



2015 ANNUAL REPORT

A Legacy of Compassionate Service

TEXAS DEPARTMENT OF ASSISTIVE AND REHABILITATIVE SERVICES





“I’ve learned that people will forget what you said, people will forget what you did, but people will never forget how you made them feel.”

~ Maya Angelou

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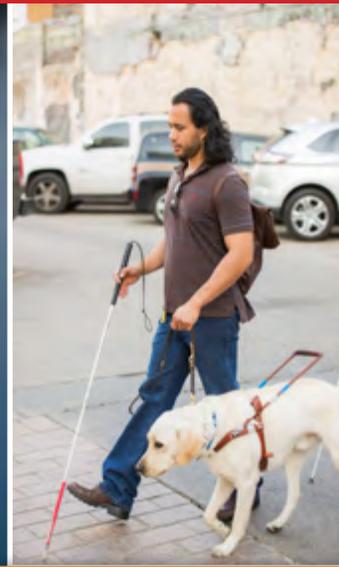
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Introduction

At the Texas Department of Assistive and Rehabilitative Services (DARS), we partner with Texans with disabilities and families with children who have developmental delays to ensure they have equal opportunities to live independent and productive lives. We believe that our consumers come first and that understanding each of our consumers' goals is the first step to providing quality service. This individualized approach has allowed us to witness many success stories since we opened our doors March 1, 2004.

DARS provides rehabilitation, early childhood intervention, autism, blind, and deaf and hard of hearing services. Through vocational rehabilitation, food service management training and independent living services, DARS helps Texans with disabilities find jobs and live independently in their communities. We work with families to help children who have disabilities, such as developmental delays and autism spectrum disorders, to reach their full potential. DARS also makes disability determinations for Texans who apply for Social Security benefits.



Commissioner's Message: A Legacy of Compassionate Service

One of my favorite poets, Maya Angelou, once said, "I've learned that people will forget what you said, people will forget what you did, but people will never forget how you made them feel." At DARS, we understand that Texans with disabilities are people first, and we believe that personalization is the key to success. Our way of understanding and serving our consumers makes me proud, as does the fact that our legacy at DARS is "A Legacy of Compassionate Service."

"At DARS, we understand that Texans with disabilities are people first, and we believe that personalization is the key to success."

We celebrate opportunities to identify the individual goals, strengths and talents of the people to whom we provide services and leverage these qualities to help them reach their goals. We take pride in providing services that help families with children who have developmental delays by preparing these children to succeed in school and beyond. And we feel fulfilled when we are able to help our vocational rehabilitation consumers obtain jobs that capitalize on the strengths they already have, while helping them to grow and develop new ones.

By not just providing a service, but working to identify and provide the right service for each person we serve, we help empower our consumers to achieve the feeling of success that comes when a combination of determination, hard work, training, services and supports turns their goals into realities.

When I think of all that DARS has helped our consumers accomplish, I am reminded of former President George H.W. Bush's remarks at the Americans with Disabilities Act's 19th anniversary: "There is always more to be done, which is why it's good not only to celebrate our successes, but to look forward at what still must be done. As long as we never forget that every life is a miracle and each person has something to contribute, we will finish the job." Bush's remarks show that we must always be open to changing and growing to create a better future.

Change and a better future were on our minds when DARS opened its doors on March 1, 2004, and we embarked on the journey of learning from and capitalizing on the very best aspects of our legacy agencies. In 2004, we stood on the shoulders of a long line of great leaders and embraced great programs, propelling us forward to years of successes.

Today, DARS is changing and growing again in response to the 84th Texas Legislature as it has directed DARS programs and services to be placed with new agencies in September 2016. I am confident that, as a result of these changes, our consumers will have bright futures where they benefit from the same compassionate service they experience in partnership with DARS today.

I am proud of our accomplishments at DARS in 2015, and I invite you to learn more about our successes this year and our journey as an agency in this annual report.



Mission

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

Vision

The DARS vision is 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.

Guiding Principles

We will deliver quality services in innovative and creative ways, individually suited to our consumers' needs, and delivered with respect and courtesy.

Stakeholders, consumers, staff members and service providers will have meaningful opportunities to provide input on agency policies and services.

We will celebrate our successes and learn from our mistakes — as one team.

We will promote efficiency, effectiveness and quality service delivery by building a program support system that aligns with the DARS mission.

We will create and maintain a work environment characterized by respect, trust and open communication between staff and management.



DARS

Legacy of Leadership



2004

DARS became a state agency in 2004 as a result of House Bill 2292 of the 78th Texas Legislature, but DARS has a long legacy of compassionate service dating back to 1929. Although there have been many changes over time, a common thread throughout the years is strong and compassionate leadership.

strong and compassionate

1929

“For 86 years, the public Vocational Rehabilitation (VR) program in Texas has served a purpose like no other agency or commission. Consumers receiving VR services have become successful, independent and contributing members of society. There is not a more noble career than that of serving people with disabilities in the public VR Program.”

– Max Arrell, Commissioner of the Texas Rehabilitation Commission



proud and dedicated



1971

“I take continuing pride in the Office for Deaf and Hard of Hearing Services (DHHS) and its quest to remove communication barriers. DHHS has made tremendous advances in serving the deaf and hard of hearing community and is reaching an even greater number of people in that community through outreach services and the Resource Specialist program.”

– David Myers, Executive Director of the Texas Commission for the Deaf and Former Director of the Office for Deaf and Hard of Hearing Services



DARS *Legacy of Leadership*

1981

“The true legacy of Texas Early Children Intervention (ECI) can only be measured by the profound difference in the lives of the families and children that we served. ECI was there for them in their time of greatest need.”

– Mary Elder, former Executive Director of the Interagency Council on Early Childhood Intervention and former Deputy Commissioner of DARS



making a difference



2003

“The 2003 legislature directed the creation of DARS with the expectation that the quality of service to Texans with disabilities would be greatly enhanced. The focus on excellence in service began with bringing all staff from the four legacy agencies to an understanding that “Excellent Service, Every Customer, Every Time” was the focus of all units and all employees. The result was that, by 2010, Texas had the best rehabilitation services in the nation.”

– Terrell I. Murphy, first DARS Commissioner

powerful and positive impact

2011

“DARS services have such a powerful and positive impact for the individuals and families we serve. In fact, they can change people’s lives. Being a part of DARS had an impact on me as well. Getting to work alongside such dedicated staff, and knowing that our work helped people of all ages with disabilities achieve greater independence, was the most rewarding experience I had in public service.”

– Debra Wanser, second DARS Commissioner





DARS *Services*

*In 2015, DARS employees across Texas worked together to provide services to help Texans with disabilities and families with children who have developmental delays reach their goals and enjoy the same opportunities as other Texans. 2015 exemplifies our legacy of **compassionate service.***



2015 Highlights

► Expanded Services

The Autism Program expanded services to previously unserved parts of the state and began providing focused ABA treatment services to target and improve a few specific outcomes including addressing challenging behaviors and improving social and adaptive skills.

► Responsive Interaction Parent Training (RIPT)

Parents of children with autism spectrum disorders in the RIPT project pilot, through a contract with Texas State University, learned how to use ABA treatment strategies in the home to improve communication and social interaction. Promising results were achieved in the pilot's first phase.

► Texas Autism Research & Resource Center (TARRC) Conference

The annual DARS Texas Autism Research Conference brought ASD researchers and the broader ASD community together to engage in a productive dialogue about evidence-based research and its practical applications.

Autism Program

The DARS Autism Program works in partnership with local community agencies through grant contracts to provide applied behavior analysis (ABA) services for children with autism spectrum disorder (ASD).

According to the U.S. Department of Health and Human Services, autism is more common than childhood cancer, juvenile diabetes and pediatric AIDS combined. Boys are nearly five times more likely to be diagnosed with autism than girls.

Autism Program services include assessments and ABA treatment services in the home, community or clinic. To be eligible for these services, children 3 through 15 years of age, must have a diagnosis on the autism spectrum and be a Texas resident. When a child needs speech-language therapy, physical therapy, occupational therapy or audiology evaluations, the local community agency will refer the child for services.

On Sept. 1, 2014, DARS adopted rules with comprehensive ABA services for children aged 3 through 5 years and focused ABA services for children 3 through 15 years of age.

In fiscal year 2015, DARS Autism Program services were provided by:

- Autism Treatment Center Inc., San Antonio
- Center for Autism and Related Disorders, Austin and Corpus Christi
- Child Study Center, Fort Worth
- Easter Seals North Texas Inc., Carrollton, Dallas and Fort Worth
- The Harris Center for Mental Health and IDD, Houston
- Paso del Norte Children's Development Center, El Paso
- Texana Center, Rosenberg

Autism Program Success Story



Ryan and Family Learn and Succeed Together

Ryan, 10, of El Paso has a diagnosis on the autism spectrum and is one of many children who have responded positively to focused applied behavioral analysis (ABA) treatment services. Ryan's parents partnered with Ryan's team of autism specialists to learn how to use ABA treatment strategies to help him succeed.

Ryan began receiving focused ABA services through the DARS Autism Program in May 2015, from Paso del Norte Children's Development Center in El Paso. At that time, Ryan experienced difficulties in social skills, functional communication, academic performance, activities of daily living and problem behaviors that posed safety issues for him and those around him.

The first goal that Ryan worked to achieve with his behavior analysts was reducing the intensity and frequency of problem behaviors, including forceful head butting, hair pulling, kicking, punching, biting, slapping, property destruction and throwing items at staff or family. As Ryan began to demonstrate progress, his behavior analysts began to provide training to his parents so that they could help him continue to improve at home and school.

The behavior analysts modeled behavioral intervention strategies, helped his parents apply these strategies in role-play scenarios and in the actual situation, and taught them how to provide positive and corrective feedback to help Ryan learn appropriate behaviors. Over the course of three and a half months, Ryan showed a significant decrease in problem behaviors and learned age-appropriate coping skills for difficult situations or to deal with denial or delay of preferred items or activities.

Ryan was also able to make progress in the area of communication. Ryan's team taught him alternative ways to communicate his needs without resorting to problem behaviors, and he can now gain the attention of his parents, staff and peers appropriately and request preferred items or activities. Ryan has learned to correctly write his name, to read sight words and to stay on topic during conversations.

Today, Ryan is truly shining with his improved performance across all areas addressed in treatment.

Ryan's team taught him alternative ways to communicate his needs without resorting to problem behaviors, and he can now gain the attention of his parents, staff and peers appropriately.



2015 Highlights

► Quality Education for Children with Sensory Impairments

Harlingen BCVDDP staff, the Region I-Educational Service Center, and the Texas School for the Blind and Visually Impaired partnered to host an event for parents with children who are blind in the Harlingen area. The purpose of this event was to help parents learn strategies for how to work with their child's school to ensure their child's needs are met, as well as to build parents' confidence in their role within their child's educational team.

► Changing Perspective of First Graders

BCVDDP expanded their efforts into one consumer's first grade classroom to provide awareness and sensitivity training about visual impairments to his classmates. Students who received the training were provided with information and resources to help them appropriately interact with peers who are blind or have visual impairments.

Blind Children's Vocational Discovery and Development Program

The DARS Division for Blind Services (DBS) Blind Children's Vocational Discovery and Development Program (BCVDDP) works together with children who are blind or visually impaired and their families to offer resources so the children can achieve their full potential.

Blindness and severe visual impairments in childhood create unique learning and developmental barriers for employment and independence later in life. The BCVDDP helps children who are blind or permanently and severely visually impaired from birth to age 22 work toward achieving financial self-sufficiency and independent lives in their community.

Specialized case management services help eligible children and their families access the medical, social, educational, developmental and other appropriate services necessary to meet these goals. Direct habilitation services help children to develop the basic skills and confidence for independence in travel, communication, social skills, life skills, career awareness and community involvement that are needed to create a foundation for success as adults.

BCVDDP offers a wide range of services that can:

- Assist a child in developing the confidence needed to be an active part of the community.
- Provide support and training to help parents understand their rights and responsibilities throughout the educational process.
- Assist a child and his or her parents in the vocational discovery and development process.
- Provide training in areas such as food preparation, money management, recreational activities and grooming.
- Provide valuable information to families for additional resources.

As BCVDDP staff members work with families, they help children develop the concepts and skills needed to reach their goals in life.



Diane Swims, Never Sinks, in Achieving Goals

Diane, 8, of Houston is an intelligent girl who was diagnosed shortly after birth with Stargardt disease, which causes progressive vision loss. Although she still had some vision, Diane's vision loss made it more difficult for her to do activities that she loved, and her parents were afraid to let Diane be independent.

DARS Blind Children's Specialist (BCS) Gabby Echavarria worked with Diane and her family. It was Echavarria's first case, and she was touched by the commitment, emotion and support Diane's family showed. "During the comprehensive assessment to determine what supports and services Diane would need, Diane's mom became very emotional. I kept pushing through the lump in my throat, holding back my own tears. I thought to myself, I must help this family as much as I can and provide them hope," explained Echavarria.

BCVDDP provided Diane with assistive devices, including a bright lamp and stand to allow her to see better in her low-lit bedroom at home. Diane also received counseling services, vision loss training and group skills training to help her learn nonvisual skills for participating in everyday activities like sports. In addition, Diane received swimming classes, which helped Diane gain confidence in herself and helped her parents gain confidence in Diane's ability to be independent without vision.

When Diane's school held an Admission, Review and Dismissal meeting with Diane's parents, BCS Echavarria attended the meeting to support the family and ensure Diane would receive the supports she needed. "Diane's mom, who speaks only Spanish, was quiet and turned to me when she could not understand something. I caught myself moving my chair closer and closer toward her, to remind her that I was there for support," explained Echavarria. When the school representatives explained the wonderful services Diane would receive at school, her mom cried, for the first time, not out of fear for her daughter's future, but out of relief and joy.

