employment services.

Section 15: State’s Strategies

Technology
Computer assistive technology services and assistive technology devices are provided for consumers at each stage of the rehabilitation process. DBS works with organizations across the
state to ensure that the agency meets the assistive technology needs of VR consumers, including supporting Pre-ETS for students with disabilities. These organizations include:

- contracted assistive technology evaluation sites across the state, and
- the DBS Assistive Technology Unit.

Contract providers are required to complete a thorough testing program to ensure they meet minimal standards of proficiency to become approved assistive technology providers. DBS coordinates with other DARS programs when assistive technologies are needed that are not vision related. DBS also uses programs such as Computer/Electronics Accommodations Program (CAP) when a consumer is interested in employment with the federal government, Specialized Telecommunications Assistance Program (STAP) to obtain telecommunication devices, and various assistive technology programs for the deaf and hard of hearing.

Strategies:

- DBS staff with expertise in computer assistive technology services and devices:
  - assess specific consumer needs;
  - train consumers to use computer technology devices; and
  - perform job-site evaluations.
- DBS staff located throughout the state in regional field offices ensure services are available statewide.
- DBS contracted providers around the state train consumers to use various technologies. Systems have been developed to ensure computer assistive technology services and devices are provided in a timely fashion.
- DBS’ 30 VR Teachers (VRTs) and 13 Rehabilitation Assistants across the state provide basic computer technology assessments and computer and keyboarding training. Most of the assessments and training take place in the field offices. Each VRT has been issued a net book that may be loaned to a consumer who lives in a rural area to assist the consumer in practicing computer skills; in these cases the computer training takes place in the consumer’s home. All new VRTs are trained as tech screeners and it is anticipated that by the end of FFY 2015 there will be 35 VRTs who are also tech screeners.

Pending Measure: DBS staff will provide computer assistive technology services to 1,100 consumers in FFY 2015.

Outreach to Minorities with Disabilities
To address a Texas Sunset Advisory Commission recommendation and to enhance customer service, DBS and DRS have jointly published guidelines to better serve all consumers, including those with multiple disabilities, so that regardless of which division office the consumer contacts or walks into, access to services will be seamless to the consumer.

Each DBS region engages in numerous programs and activities that are designed to inform and make available VR and supported employment services to minorities and those who have the most significant disabilities. Some examples of these activities include:

- consumers have access to the Language Line as a resource for those who are not fluent in
English;
- DBS actively recruits Spanish-speaking rehabilitation counselors to better serve the Hispanic population;
- counselors and managers develop relationships with local referral sources that serve individuals who are minorities who have the most significant disabilities; and
- DBS works to provide eye exams to the Hispanic community in south Texas.

Diabetes Program
According to the Texas Diabetes Institute report from November 2010, *Responding to the Epidemic: Strategies for Improving Diabetes Care in Texas*: “Type 2 diabetes is preventable, but annual incidence rates continue to grow, and the associated costs of treating diabetes and its complications represent a significant threat to the financial solvency of the Texas public and private health infrastructure. The reach, impact, and diabetes-associated costs to the State of Texas, its taxpayers and those suffering from the disease must be addressed. The State Demographer projects a quadrupling of the number of adult Texans with diabetes from approximately 2.2 million in 2010 to almost 8 million by 2040.” This is an increase of 259 percent.

Diabetes is considered a disability under the Americans with Disabilities Act. The functional and vocational implications of diabetes and the complication of diabetes should be addressed in the rehabilitation process. Reasonable accommodations for diabetes and/or its complications are generally simple and low cost. Rehabilitation professionals, diabetes educators, and businesses need education on these adaptations to ensure consumers remain successfully employed while living with this chronic disease.

Diabetes education for individuals with visual impairments requires health education materials in a variety of accessible formats. Daily self-care is vital for successful diabetes management, and consumers must be the experts in their diabetes.

The literature is clear that registered nurse education programs do not include significant information about people with disabilities or how to promote the health, well-being, and autonomy of individuals with disabilities (Competencies for Nurses and Nurse Practitioners, Caring for People with Disabilities, Villanova University). Training individuals with visual impairments is uncommon among healthcare professionals. Practitioners may be accustomed to treating the clinical issues surrounding the consumer’s diabetes and/or disability, but they are often not accustomed to the techniques and adaptive tools available for self-management. People with vision impairments have unique learning needs, which should be considered in order for the diabetes education to be most effective. Diabetes education providers need sensitivity training along with practical teaching techniques and tools when working with consumers with visual impairments.

**Strategies:**
- Diabetes services will deliver training on the impact of diabetes on businesses and other current issues on disabilities and the complications of diabetes.
• Diabetes services will address the functional and vocational implications of diabetes and its complications through internal training of DARS staff and of diabetes educators via the Texas Confidence Builder training.
• Diabetes services will develop innovative ways to educate providers of diabetes education on the abilities of individuals who are blind to self-manage their diabetes, the adaptive techniques, equipment and supplies, and the challenges of managing diabetes at work. Additionally, provider education will include teaching tactics and approaches that are effective when working with individuals who are blind.

**Measure 1:** Diabetes services will provide training on the impact of diabetes to 100 rehabilitation professionals.

**Measure 2:** Diabetes services will provide training to 30 health care professionals on blind services, diabetes, and teaching strategies.

**Outreach to Serve Individuals with Disabilities Who Have Been Unserved or Underserved by the VR Program**

In early 2014, DBS conducted an internal/external assessment and identified strategic priorities for inclusion in the DARS chapter of the 2015–2019 Health and Human Services Strategic Plan. The assessment identified certain underserved consumers, defined as individuals with a disability who are eligible to receive services from DBS, but who are not served as effectively as other DBS consumers. The assessment also resulted in identification of an unserved consumer population, defined as a segment of the population that DBS may not be serving in proportion to their incidence in the population. As a result, DBS developed the following strategic priorities and strategies.

**Strategy:**
DBS will initiate outreach and increase staff knowledge and skills in effective rehabilitation strategies for serving such consumers by:

• researching and implementing best practices in serving these consumers;
• building staff capacity and expertise to serve individuals who are blind and have additional disabilities (e.g., through the implementation of the Mental Health First Aid training, a full-day course that should be taken by all staff who have direct contact with consumers) or who are deafblind; and
• increasing coordination and developing new partnerships with other state and community organizations that serve individuals with developmental or intellectual impairments and mental health disorders, such as:
  ➢ mental health organizations, local authorities, and universities to develop resources, expand knowledge, and implement best practices;
  ➢ HHSC Office of Mental Health coordination to identify and implement best practices, potential community partners, and facilitate service coordination; and
  ➢ Helen Keller National Center for deafblind youths and adults.

DBS has an MOA with the Department of Veterans Affairs (VA). Veterans who are blind or
visually impaired were identified as a consumer group whose needs are complex and potentially underserved.

**Strategy:**
To better serve veterans, DBS will:
- partner with DRS to increase outreach and provision of VR services to veterans and improve coordination with other federal and state entities providing veterans service;
- work with DRS to expand the Veterans Think Tank, which consists of internal and external subject matter experts for the purpose of sharing knowledge, resources, and strategies to more efficiently and effectively coordinate services and case management activities;
- evaluate policies, procedures, and rules to provide seamless and efficient access to services for veterans with disabilities who are not eligible to receive services from the VA’s VR and Employment (VRE) programs;
- enhance coordination with other entities serving veterans with disabilities, including agencies within the Texas Health and Human Services system, to help veterans more easily navigate available programs and services; and
- increase collaboration with veteran stakeholder organizations and service providers.

A critical shortage of Orientation and Mobility (O&M) instructors exists nationwide as well as statewide. DBS collaborates with the two Texas universities offering a specialized degree in O&M training to provide internship programs that promote university graduation and to facilitate the pursuit of national certifications. Additionally, DBS staff members are trained to provide basic O&M skills for consumers. Finally, O&M vendors are trained to integrate confidence building and structured discovery learning into their established curricula as a means of ensuring that consumers completing the program are independent and confident.

