



Agency of Human Services

**Department of Disabilities,
Aging and Independent Living**

GOVERNOR'S SFY2025 BUDGET TESTIMONY

2024 Legislative Session

JANUARY/FEBRUARY 2024

HOUSE APPROPRIATIONS COMMITTEE
SENATE APPROPRIATIONS COMMITTEE
HOUSE HUMAN SERVICES COMMITTEE

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Department of Disabilities, Aging, and Independent Living

Department Overview

The Department of Disabilities, Aging, and Independent Living (DAIL) is responsible for managing services to older Vermonters and Vermonters of all ages with disabilities. This work is codified at 33 V.S.A. Chapter 5 of Vermont's Human Services Statute.

DAIL's mission guides the delivery of all services, which is: **To make Vermont the best state in which to grow old or live with a disability, with dignity, respect, and independence.**

DAIL consists of approximately 330 employees working throughout the Commissioner's Office and the following five divisions:

1. Adult Services Division (ASD).
2. Division for the Blind and Visually Impaired (DBVI).
3. Developmental Disabilities Services Division (DDSD).
4. Division of Licensing and Protection (DLP).
5. Division of Vocational Rehabilitation (DVR) also known as HireAbility (HA).

The Commissioner's Office includes the Commissioner; Deputy Commissioner; Operations; Principal Assistant; Legal Unit; Business Office; Director of Deaf/Hard of Hearing/DeafBlind Services; and an Executive Assistant.

DAIL's primary role in Vermont is to fulfill the commitment that made to individuals with disabilities and to older Vermonters, enabling them to receive supports and services in their homes and in their communities, living independently and fully included as participating and contributing members of those communities. This commitment is underlined by state and federal mandates such as the [Older Americans Act \(OAA\)](#), the [Older Vermonters Act \(OVA\)](#), the [Americans with Disabilities Act \(ADA\)](#), the [Workforce Innovation and Opportunity Act \(WIOA\)](#), the [Vermont Health Care Administrative Rules \(HCAR\)](#), the [Global Commitment to Health 1115 Waiver](#), and the [Olmstead Decision](#), which require states to provide services to people in the least restrictive environments possible. Vermont remains a leader in supporting self-determination, choice, expansion of community-based options, the development of robust supported employment, and mature worker options.

Over the last year, DAIL is pleased to report that leadership remained stable with very little turnover. In December 2022, DAIL welcomed Jason Pelopida as Vermont's new State Unit on Aging Director. Previous Director Conor O'Dea joined the Department of Vermont Health Access Medicaid Policy unit. Commissioner Monica White tendered her resignation as of January 12, 2024, and Deputy Commissioner Megan Tierney-

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Ward is serving as Interim Commissioner while the position is being recruited.

Globally, DAIL's work is most directly related to the following two areas of the Governor's Strategic Plan:

1. Grow the Economy.
2. Build the Safest and Healthiest Communities.

Examples of DAIL contributions to the Governor's Strategic Outcomes include work focused on:

- Reducing fall-related injuries and deaths.
- Preventing abuse, neglect, and exploitation of vulnerable adults.
- Improving career paths for youths with disabilities as they transition into adulthood.
- Supporting employment of older adults and adults with disabilities.
- Ensuring that long-term care facilities adhere to federal and state licensing regulations and are financially stable.
- Ensuring the delivery of quality home and community-based services.

DAIL embraces continuous performance improvement approaches in assuring the highest quality services to Vermonters. Throughout this document, DAIL identifies measures related to how much, how well and how people are better off because of our services and support. For more information, please visit the [DAIL Performance Budget Scorecard](#).

Department Highlights

DAIL Employee Engagement

DAIL is proud to share the results of the 2023 Employee Engagement Survey that demonstrate DAIL is among the top State of Vermont departments for overall employee satisfaction and engagement. The survey showed that DAIL employees are satisfied with their job, are connected on a personal level to the mission and values of the Department and appreciate the work/life balance offered by a supportive work environment. Potential areas for improvement include the extraordinarily high workload, (more than 40% indicated the amount of work they are expected to perform is not reasonable), communication, career/growth opportunities, employee performance management, and inclusive workplace. DAIL has begun engaging with DAIL employees to implement strategies towards improvement and looks forward to next year's survey.

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Age Strong VT Plan

In 2020, Vermont passed Act 156, the Older Vermonters Act. The Act put into statute a set of guiding principles to provide direction for the State of Vermont for the development of future policies and initiatives. The Act also called upon Vermont to develop a plan to “provide strategies and cultivate partnerships for the implementation across sectors to promote aging with health, choice, and dignity in order to establish and maintain an age-friendly state for all Vermonters.” This is the Age Strong VT Plan.

The first plan of its kind in Vermont, the Age Strong VT Plan is a 10-year visionary plan designed to:

- Build a future where all Vermonters thrive at all stages of life. ‘Age-friendly’ means livable for all.
- Expand and strengthen partnerships across government, business, and community.
- Leverage existing resources to meet key goals.
- Bring equity to the forefront.
- Communicate in a new way about aging – energy, opportunity, possibility – addressing ageism.

Learn more at [Age Strong Vermont: Our Roadmap for an Age-Friendly State | Vermont Department of Health \(healthvermont.gov\)](https://healthvermont.gov/age-strong-vermont-our-roadmap-for-an-age-friendly-state).

Deaf, Hard of Hearing, DeafBlind Services

In calendar year 2023, the DAAIL Director of Deaf, Hard of Hearing, DeafBlind services received over 191 referrals for assistance with Deaf/Hard of Hearing and DeafBlind services. The top three topics included technical assistance to state agencies (22%), requests for resources (19%) and access to assistive technology (14%). Key priorities for the Director include:

- Evaluating adequacy of educational services to Deaf, Hard of Hearing, DeafBlind school age children.
- Strategizing funding opportunities for American Sign Language services.
- Ensure uniformity in communication access approaches across all state agencies, especially during public emergencies.
- Promote education and public awareness on the integration of more assistive technology.
- Addressing health equity issues related to mental health and substance use treatment for Vermonters who are Deaf, Hard of Hearing, and DeafBlind.

Developmental Disabilities Services (DS) Payment Reform

The DS payment reform project accomplished some exciting milestones in SFY2023, including:

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- Added supplemental question about communication supports to the Supports Intensity Scale- Adults (SIS A) assessment in collaboration with the VT Communication Task Force and the Standardized Assessment Workgroup.
- Transitioned to the newly released SIS A 2nd edition in March 2023.
- Analyzed the 500 person SIS A sample collected from July 2021 – August 2022, and developed six level of care options with input from stakeholders and the DS Payment Reform Advisory Committee.
- Completed a SIS A validation study in September 2023 to analyze the six-level framework and how well it can identify the right level of support for most people.
- Completed a provider rate study survey in November 2023 that will be used to update pre-existing rate models from 2019 and then applied to the new six-level framework to formulate future payment options.

Developmental Disabilities Services (DS) Supported Housing Project

Per [Act No. 186](#) (2022) DAIL hired a Residential Program Developer and worked with the Act 186 Steering Committee and consumer/family stakeholders to craft recommendations regarding permanent supported housing alternatives for people receiving Developmental Disabilities Services (DDS), and to issue grants for a supportive housing pilot. The April 2023 DAIL legislative report indicated 600 units of supported housing is needed to rebalance the housing options in the DS System. In October 2023, DAIL awarded three grants to Champlain Housing Trust, Upper Valley Services and Riverflow Community Inc, to stand up projects that will bring 26-44 units of supported housing for people with Developmental Disabilities in Chittenden, Orange, Washington, Franklin, and Addison counties.

Forensic Facility

[Act No. 27](#) (2023) established the Legislature's intent that a forensic facility be authorized and operational beginning on July 1, 2024. The State intends that the forensic facility be accessible to all criminal-justice involved individuals who have been found incompetent or insane, who do not meet hospital-level of care but for whom there is a risk of dangerousness and meet clinical criteria for residential care. To determine whether a forensic level of care is appropriate for individuals with an Intellectual Disability (ID) and to provide recommendations to the legislature, DAIL led a Working Group on Policies Pertaining to Individuals with Intellectual Disability Who Are Criminal-Justice Involved. The majority of the Working Group supported a forensic facility in limited circumstances, provided recommendations to assess whether a forensic level of care is appropriate for individuals with an Intellectual Disability (ID), and proposed statutory language. From those recommendations, [S.192](#), An act relating to forensic facility admissions criteria and processes, was introduced. The [Act 27 Working Group Final Report](#) and DAIL's response to the Legislature was posted by the legislature on December 8, 2023.

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DAIL's position is that a Forensic Facility is needed in Vermont's system of care, to support the rare occurrence when a person who has been committed to the custody of the DAIL Commissioner under Act 248 cannot safely be served in a community-based setting. This includes situations in which an individual who presents an extreme risk of harm, elopes from their community-based program and/or threatens or inflicts serious bodily injury on their caregivers or members of the public.

Nursing Facility Rates

Vermont's nursing facilities are a critical part of Vermont's system of post-acute hospital care and long-term care for those that do not have the support needed for care at home. Without the ability to cover costs, nursing facilities are unable to adequately staff the beds necessary to provide services to those who need them. The current Vermont rate setting method for skilled nursing facilities (SNF) has four outdated cost control components that are contributing to financial instability within the SNF industry leading to a high volume of Extraordinary Financial Relief applications and facilities struggling to pay for adequate staff to keep beds open and available: 1) Minimum occupancy, 2) nursing cost caps, 3) resident cost caps, and 4) indirect cost caps. DAIL is proposing a SFY25 increase to the Choices for Care budget in the amount of \$9.9M to address this issue.

Emergency Housing Efforts

DAIL's role in the Emergency Housing efforts, though not in the forefront, can be seen in several ways.

- Twenty-two (22) staff from HireAbility Vermont joined the State's Care Coordination Housing Resource Teams (CCHRT), providing targeted outreach to 1500 households across the state that were living in hotels and motels. As of July 2023, 101 of the CCHRT residents were active HireAbility participants, working towards employment as a way out of poverty and homelessness.
- Awarded three Act 186 housing pilot planning grants for Developmental Services. Recipients are Upper Valley Services, Champlain Housing Trust, and Riverview Community Inc. \$500,000 will support up to 25-45 housing units.
- Collaborating with iCare Health Network which is purchasing Bennington Health & Rehab to provide specialized nursing facility services to people with complex care needs and justice involved. They anticipate opening early 2024.
- Expanded HomeShare VT grant by \$200K GF to hire 1 FTE and expand volunteers allowing expansion into towns in Orleans, Caledonia, and Windsor counties.
- Regional Long-Term Care Clinical Coordinators (LTCCC) are the local point of contact for housing teams and people seeking Choices for Care (CFC) services. LTCCCs help people navigate the CFC program application process, present options, complete clinical eligibility, and help overcome barriers to services.

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Adult Services Division

Adult Services Division Philosophy

The Adult Services Division (ASD) supports older Vermonters and adults with physical disabilities to live as they choose, pursuing their individual goals and preferences within their chosen communities.

ASD Overview

ASD is responsible for managing a full array of Long-Term Services and Supports (LTSS) for older Vermonters and adults with physical disabilities. Vermont Medicaid, the federal Older Americans Act and State General Funds are the primary sources of funds for these services.

ASD Staff and Partners

ASD has approximately 45 employees located within the Central Office in Waterbury and regional district offices. Services are managed within four units: Long-Term Services & Supports Unit, Quality Management Unit, the State Unit on Aging, and the Money Follows the Person Project.

ASD partners with a variety of organizations in managing services for Vermonters including:

- Adult Day Centers
- Area Agencies on Aging
- Brain Injury Providers
- Designated Agencies and Specialized Services Agencies
- Home Health Agencies
- HomeShare Vermont
- Facilities: Nursing Homes, Residential Care Homes, and Assisted Living Residences
- Supports and Services at Home (SASH)
- Senior Centers
- State Long Term Care Ombudsman
- Transition II
- Vermont Center for Independent Living

ASD Programs and Services

Medicaid Funded Long-Term Services and Supports Programs include:

- Adult Day Health Rehabilitation
- Adult High Technology Program
- Attendant Services Program
- Choices for Care
- Brain Injury Program

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Adult Services Division

Older Americans Act (OAA) Services include:

- Supportive Services, such as: Information, Assistance and Referral, Case Management, Legal Assistance, Transportation, etc.
- Nutrition Services (congregate meals and home-delivered meals)
- Health Promotion and Disease Prevention
- Family Caregiver Support
- State Long-Term Care Ombudsman Program

Other initiatives, programs and services supported by ASD include:

- Commodity Supplemental Food Program
- Dementia Respite Grants for Unpaid Family Caregivers
- Elder Care Clinician Program
- Employer Payroll Support for Self-Directed and Surrogate-Directed Services
- Health Insurance Counseling & Support (SHIP/MIPPA)
- Home Delivered Meals for People with Disabilities Under Age 60
- Money Follows the Person Project
- Self-Neglect Initiative
- Senior Farmers' Market Nutrition Program
- 3SquaresVT (SNAP) Outreach

ASD Recent Developments and Accomplishments

1. In collaboration with the Department of Health, Advisory Committee and community partners, ASD led the work to develop [Age Strong VT](#), Vermont's first 10-year multisector plan on aging.
2. ASD completed Year 1 of its [2023-2026 State Plan on Aging](#) which guides the work of the State Unit on Aging and Area Agencies on Aging in service to older Vermonters in greatest need. The Year 1 Progress Report will be submitted to the legislature on January 15, 2024.
3. In collaboration with AHS, departments and community partners, ASD has implemented strategies outlined in [Vermont's Enhanced FMAP Spending Plan](#) to strengthen the HCBS system. ASD has used this enhanced FMAP funding to launch the following:
 - A continuation of a higher cap for assistive technology and home modification funds for Choices for Care participants in traditional home-based care plans.
 - Accessibility in Shared Living Homes: A contract with Direct Access for an accessibility pilot to identify and provide recommendations for home modifications to support individuals' mobility and independence needs in shared living homes (Choices for Care, Brain Injury Program, and