Diane is now an independent swimmer and is teaching her mom how to swim. Diane's parents are now confident in her ability to be independent and will not let Diane's vision be a barrier for anything in her life.

*Diane's parents
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in her life.*



2015 Highlights

➤ Serving More Texans

BEST was able to help a significantly greater number of Texans receive urgently needed eye medical treatment and vision screening services than predicted for 2015. Staff were able to serve 10.5 percent more consumers than originally planned.

Blindness Education, Screening and Treatment

The DARS Division for Blind Services (DBS) Blindness Education, Screening and Treatment (BEST) Program provides blindness education, vision screenings and urgent eye medical treatment services to eligible adult Texas residents.

The mission of the BEST Program is to prevent blindness by providing vision screening services and paying for treatment services for people with diabetic retinopathy, glaucoma, detached retina, or any other eye disease determined to be an urgent medical necessity by the applicant's eye doctor and DARS.

Texans in need of BEST Program treatment services should apply through their physician or optometrist. The BEST Program is funded with voluntary donations when Texans receive their initial or renewal driver's licenses or identification cards issued through the Texas Department of Public Safety.



Broderick Shares Gift of Sight with Others

Broderick Washington, 40, of Longview began experiencing difficulty with his vision in 1991, and his vision continued to worsen. Broderick's vision loss was caused by a medical condition called keratoconus which caused scarring and changes to the shape of his cornea, the clear outer layer of the eye that plays an important role in the ability to see.

As Broderick's vision decreased, he found it difficult to continue working and remain independent. "I had no idea what to do," he said, because he did not have the health care or insurance needed to address his eye condition. When an acquaintance told Broderick about BEST, he jumped at the chance to contact the program to see if they could help.

With assistance from BEST staff, Broderick was able to receive corneal transplant surgery from a local doctor who was a provider through the program. This surgery involved removing Broderick's damaged cornea and replacing it with a new cornea. The surgery was a full success and restored Broderick's vision.

In addition to assisting Broderick with the cost of surgery, BEST staff coordinated scheduling his pre- and post- surgery appointments with his doctor and helped him receive the prescriptions required after the surgery.

Today, Broderick is grateful for the assistance he received from the BEST program and the staff members who helped him restore his vision. He is also happy that the surgery he received has allowed him to continue working. "This program helped me so much! When I go out, I always try to make sure I tell anyone who may benefit from this program so maybe they can get some assistance like I did," explained Broderick.

Today, Broderick is grateful for the assistance he received from the BEST program and the staff members who helped him restore his vision.



2015 Highlights

➤ Operational Improvements

BET remodeled and upgraded 10 businesses to bring fresh equipment and new looks to BET dining areas, as well as to provide more current vending service technology.

➤ Support for Texas Job Seekers and Businesses

BET employed over 1,400 Texans in its facilities, and BET managers purchased over \$10,000 million in products for resale from Texas businesses. Additionally, DARS staff drove over 78,000 miles, completing over 1,000 consulting visits to BET businesses.

Business Enterprises of Texas

The Business Enterprises of Texas (BET) program is a federally sponsored program administered by the DARS Division for Blind Services (DBS). BET collaborates with the DBS Vocational Rehabilitation (VR) program to identify consumers who are suitable for food service and vending management training and employment.

DBS consumers who are selected to become licensed BET managers earn their personal income from profits produced by their businesses, which are located on state and federal properties. Managers hire and pay their own labor and purchase products for resale.

Businesses managed by BET managers produce more than \$65 million in annual sales. Each manager aims to provide an appealing variety of quality food and beverage choices, including healthy options, in a pleasant environment.



Manny Sets His Course for Success

When Manny Sifuentes was 4 years old, his mother took him and his older brother to see the eye doctor for what she thought would be a routine eye exam and perhaps an eyeglass prescription. When she was told her boys had congenital retinoschisis, which causes progressive vision loss, she became a fierce defender of her boys' education and even more committed to pushing them to explore their world.

Manny attended every workshop and summer program that the then Texas Commission for Blind (TCB) had organized. Through workshops and lengthy conversations with TCB counselors, he quickly realized that it was not enough to know what you want in life. He learned how to be informed, create an argument for what he wanted, write down an action plan to obtain his goals, and then push forward. He later used these same tools to advocate for others. He opened a National Federation for the Blind chapter in El Paso to educate and advocate for parents and students.

At age 25, he set the course to learn to become a Licensed Manager in the Business Enterprise of Texas (BET). He took courses at the Community College in food management and small business before going through BET Training. A year later, he was assigned to his first location, a snack bar at the Department of Homeland Security in Dallas, which he ran for 12 years. In 2011, he came to Austin to manage the cafeteria at the Texas Department of Transportation.

With 17 years in BET, he appreciates the work that has shaped his life. He now gives his time to mentor young blind people. Manny also employs a young man who is deaf, and learned some basic sign language to be able to communicate and assist the young man with his first job. Manny received the DARS Business of the Year award in 2014 for his work mentoring people with disabilities. The Business Enterprise of Texas has been a rewarding career in providing his family and helping others to reach their career goals.

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2015 Highlights

► CRS Redesign Project

As part of the CRS Redesign Project, CRS implemented new rules and policies to improve CRS program operational processes. DARS received input, feedback, and recommendations from stakeholders and partners about changes to the CRS program. New rules and policies improve budgeting and projections, oversight of expenditures, waiting list removals, staffing strategies, policy, case reviews, rate-setting methodologies and other operational processes.

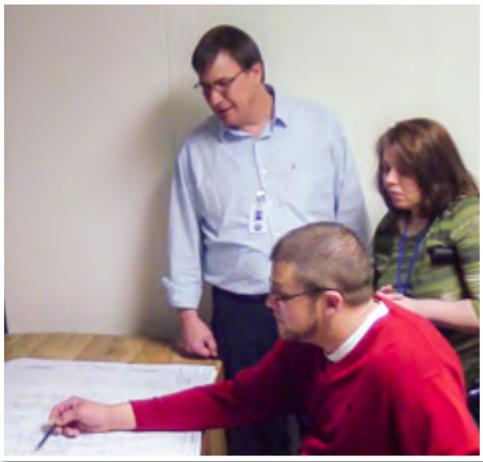
Comprehensive Rehabilitation Services

The Comprehensive Rehabilitation Services (CRS) program, operated by the DARS Division for Rehabilitation Services (DRS), provides services for people who have experienced traumatic brain injuries (TBIs) and/or spinal cord injuries (SCIs). The program works to ensure that Texans who have TBIs and/or SCIs receive individualized services to improve their ability to function independently in their home or community.

Counselors, consumers and family members work collaboratively to identify rehabilitation goals for the person who has a TBI and/or SCI and determine what services the person needs in order to support increased independence. Services may include inpatient comprehensive rehabilitation services, outpatient rehabilitation services and/or post-acute brain injury services.

To receive CRS services, a person must have a TBI and/or SCI that results in impediments to mobility, self-care or communication; be at least 15 years old; be a resident of Texas; be sufficiently medically stable to participate in treatment; be willing to accept treatment; and not be enrolled in another DRS program.

CRS implemented new rules and policies for budgeting and projections, oversight of expenditures, waiting list removals, staffing strategies, policy, case reviews, rate-setting methodologies and other operational processes.



Michael Engineers His Way to Vice President

Michael McDonald, 32, of Amarillo is an example of how DARS services can help consumers reach their goals. In 2005, Michael was involved in a motorcycle accident. Michael's accident resulted in a spinal cord injury that caused him to lose the ability to walk.

Immediately after his accident, Michael was referred to the DARS CRS program. CRS staff helped Michael receive inpatient treatment from a team of doctors, nurses and physical therapists who provided physical and occupational therapies, as well as other services, in a hospital setting. The services Michael received helped him regain independence and learn new strategies for doing activities of daily living, allowing him to begin receiving outpatient services. CRS staff also helped Michael get a wheelchair. "I would never have gotten out of bed if it were not for the CRS program," Michael explained.

Michael not only got out of bed, but he made so much progress through the CRS program that, in 2007, he was referred to the DRS Vocational Rehabilitation (VR) program. Michael told his vocational rehabilitation counselor (VRC) that he always wanted to work as an engineer, and his VRC encouraged him to pursue his goal.

Michael started his engineering training at a local university and took on a part-time job to support himself and his daughter while he was completing school. Michael gained valuable job experience and learned first-hand about the construction business through his part-time job. As Michael continued to work and progress through his engineering classes, he worked with his VRC to ensure that he met his goals and stayed on track. When Michael experienced a setback with the onset of depression, he and his VRC worked together to secure the appropriate services to help.

Today, Michael puts his engineering education and skills to use on a daily basis as the vice president of Lone Star Services, a construction company he started with an old friend. The company has grown and Michael now earns an annual salary of \$70,000 and receives health insurance for himself and his family. Michael is proud of his job and is very grateful for the services that helped him achieve such great success. He stated, "I am so appreciative of everything you have done for me over the years. You have been a safety net for me."

"I would never have gotten out of bed if it were not for the CRS program."

~ Michael McDonald



2015 Highlights

► College Prep Training Program

For the first time in 2015, CCRC awarded two college scholarships to graduates of the College Prep Training Program. This intense two-week program prepared 16 consumers for success in college and beyond through field trips to local colleges, skills training in time management, note-taking and organization, and assistance with accommodations and assistive technologies.

Criss Cole Rehabilitation Center

The Criss Cole Rehabilitation Center (CCRC) is a comprehensive vocational rehabilitation (VR) training facility operated by the DARS Division for Blind Services (DBS). CCRC works in partnership with consumers to help them achieve their employment and independent living goals. The adult residential training facility in Austin offers training in core skills such as orientation and mobility, Braille, daily living, career development, and assistive technology.

The training at CCRC addresses each consumer's specific needs. Services are provided at CCRC and in the community to help the consumer gain independence. VR consumers travel from all corners of the state to receive services at CCRC.

CCRC was named in honor of Judge Criss Cole, who lost his sight while serving as a Marine during World War II. As a member of the Texas House of Representatives and the Texas Senate, he was instrumental in providing access to services for people with disabilities.

The dedicated team at CCRC is committed to providing a positive environment that enables consumers to develop a positive attitude toward blindness, core skills and confidence. It is CCRC's goal to empower consumers to fully participate in their employment, community and society.



Software Engineer Regains Career with Help of Technology

Barry Armour, 43, of El Paso was a software engineer for more than 15 years in Dallas before losing his vision three years ago due to diabetic retinopathy, a condition that often occurs in people who have diabetes. Although Barry loved working on the computer, after losing his vision he felt that it was no longer possible for him to do so until he was referred to the DARS Criss Cole Rehabilitation Center (CCRC) by a counselor in his local DARS field office.

At CCRC, Barry learned that there were many assistive technologies available that could help him remain independent and that would allow him to continue working as a software engineer. "I had never heard of assistive technology when I had my sight and did not believe I could continue working as a software engineer since I couldn't see the computer screen," explained Barry. "At the time, I had not heard of JAWS, a screen-reading software. To me, "Jaws" was a movie!"

At CCRC, Barry not only learned how to use the assistive technology he would need to return to his career, but also gained many other nonvisual skills for daily life, employment and independence. Barry received orientation and mobility training to help him navigate his environment, and he also learned Braille, a nonvisual reading technique.

After his graduation from CCRC in April, Barry was approached by an Austin company, Knowability, and was encouraged to apply for open positions with the company. Barry was eventually offered and accepted a job as a web and mobile accessibility tester. "I get to approach my job from two perspectives, because not only am I a user of the technology I am testing but, as an engineer, I get to make a difference in the lives of others," he explained.

Barry is thankful that the loss of his vision did not force him to change careers. He is grateful for all that he learned at CCRC and how those skills helped him transition back into the workforce.

Barry is grateful for all that he learned at CCRC and how those skills helped him transition back into the workforce.



2015 Highlights

➤ New Legal and Medical Interpreter Certification Tests

DHHS developed and released two new American Sign Language (ASL) interpreter tests to allow ASL interpreters to be certified to work within specialized and underserved legal, court and medical settings.

➤ Trilingual Interpreter Certification

DHHS received an award from the Texas Society of Interpreters for the Deaf for leadership in training and certifying trilingual interpreters, who interpret spoken English, spoken Spanish and ASL. Texas is the only state to offer trilingual interpreter certification.

Deaf and Hard of Hearing Services

The DARS Division for Rehabilitation Services (DRS) Office for Deaf and Hard of Hearing Services (DHHS) works in partnership with Texans of all ages who are deaf or hard of hearing. DHHS works to eliminate societal barriers by increasing access to information and providing effective communication skills that can prevent or reduce isolation for a person who is deaf or hard of hearing.

DHHS maintains a statewide network of community partners, as well as contracted deafness and hearing loss resource specialists who identify essential training and information based on a person's specific needs.

Training may include effective communication strategies, hearing loss awareness and the use of assistive technology such as cochlear implants and hearing aids. Hearing loss resource specialists also provide individual assessments in the workplace, school and elsewhere in the community. DHHS administers a financial assistance program for people who are deaf or hard of hearing to access telephone networks.

DHHS consumers can receive advocacy and self-empowerment education, for instance, through a program for children aged 8 to 17 years old who are deaf or hard of hearing; sensitivity training and information for employers and organizations regarding federal and state mandates related to equal access; and training to enhance the skills of current and prospective sign language interpreters. DHHS is also responsible for testing, rating and certifying American Sign Language interpreters at various skill levels through the Board for Evaluation of Interpreters program.



Hector Learns to Speak Up

Hector Elizondo is an outgoing and outspoken young man. He has a hearing impairment and uses a cochlear implant in one ear and a hearing aid in the other to help increase his hearing ability.

