



VERMONT

**AGENCY OF HUMAN SERVICES
DEPT. OF DISABILITIES, AGING & INDEPENDENT LIVING**

**2018
Annual
Report**

January 2019

A Message from the Commissioner

Welcome to the Department of Disabilities Aging and Independent Living Annual Report for 2018. This year has brought us much to celebrate and continued to challenge us to work hard to improve services and supports for older Vermonters and Vermonters with disabilities. We embrace the understanding that the community we work to build is one which respects the unique strengths and gifts of each of us, that celebrates the inclusion of all, and that is inherently stronger when each community member is a part of the whole. We are grateful for the opportunity to be a part of people's lives and to partner with providers, the legislature and the administration in support of all Vermonters.

We have accomplished some important things over the last year. After completing a statewide needs assessment for older Vermonters which represented both individuals and our providers, we crafted a new State Plan on Aging for Vermont which will take us into 2022. We were honored to receive a federal TBI State Partnership grant award which will enable us to work with the Brain Injury Association of Vermont to strengthen our delivery system for services. We have embraced the use of technology to offer more options for independence for individuals with disabilities, utilizing remote supports to create new models of service.

We are maintaining a focus both on youth newly entering the world of work and on building career pathways for individuals. Our oversight of nursing homes and residential care homes has been instrumental in avoiding negative outcomes for residents and has challenged us to imagine new and stronger licensing and regulatory approaches to this oversight work. And we have continued our focus on overall accessibility. This year, we've focused most intently on our written documents and all our communications, working internally to ensure they are accessible and consulting across the state with other departments and agencies to educate them on standards for accessible documents. We have also had the opportunity to partner with the Department of Labor to make recommendations for specialized equipment to create accessibility on the job for their participants seeking employment. Our efforts to get the word out about our mission and vision and to acknowledge work and accomplishments across the state has

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been a huge success; our website and Facebook page have created pipelines for information, news and messaging.

DAIL maintains its focus on outcomes- we launched the National Core Indicators (NCI) survey for Choices for Care and in our Traumatic Brain Injury program, paralleling the NCI survey and outcome work we already do in developmental services. Process enhancement and improvement complements our examination of our outcome measures; where we see opportunities to improve our processes to achieve better results, we embrace them and engage staff and stakeholders alike in the assessment and visualization. Our Developmental Services system has launched a full-scale effort to review our payment system to create a transparent and accountable system for service delivery.

We anticipate a continued focus on strengthening and improving our systems and look forward to working with the administration, the legislature and our stakeholders across the board to identify where to put our energies and which updates are most critical to Vermonters.

The staff at DAIL remain our most important resource. They are the engine that drives our work and fuels our continued passion to make a difference in the lives of Vermonters. We are infinitely grateful for the support we receive from leadership in the Agency of Human Services, at the Governor's Office, in the legislature, and from our community partners. We work always to honor choice, inclusion, independence and community. I believe fully in the mission of the Department and in our capacity to work, together, to bring it to fruition.

Looking forward to another great year,



Monica Caserta Hutt
DAIL Commissioner

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Department of Disabilities, Aging and Independent Living

DAIL Mission Statement

The mission of the Department of Disabilities, Aging and Independent Living is to make Vermont the best state in which to grow old or to live with a disability, with dignity, respect and independence.

We promote and support self-determination, respect for all, and full inclusion in the life of the community. Our principles:

- The individual will be at the center of all plans and services.
- Individuals, families, providers and staff are treated with respect.
- The individual's personal and economic independence will be promoted.
- Individuals will direct their own lives.
- The individual's services and supports will promote health and well-being.
- Individuals are able to work, volunteer, and participate in local communities.
- Individual needs will guide our actions, requiring flexibility.
- Individuals' needs will be met in a timely and cost-effective way.
- Individuals will benefit from our partnerships with families, communities, providers, and other federal, state and local organizations.

Department Overview

DAIL is a diverse department with a broad range of roles and activities. In our role as the State Unit on Aging and Disability, we support the Older American's Act services in Vermont. We manage individualized service programs that support choice, health, independence and quality of life including Choices for Care for older people and people with physical disabilities; Developmental Disabilities Services for people with intellectual and developmental disabilities; and services for people with Traumatic Brain Injuries. The Division of Vocational Rehabilitation (DVR) and the Division for the Blind and Visually Impaired (DBVI) help people with disabilities to maintain employment and self-sufficiency. Within the Division of Licensing and Protection, Adult Protective Services seeks to reduce the rate and impact of abuse, neglect and exploitation of vulnerable adults while Survey and Certification safeguards the quality of care in licensed facilities and home health agencies. The Office of Public Guardian provides guardianship services to people who cannot represent themselves, and do not have family or friends to represent their interests. As a team, we try to represent the interests of older people and people with disabilities in pursuing full, inclusive lives in their chosen communities.

Department of Disabilities, Aging and Independent Living

Staff and Partners

DAIL includes 281 staff across five divisions and in the Commissioner's Office. DAIL programs serve about 70,000 people per year, with a total annual budget of about \$490 million. Our partners are numerous and diverse, representing the diversity of our funding and our roles:

- People, also known as consumers or participants: the people served, whose choices we support and whose lives we work to improve. The people are the focus of what we do.
- Caregivers: Whether family members, friends, or employees, paid or unpaid, caregivers are the backbone of long-term services and supports.
- Advocates: Advocates, family members, and guardians all help to support the people we serve.
- Providers: Many of our services are provided by community providers. Our community partners are the people who make a difference directly in people's lives.
- State partners: DAIL collaborates with a variety of state partners, including the Department of Vermont Health Access and other partners within our Agency of Human Services as well as others outside our agency including the Department of Labor, the Green Mountain Care Board, and the Vermont legislature. This helps to make all our work more effective and efficient.
- Federal partners: DAIL actively partners with several federal partners and funders including the Centers for Medicare and Medicaid Services, the Rehabilitation Services Administration, and the Administration for Community Living. Without federal funding, many of our services would shrink or disappear.

Recent Developments and Accomplishments

Recent developments and accomplishments include:

- DAIL staff are partnering with the University of Vermont Clinical Simulation Lab to develop a curriculum for training medical professionals in recognizing and responding to abuse, neglect and exploitation of vulnerable adults.
- DAIL staff have begun work on payment reform for Developmental Disabilities Services with support from the Department of Vermont Health Access, providers, participants, family members, and other stakeholders. This work is intended to support person-centered services as well as

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transparency and accountability, in alignment with the Vermont All Payer Model agreement. <https://ddsd.vermont.gov/dds-payment-reform>

- DVR and DBVI have completed their transition to a new program management platform, AWARE. AWARE is designed to manage services and measure outcomes, and will support new federal performance measures that address individual career paths and career development.
- DAIL's Adult Services Division recently completed a survey of Vermont senior centers, producing information about their current activities and some recommendations for the future. Senior centers help to address social isolation, which receives increasing attention due to its well-documented impact on cognitive, emotional, and physical health. <https://asd.vermont.gov/sites/asd/files/documents/Vermont%20Senior%20Center%20Survey%20Results%20and%20Recommendations%202018.pdf>
- DAIL has launched new efforts to prevent financial exploitation of vulnerable adults including a new 'Bank Safe' grant and a 'Stay Savvy Vermont' video series that educates older adults about consumer scams.
- The Adult Services Division completed a needs assessment for older adults and has received federal approval of the new State Plan on Aging. The new State Plan will guide our work under the federal Older American's Act through FFY2022. https://asd.vermont.gov/sites/asd/files/documents/VT%20State%20Plan%20on%20Aging_2018_FINAL%20APPROVED.pdf; http://asd.vermont.gov/sites/asd/files/documents/Vermont_State_Plan_on_Aging_2017_Statewide_Needs_Assessment_Report_0.pdf
- DAIL staff in the Survey and Certification unit in the Division of Licensing and Protection have nearly completed work in updating Vermont's Home Health Agency regulations.
- DAIL was a lead partner in negotiations that led to a collective bargaining agreement between the Agency of Human Services and independent direct support workers, who are represented by the American Federation of State, County and Municipal Employees (AFSCME). The agreement establishes minimum wages that will be paid from July 2018 through June 2020. Nearly 10,000 of these workers are paid by Vermont Medicaid programs each year.
- For the first time, both the Developmental Disabilities Services Division and the Adult Services Division used 'National Core Indicator' surveys in SFY 2018. These surveys address the experience of the people we serve, providing quality and performance measures that can be used to compare

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our performance with the performance of other states and identify opportunities for improvement. The surveys directly assess whether people are 'better off'. <https://vitalresearch.com/vermont/nci/overview.html>

<https://nci-ad.org/states/VT/>

- DAIL staff in the Survey and Certification unit in the Division of Licensing and Protection recently completed work on changes in licensing regulations for Vermont nursing homes. DAIL is now engaged with the Agency of Human Services and a legislative work group to examine the oversight of nursing homes in Vermont, including financial stability and licensing criteria, in order to ensure the provision of high-quality services and a safe and stable environment for nursing home residents.

https://dail.vermont.gov/sites/dail/files/documents/Nursing_Home_Regulations_2018.pdf;
<http://humanservices.vermont.gov/con-desk-review-information-final.pdf/view>

Future Directions

DAIL will continue to be engaged in a wide variety of activities, including:

- Continuing to work with partners and stakeholders to plan for the demographic changes in our state. These changes include an aging population, increasing numbers of people with dementia, increasing numbers of working age people with disabilities, and increasing demands for a limited workforce including challenges in ensuring an adequate health and human services workforce.
- Leading an 'Older Vermonters Act Working Group,' working with a variety of partners and stakeholders, to pursue the vision of the Older Vermonter's Act, including a report (due by December 2019) that will address a variety of recommendations required by this Vermont legislation.

<https://legislature.vermont.gov/assets/Documents/2018/Docs/ACTS/ACT172/ACT172%20As%20Enacted.pdf> <https://dail.vermont.gov/resources/legislative/older-vermonters-working-group>

- Within DVR and DBVI, continuing our 'CAREERS' work related to recent changes in federal rules (WIOA). This supports career paths and career development, with increased focus on transition age youth, as well as performance measures that measure success in pursuing career paths and career development. <https://vocrehab.vermont.gov/about-us/directors-message>
- Continuing work on an older workers' initiative, which includes training of participants in the Senior Community Service Employment Program (SCSEP) by Associates for Training and Development, as well as recognizing and supporting employment practices that encourage older workers to remain

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active in the workforce. <https://vocrehab.vermont.gov/programs-and-services/mature-workers>;

<https://webcache.googleusercontent.com/search?q=cache:VGBGf5Baw8kJ:https://www.forbes.com/sites/nextavenue/2017/11/27/7-ways-employers-can-support-older-workers-and-job-seekers/+&cd=1&hl=en&ct=clnk&gl=us>

- Continuing other efforts that supports people with disabilities to secure and maintain employment, such as supported employment in the Developmental Disabilities Services Division (DDSD). Vermont has achieved very high rates of employment among people of working age who are served in DDSD. However, some people who want jobs still do not have one, while other people who have jobs would like to work more hours or earn higher wages.
- While DAIL helps to support older workers and younger workers with disabilities to participate in the workforce, Vermont also faces a shortage of paid caregivers in long term services and supports. Some DAIL programs provide support to unpaid family caregivers, helping them to maintain their caregiving roles. Other DAIL programs have helped to address the worker shortage by supporting consumer directed services, which has increased the pool of workers who are paid to provide care and support. The legislature has taken direct action by raising wages for some parts of the community workforce. We will continue to contemplate strategies that help to address the shortage of paid caregivers.
- Continuing a partnership with the Vermont Department of Health and the University of Vermont to improve diagnosis and supports for people with dementia, including a proposed ‘hub and spoke’ model for improving the ability of local physicians to diagnose dementia.
- Expanding our collaboration with the Vermont Department of Health in addressing health disparities among people with disabilities, and in addressing public health opportunities for both older people and people with disabilities.
- Working with the Department of Vermont Health Access and other stakeholders to implement an Electronic Visit Verification system, as mandated by the federal CURES act.
<https://www.medicaid.gov/medicaid/hcbs/guidance/electronic-visit-verification/index.html>
- Strengthening our partnership with the University of Vermont Center on Disability and Community Inclusion including post-secondary educational opportunities, supported employment, assistive technology, support for students with intensive special education needs, services for children and

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youth with combined vision and hearing loss, and a Continence Project.

<https://www.uvm.edu/cess/cdci>

- Supporting the implementation of sick leave benefits for direct support workers paid with state funds, including independent direct support workers who are employed by families and individuals.
<http://labor.vermont.gov/wordpress/wp-content/uploads/Earned-Sick-Time-Rules.pdf>
- Contributing to the Vermont Agency of Transportation's Public Transit Policy Plan (PTPP) that will quantify Vermont's transit needs and make recommendations to strengthen the statewide transit system, including transportation services for older Vermonters and people with disabilities.
<https://vtrans.vermont.gov/planning/PTPP>; <https://vtrans.vermont.gov/public-transit/rides-to-wellness>
- Working with DVHA and the Department of Mental Health, continuing work to comply with federal HCBS (Home and Community Based Services) rules that apply to Choices for Care, Developmental Disabilities Services, and the Traumatic Brain Injury Programs administered by DAIL and other HCBS services. Moving forward, DAIL will actively engage stakeholders in the development of the final compliance plan.
<https://asd.vermont.gov/special-projects/federal-hcbs>; <https://ddsd.vermont.gov/hcbs-transition-plan>
- Continuing work with our own staff, partners, and stakeholders to improve 'accountability' through performance management and process improvement. Together with other parts of state government, DAIL staff are receiving 'belt' training in performance and process improvement. This aligns with the Governor's 'PIVOT' initiative.
<https://dec.vermont.gov/administration-innovation/lean/calendar>
https://aoa.vermont.gov/sites/aoa/files/Strategic/PIVOT_2018_Update_TAP_Report_MemoFinal_7.26.18.pdf
- As part of the new State Plan on Aging, ensuring that family caregivers are well supported through access to assessment, education, training and respite. Caregiver supports include the National Family Caregiver Support Program services and dementia respite program through Area Agencies on Aging; Flexible Family Funding and Family Managed Respite through Designated Agencies; and in Choices for Care, direct employment of family caregivers, flexible funding, and adult day services.
<https://dail.vermont.gov/services/caregiver-programs>

Results

Department of Disabilities, Aging and Independent Living

DAIL continues work to improve our use of performance measures and performance accountability. This is intended to support accountability for the results of our programs and services, including an increasing focus on measures of how people we serve are ‘better off’, and how we can improve our performance in these measures. The DAIL Scorecard includes highlight programs and performance measures:

<https://app.resultsscorecard.com/Scorecard/Embed/27950>

DAIL Budget Testimony documents also include an increasing focus on program performance:

<https://dail.vermont.gov/resources/budget/budget-testimony>

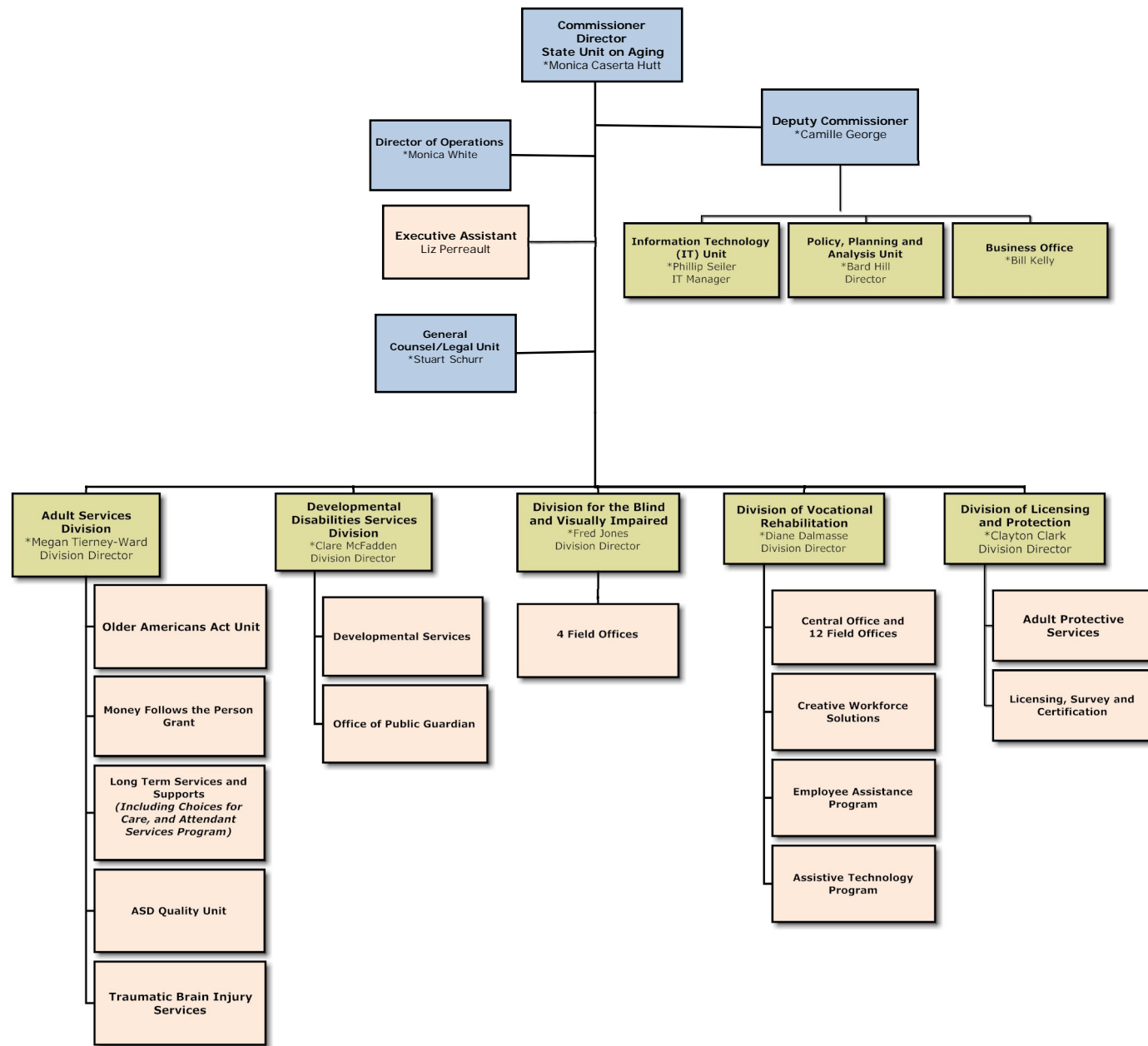
DAIL also contributes to the Agency of Human Services Scorecard. This Scorecard includes population-level ‘indicators’ of well-being for Vermonters, based on desired outcomes established by the Vermont legislature. The Agency of Human Services collects and reports this population-level data to the Chief Performance Officer in the Vermont Agency of Administration, where it is included in an annual statewide Population-Level Outcomes and Indicators Report and Scorecard.

https://spotlight.vermont.gov/sites/spotlight/files/Performance/Outcomes_Indicators_2017Report_FINAL.pdf

<https://embed.resultsscorecard.com/Scorecard/Embed/17845>

Department of Disabilities, Aging, and Independent Living (DAIL) Organizational Chart

State Unit on Aging (SUA)



As of 10/2/2017

* = Identifies contacts for DAIL Senior Leadership

Facts and Figures

Themes

This section of the DAIL annual report addresses three themes that have a broad impact on the work we do, and the people we serve:

- Vermont Demographics
- Employment
- Health and Health Disparities

Vermont Demographics

In 2017, Vermont had the second highest median age (42.8) in the United States. Only Maine had a higher median age (44.3).

<https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=CF>

Vermont is aging more rapidly than the nation as a whole. Vermonters over age 65 are projected to increase from about 18% of the state's population in 2017 to about 28% of the state's population by 2030. In 2015, nearly 15,000 Vermonters were over the age of 85; this is projected to increase to over 50,000 by 2050. Because this 'oldest' age group is most likely to need support services, partly due to a high prevalence of dementias, Vermont can expect to experience increased demand for long term services and supports, including increased demand for a direct care workforce.

The average Vermont woman currently has about 1.58 babies in her lifetime, the second lowest rate in the United States. In recent years our low birth rate, combined with emigration of Vermonters to other states, has led to a stable population that is aging. While this may be a positive trend for the effect of the human population on the planet, including climate change, it presents numerous challenges to our state and our state's economy.

http://www.leg.state.vt.us/jfo/issue_briefs_and_memos/Projecting_Vermont_s_Population_.pdf

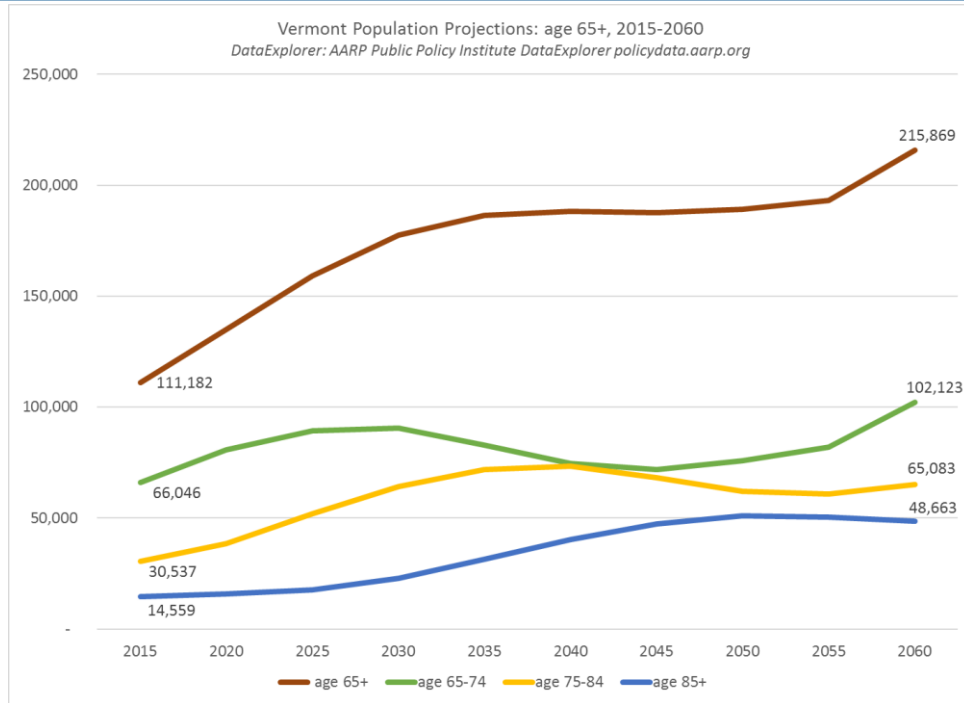
<http://www.healthvermont.gov/health-statistics-vital-records/vital-records-population-data/vermont-population-estimates>

<https://dail.vermont.gov/sites/dail/files/documents/vt-population-projections-2010-2030.pdf>

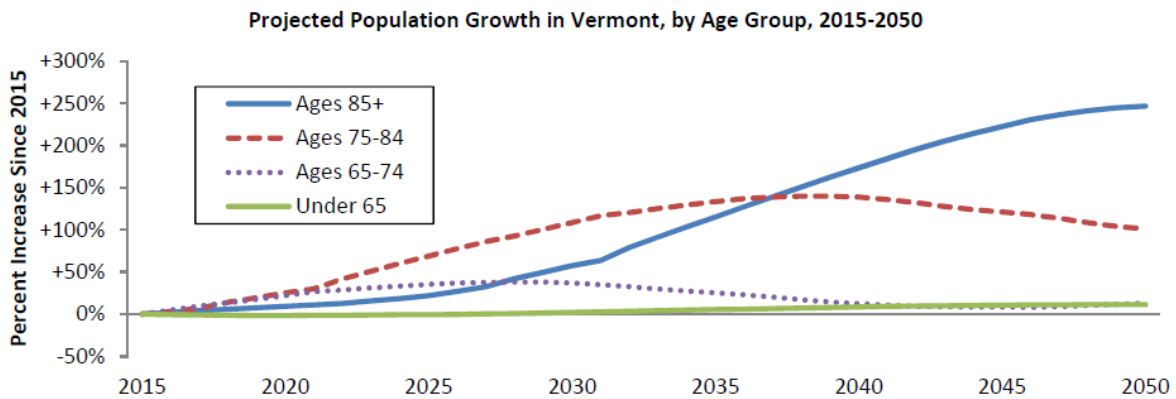
https://dail.vermont.gov/sites/dail/files/documents/VT_Demographic_Projections.pdf

<https://healthcareinnovation.vermont.gov/sites/vhcip/files/documents/Vermont%20Health%20Care%20Demand%20Modeling%20Final%20Report%206-16-17%20FINAL.pdf>

Facts and Figures



<https://dataexplorer.aarp.org/indicator/156/population-projections-by-age-sex-and-raceethnicity#/bar?primarygrp=dist5&secondgrp=dist2&dist5=23,30,31&dist2=2,6,8,9,10&dist1=15&oc=47&tf=38&fmt=496>



<https://www.aarp.org/content/dam/aarp/ppi/2018/08/vermont-LTSS-profile.pdf>

The aging of the Vermont population will result in a low ‘caregiver support ratio’, the result of both more older people and fewer younger people:

Family Caregivers

	State	Per 1,000 People	Rank	U.S.
Number of family caregivers, 2013	74,900	119	34	127
Economic value of family caregiving, 2013 (millions)	\$1,010	\$1.61	9	\$1.49
Economic value per hour, 2013	\$14.55		5	\$12.51
Ratio of economic value to Medicaid HCBS spending, 2013	4.0		45	6.2
Caregiver Support Ratio (age 45-64 per age 80+), 2015	6.9		24	7.0
Caregiver Support Ratio, 2050 (projected)	2.4		47	2.9

<https://www.aarp.org/content/dam/aarp/ppi/2018/08/vermont-LTSS-profile.pdf>

Facts and Figures

Recent US Census data show that between 2010 and 2017 the populations of some Vermont counties increased (Chittenden, Franklin, Grand Isle, Lamoille, Orange) while the populations of the remaining counties decreased (Addison, Bennington, Caledonia, Essex, Orleans, Rutland, Washington, Windham, Windsor). The factors driving the changes in county populations are births, deaths, immigration from other countries, and migration to/from other counties. The different trends in different counties reveal significant regional differences in population trends within the State of Vermont. We can expect regional differences in population trends to produce regional differences in demand for services and in labor markets.