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- Developmental Services). This contract has been continued for a second year.
- Act 167 Extending HCBS Working Group: A contract with Health System Transformation to coordinate a working group to consider extending HCBS services to a broader cohort of Vermonters and develop a report of recommendations as required by Vermont Act 167, 2022. This report is located [here](#).
 - Direct Care Access Study: A contract with Flint Springs Associates for a Choices for Care Direct Care Access Study to better understand gaps in home-based care and identify possible solutions. This report is located [here](#).
 - Residential Alternatives Study: A contract with Aspire Living and Learning to explore residential alternatives within our programs to serve people in a variety of settings that could meet their needs. This report should be completed by February 2024.
4. ASD continues to work with AHS and departments to come into compliance with conflict-of-interest rules by 2025, which will require major program systems change. This has included significant stakeholder engagement, reviews of policy, program standards, rates, roles and responsibilities, and ongoing collaborative planning. More information about the project is at www.vermonthcbs.org.
 5. CMS approved new performance measures for HCBS quality requirements under Vermont's renewed Global Commitment to Health Waiver. ASD has worked with AHS and departments on strategies for collecting the required information and plans for reporting.
 6. ASD completed the on-site Certification reviews of all 11 Adult Day Services providers in Vermont. Each Adult Day Center was recertified for three years.
 7. Using \$5 million in [Money Follows the Person](#) funding through a supplemental capacity building grant, in 2022 ASD launched eight new contracts and Memorandum of Understandings (MOUs) for innovative pilots to address unmet needs such as the caregiver workforce shortage, mental health supports, home modifications and falls prevention. All contracts were reviewed for progress in 2023, and three new contracts were developed, including two to support hospital discharge planning.
 8. ASD supported DVHA in the work to outline potential payment models to increase enrollment/attendance at Adult Day Centers and support predictable payments; this work continues with a report due to the legislature by February 15th, 2024.
 9. ASD continued to work with AHS, DHVA, DDSD, provider agencies and ARIS Solutions to implement [Electronic Visit Verification](#) (EVV) for Medicaid funded in-home services. Current in scope programs (CFC, BIP, Attendant Services Program and Children's Personal Care) have an adoption rate of more than 99% by independent direct support workers. In 2024, EVV will expand to include the

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Developmental Services Program and services provided by Home Health Agencies.

10. ASD reviewed and provided support and follow up for 382 critical incident reports for individuals receiving services through supported living services, the Brain Injury Program and Money Follows the Person.
11. ASD continued work on reframing aging in communications and policies to ensure an inclusive, accessible, and age-friendly Vermont for generations to come.

ASD Future Directions

In 2024 ASD plans to:

1. Launch the Age Strong VT plan implementation.
2. Work to meet HCBS conflict-of-interest requirements and build pathways forward for ASD programs, including the development of a new provider type for direct care services.
3. Implement additional Enhanced FMAP Spending Plan initiatives:
 - a. Expanded Ombuds Services: In collaboration with DDSD, pilot the Brain Injury and Developmental Services Advocacy Program (BDAP) to provide advocate/ombuds services to program participants.
 - b. Marketing Direct Care: Contract with Place for a marketing and recruitment campaign across HCBS services to recruit and retain the direct care workforce. The campaign will be launched in 2024.
 - c. Contract with a vendor to assess Information, Referral and Assistance systems for Vermonters (211, AAA Helpline, VT HelpLink) to identify opportunities to improve access to information and support for navigating to services. The assessment report will be completed in Fall 2024.
4. Continue to strengthen quality oversight across all ASD programs and services through data-driven surveys and reviews as well as beginning to report to CMS on the new performance measures.
5. Increase the number of MFP transitions from facility to community, and monitor the MFP contracts for successes, challenges, and potential sustainability.
6. Continue to implement the '23-'26 State Plan on Aging objectives and strategies.
7. Continue collaboration with AAAs including expansion of therapeutic meals, promotion of [Get Set Up](#), and implementation of [TCARE](#), an evidence-based family caregiver assessment tool.
8. Transition to a new database for the management of client records across ASD LTSS programs.

ASD Results (how much, how well, better off)

All Medicaid services, including Choices for Care, are managed through the State [Global Commitment to Health 1115 Waiver](#) and the accompanying [Comprehensive](#)

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Adult Services Division

Quality Strategy.

Together with our community partners, ASD served thousands of Vermonters in SFY23. Some highlights include:

1. **Choices for Care:** In SFY2023, 6,674 people received Choices for Care services across all settings, an increase of 10% from SFY22.
 - Of the total who received services:
 - 1,095 were in the Moderate Needs Group. (9% decrease)
 - 5,715 were in the High/Highest Needs Groups. (.07% increase)
 - Of the total in the High/Highest Needs Groups:
 - 2,883 were in a home- based setting.
 - 738 were in an Enhanced Residential Care home.
 - 2,694 were in a nursing facility.
 - Note that some individuals received services in more than one setting above.
2. **Adult Day Programs**
 - 325 were people in SFY2023 with Medicaid funded services (High/Highest Groups, Moderate Needs Group, and Adult Day Health Rehabilitation).
 - October 2023, Adult Day Programs reported an average of 52% capacity ranging from 35% capacity to 91% capacity.
 - Programs continue the work to rebuild their programs and increase participation following their closures during the pandemic, which is challenged by the workforce shortage.
3. **Older Americans Act Home Delivered Meals**
 - 10,003 people were served in FFY2022 (15% increase from FFY21).
 - 1,051,525 meals were served in FFY2022 (3.5% increase from FFY21).

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Developmental Disabilities Services Division

Developmental Disabilities Services Division (DDSD) Philosophy

The Developmental Disabilities Services Division (DDSD) supports people to live, work and participate as citizens in their local communities, pursuing their own choices, goals, aspirations, and preferences. To be effective and efficient, services must be individualized to address the goals, capacities, needs, and values of each person. With support as needed, individuals are able to make decisions, live in typical homes, and contribute as community citizens. DDSD services are based on the principle that communities are stronger when everyone is included.

DDSD Overview

DDSD plans, coordinates, administers, monitors, and evaluates state and federally funded services for people with developmental disabilities and their families within Vermont. DDSD provides funding for services, systems planning, technical assistance, training, quality assurance and program monitoring and standards compliance. DDSD provides court-ordered public guardianship to adults with developmental disabilities and older Vermonters aged 60 and over on behalf of the Commissioner.

For more information about developmental disabilities services, please review the [Developmental Disabilities Services Annual Report](#) or visit the [DDSD](#) website.

DDSD Staff and Partners

DDSD work is carried out by twenty program staff members, including the Quality Management Unit, Services Specialists, administrators, and support staff, and thirty-two staff members working within the Office of Public Guardianship, twenty-nine of whom are full-time public guardians.

The Agency of Human Services contracts with fifteen private, non-profit developmental disabilities services agencies to provide or arrange for services to 4,720 people with developmental disabilities and their families through Designated Agency and Specialized Services Agency Provider Agreements. In addition, a Supportive Intermediary Service Organization (ISO) assists individuals and families to manage their services and a Fiscal/Employer Agent provides the infrastructure and guidance to enable employers to meet their fiscal and reporting responsibilities. DDSD emphasizes the development of community capacities to meet the needs of all individuals, regardless of the severity of their disabilities.

DDSD works with a variety of people and organizations to ensure that the changing needs of people with developmental disabilities and their families are met. This includes people with disabilities, families, guardians, advocates, service providers, the State Program Standing Committee for Developmental Disabilities Services, and State and Federal governments.

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DDSD Recent Developments and Accomplishments

New Payment Model

The Developmental Disabilities Services Division (DDSD) and the Department of Vermont Health Access (DVHA) continue to work on a new payment model for Developmental Disabilities Home and Community-Based Services (HCBS). The goal of this payment reform project is to create a transparent, equitable and effective payment model for Developmental Disabilities Services that is manageable, supports Vermont's philosophy, and aligns with the broader payment reform and health care reform goals of Agency of Human Services (AHS).

Key stakeholders, including people who receive services, families, advocacy organizations, and providers, participate in workgroups for the development and implementation of the new payment model. An advisory committee and workgroups focus on a new needs assessment tool and process; improvements to agencies' ability to fully report on services delivered to individuals (encounter data); and the design of the future payment model. DDSD and its partners continue to work to design the payment methodology, which is informed by assessment data, encounter data, and stakeholder input.

In March of 2021, DDSD began the transition to using an independently administered, standardized needs assessment—the Supports Intensity Scale. Using a contract with Public Consulting Group to independently administer this tool, this assessment tool meets the Centers for Medicare and Medicaid Services (CMS) requirement that an independent assessor performs the needs assessment, moving Vermont into compliance CMS requirements. DDSD completed an initial sample of assessments, which will allow the Division, with the help Human Services Research Institute (HSRI), to determine the validity of using the Supports Intensity Scale to replace the needs assessment previously developed within the Vermont system to adequately assess needs and be used as part of the future payment model design.

Home and Community-Based Services (HCBS) Conflict of Interest (Conflict-Free Case Management) Implementation

DDSD continues to work, in close partnership with DVHA and the DAIL Adult Services Division (ASD), to comply with the federal HCBS Conflict of Interest (COI) requirements by mid-2025. The intent of the requirements is to ensure that individuals receiving long-term services and supports through HCBS programs are provided services with minimized conflict of interest. This includes:

- intake,
- referral,
- evaluation,
- needs assessment,
- allocation of appropriate individual service budget,

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Developmental Disabilities Services Division

- case management, and
- direct service provision.

The State of Vermont has engaged Health Management Associates (HMA) to project manage this effort and assist as AHS navigates through the process of identifying the best options for each of the HCBS programs offered across the Agency.

DDSD has been a highly involved partner in the initiative to determine options and key recommendations. Developmental Disabilities Services stakeholders will continue to be an active participant on workgroups and committees.

DDSD Future Directions

Workforce: DDSD established a stakeholder group that included representatives from service providers, consumer, and family advocacy organizations, and others to explore solutions to chronic provider workforce issues. The group identified a variety of short-term and long-term solutions to the ongoing challenge of recruiting and retaining direct support workers. The pandemic continues to aggravate issues relating to hiring and retaining direct support workers. DDSD will continue to work with providers and others to explore solutions to this increasingly challenging issue.

Payment Reform: DDSD will continue work on payment reform and compliance with the federal HCBS rules, as described above. In combination, these two complex initiatives represent changes to the current DDSD system of care that are to be quite broad in scope and impact. DDSD will continue to work closely with stakeholders to achieve change while preserving DAIL's commitment to improving individual outcomes. As directed by Act 186 of 2022, DDSD will seek approval of the legislature before implementing payment reform changes.

Conflict of Interest: In close partnership with DVHA and DAIL/ASD, DDSD will continue to come into compliance with CMS requirements related to Conflict of Interest related to case management, assessment, and evaluation. To determine the least disruptive option for the Developmental Disabilities Service system, an advisory committee as well as workgroups, including key stakeholders and program leads have been created. Like Payment Reform efforts, DDSD will provide information to legislature before implementing changes.

Residential and Housing Options and Alternatives: Following the passage of Vermont Act 186 of 2022, DDSD is partnering with designated and specialized service agencies and community members to explore new residential and housing options and alternatives for adults with developmental disabilities. Act 186 established a Steering Committee to provide guidance and support to DDSD related to the pilot planning grants funded through the federal American Rescue Plan Act (ARPA) funds, which were also included in Act 186.

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Developmental Disabilities Services Division

The Steering Committee assisted with Division to craft a Request for Proposal (RFP) for Pilot Planning Grants for innovative housing options of individuals with intellectual or developmental disabilities which was posted in Summer 2023. The RFP resulted in four responses, three of which met the requirements of the Request. These proposals were awarded conditional contracts and DDSD has been negotiating terms and finalizing contract terms.

Additionally, the DDSD Residential Program Developer, a limited-services position supported through ARPA funds, has several other projects that are in motion to create housing across the State. This position works across the Department and Agency to enhance knowledge, experience, and presence for the intellectual/developmental disabilities service system.

Payment to Legally Responsible Individuals (aka Paying Parents): Given the current state of the labor market, DDSD has worked over the past year-and-a-half to solicit updated input from stakeholders on the topic of payments to Legally Responsible Individuals for Care Provided to Adult Children, generally thought of a “paying parents” for care to their adult child. Through the most recent negotiations of the 1115 Global Commitment Waiver with CMS, DDSD has been granted the ability to develop policy on this topic. A proposed policy is currently under consideration at the Federal level and feedback with state stakeholders is being sought.

Developmental Disabilities Ombuds Program: DDSD has partnered with Vermont Legal Aid (VLA) to create an Ombuds pilot project to support the developmental disabilities and brain injury populations. The program, run through VLA, will provide independent review and investigation of administrative acts that are believed to be contrary to rule, law, or policy. Proposed activities include developing promotional materials and website; creating and implementing a home monitoring plan; developing a complaint response process and responding to complaints; providing a “Know your Rights” workshop and other training for advocates and support staff; and providing feedback mechanisms for pilot area stakeholders.

This pilot will operate in three regions in Vermont, Franklin/Grand Isle, Lamoille, and Washington Counties for approximately one year.

Quality Assurance: The DDSD Quality Management Unit has successfully recruited and conditionally offered Quality Services Reviewer positions to four individuals with an expected start date in February of 2024. The fifth quality position is expected to become a “Compliance and Quality Data Analyst” and will be a liaison between the DDSD Quality Management Unit and the DDSD Policy and Data Team. DDSD is working with DHR to develop the necessary job description, code, and specification for recruitment early 2024.

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Developmental Disabilities Services Division

Along with the five new quality positions, beginning January 2024, DDS will sequentially roll out a plan that brings the Quality Service Review process from its “current state” to an ideal “future state” by SFY26. The plan modernizes processes, streamlines reporting, provides an annual on-site presence, and accounts for initiatives such as Conflict-Free Case Management, Developmental Disabilities Services Payment Reform, Settings Rule requirements, the CMS Measure Set, and other proposed federal requirements.

