

Senate Health and Welfare Testimony
April 7, 2020
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Vermont Developmental Services Response to COVID-19

How have Agencies changed services relative to COVID-19?:

- Agencies are working collaboratively to share plans, strategies and approaches to respond to the pandemic.
- Agency-wide COVID-19 Task Forces are meeting daily across the system
- Went to 99% remote, virtual activities,
- Looked at accountability, assessed how to make sure staff are checking in
- Created back-up plans for homes and worst-case scenarios (Ordering cots, setting up alternative residential options).
- Nurses and Psychiatrist are working remotely.
- Identified higher risk folks/homes – behavior or medical, making sure they get what they need
- reaching out to people who don't have internet,
- cross training, redeploying staff, ie: group homes, getting ready to staff mental health homes with DS staff, redeploying staff across entire agencies,
- gathering PPE (privately, making and through state),
- developing safety and communication protocols.
- How we educate and sharing information (make sure its language accessible), changing policies and describe what's going on,
- how we provide crisis response.
- Developed safety kits. Making and distributing PPE to SLPS, staff and people in services.
- having staff meetings and town halls with SLPS and families,
- Self-advocates are meeting remotely,

What's working well:

- DAIL is providing excellent support and communication. Allowing for maximum flexibility in regulations to allow us to do what needs to be done. Stopped finance reform, committed to paying agencies, allowed us to keep our staff stable. Provided flexibility in housing options, sharing background screenings and inspections.
- Agencies have created separate COVID19 crisis team
- Remote is working well...it's going well
- Agencies have creative approaches to services and while we've all been impressed by our staff and Shared Living Provider's dedication. We knew staff were amazing, but the level of commitment has been wonderful. We hear "if something happens, they are staying here"
- Postsecondary programs are going well – Global Campus, College Steps. Think College is reaching out to students
- Of note, it's a wonderful that Vermont doesn't have congregate settings

What are the challenges?

- Isolation....people in services don't know always understand why they can't go out and some are having a very hard time. This puts pressure on Shared Living Providers, direct staff
- Remote doesn't work for everyone; some staff are struggling to work this way based on their home life, access to internet or work style. And, many are very stressed.
- All the agencies are challenged by making sure we're connecting to everyone we serve. Developing plans to make this happen – but sometimes there are misses, which is hard on people.
- Our staff are under tremendous stress. We are supporting our staff in the way they need to be supported (additional funding) to keep them online, with the hope that money goes through
- PPE has been a challenge – some of it is coming through now, many of us have ordered it online when we can or made it ourselves.
- Agencies provide special care procedures (feeding tubes, nebulizers, enema, diabetes, etc), like nursing homes, and are trying to keep people in their homes with limited PPE and limited/redeployed staff
- Our population is not always “seen” as long term care, so we're had some problems having our staff tested when needed.
- There is just a lot of worry for our staff – they have never worked under these circumstances. Some staff are afraid to work, others are unwilling, especially as it gets closer.
- June Grads – all the people who had jobs don't have them anymore. Schools may not necessarily take them in, or extend school programs
- Staffing emergency beds when people are C19+, especially when they can be paid \$35-\$40/hour elsewhere
- Communication can be challenging, not everyone has email and snail mail is too slow. Service Coordinators are calling families weekly and sometimes daily.

Financial Risk:

- We are looking for support from the state to fund the need for “hazard”, “hero” or “incentive” pay to SLP and direct line staff, and some respite staff. Agencies need to pay Shared Living Providers monthly incentives, direct staff time and half right now (double-time when responding to COVID-19) and support to those who *can* use respite
- PPE is expensive
- Providing services, we don't have funding for- overstaffing group home (training) for special care services
- Staffing homes that wouldn't have been staffed before
- Computers – some agencies are using one-time for tablets/computers for people in services
- DocuSign, Zoom, and other platforms come with additional expenses.

A few anecdotes about the amazing work being done:

- Video chatting – playing music, full personal care, ZOOM birthday party, card games, food shopping for a couple people, checking in with staff daily, generally keeping their schedule (except when asked not to), keeping businesses going (Microbusinesses), resource list, virtual woodworking project, karaoke at home, snail mailing art projects, photography session is remote, Advocacy is meeting remotely.
- People are making masks – volunteers, staff, families

- Community event Facebook page
- Resources
- Zoom Rock and Roll Dance
- Special Olympics Pajama party
- Zoom scavenger hunt
- Meeting colleague's animals and children via teleconference
- Virtual baby shower
- Virtual lunches
- Coffee break
- Well ness walks
- Offering to help if C19+