**Strategy:**
Design and implement training opportunities for O&M vendors to improve established O&M services to Texans who are blind.

**Measures:**
- Train 20 people through the Texas Confidence Builders in O&M vendor training
- Host up to four O&M internships at the Criss Cole Rehabilitation Center (CCRC)

DBS staff work with a network of CRPs across the state and operate an outcome-based payment system for supported employment and job placement services. DBS has implemented initiatives to increase the competencies of CRP partners to enhance services to consumers with disabilities. As part of this initiative, DBS has implemented the following:
- DBS requires contracted CRPs to obtain training and credentialing to ensure that CRP job coaches, job skills trainers, job placement specialists, supported employment specialists, supported self-employment, and CRP directors who oversee those positions meet basic criteria to effectively deliver employment services. DBS will continue to evaluate CRP roles...
by determining and evaluating the need to change or modify CRP services based on the emerging needs of consumers and businesses.

- DBS uses work experience activities that allow consumers to participate in volunteering, internships, or temporary paid work. This service will allow consumers to gain soft and hard skills in areas of interest and determine if they want to pursue these skills in their longer placement gained through DBS. This service is also being used for trial work evaluations to provide accurate relevant information necessary to determine eligibility. DBS is continuing to research and add innovative programs to support the Workforce Innovation and Opportunity Act (WIOA) (Pre-ETS) requirements. These services will focus on allowing a consumer to prepare for their long-term employment placement.

- DBS will also continue to evaluate and enhance self-employment services. In 2015, DBS added an employment premium service to reward providers who maintain training and skills necessary to work with specific populations to increase successful outcomes.

**Strategies to Improve the Performance of the Evaluation Standards and Performance Indicators**

- DBS maintains a quality assurance process, and quality improvement program, to evaluate and monitor performance for state and federal performance measures and indicators.

- DBS will coordinate with TWC to collect, monitor, and evaluate data for the core measures, and develop strategies to address gaps in performance that are identified through routine reports, quarterly performance reports and through onsite budget and performance reviews, and the quality assurance program.

- DBS will reference labor market and career information and data available through TWC partners for the purpose of identifying target occupations, and placement and/or advancement opportunities for program participants.

- DBS will enhance collaboration with TWC partners and the 28 WDBs to increase DBS staff access to labor market and career information for program participants, including youth who are in the process of transitioning into the labor market.

- DBS will assess and identify staff training needs and opportunities to build competency and increase capacity to assist program participants with identification of an employment goal and development of the individualized plan for employment.

- DBS will implement training courses and develop new community partnerships to focus on postsecondary education as a means to increase employment in high-skill, high-wage occupations by increasing the number of consumers receiving postsecondary education and training.

DBS is involved with the statewide workforce investment system at the state and local levels. DBS works closely with the Texas Workforce Investment Council (TWIC), TWC, and other workforce partners to create and implement the strategic plan. DBS participates on the council’s Strategic Implementation and Technical Advisory Committee, which focuses on accomplishing activities listed in the strategic plan. DBS reports its performance related to several performance measures on an annual basis.
DBS has established a relationship with each WDB to address issues such as:

- referral of consumers from local Workforce Solutions Offices to DBS and from DBS to the Workforce Solutions Offices;
- services each organization provides; and
- cross-training for staff as appropriate.

DBS staff travel to local Workforce Solutions Offices to meet with consumers. DBS also provides blindness awareness training for staff of the local Workforce Solutions Offices. DBS accesses labor market information provided by Workforce Solutions Offices to improve staff knowledge of employment opportunities, which in turn has a positive effect on DBS consumer service provision and employment outcomes. DBS, in coordination with the DARS training department, uses the services of the TWC labor market economists, who provide information and direction regarding current and future employment trends to DBS staff to assist in career planning with consumers.

The plan for FFY 2017–2020 is to continue all of the above activities to maintain and continue to develop the relationships within the statewide workforce investment system.

**Agency Strategies for Achieving Goals and Priorities**
The following strategies will be used to assist in achieving FFY 2017–2020 goals:

- clear direction, training, and support have been and will continually be provided to VR staff to assist DBS in effectively serving consumers from all backgrounds and in achieving quality employment outcomes;
- outreach will be provided to assist in identifying supported employment service providers who are interested in working with DBS consumers;
- support and training has been provided with the changes in our standards and policy to align with WIOA and will continually be provided to supported employment service providers to assist them in providing quality services to DBS consumers; and
- a computerized consumer data system will be maintained to enable VR staff to manage and monitor services more effectively.

**Agency Strategies to Support Innovation and Expansion Activities**

- DBS will develop and implement strategies to increase consumer wages and improve employment outcomes, including expanding consumer employment opportunities and maximizing consumer potential and capabilities based on their job readiness.
- DBS will seek to expand opportunities for part-time, summer, and volunteer work experiences and exposure for consumers receiving transition services.

**Agency Strategies to Support Access to and Participation of Individuals with Disabilities in the VR and Supported Employment Services Programs**

- Training and support will be provided to VR staff regarding the use of assistive technology necessary for consumers to achieve employment outcomes.
- Recruitment and training will be provided to O&M vendors through ongoing partnerships.
with O&M university training programs.
- Diabetes services will provide training to staff and providers that focuses on the impact diabetes has on businesses.

DBS Strategies to Promote Access and the Participation of Individuals with the Most Significant Disabilities in the VR Program
- Review, research, and implement an improved benchmark system for the provision of specific supported employment services statewide and to align with WIOA.
- Explore complementary supported employment services for special populations including autism and mental health.
- DARS has developed a supported employment training and technical assistance model for DARS staff and providers.
- DARS has a partnership with University of North Texas to provide supported employment certification and continuing education to contracted providers of the service.
- DBS is working collaboratively with DADS and HHSC to develop long-term supports needed for supported employment consumers through the MOU guidelines.
- Develop services with contract providers that will meet the criteria for trial work experiences.

State Rehabilitation Council Support
RCT is the state rehabilitation council for DRS and DBS. RCT assists the agency in fulfilling the requirements of the federal Rehabilitation Act for the delivery of quality, consumer-responsive VR services. Its stated mission is: The RCT, partnering with DARS, advocates for Texans with disabilities in the VR process.

Funds are allocated for the operation of RCT to meet the goals and objectives set forth in the resource plan. RCT is a valued and active partner in the development of VR goals, priorities, and policies. RCT reviews, analyzes, and advises the agency about:
- performance related to eligibility;
- the extent, scope, and effectiveness of VR services; and
- functions performed by the agency.

RCT also reviews findings from annual consumer satisfaction surveys and assists with the DBS VR State Plan and the comprehensive statewide needs assessment.

Strategies to Improve the Performance Related to Identified Goal Areas:

Goal 1: Successful Employment Outcomes

DBS will provide VR services that result in individuals who are blind or significantly visually impaired achieving competitive integrated employment outcomes by:
- strengthening and expanding collaboration, outreach, and education with various partners to efficiently and effectively use existing resources;
- assessing business processes, policy, training, and organizational capacity on an ongoing
basis to make consistent improvements in employment outcomes;
- increasing employer knowledge and awareness regarding the benefits of hiring individuals with disabilities; and
- increasing consumer knowledge and awareness of DBS services and benefits offered to blind and visually impaired individuals to obtain, retain, or advance in employment.

Success will be measured by:
- an increase in the number of blind and visually impaired individuals served;
- an increase in the number of successful closures for blind and visually impaired individuals; and
- enhanced consumer satisfaction results received from the consumer satisfaction survey.

**Goal 2: Services to Minorities**

Effectively provide VR services for individuals from minority backgrounds who are blind or significantly visually impaired and ensure they are satisfied with the services provided by:
- promoting the use of the Language Line as a resource for those who are not fluent in English;
- actively recruiting rehabilitation counselors who are Spanish speaking to better serve the Hispanic population;
- strengthening and developing relationships with local referral sources that serve individuals who are minorities who have the most significant disabilities; and
- providing eye exams to Hispanic individuals in south Texas who lack other medical resources.