DDS Programs and Services

Home and Community-Based Services (HCBS): HCBS are provided through Designated Agencies and Specialized Service Agencies. These services include Service Coordination, Community Supports, Employment Supports, Home Supports, Respite, Clinical Services, Supportive Services, and Crisis Services. Home Supports including 24-hour Shared Living, Staffed Living, Group Living, and Supervised Living (hourly supports in the person’s own home). In-Home Family Supports are hourly supports provided in the home of a family member. Services can be managed by the agency, managed by the person or a family member, or shared-managed (a combination of agency-managed and self/family-managed services).

The Bridge Program: provides care coordination to families to help them access and coordinate medical, educational, social, or other services for their children with developmental disabilities.

Family Managed Respite: provides respite for families to give them a break from caring for their child with a disability.

Flexible Family Funding provides funding for respite and goods for children and adults who live with their biological or adopted family or legal guardian. These funds are used at the discretion of the family for services and supports that benefit the individual and family.

Office of Public Guardian (OPG), acting under court authority, provides public guardianship where there is no friend or family member to serve as guardian, and the individual needs a public guardian to protect his or her rights or welfare. OPG also provides representative payee services and case management services to a limited number of people.

Specialized Services are provided by service agencies to adults with developmental disabilities who live in nursing facilities to improve their quality of life by providing support to address social and recreational needs.

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Developmental Disabilities Services Division

Targeted Case Management provides assessment, care planning, referral and monitoring to individuals who are not receiving service coordination through HCBS or other funding sources.

DDSD Results (how much, how well, better off)

In SFY2023:

- 3,359 people were served in Home & Community-Based Services (HCBS).
- 916 people served by Flexible Family Funding.
- 269 people served by Family Managed Respite.
- 437 people served in Bridge program.
- 734 people received OPG public guardianship services.
- 328 people received OPG representative payee services.

Quality Service Reviews: The DDSD Quality Service Reviews (QSRs) monitor and review the quality of services provided with HCBS funding. The purpose of the QSR is to determine the quality of the services provided by the Designated Agencies and Specialized Service Agencies and to ensure that standards are met with respect to state and federal guidelines and policies.

The QSR is one component of a broader effort to maintain and improve the quality of services. Other activities supported by the review team and DDSD include monitoring and follow-up regarding agency designation; authorizing Medicaid and HCBS eligibility; verifying housing safety and accessibility inspections; monitoring critical incident reports; responding to grievances and appeals; providing technical assistance; and conducting satisfaction surveys of adults receiving HCBS.

National Core Indicators (NCI): Vermont has participated in the National Core Indicators (NCI) Adult In-Person Survey over several years. Due to COVID-19 and the significant challenges related to workforce facing direct provider agencies, DAIL has paused participation in the survey since 2018/19 survey.

Employment Services: The employment rate for all working age adults with developmental disabilities who receive HCBS continues to be sustained at a high rate of 42% (SFY2022). This compares favorably to the national average of individuals participating in ID/DD employment services. A 2018 Data Brief from National Core Indicators reported nationally that 20% of adults with IDD receiving services were engaged in paid employment in the community, including both individual and/or group supported jobs. Additionally, the US Bureau of Labor Statistics reported a 35% employment rate among all working age adults with disabilities.

Additionally, Vermont has recently received national attention because of its long-

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Developmental Disabilities Services Division

standing commitment to integrated and competitive employment opportunities for individuals with I/DD. Vermont discontinued the practice of “sheltered workshops” more than 20-years ago. A recent [data brief](#), published by the University of Vermont in October 2023, recounts the history and trends of Supported Employment in Vermont.

Post-Secondary Education Initiative (PSEI): More Vermonters with disabilities are going on to post-secondary education than ever before and Vermont’s Think College Vermont, College Steps, and SUCCEED programs assist them in achieving their college goals. Participating colleges include the University of Vermont and the Vermont State University through its Castleton, Johnson, and Lyndon Campuses.

As of June 30, 2023, the total PSEI resulted in 44 students enrolled and 24 students who graduated with a certificate, resulting in an 83% employment rate of graduates. In addition, PSEI helps transition age youth enter the work force. Through supported education and job training services, youth experience successful transitions from school to work or higher levels of education. Services include specialized career training, customized job placement, independent living skills training, and experiential internships. The three programs that contribute to successful youth transitions include Supported Employment, Transitional Living Programs, and Project Search’s Business Based Training.

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Division for the Blind and Visually Impaired

Division for the Blind and Visually Impaired (DBVI) Philosophy

DBVI assists individuals who are blind or visually impaired to meet their employment and independence goals. DBVI uses a holistic rehabilitation approach that helps people to meet their goals, build new skills, and improve their circumstances. The goal is for all participants to achieve or sustain economic independence, self-reliance, and social integration consistent with their interests, abilities, and informed choices.

DBVI Overview

DBVI helps working age individuals achieve economic independence by obtaining livable wage jobs and income. This involves training to improve employment skills and higher education that leads to degrees or certificates. DBVI helps transition high school students from school to the world of work. DBVI's statewide approach for younger students helps to ensure that all blind and visually impaired high school students have pre-employment transition skills. DBVI helps individuals of all ages to build adaptive skills related to their visual impairment through assistive technology, low vision, orientation and mobility, and independent living skills.

DBVI Staff and Partners

DBVI services are provided by highly qualified professionals who possess specialized training and understanding of the implications of visual loss. Services are provided by ten staff from four regional field offices. Each office has a Blind Services Rehabilitation Counselor and a Rehabilitation Associate who deliver individualized services. One Blind Services Technology Trainer covers the entire state teaching people how to use assistive technology. The Director of DBVI oversees the statewide program.

DBVI partners with several organizations to accomplish its mission. The major provider of direct instruction for teaching blindness-related skills is the non-profit Vermont Association for the Blind and Visually Impaired (VABVI). Their staff include certified blindness professionals who are highly trained in the areas of Orientation and Mobility, Low Vision, and Rehabilitation Therapy. For other DBVI partners please visit www.dbvi.vermont.gov.

DBVI Recent Developments and Accomplishments

This year DBVI held several White Cane events in each of the DBVI regions. The intent was to educate the public about White Cane Safety Awareness. The white cane is a symbol of strength and independence, used by people who are blind as they travel independently. Many members of the public and community leaders usually attend and participate in a simulated walk in the community facilitated by an Orientation and Mobility instructor to increase awareness of what it is like to travel with the white cane.

The DBVI events were held this year in Barre, Burlington, Rutland, and Springfield.

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Division for the Blind and Visually Impaired

Each event included an experiential walk through each town and guest speakers who discussed specialized technology used by people who are blind. Participants included many individuals who are blind or visually impaired and several town officials who wanted to learn ways to promote safe travel for people who are blind in their town.

DBVI also partnered and assisted with the DVR HireAbility Vermont Transition Core Teams Virtual Conference. This statewide event brought together Transition Core Teams from schools and employment service providers to share ideas about how to assist students with disabilities with their employment goals.

DBVI staff work towards continuous improvement by listening to the voice of customers and using that information and data to improve performance. An updated DBVI State Plan with new goals and strategies was completed and approved by the State Rehabilitation Council in February 2022 and can be found at <https://dbvi.vermont.gov/resources/publications>. The next state plan is due in March 2024. Please also visit the success story link on DBVI's website at www.dbvi.vermont.gov to see examples of people reaching their goals.

The federal Workforce Innovation and Opportunity Act (WIOA) requires DBVI to use 15% of its federal grant award to provide Pre-Employment Transition Services (Pre-ETS) creating an opportunity for DBVI to expand Pre-ETS services in the core areas:

- Job exploration counseling.
- Work-based learning opportunities.
- Counseling on post-secondary educational opportunities.
- Workplace readiness training.
- Instruction in self-advocacy.

DBVI has been successful in expanding Pre-ETS services for students who are blind or visually impaired by providing work-experiences, internships, and job readiness training to build skills necessary for career development. Learn, Earn, and Prosper (LEAP) is a program developed by DBVI to achieve these goals. Students participate in a slate of different options year-round to learn job readiness and self-advocacy skills, and to engage in work-based learning experiences. LEAP's in-person and residential programming returned in 2022 after Vermont lifted COVID restrictions. LEAP also continued its year-round virtual programs. Virtual programs have become a significant access point for participants and families who are not yet ready for a residential experience. **Check out [DBVI's new LEAP video](#).**

DBVI Future Directions

DBVI believes the best path forward for people with visual impairments includes a solid foundation in technology. DBVI staff stay current to help customers achieve their employment and independence goals. For example, several new apps use artificial

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Division for the Blind and Visually Impaired

intelligence, which allows blind users to use the smart phone camera to identify objects, read text, identify colors, and provide information about products while shopping. TapTapSee is one such example. [TapTapSee - Blind and Visually Impaired Assistive Technology - powered by CloudSight.ai Image Recognition API \(taptapseeapp.com\)](https://www.taptapseeapp.com).

DBVI continued with the third year of a Rural Youth Apprenticeship learning collaborative with a focus on creating apprenticeship opportunities in a rural state. This was a competitive process and other states include Arkansas and Wyoming. The learning opportunities are facilitated by the team from University of Massachusetts - Boston in their Rural Apprenticeship Development program. It is a 5-year grant with the goal of creating apprenticeship opportunities for people who are blind in Vermont.

DBVI Programs and Services

Vision Rehabilitation Employment Services

The goal of DBVI's vocational rehabilitation services is to help people with vision loss to retain, return, or secure employment. Individuals meet with a DBVI counselor to identify goals and develop a plan to improve their functional independence.

DBVI counselors provide guidance related to employment and help people explore interests and abilities. On their individual path to employment, most people who work with DBVI:

- Build and strengthen vocational skills.
- Learn new adaptive skills to remain independent regardless of vision loss.
- Learn to use specialized technology needed to do their jobs.
- Receive services to maximize visual function.
- Help with a job search and provide training in job skills.
- Assist with attending college.
- Provide technology and training that allow people to access printed materials and complete work tasks.

DBVI Services for High School Students

DBVI's transition services provide high school students with opportunities for learning job readiness, self-advocacy, and independent living skills. DBVI collaborates with several partners including DVR HireAbility, VABVI, ReSOURCE, and the Gibney Family Foundation.

The Learn, Earn, and Prosper (LEAP) program provides paid summer employment for youth in a residential setting. LEAP empowers students to take charge of their employment future by gaining early employment success, and helps students make a successful transition from school to work.

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Division for the Blind and Visually Impaired

Independent Living Services

DBVI helps individuals maintain independence. A DBVI Independent Living Case Manager meets an individual in his or her own home to discuss the individual's goals and develop a plan to achieve the highest possible degree of independence in activities such as traveling, preparing meals, and managing medications. Direct instruction is provided by certified blindness professionals through a contract agreement with the Vermont Association for the Blind and Visually Impaired (VABVI). VABVI also administers the Older Blind Program to provide specialized vision rehabilitation services.

Assistive Technology

Assistive technology is critical for many people with vision loss. DBVI invests significant effort to stay current in new assistive technology to help people find employment, participate in their communities, and eliminate other barriers caused by vision loss.

DBVI Results (how much, how well, better off)

How many DBVI served (SFY2023):

- 283 individuals received services to assist them to maintain or find employment because of their vision loss. 258 received services in SFY2022.

Individuals previously served in the DBVI Homemaker Program are now being served in the DBVI Independent Living and Older Blind program for SFY2023.

- 756 individuals over the age of 55 received specialized vision rehabilitation services.
- 99 individuals were served by the Independent Living Program.
- 4 individuals served in the Business Enterprise Program.
- Total for SFY2023= 1,142 (Includes DBVI VR; DBVI Independent Living; and Older Blind programs).

Total Training Hours, LEAP FFY2023: 2,310

- Work-Based Learning Training hours (both in-person & virtual): **1,914**
- Work Readiness Training & Self-Advocacy, Social and Leadership Instruction (both in-person & virtual): **315**
- Orientation and Mobility with a COMS (both in-person & virtual): **72**
- Independent Living Skills with a CVRT (both in-person & virtual): **58**

In FFY2023, overall training hours decreased by 209 hours. This decrease was mainly because the residential program did not host an Intern in summer of 2023. Intern's engage in the program for eight weeks, full time and with a focus on their career interest. We did not have a student this past summer of that age to engage in that level of programming. We hope to welcome Interns back next summer.

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The percentage of population served who were under age 22 at entry into DBVI services has dipped slightly from its recent average of 25% of people served. In SFY2023, 22% of people served had entered DBVI services before the age of 22.

How well DBVI served people:

Below are the SFY2022 Customer Satisfaction results of a 3-year statewide random survey of all participants in the Division for the Blind and Visually Impaired (DBVI) Vision Rehabilitation Employment program (Conducted by Market Decisions):

- 97% of consumers said they are satisfied with the DBVI vocational rehabilitation program.
- 95% of consumers agree that they are better off as a result of the services received from DBVI.
- 97% of consumers said that DBVI staff treated them with dignity and respect.
- 96% of consumers said that DBVI helped or is helping them achieve their vocational rehabilitation goals.
- 93% of consumers said that DBVI services met their expectations.
- 91% of consumers said that DBVI vocational rehabilitation services are helping or will help them become more independent in general.
- 85% of consumers said that DBVI helped them reach their job goals.

How people are better off:

- 22 blind or visually impaired individuals closed their DBVI case in SFY2023 with successful employment.
- 59% had a wage above 125% of the minimum wage in SFY2023.
- 55.4% employment rate four quarters post exit in SFY2023, an increase from 48.3% in SFY2021 and 52.0% in SFY2022.
- Median earnings in the two quarters post exit rose by 18% to \$6,153 in SFY2023 from \$5,213 in SFY2022, both above the national average for those years.

To read success stories of DBVI customers and their experiences, visit the DBVI website: www.dbvi.vermont.gov.

Table 1: Table showing VT and National averages for key federal WIOA reporting metrics. Data for VT are combined between DBVI and DVR HireAbility agencies as per federal reporting requirements.