<https://www.scribd.com/document/375037912/Sources-of-population-change-in-Vermont-counties-2010-2017>

Vermont has high rates of disability among working age adults. An Issue Brief produced by Joyce Manchester of the Vermont Legislative Joint Fiscal Office (JFO) found that in 2013, New Hampshire, Vermont, and Maine were the states with the highest rates of adults under age 35 enrolled in the Social Security Disability Insurance (SSDI) program. Between 2000 and 2013 the share of people on SSDI under age 35 and ages 35 to 44 in northern New England rose almost four times as fast as the national average. The share of the population on SSDI among people ages 45 to 54 rose twice as fast as the national average. “Policymakers need to pay attention to the number of people enrolled in the SSDI program because beneficiaries are no longer fully engaged in the labor force and contributing to the state’s economy but instead rely on income support from the government...Recognizing the relatively high rates of young people on the SSDI program may provide more reasons to invest in enhancing job opportunities and work supports as well as strengthening educational opportunities and policies that will alleviate drug abuse and keep people off the program. In addition, policymakers may want to ask whether more can be done to help people already on the SSDI program move beyond that reliance and return to the work force.”

In a related Issue Brief, Joyce Manchester found that more than two-thirds (71 percent) of the 25,738 Vermonters on the SSDI program in December 2016 became eligible for the program based on mental health disorders or diseases of the musculoskeletal system and connective tissue. Vermont has a larger share of SSDI beneficiaries who were eligible based on mental health disorders than the country as a whole, and this has increased steadily since 2001. “The share of

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people with mental health disorders on SSDI, especially younger people, should be considered in discussions of Vermont’s workforce because most beneficiaries do not work. ...moreover, beneficiaries with mental health diagnoses are likely to stay on the program for many years.”

http://www.leg.state.vt.us/Jfo/issue_briefs_and_memos/SSDI_Prevalence_Issue_Brief.pdf

http://www.leg.state.vt.us/jfo/issue_briefs_and_memos/SSDI_Mental_Health_and_Musculoskeletal_Diagnoses.pdf

This table showing disability by age group demonstrates that Vermonters aged 65+ have relatively low rates of disability compared to other states, while Vermonters of working age have relatively high rates of disability compared to other states:

Disability Rates, 2016	Number (1,000's)	Percent	Rank	U.S.
People ages 65+ with disabilities				
Self-care difficulty	8	7.2%	34	8.1%
Cognitive difficulty	7	6.3%	49	8.9%
Any disability	35	31.1%	49	35.0%
People ages 18-64 with disabilities				
Self-care difficulty	8	1.9%	22	1.9%
Cognitive difficulty	25	6.3%	3	4.5%
Any disability	49	12.7%	12	10.6%

<https://www.aarp.org/content/dam/aarp/ppi/2018/08/vermont-LTSS-profile.pdf>

The Yang-Tan Institute on Employment and Disability at the Cornell University School of Industrial and Labor Relations reported that in 2015, 12.4% of Vermont residents age 21-64 had a disability, compared to 10.7% across the US.

http://www.disabilitystatistics.org/StatusReports/2015-PDF/2015-StatusReport_VT.pdf

The Vermont Department of Health recently posted a document titled “The Health of Vermonters Living with Disabilities”, which includes demographic information about Vermonters with disabilities.

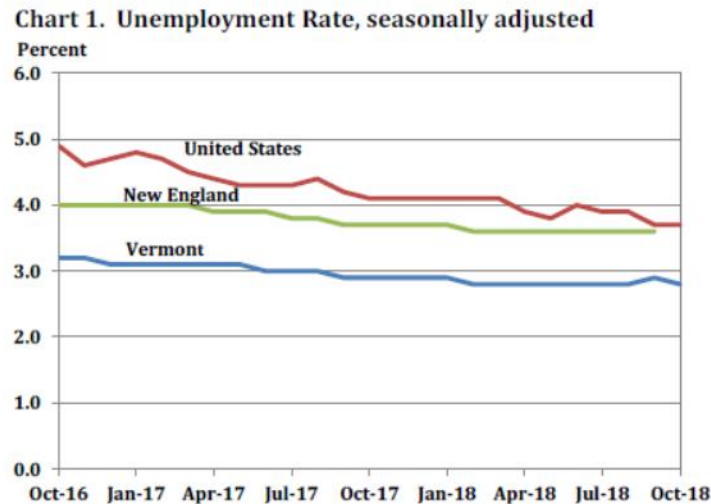
http://www.healthvermont.gov/sites/default/files/documents/pdf/DisabilityDataPages_AccessibleVersion.pdf

Facts and Figures

Employment

Workforce:

In November 2018 the Vermont Department of Labor posted a release that included the following:



“The Vermont Department of Labor announced today that the seasonally-adjusted statewide unemployment rate for October was 2.8 percent. This reflects a decrease of one-tenth of one percentage point from the revised September rate. The national rate in October was 3.7 percent. As of the prior month’s preliminary data, the Burlington-South Burlington Metropolitan area was tied for the thirty-sixth lowest unemployment rate in the country for all metropolitan areas. Overall, Vermont’s unemployment rate was tied for eighth lowest in the country for the same time period...For the fourteenth consecutive month, the Vermont unemployment rate is below 3%. Tight labor market conditions are readily apparent to nearly all Vermont employers across the industry spectrum. The October data released today shows signs of a maturing economic expansion as employers are finding it increasingly challenging to find qualified applicants to fill job vacancies.”

<http://www.vtlmi.info/press.pdf>

In March 2018, the Vermont Department of Labor projected short-term job openings for occupations in Vermont between 2017 and 2019. The projections suggest that we face an increasing demographic challenge. While the labor force has decreased, the demand for workers has increased. This challenge is particularly acute in health and human services, because the demand for workers in these jobs is increasing faster than for most other jobs.

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The projected annual ‘openings’ (representing both job growth and replacement) include Personal Care Aides (n=1280, annual growth rate 2.8%) Registered Nurses (n=447, annual growth rate 2.2%), Nursing Assistants (n=436, annual growth rate 2.2%), and Social and Human Service Assistants (n=333, annual growth rate 1.3%).

<http://www.vtlmi.info/projst.pdf#page=2>

Combined with a limited labor force, higher demand for direct care workers, level funding, low wages, and sometimes challenging working conditions, employers seeking to recruit and retain direct care workers can expect to face increasing difficulty in recruiting and retaining workers across our state and our systems of care.

Regional workforces and labor markets are affected by regional economic conditions. The federal Bureau of Economic Analysis (BEA) recently released ‘prototype’ or draft statistics for gross domestic product (GDP) by county for 2012-2015. Combined with BEA’s county estimates of personal income, GDP by county offers a more complete picture of local area economic conditions. (Note that BEA is requesting feedback and comments on these prototype statistics to assist in improving their quality, reliability and usefulness.) The data shows significant differences across Vermont counties in both GDP size and trends over time:

	Real Gross Domestic Product				
	Thousands of chained (2012) dollars				Rank in State
	2012	2013	2014	2015	2015
Addison	1,406,434	1,249,939	1,228,703	1,250,046	8
Bennington	1,642,039	1,748,141	1,468,782	1,427,346	7
Caledonia	942,251	934,112	912,026	971,766	10
Chittenden	10,852,741	10,414,133	10,553,238	10,849,229	1
Essex	95,735	96,835	95,335	98,276	14
Franklin	1,476,439	1,508,416	1,571,090	1,621,227	6
Grand Isle	141,256	141,400	144,620	149,457	13
Lamoille	991,095	1,080,845	1,052,548	1,150,617	9
Orange	610,354	588,645	577,210	575,335	12
Orleans	798,332	814,264	864,198	903,048	11
Rutland	2,249,932	2,215,828	2,228,816	2,263,854	3
Washington	2,978,566	3,047,160	3,257,403	3,197,991	2
Windham	2,513,650	2,514,948	2,437,702	2,146,336	5
Windsor	2,188,530	2,142,708	2,098,982	2,173,097	4

https://www.bea.gov/system/files/2018-12/lagdp1218_0.pdf

Facts and Figures

Older Workers

Older workers are a valuable resource, and they help to address our state's workforce challenges. When older Vermonters remain active in their communities it has a positive impact on the State's economic sustainability, and can maintain their own physical, mental and financial well-being.

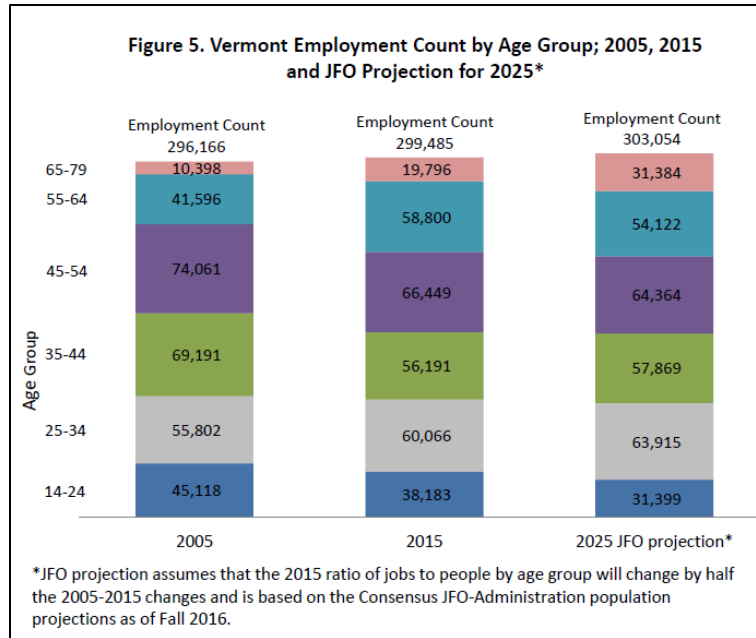
Older people in Vermont are more active in the labor force than older people in other states. The US Census estimates that in 2017 32% of Vermonters age 65-74, and 8.1% age 75+, participated in the labor force. This compares to national estimates of 25.6% for age 65-74 and 7.4% for age 75+.

https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=2&cad=rja&uact=8&ved=2ahUKEwi5nNSdqB7fAhWSZd8KHTgxAl0QFjABegQIDRAB&url=https%3A%2F%2Ffactfinder.census.gov%2Fbkmk%2Ftable%2F1.0%2Fen%2FACS%2F16_5YR%2FS2301%2F&usg=AOvVaw2YToynt5yrvPf3CnaJn2iQ

In December 2016, Joyce Manchester from the Vermont Legislative Joint Fiscal Office published an issue brief regarding employment in Vermont by age. Between 2005 and 2015, the share of jobs held by people age 55 to 64 rose from about 14 percent to almost 20 percent, and the share for people age 65 or older almost doubled from 3.5 percent to almost 7 percent. Employment among older people rose for two reasons: an increase in the number of older people, and a greater likelihood that an older person is working. The report predicts that the number of jobs held by people age 65 and older will continue to increase, and that this will help to offset a decrease in the number of younger workers.

Without older workers, Vermont's employment count would shrink significantly. This illustrates the importance of older workers in Vermont's labor market and economy.

Facts and Figures



http://www.leg.state.vt.us/jfo/issue_briefs_and_memos/Vermont's%20Jobs%20Filled%20By%20Age%20Group%20final.pdf

Governor's Award for Business Excellence in Supporting Mature Workers: The Agency of Commerce and Community Development (ACCD), the Vermont Department of Labor (VDOL), AARP, the Society for Human Resource Management (SHRM) and DAIL once again sponsored and promoted the Governor's Award for Business Excellence in Supporting Mature Workers. This award recognizes Vermont employers who commit to employment practices that benefit and support the inclusion and retention of older workers. Three Vermont businesses earned this award in 2018:

- Gardener's Supply, Burlington
- Vermont Food Bank, Barre
- Clara Martin Center, Randolph

These outstanding employers consistently demonstrate exceptional commitment to employment practices that benefit and support the inclusion and retention of older workers, resulting in a positive impact on our state's economic sustainability as well as the health and well-being of older Vermonters.

Workers with Disabilities:

By supporting and encouraging people with disabilities to remain active in the labor force, we can help to offset the challenges presented by fewer people of working age. The Yang-Tan Institute on Employment and Disability at the Cornell University ILR School reported that the 2015 employment rate of Vermonters with disabilities age 21-64 was 41%, compared to a national rate of 35.2%.

Facts and Figures

http://www.disabilitystatistics.org/StatusReports/2015-PDF/2015-StatusReport_VT.pdf

Vermont places an emphasis on community inclusion of people with disabilities and has been highly successful in supporting community employment for people with developmental disabilities. In 2018 the employment rate among people age 18 to 64 who were served by Developmental Disabilities Services (DDS) was 47%.

<https://app.resultsscorecard.com/PerfMeasure/Embed/89227>

National Core Indicator (NCI) interviews of adults with developmental disabilities offers a vehicle to compare Vermont with other states. In the 2015-2016 report 42% of Vermont respondents said that they had a paid community job, compared to 19% across the United States. NCI reported that Vermont's employment rate was the second highest in the United States.

<https://www.nationalcoreindicators.org/charts/?i=12&st=VT>

<https://www.nationalcoreindicators.org/charts/?i=12&st=VT>

Project SEARCH is a workplace immersion program for students with intellectual disabilities in their final year of high school. It is a collaborative program between Education, Vocational Rehabilitation, Developmental Services, and a local business that offers career exploration, job skill training and job coaching through business-based internships. The goal is to have students learn transferrable skills via internships, leading to complex competitive employment. In 2018 90% of Project SEARCH graduates secured employment.

In partnership with community providers, DAIL has developed options for post-secondary education for people with developmental disabilities. Three organizations (Think College Vermont, College Steps and SUCCEED) help youth to integrate into post-secondary coursework at collaborating colleges; improving employment outcomes through course work and internships geared toward specific careers. Facilitating course selections based on vocational interests and independent living skill training has significantly increased self-sufficiency and employment outcomes among these young graduates. In 2017, 86% (n=32) of students served in Youth Transition Programs were employed at graduation.

https://ddsd.vermont.gov/sites/ddsd/files/documents/DAIL_DDS_Annual_Report.pdf

The Traumatic Brain Injury (TBI) Program serves Medicaid eligible Vermonters with moderate to severe traumatic brain injuries in community-based settings. 27% of people served in the Traumatic Brain Injury rehabilitation program were employed in SFY2018.

<https://app.resultsscorecard.com/Program/Embed/14913>

Facts and Figures

259 individuals received DBVI Vocational Vision Rehabilitation services to assist them to maintain or find employment as a result of their vision loss. 48 individuals who received services successfully achieved their employment goals in FFY2018. Most individuals who did not achieve their goals will continue to receive services in FFY 19.

<https://app.resultsscorecard.com/Program/Embed/14907>

In DVR, 8,393 individuals were served in SFY 2018. 7,120 people were served in the core VR program, and 1,555 high school students were served through Pre-Employment Transition Services only. 901 individuals closed their VR case in SFY 2018 with successful employment. This means they had met their individual employment goal and had been employed for at least 90 days.

<https://app.resultsscorecard.com/Program/Details/14906>

Volunteers:

Older people and people with disabilities contribute to our communities by volunteering, with associated social, health, and mental health benefits for the volunteers themselves. The Corporation for National and Community Service (CNCS) reports that about 33% of Vermonters volunteer, ranked #8 in the US. The Bureau of Labor Statistics estimated that in 2014/2015, about 24% of people aged 65 and over volunteer, averaging 94 hours of volunteer time per year. The Independent Sector estimates the average financial value of volunteer time in Vermont in 2017 was \$23.71/hour. This suggests that the contribution of volunteer time by older Vermonters and Vermonters with disabilities has an estimated 'value' that could exceed \$100 million per year.

<https://www.bls.gov/news.release/pdf/volun.pdf>

<https://www.cnn.com/2018/07/19/us/volunteering-statistics-cfc/index.html>

<https://independentsector.org/wp-content/uploads/2016/05/Value-of-Volunteer-Time-by-State-2001-2017-1.pdf>

Health and Health Disparities

Aging:

The United Health Foundation produces an annual senior health ranking report, with data for each state. In 2018 the health of older adults in Vermont was ranked #13 in the US. The 2018 report includes specific strengths and challenges for older Vermonters:

Strengths:

- Low percentage of Intensive Care Unit (ICU) use
- Low prevalence of smoking
- High home-delivered meals rate

Facts and Figures

Challenges:

- High prevalence of falls
- High prevalence of excessive drinking
- Low percentage of hospice care use

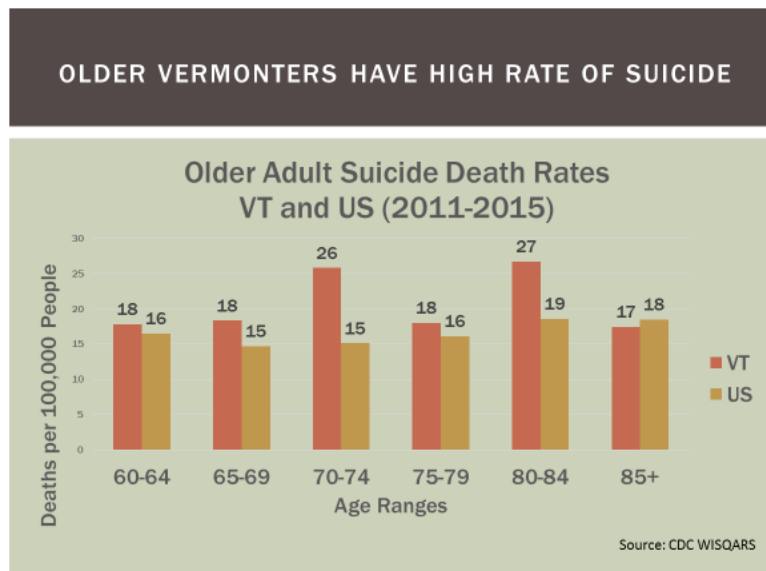
Highlights:

- In the past year, food insecurity decreased 20% from 15.4% to 12.3% of adults aged 60+
- In the past year, home health care workers decreased 6% from 172.3 to 161.8 aides per 1,000 adults aged 75+
- Vermont ranks #8 in SNAP participation by adults aged 60+ in poverty; however, in the past three years, SNAP participation in this group decreased 30% from 136.8 to 95.2 participants per 100 adults.
- In the past five years, flu vaccination coverage decreased 10% from 65.4% to 59.0% of adults aged 65+
- In the past four years, full-mouth teeth extractions decreased 14% from 17.5% to 15.1% of adults aged 65+
- In the past four years, suicide increased 11% from 19.4 to 21.6 deaths per 100,000 adults aged 65+

https://www.americashealthrankings.org/explore/senior/measure/overall_sr/state/VT

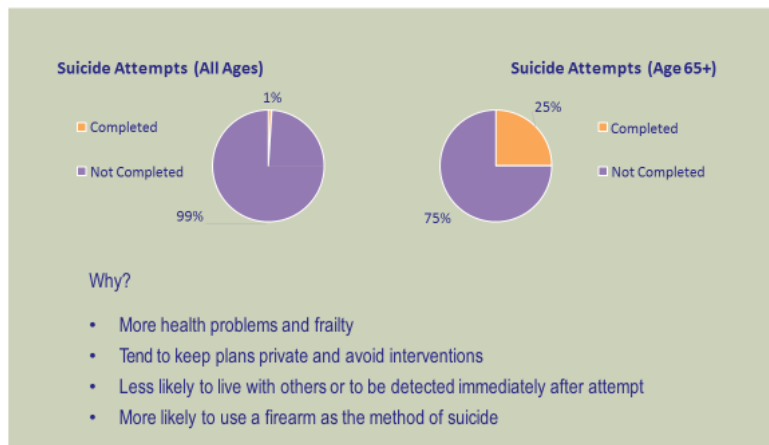
Suicide

The rate of suicide among older Vermonters is higher than the national average.



Facts and Figures

Although older adults attempt suicide less often than those in other age groups, they have a much higher completion rate.



Disabilities:

The Vermont Department of Health recently produced “The Health of Vermonters Living with Disabilities”, which provides a summary of the health and health behaviors of adults with disabilities. This report looks at many health factors such as chronic disease, mental health, and substance use. The Vermont Department of Health’s Chronic Disease and Disability Program will use this information to work with state and local partners to lower and manage the rates of chronic conditions among Vermonters with disabilities. The Program will use this report to:

- Share information with state and community partners about why it’s important that health programs be used by all Vermonters, including people with disabilities.
- Help self-advocates and caregivers teach other community members about why the health of people with disabilities is important.
- Decide what changes can be made to health programs, laws, and the built environment to help lower rates of chronic disease.
- Modify approaches and outreach used by health programs to better engage people with disabilities.

http://www.healthvermont.gov/sites/default/files/documents/pdf/DisabilityDataPages_AccessibleVersion.pdf

People with disabilities tend to experience health disparities, including poorer health status and more chronic health conditions. Health disparities are related

Facts and Figures

to a combination of social and economic factors including poverty, poor access to health care, and lower education. Special Olympics found that of ten athletes with disabilities:

- 4 have obvious tooth decay
- 1 needs an urgent referral to a dentist
- 6 are obese or overweight
- 3 fail a hearing test
- 4 need glasses, and 2 have an eye disease
- 5 have a significant problem with flexibility
- 4 have a significant problem with balance

In March 2010 the Vermont Department of Health reported that adult Vermonters who have a disability were more likely to suffer worse health outcomes:

- 43% of the people who had an income less than 125% of the poverty level have a disability
- 42% of the people who did not graduate from high school had a disability
- 22% of those who had a disability smoke, compared to 17% of the total population
- 56% of people with disabilities did not get regular physical activity, compared to 42% of the total population

Data from the Centers for Disease Control and Prevention National Center on Birth Defects and Developmental Disabilities, show that Vermont adults with disabilities are more likely than Vermont adults without disabilities to:

- be inactive: 34.6% versus 17.1%
- have high blood pressure: 38.6% versus 24.9%
- smoke: 35.8% versus 14.2%
- be obese: 36.3% versus 21.3%

Disability costs in healthcare expenditures in Vermont are estimated to be \$941 million per year, representing approximately 26% of total healthcare expenditures.

http://dail.vermont.gov/sites/dail/files//documents/Health_dispartities_in_people_with_DD.pdf

<http://www.healthvermont.gov/sites/default/files/documents/2016/11/Health%20Disparities%20of%20Vermonters%202010.pdf>

<https://www.cdc.gov/ncbddd/disabilityandhealth/impacts/vermont.html>

Social Isolation:

Social isolation is defined as the absence of social interactions, contacts, and relationships with family, friends, and neighbors on an individual level, and with “society at large” on a broader level. Social isolation is a risk factor for illness and

Facts and Figures

morbidity, especially hypertension and cardiovascular disease. Chronic loneliness (also known as subjective social isolation) is associated with chronic illness and depression. Isolation is generally predictive of cognitive impairment in older women. Those who are lonely often smoke, engage in substance misuse, have a poor diet, are more likely to suffer falls, and are inactive. People who are isolated have poorer health trajectories and their risk of death is 50% higher than people who are not isolated.

Vermont is ranked 17th in the country for risk of social isolation among older adults in the 2018 America's Health Rankings Senior Report. Older Vermonters are more likely to live alone, to live in nonmetropolitan areas, and to have incomes below 250% of poverty than older residents of other states - risk factors for social isolation:

Living Arrangements and Poverty, 2016	Number (1,000's)	Percent	Rank	U.S.
People ages 75+ living alone	18	38.8%	2	31.6%
People ages 65+ living in nonmetropolitan areas	82	72.7%	1	17.3%
Below poverty level ages 65+	10	8.7%	24	9.2%
Below 250% of poverty level ages 65+	45	40%	9	37%

<https://www.aarp.org/content/dam/aarp/ppi/2018/08/vermont-LTSS-profile.pdf>

https://dail.vermont.gov/sites/dail/files//documents/2018_Social_Isolation_Handout.pdf

Dementia:

In the United States, nearly one in every three older adults who die each year has Alzheimer's or another dementia. Since 2000, deaths from Alzheimer's disease increased by 89%, while deaths from heart disease decreased by 14%.