Success will be measured by an increase in the number of minorities served.

**Goal 3: Consumer Service Delivery System**

Provide a consumer service delivery system that makes information available for the consumer to consider regarding options for services, providers, careers, and other areas to (1) enable informed consumer choice and (2) deliver quality and timely services by:
- using a computerized consumer data system to enable VR staff to manage and monitor services more effectively;
- providing consumers with a list of service providers to allow for informed choice;
- sharing with consumers labor market, career information, and data identifying target occupations to assist with career planning; and
- strengthening relationships with postsecondary education providers to increase consumer employment in high-skill, high-wage occupations.

Success will be measured by:
- increase in the variety of service providers; and
- increase in wages for consumers.
Goal 4: Supported Employment Services
Increase access to and provide effective and quality-based supported employment services to youth and other individuals with the most significant disabilities who require extended supports in order to achieve and maintain an employment outcome. DBS will:

• provide assistance to identifying supported employment service providers who are interested in working with DBS consumers;
• provide continuous support and training to supported employment service providers to assist them in providing quality services to DBS consumers;
• work collaboratively with DADS and HHSC to develop long-term supports needed for supported employment consumers; and
• refer youth and adults with the most significant disabilities to supported employment services.

Success will be measured by:

• an increase in the number of supported employment providers;
• an increase in the number of youth and adults with the most significant disabilities receiving supported employment services; and
• an increase in the number of individuals with the most significant disabilities receiving extended support through HHSC.

Goal 5: Services to Students and Youth with Disabilities
DBS will expand and improve VR services for youth and students with disabilities who are transitioning from high school to life after high school, including postsecondary education and/or employment, and improve coordination with state and local secondary and postsecondary educational entities by:

• creating new and enhancing existing partnerships with local school districts to facilitate the coordination and provision of Pre-ETS to students with disabilities;
• expanding and increasing partnerships with state and local secondary and postsecondary educational institutions and organizations to facilitate the identification of best practices, leveraged resources, and improved coordination; and
• improving the delivery of effective supported employment services for youth with the most significant disabilities, including extended supports needed to achieve and maintain employment outcomes.

Methodologies

• DBS Transition Program Specialists will continue to meet weekly with their DRS counterparts to discuss issues and develop solutions related to Pre-ETS and supported employment services for youth with the most significant disabilities.
• Evaluate, revise, and develop policy, procedures, and staffing strategies to improve consistency and quality of Pre-ETS.
• Assess the best practices of other states, and implement as appropriate.
• Continue to work with DRS in Project HIRE and Project SEARCH, programs that assist students and youth with developmental disabilities to successfully transition to postsecondary
training and competitive, integrated employment, respectively.

- Develop and deliver a transition training module on best practices pertaining to provision of transition services, guidance and career exploration, postsecondary options, job readiness, and encouragement of consumer self-advocacy.
- Collaborate with TEA, ESCs, TWC, LEAs, and community and technical colleges to improve access and transition for students moving from secondary to postsecondary education and training.
- Develop additional work experience options such as part-time, summer, and volunteer work experiences and other work-based learning opportunities.

Success will be measured by:
- an increase in successful outcomes for students with disabilities and youth with disabilities;
- an increase in staff knowledge and skills to more effectively help students and youth with disabilities with transitioning to postsecondary life and achieving employment goals, particularly youth with disabilities who have the most significant disabilities;
- spending at least 15 percent of federal VR funding for Pre-ETS; and
- an increase in number of businesses and schools that have a demonstrated commitment and capacity to serve students through Pre-ETS services.

Goal 6: Business Relationships
DBS will enhance strategies and coordination to develop and maintain business relationships that result in competitive integrated employment outcomes for VR consumers by:

- developing and implementing agency-wide business strategies with a regional focus that creates a unified comprehensive approach to business development, including working with DRS on a new statewide joint Business Relations Team, the formation of regional Outreach Services and Coordination Teams, and the development and joint use of a new business database tracking tool;
- providing Employment Assistance Training to staff, to instruct on how to best contact and meet the needs of our business partners;
- identifying and accessing higher wage employment opportunities by aligning DBS/DRS business development activities and consumer service provisions to maximize high wage opportunities. This is the goal of the current DBS Work Matters project; and
- aligning counseling critical thinking processes around employment opportunities and data to engage consumers in defining their optimal vocational opportunities. During FFY 2015, DBS began a pilot project within the Austin Regional Office in an effort to begin initiating this particular strategy.

Success will be measured by:
- an increase of employers being served by DARS;
- an increase of successful employment outcomes for DBS consumers;
- a positive impact on consumer salaries by increasing weekly wages;
- maximizing consumer potential and capabilities based on their job readiness; and
- increasing job placement vendor effectiveness in matching consumer abilities with employment opportunities.
Section 16: Evaluation and Reports of Progress: VR and Supported Employment Goals

Goals and Priorities: Performance, Strategies and Impediments:
DBS reports the following progress toward achieving goals and priorities identified for FFY 2014.

**Goal 1:** Provide VR services that result in individuals who are blind or significantly visually impaired achieving a quality employment outcome.

**Standards and Indicators (S&I) Measure 1.1:** The number of employment outcomes (successful closures) achieved will exceed 1,409.
- Performance: DBS assisted 1,486 individuals in achieving an employment outcome in FFY 2015. (S&I Report)

In 2013, DBS started a new employment initiative called “Work Matters” that assists staff in obtaining higher wage jobs for consumers by focusing business development on areas of the labor market with higher wage jobs, primarily technology and skilled trades. This initiative places a heavy emphasis on working with federal contractors and state government, while maintaining efforts to engage private businesses.

A pilot program in the Austin region teaches a systematic decision-making process to staff, which includes tools to provide consumers with accurate labor market data and jobs in their geographic area. This process helps consumers make a decision using criteria set forth by the consumer based on data from several resources.

**S&I Measure 1.2:** Of the individuals exiting the VR program after receiving services, a minimum of 68.9 percent will have achieved an employment outcome.
- Performance: In 2015, 75.20 percent of the individuals exiting the DBS VR program after receiving services achieved an employment outcome. (S&I Report)

To maintain satisfactory performance on this indicator, DBS continues training and reinforcement of the appropriate use of 1) extended evaluation to serve consumers with the most significant disabilities and 2) a thorough comprehensive assessment before VR Counselors develop the individualized plan for employment. DARS is also developing additional tools for counselors to use during situational assessments to improve the information obtained to inform eligibility decisions.

**S&I Measure 1.3:** Of the individuals achieving an employment outcome, a minimum of 90 percent will be employed in competitive employment, self-employed, or managing a business through Business Enterprises of Texas (BET) and earning at least minimum wage.
- Performance: In FFY 2015, 87.39 percent of the individuals who achieved an
employment outcome were competitively employed, self-employed, or managing a business through BET. (S&I Report)

DBS has consistently exceeded the RSA performance expectation of 35.40 percent for this indicator. The DSU was not able to meet the higher internal expectation of 90 percent.

**S&I Measure 1.4:** Of the individuals achieving an employment outcome and earning at least minimum wage, 89 percent will be individuals with significant disabilities.
- Performance: In FFY 2015, 91.78 percent of the individuals who achieved an employment outcome were competitively employed, self-employed, or managing a business through BET. (S&I Report)

DBS has consistently exceeded the performance expectation for this indicator.

**S&I Measure 1.5:** Of the individuals achieving an employment outcome, the average hourly earnings when compared to the state’s average hourly earnings will equal or exceed a ratio of 0.59.
- Performance: DBS achieved a ratio of 0.538\(^1\). In FFY 2015 DBS consumers earned an average of $13.85 per hour. (S&I Report)

To address performance on wages and closures, DBS focused on improving employment outcomes and consumer wages by expanding consumer employment opportunities through 1) strengthened partnerships with businesses in areas of the labor market with higher wage jobs, primarily technology and skilled trades, 2) improved consumer job readiness, and 3) the ability of job placement vendors to better match consumers with employment opportunities.