In June 2015, Hector was referred by the DHHS for participation in a two-part transition skills workshop titled It's Your Future...Build it! The workshop's purpose was to help transition-aged youth with hearing loss gain awareness about services, supports and resources available to help them achieve their educational and employment goals. The workshop was jointly led by a Division for Rehabilitation Services (DRS) vocational rehabilitation counselor (VRC) and a DHHS resource specialist, and included presentations by a variety of speakers.

Hector remained quiet during much of the workshop as the group discussed topics such as the vocational rehabilitation process, teamwork and community resources. However, his attention was grabbed when a nurse presented to the group on several assistive listening devices. The nurse asked Hector whether he preferred his cochlear implant or his hearing aid, prompting him to think carefully about which device he felt helped him hear better. Although Hector wasn't immediately sure which device he preferred, by the time the nurse's presentation was done and he and the other students had tried out the assistive listening devices she had brought with her, Hector knew his answer—he preferred his cochlear implant.

When the workshop was over that day, DHHS staff received a phone call from Hector's mother. She asked, "What are you teaching the kids there?" The DHHS staff member responded with the information about what topics had been discussed and then asked Hector's mother if there was any problem. Hector's mother said, "No! For the first time, Hector spoke to me with boldness and told me that he can hear better with his cochlear implant and needed his second one done as soon as possible!"

Thanks to his participation in the workshop, Hector's mother says he is more outspoken and that she has never seen this side of him before. She is happy that Hector participated in the workshop — not only for all that he learned about resources and supports to help youth with hearing loss, but because of all that he learned about himself.

*"For the first time,
Hector spoke to me
with boldness and told
me that he can hear
better with his cochlear
implant and needed
his second one done as
soon as possible!"*

~ Hector's mother



2015 Highlights

➤ National Partnership

To assist the national Social Security disability program, staff of the DDS assisted with the disability workload in the states of California, New Mexico and Oklahoma by completing disability medical reviews.

➤ National Workgroups

Staff of the DDS served in leadership roles on national workgroup's to address consistency and streamlining of policy issues, a centralized disability case processing system, and Social Security anti-fraud initiatives.

➤ Community Advocacy

The DDS hosted the Commissioner of Social Security Administration (SSA) in Austin during a community wide advocacy meeting and round table conversation to further educate innovations occurring within the SS disability program.

Disability Determination Services

The DARS Division for Disability Determination Services (DDS) makes disability determinations for Texans with severe disabilities. DDS works with those who apply for and receive Social Security Administration (SSA) disability benefits to improve their quality of life. Those benefits include Social Security Disability Insurance (SSDI) and/or Supplemental Security Income (SSI).

Texans with physical and/or mental impairments apply for benefits directly to the SSA. Their application is forwarded to DDS by the SSA, which determines if an applicant is disabled according to federal criteria.

DDS obtains evidence from the claimant's own medical sources. Its staff arrange for a consultative medical examination to obtain additional information if medical evidence is unavailable or is insufficient to make a medical determination. A two-person team, consisting of a medical or psychological consultant and a DDS disability specialist, make the disability determination. DDS returns the claim to the SSA field office for appropriate action and communication with the claimant. Although DDS makes the disability determination for SSA, only SSA can determine who is eligible to receive benefits.



Building Successful Futures for Texans with Disabilities

DDS helped Texans with disabilities build successful futures in 2015 by continuing to process disability determinations with accuracy, speed and care. DDS staff were recognized by Social Security Administration Regional Commissioner Sheila Everett for clearing 323,550 disability determination cases this year, while maintaining an impressive 95.5 percent accuracy rate.

The determinations made by Texas DDS make up 7 percent of determinations made across the nation and 49 percent of the determinations made in SSA Dallas Region VI, which includes Texas, Arkansas, Louisiana, Oklahoma and New Mexico. In addition to processing a high number of determinations with a high level of accuracy, in 2015 DDS staff processed initial claims in approximately 73.4 days, which is 10.1 days faster than the national average.

DDS staff also determined 4,726 Military Casualty/ Wounded Warrior cases in 2015. Wounded Warrior cases are determined by a special unit within DDS dedicated to processing these cases in the most accurate and timely manner possible. These expedited determinations help United States military service members in Texas receive Social Security disability benefits if eligible.

Due to DDS staff's efforts, more Texans with disabilities who are eligible for Social Security benefits have access to these benefits today.

These expedited determinations help United States military service members in Texas receive Social Security disability benefits if eligible.



2015 Highlights

► High Rating for ECI System Performance

Each year, Individuals with Disabilities Education Act (IDEA) Part C programs across the nation submit an annual performance report to the U.S. Department of Education Office of Special Education Programs (OSEP). Texas was one of 23 states that received the highest rating from OSEP for meeting its targets for 11 performance indicators. ECI was 100 percent compliant and even met requirements for performance indicators that were never included before.

► State Systemic Improvement Plan (SSIP)

Texas ECI submitted the first phase of its plan to improve the social-emotional skills of infants and toddlers with developmental delays to the U.S. Department of Education OSEP in 2015. This plan is part of the SSIP, which focuses on improving services and outcomes for children and families receiving ECI services.

Early Childhood Intervention Services

Early Childhood Intervention (ECI) Services is the federal Individuals with Disabilities Education Act (IDEA) Part C program in Texas that works with families that have children birth to 36 months of age with developmental delays or disabilities.

Most referrals to ECI come from the medical community or directly from families. Other sources include the Texas Department of Family and Protective Services, childcare providers and social service agencies.

Infants and toddlers living in Texas may be eligible for ECI services if the child has:

- A developmental delay that significantly affects functioning in one or more areas of development, including cognitive, communication, motor, adaptive or social-emotional.
- A medically diagnosed condition that has a high probability of resulting in a developmental delay.
- A hearing or visual impairment as defined by the Texas Education Agency.

DARS contracts with local agencies to provide ECI services across Texas. Contractors include community centers, school districts, education service centers and private nonprofit organizations. The services are financed through federal, state and local funds; Medicaid; or private insurance and family fees.

ECI services feature individualized planning, family-centered services based on the needs of each family and child, professional and credentialed providers, and comprehensive management of each child's case. Additionally, while most services are provided at home, they can also be provided in other familiar settings where the child goes regularly. Before the child turns 3, the ECI team works with the family to determine the next steps for helping the child transition to services beyond ECI.



For Pinion Family, Good Things Come in Threes

Liz and Santiago Pinon welcomed triplets Felicity, Frida and Santiago into their family on Aug. 23, 2012. The triplets were born in a hospital in Illinois 15 weeks early. In addition to only weighing up to 1 pound, 8 ounces, making them micro-preemies, they were also diagnosed with cerebral palsy.

Shortly after the triplets were born, new opportunities brought the Pinon family to Texas where they contacted ECI. "I contacted Texas ECI to see what I needed to do to get my babies in the program. They were very responsive and began services shortly after we arrived," stated Liz. ECI professionals worked with the family to develop a plan for each baby. Felicity, Frida and Santiago all required occupational, physical and speech therapies.

A priority goal for Felicity, Frida and Santiago was to improve their language skills. The ECI speech therapist worked with the parents by showing them techniques to improve language when reading books to the children. ECI recommended Liz talk about the colors in the book or talk about what was happening in the story. "I have noticed improvement, especially with Santiago [not speaking] at all to being one of my more vocal kids," laughed Liz. Another goal was to help the children improve their mobility, and ECI taught Liz and Santiago different techniques to help their triplets develop their fine and gross motor skills.

ECI services helped not only the triplets, but also helped the family as a whole. The Pinon family's adopted 11-year-old son, Gabriel, benefited from the same fine and gross motor skills techniques as his siblings. "I now see what areas my son needed assistance in, and I was able to help him too," commented Liz. This is an example of how ECI teaches the family important skills to help the entire family.

Felicity, Frida and Santiago are doing very well. They have all moved on to school and continue to develop new skills. "ECI really cared about our family and that was important to me and my husband," shared Liz. "We are so thankful to ECI. Without them we're not sure where we would be today."

"I have noticed improvement, especially with Santiago [not speaking] at all to being one of my more vocal kids."

~ Liz Pinon



Building Blocks Help Noah and Family Connect

Deidre and Dustin of Mansfield welcomed their son Noah into their family on June 26, 2012. As Noah grew, Deidre did not suspect he was not reaching developmental milestones at the same time as other kids his age until she talked with coworkers whose children were waving goodbye, pointing to items they wanted, or saying simple words like “mama” or “dada.”

“I know you’re not supposed to compare your child to someone else’s, but something just didn’t seem right,” said Deidre. She spoke with Dustin, and they decided it was time to consult Noah’s pediatrician, who referred them to ECI.

At first, Deidre thought her son might need a little more time to reach developmental milestones. Once ECI professionals conducted an evaluation and assessment, Deidre and Dustin made the decision to enter Noah in the ECI program at 18 months old. A plan of services, which included occupational and speech therapies, was developed for Noah and his family.

Learning how to ask for things was a priority goal for Noah. The ECI speech therapist taught Noah and his parents how to use sign language to help Noah communicate his wants and needs, including how to sign the word “more.” In addition, the speech therapist helped Noah’s family learn techniques to help Noah orally communicate his needs to them. Noah’s parents were able to use these techniques even when the speech therapist was not present.

Noah enjoyed using his building blocks, but his parents noticed he would become upset when his building blocks would fall down. ECI staff asked his parents to have him stack three blocks, knock them down, and then explain to him it was okay. Noah’s parents had to repeat this process by increasing the number of blocks he would stack each time. “Once we began doing this with Noah, we saw a reduction in his tantrums. This was a huge positive step forward for him,” commented Deidre.

Today, Noah is a happy little boy who is more social with his family and can say “I love you.” Noah loves to read and play on his iPad and attends school where he continues to learn new things. “ECI was there for us when no one else was. They gave us a lot of ideas and strategies [that are] working. We are so appreciative of the support to our family,” said Deidre.

*“ECI was there for us
when no one else was.*

*They gave us a lot of
ideas and strategies*

[that are] working.

*We are so appreciative
of the support to our
family.”*

~ Deidre Mansfield



2015 Highlights

► Increased Success

Consumers receiving IL services from DBS achieved their independent living goals and closed their cases successfully at a truly impressive rate. Five percent more DBS IL consumers than anticipated for 2015 successfully closed their cases.

► Increased Service

More consumers were able to receive IL services from DRS. IL staff served 4.3 percent more consumers than anticipated for 2015.

Independent Living Services and Centers for Independent Living

DARS Independent Living (IL) programs promote the independent living philosophy of consumer control, peer support, self-help, self-determination, equal access and self-advocacy. The goal is to maximize the empowerment, independence and productivity of people with disabilities through integration and full inclusion into society.

Services provided by the Division for Rehabilitation Services (DRS) may include information and referral, counseling, adaptive aids, telecommunications, vehicle modification and minor home modifications.

Services provided by the Division for Blind Services (DBS) may include training in orientation and mobility, Braille, and adaptive skills provided in the home or other familiar settings. In addition, DBS operates the Older Blind Independent Living program, which provides services specially designed to meet the needs of adults 55 and older who are blind or visually impaired.

The Centers for Independent Living (CILs) provide advocacy, information, referrals, peer counseling and independent living skills training. There are 27 CILs in Texas: 15 are funded by DARS, and both DRS and DBS may collaborate with any of the CILs statewide.



Sandra's World Opens Up After Vision Loss

Sandra Daniels is an independent person with a great sense of humor. In 2004 and again in 2011, Sandra received radiation treatment for a tumor that was close to her optic nerve, the primary nerve of the eye. Although doctors warned her that blindness might result, she never thought it would happen to her. Seven years after her first treatment, at the age of 41, Sandra lost her vision and began her journey toward reclaiming her independence.

When Sandra first lost her vision she found many everyday activities difficult, including meal preparation, personal grooming, household chores and managing her medical conditions. Although Sandra had an assistant come to her home to help with these activities, she wanted to regain her independence. Sandra was referred to DBS for IL services and began working toward her goal.

With assistance from her IL worker, Sandra completed a variety of essential nonvisual skills training. She received training in managing her medical condition of diabetes, orientation and mobility training to help her navigate her home, and independent living skills training. Within a year, Sandra no longer required an assistant since she had gained the skills to care of herself.