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MEASURE	NATIONAL AVERAGE SFY 20	VERMONT RESULTS SFY 20	NATIONAL AVERAGE SFY 21	VERMONT RESULTS SFY 21	NATIONAL AVERAGE SFY 22	VERMONT RESULTS SFY 22	NATIONAL AVERAGE SFY 23	VERMONT RESULTS SFY 23
MEASURABLE SKILLS GAINS	31.4%	49.3%	43.3%	49.0%	43.0%	57.3%	48.7%	56.7%
EMPLOYMENT RATE 2 QUARTERS POST EXIT	51.3%	51.1%	48.6%	53.3%	52.5%	53.3%	56.2%	56.0%
EMPLOYMENT RATE 4 QUARTERS POST EXIT	43.6%	49.7%	44.0%	48.3%	48.0%	52.0%	52.8%	55.4%

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Division of Licensing and Protection

Division of Licensing and Protection (DLP) Philosophy

Balanced and assertive regulation of health care organizations ensures that Vermonters receive care with dignity, respect, and independence. When vulnerable Vermonters are maltreated, an effective investigation, appropriate remediation, and protective services should be put in place to prevent additional harm.

DLP Overview

DLP has two branches that work to protect vulnerable adults and individuals receiving care:

- [Survey and Certification](#) (S&C) is the State Survey Agency for the State of Vermont. In this role, S&C licenses and certifies health care organizations to ensure that they meet minimum state and federal regulatory compliance. Details can be found at:
- [Adult Protective Services](#) (APS) investigates allegations of abuse, neglect, and exploitation of vulnerable adults and implements protective services, as necessary, to limit future maltreatment. The APS Annual Report can be found at [APS Statistical Information | Division of Licensing and Protection \(vermont.gov\)](#)

DLP Staff and Partners

S&C currently has 29 employees, 19 of whom are Registered Nurses (RN) who are federally trained and certified to perform investigations and surveys. These RNs are home-based and travel throughout the state to investigate complaints and to perform recurring, scheduled surveys. S&C follows federal and state regulations and procedures developed by the Centers for Medicare and Medicaid Services (CMS).

APS currently has 29 employees, including ten home-based investigators who travel throughout the state to investigate allegations of maltreatment of vulnerable adults. APS frequently partners with law enforcement agencies and human service providers in the performance of their investigations.

Like many current employers, DLP has struggled this year to recruit and hire staff. At the time of this writing, DLP is actively trying to fill eight open positions (five in S&C and three in APS), several of which have had to be reposted multiple times.

DLP Recent Developments and Accomplishments

State licensed Residential Care Homes and Assisted Living Facilities continue to experience increasing challenges that S&C must account for in its survey efforts. Vermont currently has 144 licensed skilled nursing facilities, residential care homes, and assisted living residences, totaling over 6,243 licensed beds, caring for many of the most vulnerable Vermonters. The nature and volume of the work has grown in complexity over the past ten years, requiring additional support and oversight. To

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address these rising needs, in SFY2023-24, DLP hired 3 additional nurse surveyors dedicated to state licensed facility work, as well as Long Term Care Manager, and an Administrative Coordinator to create our state unit. The unit is fully functional at this time and is closely overseeing Residential Care Homes, Assisted Living Residences, Therapeutic Community Residences, and the Home for the Terminally Ill as planned.

S&C oversees the Nurse Aide Training and Competency Program which approves nurse aide training programs statewide. S&C also holds the vendor contract to assure the availability of testing for licensure for licensed nurse's aide students. S&C has negotiated a new contract for testing with Excel, an experienced and trusted testing company from New Hampshire. Excel began providing testing opportunities for nurse aide students in late SFY23, and reports from the training programs have been positive.

APS was awarded a one-million-dollar grant in 2020 by the federal Department of Health and Human Services (HHS), Administration for Community Living (ACL) to provide Restorative Justice services aimed at lowering the re-victimization rates of vulnerable adults, as well as lowering the recidivism rates of perpetrators of maltreatment. In SFY2022, the ACL funded the pilot program for one additional year, awarding a supplement of \$204,750 with the option for an additional no-cost extension. In 2023 ACL granted a no-cost extension to carry the pilot through August of 2024. APS also received two other awards from the ACL in SFY2022: \$704,000 through Coronavirus Response and Relief Supplemental Appropriations Act (CRRSA) and \$645,000 through the American Rescue Plan Act (ARPA). These awards support APS Service Navigators to help better identify vulnerable adults in Vermont and connect them to needed services, the building of a new data library, purchase of remote work equipment, PPE and training opportunities for staff. In SFY23 ACL awarded a second tranche of ARPA funds totaling \$1,221,345. In addition to continuing the previous ARPA projects, APS has employed these funds to support three limited service positions; a Program Specialist, an Investigator, and a Policy Analyst. At this point the CRRSA funds have been fully expended. The ARPA funds continue to support the purposes above with a projected end date of September 30, 2024.

DLP Future Directions

A new APS statute was passed by the Vermont Legislature and signed by the Governor on June 29th, 2023, and went into effect two days later on July 1st, 2023. The new statute updated the nearly fifty-year-old statute to center victims' rights and better serve Vermont's vulnerable adults. Though DAIL drafted the statutory language in the bill as introduced to be budget-neutral, Legislative Committee Representation articulated budget-neutrality was not their concern and expanded the scope of statutory language to include broader populations served by APS, more maltreatment incidents to be addressed, and additional investigation components. These expanded statutory criteria and requirements are increasing APS cases by an estimated 50% in SFY24.

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The new APS statute has brought about many positive changes in the service and protection of vulnerable adults in Vermont. One notable exception was the omission of “caregiver negligence” from the definitions of maltreatment that define the scope of APS operations and protections. Protecting vulnerable adults from caregiver negligence is perhaps the most intuitive event that comes to mind when one thinks of the purpose and mission of APS. DAIL conducted a survey of other state APS statutes and found no other state that omits caregiver negligence from the purview of APS operations. While Vermont statute forms a distinction between “negligence” and other forms of conscious or intentional neglect, the numbers in APS reflect that “negligence” makes up 99% of reports of “neglect” to APS in Vermont. Vermont Legislative Committee members and healthcare advocates communicated this omission was aimed to help curb strain on a struggling healthcare workforce and expressed an intention to not have APS investigate (let alone substantiate) reports of caregiver negligence. DAIL believes the omission of caregiver negligence from APS’ purview has left a significant gap in the protection of vulnerable adults in Vermont and will continue to work with the Vermont Legislature to bridge this gap in future legislative sessions.

Early in SFY2020, S&C began the process of updating the Assisted Living Residence and Residential Care Home regulations to reflect the increased needs of people they serve. During the initial phase, a contractor helped DLP solicit detailed input from a wide variety of stakeholders. After a pause to focus on critical COVID-19 efforts, DLP has resumed the regulation review process. A draft of the regulations was circulated late Spring 2023 for informal stakeholder input prior to filing. The Residential Care Home and Assisted Living Residence Regulations have been filed with the Secretary of State’s Office and are currently in the public comment period. Public comments close in mid-January 2024, and the Division will continue the rulemaking process, with anticipated implementation of the new regulations in late 2024 or early 2025.

DLP Programs and Services

Both S&C and APS work to protect and serve vulnerable adults. Vulnerable adults are defined in statute as individuals over 18 years in age who are residents of a facility licensed by S&C, residents of a psychiatric hospital, recipients of home health services, have a diminished capacity to care for themselves, or a diminished capacity to protect themselves from maltreatment.

- S&C conducts unannounced, regular surveys at health care facilities, and investigates complaints made about the care received in these facilities. These surveys and investigations can result in fines and other corrective action, including bans on admissions or revocation of operating licenses.
- APS investigates reports of maltreatment of vulnerable adults. When APS discovers that a person has maltreated a vulnerable adult, that person may be placed on the Adult Abuse Registry. The Registry is used by

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organizations that serve children and vulnerable adults to check the backgrounds of employees and volunteers prior to hiring.

DLP Results (how much, how well, better off)

S&C:

- S&C conducted 265 onsite investigations looking at 471 combined complaints and self-reports across all state and federal provider groups. This represents an increase of 8% from the previous year.
- 11.8% of Nursing Homes had no deficiencies, isolated deficiency with substantial compliance, or no onsite survey performed during this period. This represents a decrease of 38.8% from the previous year.
- 2.9% of Nursing Homes had a deficiency reflecting the potential for minimum harm.
- 58.8% of Nursing Homes had a deficiency reflecting the potential for more than minimum harm, more than double the amount from the previous year.
- 26.5% of Nursing Homes had a deficiency reflecting actual harm or immediate jeopardy of residents. This represents a small (3%) increase from the previous year.
- Since 2018, S&C has processed 11 applications for SNF transfer of ownership for an average of two per year. In calendar year 2021 and 2022, eight applications were received, indicating more than double the number of transfers of ownership applications that occurred between 2018-2019.

APS:

- APS received 3,985 reports alleging abuse, neglect, or exploitation of vulnerable adults, an increase of 11% from the previous year.
- APS initiated 894 field cases from these reports, an increase of 27.9% from the previous year.
- APS completed 502 investigations, a decrease of 10.7% from the previous year.
- APS placed 38 individuals on the Adult Abuse Registry, a decrease of 2.5% from the previous year, and a decrease of 30.1% from two years prior.

As the reported data elements reflect, reports to APS have increased 115% over the last decade (since the last time staffing levels were adjusted for caseloads). With less staff time devoted to each investigation, substantiation numbers have declined in direct proportion to rising caseloads over time. Vermont APS has identified and made use of Federal limited-service grant funds to help maintain acceptable operational levels with a

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focus on victim safety, though this source of Federal funding is anticipated to end in SFY24 without expectation for new funding options beyond a significantly smaller allotment (less than the equivalent of one full-time employee).

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Division of Vocational Rehabilitation

Division Philosophy

The Division of Vocational Rehabilitation's (DVR's) mission is to help Vermonters with disabilities prepare for, obtain, and maintain meaningful careers and to help employers recruit, train, and retain employees with disabilities. Participant choice and self-direction are core values that drive DVR's approach to providing services and developing new programs. DVR's ability to help jobseekers succeed also depends on clearly understanding the needs of our other customers: employers. To improve outreach to both our participants and employers, DVR rebranded as HireAbility Vermont in SFY 2022 and launched a marketing campaign to promote our services for both audiences. The HireAbility rebrand reinforces our commitment to helping participants access high-wage and high-quality careers through training and education. It also conveys our goal of being a source of motivated and trained employees for Vermont employers.

Division Overview

HireAbility serves people with disabilities in Vermont who face barriers to employment. We help HireAbility participants figure out what types of career pathways will work for them, through assessment, counseling, and guidance. We use our extensive networks in the employer community to create job opportunities, match employer needs with jobseeker skills, and help employers retain staff with disabilities. We also invest heavily in post-secondary training and education to help our participants gain credentials that will lead to high wage and high-quality employment.

Staff and Partners

HireAbility has about 150 staff located in 12 district offices around the state. We collaborate with other service providers to reach people with disabilities facing challenges to employment. HireAbility has created partnerships with multiple organizations to serve youth, offenders, veterans, people receiving public benefits, and those who need ongoing support.

Developments and Accomplishments

Improving Participant Outcomes Across Measures: In 2014 the US Congress reauthorized the Rehabilitation Act via the Workforce Innovation and Opportunity Act (WIOA). WIOA introduced new Common Performance Measures (CPM) that core partners, including DVR, are evaluated on. The measures are:

- Job retention six months post program exit.
- Job retention twelve months post program exit.
- Median earnings six months post program exit.
- Credential attainment.
- Measurable skill gains.
- Employer satisfaction.

Prior to WIOA, HireAbility was measured primarily on how many people the program assisted

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Division of Vocational Rehabilitation

in getting a job. This change from quantitative to qualitative measures required a major paradigm shift in our service delivery system. HireAbility implemented the Careers Initiative, a series of strategies to align program services with the new Common Performance Measures.

HireAbility tracks the Careers Initiative strategies through a Performance Dashboard. The Dashboard provides staff and managers with real-time information at the counselor, district, and statewide level. It also serves as a frame of reference for how they are doing and what they need to focus on to achieve the desired outcomes.

SFY 2023 Dashboard data indicates the Careers Initiative has had a positive impact on practices, services, and outcomes:

- A 23 percentage-point increase in HireAbility participants engaging in career assessment within 180 days of application since inception and a 7 percentage-point increase during SFY 2023.
- A 13 percentage-point increase in HireAbility participants with higher wage employment plan goals since inception and a 2 percentage-point increase during SFY 2023.
- A 28 percentage-point increase in HireAbility participants earning over 125% of minimum wage at program exit since inception and a 3 percentage-point increase during SFY 2023.
- A post-pandemic rebound in services, with an 87% increase in applications and 83% increase in plans initiated, resulting in an overall 13% increase in the overall caseload.

We are also seeing a positive impact on the Common Performance Measures themselves with gains across 4 measures in SFY 23 and a minimal drop in the Measurable Skill Gain rate.

A Third Successful Year of the Summer Career Exploration Program (SCEP): In 2023, HireAbility completed the third year of the Summer Career Exploration Program (SCEP). The SCEP was designed to provide high school students with disabilities paid summer work experiences combined with career exploration curriculum. Local HireAbility district teams partnered with local employers to provide meaningful real life work experiences for students with disabilities. Lessons learned from years one and two were documented in a SCEP Manual to improve implementation across the state. The following is a summary of the outcomes for year three:

- 97 students successfully completed paid work experience with a local employer.
- SCEP engaged 87 employers in providing work experiences for students.

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Division of Vocational Rehabilitation

- SCEP included all students with disabilities, regardless of the level of support required for them to be successful.
- 20 students were offered competitive employment after completing the SCEP program (21% of participants).