**Goal 2:** Effectively provide VR services for individuals from minority backgrounds who are blind or significantly visually impaired and ensure they are satisfied with the services provided.\(^2\)

**S&I Measure 2.1:** Of the total number of consumers: (1) who receive services under an IPE, and (2) who achieve an employment outcome, at least 55 percent will be from a minority background.
- Performance: In FFY 2015 DBS exceeded the performance target for this measure with 64.60 percent of consumers receiving services under an IPE and achieving an employment outcome being from a minority background. (S&I Report)

DBS has consistently exceeded the performance expectation for this indicator.

**S&I Measure 2.2:** On the consumer satisfaction survey, a minimum of 90 percent of

---

\(^1\) The data to determine the results of S&I 1.5 will be unknown until Bureau of Labor Statistics (BLS) quarterly Average Weekly Wage statistics are available for calendar year 2015 sometime in mid-year 2016.

\(^2\) For Goals 2, 3 and 4, FFY 2014 is the most recent period for which consumer satisfaction data is available.
respondents from minority backgrounds will indicate they were satisfied with their overall experience with DBS.

- Performance: In FFY 2014, DBS exceeded the performance target for this measure with 91.6 percent of the respondents from a minority background indicating they were satisfied with the services received.

DBS has consistently exceeded the performance expectation for this indicator.

**Goal 3:** Provide a consumer service delivery system that: (1) enhances available information about service providers, employment options, and other choices, and (2) is based on informed consumer choice and designed to enhance the delivery of quality and timely services for VR consumers.

**Measure 3.1:** On the consumer satisfaction survey, a minimum of 90 percent of all respondents will indicate they were satisfied with their overall experience with DBS.

- Performance: In FFY 2014, DBS exceeded the performance target for this measure with 91.6 percent of the consumers surveyed indicating they were satisfied with their overall experience with DBS.

**Measure 3.2:** On the consumer satisfaction survey, a minimum of 90 percent of the respondents will indicate they were satisfied services were provided within a reasonable time frame.

- Performance: In FFY 2014, DBS met the performance target for this measure with 90 percent of the consumers surveyed indicating they were satisfied services were provided within a reasonable time frame.

**Measure 3.3:** On the consumer satisfaction survey, a minimum of 90 percent of the respondents will indicate they were actively involved in choosing their employment outcome and the services received.

- Performance: DBS exceeded the performance target for this measure with 93 percent of the consumers surveyed indicating they were sufficiently involved in choosing employment outcomes and services.

**Measure 3.4:** On the consumer satisfaction survey, a minimum of 90 percent of the respondents will indicate that their counselor listened to and considered their needs and concerns.

- Performance: DBS exceeded the performance target for this measure with 94.4 percent of the consumers surveyed indicating they were treated with courtesy and respect.

**Goal 4:** Continue increasing access to and provide effective and quality-based supported employment services statewide.

**Measure 4.1:** The number of consumers receiving supported employment services who achieve an employment outcome will equal or exceed 48.
• Performance: DBS had a total of 37 consumers who achieved an employment outcome after receiving supported employment services in FFY 2014. The number of closures varies from year to year for supported employment cases.

**Measure 4.2:** The number of consumers receiving supported employment services will equal or exceed 400.
• Performance: DBS did not meet this measure, with 369 consumers receiving supported employment services in FFY 2014.

**Measure 4.3:** Expand consumer employment opportunities by increasing the number of supported employment service providers that can work effectively with consumers who are blind by 10 percent.
• Performance: DBS did not meet this measure. In FFY 2014, the number of supported employment providers was 31, or 16 percent below the target of 37.

To address performance on the measures related to Goal 4, DBS developed an improved benchmark system for the provision of specific supported employment services statewide during 2014 that includes:
• changes to the supported employment assessment that assists providers in using discovery and person-centered techniques, vocational theme development, and providing worksite observations;
• changes to the supported employment planning and service provision to improve consumer participation and informed choice by requiring their review and signatures at each benchmark;
• changes to the identification and coordination of extended services/long-term supports to start prior to beginning the benchmark process. Counselors are now required to identify long-term supports available prior to starting the supported employment benchmark services, and the supported employment provider coordinates and trains the extended services/long-term supports provider to ensure the extended services/long-term supports are in place and working prior to determining job stability;
• criteria for determining job stability were strengthened to ensure extended services/long-term supports required for continued success after VR case closure;
• coordination with UNTWise, the credentialing body for Texas DARS employment service providers, to ensure that all new changes have been included in their certification classes and ongoing training materials. UNTWise also posted the supported employment webinars developed by DARS for providers to access for free; and
• develop tools that will help staff members monitor and provide guidance to supported employment contract providers.

**Goal 5:** Provide effective pre-employment transition services to meet the needs of eligible, or potentially eligible, students/youth with disabilities.

**Measure 5.1:** DBS will provide VR services for a minimum of 2,200 eligible, or potentially eligible, students/youth with disabilities.
• Performance: Due to continued strong relationships with LEAs, DBS was able to meet and exceed this measure by providing services to 2,234 eligible, or potentially eligible, students/youth with disabilities.

Measure 5.2: A minimum of 115 transition program consumers will transfer to the adult VR program.
• Performance: DBS exceeded this goal with 128 transition consumers transferring to the adult VR program. The goal was achieved through strong collaborative relationships between DBS transition staff and adult VR staffs.

How Funds Reserved for Innovation and Expansion Activities were Used in FFY 2014

Diabetes Services

According to the Texas Diabetes Institute report from November 2010, Responding to the Epidemic: Strategies for Improving Diabetes Care in Texas: “Type 2 diabetes is preventable, but annual incidence rates continue to grow, and the associated costs of treating diabetes and its complications represent a significant threat to the financial solvency of the Texas public and private health infrastructure. The reach, impact and diabetes-associated costs to the State of Texas, its taxpayers and those suffering from the disease must be addressed. The State Demographer projects a quadrupling of the number of adult Texans with diabetes from approximately 2.2 million in 2010 to almost 8 million by 2040.” (Change rate 259 percent)

Diabetes is considered a disability under the Americans with Disabilities Act. The functional and vocational implications of diabetes and the complication of diabetes should be addressed in the rehabilitation process. Reasonable accommodations for diabetes and/or its complications are generally simple and low cost. Rehabilitation professionals, diabetes educators, and businesses need education on these adaptations to ensure consumers remain successfully employed while living with this chronic disease.

Diabetes education for individuals with visual impairments requires health education materials in a variety of accessible formats. Daily self-care is vital for successful diabetes management, and consumers must be the experts in their diabetes.

The literature is clear that registered nurse education programs do not include significant information about people with disabilities or how to promote the health, well-being, and autonomy of people with disabilities (Competencies for Nurses and Nurse Practitioners, Caring for People with Disabilities, Villanova University). Training individuals with visual impairments is uncommon among health care professionals. Practitioners may be accustomed to treating the clinical issues surrounding the consumer’s diabetes and/or disability, but they are often not accustomed to the techniques and adaptive tools available for self-management. People with vision impairments have unique learning needs, which should be considered in order for the diabetes education to be most effective. Diabetes education providers need sensitivity training along with practical teaching techniques and tools when working with consumers with visual...
Strategies:

- Diabetes services will deliver training on the impact of diabetes on businesses and other current issues on disabilities and the complications of diabetes.
- Diabetes services will address the functional and vocational implications of diabetes and its complications through internal training of DARS staff and of diabetes educators via the Texas Confidence Builder training.
- Diabetes services will develop innovative ways to educate providers of diabetes education on the abilities of consumers who are blind to self-manage their diabetes, the adaptive techniques, equipment and supplies, and the challenges of managing diabetes at work. Additionally, the education of providers will include teaching tactics and approaches that are effective when working with individuals who are blind.