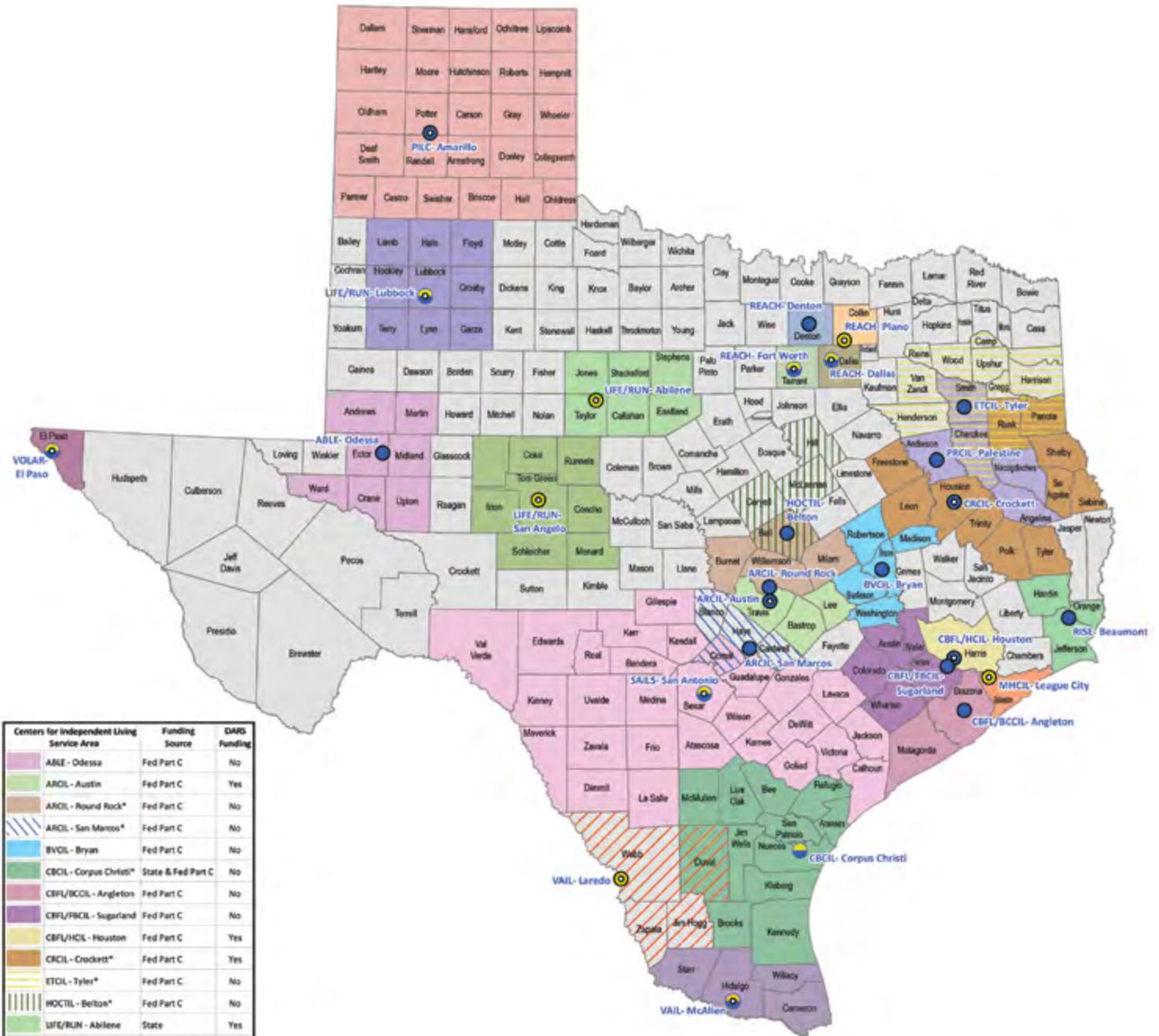
Sandra also participated in group skills training where she learned Braille. She also learned how to use a Braille, a typewriter with keys that are imprinted with Braille letters. In addition, Sandra was given and taught how to use optical character recognition technology, which scans printed text and converts it into digital text that can be read aloud through specialized software.

With a variety of nonvisual skills and assistive technologies to support her, Sandra has regained her confidence and independence. "What's funny is, until I lost my sight, I stayed secluded in my house on the Internet. When I lost my sight, my world opened up to a new and beautiful one," explained Sandra. Sandra has recently written a children's book, volunteers at a local public library and continues to look for new ways to engage with the community and live to her fullest potential.

"What's funny is, until I lost my sight, I stayed secluded in my house on the Internet. When I lost my sight, my world opened up to a new and beautiful one."

~ Sandra Daniels

CIL Area Map



Centers for Independent Living Service Area	Funding Source	DARS Funding
ABLE - Odessa	Fed Part C	No
ARCIL - Austin	Fed Part C	Yes
ARCIL - Round Rock*	Fed Part C	No
ARCIL - San Marcos*	Fed Part C	No
BVCIL - Bryan	Fed Part C	No
CBCL - Corpus Christi*	State & Fed Part C	No
CBFL/BCCIL - Angleton	Fed Part C	No
CBFL/FBCL - Sugarland	Fed Part C	No
CBFL/HCL - Houston	Fed Part C	Yes
CRCIL - Crockett*	Fed Part C	Yes
ETCL - Tyler*	Fed Part C	No
HOCTIL - Belton*	Fed Part C	No
LIFE/RUN - Abilene	State	Yes
LIFE/RUN - Lubbock	State & Fed Part C	Yes
LIFE/RUN - San Angelo	State	Yes
MHCL - League City	State	Yes
PILC - Amarillo	Fed Part C	Yes
PRCIL - Palestine*	Fed Part C	No
REACH - Dallas	State & Fed Part C	Yes
REACH - Denton	Fed Part C	No
REACH - Fort Worth	State	Yes
REACH - Plano	State	Yes
RISE - Beaumont	Fed Part C	No
SAILS - San Antonio*	State & Fed Part C	Yes
VAIL - Laredo*	State	Yes
VAIL - McAllen	State & Fed Part C	Yes
VOLAR - El Paso	State & Fed Part C	Yes
Unserviced		

CIL Location by Funding Source

- DARS Funding
- Federal Funding
- State Funding
- State & Federal Funding



2015 Highlights

► Business Relations Team

DBS and DRS VR program staff partnered to form the Business Relations Team, responsible for coordinating the efforts of both divisions to strengthen and develop partnerships with businesses across Texas. The team's goal is to help Texas businesses achieve a diversified, qualified workforce and help qualified people with disabilities gain competitive employment. Team members refer qualified people with disabilities to businesses to meet staffing needs and provide resources and guidance to business partners.

► Pre-Employment Transition Services (Pre-ETS) for Youth and Students

The Workforce Innovation and Opportunity Act added Pre-ETS to the array of VR services. These services meet the needs of transition-age students with disabilities and include job exploration and counseling, work-based learning experiences, counseling on opportunities for higher education, workplace readiness training and self-advocacy.

► Increased Services to Consumers with Autism Spectrum Disorder (ASD)

The DRS VR program published three new VR policies that provided additional resources to meet the needs of VR consumers with a diagnosis on the autism spectrum, including implementing ASD supports services to address and reduce barriers to employment, and developing an environmental work assessment to determine the appropriate work environment for each person to maximize job performance.

Vocational Rehabilitation Services

The DARS vocational rehabilitation (VR) programs help people with physical disabilities or mental and behavioral health issues prepare for, find or keep employment. The DARS Division for Blind Services (DBS) and the Division for Rehabilitation Services (DRS) offer 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.

DBS offers VR services to Texans who are blind or visually impaired, including services to help transition-age students effectively transition from secondary school to adult life and the world of work.

VR services through DBS include assessments, rehabilitation teaching, counseling and referral, deafblind services, orientation and mobility training, physical and mental restoration, reader services, transportation, technological aids and devices, vocational training, and employment assistance. In addition, DBS provides Pre-Employment Transition Services to students with disabilities.

DRS offers VR services to adult Texans and transition-age youth and students with a wide variety of disabilities, including those related to mental and behavioral health, hearing impairment, impairments of arms and legs, back injuries, intellectual and developmental disabilities, learning disabilities, spinal cord injuries, traumatic brain injuries, and any other physical or mental disabilities that prevent a person from finding and keeping employment.

VR services through DRS include vocational counseling and evaluation, vocational training, hearing and medical examinations, physical and mental restoration, assistive and rehabilitation technology devices, employment assistance, and follow-up after employment to ensure success. In addition, DRS provides Pre-Employment Transition Services to students with disabilities.



Kevin Advances Career, Pursues Goals

Kevin Kinchen, 54, of League City has been a self-employed minister for more than 30 years, is an author and has traveled locally and worldwide as a public speaker. In 2008, Kevin's wife Margie noticed that he was dropping things. He sought medical testing and was told that he had amyotrophic lateral sclerosis (ALS). ALS leads to an inability to move muscles and may also effect activities such as speaking, eating and breathing.

Kevin found that it was increasingly challenging to maintain his ministry because he could no longer use his hands to grasp things, and he quickly became tired and unstable while walking. Kevin started using his feet to manipulate objects. Through sheer determination, Kevin authored his book, *The Secret Place, Revealed*, by using his feet, and sometimes his hand, to hold the computer mouse.

As Kevin's condition worsened, he and his wife started looking for assistance that would allow him to continue advancing in his profession. Kevin's neurologist referred him to the DRS VR program.

Kevin's VRC worked with him and his wife to determine services and supports needed and helped them coordinate with doctors, vendors and insurance companies to receive services. As result of coordinated efforts, Kevin received counseling and guidance, a customized power wheelchair and assistance with the purchase of a modified van.

Doctors originally predicted that Kevin had three to five years to live when he was diagnosed with ALS, and he is happy to have proven them wrong. Kevin has not let his diagnosis stop him from pursuing his goals. "I tried depression; it did not work out too good," said Kevin. So, I made up my mind that I'm not doing that." He remains actively employed and continues to write blogs, accept speaking engagements, be an involved parent and grandparent, and provide support for those newly diagnosed with ALS. He is currently writing two new books.

As a result of coordinated efforts, Kevin received counseling and guidance, a customized power wheelchair and assistance with the purchase of a modified van.



Kerwin Continues Working on Beloved Cattle Ranch

Kerwin Denton, 57, of Winters values the independence he learned growing up on a cattle ranch. Kerwin's independent spirit helped him build a successful career as a rancher until he lost his sight due to an accident at age 37. Although Kerwin's ranch hands and his wife of 38 years — the love of his life — helped him continue to run his ranch after his accident, Kerwin knew he had to find new ways to continue being independent and doing the work he loved.

When Kerwin first met with his DBS VRC to discuss how DARS could help him achieve his goals, he was still working on his ranch and was relying heavily on a battered white cane. When his VRC asked Kerwin about his cane and why it was so worn, he explained that his cane was not just a way for him to navigate his property, but that he also often relied on it to herd cattle and to warn them of his presence to prevent them from injuring him. The first thing Kerwin's VRC did was arrange for DARS to provide Kerwin with a new white cane.

In addition, Kerwin received orientation and mobility training, assistive technology and training in nonvisual techniques to help him make repairs on his ranch and care for his cattle. Kerwin received and was taught how to use a talking GPS unit and compass, and is now able to get around his ranch without having to ask his ranch hands to drive him in their trucks. Kerwin also received and learned to use a talking tape measure, click ruler, liquid level indicator and a nail holder and is able to replace windows and perform maintenance and repair activities at the ranch with little assistance.

Today, Kerwin's ranch is doing better than ever. He expects to add almost 200 head of cattle to his herd in the next few months. He credits this success to his greater level of confidence and independence as a result of receiving training and assistive devices from DARS. He said, "The services that I received went over and above what I expected."

Kerwin credits this success to his greater level of confidence and independence as a result of receiving training and assistive devices from DARS.



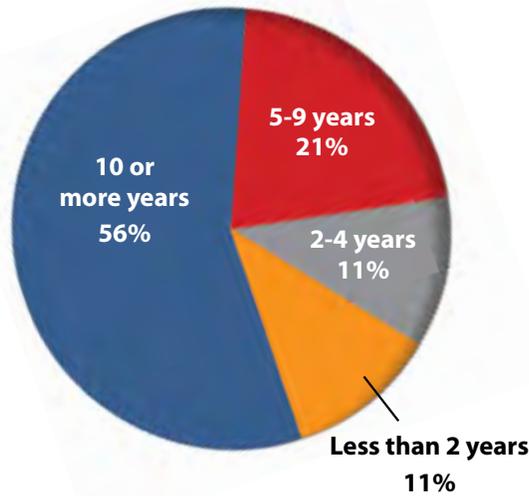
DARS Statistics

*At DARS, we measure our successes in two ways. We measure success through our consumers' everyday victories and also through statistics that demonstrate how our **legacy of compassionate service** makes it possible for consumers to achieve their goals and enjoy the same opportunities as other Texans.*

Texas Department of Assistive and Rehabilitative Services

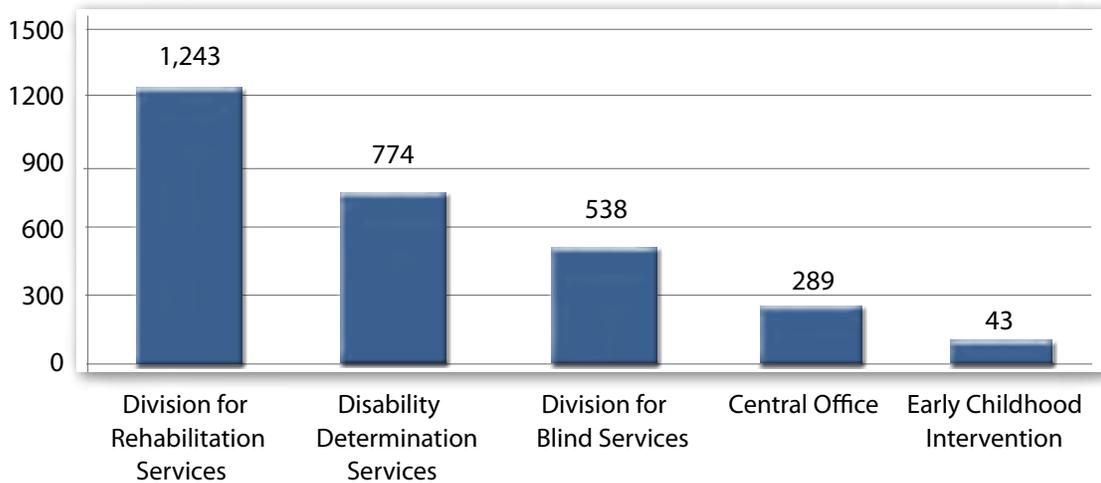
Employees: Who We Are

DARS enjoys a stable, long-tenured workforce. More than 56 percent of our employees have at least 10 years of state service.



In fiscal year 2015, DARS employed approximately 2,887 full and part time employees. The majority of DARS employees (2,598) were assigned to direct-service delivery and dispersed throughout Texas.