Helping SSI/SSDI Beneficiaries Achieve Financial Independence through the Kessler Foundation Grant/WorkVT2.0: HireAbility was selected by the Kessler Foundation to receive a grant designed to improve employment prospects for participants who receive Social Security disability benefits (SSI and SSDI). Vermont was one of only 6 projects to be selected out of over 70 applications. The WorkVT2.0 project provides an innovative combination of services and financial incentives to help beneficiaries obtain enough income to end their benefits. The project has four sites, one each in the Burlington, Rutland, Newport, and Barre offices.

Recruitment began in March 2021 after a one-year delay due to COVID. As of September 30, 2023, over 143 beneficiaries had signed up to receive WorkVT2.0 services. The project has shown some good successes with 84 participants working, 32 of which are working full-time. 35 participants are enrolled in post-secondary education. The project provides up to three achievement payments for participants if they hit specific earning benchmarks: 53 participants have earned at least one achievement payment; 22 have worked their way off benefits and have earned all three achievement payments.

Farm First: Farm First provides Vermont's farmers and their families with support, resources, and information to reduce stress and improve emotional well-being. We do this by having a Resource Coordinator to respond to outreach and establish a plan for each farmer – the plan may include up to 12 counseling sessions with an Employee Assistance Program counselor or an affiliate, a referral for Hire Ability services and/or other supports such as business advising, agricultural mediation, etc. The program was initially started to serve dairy farmers but at this time we are serving all farmers with approximately 50% of these farmers being primarily focused in dairy.

New Initiatives

Emergency Housing:

- In November 2022, HireAbility Vermont staff joined the State's Care Coordination Housing Resource Teams (CCHRT) to play a critical role in providing targeted outreach to 1500 households across the state that were living in hotels and motels that would otherwise be homeless.
- In total, 22 vocational counselor staff volunteered to be part of CCHRTs.

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- The work required counselors to rapidly restructure their workload to allow them to spend multiple days a week outreaching every participant in various hotels and motels in their districts.
- Overall, HireAbility's role on the CCHRT resulted in staff frequently working longer than normal hours to keep up with their regular caseload, sometimes under challenging conditions, which they did without complaint.
- The teams that were stood up in November continued until June 30, 2023, for a total period of seven months.

As of July 2023, 101 of the CCHRT residents are active HireAbility participants helping them to find their way out of homelessness and into greater self-sufficiency with supports. HireAbility is proud of what these 22 vocational counselors accomplished as part of a unique multi-departmental group of AHS employees.

Diversity, Equity, Inclusion and Access (DEIA): In 2021 Governor Scott announced the following proclamation: "Vermont seeks to achieve equality and equity and to create a culture in which racial, ethnic and other cultural disparities are openly acknowledged and addressed and where no one person is more likely to experience society's benefits or burdens than any other person." HireAbility has embraced this declaration and is working towards putting these words into practice. Working with a contractor and our partners we developed the following DEIA vision statement for the program: **HireAbility will become an organization where; All staff and participants have a sense of belonging & feel welcomed here at HireAbility. Our diverse staff reflect the communities that we serve. Our strong connections with multicultural communities and community partners ensures engagement, successful outcomes, and career pathway opportunities for participants from diverse backgrounds.**

To make this vision a reality, HireAbility worked with the consultant to conduct a needs assessment and identify opportunities for growth. Based on the needs assessment, we have identified four areas of focus for our work in SFY 24 and SFY 25. We have formed four charter groups made up of a diverse cross section of staff to do this work. The goals for each charter group are as follows:

- Develop a workforce that reflects the diverse populations we serve.
- Effectively reach all populations that are eligible for our services.
- Ensure staff have access to the tools and knowledge and feel competent to serve all participants in a culturally appropriate way.
- Strengthen our existing communication loops to ensure staff are informed and can contribute.

The charter groups will be charged with developing strategies to move the agency forward in these areas. They will also identify metrics for success that are meaningful and measurable.

SFY2025 Budget Testimony Division of Vocational Rehabilitation

The Vermont Career Advancement Project (VCAP): HireAbility was awarded a \$6.5 million grant from the US Department of Education to support the Vermont Career Advancement Project (VCAP) in 2021. VCAP has established a robust partnership between HireAbility, the Vermont Department of Labor (VDOL), the Community College of Vermont (CCV), Vermont Technical College (VTC), and secondary Career and Technical Education Centers (CTEs), to build on-ramps enabling individuals with disabilities to pursue high quality, good paying careers. The project has embedded dedicated Career Pathways Student Advisors in these post-secondary programs to provide intensive support for VCAP participants. VCAP has also partnered with other work force development organizations to expand paid, credentialed, occupational training programs in response to employer needs.

Utilizing the best available employment projections for high quality, high wage career pathway opportunities in Vermont, HireAbility identified the following five career sectors for the project: Advanced Manufacturing, Financial Services, Healthcare, Skilled Construction Trades, and Information Technology. VCAP is utilizing HireAbility's extensive network of employer contacts through its Business Account Managers to engage employers in offering opportunities in these sectors. CCV and VTC, which have program development experience and expertise, provide the required Related Instruction for apprenticeships and other credentialed programs. These programs are linked directly to secondary and adult programs offered through the State's 17 Career and Technical Education (CTE) centers. The project will enroll a total of 500 participants, with 375 earning Industry Recognized Credentials and 75 enrolling in Registered Apprenticeships. 75% of participants will exit their training programs employed and earn at least 150% of the state's minimum wage.

HireAbility started enrollment in VCAP in August 2022. To date 243 individuals have been enrolled in the program. 65 have achieved their planned educational goals, including 19 vocational/technical certifications or industry recognized credentials. There are also an additional 109 VCAP participants who are working on their educational goals, 42 of which are enrolled in Community College of Vermont, a key partner in this grant. Our most common goals among VCAP participants are nursing, heavy and tractor-trailer truck drivers, and substance use and behavioral disorder counselors. To date we have had 6 participants exit the program successfully.

The Career Training Offset (CTO): HireAbility has long recognized that many of our participants cannot engage in industry recognized credential training programs because they cannot afford to stop working. As a result, they remain in entry level employment without the training and skills to move up the career ladder. To address this issue, HireAbility implemented the Career Training Offset (CTO). Participants enrolled in training that leads to an industry recognized credential, are paid minimum wage for classroom and unpaid instruction time. For example, an HVAC (Heating, Ventilation, and Air Conditioning) program has approximately 144 hours of unpaid training time. HireAbility will pay the participant minimum wage for these hours to ensure they have a steady source of income while they get trained.

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Division of Vocational Rehabilitation

Between October 2022 and September 2023, 71 participants started training programs with support from the CTO. To date, 68 participants have successfully completed a CTO supported training program. Thirty-six participants who participated in a CTO are currently employed in their intended field or were at the time their cases closed. CTO participants engage in a wide range of training programs, with bookkeeping, CDL training, cosmetology, and LNA programs being the most frequently completed. being.

Programs and Services

HireAbility Core Services: Services for jobseekers are tailored to the person and driven by his or her own interests, job goals, and needs. Each person meets regularly with his or her counselor, who helps develop an Individualized Plan for Employment (IPE) and manages the services and supports needed to realize the person's career goals. The core services of vocational assessment, counseling and guidance, job training, and job placement provided by HireAbility staff and partners, are enhanced with a range of purchased services and supports.

HireAbility Placement Services: HireAbility has an ongoing partnership with the Vermont Association of Business, Industry, and Rehabilitation (VABIR) to provide employment services. HireAbility customers and counselors benefit from dedicated employment consultants who provide job development, job placement, and workplace supports to help people find and keep jobs.

HireAbility Employment Teams: HireAbility oversees 12 Business Account Managers (BAMs) who have active relationships with 2,500 employers statewide. The BAMs convene local teams of Agency of Human Services (AHS) providers who deliver employment services across multiple populations. These employment teams coordinate local employer outreach across programs to better serve employers.

Jump on Board for Success (JOBS): The JOBS program is a HireAbility partnership with the Department of Mental Health. JOBS provides employment and mental health case management services for youth with severe emotional/behavioral disabilities.

Work Incentives Counseling Program: HireAbility certified work incentives counselors provide information and expertise to Social Security disability program beneficiaries about the impact employment will have on their benefits.

Employee Assistance Program (EAP): EAP has offered comprehensive Employee Assistance Program (EAP) services since 1986. EAP provides short-term counseling and referral, management consultation, wellness workshops, and resource information.

Rehabilitation Counselor for the Deaf (RCD): RCDs provide a wide range of services for

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Division of Vocational Rehabilitation

Vermonters who are Deaf, hard of hearing, or late deafened.

Assistive Technology Program (ATP): The AT program helps individuals of all ages find accessible solutions to overcome disability and aging related barriers at home, work, and in the community.

Results (How much, how well, better off)

Number of People Served:

- A total of 6,324 individuals were served in SFY 2023. 5,871 were served in SFY 2022.
- 5,762 people were served in the core HireAbility program in SFY 2023. 5,235 were served in SFY 2022.
- 1,479 high school students were served through the Pre-Employment Transition Services program in SFY 2023. 1,285 were served in SFY 2022.

How Well We Served Them: The HireAbility Participant Experience Survey is conducted every two years to determine participants' overall satisfaction with the program. The survey is conducted by a third-party research firm, Market Decisions Research (MDR), who has an extensive background working with Vocational Rehabilitation agencies nationwide. 646 participants were contacted for our 2022 survey. This was the first survey conducted post-COVID and has provided HireAbility with valuable information regarding participants' reactions to remote and hybrid services.

The following are highlights from the 2022 results:

- 81% of participants reported they were satisfied or very satisfied with HireAbility.
- 93% said they would recommend that their friends or family members seek help from HireAbility.
- 90% of participants responded they are satisfied with their experience working with HireAbility staff and counselors. This is a two percent increase from our 2019 survey.
- 97% felt they were treated by staff with dignity and respect.
- 77% of participants reported that it was very easy or somewhat easy to connect with their counselor, even during the times where services were being delivered entirely remotely.
- 63% of participants reported that they would like to continue to receive services remotely.

HireAbility will conduct the next survey in spring of 2024.

SFY2025 Budget Testimony Division of Vocational Rehabilitation

Employer Satisfaction with HireAbility: In 2022 HireAbility contracted with MDR to develop a survey that would determine employer satisfaction with services. Between February and May 2022, MDR surveyed 72 employers that had contact with a HireAbility team member(s) within the last 18 months. The survey found that 93% of employers were satisfied with services, up from 77% in 2019, and 100% of employers would be open to working with HireAbility again in the future, up from 94% in 2019. One area of improvement that was identified is that employers would like to be contacted more frequently.

The survey results provided invaluable information that will help us continue to improve our services to employers, develop more connections, and better serve HireAbility customers.

How People are Better Off: The most apparent measure of successful participant outcomes is their employment status when they leave the program. In SFY 2023, 503 individuals closed their cases with successful employment. This means they met their individual employment goals and were stably employed for at least 90 days. In addition, 285 of these individuals (57%), earned above 125% of minimum wage.

HireAbility also received data for the second time on all five WIOA Common Performance Measures. The SFY 2023 results show Vermont participants are achieving outcomes at a higher rate than the national average on all five performance measures. Additionally, Vermont's programs improved on four of the five performance measures in SFY 2023 compared to our SFY 2022 outcomes.

The employment rate four quarters post-exit continues to improve, starting at 49.7% in SFY 2020 and increasing to 55.4% in SFY 2023. Vermont's median earnings two quarters post exit jumped from \$3,901 in SFY 2020, which was below the national average, to \$6,153 in SFY 2023, and has been above the national average for past three years.

This table shows VT and National averages for key federal WIOA reporting metrics. Data for VT combines the Division of the Blind and Visually Impaired (DBVI) and HireAbility agencies per federal reporting requirements.

This table shows VT and National averages for key federal WIOA reporting metrics. Data for VT combines the Division of the Blind and Visually Impaired (DBVI) and HireAbility agencies per federal reporting requirements.

SFY2025 Budget Testimony Division of Vocational Rehabilitation

MEASURE	NATIONAL AVERAGE SFY 20	VERMONT RESULTS SFY 20	NATIONAL AVERAGE SFY 21	VERMONT RESULTS SFY 21	NATIONAL AVERAGE SFY 22	VERMONT RESULTS SFY 22	NATIONAL AVERAGE SFY 23	VERMONT RESULTS SFY 23
MEASURABLE SKILLS GAINS	31.4%	49.3%	43.3%	49.0%	43.0%	57.3%	48.7%	56.7%
EMPLOYMEN T RATE 2 QUARTERS POST EXIT	51.3%	51.1%	48.6%	53.3%	52.5%	53.3%	56.2%	56.0%
EMPLOYMEN T RATE 4 QUARTERS POST EXIT	43.6%	49.7%	44.0%	48.3%	48.0%	52.0%	52.8%	55.4%
MEDIAN EARNINGS 2 QUARTERS POST EXIT	\$4,005	\$3,901	\$4,280	\$4,630	\$4,776	\$5,213	\$5,130	\$6,153
CREDENTIAL ATTAINMENT	NA	NA	23.2%	42.5%	30.8%	42.5%	37.6%	53.2%

SFY2025 Budget Testimony Fact Sheet

SFY2025 TOTAL DAIL PROPOSED BUDGET - \$703,610,076

- General Fund – 4.9%.
- Global Commitment – 88.1%.
- Federal Fund – 6.3%.
- Special and Interdepartmental Funds-less than 1%

SFY2025 DAIL PROPOSED BUDGET BY DIVISION

DIVISION	Proposed Budget Total	% Of Total Budget	Fund Split		
			GF	GC	Federal /Other
Developmental Disabilities Services Division	\$328,509,400	47%	2%	97.2%	Less than 1%
(Includes DS Waiver)					
Adult Services Division	\$326,452,512	46%	4%	92%	4%
(Includes AAA, Attendant Services Programs, Adult Day)					
Vocational Rehabilitation	\$ 30,567,941	4%	22%	0%	82%
Blind and Visually Impaired	\$ 3,502,203	Less than 1%	34%	9%	57%
Licensing and Protection	\$ 7,947,328	Approx.. 1%	41%	0%	59%
Commissioner's Office	\$ 6,630,692	Approx. 1%	80%	Less than 1%	19.5%
Totals	\$703,610,076	100%			