The Alzheimer's Association estimates that 13,000 Vermonters had Alzheimer's disease in 2018, and that this number will increase by 31% to 17,000 Vermonters by 2025. An estimated 30,000 caregivers provided about 34,000,000 hours of unpaid care to people with dementia in Vermont in 2017. Per capita Medicare payments for beneficiaries with dementia in Vermont in 2015 were estimated as \$20,664. The Vermont Medicaid costs for serving people over age 65 with dementia were estimated as \$106 million in 2018. The Centers for Disease Control and Prevention reports that Alzheimer's Disease was the fifth leading cause of death in Vermont in 2016, with a death rate from Alzheimer's Disease ranked #15 in the US.

<https://www.alz.org/media/HomeOffice/Facts%20and%20Figures/facts-and-figures.pdf>

<https://www.cdc.gov/nchs/pressroom/states/vermont/vermont.htm>

<https://www.nejm.org/doi/full/10.1056/nejmsa1204629>

Facts and Figures

Long Term Services and Supports:

Long term services and supports can help to address health conditions and health disparities. In 2017, Vermont's long-term services and supports were ranked #3 in the United States in the Long-Term Services & Supports State Scorecard produced by AARP and The Scan Foundation, earning Vermont the Pacesetter Award for improving long-term services and supports. The scorecard ranks each State on long-term services and supports for older adults, people with physical disabilities, and family caregivers. From the Scan Foundation: "Vermont is a proven national leader in providing accessible, affordable, quality health, and LTSS coverage for its residents. Vermont moved up from No. 19 in the 2011 Scorecard to No. 3 in 2017, exhibiting more improvement in "Affordability and Access" than any other state. The state has also risen through the ranks in overall LTSS performance, moving from No. 20 in 2011 to No. 3 in 2017."

Vermont's ranking in specific dimensions:

- Affordability and Access: 3
- Choice of Setting and Provider: 5
- Quality of Life & Quality of Care: 19
- Support for Family Caregivers: 10
- Effective Transitions: 9

Success Highlights:

- Vermont improved access to Medicaid and increased the percentage of low-income adults with disabilities who are covered by Medicaid.
- Since 2011, there has been no waiting list for home- and community-based services for people with high needs who qualify for a nursing home level of care.
- Affordability of home care and nursing home care has improved.
- Vermont reinvested savings to expand access to homemaker and adult day services for the moderate need population; people who are not eligible for nursing home care.
- Vermont increased provider reimbursement rates to help attract a high-quality workforce to provide home care.
- Vermont expanded service options, including Adult Family Care.

<http://www.longtermscorecard.org/~media/Microsite/Files/2017/Web%20Version%20LongTerm%20Services%20and%20Supports%20State%20Scorecard%202017.pdf>

Facts and Figures

Long term services and supports address individual goals, needs, and quality of life while also helping to control other health care costs. DAIL's long term services and supports serve large numbers of people:

- Older Americans Act: about 60,000 people served in FFY 2017
- Developmental Disabilities Services Division: 4,612 people served in SFY 2018
- Choices for Care: 6,581 people enrolled in July 2018
- Traumatic Brain Injury Program: 91 people served in SFY 2018

Department of Disabilities, Aging and Independent Living

Success Stories

Jack

Jack (not his real name) is a 27-year-old young man who was in a car accident 4 years ago resulting in a very significant Traumatic Brain Injury (TBI) and quadriplegia. He was defined by the Doctor that he sees for a brief appointment once a year as being in a “vegetative state “and that “he does not know what is going on around him.” He was prescribed heavy doses of muscle relaxants and remained in his vegetative state. So, his mother quit her job to stay home and care for him.

Almost a year ago Jack enrolled in the Choices for Care, Flexible Choices program. Using his Flexible Choices budget, his mother began assembling a handpicked, multi-disciplinary care team that worked with him on a regular basis. Serving on this team was an acupuncturist, a massage therapist, a chiropractor, other supports around nutrition and natural supplements and swimming therapy. Jack also has been able to access a hyperbaric oxygen chamber, an infrared light therapy device, and brainwave therapy training tools. Most of these options were not available to him through traditional insurance. He has also been able to discontinue most of the initial prescribed medications and is currently eating a natural healthy diet instead of the liquid formula that was prescribed.

Within the period of the 8 - 9 months that Jack has been on Flexible Choices utilizing alternative therapies, and to the absolute thrill of his family, **he laughed out loud** during a funny movie and at a funny family incident and has also begun to pick up his arm and move it above his head. Jack’s mother states that, “because everyone is different, Flexible Choices allows for the freedom to develop each individual’s personal recipe for progress and success.” Truly amazing!

Department of Disabilities, Aging and Independent Living

Amy

Amy (not her real name) is a 21-year-old-woman who was in a car accident a few years ago, when she sustained severe injuries. She applied and was found eligible for the Choices for Care, Flexible Choice option. Since 2017, Flexible Choices has been able to support her participation in a Project Walk program in New Hampshire and in a Therapeutic Horseback Riding Program, neither of which are typically covered by health insurance.

Amy has become more independent and has regained use of her hands and arms; she also has begun to have feeling in her abdomen and sensation in her legs. Another amazing example of how alternative therapies and flexible support services can have positive results for Vermonters.

Department of Disabilities, Aging and Independent Living

Success Story

DBVI



Driving through the back roads of Topsham, VT, it's not easy to miss Flint Motorsports, as the lot is almost entirely covered by small machinery: lawn mowers, small tractors, and snowblowers. Some are housed there permanently, but most have recently been repaired and are getting ready to be shipped back to a Home Depot or Tractor Supply located throughout Vermont, New Hampshire, and New York.

Derek is the proud business owner of Flint Motorsports, which he founded in 2010, when he was just twenty-years-old. He's also visually impaired due to congenital glaucoma, which has presented visual challenges for Derek throughout his life. Derek notes that whatever visual challenges he faces, he never lets that get in the way of him working hard and accomplishing his goals.

Derek began working with DBVI when he was in high school. At first, his counselor supported him by ensuring that the school was accommodating of his visual needs. As Derek got older, he worked with his counselor to acquire work skills and refine his own career goals.

Although Derek says that he didn't always envision himself a business owner, as a high school student, Derek participated in a technical education program, in which he developed a passion for heavy equipment repairs and crafted the foundation for his future career. After graduating high school, DBVI assisted Derek in establishing his first work experiences.

Derek was able to learn and gain essential training at each of his work experiences, but he has particularly fond memories of his time at Bob's Service, where he acquired valuable knowledge about the field and also gained a life-long mentor and friend. As Derek states, Bob was able to easily understand that "being visually impaired does not impact my work ethic or make me a bad person," something that Derek had not always experienced in the field. Years later, Bob was the best man at Derek's wedding, and he continues to provide guidance and advice to Derek.

Department of Disabilities, Aging and Independent Living

In June of 2010, Derek decided that he wanted to open his own small repair shop. With the assistance of DBVI, Derek was able to establish his shop, and to acquire the work tools necessary for making equipment repairs. Additionally, Derek received support regarding several assistive devices that he uses in his work life such as: ZoomText, a CCTV, a magnifier, and a digital torque wrench.

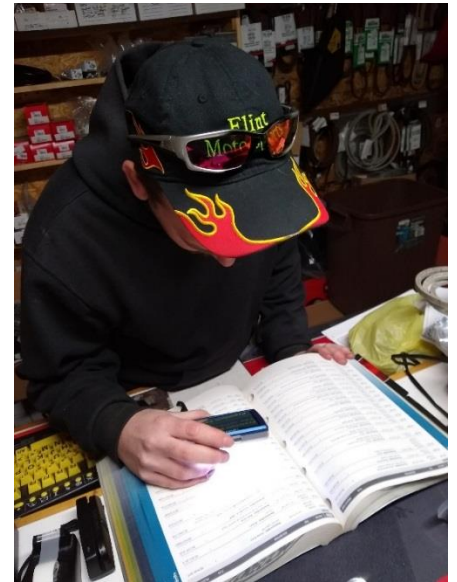
Derek states that assistive technology is an absolute necessity. He uses ZoomText daily to enter paperwork into the computer and track inventory. He also uses his magnifier multiple times each day to order parts, track equipment, etc. Derek mentions that DBVI has helped him to replace his magnifier twice because the power button was worn out from frequent use!

The business originally started out small and mostly local, which wasn't always easy. Derek began contracting with local stores such as Tractor Supply. As time went on, he was able to partner with a warranty agency, which is how a lot of new business comes in. Along with networking and positive reviews, this created a "snowball effect" for Derek. Derek now services about 1,000 lawn tractors and about \$250,000 worth of equipment per year. Flint Motorsports is #4 in the Northeast for volume of repairs. Derek says, with a smile, "each year business continues to grow, and the bills get easier to pay."

Derek attributes his success to the support of his counselor and his family over the years. However, there's no doubt that Derek would not be where he is today without a tremendous amount of his own determination and hard work. Derek hopes that sharing his success story might make a difference in the lives of others with visual impairments shaping their own career goals. He's currently considering the possibility of hosting a work experience for a DBVI consumer that might be interested in small machinery repairs. He feels passionate about sharing his approach- despite a visual impairment, "there is always a way to make things possible."

You can learn more about Derek's business here:

<https://www.atozopeparts.com/index.htm>



Derek using his magnifier to look through a parts manual

Adult Services Division (ASD)

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.

Division Overview

ASD is responsible for managing a full array of long-term services and supports (LTSS) for older Vermonters and adults with physical disabilities. The primary source of funds for these services is Vermont Medicaid, the federal Older American's Act and State General Funds.

Staff and Partners

ASD operates with 37 employees located within the Central Office in Waterbury and regionally within district offices. Services are managed within three units: Long-Term Services & Supports Unit, Quality Management Unit and the State Unit on Aging.

ASD partners with a wide variety of organizations in managing services for Vermonters. Partners include:

- Adult Day Centers
- Area Agencies on Aging
- Designated Agencies and Specialized Services Agencies
- Home Health Agencies
- Nursing Facilities
- Residential Care Homes & Assisted Living Residences
- State Long Term Care Ombudsman
- Traumatic Brain Injury Providers
- Vermont Center for Independent Living

Recent Developments and Accomplishments

ASD has had many developments and accomplishments in SFY18. They include:

- We launched a "[Reframing Aging](#)" stakeholder group that created a tool for policy-makers called "Let's Talk About Aging".
- We celebrated an improved ranking on the 2017 national [AARP Long-Term Services & Supports Scorecard](#), rising to 3rd in the nation.
- We received a national [SCAN Foundation Pacesetter](#) award for most improved in Affordability & Access for long-term services and supports.

Adult Services Division (ASD)

- We completed a state-wide needs assessment to help create [Vermont's new State Plan on Aging](#) that was approved effective 10/1/18 through 9/30/22.
- We received a federal TBI State Partnership grant award for up to \$150,000 per year for three years, to help improve Vermont's TBI system of care.
- We launched Vermont's first National Core Indicators survey for Aging & Disabilities (NCI-AD) to assess consumer experience with Choices for Care and Traumatic Brain Injury home-based services.
- We created and implemented a phase down plan for the federally funded Money Follows the Person program.
- We worked with the Area Agencies on Aging to implement a new caregiver assessment tool for the dementia respite grant program.
- We created a new Senior Farmer's Market State Plan.
- We participated in a year-long [State audit of the Choices for Care self-directed services](#), resulting in some recommendations for improved accuracy of payroll services.
- We launched a Choices for Care application process improvement project.
- We participated in the passing of [Act 172](#) which was created to establish an Older Vermonters Act working group to develop recommendations for an Older Vermonters Act.
- We implemented a Choices for Care (CFC) 2% Medicaid rate increase for home-based, Adult Family Care and Enhanced Residential Care services effective July 2018.
- We implemented a new minimum wage of \$11.30/hour and \$172/day (daily respite) for Independent Direct Support Workers effective July 2018 via a new Collective Bargaining Agreement.
- We finalized the federal ADRC grant with a one-year grant to the Vermont Association of Area Agencies on Aging (V4A) to create a plan to improve the effectiveness and consistency of Information, Referral and Assistance (IR&A) services across the state.

Future Directions

In SFY2019 ASD plans to:

- Implement the new State Plan on Aging along with a scorecard to track performance.
- Continue working on the Choices for Care application process improvement project with the goal of launching a new OnBase workflow solution for clinical staff.

Adult Services Division (ASD)

- Integrate the new State Plan on Aging goals and objectives into our long-term services and supports programs, such as falls prevention.
- Create a new Older American's Act (OAA) policy/procedure manual to guide Vermont and its stakeholders in the operations of OAA funding.
- Finalize the federal HCBS provider assessment and validation process to identify next steps for aligning Vermont's settings and person-centered planning requirements with federal regulations.
- Finalize "lessons learned" and next steps from the MFP grant program.
- Work with stakeholders to improve the way Moderate Needs Group program is managed.
- Implement year one of the federal TBI State Partnership grant.
- Implement a review process for the Adult Family Care quality plan.
- Improve the assessment tool used by the long-term services and supports program.
- Receive and analyze year one of the NCI survey for home-based Choices for Care and TBI program and implement year two NCI for licensed care homes and nursing facilities.
- Create a request for proposals to contract with an entity to provider education and training curriculum for nursing facilities with regards to their federally required quality plans, dementia care and dental care for people with dementia.

Programs and Services

Medicaid Funded Long-Term Services & Supports Programs include:

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

Older American's Act (OAA) Services include:

- Case Management
- Nutrition Services and Programs
- Flex Funds (State funded only)
- Health Promotion and Disease Prevention
- Information, Referral and Assistance
- Legal Assistance

Adult Services Division (ASD)

- Family Caregiver Support
- State Long-Term Care Ombudsman Program
- Volunteer Outreach (State funded only)

Other Initiatives, Programs, Services supported by ASD include:

- Commodity Supplemental Food Program
- Dementia Respite Grants for Family Caregivers
- Elder Care Clinician Program
- Employer Payroll Support for Self-Directed Services
- Health Insurance Counseling & Support (SHIP/MIPPA)
- Home Delivered Meals for People with Disabilities Under Age 60
- Nursing Facility Quality Initiatives
- Online Direct Care Worker Registry
- Self-Neglect Initiative
- Senior Farmer's Market Nutrition Program

Special projects & initiatives include:

- Federal HCBS Regulations Assessment & Implementation Project
- Governor's Commission on Alzheimer's and Related Disorders
- Money Follows the Person Project
- Reframing Aging in Vermont
- Substance Abuse Treatment Screening Initiative
- Falls Prevention Coalition
- Federal TBI State Partnership Grant

Results

ASD strives to utilize the Results Based Accountability (RBA) framework throughout the work we do. As of 2015, all Medicaid services, including Choices for Care, are managed through the State [Global Commitment to Health 1115 Waiver](#) and the accompanying [Comprehensive Quality Strategy](#). The National Core Indicator surveys data will be available January 2019 for CFC and TBI.

- [DAIL Scorecard](#)

Adult Services Division (ASD)

Please refer to the following sections of the [2018 ASD Annual Report](#) for data regarding outcomes in these programs:

- Choices for Care Program
- Moderate Needs Group Program
- Eldercare Clinician Program
- Older American's Act Nutrition Programs
- Traumatic Brain Injury Program

Adult Services Division – Choices for Care

Program Overview

Choices for Care (CFC) is a program covered under [Vermont's Global Commitment to Health 1115 Waiver](#). The CFC “High/Highest” option offers long-term services and supports to adult Vermonters who need nursing home level of care services. If a person is found clinically and financially eligible, they may choose where they want to receive their services whether it is in their own home, the home of another person, in a licensed residential care home, assisted living residence, or nursing facility. Limited funding is also available for people who do not need nursing home level of care but do need some preventive “Moderate Needs” services including homemaker and adult day services.

Staff and Partners

The Long-Term Services and Supports Unit manages Choices for Care and includes 20 staff, 15 whom are regionally located to manage applications and clinical eligibility for people in their regions.

Many partners provide direct services under CFC, including:

- Adult Day Providers
- Adult Family Care Authorized Agencies
- Area Agencies on Aging
- ARIS Solutions (employer payroll services)
- Home Health Agencies
- Licensed Residential Care and Assisted Living Residences
- Licensed Nursing Facilities
- Providers of Personal Emergency Response Services
- Traumatic Brain Injury Providers

Recent Developments and Accomplishments

In SFY18:

- We implemented a 2% Medicaid rate increase in home-based, Adult Family Care and Enhanced Residential Care (ERC) services July 1, 2018.
- We launched the first [National Core Indicators \(NCI\) for Aging & Disabilities](#) consumer experience survey. (Data will be available January 2019.)
- We received a [Scan Foundation Award](#) for Access and Affordability.
- We participated in a year-long state audit of the self-directed personal care services.
- The legislature codified the Choices for Care savings and allocation language in [Title 33, Chapter 76](#).

Adult Services Division – Choices for Care

Future Directions

The Choices for Care (CFC) staff seek ways to improve consumer experience, how services are delivered and paid for, and to integrate with broader healthcare reform efforts in Vermont. Work in SFY2019 is expected to include:

- Assuring that all home-based settings meet requirements under the federal Home and Community-Based Services (HCBS) rules.
- Analyzing the first NCI-AD consumer survey data set and identifying, with stakeholder input, opportunities for program improvement.
- Implementing improved Adult Family Care (AFC) quality management activities.
- Continuing to engage with the Accountable Care Organization to improve integration of long-term services and supports (LTSS) with broader healthcare reform efforts.
- Exploring opportunities for a Moderate Needs payment and delivery reform pilot with the Department of Vermont Health Access (DVHA) and the Northeastern VT Regional Hospital community team.
- Updating the Choices for Care regulations within the DVHA Medicaid Health Care Administrative Rules framework.
- Improving payroll and claims processing procedures for self-directed participants as recommended by the [Vermont State Auditor](#).
- Implementing Electronic Visit Verification (EVV) for home-based services, as required by the federal CURES Act.

Results

As of June 2018 (SAMS Enrollment Data)	SFY18	% Change from SFY17
Total Enrollments (high/highest/moderate)	5306	-2%
Home-Based High/Highest Only	1783	4%
Enhanced Residential Care (ERC) High/Highest Only	501	2%
Nursing Facility High/Highest Only	1860	-2%
<u>Total High/Highest Only</u>	4144	1%
<u>High/Highest</u> : Home-based & ERC % total enrollments	55%	1%
<u>High/Highest</u> : NF% total enrollments	45%	-1%
% CFC High/Highest Clinical Eligibility Completed in <30 days	96%	3%
<u>Total Moderate Needs Group Only</u>	1275	-5%
MNG Wait List end of fiscal year	880	6%

Adult Services Division – Choices for Care

New CFC quality and consumer experience data will be available from the NCI-AD survey, expected to be available in January 2019.

More Information

More information about Choices for Care can be found online using the following links:

- Legislative Report – [Adequacy of the Choices for Care Provider System September 2017](#)
- Legislative Report – [Choices for Care Savings September 2018](#)
- Legislative Reports - Choices for Care Quarterly Financial Monitoring
 - [October 2017](#)
 - [January 2018](#)
 - [April 2018](#)
 - [November 2018](#)
- [CMS Quarterly and Annual Reports](#)
- [Information At-A-Glance Resources](#)
- [Program Manuals](#)

Adult Services Division – Eldercare Clinician Program

Program Overview

DAIL collaborates with the Department of Mental Health (DMH) to oversee the Eldercare Clinician Program (ECCP), providing mental health services to Vermonters age 60 or older who are not able to easily leave their home and would otherwise not be able to receive treatment in an office-based setting. The program was created in 2000, funded by a combination of Medicaid, Medicare, commercial insurance, and a state general fund appropriation. At the local level, designated mental health agencies (DA) hire eldercare clinicians to provide services, working closely with local Area Agencies on Aging (AAA) to identify older Vermonters in need of services.

Staff and Partners

The Eldercare Clinician Program is coordinated on a statewide level by one staff in the DAIL Adult Services Division (ASD), State Unit on Aging and one staff in DMH. In each region of the state AAAs contract with DAs to provide services.

Designated Agencies Providing Elder Care:

Counseling Services of Addison County
 Northwestern Counseling and Support Services
 Howard Center
 Healthcare & Rehabilitation Services of Vermont
 Northeast Kingdom Human Services
 Rutland Mental Health Services
 United Counseling Services
 Washington County Mental Health Services

Area Agencies on Aging:

Age Well
 Central Vermont Council on Aging
 Northeast Kingdom Council on Aging
 Senior Solutions
 Southwestern Vermont Council on Aging

Recent Developments and Accomplishments

The demand for mental health support for older Vermonters is growing. According to census projections, by 2030 over 1 in 3 Vermonters will be age 60 or older, and the number over 80 is expected to double. With growing awareness of mental health needs, increasing numbers of co-occurring disorders and substance misuse, people living longer with chronic disease, and earlier detection of dementia and Alzheimer's, we anticipate that the demand for mental health services for elders and their families will continue to grow over the next decade. In fact, by 2030 the number of older adults with mental illness is expected to increase by over 25%.

DAIL, DMH and our community partners are working hard to strengthen the Eldercare Clinician Program by ensuring efficient, quality services across the state with the expertise of the eldercare clinicians. In State Fiscal Year 2018, eldercare

Adult Services Division – Eldercare Clinician Program

clinicians were hired to meet the needs of older Vermonters in geographic areas where there had been significant gaps (for example, in the Northeast Kingdom). The service gaps are reflected in the 17% reduction of the number of people served and 24% reduction in hours of service provided between SFY16 to SFY17.

Future Directions

The Eldercare Clinician Program meets a critical need in our Vermont communities, serving homebound elders with needed services and supports that they would not otherwise receive. We recognize the interconnectedness between mental health, physical health, and a person's ability to remain independent in their own home. Because of limited funding, community resources have not kept pace with increasing demand. We can expect these challenges to grow in the coming years.

Medicare is the primary insurance for the vast majority of older Vermonters. However, licensed Vermont mental health clinicians cannot bill Medicare for outpatient mental health counseling; only psychiatrists, psychologists, clinical social workers and psychiatric nurses can bill Medicare. DAIL is actively advocating that Vermont pursue a Medicare waiver to allow licensed mental health clinicians to bill Medicare. This would provide more sustainable funding for mental health services provided by Eldercare Clinicians, and improve access to mental health services by older Vermonters.

Results

In state fiscal year 2017 (best available data):

- 327 older Vermonters were served, a 17% decrease from the previous year (77% female, 23% male).
- Of those served, 37% were in the 60's, 36% in their 70's, and 27% were 80+.
- The vast majority were served in their homes (79%), although some were served in other community settings (6%) or in an office (15%).
- The most common diagnoses were Anxiety (56%) and Depression (49%).
- Many people had co-occurring conditions.
- A total of 3,868 service hours were spent providing planning and coordination, clinical assessments, individual and family therapy and medication management. This is a 24% decrease from the previous year.

NOTE: SFY18 data will be available in January 2019.

Adult Services Division – Money Follows the Person Grant

Program Overview

In 2011 DAIL was awarded a five year \$17.9 million “Money Follows the Person” (MFP) demonstration grant from the Centers for Medicare and Medicaid Services (CMS). The grant was continued through June 2020 with an additional \$8 million. The goal of the MFP grant, working with the Choices for Care Program, is to help people living in nursing facilities to overcome barriers that have prevented them from moving to their preferred community-based setting. The program provides participants the assistance of a Transition Coordinator and up to \$2,500 to address barriers to transition while providing enhanced federal Medicaid match to help rebalance Vermont’s long-term service and support systems.

Staff and Partners

MFP works hand in hand with the Choices for Care program and its partners. The Adult Services Division is responsible for the day to day management of the grant and coordinates its activities.

MFP positions are 100% funded by the federal grant. They include:

- 1 Project Director
- .5 Administrative Assistant
- 1 Data Analyst
- 1 Quality and Program Specialist
- 1 Quality and Program Specialist/Transition Coordinator
- 2 RN Transition Coordinators

Partners include:

- Area Agencies on Aging
- Adult Day Providers
- Adult Family Care Authorized Agencies
- Home Health Agencies
- Hospitals
- Nursing Facilities
- VT Center for Independent Living

Adult Services Division – Money Follows the Person Grant

Recent Developments and Accomplishments

Over the last six years, the MFP program has assisted 267 participants successfully transition from a nursing facility to a community setting. The State of Vermont realized a cost avoidance of \$2,849,228 in state share of Medicaid costs from a total of \$12,697,076 in home and community-based services that these participants received through the quarter ending September 2018. Vermont also received \$4,754,609 to cover the administrative costs of the grant (7.5 FFE positions, expenses and ADRC grant funding).