DARS Workforce by Division



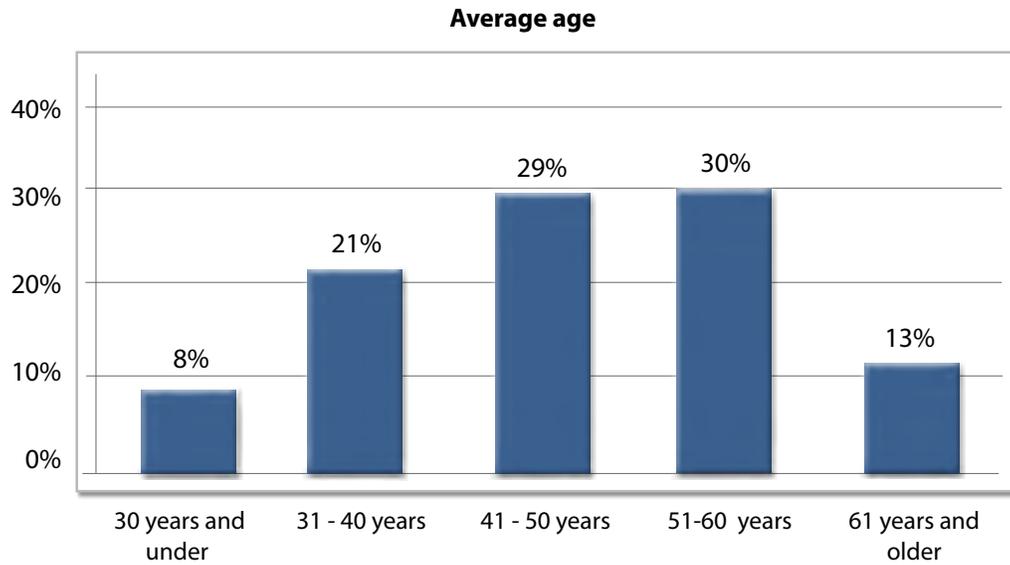
DARS had an employee turnover rate at 12.8 percent (including interagency transfers). Excluding retirements and involuntary separations, the turnover rate at DARS was 7.8 percent.

(Note: This information is based on "An Annual Report on Classified Employee Turnover for Fiscal Year 2015," from the Texas State Auditor's Office.)

Race/ethnicity: 28 percent Hispanic; Non Hispanic: 46 percent White, 23 percent African American, 3 percent Asian or Pacific Islander

(Consumers may report more than one race/ethnicity so total may exceed 100 percent.)

Gender: 24 percent male, 76 percent female



DARS Operating Budget - 2015

Expenditures by division

Division/program/function	Dollars
Rehabilitation Services	\$263,091,414
Early Childhood Intervention	\$140,691,606
Disability Determination Services	\$112,968,108
Blind Services	\$ 63,332,164
Program support	\$20,446,281
Autism	\$4,337,104
Deaf/hard of hearing	\$4,701,608
TOTAL	\$609,568,284

Expenditures by category

Category	Dollars
Services and grants	\$388,073,144
Salaries and wages	\$146,764,003
Operating expenses	\$74,731,138
TOTAL	\$609,568,284

Budget by method of finance

Method of finance	Dollars
Federal funds	\$468,213,927
General revenue related (GR and GR Dedicated)	\$120,639,637
Other funds	\$20,714,721
TOTAL	\$609,568,284

Autism Program

Operating budget: \$4,337,104

Average monthly cost per consumer: \$1,882

Consumers

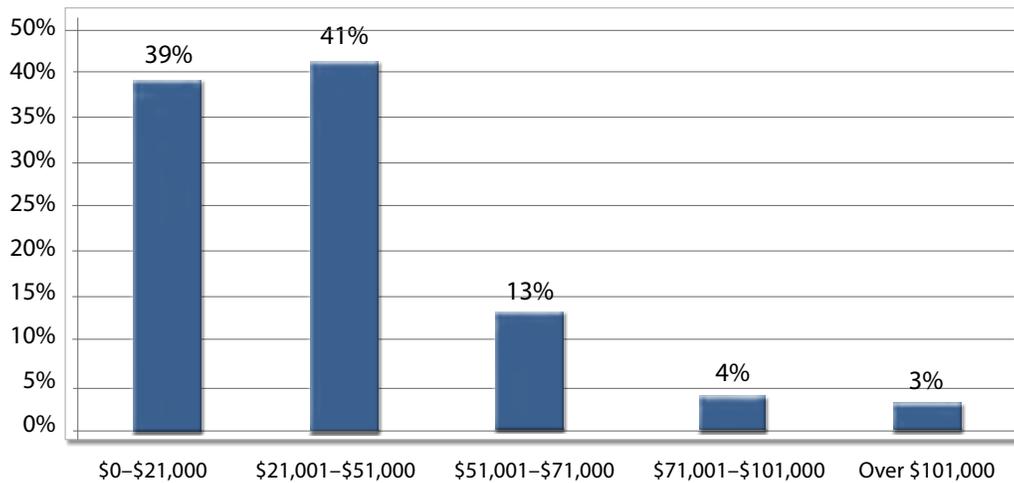
Race/ethnicity: 51 percent Hispanic; Non Hispanic: 28 percent White, 13 percent African American, 8 percent Asian, 1 percent American Indian/Alaskan Native, 1 percent Hawaiian/Pacific Islander
(Consumers may report more than one race/ethnicity so total may exceed 100 percent.)

Primary language: 83 percent English, 16 percent Spanish, 1 percent other

Gender: 83 percent male, 17 percent female

Age at entry to services: 52 percent were 3–5 years, 40 percent were 6–8 years, 7 percent were 9–15 years

Gross family income



Services

	Children Who Received Services	
	Number	Percent of Total
Comprehensive Applied Behavior Analysis	204	71%
Focused Applied Behavioral Analysis	93	32%

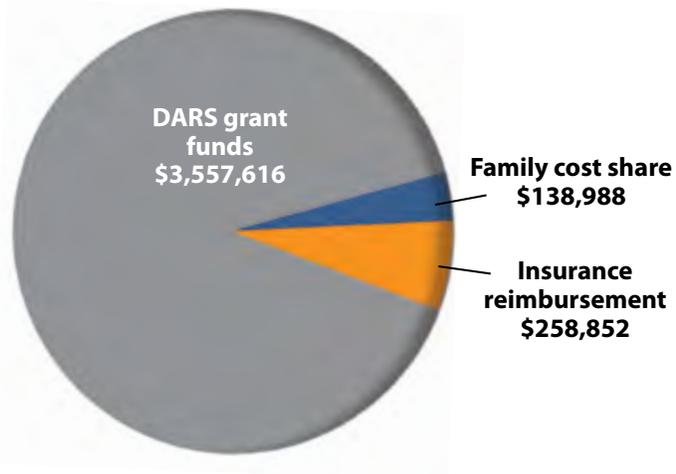
(Children may have received both Comprehensive & Focused ABA services during the year.)

Outcomes

Total consumers served: 288

Hours of service provided: 94,902

Payor of Autism Services



Blind Children’s Vocational Discovery and Development Program

Operating budget: \$5,004,046

Average monthly cost per consumer: \$112

Consumers

Disability: 68 percent had more than one disability

Race/ethnicity: 43 percent Hispanic; Non Hispanic: 41 percent White, 14 percent African American, 2 percent Asian, 1 percent American Indian/Alaskan Native
(Consumers may report more than one race/ethnicity so total may exceed 100 percent.)

Gender: 56 percent male, 44 percent female

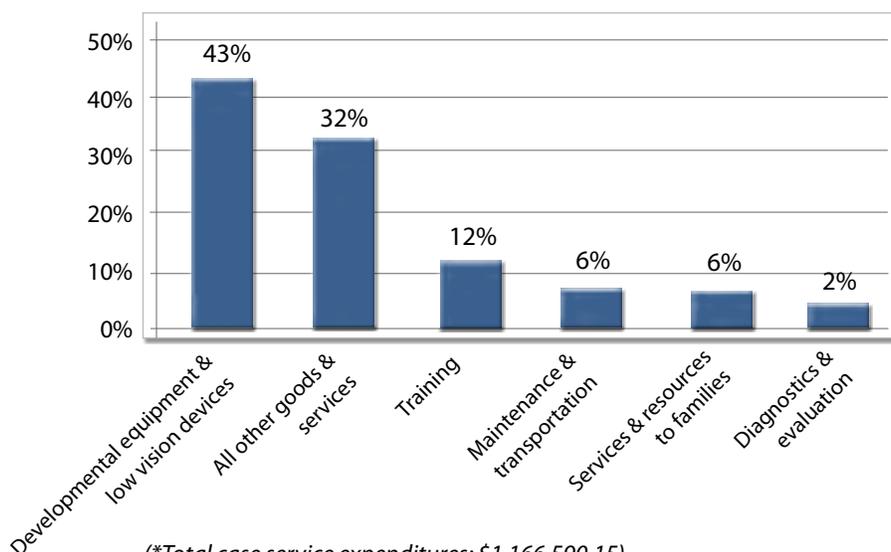
Average age at application

	Consumers	Percent*
0 - 9	3750	93%
10 - 17	279	7%
18 - 22	24	1%
TOTAL	4,053	100%

*(*Percentages are based on consumers for whom age is known; percentages are rounded and may not add up to 100 percent.)*

Services

Percent of dollars spent on purchased services by category*



*(*Total case service expenditures: \$1,166,590.15)*

Outcomes

Total consumers served: 4,357

Consumers successfully completing services: 385

Number of new referrals: 692

Number of new applicants: 581

Early Childhood Intervention Services

Operating budget: \$140,691,606

Average monthly cost per consumer: \$440*

*Based on Comprehensive Services

Consumers

Race/ethnicity: 52 percent Hispanic; Non Hispanic: 36 percent White, 9 percent African American, 3 percent other

(Consumers may report more than one race/ethnicity so total may exceed 100 percent.)

Primary language: 83 percent English; 17 percent Spanish

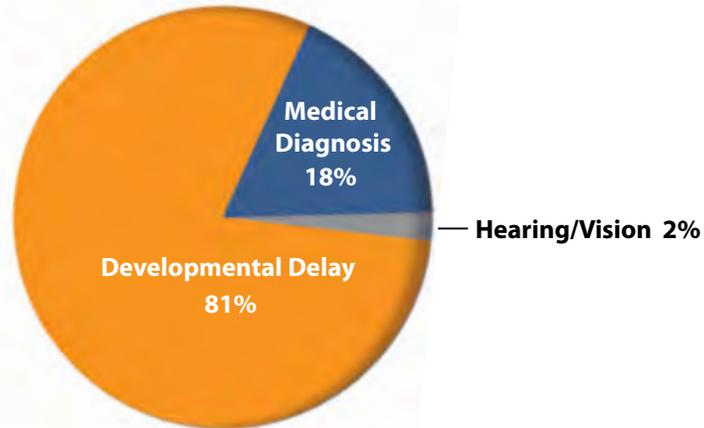
Gender: 64 percent male, 36 percent female

Medicaid: 65 percent

Age at enrollment

	Percent
0 - 12 months	37%
13 - 24 months	34%
25 - 36 months	30%

Reason for eligibility



Referral source

	Percent
Medical and health services	51%
Parent, family and friends	25%
Social services	14%
ECI programs	8%
Educational	2%
TOTAL	100%

Services

Planned service types	Percent*
Service coordination	100%
Specialized skills training (developmental services)	82%
Speech language therapy	59%
Occupational therapy	30%
Physical therapy	26%
Nutrition	8%
Psychological and social work	4%
Audiology	2%
Vision	2%
Behavioral intervention	1%

(*Total planned service types sum to more than 100 percent because consumers may receive multiple services.)

Outcomes

Total number of children who

Were referred: 73,488

Received comprehensive services: 50,634

Received follow-up: 1,562

Percent of children with greater-than-expected developmental progress in three outcome areas

Outcome area	Percent*
Social relationships	78%
Knowledge and skills	77%
Action to meet needs (self-care)	71%

(*Outcomes reflect substantial increases in rates of growth and changes in development beyond what would be expected without intervention.)

Contracts with local community agencies and organizations: 50

Blindness Education, Screening, and Treatment

Operating budget: \$347,244

Average cost per consumer: \$104

Consumers

Race/ethnicity: 86 percent Hispanic; Non Hispanic: 11 percent White, 2 percent Asian
(Consumers may report more than one race/ethnicity so total may exceed 100 percent.)

Gender: 45 percent male, 55 percent female

Average age at application: 54 years

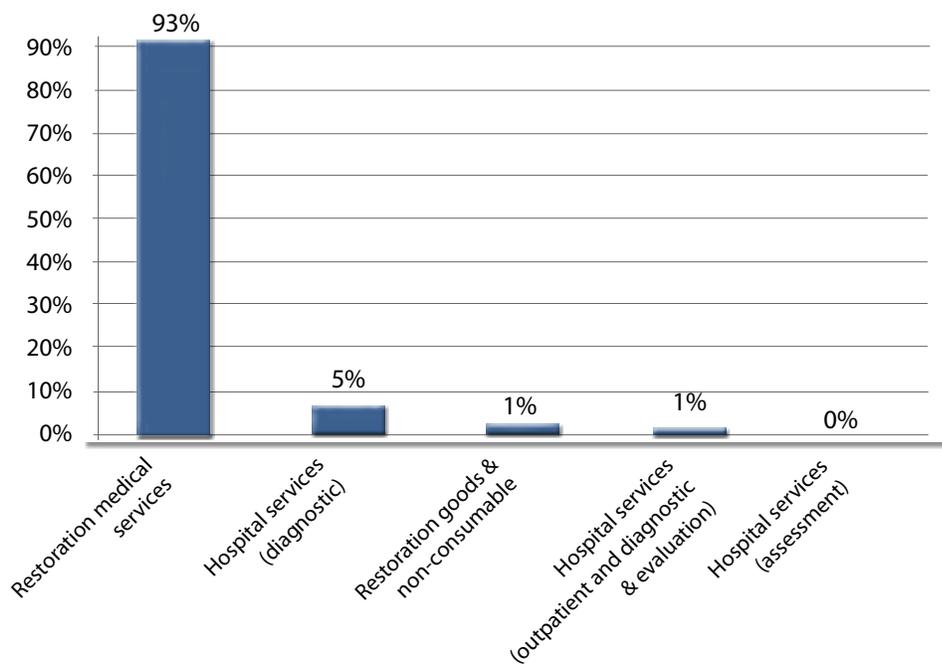
Consumer by eye condition or disease

	Number	Percent*
Diabetic retinopathy	74	83%
Glaucoma	6	7%
Detached retina	5	6%
Other	4	4%
Total number receiving BEST treatment	89	100%

(*Percentages are rounded and may not add to 100 percent.)