Measure 1: Diabetes services will provide training on the impact of diabetes to 100 rehabilitation professionals.

- FFY 2014 Performance: Diabetes education training was provided to 116 DARS staff on the topics of “Diabetes in the Workplace” and “Diabetic Retinopathy for Caseload Management.” In addition, training was provided to a larger VR professional audience via a breakout at the Texas RehabAction Network annual meeting.

Measure 2: Diabetes services will provide training to 30 health care professionals on blind services, diabetes, and teaching strategies.

- 2014 Performance: Training was provided on blind services, diabetes, and teaching strategies to 34 health care professionals via the Texas Confidence Builder training. Additional health professionals were reached via networking and training opportunities through the Texas Diabetes Council, American Association of Diabetes Educators, and TMF Health Quality Initiative Everyone with Diabetes Counts program.

Estimated 2014 Expenditures:

- Diabetes assessment: $131,644
- Diabetes education: $339,410
- Rehabilitation supplies: $550,000

The following updates are for programs that used 2013 Title I funds reserved for innovation and expansion activities, but received no such funds in 2014.

System of Quality Assurance
DBS moved to a new consumer case management system in February 2013.

In December 2014, DARS convened the DRS-DBS Quality Assurance and Improvement Workgroup to explore internal quality practices being used by either division separately or both divisions jointly. The workgroup was tasked with submitting ten deliverables to the DRS and DBS assistant commissioners who addressed the group’s exploration of quality assurance or
quality improvement practices. The deliverables were:

1. Define “quality assurance.”
2. Create an inventory of internal quality assurance and quality improvement practices.
4. Evaluate the effectiveness of each internal quality assurance practice.
5. Identify external quality assurance and improvement practices.
6. Explore issues and opportunities to coordinate DRS and DBS processes into a Joint DRS-DBS Quality Assurance and Improvement Framework.
7. Identify gaps in the current quality assurance systems used by DRS or DBS.
8. Recommend quality assurance and improvement strategies DRS and DBS may choose to jointly implement.
9. Develop an implementation plan with associated quality assurance and improvement strategies to carry out the group’s recommendations.
10. Present findings, recommendations, and implementation plan to DRS and DBS senior management teams.

The group recommended that DRS and DBS create a standing Joint DRS-DBS Quality Assurance and Improvement Team to prioritize and carry out the following activities:

- create messages using input from agency leadership that explains the role that each individual plays within the division’s and agency’s quality system;
- lead the implementation of recommendations made by the Workgroup and described in this report;
- create joint division or agency goals related to quality assurance or quality improvement practices;
- identify opportunities to consolidate and streamline quality processes (e.g., customer surveys) and tools (queries);
- publish practices found to improve quality assurance or quality improvement, or employment outcomes, on DARSNet and publicly acknowledge staff involved in creating the observed improvements;
- identify and then make recommendations about joint DRS-DBS training activities related to quality assurance or quality improvement practices, or employment outcomes;
- establish standard accountability measures so staff understand what is expected of them and have an opportunity to monitor what is expected of them against what they do;
- create a Joint DRS-DBS Quality Assurance and Improvement Guide that includes key tenets of quality, overarching concepts related to quality—particularly the concepts included in the Joint DRS-DBS Quality Framework—as well as focused discussion on quality (e.g., processes and tools); and
- track progress toward joint quality assurance and improvement goals.

In November 2014, DBS implemented an electronic case review system that aligns with DRS. Training was provided and data began to be collected during the second quarter of FFY 2015. Progress on these items is expected to continue.
Increased Emphasis on Braille Literacy

A braille training program for new VRTs and Independent Living (IL) workers that incorporates the Simply Braille curriculum was designed and is now being delivered by the Braille Field Specialist.

In FFY 2015, participation in Simply Braille curriculum training increased to six new VRTs and three IL Workers. The average time to complete the training was 25 weeks for uncontracted and 20 weeks for contracted Braille. Simply Braille is being used as the primary training curriculum for all VRT and IL workers.

**Strategy:** Transition all VRTs and IL workers from English Braille American Edition (EBAE) to Unified English Braille (UEB) through training and support from the Braille Program Specialist.

**Measure:** All VRTs and IL workers will transition to UEB by FFY 2018.

Assistive Technology Services and Devices
Computer technology services and assistive technology devices are provided for consumers at each stage of the rehabilitation process.

DBS currently has 30 VRTs and 13 Rehabilitation Assistants across the state. These positions provide basic computer skills training. Most assessments and training take place in field offices. Each VRT has technology that may be loaned to a consumer who lives in a rural area to assist the consumer to practice computer skills; in these cases the computer training takes place in the consumer’s home. All new VRT are being trained as Tech Screeners, and it is anticipated that by the end of FFY 2017 there will be 35 VRTs who have completed the training.

Strategies Related to the Statewide Workforce Investment System
DBS is involved with the statewide workforce investment system at the state and local levels. DBS works closely with TWIC, the local TBW, TWC, and other workforce partners on strategic planning and implementation. DBS participates on TWIC’s Strategic Implementation and Technical Advisory Committee, which focuses on accomplishing activities listed in the strategic plan. DBS reports its performance related to several performance measures on an annual basis.

DBS has established relationships with each of the 28 Texas Workforce Development Boards (WDB) to address issues such as:
- referral of consumers from local Workforce Solutions Offices to DBS, and from DBS to the Workforce Solutions Offices;
- services each organization provides; and
- cross-training for staff, as appropriate.

At the local level, DBS staff meet with consumers at the local Workforce Solutions Office.
also provides blindness awareness training for staff of the local workforce centers. In coordination with the DARS training department, DBS staff use the services of the TWC labor market economists who provide information and direction regarding current and future employment trends to DBS staff to assist in career planning with consumers.

On September 1, 2016, DARS VR programs, including the Criss Cole Rehabilitation Center, along with the Business Enterprises of Texas program and Independent Living program for Older Individuals who are Blind will be transferred to TWC, offering new opportunities to build on those relationships already established with the statewide workforce investment system.

Section 17: Quality, Scope, and Extent of Supported Employment Services

DBS is committed to providing quality services to persons with the most significant disabilities and has developed collaborative programs with appropriate public and private nonprofit organizations, employers, and other appropriate resources for training, employment, and other time-limited services leading to supported employment.

DBS continues to work in partnership with DRS to provide supported employment services consistent with consumer’s strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice.

Quality and Scope

Supported employment services provide competitive employment in the community for consumers with the most significant disabilities who need individualized assistance finding the most appropriate job matches, and who may require ongoing accommodations and support within their work environments.

DBS consumers who benefit from supported employment services are those for whom traditional VR approaches and training programs have not been effective.

Although some consumers have the ability to compete in the open job market, they often require assistance learning how to interact with potential employers and perform job tasks and responsibilities. They also require extended supports not funded by VR to maintain long-term employment once DBS closes their VR case. Consumers receiving supported services often have no work history and have been excluded from community services, institutionalized, or participated only in segregated work programs such as sheltered workshops.

Supported employment services goal is to identify the best possible match between consumer skills, interests, abilities, support needs, and the employer’s unmet needs. DBS uses the “place, then train” concept. For example, tailored training and support directly related to a job are not provided to a consumer with a significant disability until after they have secured a competitive job. As necessary, supported employment specialists and VR counselors develop support strategies tailored for each consumer based on his or her individual needs. This ensures the appropriate amount of support is provided and the consumer can maintain his or her employment.
Examples of these extended services, sometimes called long-term supports, include consulting with a consumer’s supervisor regarding areas of concern or training needs, supports, or strategies to improve work performance through job coaching, providing services such as medication management and hygiene, or transportation related to maintaining employment.