In SFY2018, the MFP program created a required phase-down plan which began with the discontinuation of new MFP enrollments as of January 2018. Currently, \$1,260,169 in federal funds remain available to support service costs in calendar year 2018 (for people that transitioned in calendar year 2017), as well as the administrative costs of closing the grant over the next two years.

Future Directions

The MFP program has identified several key areas of improvement necessary to sustain successful living in the community for Choices for Care participants. These improvement opportunities include:

- Discharge planning from the nursing facility
- Affordable/accessible housing
- Caregiver capacity/supports

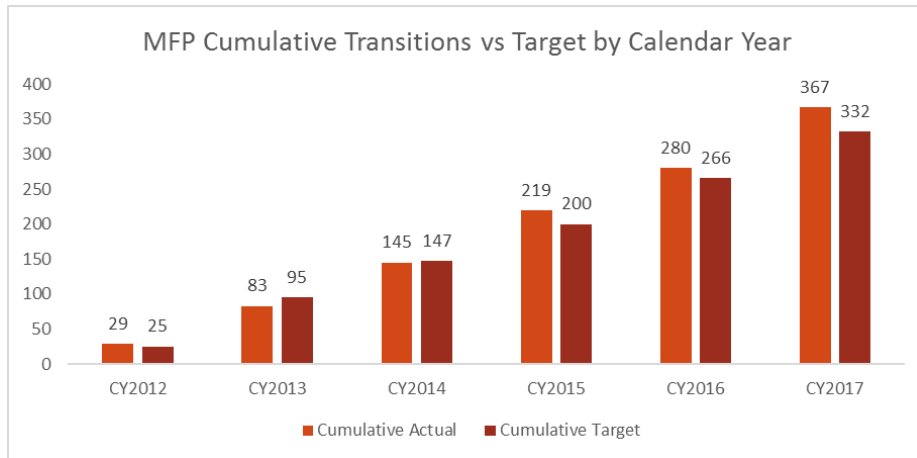
[Vermont's MFP sustainability plan](#) outlines a course of action that will use the lessons learned from this demonstration grant to optimize the overall nursing facility transition processes and supports within the CFC program.

Results

The MFP program focuses on two key benchmarks of performance:

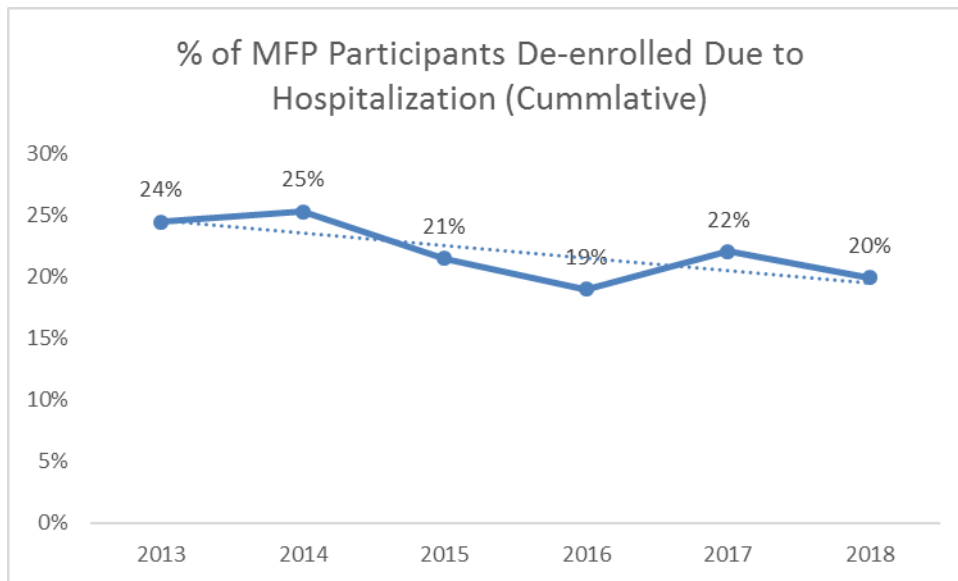
1. Total number of cumulative transitions each calendar year, with targets:
 - CY 2018 (as of 9/30/18): Project 367 cumulative transitions, 11% above the target of 332.

Adult Services Division – Money Follows the Person Grant



2. Reduce the percent of MFP participants that are de-enrolled from the program due to long-term readmission to a Nursing Facility.

- CY2018 (as of 9/30/18): 2% reduction in readmissions from CY2017.



Adult Services Division – Moderate Needs Program

Program Overview

The Choices for Care “Moderate Needs” program is a community-based option for individuals who may not meet nursing home level of care, but require some services to assist them to remain independent in their home, preventing a more intense level of service. The Moderate Needs option is not an “entitlement”, with services limited by the funds appropriated by the Vermont legislature within the Choices for Care budget.

Moderate Needs funding is managed through the local authorized providers and is capped by provider each fiscal year beginning July 1st. Services include Adult Day, Homemaker and Flex Funding.

Staff and Partners

The Long-Term Services and Supports Unit of the Adult Services Division manages the Choices for Care program, including the Moderate Needs program.

Moderate Needs services are provided by the following authorized providers:

- Adult Day Providers (Adult Day Services)
- Area Agencies on Aging (Flex Funds Services)
- ARIS Solutions (Payroll Services for Self-Managed Flex Funds Services)
- Home Health Agencies (Homemaker & Flex Funds Services)

Recent Developments and Accomplishments

In SFY18:

- We implemented a 2% Medicaid rate increase for all Moderate Needs services July 1, 2018.
- We facilitated a DAIL advisory board subcommittee that provided recommendations for Moderate Needs program improvements.
- We explored the declining Moderate Needs home health utilization of funds with home health agencies, identifying potential challenges.
- We participated in the exploration of a Moderate Needs payment and delivery reform pilot project with the Department of Vermont Health Access (DVHA) and the Northeastern VT Regional Hospital community team.
- We identified a need, through historic review of case management services utilization and a review of over 600 case management variance requests in the last year, to increase the annual case management services maximums from 12 hours to 24 hours per calendar year.

Adult Services Division – Moderate Needs Program

Future Directions

Choices for Care (CFC) staff pursue ways to improve consumer experience, how services are delivered and paid for, and to integrate with healthcare reform efforts in Vermont. Work in SFY2019 is expected to include:

- Continuing to engage in opportunities for a Moderate Needs payment and delivery reform pilot with DVHA.
- Updating the Choices for Care regulations within the DVHA Medicaid Health Care Administrative Rules framework, which may include improvements to the Moderate Needs program.
- Seeking approval to increase the Choices for Care budget to accommodate an increase in the case management services maximum for all Moderate Needs participants.

Results

Over the last two year, Moderate Needs program utilization has declined by 12% (Source: Medicaid claims data). The largest decline in utilization is by home health agencies, providing homemaker services to an average of 20% less people per month. Adult Day services have increased utilization by 1% on average over the last two years. Flex fund expenditures through AAAs and Home Health Agencies have been fairly stable.

Additionally, the Moderate Needs wait list numbers have climbed from 630 people in June of SFY16 to 880 people in June of SFY18. Approximately 98% of the 880 people waiting are for homemaker services.

As of June 2018 (Source: SAMS Enrollment Data)	SFY18	% Change from SFY17
Total Enrolled in Moderate Needs Program	1275	-5%
Moderate Needs Wait List as of June 2018	880	6%

Discussions with home health agencies have identified workforce pressures and administrative costs as potential contributors to the decline in Moderate Needs utilization and increases in the wait list for homemaker services.

More Information

More information about Choices for Care (including Moderate Needs) can be found in the Choices for Care program section of this annual report, including links to online resources and reports.

Adult Services Division – Older Americans Act Nutrition Programs

Program Overview

Older Americans Act (OAA) services, provided through Vermont’s five Area Agencies on Aging, support Vermonters age 60 and older and are designed to help older Vermonters remain as independent as possible with a high quality of life. OAA services include case management; nutrition services; health promotion and disease prevention; information, referral and assistance; legal assistance; and family caregiver support. This summary focuses on the OAA Nutrition Programs for people 60 and over, including Home Delivered Meals and Congregate Meals.

Home Delivered Meals and Congregate Meals contribute to the food security of older adults and can play an important role in promoting good health, preventing disease, and lowering rates of disability, hospitalization, depression and mortality. According to the **USDA** over 8% of Vermont’s older (60+) households are food insecure; over 17,000 are threatened by hunger, and nearly 40,000 are isolated and live alone.

The demand for meals is growing. Efforts are being made at the federal, state and local levels to strengthen meal programs and develop innovations in nutrition services.

Staff and Partners

The Adult Services Division (ASD) State Unit on Aging (SUA) manages the OAA services. The unit consists of five staff that manage nine different grants, five area plans and the VT State Plan on Aging. The OAA Nutrition Program partners include the **VT Association of Area Agencies on Aging** (V4A) and its five-member agencies:

Age Well

Central Vermont Council on Aging

Northeast Kingdom Council on Aging

Senior Solutions

Southwestern Vermont Council on Aging

Each agency works with a network of meal providers who prepare nutritious meals that meet current USDA Dietary Guidelines. Meals are delivered by dozens of volunteers across the state every day.

Recent Developments and Accomplishments

The SUA has worked closely with the AAAs to monitor the growing demand for meals across the state and to find creative ways to serve more people with limited funding. Examples include streamlining transportation, closing under-performing congregate meal sites, increasing local and private fundraising efforts,

Adult Services Division – Older Americans Act Nutrition Programs

implementing a new home delivered meals screening tool to prioritize those at highest risk, and encouraging the use of home delivered meals by people enrolled in Choices for Care and the Attendant Services Program.

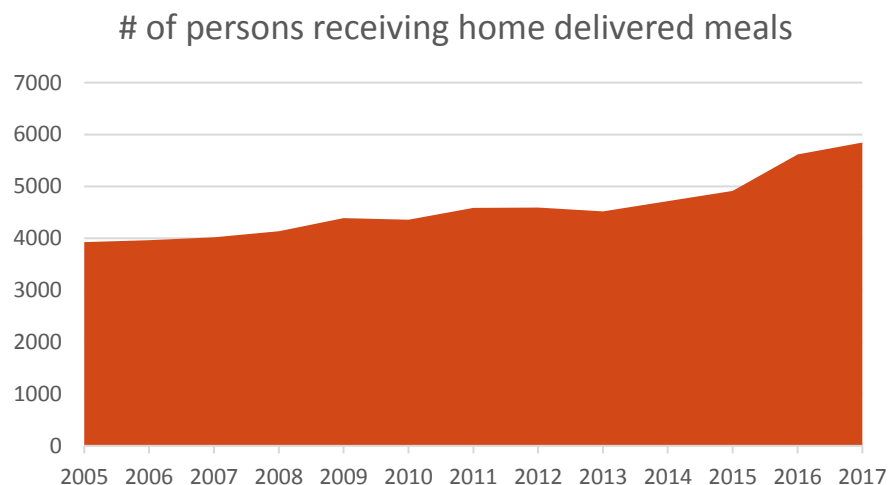
Future Directions

With limited funding, more older Vermonters in need, and a growing understanding about the critical link between good nutrition and positive health outcomes, the AAAs will continue to work closely with the SUA staff to prioritize services for Vermonters at greatest risk and to utilize new performance measures to monitor outcomes and improve performance.

Results

In Federal Fiscal Year 2017 (most current available data):

- Home Delivered Meals: 5,845 Vermonters (4% increase) received 786,756 meals (3% decrease) delivered to their homes
- Congregate Meals: 13,668 Vermonters participated in congregate meals (2% increase), receiving 316,726 meals (10% decrease)



The five AAAs are now all using the following nutrition program performance measures:

- The number and percentage of home delivered meals clients who report they have enough to eat
- The number and percentage of home delivered meals clients who report that meals help manage or improve their medical condition

Adult Services Division – Traumatic Brain Injury Program

Program Overview

The Traumatic Brain Injury (TBI) Program is a specialized health population program under Vermont's Global Commitment to Health 1115 Waiver (GC). The TBI program offers rehabilitation focused services and supports to Vermonters age 16 and older who have experienced a recent moderate to severe traumatic brain injury. The TBI program is highly structured and community-based, helping individuals build skills and strategies for independent living in the community, among their family and friends.

People who are clinically and financially eligible may choose the TBI provider they want to work with to identify personal goals and where they want to receive services. The program offers an array of services including:

- Case Management/Service Coordination
- Life Skills Aid 1:1 support
- Residential
- Respite
- Crisis
- Environmental/Assistive Technology
- Counseling

Staff and Partners

The Quality Management Unit manages the TBI Program and includes 1.25 staff to manage applications and clinical eligibility around the state. Partners include:

- Home Health Agencies
- Developmental Services Agencies (DAs/SSAs)
- Specialized TBI Providers
- [Brain Injury Association of Vermont](#)

Recent Developments and Accomplishments

In spring of 2018, ASD launched its first round of the [National Core Indicators – Aging & Disabilities \(NCI-AD\)](#) consumer survey for Choices for Care (CFC) and TBI participants. Data will show consumer experience with service delivery, choice, community participation and quality of life. Data will be available January 2019 and will be used to inform program quality improvement efforts.

Vermont was also chosen by the federal Administration for Community Living (ACL) as one of 24 recipients of a three-year cooperative agreement under two

Adult Services Division – Traumatic Brain Injury Program

new funding opportunities for ACL's TBI State Partnership Program. The goal of this grant is to create and strengthen a system of services and supports that maximizes the independence, well-being, and health of people with traumatic brain injuries across the lifespan, their family members, and their support networks. Vermont will receive approximately \$150,000 per year for three years (2018-2022).

Future Directions

Over the next year, ASD will focus on:

- Implementing the ACL State Partnership Grant with lead partners including the Brain Injury Association and the Department of Corrections.
- Evaluating the NCI-AD survey data, which will be available January 2019.
- Finalizing and evaluating the HCBS participant validation surveys that will be used to improve service delivery with regards to shared living requirements and person-centered planning.

Results

In SFY 2018, the TBI program served 91 people, a 5% reduction from SFY 2017. In SFY 2018, the program served some very complex people with high cost plans resulting in less people served with the annual \$5,641,336.00 appropriation. By the end of SFY 2018, there were five people waiting for services due to a lack of funds. An increase in the TBI appropriation to \$6,005,225 effective July 1, 2018, allowed ASD to enroll all applicants that were waiting for services.

The TBI Program currently has the following three performance measures.

- Employment: 27% of rehab participants were employed (target 25%).
- Graduation to independent living: 5 people (5.5%) graduated from the TBI Program to independent living, which was a small percent increase from last year which was 5%.
- Transition to long-term services when appropriate: 4 people (4%) transitioned to CFC long-term services, an increase from 2 people (2%) the previous year.

The NCI-AD survey will provide additional consumer experience results in January 2019.

Division for the Blind and Visually Impaired

Division 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.

Division 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 also 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.

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 regional field offices in Montpelier, Burlington, Springfield, and Rutland. Each office has a rehabilitation counselor and a rehabilitation associate who deliver individualized services. One rehabilitation 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 our 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

Division for the Blind and Visually Impaired

Recent Developments and Accomplishments

This year DBVI organized several events around the state 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. Members of the public received training in safe travel techniques from an Orientation and Mobility Instructor, increasing awareness of what it is like to travel with the white cane.

The main events were held in Barre, Burlington, Springfield, and Castleton University. Each included a walk guided by an Orientation and Mobility Specialist to demonstrate proper use of the white cane and safe travel techniques. These events are great opportunities to educate the public and to have meaningful discussions about how blind and visually impaired individuals travel within their communities independently.

DBVI has an ongoing commitment to facilitate consumer-driven events. This year the theme of the Great Expectations Conference was “Resiliency.” The planning committee was mainly comprised of individuals who are blind or visually impaired. They chose resiliency because it is essential to bounce back after vision loss. The workshop was designed to give participants “Hope” by learning from others and exploring strategies that work for achieving independence and career goals. Several individuals shared their stories and explained the adaptive training and assistive technology that have helped them achieve their goals. The overall message was for participants to keep working towards their goals even when it seems tough. Many practical strategies were shared by consumers and DBVI staff. This event occurs annually and DBVI consumers will identify the next steps and theme for next year.

In addition to consumer-driven events, DBVI created partnerships with workforce service providers to create opportunities for individuals who are blind or visually impaired. These partnerships make it possible to expand opportunities for individuals we serve:

- Working with the Vermont Department of Labor (VDOL) staff to make recommendations for universal design and accessibility of VDOL programs. This included recommendations for specialized equipment that will allow VDOL participants with disabilities to access printed information in an accessible format.

Division for the Blind and Visually Impaired

- Collaborating with VDOL to access programs that will assist individuals to participate in employment and training opportunities.
- Participating and assisting with the Voc Rehab Vermont Transition Core Teams Conference. This event brought together Transition Core Teams from around the state to share ideas about how to assist students with disabilities with their employment goals.

DBVI also has a commitment to ongoing training of staff to deliver services well. This year two DBVI staff completed their master's degree as Blind Services Vocational Rehabilitation Counselors. They learned the latest techniques and strategies to help individuals explore and find a great career match.

Future Directions

DBVI believes the best path forward includes a solid foundation in technology. Relevant new technologies emerge every day, and our staff stay current to determine the solutions that help our customers achieve their employment and independence goals. One of the more recent technologies is an app called the KNFB-Reader which allows people to have access to print documents. The user takes a picture of the paper document with the phone's camera and the app converts it for speech output. This also works for electronic documents that are in an inaccessible format. The app can use optical character recognition to convert the document to a format that can be accessed by speech output. This technology provides access to information and makes it possible to accomplish tasks independently. DBVI staff will maintain a strong foundation in new innovations.

In addition to exciting new technology, DBVI realizes the importance of helping clients learn more about their own interests and strengths for employment. DBVI recently established a workgroup called the Investigation Empowerment Improvement Team. The purpose of this group is to provide DBVI consumers with increased opportunities for self-knowledge through assessment tools. This initiative will help participants to:

- Learn about interests, skills, and abilities for future career direction;
- Increase knowledge of Visual Impairment;
- Identify adaptive skills training that will decrease functional limitations;
- Increase self-knowledge;
- Provide information for consumer career decision making; and
- Identify transferrable skills.

Division for the Blind and Visually Impaired

The team will evaluate the assessment tools and use the ones that are accessible and provide meaningful information for individuals who are blind. DBVI believes that gaining self-knowledge will assist individuals as they pursue their employment goals.

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 is exceptionally proud of the accomplishments of our customers. To read some success stories of our customers and their experiences with DBVI, visit our website: www.dbvi.vermont.gov.

Services for High School Students

DBVI's transition services provide high school students with opportunities for learning independent living and job skills. DBVI collaborates with several partners including the Division of Vocational Rehabilitation (DVR), VABVI, ReSOURCE, and the Gibney Family Foundation. DBVI is also working with partners to make sure that all blind or visually impaired high school students are building solid pre-employment skills.

Division for the Blind and Visually Impaired

The LEAP (Learn, Earn, and Prosper) 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.

Independent Living Services

DBVI helps individuals maintain independence. A DBVI rehabilitation associate 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 grant 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, serving 862 individuals over the age of 55 in FFY 2018.

Technology

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

Results

Performance Measures

How many people we serve (FFY 2018):

- 259 individuals received services to assist them to maintain or find employment as a result of their vision loss.

How well we serve them:

Customer Satisfaction: Results of a statewide random survey of all participants in the DBVI Vocational Vision Rehabilitation program in 2017 (conducted by Market Decisions—next statewide survey scheduled for 2020).

- 93% of respondents said they are satisfied with the DBVI vocational rehabilitation program.
- 93% of respondents said overall, they are better off as a result of the services they received from DBVI.

Division for the Blind and Visually Impaired

- 95% of respondents said that DBVI staff treated them with dignity and respect.
- 94% of respondents said that DBVI helped them achieve their vocational rehabilitation goals,
- 92% of respondents said that DBVI services met their expectations.
- 89% of respondents said that DBVI vocational rehabilitation services helped them become more independent.
- 84% of respondents said that DBVI helped them reach their job goals.

Our approach in assisting individuals who are blind or visually impaired on their path to employment and independence begins with the belief that each person can achieve their goals. We know that the “voice of the customer” is important and our strategies are geared to meeting those needs. Each staff member is committed to delivering services well and to making a difference in the lives of the people we serve.

How are people better off:

- 48 blind or visually impaired individuals closed their DBVI case in SFY 2018 with successful employment.
- 59% had a wage above 125% of the minimum wage.

In annual closure surveys DBVI participants shared examples of how their new skills have helped them adapt to vision loss, maintain employment, and improve their quality of life. They reported being better off because they can now:

- Obtain their employment goals
- Access printed material with the use of specialized blindness technology
- Travel independently on the job and in the community with the use of the white cane
- Use special magnification and lighting to access information on the job and at home

Division for the Blind and Visually Impaired

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

- Job exploration counselling
- Work based learning opportunities
- Counselling on post-secondary educational opportunities
- Workplace readiness training
- Instruction in self-advocacy

DBVI has been very 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. Most students participate by living and working in the Burlington area in the summer. Other students participate to build job readiness skills during school year retreat and work experiences in their local communities. Our efforts to include more students led to a higher increase in the number of participants than the number of training hours:

- The number of participants increased from 18 in 2014 to 82 in 2018.
- The number of work-based learning and job readiness training hours increased from 15,000 in 2014 to 23,000 in 2018.

The LEAP summer work experiences and school year retreats have resulted in significant skill gains for students developing employment and independent living skills that are essential for future employment. Each student receives a report of their progress which is shared with school teams, teachers of the visually impaired, and DBVI counselors. Students learn to identify their strengths and areas of vocational interest. They also learn specific job readiness skills including: respect in the workplace, assistive technology, transportation strategies, workplace relationships, personal finance, interview practice, building a strong resume, networking, and more.

Students also received specialized services necessary to develop adaptive skills related to their blindness including Orientation and Mobility (O&M), Vision Rehabilitation Therapy, and Instruction in Assistive Technology. This resulted in a

Division for the Blind and Visually Impaired

significant positive impact in their mobility skills in the community and at the work site. LEAP students received over 200 hours of O&M Instruction this summer. DBVI has also successfully expanded our services overall to youth. The percentage of population served who were under age 22 at entry into DBVI services has grown from 17% of people served in SFY 2014 to 29% of people served in SFY 2018.

Providing real work-based learning experiences in actual employment settings is one of the most effective ways to prepare youth for long term success.

Therefore, DBVI has invested more resources in providing real-world internship opportunities. Internship placements at Vermont businesses include: The Sarah Holbrook Center, The Flynn Theatre, Sangha Yoga Studio, ReSOURCE, The Burlington Free Press, The Farm at VYCC, Burlington City Arts, The ReStore, Salvation Farms, Habitat for Humanity, Maple Wind Farm, King St. Youth Center, Mt. Mansfield Media and more.

- In 2018, 80% of the interns had enrolled in college programs, and the remaining 20% were working with their DBVI counselors to match their skills to a career path.
- A DBVI intern at the Burlington Free Press stated: “Without LEAP, I wouldn’t have been able to have this experience. I am more prepared for my dream. Someday, I hope you will be listening to my words and reading what I’ve written – about sports, news or anything else that matters to people here in Vermont.” This student is now enrolled in college and studying broadcasting in Vermont.

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 December 2017 and can be found at <https://dbvi.vermont.gov/resources/publications>. Please also visit the success story link on the DBVI website at www.dbvi.vermont.gov to see real examples of people reaching their goals.

Division for the Blind and Visually Impaired – LEAP

Program Overview

The LEAP Program provides students and young adults, ages 14-24, who are blind or visually impaired with an opportunity to gain skills needed to be independent, confident, and productive with the outcome of increased employability. LEAP is a workforce development program which delivers Pre-Employment Transition Services. The program provides work-based learning experiences, internships and workshops so participants are more competitive entering the workforce.

LEAP consists of an intensive summer residential program which includes living in community housing and focuses on employment, independent life skills, leadership, working with others, and achieving success at their work site.

LEAP also facilitates year-round Professional Growth Retreats focused on job readiness training for students to develop employment, social, and independent living skills. Themes of past retreats have included: Respect in the Workplace; Technology and Transportation; Workplace Relationships; Food and Finance; The Interview; The Resume; Networking, and more.

To understand the power and impact of LEAP, check out our video:

<https://www.youtube.com/watch?v=pVrG1ESEsjM>.

Staff and Partners

The Division for the Blind and Visually Impaired (DBVI) works with LEAP students to prepare and recruit them for the LEAP Program. DBVI staff also works to ensure that students have access to resources and accommodations required to be successful. This staff includes four Counselors, an Assistive Technology Trainer, and the Director of DBVI.

ReSOURCE, a nonprofit organization in Burlington, is contracted by DAIL to provide LEAP Pre-Employment Transition services to students who are blind or visually impaired. ReSOURCE works closely with DBVI and the Vermont Association for the Blind and Visually Impaired (VABVI) to identify and recruit students to the program. ReSOURCE partners closely with VABVI to provide specialized services to students including Orientation and Mobility, Vision Rehabilitation Therapy, and Instruction in Assistive Technology.