Services

Expenditures by type of treatment service*



(*Total expenditures for treatment services: \$247,216)

Outcomes

Total consumers served: 3,353

- Number screened: 3,264

- Number who received BEST treatment: 89

Number screened who were referred for additional and/or more comprehensive eye exams: 2,786

Business Enterprises of Texas

Operating budget: \$2,522,061

Consumers

Race/ethnicity: 26 percent Hispanic; Non Hispanic: 64 percent White, 9 percent African American, 1 percent Asian

(Consumers may report more than one race/ethnicity so total may exceed 100 percent.)

Gender: 81 percent male, 19 percent female

Average age at application: 55 years

Services

Service*	Amount	Percent*
Replacement of existing equipment	\$360,000	31%
Replacement of outdated equipment	\$250,000	22%
Repair of existing equipment	\$200,000	17%
Purchase of new equipment (Capital projects)	\$130,000	11%
Professional fees	\$80,000	7%
New product inventories for managers	\$70,000	6%
Liability insurance	\$40,000	3%
Training	\$20,000	2%
TOTAL BET services*	\$1,150,000	\$100%

*(*Percentages are rounded and may not add up to 100 percent.)*

Outcomes

Businesses throughout Texas produce more than \$12 million in earnings for managers who are blind and operating the businesses.

Managers produce more than \$1.5 million annually in sales tax revenues for the state.

Managers purchase more than \$10.5 million annually in goods from businesses in Texas.

BET employs more than 1400 Texans, 119 of whom (8 percent) have disabilities.

72 businesses on state properties produce sales of \$14 million.

45 businesses on federal properties produce sales of \$54 million.

Type of business	Number	Sales
Vending service facilities	76	\$9,600,000
Cafeterias	19	\$53,000,000
Delicatessen and snack bars	17	\$3,100,000
Convenience stores	5	\$1,600,000
TOTAL	117	\$67,300,000

Comprehensive Rehabilitation Services

Operating budget: \$23,959,228

Average monthly cost per consumer: \$3,840

Consumers

Disability: 62 percent traumatic brain injury (TBI); 32 percent spinal cord injury (SCI); 6 percent both TBI and SCI

Race/ethnicity: 29 percent Hispanic; Non Hispanic: 55 percent White, 15 percent African American, 1 percent Asian
(Consumers may report multiple race/ethnic categories.)

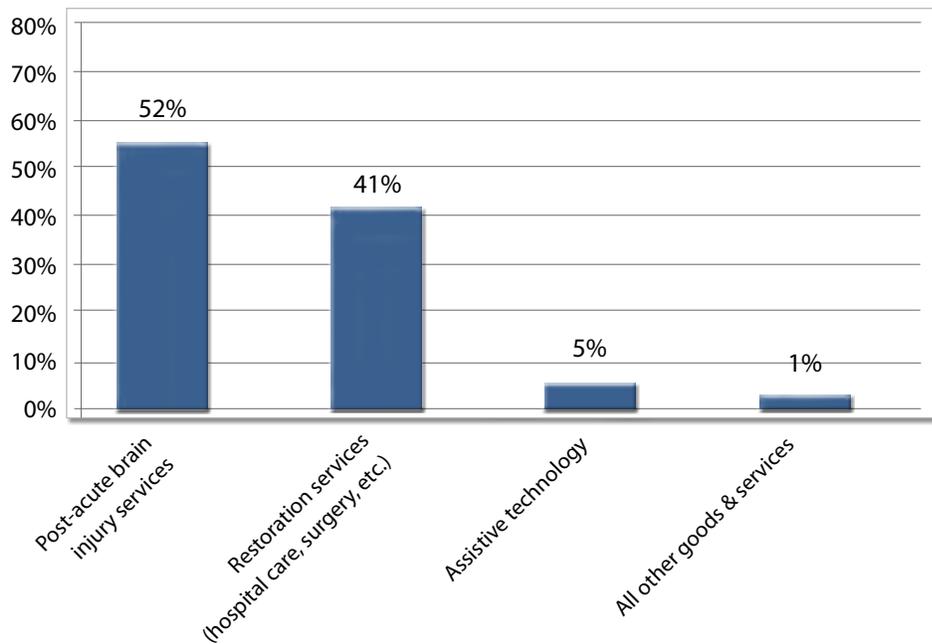
Gender: 76 percent male, 24 percent female

Average age at application: 38 years

Veterans: 60

Services

Percent of dollars spent on purchased services by category*



(*Total service expenditures: \$22,344,398)

Outcomes

Total consumers served: 983

Number of new applicants: 669

Successful closures: 333

Living arrangements: 93 percent of consumers lived at home or with family at time of closure

Deaf and Hard of Hearing Services

DHHS consumers and services	Number
Individuals who are deaf or hard of hearing who received communication access services	44,501
Equipment and service vouchers issued to people with disabilities	19,582
Interpreter certificates issued	1,790
Consumers educated and interpreters trained	2,397

Independent Living Services

DRS IL operating budget: \$8,155,533
DRS IL average monthly cost per consumer: \$471

DRS IL Consumers

Race/ethnicity: 33 percent Hispanic; Non Hispanic: 49 percent White, 17 percent African American, 1 percent Asian

(Consumers may report more than one race/ethnicity so total may exceed 100 percent.)

Gender: 46 percent male, 54 percent female

Average age at application: 63 years

DBS IL operating budget: \$3,341,762
DBS IL average cost per consumer: \$908

DBS IL Consumers

Race/ethnicity: Non Hispanic: 55 percent White, 19 percent African American, 1 percent American Indian/Alaskan Native

(Consumers may report more than one race/ethnicity so total may exceed 100 percent.)

Gender: 33 percent male, 57 percent female

Average age at application: 68 years

	DRS		DBS	
	Number	Percent	Number	Percent
Number of applicants in SFY	1,212	43%	1264	34%
Number determined eligible in SFY	1,400	50%	989	27%
Older adults (ages 55 & over)	1,982	71%	1,703	46%
Veterans, other than dishonorable discharge	136	5%	0	0%
SSI or SSDI recipients	1,823	65%	1,180	32%
Total IL consumers served	2,796	100%	3,680	100%

Disabilities

Primary disability	DRS		DBS	
	Number	Percent	Number	Percent
Deaf and/or hard of hearing	1,289	46%		
Musculoskeletal, neurological and orthopedic	1,110	40%		
SCI/TBI	151	5%		
Diabetes mellitus	92	3%		
Cardiac, respiratory and circulatory	74	3%		
Other	70	3%		
Cognitive	9	0%		
Emotional, mental, and psychosocial	1	0%		
Blind and/or visually impaired	0	0%	3,680	100%
TOTAL	2,796	100%	3,680	100%

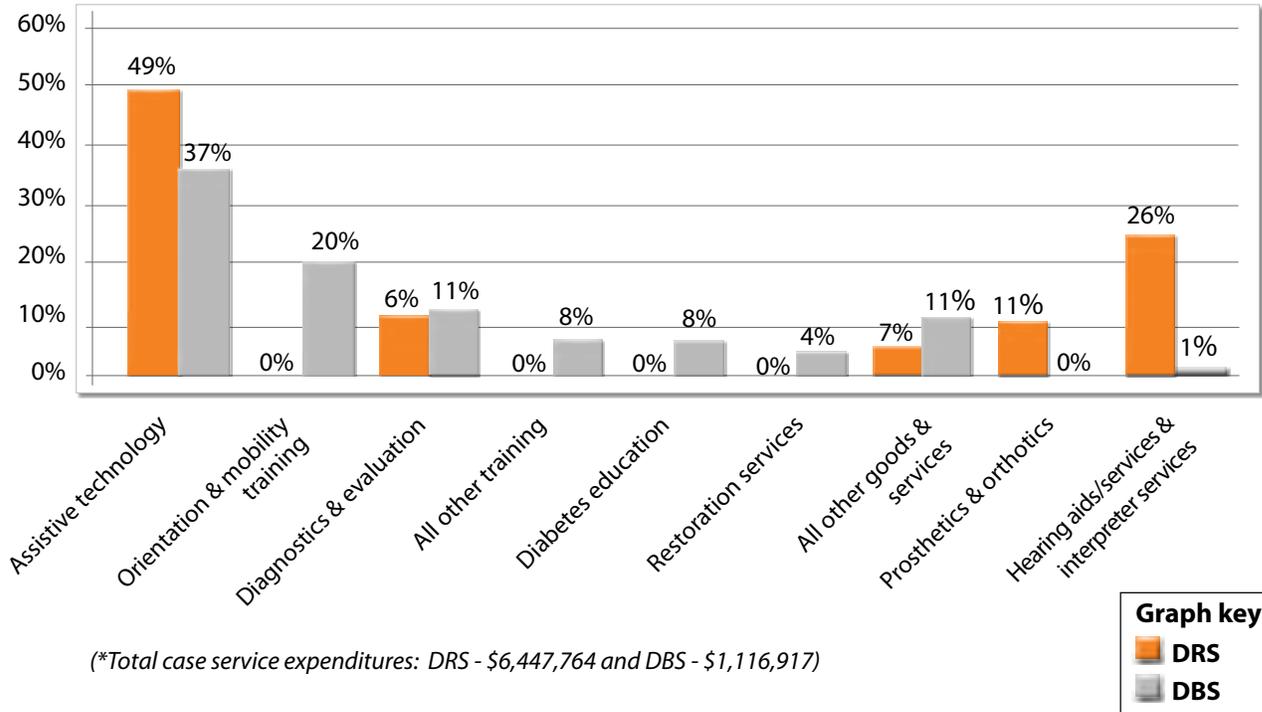
Consumers with multiple disabilities				
Consumers with multiple disabilities	772	28%	1,720	47%

Consumers with primary or secondary disabilities				
Emotional and mental health disorder	67	2%	80	2%
Deaf and/or hard of hearing	1,343	48%	386	10%
Substance abuse	1	0%	0	0%
Intellectual disability	14	1%	25	1%
Autism	1	0%	3	0%
Traumatic brain injury or spinal cord injury	168	6%	15	0%

IL Insurance Coverage

	DRS		DBS	
	Number	Percent	Number	Percent
Medicare	1,989	71%	2,560	70%
Medicaid	852	30%	851	23%
Private insurance	371	13%	829	23%

Average life of case costs (purchased services) for successful closures*



Outcomes

	DRS	DBS
Successful closures	1,032	1,546
Length of time from plan to successful closure	9 months	9 months
Average life of case costs for successful closures	\$6,258	\$544

Centers for Independent Living Services

Operating budget: \$2,689,283

Average cost per consumer: \$437

Services

DARS funds 15 of the 27 Centers for Independent Living (CIL) in Texas.

Service	Number of services provided*
Information & Referral (I & R) - general	29,141
Advocacy and legal	10,403
IL skills training and life skills training	6,340
Assistive devices and equipment	4,427
Transportation	4,315
Peer counseling	4,070
Recreational	3,773
Housing, home modifications and shelter	3,755
Communication	3,449
Vocational	2,376
Preventative	1,491
Youth	1,075
Counseling and related services	904
Physical restoration	655
Relocation from nursing home or institution to community	623
Mobility training	481
Rehabilitation technology	315
Personal assistance	249
Family	224
Prostheses, orthotics and other appliances	93
Therapeutic treatment	78
Mental restoration	56
Children	45
All other services	1,393
TOTAL	79,731

(*CIL consumers (with a plan or waiver) may have accessed these services multiple times.)

Outcomes

Total consumers served under a plan or waiver: 6,159

Additional number served (without a plan or waiver): 121,423

Vocational Rehabilitation Services

DRS VR operating budget: \$228,287,369
DRS VR average cost per consumer: \$2,648
Regional offices: 5
Field offices: 120

DRS VR Consumers

Race/ethnicity: 29 percent Hispanic; Non Hispanic: 45 percent White, 25 percent African American, 1 percent Asian, 1 percent American Indian/Alaskan Native
(Consumers may report more than one race/ethnicity so total may exceed 100 percent.)
Gender: 55 percent male, 45 percent female
Average age: 36 years

DBS VR operating budget: \$51,711,010
DBS VR average cost per consumer: \$4,685
Regional offices: 12
Field offices: 13

DBS VR Consumers

Race/ethnicity: 37 percent Hispanic; Non Hispanic: 37 percent White, 23 percent African American, 2 percent Asian, 1 percent American Indian/Alaskan Native
(Consumers may report more than one race/ethnicity so total may exceed 100 percent.)
Gender: 53 percent male, 47% female
Average age: 37 years

VR consumers

	DRS		DBS	
	Number	Percent	Number	Percent
Total eligibles served (eligibility through closure)	75,738	88%	7,884	71%
Number of applicants in SFY	37,625	44%	2,883	26%
Number determined eligible in SFY	31,668	37%	2,172	20%
Youth and young adult (consumers under age 25 at application)	29,745	34%	3,071	28%
Veterans, other than dishonorable discharge	3,438	4%	237	2%
SSI or SSDI recipients	25,226	29%	4,273	39%
Total VR consumers served (unduplicated)	86,224	100%	11,038	100%

(Categories in columns overlap, and do not add to 100 percent.)