SFY2025 Budget Testimony

Summary of Changes from SFY24 Base Budget to SFY2025 Proposed Budget

Total Change SFY2024 to SFY2025 Recommended Budget	\$35,897,195
(All Gross Dollars)	
DAIL Administration & Support – Sec. B.329	
Total SFY2024 Base Appropriation	\$49,223,336
Proposed Changes:	
1) SFY2025 net increase (Salary & Fringe and Internal Service Funds)	\$ 2,467,199
Total Changes	\$ 2,467,199
SFY2025 Recommend	\$51,690,535
Positions: 325 positions and 330 employees as 5 positions are shared	
Adult Services Division Grants - Sec. B.330	
Total SFY2024 Base Appropriation	\$22,380,328
Proposed Changes:	
1) Support and Services at Home (SASH) funding (BAA Item)	\$ 541,947
2) Child Care Contribution	\$ 9,823
Total Changes	\$ 551,770
SFY2025 Recommend	\$22,932,098
Blind and Visually Impaired Grants – Sec. B.331	
SFY2024 Base Appropriation	\$ 1,907,604
Proposed Changes:	
1) no changes	\$ 0
SFY2025 Recommend	\$ 1,907,604
Vocational Rehabilitation Division - Sec. B.332	
SFY2024 Base Appropriation	\$ 10,179,845
1) no changes	\$ 0
SFY2025 Recommend	\$ 10,179,845

SFY2025 Budget Testimony

Summary of Changes from SFY24 Base Budget to SFY2025 Proposed Budget

Developmental Services Grants Appropriation - Sec. B.333	
SFY2024 Base Appropriation	\$308,668,057
Proposed Changes	
1) DS Caseload – 329 individuals @ \$53,677 = \$17,659,733 adjust for Equity Fund less (-\$8,589,699) for a total of \$9,070,034.	\$ 9,070,034
2) DS Public Safety/Act 248 Caseload 15 @ \$132,045	\$ 1,980,675
3) Commercial Policy Workers Comp premium decrease	\$ (50,332)
4) Child Care Contribution	\$ 180,910
Total changes	\$ 11,181,287
SFY2025 Recommend	\$319,849,344
Brain Injury (TBI) Program - Sec. B.334	
SFY2024 Base Appropriation	\$ 6,638,028
1) Child Care Contribution	\$ 1,177
Total changes	\$ 1,177
SFY2025 Recommend	\$ 6,639,205

Choices for Care (CFC) – Sec. B 334.1	
This includes estimated expenditures for nursing homes, home and community-based services and other Medicaid acute/primary care costs for Choices for Care participants.	
SFY2024 Base Appropriation	\$268,715,683
1) Statutory Nursing Home (NH) inflationary rate increase	\$ 4,908,476
2) Skilled Nursing Facilities (SNF) Rate Method Stabilization Proposal	\$ 9,900,000
3) Bennington’s budgeted rate with iCare costs	\$ 2,360,201
4) iCare special rate incentives	\$ 2,535,465
5) 5% increase in Case Mgmt, Flex Choices (Transition II), Adult Family Care (AFC) and Moderate Flexible Funding (BAA Item)	\$ 1,835,000
6) Child Care Contribution	\$ 156,620
Total Changes	\$ 21,695,762
SFY2025 Recommend	\$290,411,445

SFY2025 Budget Testimony

Administration Budget by Division

DEPARTMENT OF DISABILITIES, AGING, & INDEPENDENT LIVING ADMINISTRATION BUDGET BY DIVISIONS SFY25

PERSONAL SERVICES DETAIL	TOTAL	VR	DBVI	DDSD	ASD	L & P	Com office	TOTAL
Classified Salary	24,590,779	10,015,011	827,694	4,230,520	3,457,598	4,558,279	1,501,677	24,590,779
Exempt Salary Total	703,893	-	-	-	-	-	703,893	703,893
Salary Total	25,294,672	10,015,011	827,694	4,230,520	3,457,598	4,558,279	2,205,570	25,294,672
FICA	1,934,451	766,141	63,319	323,049	264,507	337,477	179,958	1,934,451
HEALTH	7,075,524	3,005,556	230,471	1,215,709	798,642	1,278,276	546,870	7,075,524
RETIREMENT	6,740,248	2,674,003	220,994	1,129,549	923,180	1,217,062	575,460	6,740,248
DENTAL	281,490	113,318	11,057	50,819	33,892	48,320	24,084	281,490
LIFE	126,705	50,153	4,147	21,195	17,323	22,837	11,050	126,705
LTD	5,128	1,874	189	551	361	424	1,729	5,128
EAP	11,220	4,958	408	1,876	1,292	1,870	816	11,220
FMLI	90,402	37,158	3,072	15,520	11,025	15,444	8,185	90,404
CCC	80,411	33,064	2,731	13,801	9,804	13,733	7,278	80,411
Fringe Benefits Total	16,345,580	6,686,225	536,388	2,772,069	2,060,026	2,935,443	1,355,430	16,345,580
Unemployment	135,418	11,151	696	66,630	53,467	1,925	1,549	135,418
WC/ Other Ins	230,797	-	-	-	-	-	230,797	230,797
Emp room allowance	15,470	-	-	8,583	6,887	-	-	15,470
Tuition	40,000	36,000	4,000	-	-	-	-	40,000
Overtime	50,000	20,999	2,080	6,965	9,583	5,754	4,618	50,000
Temp Employee	268,310	243,918	0	8,125	6,520	9,747	0	268,310
Contracts	3,735,973	1,501,091	30,483	1,204,708	685,862	168,686	145,143	3,735,973
Vacancy Savings	(898,242)	(420,894)	(25,302)	(129,223)	(94,983)	(106,151)	(121,689)	(898,242)
Sub-Total Misc Personal Services	3,577,726	1,392,265	11,956	1,165,788	667,337	79,961	260,418	3,577,726
TOTAL PERSONAL SERVICES	45,217,978	18,093,501	1,376,038	8,168,377	6,184,961	7,573,682	3,821,418	45,217,977

Number employees by Division	330	146	12	55	38	53	26	330

OPERATING DETAIL	TOTAL	VR	DBVI	DDSD	ASD	L & P	Com office	TOTAL
Repair & Maint - Buildings	27,000	15,172	1,458	1,798	1,442	2,000	5,130	27,000
RENTALS	1,624,046	1,356,396	103,845	113,519	-	-	50,287	1,624,046
Rentals - Auto & Other	35,036	12,992	1,414	1,744	1,399	3,667	13,820	35,036
Fee for Space	779,147	192,645	31,430	78,380	118,549	111,765	246,378	779,147
Insurance other than Empl Bene	0	0	0	-	-	0	0	0
Insurance	138,313	0	0	-	-	0	138,313	138,313
Dues	44,000	2,984	2,376	2,929	2,351	25,000	8,360	44,000
Advertising	50,000	27,800	2,700	3,329	2,671	4,000	9,500	50,000
Communications	221,528	88,475	6,963	54,158	30,842	4,000	37,090	221,528
data cicuuits, internet	43,000	23,348	2,322	2,863	2,297	4,000	8,170	43,000
ADS App Support SOV Emp Exp	327,006	0	0	-	-	0	327,006	327,006
DII Assesment/SLA Charges	554,440	-	-	-	-	-	554,440	554,440
ADS Allocation Exp	422,503	-	-	-	-	-	422,503	422,503
Printing and Binding	200,000	102,200	10,800	16,089	12,911	20,000	38,000	200,000
Registration for Meetings&Conf	60,000	29,760	3,240	3,994	3,206	8,400	11,400	60,000
Postage	79,641	26,397	5,705	7,033	5,644	14,790	20,072	79,641
Travel	578,127	198,987	15,006	161,008	65,227	117,034	20,866	578,127
Other Purchased Services	89,421	21,491	12,650	12,902	12,638	14,370	15,370	89,421
Evaluations	20,000	9,920	1,080	1,332	1,068	2,800	3,800	20,000
Office Supplies	120,000	58,520	6,480	10,763	8,637	12,800	22,800	120,000
Other General Supplies	16,000	7,936	864	1,065	855	2,240	3,040	16,000
Food	5,000	2,480	270	333	267	700	950	5,000
Educational Supplies	18,000	8,928	972	1,198	962	2,520	3,420	18,000
Subscriptions	14,500	7,192	783	965	775	2,030	2,755	14,500
Data Processing Supplies	8,000	3,968	432	533	427	1,120	1,520	8,000
Electricity	6,500	3,224	351	433	347	910	1,235	6,500
Furniture & Fixtures	33,000	16,368	1,782	2,197	1,763	4,620	6,270	33,000
Other Equipment	20,000	4,920	1,080	1,332	1,068	2,800	8,800	20,000
Information Technology Equip	81,000	33,780	670	6,990	5,610	5,000	28,950	81,000
Inf Tech Purchases-Software	63,000	37,720	3,780	4,660	3,740	6,800	6,300	63,000
Vision Assesment	498,875	-	-	-	-	-	498,875	498,875
HR Services	293,474	-	-	-	-	-	293,474	293,474
Other Operating	2,000	992	108	133	107	280	380	2,000
TOTAL	6,472,557	2,294,595	218,560	491,679	284,803	373,646	2,809,274	6,472,557
TOTAL ADMINISTRATION	51,690,536	20,388,096	1,594,599	8,660,056	6,469,764	7,947,328	6,630,692	51,690,535

SFY2025 Budget Testimony

Administration Budget by Division

ADMINISTRATION - RECEIPTS	Total	VR	DBVI	DDSD	ASD	L & P	COMM	TOTAL
FEDERAL FUNDS								
TITLE 18 SURVEY & CERT; 93.777	1,795,687					1,795,687		1,795,687
TITLE 19 SURVEY & CERT; 93.796	925,000					925,000		925,000
CLIA; 93.777	5,000					5,000		5,000
Elder Abuse; 93.747	600,000					600,000		600,000
Hospice Impact; 93.777	38,000					38,000		38,000
IND LIVING PART B; 93.369	100,000	100,000						100,000
TITLE III E; 93.052	433,000				433,000		0	433,000
SECTION 110; 84.126A	11,438,945	11,438,945						11,438,945
CMS-EVV; 93.778	25,000			8,333	8,333		8,334	25,000
SECTION 110 DBVI; 84.126	663,669		663,669					663,669
Senior Employment; 17.235	20,447			20,447				20,447
ASSISTIVE TECH. GRANT; 93.464	298,000	298,000						298,000
SHIP; 93.324	4,000				4,000			4,000
Money Follows the Person; 93.971	993,409				993,409			993,409
Social Services Block Grant; 93.667	380,107			380,107				380,107
VT Career Advancement Project (VCA	1,000,000	1,000,000						1,000,000
Title VI-B (Stafford VR); 84.187A	6,200	6,200						6,200
Medicaid 93.778	7,210,933	0	201,050	2,436,526	2,360,261	967,977	1,245,118	7,210,933
PADS MMIS; 93.778	125,000			41,667	41,667		41,666	125,000
CHIP; 93.767	700			700				700
Total Federal	26,063,097	12,843,145	864,719	2,887,780	3,840,670	4,331,664	1,295,118	26,063,097
Special Funds								
VR FEES (EAP & AT)	1,318,889	1,318,889	0					1,318,889
VENDING	24,568	0	24,568					24,568
CONFERENCE FEES	47,000	3,000	0	24,411	19,589			47,000
Total Special	1,390,457	1,321,889	24,568	24,411	19,589	-	-	1,390,457
Interdepartmental Transfers								
SNAP; 03440	946,284	946,284						946,284
Welfare to Work; 03440	20,000	20,000						20,000
DOH Hospital Surveyor; 03420	100,000					100,000		100,000
DOH ELC Strike Team; 03420	219,416					219,416		219,416
Total IntraUnit	1,285,700	966,284	-	-	-	319,416	0	1,285,700
GC MCO Indirects	35,000						35,000.00	35,000
General Fund	22,916,281	5,256,778	705,312	5,747,864	2,609,506	3,296,248	5,300,574	22,916,281
TOTAL RECEIPTS	51,690,535	20,388,096	1,594,599	8,660,056	6,469,764	7,947,328	6,630,692	51,690,535

DAIL Program Summary

***All data is for SFY2023 unless otherwise noted**

Whom We Serve	Program Description	Performance Measures	SFY2025 Proposed
Adult Services Division			
People with disabilities.	Home Access Program (HAP): DAIL transfers \$100,000 to the Vermont Housing and Conservation Board (VHCB) to support VCIL's HAP Program. The HAP program provides information, assistance, and referral services to help people with physical disabilities locate and secure funding for home modifications.	Performance (SFY2022): VHCB manages the Home Access Program grant and performance measures.	\$100,000 General Funds
Division for the Blind and Visually Impaired			
People who are blind or visually impaired.	DBVI Vocational Vision Rehabilitation Program: Federal law - 29 United States Code (U. S. C), chapter 16. The DBVI Vocational Rehabilitation Program offers free, flexible services to people who are blind or visually impaired with assistance to build adaptive blindness skills and secure or maintain employment. DBVI partners with employers across Vermont to help people who are blind or visually impaired realize their full potential.	Performance (FFY2022): <ul style="list-style-type: none"> • 258 people served. • 18 individuals successfully achieved their employment goals. Individuals who did not achieve their goals will continue to receive services in FFY 23. • 78% had a wage above 125% of the minimum wage. Statewide Survey--Statewide Survey Results CY 2022 (Conducted by Market Decisions: <ul style="list-style-type: none"> • 97% of DBVI consumers are satisfied with the DBVI 	\$1,234,759 Gross