Division for the Blind and Visually Impaired – LEAP

ReSOURCE works with partners in the community to provide work experience sites for students. These include the Burlington Free Press, Burlington City Arts, Sanga Yoga Studio, Habitat for Humanity ReStore, the Overlook Café, the Waterbury Café, the Flynn Theatre, Mt. Mansfield Media, Sara Holbrook Community Center, The Vermont Youth Conservation Corps, Salvation Farms, and more.

Recent Developments and Accomplishments

Leadership Development

“You are the best mentor I could ask for. That's because you didn't just teach me skills like food preparation and cane travel. You taught me that blindness is not a tragedy. You showed me that I don't have to be depressed all of the time, and that with the right attitude, my dreams are within reach.”

-LEAP Student, 2018

At every opportunity this summer, LEAP creates chances for students to be leaders for their peers. Students are more willing to use their canes, take on new challenges, ask questions, and share their story around their peers who are also blind or visually impaired.

LEAP leaders get the chance to find their voice and flex their skills as a mentor. They experience a sense of confidence, accomplishment and responsibility.

“LEAP offers the opportunity to be around other young people with visual impairments. That was the most empowering piece for my students. LEAP has made my students much more self-aware; they dropped into themselves and began processing their acceptance. “

-Rishi Conneloy, Teacher, Vermont Association for the Blind and Visually Impaired

Orientation and Mobility

LEAP students received over 200 hours of O&M Instruction this summer. This resulted in a significant impact in their mobility skills.

Teachers of the Visually Impaired report that 5 students requested canes or further O&M instruction on their arrival back to school.

Division for the Blind and Visually Impaired – LEAP

“I see a large change in Ashley—she’s much more comfortable being visually impaired and proudly uses a long cane everywhere! I said that she seemed more mature and she said, “I think it’s from LEAP.” She can handle challenges more gracefully and is proud of using a cane! Win, win!”

-Virginia Goodman, Teacher, Vermont Association for the Blind and Visually Impaired

Technology Builds Brighter Futures

6 LEAP students participated in an assistive technology class with instruction from a Certified Instructional Technology Specialist (CATIS). Students collaborated to create a Public Service Announcement (PSA) for DBVI as well as a Podcast.

Future Directions

The LEAP Program continues to develop its “Technology Builds Brighter Futures Program.” In 2019, LEAP will continue to offer technology classes to students and we are looking to expand this opportunity to more students.

We recognize how impactful peer and community interaction is on our students. LEAP is planning to grow this impact through a “Community Integration Program.” We are planning to give students the opportunity to engage in O&M Instruction with their peers on a quarterly basis and meet and interact with Senior PALS Groups through VABVI.

LEAP will expand its partnerships in 2019 to add on more work experience and internship sites to meet the needs of our students’ career goals. LEAP will also be working with the Youth-Build Program to offer a skill building program with tools in summer 2019.

Results

From 2014 to 2018 the LEAP program has grown from 18 to 82 participants. The number of training hours has increased from 15,000 in 2014 to 23,000 in 2018. This has resulted in significant skill gains for students in employment and independent living skills.

Each student receives a report of their progress which is shared with school teams, teachers of the visually impaired, and DBVI counselors. Students learn to identify their strengths and areas of vocational interest.

Division for the Blind and Visually Impaired – LEAP

In 2018, 80% of the interns had enrolled in college programs, and the remaining 20% are working with their DBVI counselors to match their skills to a career path.

Success Stories

Alek

Alek dreams of being a professional broadcaster. In 2018, LEAP placed him at the Burlington Free Press newsroom as a summer internship to work towards his goal.

The Free Press asked Alek to write a feature story and he didn't hesitate. Alek was immediately in the community conducting interviews, asking hard questions: "Sometimes, to get a great story, you have to go out and ask the tough questions that you might not want to. You also have to be prepared for anything to come up unexpectedly."

His article was on the front page of the Burlington Free Press entitled: "A Vermont teen died on a snow-covered road. Now, a lush garden blooms in her memory."

Alek shares that "Without LEAP, I wouldn't have been able to have this experience. I am more prepared for my dream. Someday, I hope you will be listening to my words and reading what I've written – about sports, news or anything else that matters to people here in Vermont."

Alek is now enrolled in college and studying broadcasting.

Quotes from LEAP Students and Partners

"The work sites at LEAP are one of a kind and always a great fit. The program works hard to set you up with the ideal work site to fit your interests...you'll fall in love with that work site because it builds your soft skills and your resume, all while working alongside friendly and often inspiring people."

-LEAP Intern, Waterbury Café

"My students have gained real-life experience navigating the challenges of life as visually impaired teens living in rural areas of Vermont. Often these teens are the ONLY visually impaired students in their schools. The LEAP program allows them experiences that they otherwise would not have had access: job exploration and job skills, self-advocacy skills, exposure to new assistive technology options and learning about appropriate social interactions with other visually impaired peers.

Division for the Blind and Visually Impaired – LEAP

This program is invaluable as it addresses so many of the needs of these often socially isolated teens.”

- Amy Gates, TVI

"After living with a group of people for a while, no matter how diverse, you end up learning to cooperate with one another and come up with systems that work. It is definitely still a challenge for me, but I think coming to this program has really helped me open up and bond with people that I normally would not have."

-LEAP Intern, ReSOURCE Development Department

"The greatest thing I took away from LEAP was a heightened self-confidence living as a visually impaired person. I also learned a lot about the way in which I collaborate with others."

-LEAP Intern, the Flynn Theatre

“My favorite part of working at ReSOURCE was communicating and interacting with my other coworkers and customers because working with people effectively improved communication and customer service skills. I'll be more prepared for possible employment opportunities in the future.”

-LEAP Corps Member, ReSOURCE Household Goods Store

VABVI – Older Blind Program

Program Overview

Through the Older Blind Program, the Vermont Association for the Blind and Visually Impaired (VABVI) provides rehabilitation services for Vermonters over the age of 55, no longer on a vocational track, to compensate for vision loss. Studies show that the earlier such intervention occurs, the more independent an individual remains, and is far less likely to experience falls or leave their current place of residence. Services include:

- Teaching individuals to understand their visual impairment and its medical implications.
- Teaching individuals to maximize their functional vision and independence
- Teaching adaptive skills of daily living and use of assistive technology, to compensate for vision loss (i.e. cooking cleaning, organization, money management, time management, reading, writing, braille, etc.)
- Teaching adaptive skills for travel in the home and community. This assists to prevent falls and promote community integration. (I.e. traveling with a long white cane, public transportation, room familiarization, protective techniques, etc.)
- Assisting individuals through the seven stages of adjustment to vision loss (similar to the 5 stages of grief) through direct instruction and participation in Peer Assisted Learning and Support Groups (PALS).

Participation in these services are voluntary and no client is ever charged for receiving vision rehabilitation services. Clients who cannot afford to purchase recommended aids and devices such as magnifiers, labeling tools, white canes, etc. can access up to \$125 worth of assistive devices under the grant funding. Thus, no Vermonter is denied the services or equipment that help them accommodate for vision loss.

Staff and Partners

VABVI has four offices providing services to the entire state of Vermont. There are four Certified Vision Rehabilitation Therapists, two Certified Orientation and Mobility Specialists, four Vision Rehabilitation Assistants, one PALS facilitator and one Supervisor of Adult Services. An Intake Specialist fields calls and referrals and provides callers with information on additional state and community resources that may be of benefit to clients and other professionals in the community.

VABVI strives to work closely with:

- State Department of Disabilities, Aging and Independent Living

VABVI – Older Blind Program

- State Division for the Blind and Visually Impaired
- State Department of Libraries: Audio Braille Large Print and Electronic Library (ABLE Library – partnered with the Federal Library of Congress, National Library Service)
- Vermont Area Agencies on Aging
- Vermont Center for Independent Living
- Support and Services at Home (SASH)
- Other agencies across the state to meet our clients’ needs.

Recent Developments and Accomplishments

VABVI has begun to create online content to help raise awareness of visual impairments and to show how individuals with visual impairments can be independent. Under the #howeyedoit, we have begun to make YouTube videos featuring visually impaired Vermonters demonstrating how they accomplish tasks throughout their day using adaptive skills or technology. The campaign is aimed to modify social stigmas of people with vision loss to be more positive and promote the services available from VABVI, to gain and increase their independence.

Future Directions

At present, more than 13,000 Vermonters are currently blind or visually impaired and statistics show by 2030 there will be 30,000. As baby boomers age, they are developing vision loss but are much more comfortable with technology to support them in tasks of daily living. Recognizing this, manufacturers are making more products that include accessibility to help people with vision loss, such as the iPhone. This new aging population recognizes the benefit of such features but often require direct instruction to know how to use it. While our staff has begun to develop the skills necessary to instruct clients in the use of these devices, the demand will be much greater than our present funding is capable of meeting.

Results

- How we measure quality and performance in this program
 - Teachers collaborate with clients to identify goals related to assistive technology, orientation and mobility, skills of daily living or communication.
 - Throughout the instruction, progress on set goals are tracked and measured as either completed or removed from the plan - at the client’s request or if their life circumstances change.

VABVI – Older Blind Program

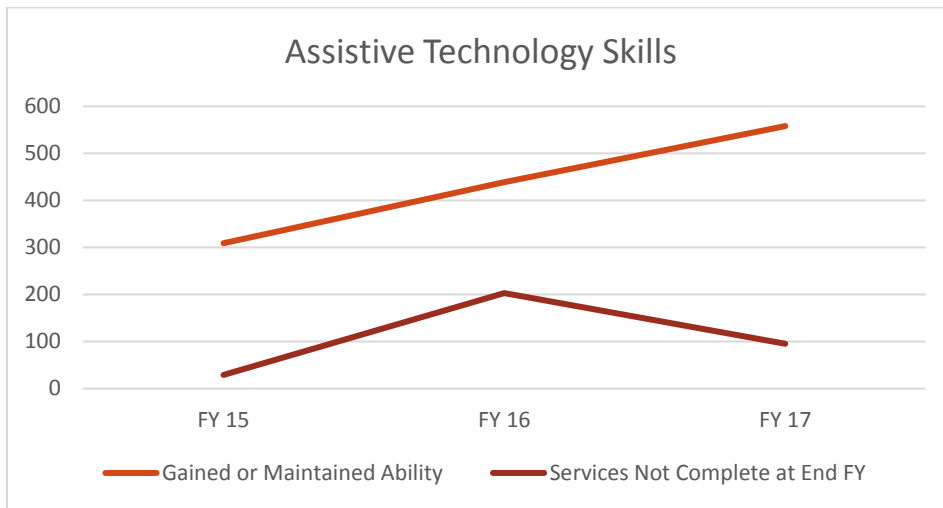
- Clients are asked if their confidence in their ability to maintain their lifestyle has increased, stayed the same or decreased as a result of the services they received.

- Measures of how much: # served, units of service
 - Hours of Orientation and Mobility, Rehabilitation and Peer Assisted Learning and Support Provided
 - FY 15 = 5336
 - FY 16 = 5820
 - FY 17 = 6542
 - Numbers of clients who received training in assistive technology
 - FY 15 = 606
 - FY 16 = 642
 - FY 17 = 653
 - Numbers of clients who received training in orientation and mobility
 - FY 15 = 59
 - FY 16 = 115
 - FY 17 = 115
 - Numbers of clients who received training in communication skills
 - FY 15 = 714
 - FY 16 = 658
 - FY 17 = 763
 - Numbers of clients who received training in skills of daily living
 - FY 15 = 449
 - FY 16 = 251
 - FY 17 = 343

VABVI – Older Blind Program

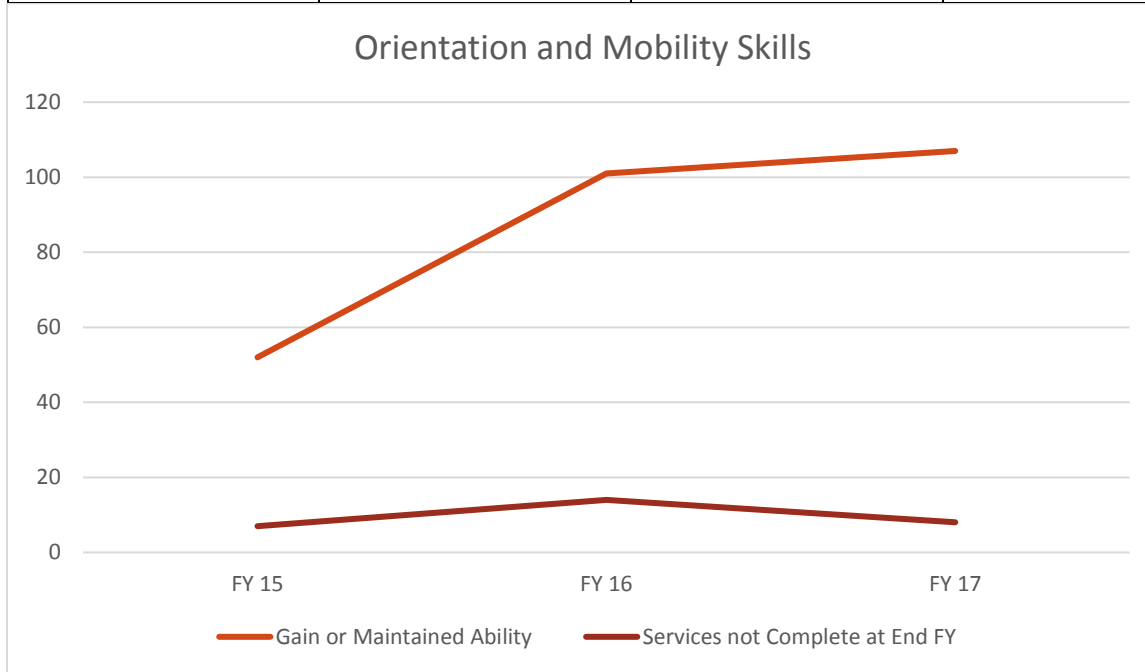
- Measures of how well and/or how people are better off

Assistive Technology Skills	FY 15	FY 16	FY 17
Clients who gained or maintained functional abilities previously lost due to vision impairment	309	439	558
Clients who had not yet completed services by the end of the fiscal year	29	203	95



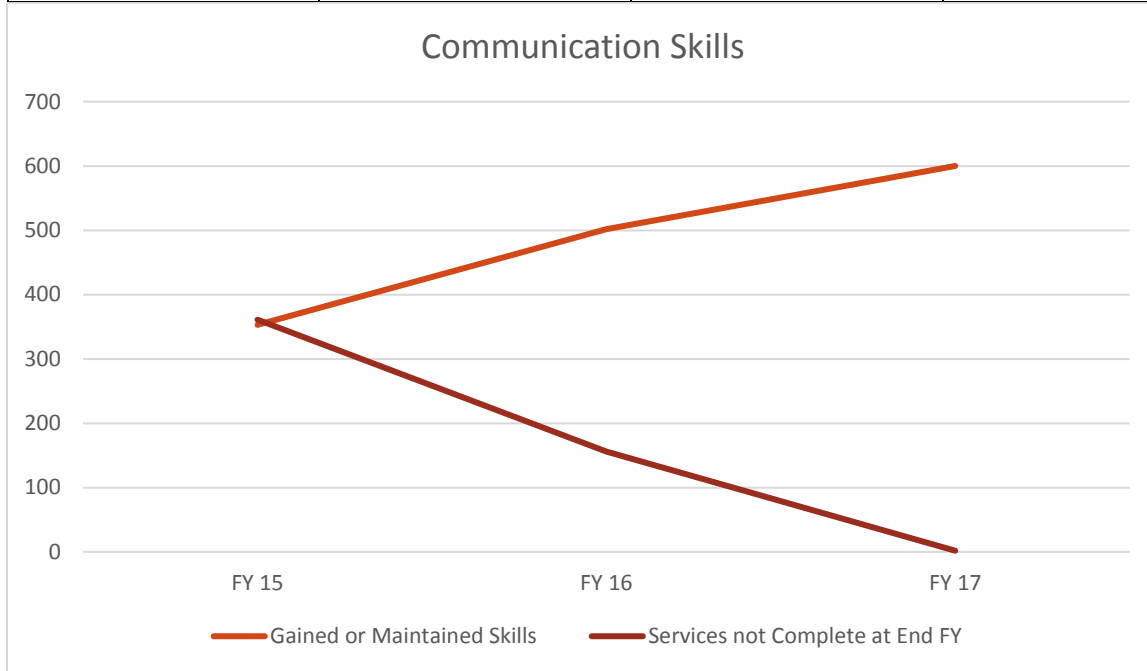
VABVI – Older Blind Program

Orientation and Mobility Skills	FY 15	FY 16	FY 17
Clients who gained or maintained functional abilities previously lost due to vision impairment	52	101	107
Clients who had not yet completed services by the end of the fiscal year	7	14	8



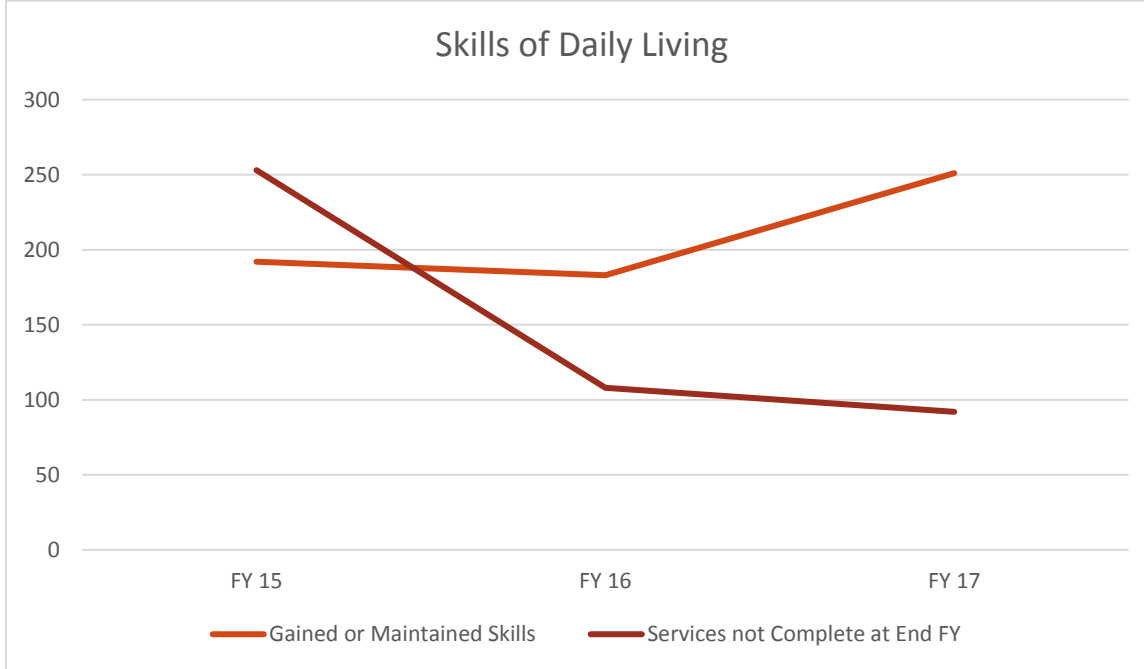
VABVI – Older Blind Program

Communication Skills	FY 15	FY 16	FY 17
Clients who gained or maintained functional abilities previously lost due to vision impairment	353	502	600
Clients who had not yet completed services by the end of the fiscal year	361	156	163



VABVI – Older Blind Program

Skills of Daily Living	FY 15	FY 16	FY 17
Clients who gained or maintained functional abilities previously lost due to vision impairment	192	183	251
Clients who had not yet completed services by the end of the fiscal year	253	108	92



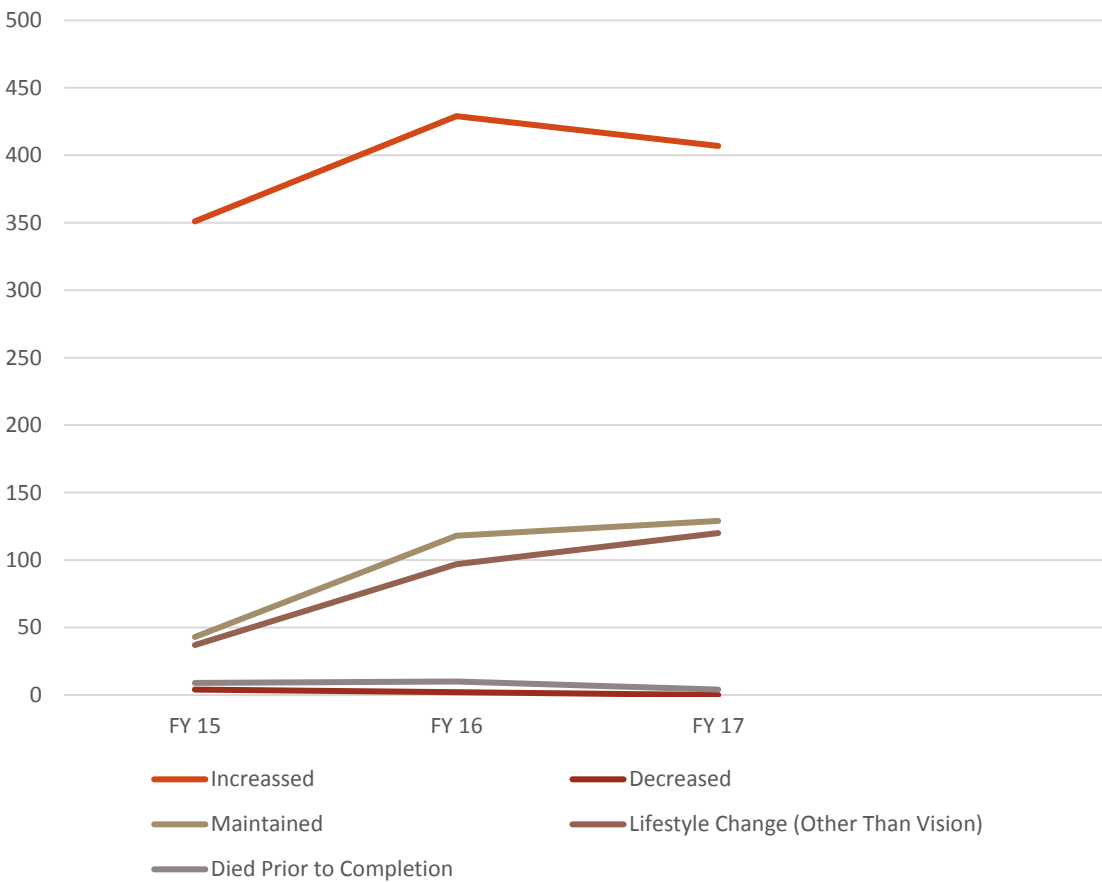
Measure of Client Confidence and Control to Maintain Lifestyle with Vision Loss

	FY 15	FY 16	FY 17
Clients who reported that they felt they were in greater control and more confident, that they were able to maintain their current living situation as a result of the services received.	351	429	407
Clients who reported that they were less confident in their ability to maintain their current living situation as a result of the services they received.	4	2	0
Clients who reported no change in their confidence or control regarding their ability to	43	118	129

VABVI – Older Blind Program

maintain their current living situation as a result of services received.			
Clients who reported a change in lifestyle for reasons unrelated to vision loss.	37	97	120
Clients who died prior to the completion of vision services.	9	10	4

Survey of Client Confidence and Control to Maintain Lifestyle



VABVI – Older Blind Program

- Success story - successful outcomes including collaborations as applicable
 - A senior in Middlesex was recently assessed for ways to utilize assistive technology in order to maintain his reading skills. He had recently heard of electronic magnification devices and wanted to see samples of different kinds of devices to make an informed decision about which to purchase. He had taught theater at a University for most of his adult life and wanted to still be able to read plays as well as the daily newspaper. Our teacher brought him several different demonstration units and the pros and cons of all the devices were considered. One was loaned to him for two weeks to trial and ultimately, he decided to buy the brand that was loaned to him. At the same time several other aspects of his kitchen were modified so he could cook meals independent of his daughter and son-in-law who lived nearby. His stove, oven and microwave were all marked to allow him to cook and heat up food on his own. He was shown an array of sunglasses and learned how they could help him in and out doors to control glare. When services were completed, all three were grateful and his daughter and son-in-law expressed that they never knew how much could be done to help their father live more independent.
 - A woman in Middlebury and her daughter met with one of our teachers, in March. The client had Macular Degeneration and had been dealing with it for many years without contacting our agency. She finally agreed to meet with us and wasn't sure what we could do for her. She reported that she wasn't able to read anymore. Within a few moments she was reading out loud fluently with a 3x stand magnifier. She was struggling to cook in her microwave and with some simple tactual dots being added to her keypad, she was able to independently cook her meals. The teacher asked her if she ever struggled with glare, and she responded in the affirmative. Her daughter was surprised to hear this. It was discussed with her that simply turning the blinds to be perpendicular to the sun's rays can greatly control glare in a home. This was done, and the client was so happy. She then was shown different kinds of sunglasses and she selected a medium grey pair of wrap-around, fit-over frames. When she put them on, she audibly let out a sigh of relief. She signed up for the talking book library and now loves to listen to books each day. As the teacher was leaving, the client's daughter whispered to the teacher, "You are amazing! We can't thank you enough! We had no idea any of this was available to help our mother!"