Disabilities

Primary disability	DRS		DBS	
	Number	Percent	Number	Percent
Cognitive	21,516	25%		
Musculoskeletal, neurological and orthopedic	19,998	23%		
Emotional, mental and psychosocial	16,112	19%		
Deaf and/or hard of hearing	13,118	15%		
Blind and/or visually impaired	0	0%	11,038	100%
Other physical debilitation or impairment	3,438	4%		
Substance abuse	2,489	3%		
SCI/TBI	2,147	2%		
Cardiac, respiratory and circulatory	1,749	2%		
Diabetes mellitus	1,071	1%		
End-stage renal and genitourinary disease	969	1%		
HIV, AIDS and other immune deficiencies	408	0%		
Cancer	289	0%		
Digestive disorders	221	0%		
Other	2,699	3%		
TOTAL	86,224	100%	11,038	100%

Consumers with multiple disabilities				
Consumers with multiple disabilities	37,847	44%	5,213	47%

Frequently occurring primary or secondary disabilities				
Emotional and mental health disorder	25,704	30%	493	4%
Deaf and/or hard of hearing	14,202	16%	629	6%
Substance abuse	4,945	6%	37	0%
Intellectual disability	5,030	6%	199	2%
Autism	4,239	5%	104	1%
Traumatic brain injury or spinal cord injury	2,503	3%	115	1%

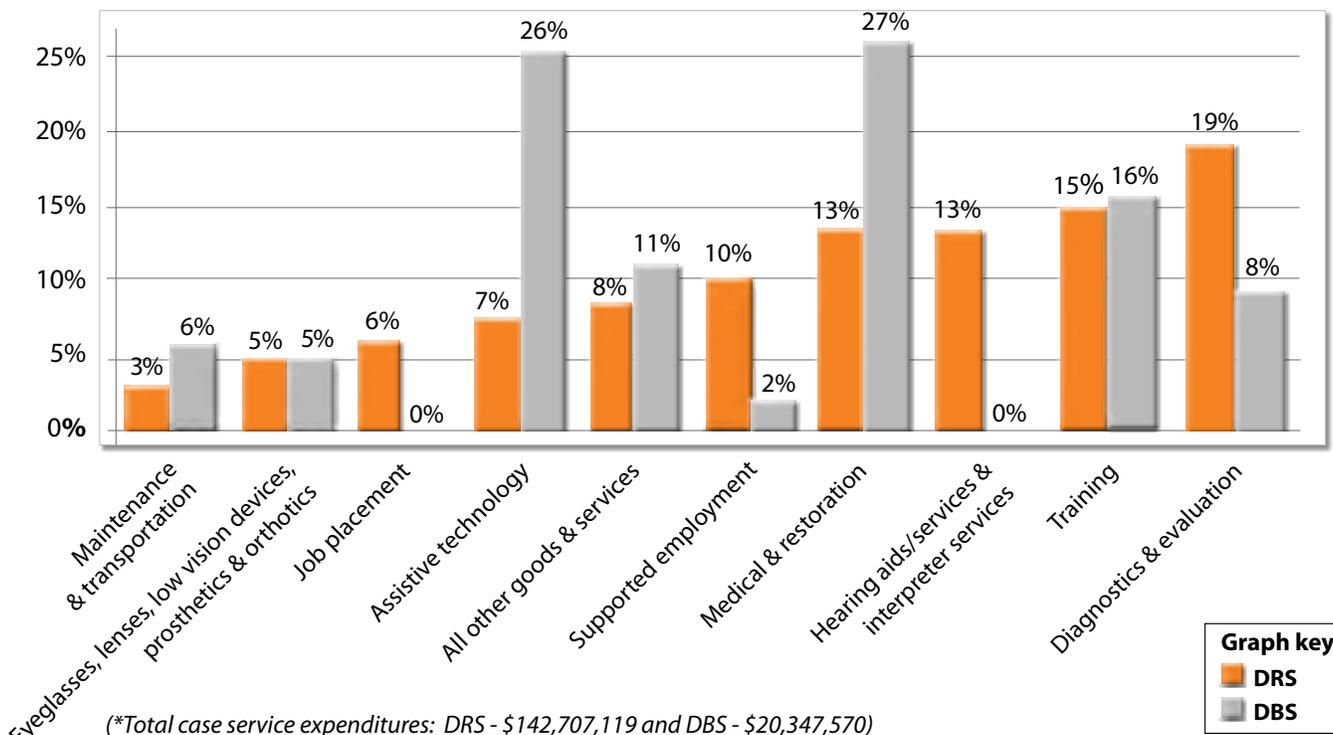
VR Insurance Coverage

	DRS		DBS	
	Number	Percent	Number	Percent
Private insurance	23,925	28%	2579	23%
Medicaid	14,123	16%	3201	29%
Medicare	12,179	14%	1932	18%

Occupations

	DRS		DBS	
	Number	Percent	Number	Percent
Computer, engineering, and science	340	2%	33	2%
Construction and extraction	460	3%	44	3%
Education, legal, community service and arts	1,065	8%	155	10%
Farming, fishing and forestry	49	0%	16	1%
Healthcare practitioners, technical and healthcare	1,044	8%	106	7%
Installation, maintenance and repair	548	4%	56	4%
Management, business and financial	727	5%	108	7%
Military specific	1	0%	0	0%
Office and administrative support	2,909	21%	194	13%
Production	851	6%	151	10%
Sales and related occupations	1,042	8%	86	6%
Service	3,318	24%	207	14%
Transportation and material moving	1,315	10%	61	4%
Randolph Sheppard Vending Facility operator	0	0%	10	1%
Homemakers and unpaid family workers	11	0%	251	17%
TOTAL	13,680	100%	1,478	100%

Percent of dollars spent on purchased services*



(*Total case service expenditures: DRS - \$142,707,119 and DBS - \$20,347,570)

Outcomes

	DRS	DBS
Successful closures	13,680	1,478
Length of time from plan to successful closure	18 months	26 months
Average life of case costs for successful closures	\$7,051	\$9,344
Average change in hourly wage (from application to closure)	\$6.38	\$5.85

For every dollar spent on vocational rehabilitation services, consumers generate nearly \$8 in personal taxable income through the remainder of their work lives. By retirement, the average rehabilitated consumer will have repaid the cost of services at least three and a half times through taxes paid.

DARS in the Community



*At DARS, we work in partnership with businesses, organizations and the community to enhance our services and ensure a **legacy of compassionate service**. The following projects, camps, workgroups and activities are examples of how DARS and its partners work together to help Texans with disabilities achieve their goals and be independent.*



Projects

Project HIRE

Project HIRE (Helping Individuals Reach Employment) is a unique, supported educational program established in 2012 through a grant funded by the Texas Council for Developmental Disabilities. Operated in Hidalgo County, Project HIRE helps address barriers to employment faced by people with developmental disabilities, ages 18 to 25. Project HIRE students complete a six-week college-readiness training program before beginning classes at South Texas College; participate in biannual person-centered planning meetings to develop and achieve academic and vocational goals; have monthly team support meetings to address barriers to success; and receive ongoing educational and employment supports.

Through Project HIRE, 28 students with developmental disabilities are currently working toward academic certificates from South Texas College to help them prepare

for employment. Fifteen Project HIRE students are receiving business mentoring from area employers, and nine have paid part-time jobs through the Workforce Solutions Work Experience Program. Eight Project HIRE students have graduated from South Texas College with degrees in areas including the culinary arts, legal office specialist, office specialist, mechanics, multi-media design and management. Four of those students have secured permanent employment, and the additional four students have started supported employment services with DARS.

The Project HIRE team is committed to sharing best practices and methods to help expand the project and help other Texas communities develop similar projects. In 2015, this resulted in the creation of Project HIGHER in El Paso. The Project HIRE team will release a guide to help other communities replicate the project in 2016.

Project HIGHER

Project HIGHER is modeled on Project HIRE and replicates that project's supported educational model. Operated in El Paso, Project HIGHER helps address barriers to employment faced by people with developmental disabilities. Project HIGHER is made possible by community partners who work together to help students with developmental disabilities, ages 18 to 25, prepare for employment through college training at El Paso Community College (EPCC).

Project HIGHER students complete college readiness orientation before beginning classes at EPCC. In addition, students receive ongoing supports and services including career planning and advising, tutoring services and weekly or monthly meetings to monitor progress. Throughout their

participation in Project HIGHER, students learn valuable skills such as how to use computer and online technologies, and organization, planning and time management skills. To ensure that they have the supports needed to achieve success, students may receive assistive technologies and help setting up accommodations for their courses, including getting alternative testing sites, zoom text technology and voice recorders to use to collect class notes.

In fall 2015, six DARS consumers began their first semester of college coursework through Project HIGHER and are receiving the full array of support services. We look forward to measuring the success of these students and their employment outcomes as the project progresses.

Project SEARCH



Project SEARCH, which began in 1996 at the Cincinnati Children's Hospital, Cincinnati, Ohio, is a one-year unpaid internship program for students with disabilities, ages 18 to 22, in their last

year of high school. Project SEARCH's purpose is to prepare these students for competitive employment by helping them develop an employment goal, learn marketable work skills and explore careers. Project SEARCH students participate in three internships within healthcare, government, hospitality, university and other settings and receive ongoing support from their families and a team of people representing key Project SEARCH partners. Each student's team is made up of certified teachers and paraprofessionals, VR staff, job coaches and others.

Today, Project SEARCH is operated at more than 400 sites nationally and internationally. The first Texas Project SEARCH site was established by Seton Healthcare Family in 2007. However, since DARS became a partner in 2009, Project SEARCH has expanded to 17 sites around Texas. The expansion of the project to more Texas communities is in part due to a grant DARS received from the Texas Council for Developmental Disabilities and awarded to Texas Tech Burkhart Center in Lubbock.

Many Texas sites reported a 100 percent employment rate for their 2015 Project SEARCH graduates, while the overall employment rate for 2015 Texas graduates is 68 percent and growing. The national office will track employment outcomes for the class of 2015 until May 2016, and final employment rates for 2015 graduates are expected to match or exceed the 78 percent employment rate achieved by the 2014 graduating class.

Camps

Camp TEAMS

Camp TEAMS (Teens Experiencing a Meaningful Summer) is an annual, week-long summer camp for youth, ages 12 to 18 years old, receiving vocational rehabilitation services from DARS. The camp, which celebrated its 15th year in 2015, gives campers an opportunity to explore the outdoors while building self-confidence, leadership and independence skills. Camp instructors teach campers daily living skills

and how to practically apply them to participate in arts and crafts, canoeing, fishing, archery, horseback riding, swimming and other activities with their peers. Campers gain self-confidence and independence while having fun, learning new skills and bonding with others who share their challenges in a safe and understanding environment.



Camp Independence



This annual, week-long summer camp provides group skills training to transitional youth ages 8 to 12 in the Tyler region who are blind or visually impaired. The goal of the camp is to help participants grow, learn essential skills and develop confidence and independence in a setting outside the home or family. In 2015, 20 DARS consumers participated and gained skills for safety, orientation and mobility, and food preparation, while they had fun participating in talent and magic shows, swimming, canoeing and playing games.

Workgroups

Work Matters Workgroup

In 2013, the DBS Work Matters Workgroup was established to develop ways to help consumers obtain integrated competitive employment in areas of the labor market with higher-wage jobs, including technology and skilled trades. In 2015, this workgroup piloted a program in the Austin region to better equip staff with tools, knowledge and resources to help consumers make informed choices about employment based on accurate labor market data and information about job openings in their area.

Business Accessibility Workgroup

The Business Accessibility Workgroup was created in 2015 to generate ideas and activities for business partners and information technology staff to enhance awareness and education about software accessibility and accessibility issues at the front end of software development.

Veterans Think Tank

The Veterans Think Tank was created in 2015 to address the unmet needs of veterans who could be eligible for services from DRS. The group consists of internal and external subject matter experts who develop and implement trainings for DARS counselors to enhance awareness about programs and services available to veterans, improve veteran outreach and make use of best practices for serving the veteran population. DARS partners with the Texas Veterans Commission and the Texas Workforce Commission to achieve the workgroup's goals.



Business and Job Fair Activities

Employer Symposia and Job Fairs

DARS held numerous employer symposia and job fairs in communities across Texas in 2015, including in Austin, Houston, Laredo and San Antonio. These events serve a twofold purpose: They help consumers achieve competitive employment, and help business partners learn how to achieve a diversified and talented workforce. These events were made possible through partnerships with the Texas Workforce Commission, local workforce development boards, the U.S. Department of Labor Office of Federal Contract Compliance Programs and other organizations.



Business of the Year Awards

DARS Business of the Year awards and certificates recognize and promote Texas businesses that demonstrate a commitment to supporting, hiring and retaining employees with disabilities. These businesses demonstrated their commitment by participating in job fairs, providing interview and internship opportunities, and requesting disability awareness, sensitivity and other types of training for their staff. In 2015, DARS honored 60 businesses across the state.