DBS works collaboratively with DRS offering supported self-employment services as an alternative employment option for consumers with the most significant disabilities who choose to own their own business within their community. Supported self-employment is competitive employment whereby the consumer owns, manages, and operates a business and is not considered an employee of another person, business, or organization. Supported self-employment businesses are typically small and require a team approach for planning and support. The business team is led by a supported self-employment specialist who assists with exploration, feasibility determination, development of a business plan, business launch, and addressing the consumer’s extended service needs. In supported self-employment, the extended services help the consumer effectively and efficiently run their business for a profit and can include long-term job coaching supports, peer supports, natural supports, family supports, or ongoing paid professional services required for the business.

The supported self-employment specialist is required to complete training from Griffin-Hammis Associates through its nonprofit branch, the Center for Social Capital, to be a Certified Business Technical Assistance Consultant. Providers of supported employment and supported self-employment services receive payment when they assist eligible consumers in achieving specific outcomes called “benchmarks.”

**Timing of Transition to Extended Services**
A supported employment case remains open for a 60-day period after the case is identified as “stable,” which means the consumer:
- is performing the job to the employer’s satisfaction;
- is satisfied with the job placement;
- has the necessary modifications and accommodations at the worksite;
- has reliable transportation to and from work; and
- has extended services and support needs in place.

A consumer’s individualized extended services are identified and documented for both supported employment and supported self-employment in the consumer’s IPE. Resources that provide extended services for consumers include nonprofits, county, state and federal programs.

**Funding**
Title VI, Part B and/or 110 funding is available statewide to all VR counselors to serve Texans with the most significant disabilities. Services leading to supported employment have been integrated into the VR service delivery system. At case closure, or at the conclusion of any time-limited postemployment services, the services paid for by the Title VI, Part B and/or 110 funds...
VR counselors monitor supported employment cases closely to ensure quality of VR outcomes. A case is closed when the consumer:

- has been provided substantial services that have had a discernible impact on the consumer’s employment outcome;
- has achieved the employment outcome consistent with the consumer’s strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice;
- is employed at closure;
- and family members, if applicable, and the counselor consider the employment outcome to be satisfactory, are satisfied with supports, and agree that the consumer is performing well on the job;
- has substantially met the goal for hours of employment listed on the individualized plan for employment;
- has maintained suitable employment for 60 days or longer after job stability was reached; and
- has maintained the employment outcome for 90 days or longer to close case.

Public Input Received During DARS/TWC Joint Public Meetings

DARS and TWC conducted the following seven joint meetings across the state to take public comment on the combined state plan for core workforce programs, as required by the WIOA, and on the transfer of the General and Blind VR (including the Criss Cole Rehabilitation Center), Business Enterprises of Texas and the Independent Living for Older Individuals who are Blind programs from DARS to TWC:

1. Austin- July 21, 2015
2. Dallas- July 30, 2015
3. McAllen- August 12, 2015
5. Tyler- August 27, 2015
7. El Paso- September 17, 2015

DARS and TWC jointly developed materials for use by members of the public, which included:

- Information about the Texas Combined State Plan for Programs Authorized Under the Federal Workforce Innovation and Opportunity Act (Appendix A)
- Information about the Transfer of Certain Programs from DARS to TWC Provided at Public Meetings (Appendix B)
- Texas Workforce Commission Organizational Chart Effective September 2016 (Appendix C)

Summary of Public Input Received During DARS/TWC Joint Public Meetings

During the joint public meetings, input was received from over 70 members of the public,
including representatives of institutions of higher education, parents and advocates, WDBs, consumers of DRS and DBS, and state independent living centers. These public meetings occurred in a context of additional Texas Legislature directed reorganization of programs for persons with disabilities. Relevant comments regarding the transfer of designated state agency programs other than VR are included. Comments are grouped into the following areas:

RETENTION OF STAFF EXPERTISE AND SPECIALIZED SERVICES

• Ensure staff at local workforce centers and centers for independent living have the expertise and specialized services needed to serve people who are blind or visually impaired.
• Retain education and training requirements for vocational rehabilitation counselors, including the training for new counselors in DBS since it provides a strong foundation for working with individuals who are blind or visually impaired.
• Maintain the requirement for counselors to have or attain a Master’s degree in Rehabilitation Counseling even though WIOA permits a lower education level. Supervisory staff should also have a Masters in Rehabilitation Counseling.
• Retain expertise and core strengths of DARS staff and management after transition to TWC. People who are blind and visually impaired would like to be given the opportunity to work with people who are familiar with provision of rehabilitation services that meet their specific needs, and who are supervised by managers who know best practices and can identify when an employee is not providing quality services to the customer.
• Retain and prepare qualified, competent rehabilitation counselors to address the challenges of individuals entering the system with more complex issues, psychiatric issues, and co-existing disabilities.

ENSURING QUALITY SERVICES AND CONTINUITY OF SERVICES

• Assure quality services for consumers across geographic boundaries.
• Monitor the quality of the consumer/counselor relationship and continue to assess consumer satisfaction with the service provided by the counselor.
• Ensure that the transition preserves the purchasing and procurement services that are essential to timely delivery of services.
• Take measures to minimize the time to determine eligibility.

COMMUNICATION DURING PROGRAM TRANSFER FROM DARS TO TWC

• Provide communication throughout transition of programs from DARS to TWC.
• Ensure that the transition plan includes specific steps and deadlines for communicating with Texans with disabilities and to the community at large.
• Maintain regular, consistent, clear and honest communication at all levels with staff, partners, boards, employers, stakeholders, and advocacy groups.
• Include counselors in making decisions about the transition.
TRANSITION AND OUTSOURCING OF INDEPENDENT LIVING SERVICES

- Ensure that consumers who need independent living services can access them at a Center for Independent Living (CIL) in their community. There is concern that CILs may be located geographically too far for some customers to access.
- Ensure that CILs have the expertise needed to serve persons who are blind.
- People who experience vision loss late in life need immediate assistance and intervention by professionally trained staff that are knowledgeable about independent living aids and technology.
- Provide staff at CILs with the training they will need to deliver services. Staff competency in service delivery to blind persons is essential.
- Staff at the independent living centers may not have the experience or training to provide the specialized services needed by newly blind seniors. Trained specialists understand aging, metabolic processing of medications, interactions of medications and higher susceptibility to depression.
- Texas Seniors who are legally blind must benefit from:
  - In-home orientation and mobility training,
  - Hands-on instruction on new ways to carry out daily living activities without vision,
  - One-on-one training regarding the use of special adaptive aids and technology,
  - Information and techniques on how to locate and use viable transportation alternatives,
  - Psychological and emotional counseling and support, and
  - Employment of an accessibility coordinator to follow up with seniors and/or family member or caregiver to identify the most appropriate solution for their particular situation.

- Train the contractors who will provide services to IL customers.
- There is a need for the development of a comprehensive specialized training curriculum, which would be required of all staff personnel of agencies who will be providing direct intervention and independent living services to Texas seniors who are experiencing vision loss.
- Establish an intake line or an alternate method by which aging adults and their families are able to report a recent diagnosis of visual impairment and access referrals to individualized programs and services.

POTENTIAL GAPS IN SERVICES

- Retain the minimum age at which services are provided for youth who are blind.
- Address the gap for children ages 10 to 14 who are not in the Blind Children’s Program age range, are currently in the transition services age range, and are not going to be in the proposed 14-22 transition age range.
- In Texas, transition planning (for the General VR program) starts at the age of 14 and therefore, the availability of pre-employment transition services should correspond at that age and be available at the age of 14.
- Ensure there is staff and management expertise available for Blind Children’s Program transferring to HHSC
ENSURE EMPLOYMENT OUTCOMES

• Consider providing mentoring and internships for consumers, provided by consumers who have successfully completed vocational rehabilitation services.

• Develop or enhance partnerships with other state agencies and non-governmental organizations:
  
  o Explore expanded coordination efforts with the involvement by other agencies, such as the Department on Aging and Disability Services, Area Agencies on Aging, local senior service centers, lighthouses for the blind, local low-vision support groups and consumer membership organizations of blind and visually impaired individuals.
  
  o Expand initiatives like Project Search, a school-to-work internship program that provides work experience to help young adults with intellectual and developmental disabilities between the ages of 18 and 22 transition to employment. One example of Project Search is the collaboration between Austin Independent School District, DARS, and the Seton Health Care family that provides internships for individuals with intellectual and developmental disabilities.