VABVI – Older Blind Program

- The husband of a woman in Jerusalem, Vermont contacted us because his wife was struggling to make phone calls on her landline phone. She expressed that she could no longer see the numbers to dial the phone. She was provided with a large print phone with a large number pad and several speed dial buttons. She and her husband were shown how to program the memory buttons and the memory buttons were marked with brightly colored, tactual dots to distinguish them. The woman was thrilled and now calls her children and grandchildren without assistance from her husband.
- A gentleman in Woodstock, Vermont lost a great deal of vision rapidly due to a detached retina. He was still very much a world traveler and was concerned he would not be able to fly independently. One of our orientation and mobility instructors introduced him to the white cane and how to use it properly to avoid tripping or falling. He was instructed in how to utilize disability services when traveling on public transportation and on airlines. The gentleman has taken many flights around the United States and Canada since then and says of his cane, “My white cane means freedom to travel with confidence!”
- One of our teachers visited with a 77-year-old woman who had recently experienced severe vision loss due to Macular Degeneration. The woman reported to her that she didn’t think there was anything really that the teacher could do to help her. As the visit began, the client was visibly depressed and despondent about her vision loss. Our teacher pulled out the magnifier kit and said, “Let’s take a look at these for a moment.” Within two minutes, the woman lit up with excitement as she began to be able to read again.

One of our Orientation and Mobility Specialists recently had the opportunity to work with a 94-year-old woman, with age related macular degeneration. She was getting lost in her studio apartment. The apartment walls were white, the floor was white, and the cupboards in her kitchen area across from her bed were white. Her bed was white, the sheets were white, and her couch and chair were a light tan. Her floor lamp was quite bright and had a white shade which let most of the light through and one wall was a large window with blinds that were fully open.

VABVI – Older Blind Program

Simple modifications made a world of difference for her such as angling the blinds so they were perpendicular to the sun's rays. This allowed light to enter the room upward and to the ceiling. She said, "Oh that's so much better!" Her floor lamp was replaced with one of our adjustable floor lamps which allowed her to focus light where she wanted and needed it. Non-skid black shelf liner was placed on her sink's counter surface and as soon as this was done, from her seated position in her chair across the room she declared, "I can see my kitchen!" The same was done throughout her living arrangement, adding contrast to her studio and she became very excited and was able to navigate her room independent. Her daughter who was in attendance said, "We'd have never thought of that. Something so simple made such a difference!"

Developmental Disabilities Services Division

Division 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. Everyone can make decisions for themselves, can live in typical homes, and can contribute as citizens to the communities where they live. Our communities are stronger when everyone is included.

Division Overview

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

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

Staff and Partners

Our work is carried out by sixteen program staff including the Quality Management Unit, Services Specialists staff, administrators and support staff as well as twenty-eight (28) staff working within the Office of Public Guardianship.

The Agency of Human Services contracts with fifteen private, non-profit developmental disabilities services providers to provide or arrange for services to over 4,612 people with developmental disabilities and their families through Master Grant Agreements. We emphasize the development of community capacities to meet the needs of all individuals, regardless of the severity of their disability. DDSD works with a variety of people and organizations to ensure that we meet the changing needs of people with developmental disabilities and their families: people with disabilities, families, guardians, advocates, service providers, the State Program Standing Committee for Developmental Disabilities Services and state and federal governments.

Developmental Disabilities Services Division

Recent Developments and Accomplishments

DDS Payment Reform

The Department of Disabilities, Aging, and Independent Living (DAIL), in partnership with the Department of Vermont Health Access (DVHA), is working on a major Payment Reform initiative for Developmental Disabilities Services (DDS) Home and Community-Based Services (HCBS). The overall goal of this project is to create a transparent, effective, and administrable payment model for DDS that aligns with the Agency of Human Service's (AHS) broader payment reform and health care reform goals. One of the major objectives of the reform is to comply with the State's agreement with the federal Centers for Medicare & Medicaid Services (CMS) to develop a plan to coordinate payment and delivery of Medicaid HCBS services within the State's delivery reform efforts for health care. Another major objective is to increase transparency of and accountability for DDS funding and services.

The State, providers and stakeholders representing people who receive services and their families having been meeting since January 2018 to redesign the system. One component of the project includes a Provider Rate Study to evaluate the actual cost to providers of delivering various service categories in DDS. This information will be used to inform the new payment model. There are workgroups evaluating the use of a standardized assessment tool for assessing the needs of people with DD; the methodology for paying providers for delivering services; and the way the state accounts for payments and service delivery. Designing and implementing these processes is a significant system change project that will be a major focus for DDSD, providers and stakeholders for the next few years.

Innovation Think Tank

While working on DDS Payment Reform, DDSD also wants to ensure that the payment model being developed supports innovative, high quality services that support people in services that address their needs and goals. In May 2018, DDSD sponsored an "Innovation Think Tank" for Developmental Disabilities Services (DDS) which brought together people who receive services, family members, advocates, provider agency staff, Department of Disabilities, Aging and Independent Living staff and other state partners and stakeholders to share ideas about the future of developmental disabilities services in Vermont. Many ideas were generated from this Retreat. DDSD has been meeting with stakeholder

Developmental Disabilities Services Division

groups to narrow down the ideas to a few priority initiatives for the system to pursue. DDS will then convene relevant stakeholders and partners to begin working on them. These collaborations will help to focus efforts and resources on initiatives that will support us to achieve our mission and that are in line with our shared values.

International Recognition of Vermont Supported Employment Program

Vermont's DDSD Supported Employment program was invited to Berlin, Germany in December 2017 by the Federal Ministry of Labour and Social Affairs. This was in response to the State of Vermont winning the prestigious World Council Zero Project Award for its enduring and effective Supported Employment Program. Germany's Federal Ministry requested an expanded session of the Zero Project award presentation at their Inclusion Days. The event focused on "...best practices on inclusion from around the world..." The event supports the UN Convention on Rights of Persons with Disabilities. Three of DAIL's Supported Employment provider partners attended this event sponsored by Germany: Bryan Dague, Center for Disability and Community Inclusion at the University of Vermont; Jennifer Stratton, Lamoille County Mental Health Services; and Jessalyn Gustin, Upper Valley Services.

Vermont Clinical Training Consortium Focuses on the Power of Relationships:

The Vermont Clinical Training Consortium (VCTC) includes clinicians from developmental disabilities services agencies, the Assistant Director and Director of the Vermont Crisis Intervention Network, the Co-Executive/Clinical Director of the Francis Foundation and a DDSD representative. VCTC was formed in response to a need for more readily available resources for Vermonters with developmental disabilities with complex trauma.

VCTC completed development of a three-day training titled *The Transformative Power of Relationships*. The consortium uses multiple presenters to deliver trauma-informed subject matter on topics including Caregiver Affect Management; Attachment as the Primary Response to Distress; Attunement and Co-Regulation; The Bio-, Psycho-, Social Model of Support, Defensive and Advancement Systems; Thinking About Consequences; Teaching Self-Regulation Skills and Building Emotional Alliances.

Developmental Disabilities Services Division

As of December 2017, VCTC had presented to over sixty providers including service coordinators, DDS staff, community support staff and shared living providers. VCTC provided training throughout 2018 and continues to offer targeted training and follow-along supervision.

Remote Support

Remote support is an emerging service model that combines technology and on-call staff to support people with developmental disabilities in their own homes. Remote support uses two-way communication in real time, including home-based sensors and other technologies, to allow an off-site support staff to monitor and respond to the safety and needs of people living in the community. Remote Support allows people to live more independently in their homes. People do not always require a staff person to be present to ensure their health, safety or wellbeing. Some people prefer to be alone in their home but want to have support available when they need it.

Safety Connection, a HowardCenter overnight remote support program, helps people with developmental disabilities and mental health challenges to be in their own homes without on-site staff. Depending on the specific needs of a person, the HowardCenter team develops an individualized plan for overnight support. Safety Connection uses individualized protocols to support each participant in a way that is most effective and least intrusive.

Immediate and discreet individualized support is provided using flexible modes of communication, including two-way voice, phone, text and in-person. There are trained staff available who monitor the sensors or answer calls for assistance. Safety Connection operators handle scheduled check-ins each night for those who need them. Safety Connection staff listen closely to help problem solve and provide emotional and social support during overnight hours. Support may include talking to a person who is feeling anxious, medication reminders or, when needed, an emergency responder who goes to the home. Safety Connection provides a cost-effective support to help people with disabilities live in their own homes while providing a sense of safety and security. Safety Connection services are delivered currently to individuals supported by three agencies in Vermont.

Developmental Disabilities Services Division

Success Story

A Love Story – 43 Years in the Making: Cassie and David met in 1975 through a mutual friend at their workplace. David still lived with his parents and Cassie lived in a group home right around the corner. They visited each other at their homes and enjoyed hanging out with David’s family at their pool in the summers.

Cassie and David always figured out how to spend a lot of time together. She would visit him while he was volunteering at the Brownell Library. They could be spotted at restaurants around Essex Junction and marching in the annual 4th of July parade together. They often would go shopping together in Williston or Winooski, and they still go to the Essex Fair together – every day it’s there!

Their relationship has grown and adapted over the years. Cassie now uses a wheelchair and needs to be careful in how she eats. They continue to go out for lunch 4-5 times a week at their favorite local restaurant for pizza. David has learned how to assist Cassie with eating so that they can continue to have private dates. After lunch, he can be seen pushing her to nearby stores where they may do some shopping or just look at what’s new.

Cassie has a lot of sparkle to her style, so shopping is a great joy which David is more than happy to indulge. When the weather is bad, they go to the mall so as not to lose the opportunity to see each other. They always have a big celebratory date on their anniversary to make the day extra special. The people who support Cassie in her group home strive to make sure that she can see her boyfriend as much as she wants. Since David still works, everyone accommodates his schedule.



Recently, Cassie has developed some vision issues. When considering whether to have the surgery needed to correct the problem, Cassie was clear: “I want to be able to see David!” Cassie’s and David’s dedication and devotion to each other is a testament to their enduring love and desire to grow old together. After 43 years, the spark is still there.

Developmental Disabilities Services Division

Future Directions

Home and Community-Based Services Rule:

DDSD is working in collaboration with AHS on the transition plan to ensure full compliance with the Federal HCBS rule by 2022. The intent of the rule is to ensure that individuals receiving long-term services and supports through HCBS programs have full access to the benefits of community living and the opportunity to receive services in the most integrated setting appropriate. The rule promotes choice and control, inclusion and protection of participants rights. In the past year, the Quality Management Unit has been conducting site visits to ensure that settings where people receive services are in compliance with the rules. DDSD is on target with completing the steps to come into full compliance related to the setting requirements. DDSD is in the process of evaluating the DDS system regarding the HCBS requirements related to conflict-free case management. After the analysis, DDSD will be seeking wide stakeholder input regarding the options for complying with the conflict-free case management requirements.

Promotion of Residential Initiatives:

DDSD is partnering with designated agencies and community members in supporting the development of new types of housing options for adults with developmental disabilities. DDSD anticipates that, by working together with local schools, DDS agencies, housing development agencies and families receiving services, adults with developmental disabilities can make meaningful choices about which communities and settings they choose to live in while accessing needed and familiar supports.

DDSD works with Designated Agencies and Specialized Service Agencies to develop and expand supported apartment settings where services are individualized and teach skills needed for independent living, enhance community inclusion and support employment for adults who wish to live in their own homes. Several DDS agencies are exploring small scale transitional living models for young adults coming out of high school.

Developmental Disabilities Services Division

Continuing Integration of Services for Children at the Agency of Human Services:

Integrating Family Services was an AHS initiative intended to streamline and integrate services currently provided to children and families through multiple AHS departments. The goal was to create a holistic, seamless system of service delivery across the state. The intent was to streamline the intake process for families, increase access to a variety of services and reduce fragmentation of funding and service delivery. AHS remains committed to a holistic, integrated system of care for children and families. During the past year, the Department of Mental Health (DMH) engaged in a major Payment Reform effort. They are revising the way services for children and families are payed for in order to promote better outcomes and increase flexibility in service delivery. DDS and DMH have been exploring the option of blending funding and service delivery across their programs for children and families. They are exploring the pros and cons and logistical implications of pursuing this option. Preliminary input has been solicited from various stakeholders, and additional discussions will happen in the upcoming year to inform a decision about whether this is the best option for meeting the needs of children with developmental disabilities and their families.

Community of Practice on Cultural and Linguistic Competence:

Recognizing the increasing diversity of residents and citizens with developmental disabilities, Vermont was selected as one of ten states/jurisdictions to participate in a five-year initiative building a Community of Practice on Cultural and Linguistic Competence in Developmental Disabilities. The project aims to advance and sustain cultural and linguistic competence in developmental disabilities service systems. Going into the second year of the initiative, the state “transformation leadership team” is receiving technical assistance from experts at the Georgetown University National Center for Cultural Competence to recommend changes to policies, structures and practices; assess and respond to educational and training needs; and develop initiatives to foster dialogue and information sharing.

The team membership has expanded to include: State of Vermont DDS; the University of Vermont affiliated program, Center on Disability and Community Inclusion; the Vermont Developmental Disabilities Council; Disability Rights Vermont; representatives from Green Mountain Self-Advocates; the Vermont Center for Independent Living; Vermont Family Network; Vermont Care Partners; University of Vermont LEND Project (Leadership Education in Neurodevelopmental Disabilities) and HowardCenter Developmental Services.

Developmental Disabilities Services Division

Programs and Services

Home and Community-Based Services are provided through Designated Agencies and Specialized Service Agencies. These services include Service Coordination, Community Supports, Work Supports, Home Supports, Clinical 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 or 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 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 is provided through designated agencies to offer families 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.

Intermediate Care Facility for people with Developmental Disabilities is a highly structured residential setting for six individuals that provides intensive medical and therapeutic services.

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.

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

Developmental Disabilities Services Division

Results

Quality Service Reviews: The DDSD Quality Services Reviews (QSRs) meet our commitment to monitor and review the quality of services provided with Federal and State HCBS funding. The purpose of the QSR is to ascertain the quality of the services provided by the Designated Agencies and Specialized Services Agencies and to ensure that minimum standards are met with respect to DAIL and DDSD guidelines and policies. In CY 18, the following entities received QSRs: eight agencies (five Designated Agencies and three Specialized Service Agencies); the Supported Intermediary Service Organization that assists people who self/family manage; and a contracted agency working with one of the DAs. In addition, five of the agencies went through a re-designation review process.

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: DDSD participates in the National Core Indicators (NCI) national standardized Adult In-Person Survey. Data from the 2016-17 survey show, of that adults receiving home and community-based services who were surveyed:

- 84% said they regularly participate in integrated activities in their communities [community inclusion: went shopping, on errands, for entertainment, out to eat].
- 89% said they make choices about their everyday lives [residence, work, day activity, staff, roommates].
- 66% said they make decisions about their everyday lives [daily schedule, how to spend money, free time activities].
- 50% of those who do not have a job in the community said they would like to have one.
- 5% were reported to be in poor health.

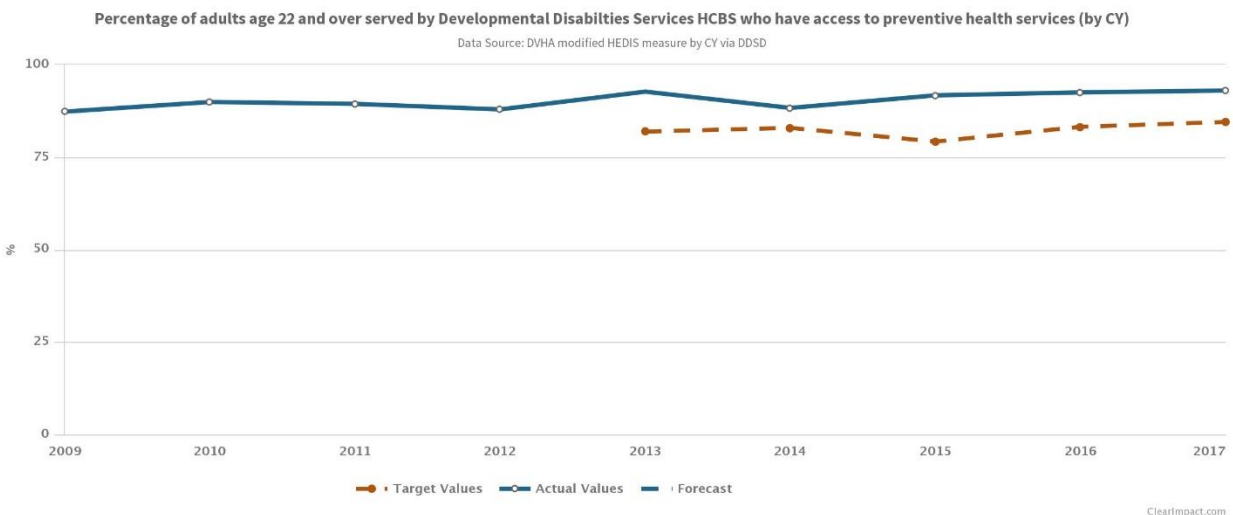
The complete NCI reports can be found [here](#).

Developmental Disabilities Services Division

Employment Services: Our employment services have been recognized as a national model with a 47% increase in the number of people supported on the job over the past ten-year period. These Vermonters earned total wages of over \$4.5 million in FY 18. The employment rate for all working age adults with developmental disabilities who receive HCBS continues to be sustained at a high rate of 47% (FY 17). This compares favorably to the national average of individuals participating in ID/DD employment services estimated to be 18.6% in 2015 (State Data National Report on Employment Services and Outcomes, 2016.)

Post-Secondary Education Initiative: More Vermonters with disabilities are going on to post-secondary education than ever before and our Think College Vermont, College Steps and SUCCEED programs are helping them get there. Participating colleges include Castleton University, Northern Vermont University – Johnson and Lyndon Campuses, Southern Vermont College and University of Vermont. For the 2018 academic year, the employment rate for those participating in the Post-Secondary Education Initiative was 100%.

Preventative Health Services: Vermonters age 22 and over with ID/DD who receive Home and Community-Based Services have high rate of access to quality health care. Ninety-three percent (93%) had access to preventive health services in CY 2017. This compares favorably to an 85% statewide average for the general Medicaid population. The expectation that adults with ID/DD receive an annual physical exam helps ensure that individuals have a visit with a medical professional to review chronic conditions and other health issues.



Developmental Disabilities Services Division – Post-Secondary Education Initiative

Program Overview

The Developmental Disabilities Services Division (DDSD) and community partners have collaborated for ten years to create a post-secondary career-oriented college program located at Vermont colleges and provided by three post-secondary support programs. The goal of all programs is successful employment in viable careers at graduation or soon after.

Three post-secondary education programs – Think College Vermont at the University of Vermont, SUCCEED at Howard Center and College Steps – improve employment outcomes through course work and internships geared toward specific careers. This model promotes campus inclusion with older students serving as peer mentors to students with developmental disabilities (DD). Facilitating course selections based on vocational interests and independent living skill training has significantly increased self-sufficiency and employment outcomes among these young graduates. Students graduate with a 2-year *Certificate of Higher Learning* conferred by their colleges in their areas of vocational concentration.

The support programs that are part of the Post-Secondary Education Initiative (PSEI) share a similar approach to integrate youth into post-secondary coursework and extracurricular activities at their collaborating colleges. SUCCEED of the HowardCenter is a residential program, providing a continuum of skill development to help graduates move into their own apartments in the Burlington area. PSEI programs rely on close working relationships with Northern Vermont University at Lyndon and Johnson, Castleton University, University of Vermont and Southern Vermont College, all dedicated to assuring that the students with developmental disabilities are authentically included in campus life.

Staff and Partners

Designated staff from DDSD, the Division of Vocational Rehabilitation (DVR) and the Agency of Education (AOE) make up a State team to support the work of the PSEI programs. This team meets with programs to improve, sustain, and expand services for transition age youth. The PSEI Consortium, made up of representatives

Developmental Disabilities Services Division – Post-Secondary Education Initiative

from DDSD, Division of Vocational Rehabilitation, Agency on Education, Vermont Family Network, PSEI programs and DD services providers, meet regularly to share resources and to serve as a unified service delivery system that educates the general public about options for youth.

Recent Developments and Accomplishments

A new residential model implemented in 2018 by Rutland Community Access Program of Rutland Mental Health Services and College Steps provides student housing and teaches independent living on the edge of Castleton University.

Success Story

A Journey Underway: A close collaboration between College Steps and Lamoille County Mental Health Services (LCMHS) helped Eric successfully graduate from Northern University with the skills he needed to be self-sufficient at home and in his career. College Steps helped Eric build a college plan that would lead him to greater independence. When seeking an internship, Waterbury's Stowe Street Cafe welcomed him to work in the kitchen and the front of the café. College Steps, the café owner, and Eric communicated closely to shape ways for him to learn a variety of duties as well as the soft transferable skills all employees need, regardless of where they work.

Graduation from Northern University provided Eric with a two-year *Certificate of Higher Learning*. Eric was able to organize his own job search propelled by the confidence, social skills and self-direction he developed in college. He found employment at the Green Goddess Café in Stowe. Eric's adjustment to this new environment was challenging. Busy lunch rushes and large crowds overwhelmed him, but Eric's determination prevailed. His comfort increased over time, bringing forth a competent and valued team member.

Eric's College Steps internship combined with independent living and work site supports from LCMHS contributed to his success. However, Eric's desire to achieve his goals, and his resolute determination to do well in college and in his

Developmental Disabilities Services Division – Post-Secondary Education Initiative

career, are what lead to the café owners calling him hard working and glad to call him their employee.

Eric went on to enroll in Community College of Vermont (CCV) while maintaining his job at the Green Goddess. He completed his college studies at CCV while learning how to live independently in his own apartment. The culmination of this young man's hard work, perseverance, and long-term vision will see him graduate from CCV this spring with a well-deserved Associate degree!

Eric's response to his success? *"You can't begin to fathom how much hard work, perseverance, and a little help from the people around you can really pay off in the end... because in the end, the payoff from overcoming your own obstacles leading up to this point weighs as much as all the gold in Fort Knox."*

Future Directions

The PSEI Consortium continues to work together to inform high school students, educators and families about the benefits of enrolling in a DDS PSEI program. The primary focus for the next few years will be to stabilize and sustain the existing programs through student recruitment and process improvements.

Results

DDSD assesses quality through performance measures and site monitoring of each PSEI program at the start and end of each school year.

2018 Performance Measures:

- 100% combined employment rate of the three PSEI programs upon completion of the program.
- 13 college graduates became employed within 4 months of graduation out of a total of 13 graduates.
- 62% of students were employed while attending college.
- \$10.87 average hourly wage range of employed graduates.
- Two PSEI program graduates matriculated into Community College of Vermont and University of Vermont degree programs.

DD Services Division – Supported Decision-Making

Program Overview

The expected outcomes for Supported Decision-Making (SDM) are to:

- Increase self-determination and access to needed supports for older adults and people with disabilities; and
- Reduce over-reliance on guardianship by empowering older adults and people with disabilities to make their own decisions and direct their own lives.

Staff and Partners

Many individuals and organizations have been part of the SDM effort. In addition to staff from the Office of Public Guardian, other partners include the Agency of Education, representatives from the court system, community provider agencies and advocacy organizations.

Recent Developments and Accomplishments

The Office of Public Guardian:

- Collaborated with the Disability Law Project, Green Mountain Self-Advocates, Agency of Education and the Vermont Family Network to create multiple informational packets about SDM for courts, educators and students and families.
- Provided training about SDM to Developmental Disabilities Service providers, families, self-advocates, Probate Court Judges and State’s Attorneys.
- Finalized new “Guidelines for Guardianship Evaluations” to incorporate the SDM philosophy and approach.
- Created the initial draft of a decision-making assessment.

Future Directions

The Office of Public Guardian will continue to:

- Disseminate informational packets to a broader audience.
- Provide training to evaluators on the new guidelines for guardianship evaluations.
- Begin to pilot the use of the decision-making assessment.

Developmental Disabilities Services Division – Youth Transition Programs

Program Overview

The Developmental Disabilities Services Division (DDSD) and community partners collaborate to help transition age youth enter the work force and experience successful transitions into adulthood. Supported education and supported job training services are located statewide to support young adults age 18 to 30 with developmental disabilities (DD) in their transitions from school to work or higher levels of education. Services include specialized career training, customized job placement, independent living skills training, experiential internships, and the Post-Secondary Education Initiative (PSEI). Collaborative partnerships between DDSD, provider agencies and a host of community partners support several options in youth transition services that help promote independent living skills and employment in the Vermont workforce.