The 2015 Business of the Year Award winners:

Agua Dulce – Agua Dulce Independent School District High School

Amarillo – McDonald's

Austin – Seton Medical Center, Lowe's

Bay City – Matagorda Regional Medical Center

Beaumont – Lamar University

Brownfield – Ad-Venture Marketing

Brownsville – Social Security Administration

Carrollton – Hilton Worldwide

Coppell – UPS

Corpus Christi – The Home Depot, Corpus Christi Regional Transportation Authority

Crystal City – Crystal City Independent School District

Conroe – Lowe's

Fort Worth – Fiesta, Lighthouse for the Blind (CNC Machining Operations), Cinemark Movie Theater

Galveston – Gulf Coast Center MHMR – Drug and Alcohol Recovery Services

Hillsboro – Walmart

Houston – Houston Center for Independent Living, YMCA

Kyle – HEB

La Marque – Galveston County Community Action Council, Inc., Head Start

Lubbock – Convergys, McLane High Plains Distribution Center, PetSmart

Mount Vernon – Lowe's Distribution Center

Odessa – Marshall's

Pharr – Oil Can Harry's

San Antonio – City of San Antonio Department of Human Services, HEB, Marriott Global Reservation Sales and Customer Service

Sugar Land – Hair International Day Spa

Tyler – Ken's Pizza, Brookshire Grocery Company

Temple – McLane Company, King's Daughters Clinic – Little River Healthcare

Wichita Falls – Qdoba Mexican Grill

The 2015 Business Partner Certificate winners:

Austin – City of Austin Human Resource Department, Reliable Facilities Services

Dallas – Raising Cane's, Dallas Lighthouse for the Blind

El Paso – U.S. Section International Boundary, Water Commission, MV Transportation, El Paso Lighthouse for the Blind

Houston – Amtrak, Marathon Oil, Bethel's Place

San Antonio – San Antonio Children's Museum, San Antonio Spurs, Southwest Research Institute, The Hartford, HEB, Texas Workforce Solutions, West Corporation, Lowe's, Maximus, San Antonio Lighthouse for the Blind

The Woodlands – Newfield Exploration Company

Wichita Falls – Beacon Lighthouse, Inc.



DARS *Advisors*

*DARS stakeholders, consumers, staff members and service providers work together on meaningful opportunities to provide input on agency policies and services. This collaboration has helped DARS establish a **legacy of compassionate service.***



Councils, Committees and Boards

DARS Council



The DARS Council helps the DARS commissioner and the Texas Health and Human Services executive commissioner develop rules and policies for the agency. The council is composed of nine members of the public appointed by the governor. To be eligible for appointment to the council, a person must have demonstrated an interest in and knowledge of problems and available services related to early childhood intervention services or to people with disabilities, including those who are blind, deaf or hard of hearing.

Members

Lee Chayes, Chair
Donald D. Roy
Judy Scott
Diego Demaya

Jon Arnold
Tommy G. Fordyce
Dr. Thomas Graham
Aureka Sanders

Rehabilitation Council of Texas (RCT)



The RCT advises DARS on policy and the scope and effectiveness of vocational rehabilitation (VR) services and eligibility requirements. The RCT works with DARS VR programs to develop and review state goals and priorities. The RCT also contributes to the preparation of state plans for vocational rehabilitation. Council members are appointed by the governor.

Members

Martha Garber, chair
Joyce Delores Taylor, vice chair
Rene Gonzalez
Karen Stanfill
Mark Schroeder
Joe Tims
Rana Anderson
Brent Pitt
Yvonne Batts

John Cage
Roger Cortez
Cheryl Fuller
Saul Herrera
Casey D. Hertel
Bruce H. Hooper
Troyon "Troy" Myree
Scott Bowman

State Independent Living Council

The State Independent Living Council (SILC) partners with DARS to develop, approve and implement the State Plan for Independent Living. The Texas SILC leads, promotes and advances the independent living philosophy and advocates for the rights of people with disabilities. The governor appoints council members, with the majority being people with disabilities.

Members

Shannon Alexander, Bryan
Martha Bagley, Austin
Jim Batchelor, Cooper
Jim Brocato, Beaumont
Ralph Jones, Harlingen
Paul Luther, Georgetown
Mack Marsh, Cedar Park

Colton Reed, New Braunfels
Terri Richard, Austin, ex-officio
Lynn Richard, Austin
Jonas Schwartz, Austin, ex-officio
Karen Swearingen, Rowlett
Wesley Yeager, Austin, ex-officio

Board for Evaluation of Interpreters

The Texas Board for Evaluation of Interpreters advises the DARS Office for Deaf and Hard of Hearing Services on administering the interpreter certification program. The DARS commissioner appoints the board members.

Members

Sharon Grigsby Hill, Fresno, chair
Laura Hill, Tyler
Clarice Bosson, Wimberley
Deborah Martinez, Irving
Sherri Roberts, College Station
Alaina Webb, Joshua
Todd Agan, San Antonio

Early Childhood Intervention (ECI) Advisory Committee

The ECI Advisory Committee advises the DARS ECI program on developing and implementing policies that constitute the statewide ECI system. The governor appoints the committee members.

Members

Richard Adams, M.D., Dallas, chair
Holly Sanchez, McKinney, chair-elect
John Cissik, McKinney
Sarah Abrahams, Austin
Terrie Breeden, Austin
LaShonda Brown, Houston
Katrina Daniel, Austin
Amanda Davis, Buffalo, DARS Council
representative, ex-officio
State Rep. John Davis, Houston
Emily Dean, Abilene
Alferma Giles, PH. D., Sugarland
Jenny Hinson, Austin
Barbara W. James, Austin
Manda Lee-Waldrep Hall M.D., Austin

Diane Kazlow, McKinney
Laura Logan Kender, Lubbock
Barbara Knighton, Spring
Katherine "Kathy" Lee, Temple
Karen Meyer, San Antonio
Pamela M. Perez, El Paso
Rumisha Rice, Houston
Pattie Rosenlund, McAllen
Harvey Salinas, Corpus Christi
Lynn Sullivan, Fort Worth
Benna Timperlake, Corpus Christi, ex-officio
Philip Warner, Austin, ex-officio
Laura Warren, Austin



DARS Executives

*DARS legacy of **compassionate service** guides the actions and qualities of our management. DARS management believes in the importance of leading by example and is committed to fostering an environment that consistently encourages growth through open communication and trust. Our employees are treated with respect and guided to perform to their highest ability.*



Veronda L. Durden, Commissioner

Veronda L. Durden has served as the DARS Commissioner since July 2013. For more than three decades, Durden has served in executive-level roles for the state of Texas, beginning her career at the Office of the Attorney General. She has also worked for the Texas Department of Health, the Texas Department of Human Services and the Texas Department of Aging and Disability Services. She is a Certified Management Professional, a graduate of the Governor's Executive Development Program, a Leadership Texas graduate and a certified mediator through the University of Texas School Of Law. In 2004, Gov. Rick Perry appointed Durden to serve as a state agency representative on the State Employee Charitable Campaign Policy Committee, where she served for six years. Durden enjoys mentoring young professionals and being active in her community and at the national level. She served on the board of directors for the Greater Austin Alzheimer's Association and the Central Texas Society of Government Meeting Professionals. She has served in various leadership roles for the Association for Health Facility Survey Agencies, including president, and was a member of the Joint Commission's Home Care Professional and Technical Advisory Committee. She currently serves on the boards for the Greater Texas Federal Credit Union and United Ways of Texas. Durden earned her bachelor's degree in education from Northwestern University and a master's degree in health administration from Texas State University.



David Hagerla, Deputy Commissioner

David Hagerla was named DARS Deputy Commissioner in September 2015. Hagerla has 17 years of state government experience and has served in numerous leadership roles at DARS, including director of the DARS Center for Policy and External Relations, director of the Center for Policy and Innovation, and director of performance and oversight for the Early Childhood Intervention program. Before joining DARS, Hagerla held roles as director of preventive and primary care, director of performance management and director of quality assurance monitoring with the Family and Community Health Services Division at the Texas Department of State Health Services. In these roles, he worked with numerous programs including Family Planning, Breast and Cervical Cancer Screening, Primary Care, and Women, Infants and Children. Before beginning his career with the state of Texas, Hagerla held positions with private and public hospitals as an accountant. Hagerla earned a bachelor's degree in business administration with a major in accounting from Auburn University and a master's degree in social work from the University of Texas. He is also a graduate of the Governor's Executive Development Program.



Daniel Bravo, Chief Operating Officer

Daniel Bravo was appointed as the Chief Operating Officer in September 2013. In his previous position, Bravo served as the HHSC Director of Regional Administrative Services, managing its facilities, the cost pool budget for leases and associated operating expenses, and providing inventory and asset management support. He has held numerous leadership positions in the HHS enterprise and worked at the Texas Department of Human Services, Texas Department of Aging and Disability Services, the Office of the Inspector General, and the Office of the Attorney General. He is a graduate of the University of Texas at Austin.



Rebecca Trevino, Chief Financial Officer

Rebecca Trevino was named the Chief Financial Officer in June 2014. She joined DARS in December 2013 as the director of accounting. She brings more than 22 years of experience in accounting, budgeting and fiscal policy in Texas state government. Before working at DARS, Trevino had served as both the CFO and the accounting director for the Texas Water Development Board. Additionally, she also served as the director of administration for the Texas Railroad Commission and manager of fiscal policy and budget for the Texas Workforce Commission. Trevino holds a bachelor of business administration from the University of Texas at Austin and is a certified public accountant.



Cheryl Fuller, Assistant Commissioner for Rehabilitation Services

Cheryl Fuller was named assistant commissioner of the Division for Rehabilitation Services in August 2013. She was previously director of the DARS Center for Learning Management. Before coming to DARS, Fuller served for more than 11 years as director of the Texas Workforce Investment Council in the Office of the Governor. In addition to her work at the state level, Fuller spent almost nine years in local workforce programs. She held several positions in employment and training programs. Fuller helped design and implement a network of workforce centers for a 19-county region in Texas. She led initiatives in quality and continuous improvement for the West Central Texas Council of Governments, which the U.S. Department of Labor recognized with a national quality award. She graduated from Angelo State University with a bachelor's degree in communications.



Scott Bowman, Interim Assistant Commissioner for Blind Services

Scott Bowman was named interim assistant commissioner of blind services in September 2014. Bowman has more than 40 years of state government experience, beginning his career with the Texas Commission for the Blind (TCB) in 1973 and working on behalf of people who are blind or visually impaired ever since. He most recently served as a program specialist for the Division for Blind Services, directly supporting the assistant commissioner for blind services. He has served in many roles, including director of human resources, manager of training and technical writer. While at TCB, Bowman was also an ethics advisor and Americans with Disabilities Act coordinator. Bowman holds a bachelor's degree in liberal arts from Kalamazoo College in Kalamazoo, Michigan.



Rosalin Willis, Interim Assistant Commissioner for Early Childhood Intervention Services

Rosalin Willis was named Interim Assistant Commissioner of Early Childhood Intervention Services (ECI) in July 2015. She has nearly 23 years of experience serving Texans within the state health and human services system and has served in contract administration, public policy development, program planning, leadership and training capacities. Willis joined DARS more than seven years ago and has served as an ECI performance and oversight manager and director of performance and oversight. Before coming to DARS, Willis held roles as a program specialist at the Texas Department of Human Services and the Texas Department of Protective and Regulatory Services. Willis also held roles as services administrator at the Texas Health and Human Services Commission and as community services contracts unit manager at the Texas Department of Aging and Disability Services. Willis holds a bachelor's degree in business administration from Huston-Tillotson University and is a certified management professional and certified Texas contract manager.



Mary Wolfe, Assistant Commissioner for Disability Determination Services

Mary Wolfe rejoined DARS as assistant commissioner for Disability Determination Services (DDS) on March 1, 2016. Wolfe first held the position from 2004 until she retired in 2015. Previous to that, she held positions related to policy, oversight and administration in DDS and DRS. Wolfe started her career in Texas state government 38 years ago, when she joined the Texas Rehabilitation Commission (TRC). She ultimately served as the TRC's interim commissioner. Wolfe is a graduate of St. Edward's University in Austin. Wolfe has served on multiple state and federal boards and workgroups, sharing her commitment to and expertise in serving Texans with disabilities in this capacity. She has also received several notable recognitions, including the Commissioner's Citation for Outstanding Leadership

from the Social Security Administration, the Outstanding Women in State Government Award from the State Agency Council, and the Vernon Max Arrell Lifetime Achievement Award from the Texas RehabAction Network.



Anne Nance, Interim Assistant Commissioner for Disability Determination Services

Anne Nance served as Interim Assistant Commissioner for Disability Determination Services from September 2015 to February 2016. Nance has more than 25 years of state government experience. She began her career with the Texas Water Commission, a predecessor agency to the Texas Commission on Environmental Quality. Nance joined DARS in 2008 as Directorate Manager of Medical Relations and has served as the senior director for Disability Policy and Program Support in DDS since June 2010. Nance is a graduate of Texas State University with a bachelor's degree in chemistry; she is also a certified Texas contract manager and a graduate of the DARS Leadership Institute.



**Sylvia Hardman-Dingle, General Counsel/
Director of Legal Services**

Sylvia Hardman-Dingle has served as general counsel and ethics advisor for DARS since its inception in 2004. She works closely with executive management, providing legal and ethical guidance to staff, as well as administering the Public Information Act and administrative and due process hearings. Before joining DARS, Hardman-Dingle served as the deputy commissioner for legal services, general counsel and ethics advisor for the Texas Rehabilitation Commission from 1998 to 2004. She was a staff attorney in the Fraud Unit of the Texas Department of Insurance for two years and an assistant attorney general in the Tax Division of the Office of Attorney General for six years. Hardman-Dingle received a Bachelor of Arts degree from the University of Michigan and a Doctor of Jurisprudence degree from the University of Texas School of Law. She also is a graduate of the Governor's Executive Development Program.



Karin Hill, Internal Audit Director

Karin Hill came to DARS in December 2012. She has two decades experience in state government internal auditing as chief internal auditor for the Texas Juvenile Justice Department and a staff auditor for the Texas Commission for the Blind. She served in the U.S. Air Force as a cost analyst and administrator for an internal control review program. She is a member of both the Institute of Internal Auditor's Committee of Research and Education Advisors and the State Agency Internal Audit Forum. Hill holds a master's degree in business administration from Southwest Texas State University, a Bachelor of Science degree in management/accounting from Park College and an associate's degree in financial management from the Community College of the Air Force. She earned her Certified Internal Auditor designation in 1997, the Certified Government Auditing Professional designation in 2000 and Certification in Risk Management Assurance in 2011.





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