• The 28 Workforce Development Boards (WDB) work closely with DARS and it is anticipated that the transfer of VR to TWC will enable an enhanced team approach that will benefit consumers and increase their employment outcomes.

• For persons with IDD, they may need more time to get adjusted to the job.

• Each activity for transition-age students should be geared to prepare them for employment and should include activities such as summer work experience opportunities.

ACCESS TO TRANSPORTATION

• Ensure access to public transportation to workforce centers and jobs, particularly in rural areas (e.g., is there a bus stop near each one-stop?).

• Ensure access to centers for independent living, and consider contracting with local and regional affordable transportation services to promote the inclusion and participation in activities that are vital for independent living for individuals residing in small towns or rural areas.

• There is a need for adequate transportation, but also in areas that are safe.

• Work together with other state agencies such as Texas Department of Transportation to ensure people with disability have adequate, affordable and accessible transportation.

ACCESS TO SERVICES AND ACCESSIBILITY OF SERVICES

• Ensure accessibility at one-stops and centers for independent living, including accessibility for wheelchairs, updated, accessible communication equipment for persons who are deaf or hard of hearing (e.g., TTY is outdated), and other accessible devices for people with disabilities.

• Ensure that staff working at the centers are trained to use the accessible technology.
• Provide disability sensitivity training to workforce center staff.

DISABILITY AWARENESS

• Maintain the philosophy that persons who are blind are contributing members of society and the workforce.
• Ensure that people with hidden disabilities like the veteran population and low vision consumers don’t get lost due to inexperience or lack of knowledge in the workforce centers.
• Ensure that services for people with disabilities remain individualized.
• Ensure that customers are able to speak with counselors in a setting that will protect the privacy of their health information.

FUNDING

• With the expected increase in the number of people over the age of 65 who lose their vision over the next 15 years, funding presently allocated for older blind Texans is inadequate to address the current need for services as well as the projected future need.
• Identify the barriers and challenges to expanding the services for outreach to older blind Texans and implement strategies to address them. Conduct a study to determine projections and forecasts of growth and geographic distribution of this target population in a three to five year time frame.
• Ensure that transition planning efforts include special attention to federal requirements to ensure that the program retains the maximum amount of federal funding.
• Ensure federal dollars are spent on program services and activities as prescribed in federal law and regulation.
Appendices

Appendices A, B and C are documents jointly-developed by DARS and TWC which were made available to members of the public attending one of the joint meetings across the state to take public comment on the combined state plan for core workforce programs, described in the Public Input Received During DARS/TWC Joint Public Meetings section of this document. Appendix D is list of acronyms with definitions.

Appendix A – Texas Combined State Plan for Programs Authorized Under the Federal Workforce Innovation and Opportunity Act

The Workforce Innovation and Opportunity Act (WIOA) was signed into law on July 22, 2014. It replaced the Workforce Investment Act of 1998 and amended the Adult Education and Family Literacy Act, the Wagner-Peyser Act, and the Rehabilitation Act Amendments of 1973. WIOA refers to the following six programs authorized by the Act as “core programs” and administered by two federal agencies:

• Department of Labor Programs:
  ➢ WIOA Services for Adults
  ➢ WIOA Services for Dislocated Workers
  ➢ WIOA Services for Youth
  ➢ Wagner-Peyser Employment Services

• Department of Education Programs
  ➢ Adult Education and Literacy
  ➢ Vocational Rehabilitation

WIOA is focused on several important purposes, including:
• meeting the skill requirements of employers, connecting employers with the skilled workers they need to compete in the global economy;
• increasing access to and opportunities for the employment, education, training, and support services that individuals, particularly those with barriers to employment, need to succeed in the labor market;
• increasing services to youth, including those with disabilities, especially as they make the transition from education to employment;
• maximizing the ability of individuals with disabilities, including individuals with the most significant disabilities, to achieve competitive integrated employment; and
• improving alignment, coordination and integration across the core programs in each state’s workforce development system.

WIOA in Texas
The Texas Workforce Commission (TWC) and the Department of Assistive and Rehabilitative Services (DARS) are the two state agencies in Texas that administer the six core programs authorized by WIOA.
TWC administers employment and training services for the following programs:
- WIOA Services for Adults
- WIOA Services for Dislocated Workers
- WIOA Services for Youth
- Wagner-Peyser Employment Services
- Adult Education and Literacy

TWC is part of Texas Workforce Solutions, a local and statewide network comprised of the agency, 28 Workforce Development Boards, and their contracted service providers and community partners. This network gives customers local access to workforce solutions and statewide services at numerous Workforce Solutions offices. Texas Workforce Solutions provide workforce development services that help workers find and keep good jobs, and help employers hire the skilled workers they need to grow their businesses.

The DARS Division for Blind Services (DBS) and Division for Rehabilitation Services (DRS) administer the Vocational Rehabilitation (VR) programs that help people with disabilities prepare for, find or keep employment. VR provides specialized services to help Texans with disabilities find the high quality jobs or training needed to be successful in school and beyond in order to live independent lives. The VR programs also offer a variety of services to assist businesses with hiring, training and retaining qualified individuals with disabilities.
Appendix B: Joint Development of the Texas Combined State Plan

WIOA requires States to jointly develop and submit a single four-year plan for achieving the workforce goals of the State. The plan will reflect the State’s goals and strategies to:
• align, coordinate, and integrate education, employment, and training programs,
• guide investments to ensure that training and services are meeting the needs of employers and individuals, and
• engage economic, education, and workforce partners in improving the workforce development system.

Texas must submit the Combined State Plan to the secretary of the U.S. Department of Labor by March 3, 2016. The Combined State Plan will be approved by the secretary of each federal agency that oversees the core programs.

The Plan will include information for the six WIOA core programs, as well as other programs administered by TWC, including the Senior Community Services Employment Program, and the Trade Adjustment Assistance Program.

Stakeholder Input
TWC and DARS are seeking input from the public as they develop the State’s Combined State Plan on how to improve services and to continue preparing a skilled workforce that meets the needs of employers. Broad stakeholder engagement is important to ensure that the Plan reflects the perspective of the stakeholders and customers served by the programs covered by the Plan.

The draft Combined State Plan will be posted for public review and comment on the agency websites later this Fall. The agencies will notify stakeholders when the draft Combined State Plan is available for review and comment.

Appendix B–Transfer of Programs from DARS to TWC

DARS Programs Transferring to TWC
On June 19, 2015, Governor Greg Abbott signed into law Senate Bill (SB) 208, which directs the transfer of several vocational rehabilitation programs from the Department of Assistive and Rehabilitative Services (DARS) to the Texas Workforce Commission (TWC). Effective September 1, 2016, the following programs will transfer to TWC:
• General Vocational Rehabilitation
• Blind Vocational Rehabilitation, including the Criss Cole Rehabilitation Center
• Business Enterprises of Texas (BET)
• Independent Living Services (ILS) – Older Blind

The Rehabilitation Council of Texas (RCT) also transfers to TWC on September 1, 2016. The RCT serves as the State Rehabilitation Council required under the federal Rehabilitation Act of 1973 as amended by the Workforce Innovation and Opportunity Act of 2014 (WIOA). The RCT advises the agency administering vocational rehabilitation (VR) programs on policy and the scope and effectiveness of VR services and the development of state goals and priorities for the
VR program, as well as consults on the preparation of the VR state plans.

Legislative Oversight of the Transfer of Programs from DARS to TWC
The Legislature established a Legislative Oversight Committee to facilitate the transfer of VR, BET and Independent Living Older Blind Program to TWC. The oversight committee will be composed of four members of the Senate, four members of the House of Representatives, and three members of the public appointed by the Governor. The Health and Human Services Commission (HHSC) executive commissioner, the DARS commissioner, and the TWC executive director will serve as ex-officio non-voting members of the oversight committee.