- **Supported Employment (SE)** services offer customized job development, placement, training and job site supports, resulting in competitive employment. Developmental Disabilities Service agencies' SE programs support youth with a range of abilities to enter Vermont's workforce. Today, almost half of all adults receiving developmental disabilities services in Vermont are employed in the regular workforce, paid at minimum wage or higher. Supported Employment services help to locate meaningful job matches, assist the employee to learn the job, and provide long term job retention services with the employer and the employee.
- **Business based training** provided by the Project SEARCH program offers training in business settings which teach technical skills resulting in competitive employment. Project SEARCH provides technical training for students in their last year of high school and young adults through three internships located in host businesses: Dartmouth Hitchcock Medical Center, Rutland Regional Medical Center, The Edge Fitness Center and the University of Vermont's Medical Center. Host businesses oversee skill development and provide direct feedback to students as they rotate through internships. The engagement of these host companies has resulted in employment for most of the students who graduate from the program.

Developmental Disabilities Services Division – Youth Transition Programs

Project SEARCH is sponsored by DAIL, the Agency of Education (AOE), local school districts, three host businesses and three provider agencies: HowardCenter, Lincoln Street Incorporated and Rutland Mental Health Services.

- **Post-Secondary Education Initiative (PSEI)** offers campus-based supports to youth to earn Certificates of Higher Learning in a career area of their choosing and college degrees resulting in competitive employment. PSEI consists of three post-secondary education support programs that offer direct supports at college campuses provided by student mentors. Graduation from a PSEI program results in meaningful employment opportunities and intentional career paths.
- **Transitional Living programs** offer youth the skills needed to navigate their communities, gain employment and move into their own apartments over the course of two to three years. Avenue 7 in Burlington is an example of a transitional housing model for youth. The residents of the program share the goal of gaining the necessary independent living skills such as budgeting, social skills, decision making, employment, cooking and cleaning to successfully transition into their own apartments.

Staff and Partners

Designated staff from DDS, the Division of Vocational Rehabilitation (DVR) and AOE make up a State team to support the work of the PSEI programs. This team meets with programs to improve, sustain, and expand services for transition age youth. The State team along with Vermont Family Network, PSEI programs and DD services providers meet quarterly as the PSE Consortium to share resources and to serve as a unified service delivery system that educates the general public about options for youth.

Recent Developments and Accomplishments

The Rutland Regional Medical Center and Dartmouth Hitchcock Medical Center hired a total of six PSEI graduates in departments such as Perioperative, Food Service and Linens as a result of skills acquired during internship rotations.

Developmental Disabilities Services Division – Youth Transition Programs

Graduates also secured employment at other companies including Advantage Solutions, Champlain Chocolates, Woodstock Inn, and Kendall at Hanover.

Future Directions

Expansion of an additional Project SEARCH site is under consideration.

Results

DDSD assesses quality through performance measures and site monitoring of each Project SEARCH program at the start and end of each school year.

2018 Performance Measures:

- 90% statewide employment rate for Project SEARCH graduates.

Division of Licensing and Protection

Division Philosophy

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

Division Overview

The Division of Licensing and Protection (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: <http://dlp.vermont.gov/survey-cert>
- 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: <http://dlp.vermont.gov/aps/statistical-info>

Staff and Partners

S&C has 21 employees, 18 of whom are Registered Nurses who are federally trained and certified to perform investigations and surveys, including 15 who are home based and travel throughout the state to investigate complaints and to perform recurring, scheduled surveys. S&C follows federal regulations and procedures developed by the Centers for Medicare and Medicaid Services (CMS).

APS has 16 employees, including 11 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.

Recent Developments and Accomplishments

Act 125 of 2018 transferred the review process for Nursing Home Transfers of Ownership from the Green Mountain Care Board to the Agency of Human Services. As a result, S&C has taken on considerable new duties when there is a change in ownership of a nursing home. S&C is involved with completing reviews for current changes in ownership as well as establishing the process for future

Division of Licensing and Protection

reviews, which will enhance current practices to ensure Vermont's nursing homes provide sustainable and quality care for Vermonters.

Vermont APS has followed the national trend with across the board increases in workload. The number of reports in SFY18 increased by 15% from SFY17, resulting in a 31% increase in the number of investigations assigned. As a result of the increase in investigations assigned, the average daily caseload per investigator increased by 27% from the previous year to 25 per investigator. This also resulted in an 11% increase in the number of individuals placed on the Adult Abuse Registry.

Future Directions

Both APS and S&C continue to adapt to changing environments. For APS, the increases in reports and investigations stress a system that turned 40 years old last year. Since that time, Vermont demographics and service delivery have changed dramatically. When the statute was first passed, most of the care provided to vulnerable adults was provided in institutional settings. Now, many more vulnerable adults are receiving care in home and community-based settings, provided through a range of different service providers and/or by family caregivers. APS is also seeing changes in the nature of complaints; most notably, an increasing number of complaints now involve financial exploitation. Over the next year, we plan to look at whether any changes should be made to the program to ensure that APS is able to achieve its goal to protect vulnerable adults whose health or welfare may be adversely affected through abuse, neglect or exploitation. This may lead to proposed changes in the APS statute at 33 V.S.A. Chapter 69.

For S&C, statutory and regulatory updates need to be made to recognize and address changes in the long-term care industry - moving away from locally owned facilities to larger, consolidated businesses that operate multiple types of facilities in multiple states.

Programs and Services

Both S&C and APS work to protect and serve vulnerable adults. Vulnerable adults are 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

Division of Licensing and Protection

diminished capacity to care for themselves, or a diminished capacity to protect themselves from maltreatment.

- S&C conducts scheduled 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, up to revoking the license to operate the facility.
- 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 organizations that serve children and vulnerable adults to check the backgrounds of employees and volunteers.

Results

- S&C conducted 307 onsite investigations of health care organizations, a 2.5% reduction from the previous year.
- S&C completed 100% of federal surveys on time.
- APS received 3,783 reports alleging abuse, neglect, or exploitation of vulnerable adults, an increase of 15%.
- APS initiated 1,112 investigations from these reports, an increase of 31%.
- APS completed 792 investigations, an increase of 16%.
- APS placed 88 individuals on the Adult Abuse Registry, an increase of 11%.

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 employment and to help employers recruit, train and retain employees with disabilities. Consumer 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 that end, DVR plays an important facilitating role in Creative Workforce Solutions (CWS), an Agency of Human Services (AHS) initiative that builds on DVR's initial employer outreach work.

Division Overview

The Division of Vocational Rehabilitation serves people with disabilities in Vermont who face barriers to employment. We help DVR consumers figure out what types of employment will work for them through careful assessment, counseling and guidance from our expert staff. We capitalize on our extensive networks in the employer community to create job opportunities and make good placements that match employer needs with jobseeker skills, and help employers retain staff with disabilities. We use our financial resources within Vermont communities to support our consumers as they transition to stable employment, and our employers as they try out new workers.

Staff and Partners

DVR believes in collaborating with other service providers to reach people facing the greatest challenges to employment. Through collaboration, DVR has created innovative partnerships to serve youth, offenders, veterans, people receiving public benefits, and those who need ongoing support in order to work.

Recent Developments and Accomplishments

Celebrating the New Era of AWARE: The past year has been a truly transformative one for DVR's information infrastructure. Our eighteen-month implementation project with Alliance Enterprises culminated in the launch in September 2017 of Vermont's AWARE Case Management System. It felt like the end of a marathon to those involved in getting the project to completion; they win the laurels for finishing on time and under-budget! But it was just the start of an exciting and sometimes arduous new journey for our staff as they shifted from a chaotic patchwork of simple data systems to a sophisticated, integrated, and modern web-based system.

Division of Vocational Rehabilitation

AWARE's introduction to Vermont coincided with another massive change affecting DVR agencies across the nation: The Workforce Innovation and Opportunity Act (WIOA). Passed by Congress in 2014, WIOA completely changed how the performance of DVR agencies is measured, nearly doubling the number of data elements collected while quadrupling the frequency of reporting. Implementing AWARE just before the first new WIO federal reporting in November 2017 was fortunate. Thanks to AWARE and the huge effort of our staff to enter many newly required data elements, we were able to meet our WIOA reporting deadlines. Many other DVR agencies across the nation did not.

It has been a steep learning curve for all of us, but AWARE is well worth the effort. Case documentation and narratives are now in one place, where all members of the team (VR counselors, employment staff, benefits counselors, supervisors, and more) can share their conversations and activities in a secure and organized way. System administrators and case managers can exercise refined control over who can see a case, access information, or perform actions in a case through sophisticated security parameters and business logic that greatly improves data quality and timeliness and reduces audit risk. Automated interfaces with the state's finance system and the CWS Salesforce Employer Outreach database have eliminated duplicative data entry and promise even more power to integrate data. The wealth of new data elements has provided a mountain of information for data analysts and managers to mine for nuggets of insight into our customers, the services we provide them, our impact on their outcomes, and our practices as teams striving to support our customers' career goals.

Most importantly, AWARE makes it possible to align our work and our data collection with WIOA's shift towards a focus on careers, as well as the Rehabilitation Services Administration's (RSA) emphasis on Pre-Employment Transition Services for youth in school.

Creating Career Pathways for DVR Consumers: DVR launched a major Careers Initiative in 2017, focusing staff on assisting our customers in pursuing a career. Components include a realignment of how we allocate our resources, modifications to the rehabilitation process, increased use of vocational assessment as a career counseling tool, the creation of a new dashboard to measure leading and lagging indicators and implementing Progressive Education. Progressive Education is a

Division of Vocational Rehabilitation

continuum of education and training experiences that address customers' barriers to employment and engage them in credential attainment and skills gains.

As an organization we have been focused on the paradigm shift to career development with managers, supervisors and line staff. All staff have been involved in the revision to our mission, vision and guiding principles, supporting the shift from jobs to careers. Each of our 12 district offices has chosen a pilot project to support the Careers Initiative. Front line staff have ownership of their projects. Staff are excited and motivated to see their projects to successful completion. We expect to obtain rich and diverse information on what is effective in helping people develop their own career pathways.

The DVR Implementation Team has created work groups to address a variety of topics, including revamping our orientation program for new referrals. All the district leadership teams have taken the White Belt Training on process improvement, and a work group is leading an effort to 'process-map' all steps in the rehabilitation process to identify ways that we can be more efficient and effective. Another work group is focused on how to support a customer to develop both a short-term and a long-term vocational goal - the right now job to pay the bills, and a career goal over time.

OCS and JFI: DVR partners with the Office of Child Support (OCS) on the problem of non-payment of child support via the Work4Kids program. Many people with a child support order face employment barrier – often disabilities – which prevent them from meeting their child support obligations. EAP counselors help identify these barriers, as well as treatment options and resources. People referred to Work4Kids have increased their child support payments between five and seven-fold. The success of the Work4Kids model formed the basis of Jobs for Independence (JFI). Working with Supplemental Nutrition and Assistance Program (SNAP) recipients as part of a multi-million-dollar federal grant with the Department for Children and Families (DCF) and the Vermont Department of Labor (VDOL), JFI focuses on supports for people who are experiencing homelessness, substance use/addiction, mental illness, and/or Corrections involvement.

The State as a Model Employer: On March 23, 2016, Governor Shumlin signed an Executive Order establishing a “Disability Employment Working Group” comprised of representatives from DAIL, the Vermont Department of Human Resources, and members of the Governor’s Workforce Equity and Diversity Committee. The group was charged with developing a model to help State agencies recruit, train and retain

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workers with disabilities, and to help meet the needs of Vermont’s “graying” workforce. In the past year, CWS Business Account Managers have been reaching out to hiring managers in state agencies including VTRANS, DMV, Forest & Parks, BGS, Judiciary/Courts, Department of Liquor Control and others. Many agencies are offering informational interviews, job shadows and, other preparatory opportunities, and several people have been hired as a result. An initial MOU has been approved to facilitate On-the-Job Training arrangements with VTRANS, which will be adapted for use with other agencies as the need arises. A meeting with HR Field Staff is also being planned for early 2019.

“Spirit of the ADA” Awards: During National Disability Employment Awareness Month, The Governor’s Committee on the Employment of People with Disabilities (GCEPD) selects Vermont businesses who excel in recruiting, employing and retaining Vermonters with disabilities. In 2018, the GCEPD opened the nominations to the public; approximately 40 nominations were reviewed, and 19 award winners received the Spirit of the ADA Award. Award winners are recognized at on-site award presentations attended by the nominator(s), legislators, community members, and GCEPD members, and often receive exposure through media coverage of the events. American Consulting Engineers and Surveyors in Williamstown was nominated by one of its employees. Governor Phil Scott attended the ceremony. The Partnership Award, The State Agency Award and The Retention Award are new award categories developed this year that will continue.

Pre-Employment Transition Services: Through strong working relationships with the Agency of Education and local high schools, students are being introduced to DVR services as early as age 14. District-based Interagency Core Transition Teams support this collaboration, meeting to share local resources and identify projects that would benefit students, families, and professionals working with youth. The 4th annual Interagency Core Teams Collaboration Event brought together approximately 250 professionals and community members to network, learn, and collaborate.

Youth Advisory Council: In collaboration with several state agencies and community partners, DVR initiated a Youth Advisory Council this fall. The group is comprised of youth and young adults with disabilities, ages 15 to 27, who expressed interest in participating in both leadership training and opportunities to impact how Vermont prepares students with disabilities for life after high school. Members connect with other students in Vermont, advocate for youth resources, and lead their peers while

Division of Vocational Rehabilitation

providing community service. The council will also be planning an annual statewide Youth Summit that focuses on topics and resources specific to the needs of youth and young adults.

Future Directions

Congress passed the Workforce Innovation and Opportunity Act (WIOA) in 2014 and introduced new Common Performance Measures (CPM). The measures are focused on job retention, median earnings, credential attainment, measurable skills gains, and employer satisfaction. Prior to WIOA, the performance of DVR had been primarily measured on how many people the program assisted in obtaining employment. This shift from quantitative to qualitative performance measures requires a major paradigm shift in our service delivery system.

As our new dashboard is created, we will develop scorecards that tell the story about our new performance measures. We are very hopeful that our new approach to serving customers will yield increased job retention and higher wages because consumers are obtaining new skills, credentials and industry recognized certifications. We are convinced these new efforts will result in customers having better jobs that better match their interests, skills, and values.

Programs and Services

Assistive Technology Program (VATP)
 Benefits Counseling
 Creative Workforce Solutions (CWS)
 Developmental Services and Jump on Board for Success (JOBS)
 Invest EAP – Employee Assistance Program (EAP)
 Jobs for Independence (JFI)
 Linking Learning to Careers (LLC)
 Mature Worker Program

Work4Kids
 Progressive Employment Program
 Rehabilitation Counseling for the Deaf and Hard of Hearing (RCD)
 Supported Employment (SE)
 Transition (high-school aged youth and young adults)
 Vermont AT Reuse Project
 Vermont Senior Community Service Employment Program (SCSEP)

Vocational Rehabilitation Services: DVR services to 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 DVR counselor, who helps to 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

Division of Vocational Rehabilitation

guidance, job training, and job placement provided by DVR staff and partners are enhanced with a range of purchased services and supports.

Placement Services: DVR counselors benefit from dedicated Employment Consultants who provide job development, job placement, and workplace supports to help people find and keep jobs. DVR has longstanding partnerships with Designated and Specialized Services Agencies (DAs and SSAs) to provide supported employment services to people with developmental disabilities. DVR also has an ongoing partnership with the Vermont Association of Business, Industry, and Rehabilitation (VABIR) to provide employment services to DVR customers.

Results

How many people we serve: 8,393 Individuals served; 3,563 of these are youth under age 22 at time of entry into DVR services.

How well we serve them:

Our customer survey is conducted approximately every two years. Our 2016 customer survey results show that:

- 97% felt welcomed when they went to DVR for services;
- 95% would tell their friends with disabilities to visit DVR for help with employment;
- 94% indicate it is easy to access vocational rehabilitation services;
- 88% are very satisfied or satisfied with the services provided by DVR;
- 97% indicate that DVR staff treated them with dignity and respect;
- 81% said DVR helped them achieve their job goal.

How people are better off:

901 individuals closed their DVR case in SFY 2018 with successful employment. 33% had a wage above 125% of the minimum wage.

The WIOA legislation mandated that DVR agencies shift their priorities to providing “Pre-Employment Transition Services” (Pre-ETS) to students with disabilities in school, even prior to the students officially applying for DVR services. WIOA also required that DVR agencies reserve 15% of their grant awards for these Pre-ETS services. This new emphasis on introducing high school students to DVR’s career counseling, work-based learning, training, and support services should yield better career outcomes in the future. In the meantime, our primary task has been to reorient the focus of our staff and services to ensure that we are meeting this new federal mandate.

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Many States have struggled to meet the new federal Pre-ETS expenditure requirements and expand services for students. As a result, these states are at risk of being out of compliance with the federal mandate and could potentially lose federal funding. Vermont has met the 15% Pre-ETS funding requirement RSA every year since the requirement was added:

In 2015, only 25 out of 78 DVR agencies nationwide met this requirement

In 2016 and 2017, only 32 out of 78 DVR agencies met this requirement

DVR has been very successful in expanding services for students with disabilities. In SFY 18, DVR served 1,555 high school students statewide, which is approximately 20% of all high school students on an IEP or 504 plans. To facilitate effective services, DVR has developed strong relationships with the schools. In FY 18, DVR received referrals from and served students in all 59 Supervisory Unions.

DVR has also successfully expanded our services to youth overall, and the percentage of people served by DVR who were under age 22 at entry into services has grown:

26% in SFY 2014

42% in SFY 2018

Providing work-based learning experiences in real employment settings is one of the most effective ways to prepare youth for long term success. Therefore, DVR has invested more resources in providing these opportunities for youth. The percentage of youth served by DVR who engaged in work-based learning experiences with real employers prior to age 22 has increased since WIOA:

15% of the youth served on average in SFY 2011-2014 (pre-WIOA)

23% of the youth served on average in SFY 2015-2018 (post-WIOA)

Next year DVR will unveil new dashboard measures that show our performance under WIOA's new Common Performance Measures (CPMs). These CPMs have significant 'lag time' — requiring a full year (or longer) after a person exits DVR services before the measure can be produced — so we have adopted 'leading' measures to track five interventions that we believe lead to good outcomes, and five corresponding outcome measures that have less 'lag time' than the WIOA CPMs:

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<i>Lead Measure (the Intervention)</i>	<i>Lag Measure (the Outcome)</i>
Use of Assessment Leads to Better Career Choices and Employment Outcomes	
<i>How many cases have had at least one assessment done?</i>	<i>What is the difference in rate of closure with successful employment for cases with assessment done and without?</i>
A Team Approach Strengthens the Foundation Supporting Customer Engagement in Completing Goal	
<i>How many cases have documented activities by staff other than the case lead?</i>	<i>What is the difference in case completion rate for cases with team involvement and without?</i>
Career-Focused Education and Training Improves Job Quality, Engagement, and Earnings	
<i>How many cases engaged in career-preparatory training or post-secondary education?</i>	<i>What is the difference in median earnings in the first post-exit quarter for those who engaged in training and those who did not?</i>
Counseling Emphasis on Career-Focused Plans Results in Higher Wage Employment	
<i>For the latest active plan for open cases in the period, how many had a goal associated with higher wage occupations?</i>	<i>What is the difference in hourly wage greater than 125% of minimum wage for cases closed with successful employment with career-focused goals and without?</i>
Continued Encouragement and Support After Closure Results in Job Retention and Career Advancement	
<i>For cases closed from plan status in the period, how many received the minimum expected follow-up contacts?</i>	<i>What is the difference in employment rate for cases with post-exit follow-up and without?</i>

Division of Vocational Rehabilitation – Assistive Technology

Program Overview

The Assistive Technology (AT) Program works to support full access and integration for Vermonters with disabilities and aging-related needs, in education, work and their communities. We provide creative tools and strategies that help people live, learn, work, and play. Staff support consumers and organizations by providing information and assistance, equipment demonstrations and loans, technical assistance, funding resources as well as consultations for VR consumers.

Staff and Partners

DAIL staff include one Program Director and one Service Coordinator who work in partnership with the Center on Disability and Community Inclusion (CDCI) at the University of Vermont. CDCI operates three regional AT Tryout Centers, each staffed by an AT Specialist serving Vermonters across the state. Other partners include:

- Linking Learning to Careers (LLC)
- Vermont Center for Independent Living (VCIL)
- Area Agencies on Aging (AAA)
- UVM Medical Center Fanny Allen campus
- Opportunities Credit Union
- Vermont Telecommunication Equipment Distribution Program
- Vermont Association for the Blind and Visually Impaired (DBVI)
- Vermont Adaptive Ski and Sports
- Children with Special Health Needs
- Vermont Communication Task Force

Recent Developments and Accomplishments

- Staff worked with DAIL's No Wrong Door Grant program and Vermont's Area Agencies on Aging (AAA) to train AAA case managers on AT equipment in an effort to expose more older Vermonters to AT.

Future Directions

- Program staff are working with the UVM Medical Center Fanny Allen campus to develop a training for clinical staff on AT devices that they will be using with their patients.

Results

Information and assistance:

- 759 individuals were given information and assistance related to AT devices or services
- 174 individuals were given information and assistance related to AT funding

Division of Vocational Rehabilitation – Assistive Technology

Device Demonstrations:

- 793 demonstrations

Device Loans:

- 750 devices loaned out

Outreach:

- 49 outreach events and trainings for approximately 2,900 participants

Success Stories (pseudonyms used):

Sarah and her husband are dairy farmers. Sarah was recently diagnosed with Alzheimer's. She did all of the bookkeeping for the farm, but as her disease progressed, she couldn't continue to do that work; she couldn't keep the days straight and she was missing payments. She would also get confused about who was calling her on the phone. Her husband wanted a solution for his wife so that she could easily call him and her children since she couldn't figure out how to use her cell phone anymore. The AT Program staff researched a simplified WIFI based picture phone that enabled Sally to call a select number of people. This also offered games to help her stay occupied since she no longer was able to use the computer. The AT Program worked with the Equipment Distribution Program at the Vermont Center for Independent Living to pay for the phone.

A special educator contacted the AT Program because her student was going to be in the school play and he had a lot of lines to learn. This student has cerebral palsy and can talk, but some people have difficulty understanding his speech. AT Program staff made arrangements for the student to borrow a tablet with a communication application; after he types a line, he presses a button on the tablet and the device speaks his line out loud. He also borrowed a speech amplifier for things he wants to say himself. In addition, AT Program staff are working with the student to explore a solution for him to better participate in Spanish class.

Division of Vocational Rehabilitation – Benefits Counseling Program

Program Overview

DVR Benefits Counselors work with individuals receiving state and federal assistance (health care, 3SquaresVT, SSI, SSDI). The goal of the program is to provide accurate information to people interested in going to work so they can make informed decisions about their benefits as they enter or reenter the workforce.

DVR Benefits Counselors support consumers by:

- Explaining the impacts of work and wages on an individual's benefits;
- Helping people plan and prepare for employment and financial independence;
- Helping people take advantage of work incentives that will increase the amount of money available to them;
- Telling people about programs that may allow them to keep necessary cash or health benefits when they go to work or school;
- Explaining benefits notices received from the U.S. Social Security Administration (SSA) or the Vermont Economic Services Division (ESD); and
- Teaching people how to report their earnings to SSA and ESD.

Staff and Partners

Four DVR Benefits Counselors provide Work Incentives counseling to Vermonters through remote counseling, in-person meetings in one of twelve regional DVR offices, or through the DVR Benefits Counselor Helpline. The program is supported by one Program Coordinator. All staff are Certified Work Incentives Counselors accredited through The Virginia Commonwealth University's National Training and Data Center.

To provide Work Incentives counseling, Benefits Counselors partner with the Rutland, Montpelier, and Burlington Social Security Administration offices, Designated Agencies, DVR counselors, Division for Blind & Visually Impaired counselors, the Economic Services Division, Vermont Health Connect, Green Mountain Care, Vermont Center for Independent Living, and the Vermont State Housing Authority.

Division of Vocational Rehabilitation – Benefits Counseling Program

Recent Developments and Accomplishments

The Vermont DVR Benefits Counseling Program is one of eight states in the country participating in the Promoting Opportunities Demonstration (POD). POD will test simplified work incentives and a benefit offset in the Social Security Disability Insurance (SSDI) program to determine the effects on outcomes such as earnings, employment, and benefit payments. In this five-year demonstration, benefits are reduced by \$1 for every \$2 earned above the POD threshold, which is the greater of the current Trial Work Period level or the participant's itemized impairment-related work expenses (up to Substantial Gainful Activity). In year one, the DVR Benefits counselors enrolled approximately 100 Vermonters in POD. This project is an opportunity for these and other Vermonters to increase their earnings potential.

Results

Over 33,000 people of working age receive Social Security Disability benefits (SSI/SSDI) in the state of Vermont. According to the Joint Fiscal Office, a higher proportion of younger people are receiving SSI/SSDI in Vermont than in most other states, meaning more young people are out of the workforce. Because of the complex work rules associated with the SSI/SSDI programs, many beneficiaries do not work or minimize their earnings because they fear what might happen to their benefits if they go to work or increase their earnings. Benefits counseling is a proven strategy to help beneficiaries negotiate the complex Social Security return to work rules. Research from Vermont published in the Journal of Rehabilitation showed that beneficiaries who received benefits counseling were more likely to work, and to work at higher levels, than those who did not receive benefits counseling.