DAIL Program Summary
***All data is for SFY2023 unless otherwise noted**

		<p>vocational rehabilitation program.</p> <p>95% of DBVI consumers feel they are better off as a result of the services received from DBVI.</p>	
People who are blind or visually impaired	<p>Independent Living Services helps people who are blind or visually impaired learn skills to remain independent in their homes and communities.</p>	<p>Performance (FFY2022): 93 people were served.</p>	<p>\$74,395 Federal Funds</p>
People who are blind or visually impaired and over age 55.	<p>Older Blind Program helps people who are blind or visually impaired and over the age of 55 learn skills to remain independent in their home and communities. Services are provided through a grant with the Vermont Association for the Blind and Visually impaired.</p>	<p>Performance (FFY2022): 667 people were served.</p>	<p>\$225,000 Federal Funds</p>
People with the most significant visual impairments.	<p>Randolph/Sheppard Program assists blind business owners to successfully run cafeterias and vending programs on state and federal property. 21 V. S. A. § 501 et seq.; federal law (20 U. S. C. § 107 et seq.)</p>	<p>Performance (FFY2022):</p> <ul style="list-style-type: none"> • 4 individuals who operate small café and vending businesses on state and federal property. • Gross earnings for blind business owners increased 1%. 	<p>\$223,450 Gross</p>

DAIL Program Summary

***All data is for SFY2023 unless otherwise noted**

<p>People with disabilities.</p>	<p>IL Part B is a grant to the Vermont Center for Independent Living to provide independent living services to people with disabilities through their Peer Advocacy Counseling Program and assistive technology through the Sue Williams Freedom Fund.</p>	<p>Performance (FFY2022):</p> <ul style="list-style-type: none"> • Peer Advocacy Counseling Program (overall, including federal funds): 134 individuals served. • Sue Williams Freedom Fund: 42 individuals served. 	<p style="text-align: right;">\$150,000 Gross</p>
Adult Services Division			
<p>People age 60 and over.</p>	<p>Older Americans Act funds services for people age 60+ to help them live as independently as possible and to support family caregivers. Services include nutrition programs, information/referral/ assistance, family caregiver support, case management, health promotion & disease prevention, volunteer outreach and legal services. Federal law-42 U.S.C 3001, et. seq.</p>	<p>Performance (FFY2022): (NOTE: FFY2023 data will not be final/confirmed until early 2023.)</p> <ul style="list-style-type: none"> • Overall, 42,709 people served (22% decrease). • Home delivered Meals: <ul style="list-style-type: none"> ○ 10,003 people served (15% increase). ○ 1,051,525 meals served (3.5% increase). ○ 98.5% of meals served were provided to OAA eligible Vermonters. • Congregate Meals: <ul style="list-style-type: none"> ○ 6274 people served (87% increase). ○ 113,329 meals served (211% increase). <p>Note: Most congregate meal sites closed during the pandemic, reopening fully in 2022.</p> <ul style="list-style-type: none"> • Case Management: <ul style="list-style-type: none"> ○ 7715 people served. 	<p style="text-align: right;">Approx. \$12,000,000 Total approx. \$5,000,000 General Funds</p>

DAIL Program Summary
***All data is for SFY2023 unless otherwise noted**

		<ul style="list-style-type: none"> ○ 93% of survey respondents report living in the setting of their choice. ○ 79% of survey respondents needs met. 	
People 60 and over and adults with disabilities.	<p>Support and Services at Home (SASH): Statewide Residential-based coordination of health and other services for older Vermonters and/or people with disabilities. Services include case management, health care coordination, nutrition assistance, and disease and falls prevention activities.</p>	<p>Performance (SFY2023): SASH operates 54.5 active 'panels' in affordable housing communities, with the capacity to serve over 5,400 participants. Performance: 4884 people were served. <u>Improve Identification of Social Isolation:</u> 5/2017: 41%. 5/2018: 51.7%. 5/2019: 54.2%. 5/2020: 61.1%. 5/2021: 76.7%. 5/2022: 77.9%. 5/2023: 73% <u>Improve Identification of Suicide Risk:</u> 5/2017: 22.1%. 5/2018: 25.6%. 5/2019: 60.7%. 5/2020: 65.4%. 5/2021: 68%. 5/2022: 74%. 5/2023: 75%. <u>Substance Use Screening:</u> 5/2017: N/A.</p>	<p>\$974,023 GC/MCO</p>

DAIL Program Summary

***All data is for SFY2023 unless otherwise noted**

		<p>5/2018: 25% (baseline). 5/2019: 62.3%. 5/2020: 93.5%. 5/2021: 63%. 5/2022: 67.5%. 5/2023: 70%</p>	
<p>People age 60 and over and adults with disabilities.</p>	<p>Homesharing: DAIL supports an innovative Homeshare Program in Vermont: HomeShare Vermont is active in Addison, Chittenden, Franklin, Grand Isle, Washington, Lamoille, Orange, Caledonia and Windsor Counties.</p> <p>“Homesharing” arranges live-in ‘matches’ between Vermonters who have a living space to share and others who need a place to live.</p> <p>The Homeshare Program have been successful in helping people stay in their own homes, as well as in helping people find affordable housing.</p>	<p>Performance (SFY2023):</p> <ul style="list-style-type: none"> • 224 Vermonters in “matches.” • 224 Vermonters provided affordable housing (113 Hosts, 111 Guests). • 95% of people matched reported perceived benefits in at least one quality of life measure such as sleeping better, feeling safer, eating better, happier, get out more and call family for help less often. • 49% of matched home providers reported they would be unable to remain safely and comfortably at home without a home sharer. 	<p style="text-align: right;">\$480,000 GF/GC-MCO</p>
<p>Family caregivers of people with Alzheimer’s Disease and Related Disorders.</p>	<p>Dementia Respite</p> <p>The Dementia Respite Grant is managed by Vermont’s five Area Agencies on Aging. The goal is to help family caregivers by reducing stress, maintaining their health, and maintaining their caregiving roles. Grants may be used to pay for a range of services including</p>	<p>Performance (SFY2023):</p> <ul style="list-style-type: none"> • 124 people served (% increase). • Caregiver uses of funds: 88 used funds for Respite Care. 43 used funds for Supplemental Services. 3 used funds for Residential 	<p style="text-align: right;">\$250,000 General Funds</p>

DAIL Program Summary

***All data is for SFY2023 unless otherwise noted**

	in-home care, respite care, homemaker services, and Adult Day services.	Respite. 94 used funds for self-directed care.	
Adults under age 60 with disabilities.	Home Delivered Meals – VCIL The VT Center for Independent Living (VCIL) contracts with home delivered meals partners to provide nutritious meals for people under age 60 who are at nutritional risk.	Performance (SFY2023): <ul style="list-style-type: none"> • 412 people served (16% decrease). • 85% of respondents to a consumer survey reported that meals helped maintain their health (10% decrease). • 95% of respondents to a consumer survey reported that staff were easy to reach when help was needed (1% decrease). 	Approx. \$480,000 General Funds
People age 60 and older.	Self-Neglect The Self-Neglect Initiative is for the ongoing effort to help and coordinate support for individuals age 60 years and older who are self-neglecting. The focus of this effort is to enhance a coordinated community response through a combination of training and education, outreach, assessment, service provision and community engagement. Service provision includes information and assistance/referral and case management (including assessment, identifying goals, working towards those goals, and engaging with additional	Performance (SFY2023): <ul style="list-style-type: none"> • 173 people served. • 64% of people served had complete assessments (36% decrease). • 73% of people served had goals (13% decrease). • 66% of people had goals with provider engagement (25% decrease). 	\$265,000 GC

DAIL Program Summary
***All data is for SFY2023 unless otherwise noted**

	community providers for other relevant services such as clinical therapy, meals, housecleaning, money management, etc.). Funds are distributed to the five (5) Area Agencies on Aging (AAAs) designated through the Older Americans Act to serve those age 60 and older in greatest economic and social need.		
Adults living in congregate housing and Vermont farms.	Senior Farmers Market The Northeast Organic Farmer's Association (NOFA) recruits congregate housing sites and farms to participate in Community Supported Agriculture (CSA). The goal is to support local farms while bringing fresh local food to seniors residing in congregate housing. DAIL also partners with DCF on 'Farm to Family' farmers' market coupons for older adults.	Performance (SFY2023): <ul style="list-style-type: none"> • 1823 people served (8% decrease). 876 received farmers' market coupons, 947 received CSA shares. • 206 farms participated (2% decrease). • 73 housing sites participated (4% increase). 	Approx. \$46,000 Federal Funds
Adults living in licensed long-term care facilities and all Choices for Care participants.	The Vermont Long Term Care Ombudsman Project of Vermont Legal Aid protects the safety, welfare and rights of older Vermonters who receive services in licensed nursing facilities, residential care homes, assisted living residences and to CFC participants of any age receiving services in any of the settings	Performance (FFY2023): Changes below were impacted by the suspension of visits to LTC facilities for half the FFY. <ul style="list-style-type: none"> • 433 complaints were opened (14% increase). • 97% of closed complaints were verified. • 388 complaints were closed (61% increase). • 360 complaints were resolved 	Approx. \$700,000 Total

DAIL Program Summary

***All data is for SFY2023 unless otherwise noted**

	<p>above as well as in home- and community-based settings. 33 V. S. A. § 7501 et. Seq.</p>	<p>(60% increase).</p> <ul style="list-style-type: none"> • Provided 334 consultations to individuals in long-term care facilities (8% increase). • Provided 79 consultations to people receiving HCBS (38% increase). • Provided 210 consultations to long term care facility providers (39% increase). • Provided 79 consultations to HCBS agencies/providers (125% increase). • Approximately 93% of complaints were fully or partially resolved to the satisfaction of the individual receiving services which is well above the 75% target and national average. • 97% of all long-term care facilities were visited. • Made 375 non-complaint related visits to maintain a presence in facilities. 	
<p>People age 60 and over, adults with physical disabilities, and their families.</p>	<p>Choices for Care provides a range of services to support people living at home, in an Enhanced Residential Care Home, Adult Family Care or in a nursing facility. Vermont Global Commitment (GC) Medicaid Regulations & Vermont</p>	<p>Performance (SFY2023):</p> <ul style="list-style-type: none"> • 6674 people received services in all settings (High/Highest/Moderate). • 5,715 people served in High/Highest: <ul style="list-style-type: none"> ○ 2,883 were served in home-based settings. 	<p style="text-align: right;">Over \$290,000,000</p>

DAIL Program Summary

***All data is for SFY2023 unless otherwise noted**

	<p>Choices for Care regulations.</p>	<ul style="list-style-type: none"> ○ 738 were served in Enhanced Residential Care. ○ 2,694 were served in skilled nursing facilities. ○ Some people were served in multiple settings above. ● 87% of clinical determinations (high/highest) were completed within 30 days or less (target 95%). The clinical team experienced increased applications, more complex applications, and more fluctuations in the workload for clinical determinations than normal ● 1,095 people received Moderate Needs Group (MNG) services. 	
<p>People transitioning from nursing homes to the community.</p>	<p>Money Follows the Person (MFP) Grant is a special program supplementing the CFC program who choose to transition: \$2,500 per person to help overcome barriers for returning to the community (rent, mortgage, etc.), and enhanced FMAP on all HCBS for each person enrolled and transitioned to approved housing. The period of enrollment is 365 days.</p>	<p>Performance (SFY2023):</p> <ul style="list-style-type: none"> ● 50 people transitioned from institutions to community-based settings. ● 9 people were readmitted to a nursing facility. 	<p>MFP expenses in the DVHA budget. Administrative expenses in DAIL (100% Federal Funds)</p>

DAIL Program Summary

***All data is for SFY2023 unless otherwise noted**

<p>Adults with physical and/or cognitive impairments.</p>	<p>Adult Day Services is a community-based non-residential service that assists individuals to remain active in their communities by maximizing health, independence and optimal functioning. Vermont Global Commitment to Health regulations; Vermont Choices for Care regulations.</p>	<p>Performance (SFY2023):</p> <ul style="list-style-type: none"> • 325 people were served in Adult Day Centers in SFY2022. • 161 were served through High/Highest. • 89 were served through Moderate Needs Group. • 88 served through Day Health Rehabilitation Services. 	<p style="text-align: right;">Approx. \$4,000,000 Gross Choices for Care, and Day Health Rehab Services</p>
<p>Adults with disabilities.</p>	<p>Attendant Services Program (ASP) provides physical assistance with activities of daily living to adults with severe and permanent disabilities, allowing people to remain in their own homes and communities. General Funds option has been frozen since July 2014. 33 V. S. A. § 6321; Vermont program regulations.</p>	<p>Performance (SFY2023): Unduplicated served throughout the entire year:</p> <ul style="list-style-type: none"> • 92 people served (10% decrease). <p><u>Medicaid Option</u> - Serves people eligible under State Plan Medicaid and are able to self-direct:</p> <ul style="list-style-type: none"> • 58 people served (8% decrease). <p><u>General Fund Option:</u> Serves people who are not Medicaid eligible and are able to self-direct. This option has been frozen since July 1, 2014.</p> <ul style="list-style-type: none"> • 31 people served (11% decrease). <p><u>Personal Services (SSBG):</u> Serves people who are Medicaid eligible but are not able to self-direct and use an agent to manage caregivers.</p>	<p style="text-align: right;">Approx. \$2,500,000</p>

DAIL Program Summary

***All data is for SFY2023 unless otherwise noted**

		<ul style="list-style-type: none"> 3 people served (down from 4). 	
Adults who rely on medical technology	<p>High Technology Home Care provides skilled nursing care to adults 21 and older who are Medicaid eligible and depend on technology. Services include RN oversight, treatment coordination, medical supplies, and sophisticated medical equipment. (High Technology services for people under the age of 21 are managed by the VT Department of Health.) Benefits are covered within the Medicaid State Plan.</p>	<p>Performance (SFY2022): 21 people were served.</p>	<p>DVHA appropriation Approx. \$4,000,000 GC</p>
People with moderate to severe traumatic brain injuries.	<p>Brain Injury Program diverts and/or returns individuals from hospitals and facilities to community-based settings. Services are rehabilitation-based and driven by participants goals and choices, intended to help people achieve their optimum independence and return to work.</p>	<p>Performance (SFY2022):</p> <ul style="list-style-type: none"> 89 people served (3.4% increase). 43% of people receiving rehabilitation services were employed through the 3rd quarter of CY2023. 2 people graduated from the rehabilitation program to independence. <p>DAIL worked with providers to shift more long-term participants to the Choices for Care program when possible, reducing the need to fund their services with TBI program dollars.</p>	<p>Over \$6,000,000 GC</p>