SB 208 instructs TWC, DARS and HHSC to develop a Transition Plan, and in the development of that Plan to consider input from the public. This Plan is due to the Legislative Oversight Committee as soon as possible after September 1, 2015 but no later than March 1, 2016. Among other items, the Plan must include:
• measures to ensure that unnecessary disruption to the provision of services does not occur;
• a schedule for implementing the transfer of services and programs effective September 1, 2016;
• a strategy for the integration of General VR and Blind VR, which must occur no later than October 1, 2017; and
• a strategy for the integration of VR staff into Local Workforce Centers, which must occur no later than September 1, 2018.

Federal Requirements Regarding State VR Agency Structure and Organization
As part of the transfer, TWC must ensure that Texas is in compliance with federal requirements regarding the organizational placement of VR programs within the agency.
If a state identifies a new Designated State Agency (DSA) to administer the VR programs, the state must ensure the agency is primarily concerned with VR, or VR and other rehabilitation of individuals with disabilities. In the event that the new DSA is not primarily concerned with VR, or VR and other rehabilitation of individuals with disabilities, the state must ensure the agency contains a Designated State Unit (DSU), or two DSUs for states that have both a blind and general agency, that:
• is primarily concerned with VR, or VR and other rehabilitation, of individuals with disabilities, and is responsible for the VR program(s) of the DSA;
• is administered by a full-time director(s);
• employs staff on the rehabilitation work of the organizational unit(s) all or substantially all of whom devote their full time to such work; and
• is located at an organizational level and has an organizational status within the DSA comparable to that of other major organizational units of the DSA.

States may choose to designate one agency to provide VR services to persons with all types of disabilities (known as a “combined” agency), or two distinct agencies, one to serve individuals who are blind and visually impaired and another to serve individuals with all other disabilities (known as “blind” and “general” agencies, respectively). Under the provisions of SB 208, Texas will have two DSUs – one for General VR, and one for Blind VR – until September 1, 2017, at
which point SB 208 directs that General VR and Blind VR be merged.

Effective September 1, 2016, TWC will ensure that the two DSUs are located organizationally at a level comparable to that of other major organizational units of the agency. Under the new TWC organizational structure which will be effective September 1, 2016, the DSU for General VR and the DSU for Blind Services will each be established as a separate Division (see attached).

Following the public meetings to be held throughout the state, Texas will submit the required information for the DSA/DSU changes in the VR sections of the Texas Combined State Plan. The Rehabilitation Services Administration (RSA) must approve the amended State Plans on or before the effective date of the organizational change.
Appendix D-Acronyms

ACS-American Community Survey
ARD-Admission, Review, and Dismissal
AT-Assistive Technology
BET-Business Enterprises of Texas
CAP-Council for Advising and Planning
CART- Communication Access Realtime Translation
CBTAC-Certified Business Technical Assistance Consultant
CHIP-Children’s Health Insurance Program
CIL-Center for Independent Living
CLM-Center for Learning Management
CMS-Centers for Medicaid and Medicare Services
CRCC-Commission on Rehabilitation Counselor Certification
CRC-Certified Rehabilitation Counselor
CRC-Certified Rehabilitation Counselor
CRCG-Community Resource Coordination Groups
CRCG-Community Resources Coordination Group
CRP-Community Rehabilitation Program
CRP-Community Rehabilitation Provider
CSAVR-Council of State Administrators for Vocational Rehabilitation
CSNA-Comprehensive Statewide Needs Assessment
CSPD-Comprehensive System of Personnel Development
CSPD-Comprehensive System of Personnel Development
CYDP-Community Youth Development Program
DADS-Department of Aging & Disability Services
DARS-Department of Assistive and Rehabilitative Services
DBS-Division for Blind Services
DRS-Division for Rehabilitation Services
DSA-Designated State Agency
DSHS-Department of State Health Services
DSU-Designated State Unit
EFTF-Employment First Task Force
EN-Employment Networks
ESBD-Electronic State Business Daily
HCS-Home and Community-Based Services
HHSC-Health and Human Services Commission
HHS-Health and Human Services
HIRE-Helping Individuals Reach Employment
I&E-Innovation and Expansion
<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>IDD</td>
<td>Intellectual and Developmental Disabilities</td>
</tr>
<tr>
<td>IDEA</td>
<td>Individuals with Disabilities Education Act</td>
</tr>
<tr>
<td>IEP</td>
<td>Individualized Education Plan</td>
</tr>
<tr>
<td>ILS</td>
<td>Independent Living Services</td>
</tr>
<tr>
<td>IPE</td>
<td>Individualized Plan for Employment</td>
</tr>
<tr>
<td>LEP</td>
<td>Limited English-Language Proficiency</td>
</tr>
<tr>
<td>LPC</td>
<td>Licensed Professional Counselor</td>
</tr>
<tr>
<td>LSSP</td>
<td>Licensed Specialist in School Psychology</td>
</tr>
<tr>
<td>MBI</td>
<td>Medicaid Buy-In</td>
</tr>
<tr>
<td>MFP</td>
<td>Money Follows the Person</td>
</tr>
<tr>
<td>MH</td>
<td>Mental Health</td>
</tr>
<tr>
<td>MOU</td>
<td>Memorandums of Understanding</td>
</tr>
<tr>
<td>NCREE</td>
<td>National Council on Rehabilitation Education</td>
</tr>
<tr>
<td>OABI</td>
<td>Office of Acquired Brain Injury</td>
</tr>
<tr>
<td>PRA</td>
<td>Program Reporting and Analysis</td>
</tr>
<tr>
<td>QVRC</td>
<td>Qualified Vocational Rehabilitation Counselor</td>
</tr>
<tr>
<td>RCT</td>
<td>Rehabilitation Council of Texas</td>
</tr>
<tr>
<td>RIT</td>
<td>Rehabilitation Services Technicians</td>
</tr>
<tr>
<td>RTRC</td>
<td>Rehabilitation Technology Resource Center</td>
</tr>
<tr>
<td>SELN</td>
<td>State Employment Leadership Network</td>
</tr>
<tr>
<td>SE</td>
<td>Supported Employment</td>
</tr>
<tr>
<td>SFY</td>
<td>State Fiscal Year</td>
</tr>
<tr>
<td>SHIP</td>
<td>State Health Insurance Program</td>
</tr>
<tr>
<td>SILC</td>
<td>State Independent Living Council</td>
</tr>
<tr>
<td>SLPI</td>
<td>Sign Language Proficiency Interview</td>
</tr>
<tr>
<td>SMI</td>
<td>Significant Mental Illness</td>
</tr>
<tr>
<td>SMR</td>
<td>Subject Matter Resources</td>
</tr>
<tr>
<td>SSA</td>
<td>Social Security Administration</td>
</tr>
<tr>
<td>SSES</td>
<td>Supported Self-Employment Specialist</td>
</tr>
<tr>
<td>TBIAC</td>
<td>Traumatic Brain Injury Advisory Council</td>
</tr>
<tr>
<td>TCCVS</td>
<td>Texas Coordinating Council for Veteran Services</td>
</tr>
<tr>
<td>TEA</td>
<td>Texas Education Agency</td>
</tr>
<tr>
<td>TED</td>
<td>Transition and Employment Designee</td>
</tr>
<tr>
<td>TIBH</td>
<td>Texas Industries for the Blind and Handicapped</td>
</tr>
<tr>
<td>TTAP</td>
<td>Texas Technology Access Program</td>
</tr>
</tbody>
</table>
TTW-Ticket-to-Work
TVRC-Transition Vocational Rehabilitation Counselor
UNT-University of North Texas
UPS-Unit Program Specialists
VR-Vocational Rehabilitation
WIPA-Work Incentive Planning and Assistance
WRAP-Wellness Recovery Action Plan