<https://www.questia.com/library/journal/1G1-118106214/the-impact-of-specialized-benefits-counseling-services>

<https://www.questia.com/library/journal/1G1-256602885/effects-on-beneficiary-employment-and-earnings-of>

Division of Vocational Rehabilitation – Creative Workforce Solutions

Program Overview

Creative Workforce Solutions (CWS) is an initiative of the Agency of Human Services (AHS) that offers a consolidated and coordinated approach to employment services and provides equal access to meaningful work in the competitive job market. CWS offers the business community a simplified staffing service that helps them access qualified candidates to meet their staffing needs. All services are free to businesses in Vermont, New Hampshire, Massachusetts, and New York.

CWS Employment Consultants and Business Account Managers (BAMs) are available to employers statewide to review business needs, offer qualified candidates, and develop training plans for job candidates. The goal of CWS is to provide a streamlined recruitment and retention service for Vermont businesses while also offering training and support to Vermonters who find entering or re-entering the workforce challenging.

Staff and Partners

Creative Workforce Solutions is staffed by 11 BAMs covering all 12 AHS districts. BAMs convene local CWS Employment Teams where programs can share business contacts, problem-solve difficult cases, and hear directly from hiring managers. In addition to the BAMs, CWS also includes Employment Consultants who are contracted through various organizations including Designated Agencies, the Vermont Association of Business, Industry & Rehabilitation (VABIR), the Vermont Division for the Blind and Visually Impaired (DBVI), and a variety of specialized employment programs.

As an initiative of the Agency of Human Services, Creative Workforce Solutions represents candidates and individuals served by the following partners:

- Economic Services Division, Reach Up
- Department of Corrections
- Department of Mental Health
- Department of Disabilities, Aging, and Independent Living
- Vermont Veterans
- New Americans/Refugees
- Vermont’s Recovery Center Network
- Office of Child Support
- At-risk youth service organizations

Recent Developments and Accomplishments

The State as a Model Employer: On March 23, 2016, Governor Shumlin signed an Executive Order establishing a “Disability Employment Working Group” comprised of representatives from DAIL, the Department of Human Resources, and members of the Governor’s Workforce Equity and Diversity Committee. They were charged

Division of Vocational Rehabilitation – Creative Workforce Solutions

with developing a model to help state agencies recruit, train and retain workers with disabilities and to meet the needs of Vermont’s “graying” workforce. In 2017, CWS piloted the model in the Barre-Berlin-Montpelier corridor before launching statewide, and information sessions were held for 10 groups of hiring managers and supervisors from across the state. In SFY 2018, the number of activities with state agencies has increased considerably. Informational Interviews, Job Shadows, Work Experiences and direct hires have all been occurring across state government and throughout the state.

Future Directions

Creative Workforce Solutions has ongoing relationships with over 3,000 businesses across Vermont and adjoining counties in New York, Massachusetts, and New Hampshire. Business Account Managers are now working with their local communities to develop training “pipelines” into various sectors of the economy. Recent training programs have been established to prepare individuals for careers in:

- Healthcare
- Commercial driving
- State Government
- Hospitality
- Customer service/cashier
- Food preparation and delivery

We see this demand-driven model as the key to meeting the needs of employers who are struggling to find workers. In developing training programs, the starting point is always with the businesses in a community, the ultimate “end users” of our employment services. By taking time to understand the staffing needs of businesses, we can better craft trainings that meet their needs while also offering the skill development that may be lacking for job candidates. Through collaboration with adult education programs, training providers, Tech Centers and other community partners, CWS can build customized training that aligns with higher-wage jobs in a wide range of economic sectors.

Results

All CWS business engagement activities are recorded in Salesforce. The three elements below were used to track the statewide business outreach activities of the CWS employment teams in SFY 2018 (July 2017 through June 2018):

- New Contacts: 1,680 Contacts identified in 1,214 businesses
- New Opportunities identified: 4,663 opportunities identified in 1,031 businesses
- Activities with business: 5,887 activities recorded in 1,796 businesses

Division of Vocational Rehabilitation – Employee Assistance Program

Program Overview

Invest EAP, the Division of Vocational Rehabilitation's (DVR) Employee Assistance Program (EAP), provides short-term, solution-focused counseling, resources and referrals to approximately 160,000 eligible members in over 200 Vermont-based organizations. EAP services contribute to the creation of healthy and productive Vermont workplaces. EAP ensures that individuals with mental health, financial, legal and medical challenges receive the support they need to maintain successful employment. The program greatly enhances DVR's outreach to and relationships with the state's employers.

Staff and Partners

The EAP program is currently operated by 15 DAIL employees who work in close collaboration with 5 staff from the Vermont Association of Business Industry and Rehabilitation and over 100 private clinicians in a network managed by the EAP.

The EAP collaborates closely with numerous key partners, including:

- The Vermont League of Cities and Towns
- The Vermont Education and Health Initiative
- State of Vermont Department of Human Resources
- University of Vermont Human Resources
- Blue Cross Blue Shield of Vermont
- The Human Resources departments of numerous private sector employers, including major hospitals
- The Vermont Farm Health Task Force
- The Office of Child Support
- The Vermont Department for Children and Families

Recent Developments and Accomplishments

The EAP continues to expand with the addition of almost two dozen Vermont places of employment and well over 1,000 newly covered employees this year. Our EAPFirst initiative provides a specialty EAP for Vermont's first responder community. Working with a core team of EAP clinicians, the EAP has trained groups of police, fire and rescue personnel in peer support. Invest EAP works in close collaboration with Green Mountain Critical Incident Stress Management (CISM) to provide critical incident stress debriefings to first responders following traumatic events. Many first responders have also accessed EAP individual counseling services this year.

Division of Vocational Rehabilitation – Employee Assistance Program

Invest EAP worked with an independent evaluator who conducted a more in-depth analysis of our Vermont Healthcare Innovation Projects that employed Behavioral Health and Screening and Intervention (BSI) in conjunction with EAP. The analysis found that BSI/EAP interventions vastly improved health outcomes and reduced projected healthcare expenditures of project participants.

Future Directions

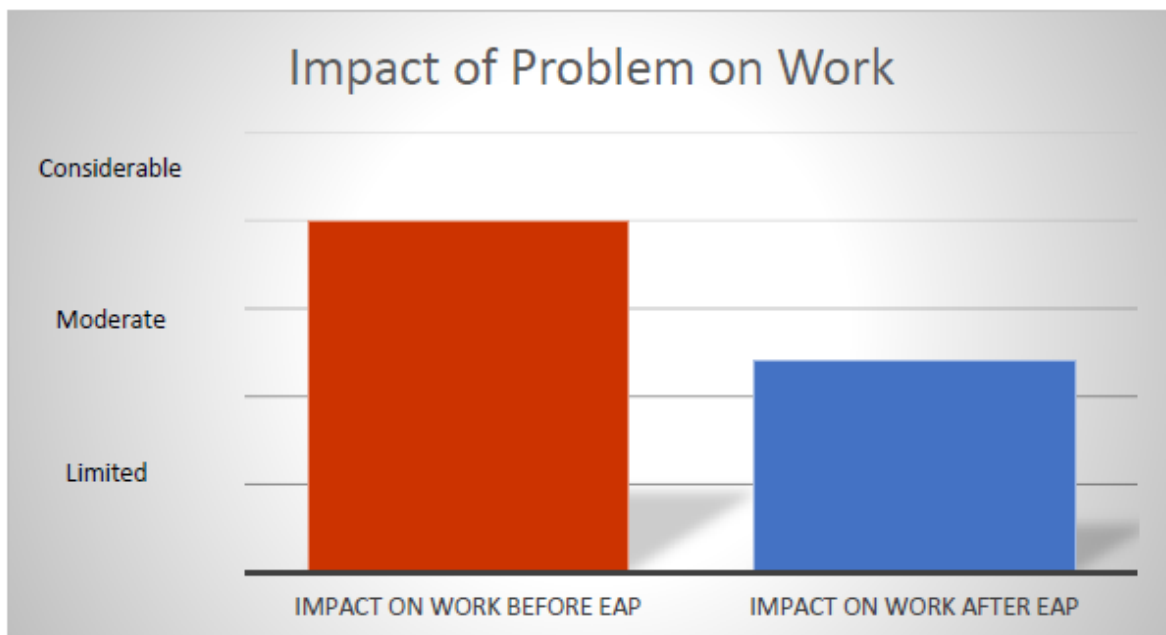
- Continue development and expansion of EAPFirst program, including providing PTSD prevention training to Vermont’s first responders
- Expand access to BSI and EAP to more employees throughout Vermont, especially through our partnership with Blue Cross Blue Shield of Vermont
- Expand current work with the Vermont Office of Child Support
- Build on success of Jobs for Independence (JFI) Program

Results

- Provided 1:1 EAP counseling services to over 4,400 individuals
- Provided critical incident stress debriefing to 578 individuals following traumatic events; most of these involved police, fire and rescue personnel
- Provided approximately 500 management consultations regarding performance, mental health, and workplace safety concerns
- Provided supervisor and management training to 629 individuals
- Provided wellness workshops to 735 employees

The graphs on the following page represent the effects of EAP on employee stress levels and the impact of the presenting problem on work. The graphs represent the self-reported experience of employees, prior to EAP services and two months after EAP services:

Division of Vocational Rehabilitation – Employee Assistance Program



Division of Vocational Rehabilitation – Jobs for Independence

Program Overview

Vermont secured a multi-year research grant to explore the impact of “enhanced” employment services for SNAP-Eligible Able-Bodied Adults Without Dependents (ABAWDS). The target populations for this project were intentionally those people who are the hardest to serve in our communities:

- Individuals with substance use disorders
- Vermonters with mental health concerns
- Homeless and housing insecure individuals
- Ex-Offenders

The Jobs for Independence (JFI) program is a demonstration project administered by the Department for Children and Families (DCF) Economic Services Division (ESD). The goal of the program is to test innovative approaches that will reduce dependence on SNAP (3Squares Vermont). DCF/ESD contracts with the Division of Vocational Rehabilitation (DVR) to:

- 1) Provide clinical assessments through Employee Assistance Program (EAP) staff to identify barriers to employment that confront SNAP recipients; and
- 2) Connect SNAP recipients to treatment and resources, including employment services through DVR and the Vermont Association for Business Industry and Rehabilitation (VABIR), to reduce barriers to employment and help recipients obtain employment.

Staff and Partners

Each DVR district office has one dedicated Vocational Counselor to serve the JFI program participants in that district. EAP supports the project with 7.5 positions, and VABIR supports the project with 7 staff.

Recent Developments and Accomplishments

Regional teams have been meeting over the past year to support the participants in the JFI study. These teams have developed strong working relationships to support participants in overcoming complex barriers. Teams include staff from:

- Vermont Department for Children and Families, Economic Services Division
- Vermont Department of Labor (DOL)
- Community College of Vermont
- Local Community Action Programs across the State

Division of Vocational Rehabilitation – Jobs for Independence

A second major accomplishment is that DVR supported DCF/ESD to rework the SNAP Employment and Training program, using the JFI study implementation as a template for services. This plan has been approved by the UNited States Department of Agriculture, the federal SNAP administration. DCF, DVR, VABIR, and DOL are now partnering to implement a new program called Individual Career Advancement Network (ICAN).

Future Directions

As the Jobs for Independence study closes, focus is shifting to implementing the ICAN program. This program will utilize the teaming and work flow practices that were developed during the JFI study. ICAN will continue to work on strengthening the delivery of services so that participants can overcome their barriers to employment and will continue to support participants with significant barriers to employment. The needs of this population are so deep and challenging that coordinated services and support are essential. ICAN will ensure that the teaming and coordinated effort that help individuals on 3Squares move to employment, will continue.

Results

Over the course of the study, over 3,000 participants have enrolled in JFI. Half (1,500) have been assigned to the treatment group and 82% of the treatment group participants attended their first EAP appointment. Over 9,000 referrals to community resource organizations and employment programs have been made.

This includes services supporting:

- Education and training
- Substance abuse and mental health treatment
- Housing and transportation
- Primary care and disease management
- Work search and employment supports

These supports, and services have helped participants attain over 700 jobs, including the following examples:

Sally C. (pseudonym) has been with DVR for many years. She has battled alcoholism since she was very young. She lost her son to DCF in 2003, and then five years ago she got a DUI, lost her license and got into legal trouble. Since starting with the JFI program, Sally has remained sober with help from a

Division of Vocational Rehabilitation – Jobs for Independence

supportive sponsor and AA. This summer Sally completed CRASH, obtained her permit, purchased a car, and plans to obtain her driver's license soon. Sally was interviewed and hired at a local retirement home after participating in a work experience arranged by DVR and VABIR.

Tom D. (pseudonym) was released from prison after a conviction on drug charges and consented to be part of the JFI program. He had no work history prior to going to prison. Tom partnered with EAP/DVR and VABIR. He was able to join a small construction crew and find housing after completing his furlough with the Department of Corrections. Tom began saving money to purchase a truck with the help of the local community action financial literacy program. He has successfully closed his 3Squares benefit and is now beginning to work with the micro-business program to build his own construction business.

Division of Vocational Rehabilitation – Linking Learning to Careers

Program Overview

Linking Learning to Careers (LLC) is an exciting opportunity for Vermont high school students with disabilities to improve career and college readiness. This 5-year (2016-2021) statewide initiative will build on effective career exploration and employment services already provided to students and engage them in additional enhanced services to help them successfully transition from high school into adulthood. Enhanced services include college and career exploration opportunities, work-based learning experiences, and assistive technology supports. Each student will develop a LLC Plan that reflects their aspirations and experiences and guides informed choices about their future.

Staff and Partners

LLC Staff & State of Vermont Partners	Non-State of Vermont Partners
LLC Career Consultants (11)	Community College of Vermont
LLC Assistive Technology Specialists (2)	Vermont Association of Business, Industry and Rehabilitation (VABIR)
LLC Director and Assistant Director	Vermont High Schools, Career and Technical Education Centers
DVR Transition Counselors	Mathematica Policy Research (research evaluator)
Vermont Agency of Education (AOE)	TransCen, Inc. (technical assistance provider)

Recent Developments and Accomplishments

LLC enrollment closed at the end of November 2018 with over 700 total students enrolled in the program. Enhanced services continued in 2018 after a year full of planning, staffing, training, contracting, promoting, outreach, and partner development. 2018 milestones and accomplishments include:

- Fully staffing and training the LLC positions including Career Consultants, Assistive Technology Specialists and LLC Youth Employment Specialists;
- Facilitating a statewide Enrollment and Implementation Week in October 2018 with our national partners on-site to work with district youth teams;
- Providing monthly professional development and training days for LLC staff and partners to define best practice and explore long term strategy;

Division of Vocational Rehabilitation – Linking Learning to Careers

- Conducting quarterly fidelity monitoring (including two on-site visits) with TransCen to identify technical assistance and training needs;
- Strengthening the collaboration with school and community partners to ensure that LLC staff and others in students' lives coordinate effectively;
- Creating and disseminating the first in a series of 'Issue Briefs' that describes the LLC design, services and outcomes in a professionally designed format;
- Developing data and reporting tools and schedules to provide counselors, partners and the project management team timely evaluation support.

Future Directions

Service provision gained momentum in 2018 as more students came onboard during open enrollment. With the end of recruitment (November 30, 2018), LLC staff now focus their efforts on providing enhanced services to LLC participants. Building on data collection and integrity standards developed over the past year, we look forward to increased formative evaluation analysis and technical guidance by Mathematica and TransCen. With this information, we will continue to make on-the-fly adjustments to service delivery, work more efficiently with students, collaborate with schools, improve post-secondary and work-based learning opportunities, and produce reports highlighting LLC impact.

Results

Over 700 Vermont high school students are enrolled in the LLC program. Enhanced services will continue to be provided to over 350 students until the program ends in the fall of 2021. Thus far, over 60 LLC enhanced services participants have been referred to an LLC Assistive Technology Specialist, over 60 have had a work-based learning experience, and over 30 have taken a dual enrollment or other post-secondary course.

LLC will also participate in a 5-year rigorous evaluation study supported by Mathematica Policy Research. The results of the evaluation will provide qualitative and quantitative evidence of the impacts of LLC services on students' early career outcomes including paid competitive employment, postsecondary school enrollment, and improved confidence to achieve career goals. This information will assist the Transition program staff by providing evidence of LLC's effectiveness along with potential replicability in other states.

Division of Vocational Rehabilitation – Mature Worker Program

Program Overview

The Mature Worker Program has two major areas of responsibility:

- 1) The first major area is managing the US Department of Labor-funded Senior Community Service Employment Program (SCSEP), a community service and work-based job training program for older Americans. Authorized by the Older Americans Act, SCSEP provides training for low-income, unemployed seniors. SCSEP participants gain work experience in a variety of community service activities at non-profit and public facilities, including schools, hospitals, day-care centers, and senior centers. Participants work an average of 20 hours a week and are paid the highest of federal, state or local minimum wages. The training serves as a bridge to unsubsidized employment opportunities for participants, who must be at least 55, unemployed, and have a family income of no more than 125% of the federal poverty level. Enrollment priority is given to veterans and qualified spouses, then to individuals who are over 65, have a disability, have low literacy skills or limited English proficiency, reside in a rural area, are homeless or at risk of homelessness, have low employment prospects, or have failed to find employment after using services through the American Job Center system. (source: <https://www.doleta.gov/seniors/>).
- 2) The second major area involves advocating for hiring and retaining mature workers. One activity that promotes this goal is the Governor’s Award for Business Excellence in Supporting Mature Workers. Each year, DAIL co-sponsors this award, recognizing businesses that embrace practices that are effective in hiring and retaining mature workers:
 - Recruitment and Retention Policies
 - Work Schedule Flexibility and Accommodations
 - Training and Skill Development Opportunities
 - Retirement and Retirement Planning

Other activities include promoting a multi-generational approach to Vermont’s economy and economic development.

Staff and Partners

Multiple DAIL staff support and promote activities for the State’s mature population. DVR’s Mature Worker Program Coordinator is responsible for managing the SCSEP and establishing partnerships with multiple partners, including:

- Agency of Commerce and Community Development (ACCD)
- Vermont Department of Labor (VDOL)
- Higher Education (Vermont State Colleges and University of Vermont)
- AARP

Division of Vocational Rehabilitation – Mature Worker Program

- State’s Society for Human Resource Management (SHRM)
- Vermont Associates for Training and Development (VATD)
- Business Community
- Business Associations

Recent Developments and Accomplishments

The second annual presentation of the Governor’s Award for Business Excellence in Supporting Mature Workers took place in September 2018 at the Society for Human Resource Management (SHRM) fall conference. Three employers received awards, presented by Governor Phil Scott:

- Gardener’s Supply
- Vermont Food Bank
- Clara Martin Center

Future Directions

- The Mature Worker Program Coordinator position has been upgraded from part-time to full-time to support increased focus on serving the employment needs of this population
- DAIL will continue to manage the SCSEP during Program Year 2018
- DAIL will again administer the Governor’s Award for Business Excellence in Supporting Mature Workers
- Existing partnerships will be supported and enhanced, and new ones developed
- Special efforts will be made to engage, educate and learn from the business community
- Grant opportunities will be identified, prioritized and pursued
- Increased training and support to VR Counselors and Employment Consultants on strategies to effectively serve mature workers

Results

The State’s SCSEP grantee, Vermont Associates for Training and Development (VATD), performed at a very high level for Program Year 2017 (July 2017 – June 2018). VATD achieved an aggregate of 103.9% of the required program outcomes. Performance outcomes for the first quarter of Program Year 2018 (July 2018 – June 2019) are not yet available. However, VATD served 32 Vermonters, and had an exit to jobs rate of 100% (without exclusions).

Division of Vocational Rehabilitation – Office of Child Support

Program Overview

Many individuals with a child support order face employment barriers. These are often disabilities that prevent them from meeting their support obligations. Through the Work4Kids program, EAP counselors meet with individuals to assess these barriers. EAP connects them to resources and treatment that reduce their barriers to employment and provide emotional and motivational support. EAP counselors then work with DVR and Vermont Association of Business, Industry and Rehabilitation (VABIR) partners to help them secure suitable employment.

Staff and Partners

A designated EAP Counselor, DVR Counselor and VABIR Employment Consultant in each of the 12 district offices, provide support to individuals participating in Work4Kids. VABIR staff provide important access to private sector employers throughout the state.

Recent Developments and Accomplishments

DVR partners with the Office of Child Support (OCS) in addressing non-payment of child support. The people served by the program have increased their child support payments between five and seven-fold. The success of the Work4Kids project was instrumental in developing the Jobs for Independence study.

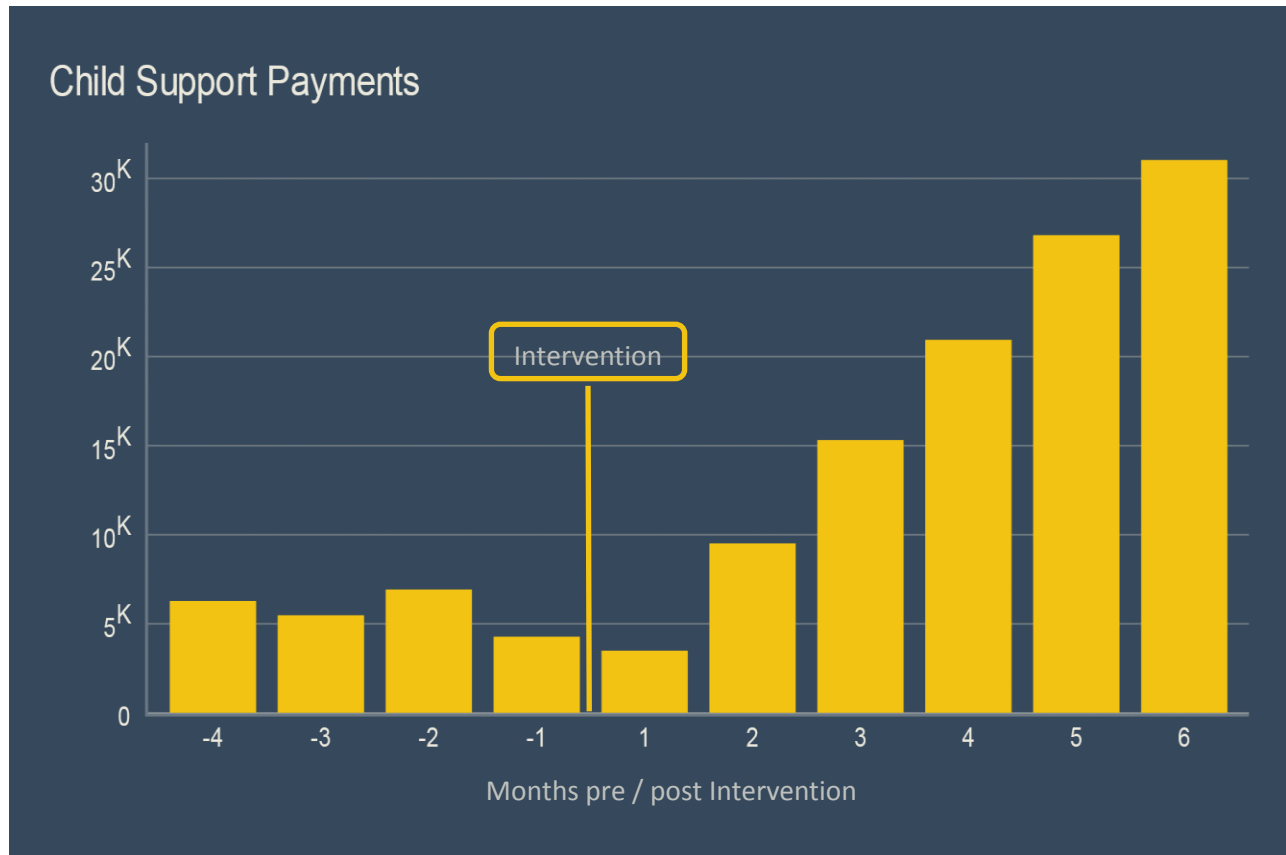
Future Directions

Work4Kids currently focuses on individuals who are already out of compliance with making their child support payments. The Office of Child Support has an interest in expanding the reach of Work4kids to include those who are at risk of not meeting future child support payment obligations.

Division of Vocational Rehabilitation – Office of Child Support

Results

When comparing child support payments by Work4Kids participants in the month prior to referral to payments made six months after referral, there is a seven-fold increase.



Success Story:

Karl (pseudonym) was referred to the Work4Kids program. He came to the assessment reluctant to trust program staff. He had been in and out of homeless shelters, often living in a tent.

Karl made a connection with an EAP counselor, and his trust gradually increased. He came to understand that his challenges included physical limitations from years of manual labor, which he could no longer do, as well as emotional challenges from PTSD, depression and anxiety.

Karl connected with appropriate treatment. EAP, VR and VABIR staff helped him find stable housing, as well as a job that fits his interests and abilities.