DAIL Program Summary

***All data is for SFY2023 unless otherwise noted**

Developmental Disabilities Services Division			
<p>People with developmental disabilities and their families.</p>	<p>Home and Community-Based Services (HCBS) consist of a range of services to support individuals with developmental disabilities and their families, increasing independence and supporting participation in their local communities. Priorities are to prevent imminent risk to the individual's personal health or safety; prevent an adult who poses a risk to public safety from endangering others; prevent or end institutionalization; maintain employment upon graduation from high school; and provide training in parenting skills for a parent with developmental disabilities to help keep a child under the age of 18 at home. 18 V. S. A. chapter 204A; Vermont Developmental Disabilities Act Regulations; Vermont Global Commitment to Health regulations.</p>	<p>Performance (SFY2022):</p> <ul style="list-style-type: none"> • 3,334 people served. • 223 people served who were considered to pose a risk to public safety; of whom 26 were on Act 248. • 3 individuals were served in Psychiatric Inpatient Treatment (Level 1 beds). • 40 people with I/DD lived in nursing facilities; of whom 26 received Specialized Services. • In SFY2021 (most current data), 40% of working age people (age 18 – 64) were employed. 	<p>Approx. \$300,000,000 GC</p>
<p>People with developmental disabilities and their families.</p>	<p>Flexible Family Funding (FFF) provides funds to be used flexibly, at the discretion of the family, to purchase goods, services and supports that benefit the individual and family. 67% (619) of the people served</p>	<p>Performance (SFY2022):</p> <ul style="list-style-type: none"> • 929 people served. • The number of family members reporting that they anticipated using funds for: <ul style="list-style-type: none"> ○ Respite: 251. ○ Assistive Technology: 	<p>Approx \$1,100,000 GC</p>

DAIL Program Summary

***All data is for SFY2023 unless otherwise noted**

	<p>were children under the age of 18. 18 V. S. A. chapter 204A; Vermont Developmental Disabilities Act Regulations.</p>	<p>207.</p> <ul style="list-style-type: none"> ○ Individual needs: 778. ○ Household needs: 664. ○ Recreation: 492. ○ Other: 221. <ul style="list-style-type: none"> ● The number of families reporting that funds would address the following outcomes: <ul style="list-style-type: none"> ○ Enhance family stability: 576. ○ Improve quality of life: 541. ○ Increase independent living: 477. ○ Maintain housing stability: 446. ○ Health and safety: 368. ○ Increase communication skills: 333. ○ Avert crisis placement: 77. 	
<p>Children and youth with a mental health or developmental disability and their families.</p>	<p>Family Managed Respite (FMR) provides respite for children and youth up to age 22 with a mental health or developmental disability diagnosis who do not receive home and community-based services funding. Respite can be used as needed, either planned or in response to a crisis.</p>	<p>Performance (SFY2022):</p> <ul style="list-style-type: none"> ● 325 children and youth with a diagnosis of developmental disability received FMR. This does not include children with only a mental health diagnosis, or children receiving integrated services with bundled payments. 	<p>Approx. \$1,600,000 GC</p>
<p>Children and youth with a developmental disability and their families.</p>	<p>The Bridge Program provides care coordination to families to help them access and/or</p>	<p>Performance (SFY2022):</p> <ul style="list-style-type: none"> ● 404 children and youth served. This does not include 	<p>Approx. \$800,000 GC</p>

DAIL Program Summary

***All data is for SFY2023 unless otherwise noted**

	coordinate medical, educational, social and other services for children and youth up to age 22.	<p>children receiving integrated services with bundled payments.</p> <ul style="list-style-type: none"> 91% of goals were being met (based on agencies reporting service goals and the service goal outcomes achieved). 	
Adults with developmental disabilities and older Vermonters who have been found to lack decision making abilities concerning basic life decisions.	<p>Office of Public Guardian (OPG) provide public guardians to assist and empower people under guardianship in making decisions and taking actions in critical life areas. Courts assign a public guardian when an individual needs a guardian to protect his or her rights or welfare, no friend or family member is available to serve as guardian, and the individual needs a public guardian. OPG facilitates guardianship evaluations for new private and public guardianship applicants. OPG also provides representative payee services and case management services to a limited number of people. 18 VSA 9301-9317; 14 VSA 3093.</p>	<p>Performance (SFY2022):</p> <ul style="list-style-type: none"> 759 adults received guardianship services including: <ul style="list-style-type: none"> 613 adults with developmental disabilities. 144 adults over age 60. 2 adults received case management only. 287 adults received representative payee services. 	<p>Approx. \$3,800,000</p>
Division of Licensing and Protection			
People receiving services from Vermont health care facilities and agencies.	<p>Survey and Certification (S&C) provides regulatory oversight of health care facilities and agencies under state and federal</p>	<p>Performance (SFY2022):</p> <ul style="list-style-type: none"> S&C conducted 241 onsite investigations across all 	<p>Approx. \$3,100,000 Gross</p>

DAIL Program Summary

***All data is for SFY2023 unless otherwise noted**

	<p>regulations. 33 V. S. A. § 7101 et seq.; state regulations for each type of Long-Term Care facility; federal regulations for nursing homes.</p>	<p>state and federal provider groups.</p> <ul style="list-style-type: none"> • S&C was on time for 100% of Federal Surveys and 15% of State Surveys. S&C has received Legislative permission to hire three additional nurse surveyors to enhance oversight of state licensed facilities, and to survey these facilities annually. • Nursing facility surveys: 8.6% of nursing homes had no deficiencies or isolated deficiency with substantial compliance. • 0% of Nursing Homes had deficiencies reflecting potential for minimum harm. • 77% of nursing homes had deficiencies reflecting no actual harm but potential for more than minimum harm. • 14.3% of nursing homes had deficiencies reflecting actual harm or immediate jeopardy of residents. 	
<p>Vulnerable adults.</p>	<p>Adult Protective Services (APS) investigates allegations of abuse, neglect and/or exploitation, raises awareness of adult maltreatment in all of its</p>	<p>Performance (SFY2022):</p> <ul style="list-style-type: none"> • APS received 3,590 reports alleging abuse, neglect, or exploitation of vulnerable adults, an increase of 4% from the previous year. 	<p style="text-align: right;">Approx. \$1,600,000 General Funds</p>

DAIL Program Summary

***All data is for SFY2023 unless otherwise noted**

	<p>forms, and provides information about alternatives and services for vulnerable adults who are the victims of maltreatment. APS has been level-funded for nearly a decade despite rising reports of maltreatment. Chapter 69 of Title 33 of the Vermont Statutes Annotated.</p>	<ul style="list-style-type: none"> • APS initiated 682 investigations from these reports, an increase of 10.7% from the previous year. • APS completed 568 investigations, a decrease of 10.8% from the previous year. • APS placed 39 individuals on the Adult Abuse Registry, a decrease of 30% from the previous year, and a decrease of 76% from two years ago. 	
Division of Vocational Rehabilitation/HireAbility			
<p>People with disabilities</p>	<p>General Vocational Rehabilitation (VR) offers free, flexible services to any person or employer dealing with a disability that affects employment. Partner with human service providers and employers across Vermont to help people with disabilities realize their full potential.</p>	<p>Performance (SFY2022):</p> <ul style="list-style-type: none"> • 5,871 students and adults were served. • 5,234 people were served in the core VR program. • 1,281 high school students served through Pre-Employment Transition Services only. • 435 individuals closed their VR case with successful employment. This means they had met their individual employment goal and had been employed for at least 90 days and were stable. • 54% had a wage above 125% of the minimum 	<p>\$6,669,368 Gross</p>

DAIL Program Summary

***All data is for SFY2023 unless otherwise noted**

		<p>wage.</p> <ul style="list-style-type: none"> The employment rate two quarters post exit improved from 49% in SFY2019 to 52.5% in SFY2022. The median earnings two quarters post exit increased from \$3,516 in SFY2019 to \$4,776 in SFY2022. <p>Results from the most recent customer survey (2022):</p> <ul style="list-style-type: none"> 97% of customers felt they were treated with dignity and respect. 93% of customers would tell their friends with disabilities to go to DVR for help with employment. 90% of consumers reporting that they are satisfied with their experience working with DVR staff and DVR Counselors provided by DVR. 77% of participants reported it was easy to contact their counselor even when services were 100% remote during COVID 	
<p>People who are deaf or hard of hearing.</p>	<p>Vermont Interpreter Referral Service (VIRS) operated by VANCRO enables organizations and individuals to hire qualified</p>	<p>Performance (Calendar Year 2022):</p> <ul style="list-style-type: none"> VIRS filled 8,888 requests for interpreters from State 	<p style="text-align: right;">\$55,000 Gross</p>

DAIL Program Summary

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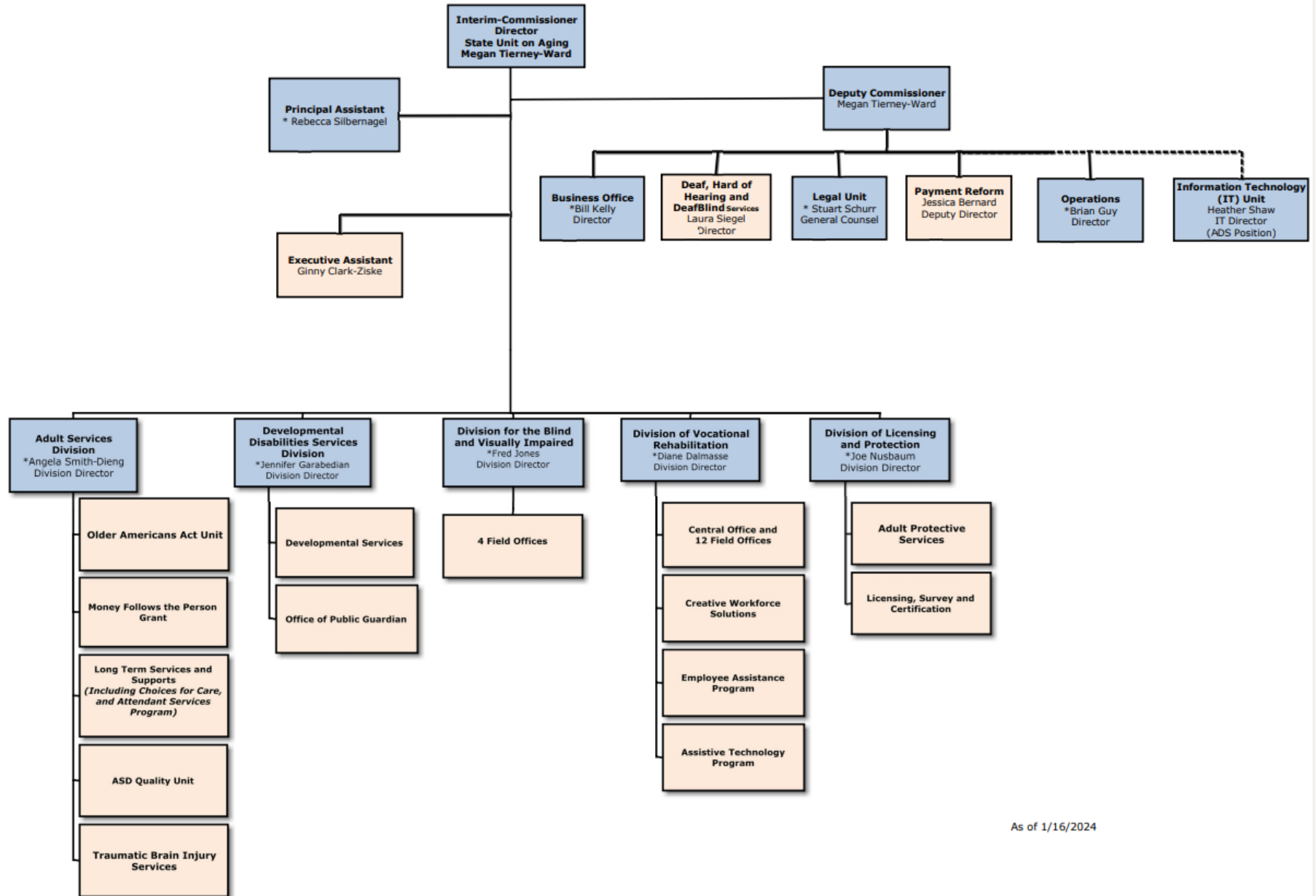
	interpreters.	government and the community.	
People with disabilities.	<p>Assistive Technology Program helps people of all ages and abilities to achieve greater independence, efficiency and control over their environment using assistive technology. Required by federal statute: Federal Assistive Technology Act.</p>	<p>Performance (SFY2022):</p> <ul style="list-style-type: none"> • 781 people were provided information and assistance about AT and how it might help them. • 29 people were provided assistance in securing funding for AT equipment. • The AT program conducted 195 device demonstrations for individuals and caregivers/families who might benefit from AT. • The AT program made 692 device loans for 412 individuals to allow them to try out an AT tool before making a purchase. 	<p>Approx. \$300,000 Gross</p>
Farmers and their families.	<p>Farm First Program provides Vermont's farmers and their families with support, resources, and information to reduce stress and improve emotional well-being. Resource Coordinators perform outreach and establish a plan for each farmer. The plan may include up to 12 counseling sessions with an Employee Assistance Program counselor or an affiliate, a referral for HireAbility services, and/or other supports</p>	<p>Performance (SFY2022):</p> <ul style="list-style-type: none"> • 80 farmers were served. 	

DAIL Program Summary
***All data is for SFY2023 unless otherwise noted**

	such as business advising, agricultural mediation, etc.		
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DAIL Organizational Chart

Department of Disabilities, Aging, and Independent Living (DAIL) Organizational Chart State Unit on Aging (SUA)



As of 1/16/2024